



MORAVIAN
SEMINARY

Master of Arts in Clinical Counseling
Student Handbook

2019 - 2020

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PART I: MACC PROGRAM

Introduction

Welcome

Welcome to the community of Moravian Seminary and the Moravian Seminary Master of Arts in Clinical Counseling (MACC) Program. This program began in the 1980s when the Seminary began offering a Master of Arts in Pastoral Counseling in addition to its Master of Divinity degree and a Master of Arts in Theological Studies. The founders of the Pastoral Counseling program worked to weave the important aspects of spirituality and theological reflection into clinical counseling. In 2014, Faculty and trustees voted to change the name of the program to Master of Arts in Clinical Counseling to reflect the robust clinical counseling curriculum while continuing its unique strength in holistic spiritual and theological integration. Today it is a vibrant program with adult students of all ages and backgrounds learning together as they develop the knowledge, skills, and being required when serving with an integrated and holistic approach.

Institutional Mission Statement

Moravian College's liberal arts education prepares each individual for a reflective life, fulfilling careers, and transformative leadership in a world of change.

Seminary Mission Statement

Moravian Theological Seminary offers graduate and continuing education programs that equip persons with the knowledge, skills, and being to engage in vocations in ministry, chaplaincy, counseling, spiritual direction and other settings. Rooted in the Moravian heritage of ecumenism and service, we welcome students preparing to serve in diverse socioeconomic, intercultural, and interfaith contexts.

Seminary Core Values

Moravian Theological Seminary upholds these values:

- cultivating community among faculty, students, and staff;
- excellence in teaching, scholarship, leadership, and service;
- hospitality and open and affirming engagement with diverse people and cultures;
- continual inquiry and reflection;
- lifelong spiritual, vocational, and personal growth;
- nurturing each person's unique best self, including personal faith tradition;
- integrity in our work;
- faithful advocacy for justice in local, national, and global contexts;

- openness to God’s calling to new directions and stewardship of life and faith;
- commitment to the call to serve God and humanity by bearing witness to the Gospel of Jesus Christ;
- serving as a resource in support of the ministries of the worldwide Moravian Church.

Accreditation

As a part of the corporate institution called MORAVIAN COLLEGE, comprising both a liberal arts college and the theological seminary, the Seminary is also accredited by the Commission on Institutions of Higher Education and the Middle States Association of Colleges and Secondary Schools.

Moravian Theological Seminary is accredited by the Commission on Accrediting of the Association of Theological Schools in the United States and Canada. The following degree programs are approved: Master of Divinity, Master of Arts in Chaplaincy, Master of Arts in Clinical Counseling, Master of Arts in Theological Studies. In 2018, accreditation was reaffirmed through 2028.

Curriculum and Program Design

Overview of Master of Arts in Clinical Counseling

The Master of Arts in Clinical Counseling Program (MACC) combines clinical excellence with an understanding of the spiritual and theological dimensions of individuals and families in an intercultural, multi-religious context. Clinical counselors are counseling professionals whose preparation includes in-depth academic and clinical training combined with study of biblical tradition, theological reflection, and spiritual formation. The MACC degree is for those who want to integrate an inclusive holistic perspective in their counseling work that allows them to work with issues of mind, body, and spirit.

The 60-credit MACC program meets the nine educational requirements outlined in Chapter 49: State Board of Social Workers, Marriage and Family Therapists and Professional Counselors—Licensure of Professional Counselors (§ 49.2). Students wishing to pursue certification in addictions counseling should consult with their advisor on electives that will meet requirements for CADC and CAADC.

Graduates seeking to become Licensed Professional Counselors (LPC) in Pennsylvania must pass an approved exam and complete 3000 additional hours of supervised clinical experience, half of which must be under the supervision of an experienced LPC, as per Act 76 of 2018 (Senate Bill 530). Students who plan to practice counseling outside of Pennsylvania after

graduating are responsible for understanding the licensing standards of the particular state in which they hope to practice. For more information, visit the website for the [State Board of Social Workers, Marriage and Family Therapists, and Licensed Professional Counselors](#).

Dual Degree Programs

The MACC program may also be taken as a Dual Degree program, either as an MACC/MDiv Dual Degree which combines two Moravian Seminary Degrees, the Master of Arts in Clinical Counseling and the Master of Divinity degree. Or as a Dual Degree of MACC/MSW, a program in partnership with Marywood University's Master of Social Work Degree.

- ***MACC & Master of Divinity (MDiv)***

The MDiv-MACC program prepares students for leadership positions providing spiritual and emotional support in church and community settings. This program meets the nine educational requirements outlined in Chapter 49: State Board of Social Workers, Marriage and Family Therapists and Professional Counselors—Licensure of Professional Counselors (§ 49.2). The MACC/MDiv dual degree requires 116 credits. Overlapping requirements allow students to complete the MACC/MDiv dual degree in 4 years of full-time study including three summer terms, as compared with 5 years if the degrees were completed separately.

- ***MACC & Master of Social Work (MSW)***

Since 2003 Moravian Seminary has held a cooperative agreement with Marywood University School of Social Work (Scranton, PA) to offer a dual degree program in both Clinical Counseling and Social Work. The MACC/MSW program is ideal for students who seek to integrate a spiritual and theological understanding into their practice of counseling, seek to employ the skills of social work in the clinical setting, or are interested in administrative positions in a social service/mental health organizations. This program meets the nine educational requirements outlined in Chapter 49: State Board of Social Workers, Marriage and Family Therapists and Professional Counselors—Licensure of Professional Counselors (§ 49.2).

The MACC/MSW program requires a total of 90 credits, which can be accomplished in three years of full-time study, as compared with 4 years if the degrees were completed separately.

MACC Program Learning Outcomes

The following is a list of learning outcomes for the Master of Arts in Clinical Counseling Degree at Moravian Theological Seminary. This list is used to evaluate the student's performance in academic courses. In order to create a uniform assessment of the student's progress toward the

outcomes in all aspects of their program, reference to this list will be made both in the student's learning agreement and in the end-of-semester student evaluations.

- **Professional Identity:** Articulate and demonstrate one's counseling identity and demonstrate appropriate professional behavior; demonstrate and utilize ACA Ethical Code (2014); utilize theological reflection and spiritual formation to enrich understanding of personal identity and case conceptualization.
- **Human Growth and Faith Development:** Demonstrate knowledge and understanding of the biological, moral, faith, familial, and societal bases of human development and behavior throughout the lifespan.
- **Helping Relationships:** Understand foundational frameworks for counseling and interviewing processes in an intercultural society; develop counselor self-awareness and basic listening/attending skills needed to form and sustain effective counseling relationships; learn methods and processes of theological and spiritual integration within the counseling process.
- **Research Design and Methodology:** Demonstrate knowledge of scientific methods commonly used by counselor practitioners in clinical work, including knowledge of application of evidence-based scholarship to evaluate psychospiritual clinical practices, interventions, and programs.
- **Social and Cultural Foundations:** Demonstrate knowledge, self-awareness, and skills in working with community members representing various cultural, interfaith, and personal backgrounds; learn to ethically apply intercultural assessment models.
- **Clinical Appraisal:** Demonstrate knowledge of theories and classification systems and relevant measures of psychological and psychospiritual pathology, including but not limited to, biological and sociocultural theories as applied to case formulation, diagnosis, and treatment planning.
- **Counseling Theory:** Demonstrate knowledge of evidence-based theories and practices of counseling by articulating therapeutic orientations and applying selective interventions for different clinical issues and social locations.
- **Group Theory and Practice:** Understand the history, principles and theories of group counseling and therapy. Demonstrate an ability to identify group dynamics and apply various models of group counseling, as they relate to issues of psychoeducation,

interpersonal communication, problem-solving, ethical decision-making, and psychospiritual integration.

- **Career and Lifestyle Development:** Understand the history, principles and theories of career counseling. Demonstrate an ability to apply various models of career counseling as they relate to assessment, developmental perspectives, cultural and spiritual considerations in vocational planning.

MACC Curriculum

The MACC core course requirements are the foundation of the MACC program's unique emphasis on psychospiritual integration in the clinical counseling context. These courses are designed to help students develop a holistic approach to clinical counseling. They introduce students to the process of psychospiritual assessment, spiritual formation, thinking theologically, and critically examining sacred texts and stories. Many of these core courses are also required in other degree programs and thus foster relationships with students in other degree programs and expose counseling students to different ways of thinking and believing. The Seminary engages students from a wide variety of faith/religious and non-faith backgrounds (e.g., Buddhist, Muslim, Christian, Jewish, Unitarian, and others).

- **Clinical Courses:** 41 credit hours (*includes Group Theory & Practice, Clinical Appraisal, Systems Theory, Human Growth & Faith Development, Counseling Theory, Social & Cultural Foundations, Professional Orientation: Ethics & Counseling, Career & Lifestyle Development, Research Design & Methodology, Helping Relationships, and Practicum/Internship*)
- **Electives:** 6 credit hours (*includes electives in Addictions; Chronic Illness, Disability, Death, and Loss; Individual Spiritual Direction; Prayer; Discernment; Psychopharmacology, Counseling Children and Adolescents; Human Sexuality; and Marital and Family Counseling*)
- **Theological Disciplines:** 13 credit hours (*includes World Religions or Religion in the American Context; Biblical Studies for MACC; Intro to Spiritual Formation; Christian Ethics or Intro to Christian Theology; and Learning in Community*)

Advising

Students receive a faculty advisor who assists with academic and professional matters. Students also are assigned a registration advisor who assists with the online registration process and reviews progress through programs. The Clinical Director works with all students in the program in making practicum and internship site selections (see Part II).

Academic Standing

Students in the MACC program must earn a C or above in all required courses in the program to remain in the program. If a student earns a grade of C- or below in a required course, the student may repeat the course no more than one time. When a required course is repeated, the original course and grade remain on the transcript. If the required course (or its equivalent) is taken and the grade meets the criteria above (or the criteria for transfer of credit) only the grade of the new course will be factored into the student's GPA. Typically, if the student earns a grade below C the second time taking the required course, the student is terminated from the program.

If a student earns an F or NC (No Credit) in an elective, the student may repeat the course no more than one time. When an elective is repeated, the original course and grade remain on the transcript. If the elective is repeated, only the grade of the new course will be factored into the student's GPA.

Policies & Procedures for the MACC Program

Overview

As part of the larger institution of Moravian College, the MACC program at Moravian Theological Seminary is subject to the College's policies and procedures, which can be found on the [College policies](#) page and the [institutional policies](#) page. Academic policies for the program and the Seminary are found in the [Seminary Student Handbook](#).

