

Sonoma State University
Department of Counseling, Clinical Mental Health Counseling Program (includes
Marriage and Family Therapy and Licensed Professional Clinical Counseling)
Summary Report of Programmatic Assessment
Fall 2011 - Fall 2012

Dear Stakeholder,

What follows below is the Clinical Mental Health Counseling program's summary report of our assessment efforts and any improvements in pedagogy, curriculum, and advising that were undertaken in response to this self-evaluation. Our name change, from Community Counseling to Clinical Mental Health, was in response to our national accrediting body, CACREP, which discontinued the Community Counseling specialization category, and replaced it with Clinical Mental Health Counseling. In addition, the passage of SB 788 here in California that made possible the license of Licensed Professional Clinical Counselor (LPCC) further justified a name change. Lastly, the revision of the training curriculum for MFT's in California also changed as a result of SB33, and the nature of that curricular revision suggested a greater emphasis on clinical mental health. Our program now trains Master's level students for entry work in California that will permit both LPCC and MFT licensure.

1. What program assessments were conducted by our program between Fall 2011 and Fall 2012?

At the student level, our assessment measures are largely embedded within our courses, with a sequence of formal assessments at specified program transition points (e.g. between practicum and internship; before graduation). (See item #2 below for elaboration).

Programmatic feedback is also sought during our annual "Traineeship Fair" from site supervisors, and in the spring of 2012 feedback was sought from our alumni via a web-based survey. These surveys are administered every three years, with the most recent administration occurring in the spring of 2011.

2. Which of the specific student learning outcomes in our program were assessed?

Our program is designed to assess student learning outcomes at specified program transition points. For example, student development is reviewed during students' first semester in the Counseling Department, again following 510B (practicum), and students must demonstrate successful mastery of learning outcomes before they are allowed to proceed to the next stage (supervised field experience or traineeship). This assessment includes oral and written feedback from the faculty, as well as student self-evaluation.

Students are similarly assessed while engaged in their culminating supervised field experience as a requirement for graduation. This assessment includes oral and written feedback from site supervisors and/or faculty supervisors, as well as student feedback (self-evaluation), and student evaluation of their training site. We also periodically assess site supervisors' perceptions of our training effectiveness informally during site visits and formally via the Supervisor Survey.

Students are also required to demonstrate proficiency through their culminating experience, a two-part process that—for students who entered before the Fall of 2012—includes an intensive case study (oral and written presentation) and completion of a grant proposal. As of

the Fall 2012, new entrants will continue to complete the intensive case study, but the grant proposal requirement has been replaced with administration of a nationally normed and administered standardized examination, the Counselor Preparation Comprehensive Exam (CPCE). This exam will be administered in the Semester in which the student plans to graduate, with a passing score required for graduation.

3. What were the results of the assessments conducted?

The Clinical Mental Health Counseling program typically admits 24 students per year. Of these, a portion may attend part-time, although a majority of students attend full-time. The data from the program assessments administered between Fall 2011 and Fall 2012 indicate that the vast majority of candidates have met or exceeded program expectations in all areas. At the Pre-Practicum, Practicum, and Traineeship (field experience) levels, students appear strong in all evaluated categories, including academic knowledge, practitioner competencies, personal characteristics, and specific counseling skills. Super satisfaction (described below) with trainee competencies suggests that internal evaluations are congruent with real world experience.

Our *Supervisor Survey* was given and analyzed in the Spring of 2011. This survey is given to current site supervisors and includes questions related to the training of our students. We received 13 completed surveys. Noteworthy is that our trainees are highly valued: 91.7% of the respondents rated our trainees as excellent/very good. Given the wide range of settings that these supervisors were based in, their expectations for the degree of preparation that our students demonstrated reflect their work setting. For the most part, the respondents reported that our trainees were extremely prepared, very prepared, or adequately prepared across a variety of topics.

Our *Alumni Survey* was administered in 2011. We experimented with a new method of data collection. Rather than using traditional mail with read-and-return materials, we used a link to Survey Monkey. Although we anticipated that this would result in a much higher response rate, the opposite was true. We received only 35 completed surveys. Although considerable effort went into its design and analysis, it has not directly influenced our curricular revision per se because the majority of our recent curriculum revision was mandated by the new standards of the Board of Behavioral Science in California. For example, the Board of Behavioral Science (BBS) now requires that all training programs for California's prospective marriage and family therapists and Licensed Professional Clinical Counselors contain course-work that include significant substance abuse/chemical dependency, case management, recovery-oriented intervention, career development, psychopharmacology and so forth.

Most noteworthy among the results of the alumni survey was that the vast majority (91.4%) were employed in counseling-related fields; about 80% of the community counseling respondents were also either licensed or registered Interns. *Thus, we can conclude that our graduates have acquired the skills and competencies that allowed them to obtain employment in the fields (or related fields) for which they had been trained.*

The alumni survey contained several other questions that provided some utility in program evaluation: 51% wanted more coursework on substance abuse and 71% wanted more coursework on treating trauma and crisis, and these topics have now been strengthened in the curriculum as they were also areas that the state-wide Board of Behavioral Science mandated as needing more attention. Some 40% of the respondents also wanted more preparation in counseling children and adolescents, but this is an area that we are unable to strengthen at this time in the Clinical Mental Health Counseling program due to structural and budgetary

constraints. The CMHC program is committed to increasing focus on counseling children and adolescents through hiring of tenure-track and adjunct faculty with these capacities, as well as through continued curriculum revision as clarity about the impact of the recent curriculum revision is consolidated.

4. What changes in pedagogy, curriculum, advising, etc., if any, have been made as a result of the assessment(s)?

Our curriculum underwent a very significant revision as we had to comply with the Board of Behavioral Science's mandated changes for the LPCC and MFT training. This necessitated reviews at a number of different levels within the University. This new curriculum was introduced this fall of 2012. Other notable changes include:

- Summer 2011 – Establishment of a Department-wide new student orientation
- More intensive advising as we integrated continuing students who came in with “old” MFT curriculum and new students who are receiving only the revised LPCC/MFT curriculum.
- Addition of Summer Traineeship Seminar to assure that students in Traineeships (also known as pre-masters Internships) are appropriately supervised at the university level.

7. What program assessments will be conducted in 2012-2013?

During the 2011-2012 academic year, the Counseling Department began work on a self-study related to the review for its national accrediting body (CACREP). A site visit is expected in the Fall of 2013, followed by a program reaccreditation decision completed by Fall of 2014.

We appreciate any feedback you have regarding how to further support our assessment and program improvement efforts. Please don't hesitate to make contact.

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