All students remain subject to all academic standards established by Moravian Theological Seminary and the MACC program as well as to all policies, regulations, and laws applicable to all Moravian College students, including but not limited to the College's Code of Student Conduct and Academic Code of Conduct.

Code of Conduct

It is the responsibility of all students of Moravian College and Moravian Theological Seminary to know the information included in the [Student Code of Conduct](#). The Code is reviewed and updated annually and as necessary to ensure compliance with the law and adherence to the values of the College.

Academic Integrity

Academic integrity is the foundation on which learning at Moravian College and Moravian Theological Seminary is built. Students are expected to perform their academic work honestly and fairly. In addition, students should neither hinder nor unfairly assist the efforts of other

students to complete their work successfully. Institutional expectations and the consequences of failure to meet those expectations are outlined in the [Moravian College Student Handbook](#).

American Counseling Association (ACA) Code of Ethics

The MACC Program endorses and complies with the [ethical standards of the American Counseling Association](#). These standards describe the professional and ethical behavior expected of students both in the classroom and in the clinical-placement sequence of the MACC program. In addition to meeting academic standards, Moravian Seminary expects all students to maintain standards of conduct appropriate to the professions of ministry, counseling, chaplaincy, and other ministries for which they are preparing. Adherence to these standards is a requirement for admission to and continuance of the clinical-placement sequence of the MACC Program. Students are also required to familiarize themselves with these ethical standards and with the laws and court precedents concerning the [professional practice of counseling in the Commonwealth of Pennsylvania](#).

Students who are interested in pursuing practicum and internships in states surrounding Pennsylvania or who plan to practice Counseling outside of Pennsylvania after graduating should become familiar with the current laws and regulations concerning clinical counseling of the particular state in which they hope to practice.

Professionalism

A high level of professionalism is expected of all MACC Students. Of particular importance is a student's overall sensitivity, confidentiality, and professional attitude and behavior. This includes, but is not limited to, the following:

- An ability and willingness to acquire and integrate professional standards into one's repertoire of professional and academic classroom behavior;
- An ability to acquire professional skills and reach an accepted level of competency;
- An ability to control personal stress, psychological dysfunction, or emotional reactions either/both in clinical placement or in the academic setting
- An ability to understand and operate within the bounds of the current level of professional competence

Any faculty member or any other person supervising or evaluating any aspect of a student in the MACC program who has concerns about a student's behavior (as detailed in the Moravian College and Seminary policies and the ACA Code of Ethics) will follow the procedure detailed in Appendix L of this handbook.

Nondiscrimination Policy

Moravian College is a welcoming community that embraces and values the diversity of all members of the campus community. We accept the uniqueness of all individuals, and we cultivate an environment that respects, affirms, and defends the dignity of each member of our community.

Moravian College does not discriminate against any person based on actual or perceived race, color, sex, religion, ancestry, genetic information, national origin, sexual orientation, gender identity or expression, familial status, marital status, age, veteran status, mental or physical disability, use of guide or support animals and/or mechanical aids, or any other basis protected by applicable federal, state, or local laws.

Title IX Statement

Moravian College faculty are committed to providing a learning environment free from gender discrimination and sexual violence. Should a student disclose a concern of this nature, the faculty member is obligated to inform the Title IX Coordinator, who will assist the student in determining resources for support and resolution. Fully confidential reporting options include the Counseling Center, Health Center, and Religious Life (chaplain). Survivors are encouraged to seek immediate assistance by contacting the Advocates at (484) 764-9242. For more information, please visit www.moravian.edu/titleix.

Grievance Procedures

All members of the community should feel safe to bring forward complaints of violations of any College policy. Depending on the identities (faculty, staff, student, or visitor) of the involved parties and the nature of the reported incident, one or more of the College's grievance procedures may be invoked to respond. Information about these processes can be found using the links below. If you are unsure how to make a report, Campus Police will be able to direct you to the proper department. If you prefer a confidential resource, the Counseling Center will also be able to refer you to the appropriate department.

Student Services

Links to information about student services, such as Accessibility Support Center, IT, and Reeves Library, can be found on the [Moravian College Student Handbook](#) site and on [AMOS](#).

PART II: MACC PROGRAM CLINICAL PLACEMENT

Introduction

The clinical placement of the Master of Arts in Clinical Counseling program is an important component of the 60-credit Clinical Counseling degree. The three-semester clinical-placement sequence (Practicum, Internship 1, and Internship 2) meets the clinical and teaching standards required of counselors in training. As a spiritually-integrative program, the clinical-placement sequence facilitates personal and professional growth and development in clinical excellence, with an understanding of the spiritual and theological dimensions of individuals and families in an intercultural, multi-religious context.

Philosophy and Objectives of Clinical Placement

Consistent with its philosophy that professional education rests upon integration of theory and practice, the MACC program provides concurrent class instruction and clinical placement during the final year of the graduate program. The overall objective of the clinical placement is to enable the student to augment and integrate classroom learning into counseling services within a social agency or clinical counseling setting. Through this experience, the student will:

- Develop awareness of the relationship between the agency and the social, political, cultural, and spiritual contexts of practice.
- Demonstrate understanding of the role of clinical values and ethics in practice.
- Develop and hone professional knowledge and skills used in clinical counseling, including beginning and advanced counseling skills, integration of counseling theory with practice, self-awareness, therapeutic use of self, and an ability to create an inclusive presence attending to mind, body, and spirit.
- Effectively integrate classroom content into the clinical placement.
- Develop an understanding of the process through which an agency changes and develops in response to changes in the community it serves.
- Demonstrate responsible interaction with professional counselors and/or with practitioners from other disciplines.
- Use clinical supervision in a manner that enhances professional development.

The Master of Arts in Clinical Counseling Program at Moravian Seminary has as its goal the integration of spiritual and theological understandings of humanity with the practice of counseling and psychotherapy in a graduate education program. The MACC Program views class work and clinical placement as mutually supportive and complementary. In line with the program's belief that the clinical placement relates to and supports all parts of the curriculum, the clinical-placement agency is called upon to provide an educational setting in which the student

has the broadest possible exposure to all aspects of social agency functioning in addition to direct practice experiences.

The objective of clinical placement is for students to develop working relationships in local counseling agencies so that the vitality and unique values of the clinical placement can enrich, illuminate, and complement the more theoretical classroom learning. Scope, depth, and breadth of learning increases throughout the program so that, at the end, the student will have reached a point of competence for practice at the Master's level. It is in the context of this total objective that this manual addresses the specific requirements for the Clinical Placement experience.

Prerequisite Courses for Clinical Placement

Prior to entering the clinical-placement sequence, students must achieve a C or higher in five required courses that introduce and develop the counseling skills and professional identity necessary for clinical work. These prerequisite courses include:

- SEPC702 Helping Relationships
- SEPC710 Group Theory and Practice
- SEPC720 Clinical Appraisal
- SEPC760 Counseling Theory
- SEPC920 Professional Orientation: Ethics & Counseling

After completing these prerequisite courses, students may enroll in SEPC612 Clinical Practicum and begin the three-semester clinical-placement sequence. Policies and procedures regarding the clinical-placement experience can be found in the “Policies Regarding Clinical Placements” section.

Clinical Sequence During the Clinical Placement

Students typically proceed together as a cohort throughout the three-semester clinical-placement sequence. During this three-semester clinical placement, students regularly participate in a variety of activities, assignments, and supervision modalities that deepen their understanding of and engagement with clients and the therapeutic relationship in a holistic, spiritually integrative manner. The clinical-placement sequence is as follows:

- SEPC612 Clinical Practicum (Summer)
- SEPC901 Clinical Internship 1 (Fall)
- SEPC810 Psychospiritual Integration 1 (Fall)
- SEPC902 Clinical Internship 2 (Spring)
- SEPC812 Psychospiritual Integration 2 (Spring)

Once a student begins the clinical placement with the accompanying clinical-placement courses, typically the student moves through in three consecutive semesters. If the need for remediation arises, a student may be asked to slow down their three-semester clinical-placement sequence or engage other remediation requirements. Issues requiring remediation may include, but are not limited to: academic or clinical-placement performance issues, adhering to professional values and ethics, or maintaining professional behavior.

Policies Regarding Clinical Placements

These policies draw on the policies of a variety of academic/educational programs, including but not limited to Lehigh University and Neumann University.

Required Clinical Course Enrollment During Clinical Placement

Throughout the clinical-placement year, during both the Clinical Practicum and Internship, the student must be enrolled in a Moravian Seminary Clinical Counseling course (prefix SEPC) that provides supervision and oversight. Students may continue accruing internship hours at their clinical-placement sites between the fall and spring Internship semesters as long as the Clinical Director and site supervisor continue to oversee the student's work. If a student withdraws from the clinical course that accompanies the Practicum/Internship, the student is required to withdraw from clinical placement. The student must send the Clinical Director a letter of withdrawal from clinical placement explaining their rationale for leaving. The student must submit this letter to the Clinical Director within a timeframe that allows the clinical placement supervisor to be notified and to allow for client closure, at least 10 days.

Policy on Incompletes During the Clinical Placement

[Moravian Seminary policy](#) regarding an Incomplete grade applies to all MACC students in clinical placement. An Incomplete grade for a course required in the clinical-placement sequence has unique implications. An incomplete may be applied due to a student's failure to complete the number of required clinical hours for a clinical semester. Failure to complete the required clinical hours must be reviewed with both the Clinical Director and the onsite supervisor. Once an agreed upon plan of action to complete the remaining hours has been approved by the Clinical Director, a request for the Incomplete will be completed and signed by the student, the course instructor, and the Clinical Director with specific information regarding the granting of the Incomplete and the details for removing this grade. If the Incomplete is approved, students with Incompletes in a clinical-placement course must be in touch with the Clinical Director weekly until they complete required hours. Once the Incomplete requirements are finished, including completing the required clinical hours and submitting the final signed timesheets to the Clinical Director, a grade will be submitted to the Seminary Registrar.

Clinical Placements and Work Settings

Clinical placements must offer students opportunities for new clinical learning. Only on rare occasions, with special clearance by the Clinical Director, may a student obtain a clinical placement in a setting in which he/she is currently employed. If an approval is given, different clinical responsibilities and a different supervisor from the student's employment role are required.

Audio/video Recording Requirement

Students are required to either audio or video record client sessions for case presentations during the clinical-placement sequence. Students must record at least one audio/video session for each semester of clinical placement. Written consent must be obtained from the client in order to record sessions (see Appendix G). In the rare event that this requirement is not possible at a clinical placement, the Clinical Director may approve an alternative clinical report. Supervisors at prospective clinical-placement sites are informed of this requirement and asked to make arrangements to allow such recording for learning purposes.

Student Retention of Documents

Students are to **keep their own copies** of all clinical-placement documents, particularly timesheets and Supervisor Evaluations. Students are required to post timesheets, learning agreements, and supervisor evaluations on the MACC Administration Canvas site.

Student Use of Social Media

Students who use social media must keep in mind how communications may be perceived by clients, faculty, and other counseling professionals. The ACA Code of Ethics (American Counseling Association, 2014), Section H.6 identifies specific issues related to Social Media, and MACC students are responsible for becoming familiar with this and all parts of the ACA Code of Ethics:

“H.6. Social Media

H.6.a. Virtual Professional Presence

In cases where counselors wish to maintain a professional and personal presence for social media use, separate professional and personal web pages and profiles are created to clearly distinguish between the two kinds of virtual presence.

H.6.b. Social Media as Part of Informed Consent

Counselors clearly explain to their clients, as part of the informed consent procedure, the benefits, limitations, and boundaries of the use of social media.

H.6.c. Client Virtual Presence

Counselors respect the privacy of their clients' presence on social media unless given consent to view such information.

H.6.d. Use of Public Social Media
Counselors take precautions to avoid disclosing confidential information through public social media.”

Students should become familiar with the sections of the Code that are particularly relevant to social media, which includes privacy and confidentiality, multiple relationships, and the section on therapy.

Clinical Placement Selection

Arranging a Clinical Placement

Identifying and choosing a clinical-placement site is the responsibility of each student, clarifying his/her own professional needs and future clinical goals. Decisions about clinical placements are made with input by the Clinical Director after assessing student goals/needs and identifying a Clinical placement that fits within the MACC program goals.

Practicum Placements are to be finalized prior to beginning the summer practicum clinical work. Internship clinical placements are typically confirmed by the conclusion of the Spring semester and must be confirmed by midsummer prior to the beginning of the Internship placement in fall.

Overall steps in moving into the clinical placement include:

- During the fall semester *SEPC702 Helping Relationship* course, the Clinical Director and course instructor will work with students on the basic orientation to and requirements of beginning clinical-placement work. Orientation to the clinical-placement manual as well as initial steps in acquiring a clinical placement will be reviewed.
- Students will complete a *Clinical Placement Request Form* in the semester prior to the clinical-placement year.
- Students will attend a clinical-placement information meeting held in prior to the clinical-placement year to learn about the clinical-placement process and timeline.
- Students will schedule a one-on-one meeting with the Clinical Director to discuss placement interests, future clinical goals, and to identify one to three possible sites for practicum and internship.

- The Clinical Director will provide information on sites students have used in the past and will offer suggestions to assist the student in identifying suitable clinical-placement options. The Clinical Director **will make ALL initial site contacts with known clinical-placement site supervisors**, clarifying program requirements/suitability of site/availability of practicum/internship openings. Once a site has confirmed an interest/availability for a clinical-placement student, the Clinical Director will give the contact information of the site supervisor to the students. Students will then follow up with placements to schedule interviews and send a resume.
 - If a student identifies a site not previously used by the program, the student should present this possibility to the Clinical Director at the time of their one-on-one meeting to allow a determination of suitability in terms of supervision, client population, and other Program requirements. The Clinical Director may have the student make an initial inquiry to the Placement site to identify Supervisor contact information and to determine whether MA-level Clinical Interns are accepted in the agency/counseling center. Once this information is gathered, the Clinical Director will follow up with the site Supervisor to clarify program requirements/suitability of site/availability of practicum/internship openings. If the site meets the program requirements, the Clinical Director will have the student follow up with placements to schedule an interview.
- Students will attend a Practicum/Internship Fair that takes place at the Seminary, providing students with the opportunity to meet with local prospective clinical-placement supervisors and giving Supervisors an opportunity to meet students and explain their Clinical Programs. Students are encouraged to share resumes with prospective Supervisors. Many clinical-placement interviews are arranged based on this Practicum/Intern Fair.
- Once a clinical-placement interview has occurred, the Clinical Director will follow up with the agency site and the student to discuss interview outcomes. When a Practicum/Internship site is mutually agreed upon (by Clinical director, student, and agency supervisor), the Clinical Director will send a Clinical Placement Confirmation Letter to all parties involved that outlines expectations and timelines.

Supervisor Requirements

Clinical placements must be in a setting that provides qualified supervision, which includes the opportunity to work with an agency supervisor who is a counseling professional, certified or licensed in their field, e.g. counselor, psychologist, social worker, psychiatrist, pastoral counselor, or Marriage and Family Therapist.

The Supervisor who is available to oversee the work of the student must have:

- a master's or doctoral degree in counseling, social work, or Marriage and Family Therapy or a related profession;
- license and/or certifications are current and in good standing;
- at least five years of relevant professional experience within the last ten years;
- an understanding of and agreement with the program's expectations, requirements, and evaluation procedures for students.

Before the placement site is confirmed, the supervisor will be made aware of program policies and asked to complete a Clinical Placement Data form (in Appendix C). The supervisor and student are required to maintain these policies throughout the course of the placement.

Change of Placement

On rare occasions, a student may find a placement site is not meeting their clinical learning needs and may consider changing placement before the completion of the semester(s). A student who has a concern about the clinical-placement site is required to take the following steps:

- Schedule an appointment with the Clinical Director to outline the concerns regarding the clinical placement.
- The Clinical Director will follow up with the site supervisor about concerns, clarifying concerns from the site supervisor's perspective.
- If needed, an onsite, in-person meeting between the student, the Clinical Director, and the site supervisor will be scheduled to address these concerns.
 - If possible, all parties will agree on steps needed to address the concerns and an agreement will be written by the Clinical Director and signed by all three parties.
 - The Clinical Director will initiate a follow-up with both the student and the Supervisor within one month of the initial meeting to determine if concerns are being adequately addressed. If all parties are satisfied, the Clinical placement will continue as arranged at this site.
 - If the student or the supervisor is not satisfied by the progress, adjustment to the agreement will be made and put into writing, or the process to find a new Clinical Placement site for the student will begin as outlined above.
 - If no agreement to address the concerns can be reached, and the student and

Clinical Director agree that a new placement is needed, the process to identify a new clinical Placement will begin as outlined above.

- If no agreement can be reached regarding how to address concerns and problematic behavior on the part of the student has been identified, then a remediation process with the student will begin, as outlined in Appendix L.

Documents

Learning agreements, evaluations, and other program documents are the responsibility of both the student and the on-site supervisor, with students needing to take the initiative for the timely completion of required documents.

Required Documentation Throughout Clinical Placement

Professional Liability Insurance

Each student is expected and required to have professional liability insurance coverage prior to beginning any clinical placement. Insurance can be obtained through the [American Counseling Association](#) with student membership. Another optional insurance carrier is [American Professional Agency](#). Certification of insurance coverage, including dates of coverage, must be submitted to the MACC Administration Canvas site and to the clinical-placement supervisor before the clinical-placement sequence begins.

Clearances and Background Checks

All students in the MACC program are required to obtain at least three background checks: FBI Fingerprint-Based background check, PA Child Abuse History Clearance, and PA Criminal Background check. Some clinical-placement sites may require additional medical clearances, such as TB testing. Depending on the results of the background clearance checks, agency policy may preclude a student from completing a placement in their site.

Students must secure these background checks prior to entering the clinical-placement sequence. All clearances are the financial responsibility of the student. These documents must be current and on file before a student may participate in a clinical placement or register for specific courses. Background checks are good for one year and must be current for the duration of the clinical placement. Students must upload the results of the background checks to the MACC Administration Canvas site and to submit clearances to clinical-placement site supervisors

Students who are not residents of Pennsylvania are also required to complete all 3 checks. Instructions for obtaining the required background checks are available on the MACC Administration Canvas site or in AMOS under Seminary Students > Academic Information.

After obtaining initial background clearance checks, students are required to notify the Clinical Director in the event of an arrest or conviction while completing the Practicum or Internship.

Affiliation Agreements

The Clinical Director can arrange for an Affiliation Agreement between Moravian Seminary and the counseling clinical-placement site upon request.

Required Clinical Placement Forms (included in Appendices and MACC Administration Canvas Course)

- **Personal Counseling Verification Form** (Appendix A): MACC students are required to fully participate in 5-8 sessions of personal (individual or group) counseling with a licensed professional counselor, psychologist, licensed pastoral counselor or Licensed Social Worker, or Licensed Marriage and Family Therapist prior to beginning Internship 1. Counseling sessions completed within one to two years prior to entering the MACC internship may possibly be considered. Students will be expected to secure their therapist's signed statement indicating that the student has fully participated in the required number of sessions. This requirement is not for remediation or intervention. Rather the requirement exists to increase self awareness and to aid in understanding the experience of seeking and receiving counseling. Failure to complete and submit this form can delay the start of the clinical placement. If an extension is needed to finish, this must be approved by the Clinical Director.
- **Clinical Placement Request Form** (Appendix B): Students complete this form the semester before practicum and internship begin. It allows students to share information about preferences and requirements for clinical placements. Students who want to engage in a practicum or internship that has not been used by Moravian Seminary before can suggest it on this form and must suggest it at the time they have their one-on-one meeting with the Clinical Director at the latest.
- **Clinical Placement Data Form** (Appendix C): This form, listing the information about the clinical site, supervisor and counseling experience, is to be submitted to the Clinical Director at the outset of each semester in which a new site is engaged.
- **Clinical Placement Timesheet** (Appendix D): A timesheet of both client (direct hours) and clinical (Indirect hours) contact is to be kept throughout each Clinical semester. The

completed timesheet *signed* by the student and the site supervisor are to be submitted in the student's MACC Administration canvas folder each month of the Clinical semester. Students should make and keep separate signed copies for their own records.

- **Clinical Placement Timesheet Key** (Appendix E): Client hours (Direct hours) include time spent in direct contact with clients with whom the counseling student holds a contractual relationship (that is, an agreement on both parts to pursue ongoing treatment/therapy). Clinical hours (Indirect hours) include the time spent in other than direct client contact, such as observation of others, preparation for counseling sessions, intake interviews, writing reports, staff meetings/team interaction, and other related activities relevant to the work of the counseling setting.
- **Clinical Placement Learning Agreement** (Appendix F): A separate Learning Agreement form for each clinical-placement semester is to be completed. The completed Learning Agreement is to be signed by both the student and the supervisor and submitted to the Clinical Director and the clinical course Instructor (posted in the MACC Administration Canvas) within the first month of each Clinical semester.
- **Informed Consent to Record Counseling Interview Form** (Appendix G): The MACC Program requires that students record sessions for in-class case presentations. Written consent must be obtained from the client using the Informed Consent to Record Form in order to record sessions.
- **Counseling Incident Reflection (CIR) Instructions** (Appendix H): Students will complete one to three Counseling Incident Reflections in each clinical-placement semester. Instructions for completing a CIR are included in the appendix. Supervisors will be asked to comment on at least one CIR during Practicum, Internship 1, and Internship 2.
- **Clinical Case Presentation Instructions** (Appendix I): Student will present clinical case presentations in Practicum, Internship 1, and Internship 2. Instructions on how to complete the case presentation are included in the appendix. With client permission and appropriate release forms, students will record clinical sessions and choose clips of the counseling interaction representing areas of concern, uncertainty, or clinical strength. Supervisors will be asked to review and comment on the Case Presentation prior to the student's assigned date of presentation.
- **Supervisor End-of-Semester Evaluation** (Appendix J): An evaluation of student's progress in clinical placement is conducted at the end of each semester. The student and

the clinical-placement supervisor look at the students clinical performance measured by Program Learning Outcomes and by the criteria for that semester's goals/Learning Agreement. The evaluation process provides the student and the supervisor an opportunity to determine overall clinical progress and identify specific areas needing ongoing clinical work. In discussion with the student, the clinical-placement supervisor completes an End of Semester Supervisor Evaluation which is submitted by the student to the Clinical Director and the clinical course instructor at the end of each clinical-placement semester (posted in the Canvas MACC Administration file).

- **Student Evaluation of Clinical Placement and Supervisor** (Appendix K): At the end of the clinical placement, each student is required to complete an evaluation of his/her clinical placement and on-site supervisor. This form will be reviewed by the Clinical Director to assess the effectiveness of the clinical placement and determine future recommendations for Clinical sites.

Clinical Placement Expectations

Ongoing Assessment of Student Performance

The Ongoing Assessment of student performance is an integral part of the Master of Arts in Clinical Counseling program at Moravian Seminary. The underlying program emphasis on becoming a psychospiritually integrative counselor offers multiple arenas for personal examination, growth, and integration. Feedback from academic and clinically-focused classes along with clinical-placement supervisors provides each student with opportunities to grow and develop clinical competence. Open and direct feedback on student progress is an important component of the program.

Additionally, the Master of Arts in Clinical Counseling program has a long-range responsibility to the field of counseling to provide competent, well-trained practitioners to meet the needs of the field. The faculty has a responsibility to train entry-level counselors adequately and, when necessary, to remediate those students whose performance does not meet the program's standards.

As discussed in Part I of this handbook, a high level of professionalism is expected of all MACC Students. Of particular importance is a student's overall sensitivity, confidentiality and professional attitude. Any faculty member or any other person supervising or evaluating any aspect of student work in the MACC program who has concerns about a student's behavior (as detailed in the Moravian College Student Code of Conduct and the ACA Code of Ethics) should follow the procedure in Appendix L.

Evaluation Overview

Student behaviors, knowledge, and skills are evaluated throughout the MACC program. During clinical placement, both the clinical-placement supervisor and the student focus on the ways in which the student can develop the capacity to use knowledge, skills, and being appropriately to assigned responsibilities. Students move through practicum and internship semesters based on their success in academic courses and prior performance in practicum or internship. If a student's academic and clinical performance is satisfactory, the student progresses to the next level of clinical placement. If a student's academic and/or clinical performance is unsatisfactory, the student is required to complete remediation successfully and/or repeat the clinical placement.

Supervisor Evaluation of Student in Clinical Placement

Agency supervisors evaluate the student's progress in clinical placement at the end of each semester. The student and the agency supervisor review current clinical performance as measured against the MACC Program Goals and the criteria for each semester's goals. The evaluation process is intended to give the student and the supervisor an opportunity to determine overall progress and specific areas needing work. At the end of the clinical-placement experience and upon graduation, students who have met each semester's evaluation standards should be equipped to operate in a professional manner and with a counseling skill level at or above that required for entry level counseling professionals.

Clinical Director Check-in and End-of-Semester Site Visit

During each clinical-placement semester, the Clinical Director will be in touch with site supervisors. At the end of Practicum the Clinical Director will contact supervisors by phone to obtain updates regarding the student clinical learning experience. During Internship semesters, the Clinical Director will contact each supervisor at mid-semester via email or phone to obtain updates regarding the student clinical learning experience. At the end of each clinical-placement semester, an on-site visit is arranged between the student, the clinical-placement supervisor and the Clinical Director. At this in-person visit, the End of Semester Supervisor Evaluation is reviewed, and a discussion is held regarding student's current learning achievements as well as future learning goals. If concerns arise between the times of check in, the site supervisor is asked to contact the Clinical Director. The Clinical Director may also initiate extra supervisor contact if/as needed.

Clinical Placement Remediation Procedures

As has been previously outlined, students are evaluated regularly by the MACC faculty through an annual review process and provided feedback on their academic, clinical, and interpersonal competencies. Breaches of the Student Code of Conduct and ACA Code of Ethics are identified in a variety of ways, including but not limited to students, faculty, supervisors, clients, and/or

members of the public. The process and details for addressing problematic behaviors are outlined in Appendix L of this handbook.

References

American Counseling Association (2014). ACA code of ethics. Alexandria, VA: Author

Student Agreement

By signing this form, I acknowledge that I have read and understand the Master of Arts in Clinical Counseling (MACC) Student Handbook. I acknowledge that I have spoken with a member of the MACC Program faculty or the Dean of the Seminary to discuss any questions or concerns I have regarding the content of this handbook.

Signature

Date

Full Name (print)

APPENDIX

All forms are available for download in MACC Administration Canvas Course.

- A. Requirement for Personal Counseling Form
- B. Clinical Placement Request Form
- C. Clinical Placement Data Form
- D. Clinical Placement Timesheet
- E. Clinical Placement Timesheet Key
- F. Clinical Placement Learning Agreement
- G. Informed Consent to Record Form
- H. Counseling Incident Reflection Instructions
- I. Clinical Case Presentation Instructions
- J. Supervisor End of Semester Evaluation
- K. Student Evaluation of Clinical Placement and Supervisor
- L. Process for Addressing Unprofessional and Problematic Behaviors
- M. Professional Behaviors Report

Appendix A

MACC Program Personal Counseling Verification Form

Individual and group psychotherapy enrich the graduate school experience. Receiving psychotherapy helps students gain a better understanding of countertransference reactions and dynamics of client relationships. It's also an opportunity for role-modeling with a seasoned professional and a wonderful opportunity to navigate some of the stress that comes up in being a student

MACC students are required to fully participate in 5-8 sessions of personal (individual or group) counseling with a licensed professional counselor, psychologist, licensed pastoral counselor, licensed social worker, or licensed marriage and family therapist prior to beginning Internship 1 Counseling sessions completed within 1-2 years prior to entering the MACC internship may be considered. Students will be expected to secure their therapist's signed statement indicating that the student has fully participated in the required number of sessions. This requirement is not for remediation or intervention. Rather the requirement exists to increase self awareness and to aid in understanding the experience of seeking and receiving counseling.

Permission to Release information

I, _____, give permission to the therapist named below to verify my full participation in 5-8 sessions of counseling to Moravian Theological Seminary's Clinical Counseling Program.

Name: _____
Agency: _____
Address _____
Phone: _____ Fax: _____

Student's signature: _____ Date: _____

Witness: _____ Date: _____



Dear Mental Health Provider:

Our students in the Master of Arts in Clinical Counseling (MACC) program at Moravian Theological Seminary (MTS) are required to have fully participated in a minimum of 5-8 sessions of counseling with a licensed counselor, psychologist, pastoral counselor, or licensed social worker, or licensed marriage and family therapist prior to their internship. The student named on the attached page has provided a release of information giving you permission to confirm that they have fully participated in a minimum of 5 sessions with you. You can confirm this information by completing and signing the information below.

Thank you very much for your time and attention.

Sincerely,

MTS MACC Faculty
Marcella Kraybill-Greggo, MSW, LSW
Dr. Michelle Santiago, LPC, NCC, CCMHC
Rev. Dr. Beth Toler, LMFT

Counselor Verification of MACC Student Counseling Sessions

I, _____, verify that _____
fully participated in (individual / group) counseling with me for _____ sessions, from
_____ (initial date) to _____ (last session date).

Signature

Date

Lic. No.

If you have questions, please contact Moravian Theological Seminary at 610-861-1516.

Appendix B

MACC Program Clinical Placement Request Form

Name: _____

Street Address: _____

Cell Phone: _____

Email Address: _____

Student Status (circle one): Full Time Part Time

Degree (circle one): MACC MACC/MSW MACC/MDiv

Completion dates for prerequisite courses:

SEPC702 Helping Relationships _____

SEPC710 Group Theory and Practice _____

SEPC720 Clinical Appraisal _____

SEPC760 Counseling Theory _____

SEPC920 Professional Orientation: _____

If you have not completed a prerequisite, please explain circumstances: _____

Availability:

Most placements prefer availability during regular business hours, 8 am to 5 pm, although some settings, particularly those working with families and children, may require more flexible hours such as evenings or weekends. Restrictions on your availability may impact placement options.

Indicate hours NOT available for field:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
8 a.m. - 12 noon						
noon - 5 p.m.						
After 5 p.m.						

(Be sure to take into consideration class days for the program you are in.)

Placement Preferences

Geographical area preference: _____

Do you speak/understand a language other than English? _____

If yes, please describe: _____

Do you have a car available for use at your placement? _____

Will you be employed while doing your field placement? _____

If yes: Employer: _____ Position: _____ Hours per week: _____

What expectations do you have in relation to a clinical placement (such as specific learning experiences, supervision, population served, etc.)?

Agency suggestions (agency name/address/phone number, contact person):

Suggestions must be made by the time of the one-on-one meeting with the Clinical Director. All clinical placements will be initiated, coordinated, and confirmed by the MACC Clinical Director. Not all agencies will meet the criteria for an MACC practicum/internship placement.

AREAS OF INTEREST (Circle all that apply)

- Adoption/Foster Care
- Aging/Gerontology (Senior Centers, Nursing Homes, Assisted Living, Independent Living)
- Child Welfare (Preventative Services, Protective Services, Abuse, Neglect, Placement)
- Criminal Justice (Prisons, Probation, Parole, Forensics, Juvenile Justice)
- Developmental Disabilities (Mental retardation, Head Injury, Developmental Problems)
- Domestic Violence/Family Violence/Crime Victims
- Drug/Alcohol/Substance Abuse Services
- Employment Services (Job Training, Human Resources)
- LGBTQ+
- Health Care (Hospitals, Dialysis Units, Home Health, Public Health, Clinics)
- Hospice (Death and Dying, Bereavement, Terminal Illness)
- Immigration
- Mental Health Services (Inpatient, Outpatient, Child, Adolescent, Adult, Elderly, Families)
- Research
- School Counseling (K-12, College)
- Welfare Services (Public Assistance, Welfare to Work, Etc.)

The following question is voluntary:List any other special circumstances the Director of Clinical Placement should know for the development of your placement.

Appendix C

MACC Program Clinical Placement Data Form

Student Name _____

Telephone Number _____ Email _____

CLINICAL PLACEMENT SITE

Agency _____

Street Address

_____ Zip _____

Supervisor Name _____

Supervisor Title _____

Supervisor Phone: () _____ Email _____

Brief Description of Practicum/Internship Activities/Tasks available at this site:

Appendix D

MACC Program Clinical Placement Timesheet

NAME:					
SITE					
Month/Year					
DATE	Supervision Hour(s)	Group Hours	Individual Client Hour(s)	Other Hour(s)	Total Hours for the day
1					0
2					0
3					0
4					0
5					0
6					0
7					0
8					0
9					0
10					0
11					0
12					0
13					0
14					0
15					0
16					0
17					0
18					0
19					0
20					0
21					0
22					0
23					0
24					0
25					0
26					0
27					0
28					0
29					0
30					0
31					0
Month Total	0	0	0	0	0
Year to Date	0	0	0	0	0
	Supervisors Signature _____				Date: _____
	Student Signature _____				Date: _____

Appendix E

MACC Program Clinical Placement Timesheet Key

Direct Client Hours: Individual

Any clinical time spent face-to-face with a client, whether observing another clinician with a client, working one-on-one, or in a family session. Phone calls with a client may only be counted as direct client hours in a rare event that substantive counseling content occurs on the phone (e.g., crisis phone calls).

Direct Client Hours: Group

Any time that is spent in a group counseling session. Each group session hour is counted as one (1) direct client hour no matter how many participants are in the group.

Supervision Hours

Formal weekly supervision & information supervision with internship supervisor (individual or in a group)

Other

- Documentation/Case notes
- Staff/team meetings
- Phone calls while at internship, relevant to client work
- Consultation with agency colleagues
- Research regarding client situations (if research is done off premises, supervisor approval is required)
- Conferences/Trainings relevant to the MACC Profession/your internship, with prior supervision approval
- Agency events/activities approved by your supervisor

Appendix F

MACC Program Clinical Placement Learning Agreement

The purpose of the Clinical Placement Learning Agreement is to direct the student's clinical-placement experience. The Learning Agreement objectives incorporate specific MACC Program learning outcomes which serve as the organizing principles toward which the overall curriculum is oriented. The specific Learning Agreement goals should reflect collaboration between the student, the clinical-placement supervisor, and the school's Clinical Director.

The following is a list of nine learning outcomes for the Master of Arts in Clinical Counseling Degree at Moravian Theological Seminary. All nine MACC Learning Outcomes are to be addressed in the Internship Learning Agreement. Students are asked to identify two – three tasks to be accomplished for each of these nine Learning Outcomes. Students may additionally identify, with the support of their supervisor, one to three "OTHER GOALS" that are either specific to their Internship site or clinical goals that the student has a particular interest in and are relevant to the site.

Professional Identity: Articulate and demonstrate one's counseling identity and demonstrate appropriate professional behavior; demonstrate and utilize ACA Ethical Code (2014); utilize theological reflection and spiritual formation to enrich understanding of personal identity and case conceptualization.

Learning Goals

- 1.
- 2.
- 3.

Human Growth and Faith Development: Demonstrate knowledge and understanding of the biological, moral, faith, familial, and societal bases of human development and behavior throughout the lifespan.

Learning Goals

- 1.
- 2.
- 3.

Helping Relationships: Understand foundational frameworks for counseling and interviewing processes in an intercultural society; develop counselor self-awareness and basic listening/attending skills needed to form and sustain effective counseling relationships; learn methods and processes of theological and spiritual integration within the counseling process.

Learning Goals

- 1.
- 2.
- 3.

Research Design and Methodology: Demonstrate knowledge of scientific methods commonly used by counselor practitioners in clinical work, including knowledge of application of evidence-based scholarship to evaluate psycho-spiritual clinical practices, interventions, and programs.

Learning Goals

- 1.
- 2.
- 3.

Social and Cultural Foundations: Demonstrate knowledge, self-awareness, and skills in working with community members representing various cultural, interfaith, and personal backgrounds; learn to ethically apply intercultural assessment models.

Learning Goals

- 1.
- 2.
- 3.

Clinical Appraisal: Demonstrate knowledge of theories and classification systems and relevant measures of psychological and psycho-spiritual pathology, including but not limited to, biological and sociocultural theories as applied to case formulation, diagnosis, and treatment planning.

Learning Goals

- 1.
- 2.
- 3.

Counseling Theory: Demonstrate knowledge of evidence-based theories and practices of counseling by articulating therapeutic orientations and applying selective interventions for different clinical issues and social locations.

Learning Goals

- 1.
- 2.
- 3.

Group Theory and Practice: Understand the history, principles and theories of group counseling and therapy. Demonstrate an ability to identify group dynamics and apply various models of group counseling, as they relate to issues of psycho-education, interpersonal communication, problem-solving, ethical decision-making, and psycho-spiritual integration.

Learning Goals

- 1.
- 2.
- 3.

Career and Lifestyle Development: Understand the history, principles and theories of career counseling. Demonstrate an ability to apply various models of career counseling as they relate to assessment, developmental perspectives, cultural and spiritual considerations in vocational planning.

Learning Goals

- 1.
- 2.
- 3.

Other Goals

Learning Goals

- 1.
- 2.
- 3.

Learning Agreement Signatures

Date: _____

Signature of Agency Supervisor

Date: _____

Signature of Student

Appendix G

Informed Consent to Record Counseling Interview

Moravian Theological Seminary, Master of Arts in Clinical Counseling Program
1200 Main St., Bethlehem, PA 18018

Audio and video recording the sessions are a significant component of counselor training and education. However, no recording is ever done unless the client has given informed consent to do so. This consent form signifies your permission to audio or video record a session. Feel free to ask your counselor any questions about the purpose or use of the recordings.

I, _____, give permission to _____
Client Counselor Intern

to *audio record* or *video record* (circle one or both) one or more counseling sessions.

I understand that:

1. I may request that the audio or video recorder be turned off at any time and may request that the recording or any portion be erased.
2. The purpose of recording is for ethical use in training and supervision. My counseling intern will be using this recording with his/her assigned supervisor in a group counselor supervision format where all students and faculty are bound by confidentiality and their counseling ethical code.
3. The contents of the recordings are kept strictly confidential. Information will not be shared outside the group supervision context.
4. These recordings will be used solely in an educational setting and will be erased following this use for supervision.

My consent begins today _____ and ends _____
Today's Date Ending Date

I may terminate this permission at any time.

Name of Client (Please print)

Client Signature Date

Witness Signature Date

Appendix H

MACC Program Counseling Incident Reflection Instructions

In 4-5 pages (single spaced within each section, double spaced between sections, headings bolded as seen below), describe an incident or interaction at your internship site this past week. Choose an event in which you were personally involved (usually, but not always in a counseling session)—one that triggered feelings within you, gave you satisfaction, or puzzled you.

Introduction

(1/2 page, single spaced)

Introduce the client/s with a brief description of known facts prior to meeting with the client. This information may come from a staff person at your agency, case file notes, a family member, or from some other outside source. If you have seen the client before this session, briefly summarize the content and tone of previous contacts. Do not include information in this section that is received during the session you are presenting. Such information will be revealed in your verbatim account.

Mask the identity of the client by using initials or a false name. Identify the place and situation in which this incident occurred (for example, “This was our second session in marital counseling. M., the wife, had come in without her husband, G., apparently at his request.”)

At the end of this section, state what your goal was for the session (for example, “My goal was to form a clinical diagnosis by the end of the session.” or “My goal was to help the client with assertiveness skills.”).

Verbatim

(1-2 pages, single spaced)

Describe the incident or interaction as fully, clearly, and concisely as you can. Record all verbal interchanges in verbatim form, numbering all responses (C1, C2, C3, etc. for what the client says; use your own initials for your responses such as J1, J2, J3, etc.). See the Verbatim example that follows these guidelines.

In parentheses () following the relevant responses, describe the emotions you perceived in the client and your feelings and internal reactions during the interaction. Note especially any awareness of internal anxiety. Be aware of other gut-level feelings that could be signs of countertransference.

Record your observations of the client’s and your body language in parentheses next to the appropriate verbatim segment (facial expressions, gestures, posture, hand movements, etc.).

Choose the most salient part of the visit, briefly summarizing what happened before and after the verbatim you’ve chosen.

Because you are writing the account from memory, it will be an imperfect record. This is okay. Do the best you can. You will be surprised how much you remember.

Clinical Assessment

(1/2-1 page, single spaced)

Was the goal of the visit achieved? If the purpose of the session changed during the session, note the reason/s for this change and whether or not the new goal was achieved.

How do you interpret clinically what occurred in the session? What is your initial clinical diagnosis? Even if your agency does not use the ICD-10 or DSM 5, please give a preliminary numbered diagnosis.

What clinically relevant issues, including spiritual themes, emerged in the session? How do these relate to the client's goals for therapy? What is your treatment plan moving forward? If a next session is not possible, speculate about what you would have done if you had had further sessions.

In what way(s), if any, may culture (your culture, your client's culture, and/or the culture of the agency) impact this session and diagnosis? Culture can be defined as the client's knowledge, experience, concepts, rules, and practices. This includes race, ethnicity, resiliency, history of discrimination, religion/spirituality, language, sexual orientation, etc.

Theological/Contemplative Reflection

(1/2 - 1 page single spaced)

Identify what significant theological themes (grace, hope, community, forgiveness, sin, etc.) occur to you as you reflect on this interaction. What theological, spiritual, religious thoughts, feelings and images pop into your mind as you sit with this session? (These can include biblical, musical, poetic, visual artistic images, etc.)

In what ways does your theological reflection challenge/contradict/affirm/ guide you in understanding what the client is experiencing and what you are experiencing? Does it expand your understanding of how you might work with this client?

Learnings

(2 paragraphs, single spaced)

First paragraph: Reread your verbatim and reflections. What did you "miss" during the session that you can see after writing this? What worked/didn't work? If you are seeing this person for another session, what do you want to do differently or continue to do? What is one learning you will take from this experience?

Second paragraph: What does your assigned reading this semester say to you about this verbatim and your work? How does it inform the work you show in this verbatim?

Please remember to put your name, the CIR number, and the due date at the top of your page!

VERBATIM EXAMPLE

The following is an example of the way you will record the *Verbatim* portion of the Critical Incident Report. In this excerpt, Mark (M) is on sick leave from his teaching job and meets with his counselor (C).

- M1: I really don't know what to do...whether to go back to teaching school. Ah- I can hardly stand the thought...but, you know, a stable job - a decent salary...Or else make a clean break, likely go back to university - find something I can get excited about...(clasps and unclasps his hands; he seems nervous, anxious and looks around the room without making eye contact)
- C1: (I interrupt Mark and lean in closer to him, trying to make eye contact) The closer it gets for you to return to work, the bigger this inner turmoil...
- M2: I don't know...(buries his head in his hands)
- C2: (I'm feeling anxious . . . what can I say that will make him feel better? I breathe deeply to calm myself) You say "I don't know" but I wonder whether you really do know what you want to do.
- M3: (Looks up and makes eye contact; he look frightened and trapped) Perhaps I am too scared to really say... (looking away) that I don't want to go back to teaching.
- C3: (I take another breath; I'm feeling a tinge of fear or apprehension) Pretend that you are not scared. Tell people - your dad... your wife...Right now tell me: "I don't want to go back to school."
- M4: I...I.. don't want to go back... to school. (haltingly, looks at the floor) (Silence)
- C4: What is happening Mark? (my heart is pounding, am I doing the right thing?)
- M5: God – my heart is pounding...(begins to cry) I can't even say it.
- C5: Perhaps it is not just your job you are disgusted with ... (oops, here I am putting my own thoughts into his situation)
- M6: What do you mean? (looks vulnerable, ashamed, then makes eye contact)
- C6: I think I hear you berating yourself, saying that you haven't the guts to quit.
- M7: Well should I quit? .
- C7: (I caught myself before responding to his question. I reminded myself that I need to throw this back to him. My palms are sweaty with anxiety) How important is it for you to know what others think is best for you, and how concerned are you not to disappoint them?
- M8: It wouldn't be the first time that I disappoint people, especially my family... (sniffs and wipes nose)
- C8: I think, Mark, these are the scariest things in life - to leave, or disappoint others. (oops, now I see how I keep putting my own interpretations into my responses – I am anxious to look like I know what I'm doing)

EXAMPLE OF THEOLOGICAL REFLECTION

[This is an example of a theological reflection on the CIR verbatim example (p. 3) of Mark and his counselor.]

In reflecting on this incident, the image of a lost puppy arose in my mind. I could feel the panic and fear of this puppy as he ran to and fro, sniffing the legs of passersby and whimpering as he tried to find "home," a place of belonging. With further reflection/free association, the image morphed into the parable of the lost sheep from Luke 15:

He told them this parable. "Which of you men, if you had one hundred sheep, and lost one of them, wouldn't leave the ninety-nine in the wilderness, and go after the one that was lost, until he found

it? When he has found it, he carries it on his shoulders, rejoicing. When he comes home, he calls together his friends and his neighbors, saying to them, 'Rejoice with me, for I have found my sheep which was lost!' I tell you that even so there will be more joy in heaven over one sinner who repents than over ninety-nine righteous people who need no repentance."

As I reread/retold the parable, I began to sense the reality of Mark's need to know that he is precious and loved, and that there truly is a place of "home" for him. It may or may not be in teaching, but that is yet to be determined. Mark probably needs the hope that I recognize in this parable that we are not alone in our search to find where we belong. God is present and searching for us so that we may know that we are precious and essential in the world – and that we are neither invisible nor dispensable. We have gifts and talents that are needed and necessary – and when we believe that the One who wants us home is with us, we need no longer feel lost. Then, the fearsome experience of lost-ness is transformed into the realization that we are on a journey that has a goal that is real and not ephemeral. "Home" is where we are headed even when it is not yet in sight. Fear is no longer necessary and anticipation can take its place when we know we are found, in the Presence of God, and are on our way to where we belong.

While I will probably not share this image or parable with Mark, exploring it has given me greater confidence and hope that he can face his future with increased courage whether he returns to teaching or seeks another vocation. And when I (as his therapist) am confident and calm (not panicked or fearful), I will be the calming and healing presence Mark needs to explore his fear and his journey in the therapy hour.

Appendix I

MACC Program Clinical Case Presentation Instructions

The Clinical Case Presentation will become increasingly more comprehensive as students progress through the program and gain skill and experience.

I. Service Rendered (CPT Codes used for billing/insurance purposes)

Choose one of the following:

- 90791 psychiatric diagnostic evaluation
- 90832 psychotherapy, 30 minutes with patient and/or family member
- 90834 psychotherapy, 45 minutes with patient and/or family member
- 90837 psychotherapy, 60 minutes with patient and/or family member
- 90846 family psychotherapy without the patient present
- 90847 family psychotherapy, couples therapy, conjoint psychotherapy with the patient present
- 90849 multiple family group psychotherapy
- 90853 group psychotherapy (other than of a multiple-family group)
- 90839 psychotherapy for crisis, first 60 minutes
- 90840 add-on code for each additional 30 minutes of psychotherapy for crisis, used in conjunction with code 90839

II. Identifying Information

First initial, age, gender, culture/ethnicity, religion, marital status, sexual orientation, etc.

III. Personal History

A. Psychosocial/Developmental History

Description of childhood, adolescent, adulthood; including marriage, children, significant relationships employment history, financial status, major loss, transitions, crises (as in turning points) noted. Description of social support. Description of family, including current and historical medical and psychological issues or problems.

B. Substance Abuse History

List any significant substance abuse/addiction issues here

C. Medical History

List all significant illnesses, injuries, surgeries, and birth complications/defects.

IV. Past Psychiatric Treatment

A. Past Mental Health Treatment

Detail all past treatments, including substance abuse treatment. Chronology (with approximate dates), past diagnoses, type of treatment, where treated, compliance with treatment, and results.

B. Past Psychiatric Meds

Note any psychiatric meds used in the past and for what reason

C. Past Psychiatric Diagnosis (with DSM diagnostic codes included)

Note any previous psychiatric diagnosis, including dates/time frame of diagnosis

V. Current Encounter

A. Overall Chief Complaint/Presenting Issue

One or two sentence summary—preferably a quote from the client—regarding the reason treatment is being sought. The presenting problem may be, “My husband died.” The chief complaints may be, “I can’t sleep, and I have lost the will to live.”

B. History of Present Condition/Illness

Present as coherent (and accurate!) of a story as possible describing the development of the problems that have led to the current episode of care. This includes the chronology and context of symptom development, most relevant contributing or complicating environmental factors (family stress etc.), previous treatment already tried for the presenting problem, and the mechanism by which the client came to be here for treatment (referral, transfer from another hospital, admission from outpatient clinic, etc.).

C. Review of Current Psychological Symptoms

List current, active symptoms

D. Mental Status

Provide a detailed mental status assessment that includes all of the following:

- Appearance: (neat, tidy, disheveled, clean, unkempt, etc.)
- Attitude: (cooperative, good, guarded, argumentative, etc.)
- Motor Activity: (agitated, steady, still, nervous, etc.)
- Speech: (normal, slurred, stuttering, pressured, slowed, etc.)
- Affect: (appropriate, inappropriate, etc.)
- Mood: (anxious, depressed, normal, apathy, etc.)
- Thought Process: (fluent, interrupted, limited insight, etc.)
- Thought Content: (coherent, understanding, cloudy, etc.)
- Presence of Hallucinations: (none, auditory, olfactory, visual, etc.)
- Suicide Ideations: (none, plan, method, means, etc.)
- Homicidal Ideations: (none, plan, method, means, etc.)
- Presence of Delusions: (none, grandiose, paranoid, etc.)
- Memory: (intact, fragmented, etc.)
- Self-Perception: (distorted, normal, etc.)
- Cognitive Function: (able to count backwards from 100, alphabet, etc.)
- Judgment: (fair, good, poor, etc.)
- Insight: (limited, good, etc.)
- Orientation to Time, Place, Person: (x3 if yes)

E. Assessment/DSM Diagnosis

Use the DSM 5 to formulate a diagnosis; include differential diagnosis and other relevant symptoms/factors to support your diagnosis. Include with DSM 5 coding, ICD 10 diagnostic codes.

Initial Diagnosis:

Name(s): _____ Code(s): _____

Symptoms:

Specifier: (if applicable)

Differential Diagnosis:

Comorbidity (two diagnoses occurring simultaneously, e.g., major depression and alcohol addiction):

General Medical Condition(s):

Other Conditions That May Be a Focus of Clinical Attention:

Cultural Formulation (p. 749 of DSM 5)

Description of client's cultural system of knowledge, concepts, rules, and practices. This includes race, ethnicity, resiliency, history of discrimination, religion/spirituality, language, sexual orientation, etc. Cultural consideration/impact for diagnosis

F. Treatment Plan

Problem/Behavioral Issue 1: (ex: Suicidal Ideation)

Long Term Goal 1:1: (stabilize current suicidal ideation)

Short Term Objective 1:1:1:(verbalize current level of suicidal intent)

Therapeutic Intervention 1:1:1:1: (Therapist will question the client directly/openly about the presence of suicidal ideation)

Therapeutic Intervention 1:1:1:2: (Therapist will perform a risk assessment of suicidal ideation, including the nature of the client's suicidal statement plans, and access to the means of suicide)

Therapeutic Intervention 1:1:1:3: (Therapist will obtain clinical supervision or feedback from peers regarding the necessary reaction to the client's current status)

Short Term Objective 1:1:2:

Therapeutic Intervention 1:1:2:1:

Therapeutic Intervention 1:1:2:2:

Therapeutic Intervention 1:1:2:3:

G. SOAP Note (If clinical site uses another structured treatment/progress note format such as DART or DAP, then please use the site's format here)

Subjective Information about the client's present situation from the client's subjective position; i.e. client's actual description of how he/she is doing or feeling, description of needs/desires, or stated theme/issue. "S stated she feels sad"

Objective External data such as appearance, affect, and mannerisms that is observed by you, the therapist; i.e. "S was disheveled and teary as she talked about the death of her father" or "S's affect was flat as she talked about the anger she has towards God."

Assessment How do you as a therapist understand , integrate, and evaluate the meaning of the client's subjective report and the objective data in light of all other information known about the client? i.e "S continues to deal with grief issues over death of father."

Plan In light of themes presented in session and in light of client's overall goals, what is your plan for future treatment of client? i.e. "This

writer/therapist will continue to support S as she processes the grief over death of father.” Or “For the next session, in an attempt to continue to address S’s unresolved grief, she will bring in a completed letter to deceased father to discover, express and process emotions towards father.” Also, if referrals for other forms of treatment are needed and made, or will be, indicate them here. (i.e family therapy, medical doctors, legal advice, psychiatrists, anger management, etc)

VI. Pastoral/Spiritual/Theological Assessment and Reflection

A. Client’s current engagement with religion/spirituality/meaning-making practices:
Provide description of level of engagement: Marginal, Secondary, Foundational

B. Spiritual Assessment (Anandarajah & Hight, 2001)

Sources of hope, meaning, comfort, strength, peace, love, and compassion: What is there in client’s life that gives her/him internal support? What are the sources of hope, strength, comfort, and peace? What does the client hold onto during difficult times? What sustains client and keeps client going?

C. Theological Assessment on Current Clinical Case

Identify and list any existential, spiritual, or theological themes (anger, despair, guilt, shame, grace, hope, community, forgiveness, sin, etc.) present in your session

VII. Specific Questions for Feedback

VIII. Recording Provide a ten minute section of a recorded session that you wish to receive feedback on and that captures your work with this client.

Appendix J

MORAVIAN THEOLOGICAL SEMINARY MACC PROGRAM SUPERVISOR END OF SEMESTER EVALUATION

Name of Student:

Name of Supervisor:

Clinical Placement Agency/Program:

Effective Dates of Agreement:

Specific Days/Times of Placement:

Supervisor Evaluation of Student in Clinical Placement

There is a Supervisor evaluation of the student's progress in clinical placement at the end of each semester. The student and the agency supervisor review current clinical performance as measured against the criteria for each semester's goals. Ordinarily, the student is expected to be further along in professional development as the placement progresses. The evaluation process is intended to give the student and the supervisor opportunity to determine overall progress and specific areas needing work. At the end of the clinical placement experience, the student is expected to counsel clients and work with a high degree of skill and autonomy. It is intended that the student be equipped to operate in a professional manner when he/she graduates, with a counseling skill level at or above that required for a new hire.

MACC Program Learning Outcomes in Clinical Placement Evaluation

The MACC program has nine Learning Outcomes to be accomplished in the course of instruction and clinical experience. Upon completion of the Clinical Placement Experience the student will be able to demonstrate competency in all 9 Learning Outcome areas.

Instructions for the Supervisor Evaluation (Please read very carefully.)

Complete all areas of the evaluation form.

A rating scale will be used for each item listed below to assess the competence of your student during the semester just completed. For each semester, an appropriate degree of competence is expected for each item.

Please use the 4-point rating scale to assess the student-intern's skill in each area identified below. (Complete all areas of the evaluation form.) If there are items that are not relevant to the student's work at your agency or for which you cannot provide an evaluation, choose N/A. Please feel free to make additional comments.

Rating Scale

4 – Mastered 3 – Showing Growth 2 – Minimally Acceptable 1 – None
N/A – Not applicable

A. PROFESSIONAL IDENTITY: Articulate and demonstrate one's counseling identity and demonstrate appropriate professional behavior; demonstrate and utilize ACA Ethical Code (2014); utilize theological reflection and spiritual formation to enrich understanding of personal identity and case conceptualization.

The Student:

1. Consistently conducts self in a professional manner across settings and situations.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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2. Maintains professionally appropriate communication across settings and contexts.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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3. Consistently accepts personal responsibility across settings and contexts.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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4. Continually monitors for and discusses ethical dilemmas and uses ethical decision-making models in practice and supervision.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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5. Independently acts to safeguard the welfare of others.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 1

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 2

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 3

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Comments:

B. Human Growth and Faith Development: Demonstrate knowledge and understanding of the biological, moral, faith, familial, and societal bases of human development and behavior throughout the lifespan.

The Student:

1. Demonstrates knowledge and understanding of the biological, moral, faith, familial, and societal bases of human development and behavior throughout the lifespan in assessing, conceptualizing, and working with clients.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

2. Uses relevant faith, racial, cultural, and sexual orientation identity development theory in assessing, conceptualizing, and working with clients.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

3. Demonstrates awareness of how culture affects stages of development.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

4. Demonstrates awareness of and ability to apply classic developmental theories such as Erikson, Kohlberg, and Fowler.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 1

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 2

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 3

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Comments:

C. Helping Relationships: Understand foundational frameworks for counseling and interviewing processes in an intercultural society; develop counselor self-awareness and basic listening/attending skills needed to form and sustain effective counseling relationships; learn methods and processes of theological and spiritual integration within the counseling process.

The Student:

1. Understands and applies foundational frameworks for counseling and interviewing processes through an intercultural and psycho-spiritual integrative framework.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

2. Forms and maintains respectful and empathic relationships with clients.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

3. Demonstrates the listening and attending skills necessary to form and sustain effective counseling relationships.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

4. Understands the nature of crisis care, how it fits within overall clinical treatment, and responds appropriately.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

5. Demonstrates ability to balance internship, academic coursework, and self care.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 1

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 2

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 3

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Comments:

D. Research Design and Methodology: Demonstrate knowledge of scientific methods commonly used by counselor practitioners in clinical work, including knowledge of application of evidence-based scholarship to evaluate psychospiritual clinical practices, interventions, and programs.

The Student:

1. Demonstrates knowledge of scientific methods commonly used by counselor practitioners in clinical work.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

2. Demonstrates ability to apply evidence-based scholarship to evaluate psycho-spiritual clinical practices, interventions, and programs.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

3. Uses appropriate evaluation tools and methods to evaluate programs and therapeutic interventions.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

4. Demonstrates ability to select valid valid and reliable professional counseling research articles.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 1

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 2

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 3

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Comments:

E. Social and Cultural Foundations: Demonstrate knowledge, self-awareness, and skills in working with community members representing various cultural, interfaith, and personal backgrounds; learn to ethically apply intercultural assessment models.

The Student:

1. Demonstrates knowledge, self-awareness, and skills in working with diverse cultural, interfaith, and personal backgrounds .

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

2. Ethically applies multicultural assessment models.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

3. Demonstrates the ability to select interventions for different problems and diverse populations related to the practice setting.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

4. Recognizes power imbalances and systemic injustices in client issues and empowers clients to address them when appropriate.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 1

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 2

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 3

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Comments:

F. Clinical Appraisal: Demonstrate knowledge of theories and classification systems and relevant measures of psychological and psychospiritual pathology, including but not limited to, biological and sociocultural theories as applied to case formulation, diagnosis, and treatment planning.

The Student:

1. Demonstrate knowledge of theories and classification systems and relevant measures of psychological and psycho-spiritual pathology.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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2. Uses a holistic overview (mind, body, spirit) in assessing client strengths and weaknesses.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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3. Formulates treatment goals and a plan based on client input, knowledge of counseling and personality theory, diagnosis, and clinical assessment.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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4. Follows and adapts the treatment goals and plan throughout the counseling process.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 1

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 2

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 3

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Comments:

G. Counseling Theory: Demonstrate knowledge of evidence-based theories and practices of counseling by articulating therapeutic orientations and applying selective interventions for different clinical issues and social locations.

The Student:

1. Demonstrates knowledge of evidence-based theories and practices of counseling.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

2. Demonstrates ability to apply theory-based interventions in a clinically and culturally appropriate manner.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

3. Demonstrates appropriate knowledge of counseling and psychotherapy theories in case reports and conceptualizations

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

4. Demonstrates methods and processes of theological and spiritual integration within the counseling process.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 1

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 2

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 3

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Comments:

H. Group Theory and Practice: Understand the history, principles, and theories of group counseling and therapy. Demonstrate an ability to identify group dynamics and apply various models of group counseling, as they relate to issues of psychoeducation, interpersonal communication, problem-solving, ethical decision-making, and psychospiritual integration.

The Student:

1. Demonstrates understanding of the history, principles, and theories of group counseling and therapy and applies to work with groups.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

2. Identifies group dynamics and applies various models of group counseling as they relate to issues of psycho-education, interpersonal communication, problem-solving, ethical decision-making, and psycho-spiritual integration.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

3. Demonstrates effective group facilitation skills.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

4. Understands the development of evidence-based practice in interventions.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

5. Actively consults with supervisor to act upon ethical and legal aspects of practice.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 1

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 2

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Student Goal 3

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

Comments:

I. Career and Lifestyle Development: Understand the history, principles and theories of career counseling. Demonstrate an ability to apply various models of career counseling as they relate to assessment, developmental perspectives, cultural and spiritual considerations in vocational planning.

The Student:

1. Demonstrates an understanding of the major models of career development and their validity and cultural utility.

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

2. Demonstrates skills and strategies to assist individuals from diverse backgrounds and cultures to make occupational and educational decisions and plans

Internship 1 (Fall)	4	3	2	1	N/A
Internship 2 (Spring)	4	3	2	1	N/A

3. Applies various models of career counseling as they relate to assessment, developmental perspectives, and cultural and spiritual considerations in vocational planning.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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4. Demonstrates competence in acquiring, evaluating, and using career assessment tools and information and to be aware of measurement bias problems and social justice.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 1

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 2

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 3

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Comments:

J. Theological and Spiritual Integration: Understand the spiritual and theological dimensions of individuals and families from a cultural and inter-faith context. Demonstrate in-depth academic and clinical training combined with theological reflection and spiritual formation. Integrate an inclusive holistic perspective in counseling work that allows work with issues of mind, body, and spirit.

The Student:

1. Identifies and relates theological themes to clarify the presenting problem and/or underlying therapeutic issues.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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2. Integrates issues of religion and spirituality into case conceptualization and therapeutic interventions.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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3. Understands the role of a religious/spiritual integrative counselor as a vital part of a multidisciplinary treatment team.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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4. Understands and identifies issues of transference and countertransference as it relates to religion/spirituality in the clinical context.

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 1

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 2

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Student Goal 3

Internship 1 (Fall)	4	3	2	1	N/A
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Internship 2 (Spring)	4	3	2	1	N/A
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Comments:

Overall, this student is (please select one):

___ Exceeding Standard ___ Meeting Standard ___ Below Standard

Supervisor's Narrative Evaluation:

Discuss strengths and growth areas. Comment on overall goals that are in progress or have not been addressed, as well as suggestions for new goals.

Date: _____

Signature of Agency Supervisor

I have read and discussed this evaluation:

Date: _____

Signature of Student

To the Student: In the event that you have a different perception of any aspect of the feedback in this evaluation, please indicate your specific comments on an addendum.

Please upload a copy of this eval (with supervisor and student signature) to the MACC Administration Canvas site.

Clinical Director's Narrative

Date: _____

Signature of Clinical Director

Appendix K

MACC Program Student Evaluation of Clinical Supervisor & Placement

Name: _____

Agency Placement: _____

Placement Supervisor: _____

Dates of Placement: _____

Instructions: Select the statement that best characterizes your work with your supervisor.

1) REGULAR ACCESSIBILITY

- ☐ My supervisor kept weekly appointments with me and arrived on time.
- ☐ My supervisor occasionally rescheduled our weekly appointment or was a few minutes late.
- ☐ My supervisor frequently rescheduled weekly appointments or was over 15 minutes late.
- ☐ My supervisor frequently cancels appointments without rescheduling.

2) ACCESSIBILITY IN URGENT/EMERGENCY SITUATIONS

- ☐ My supervisor was available in almost all urgent situations.
- ☐ My supervisor was not always immediately available in urgent situations but always called me back.
- ☐ My supervisor was rarely available in urgent situations and did not call back when asked.

3) CLIMATE CONDUCIVE TO OPEN COMMUNICATION

- ☐ My supervisor created a climate in which I felt comfortable discussing my ideas.
- ☐ My supervisor created a climate in which I could discuss my own ideas, but I felt uncomfortable disagreeing with my supervisor.
- ☐ I did not feel that it was acceptable to disagree with my supervisor or bring up my own ideas.

4) POSITIVE FEEDBACK

- ☐ My supervisor often pointed out positive aspects of my clinical work.
- ☐ My supervisor occasionally pointed out positive aspects of my clinical work.
- ☐ My supervisor has never commented on positive aspects of my clinical work.

5) CORRECTIVE FEEDBACK

- ☐ My supervisor always provided corrective feedback from which I can learn.
- ☐ Sometimes my supervisor provided corrective feedback from which I can learn.
- ☐ I found my supervisor's feedback difficult to learn from.

6) CASE CONCEPTUALIZATION

- ☐ My supervisor encouraged and modeled case conceptualization.
- ☐ My supervisor sometimes discussed case conceptualization with me.
- ☐ My supervisor and I have never discussed case conceptualizations of my clients.

7) FORMULATION OF CLEAR TREATMENT GOALS

- ☐ We regularly discussed overarching and session treatment goals.
- ☐ We sometimes discussed goals
- ☐ We rarely discussed specific treatment goals

8) INTERCULTURAL ISSUES

- ☐ My supervisor was knowledgeable about and open to discussing intercultural issues.
- ☐ My supervisor was open to discussing intercultural issues but did not bring them up.
- ☐ My supervisor did not seem open to discussing intercultural issues.

9) RECOMMEND SUPERVISOR

- ☐ I would recommend this supervisor to all colleagues.
- ☐ I would recommend this supervisor to some colleagues (e.g., depending on the prospective supervisee's personality).
- ☐ I would not recommend this supervisor.

Open Ended Questions: (use as much space as you need)

1. In what way did your Clinical Placement either meet or fail to meet your expectations? Please explain.

2. What changes could be instituted in order to improve the experiences provided by this placement?

3. Do you have any additional comments relating to this clinical placement or your particular clinical supervisor?

4. On a scale from one to five (five being excellent and one being unsatisfactory), how would you rate this clinical placement? (circle one) 1 2 3 4 5

Appendix L

Process for Addressing Unprofessional and Problematic Behaviors

(adapted from the Master of Science in Speech-Language Pathology program at Moravian College, retrieved from <https://cdn.mc.cake.syntya.com/public/Attachment%204%20-%20PDBEF.pdf> on July 31, 2019)

Any faculty member or any other person supervising or evaluating a student in the MACC program who has concerns about a student's behavior (as detailed in the Moravian College Student Code of Conduct and the ACA Code of Ethics) will address the concern(s) directly with the student and complete a Professional Behaviors Report (PBR) and submit it to the Director of Seminary Administration. The student will receive a copy of the PBR.

- In the case of minor concerns, the Faculty member or other person supervising or evaluating the student may attempt to resolve the concerns informally.
- At a minimum, the Faculty member or other supervisor/evaluator will meet with the student in person to discuss the concern.
- An informal resolution will include written documentation of the concern and resolution, and may include the student's voluntary, signed agreement to take certain steps to address the concern.
- If a student requests a reasonable accommodation in order to resolve the issue, the student will be referred to the Academic and Accessibility Support Center. If the Academic and Accessibility Support Center determines that reasonable accommodations should be approved, Moravian College and student records will be updated as appropriate to reflect that determination.
- A copy of the informal resolution documentation will be provided to the Director of Seminary Administration, who will place it in the student's file.
- If the Faculty member or other supervisor/evaluator and the student are not able to resolve the concerns informally, a PBR process will be initiated as outlined below.

If the MACC faculty designee convenes a meeting of the MACC faculty and Clinical Director to consider a PBR, the following procedures will govern.

- A. The MACC faculty designee will convene the meeting as promptly as is reasonably possible.

- a. If the MACC faculty advisor initiates a review by preparing a PBR or if there is another conflict of interest, another MACC Faculty member will be designated to facilitate the review meeting.
- b. The facilitator of the meeting, or another officially designated staff/faculty member, will notify the student of the meeting via email. Unless unusual circumstances require otherwise, the student will be provided notice at least 48 hours in advance of the meeting. The notice to the student will include the following:
 - i. Date, time, and location of the meeting.
 - ii. A copy of the PBR.
 - iii. A copy of this Policy.
 - iv. A statement that the student's rights include, among other things, the student's right to speak on his or her own behalf, the right to be accompanied by a non-attorney support person, the right to present information, and the right to ask others (but not an attorney) to speak on the student's behalf..
- B. The facilitator of the meeting is responsible for ensuring an orderly, fair, and efficient process to consider the Report. The formal rules of evidence do not apply and the facilitator may decide whether testimony and/or documents would help the MACC faculty to reach a considered, informed resolution.
- C. The student may be accompanied by a support person. According to the [Moravian College Student Code of Conduct](#), the support person must be a current student, faculty, or staff member. The support person may not be called upon to provide factual information at the hearing. The support person shall not be permitted to speak or to take any active role in the meeting and can be asked to leave at any point if they are deemed disruptive to the process. The student must provide the name of the support person to the meeting facilitator at least 24 hours in advance of the meeting.
- D. The person who prepared the Report will present the concerns and the student will have an opportunity to speak on his or her behalf. Faculty members (including the facilitator of the meeting) may ask questions of the Report author and the student.
- E. If the meeting facilitator believes it would be helpful to a fair consideration of the concerns, the facilitator may request or permit other individuals to speak and/or present information at this meeting. The Report author and the student also will have

an opportunity to ask questions of such individuals. An individual who presents information pursuant to this section may not also serve as a support person.

- F. After the presentation of testimony and documents is complete, the student (and, if applicable, the student's support person) will be excused.
- G. If the student has been notified of the meeting but refuses to or does not attend, the meeting will be conducted in the student's absence.
- H. The MACC Faculty will consider the report and all information presented at the meeting to determine whether the concerns raised in the PBR have merit.
 - a. The facilitator may be present for deliberations to observe and hear first-hand the impressions and thinking of faculty members.
 - b. The MACC Faculty will submit its recommendation(s) in writing to the Dean of the Seminary indicating the faculty's assessment and any recommended consequences.
 - c. The MACC Faculty ordinarily will provide its written recommendation to the Dean of the Seminary within three business days following the meeting, although that time may be extended if required by unusual circumstances.

Consequences for breaches of the Student Code of Conduct or ACA Code of Ethics include, but are not limited to, one or more of the following:

- A negative impact to course grade and/or supervisor evaluation.
- Delayed admission into required courses and clinical experiences. c. Repetition of a course activity or clinical activity.
- Delayed placement in practicum or internship.
- Removal from a practicum or internship site.
- Referral for counseling.
- Other actions deemed appropriate by the program faculty.
- Possible suspension or dismissal from the program.

Upon receipt of the MACC Faculty's written recommendation, the Dean of the Seminary will consider all relevant information, determine whether the student has violated the Student Code of Conduct and/or ACA Code of Ethics and, if so, what consequences are appropriate. The Dean will communicate this decision to the student via email, ordinarily within 10

business days following receipt of the program faculty's recommendation. That time period may be extended based on extenuating circumstances.

Appeals Process

A student who is dissatisfied with the decision agreed upon by the MACC faculty following a review of a PBR may appeal as outlined below.

- The student must submit any appeal by email to the Dean of the Seminary with a copy to their MACC advisor within 10 business days of the date on which the MACC Faculty decision was emailed to the student by the Dean.
- The appeal should state the basis for the appeal (e.g., procedures required by this policy were not followed, fundamental unfairness of the decision).
- The Dean may consider any information deemed appropriate to reaching a considered and fair decision on the appeal. In so doing, the Dean shall bear in mind the Student Code of Conduct, ACA Code of Ethics, as well as ATS Standards of Accreditation
- The Dean shall communicate the decision via email to the student, with a copy to the MACC Program faculty.
- A student who is dissatisfied with the Dean's decision has the right to appeal the decision to the Provost or the Provost's designee in writing by email within 10 business days following the date of the Dean's decision. The Provost's decision is final.

Recordkeeping and Access to Records

The Director of Seminary Administration will maintain records of concerns, PBRs, Report review meetings, and appeals in each student's records.

Appendix M

Moravian Seminary MACC Program Professional Behaviors Report

Date:

Student:

Enrollment Date

Faculty Advisor:

Clinical Director:

Per the requirements of MACC Program's Process for Addressing Unprofessional and Problematic Behaviors, the purpose of the Professional Behaviors Report is to document and address areas of concern as they relate to the expected behaviors outlined in the ACA Code of Ethics and Moravian College Student Code of Conduct .

History of Academic and Clinical Performance:

Concern Areas:

- Professionalism:
- Collaboration:
- Honesty/Integrity:
- Respect:
- Reverence for Learning:
- Emotional Maturity:
- Flexibility:
- Communication skills:
- Other

History of Supports Provided:

Additional Supports to be provided:

Goals to be met for student success, including timeline:

Signatures:

Student

Clinical Director of MACC Program

Date

Date

Faculty

Faculty

Date

Date

Outcomes:

GOALS: _____ met _____ not met

Comments:

Adapted from the Master of Science in Speech-Language Pathology program at Moravian College.