

CLINICAL MENTAL HEALTH COUNSELING PROGRAM OUTCOMES

The Clinical Mental Health Counseling Program was recently transitioned from our previously existing Community Counseling Program. The Community Counseling Program has been accredited since 1992 by the [Council for Accreditation of Counseling and Related Educational Programs \(CACREP\)](#), a specialized accrediting body recognized by the [Council for Higher Education Accreditation \(CHEA\)](#). The Clinical Mental Health Counseling Program has recently received re-accreditation from CACREP.

The Clinical Mental Health Counseling Program had an enrollment of 62 MS degree students in the fall of 2014 and 53 MS degree students in the fall of 2015. During the 2014-2015 academic year, a total of 16 students graduated from the program. All students passed the clinical requirements in practicum and internship. 83% of graduates who responded to the Post-Graduation Activities Survey were fully employed.

Currently, the program has three full-time faculty members. All adjunct faculty members who teach Clinical Mental Health Counseling courses have licensure/certification in the counseling field. Students enrolled in the Clinical Mental Health Counseling Program range in age, life experience, and academic and professional backgrounds.

Forty-three (87.8%) Clinical Mental Health Counseling students responded to our annual program evaluation in the spring of 2015. Overall, the quantitative results indicate that students are satisfied with the program (key: 3 = Exceeds Expectations, 2 = Meets Expectations, 1 = Needs Improvement). The mean score for all items exceeded 2.0, indicating that respondents' expectations were met in *all* categories. Areas in which 100% of respondents stated that the program met or exceeded their expectations are: Department Culture is Respectful of Diversity ($m = 2.56$) and Opportunity to Develop Interpersonal Skills ($m = 2.51$).

In addition, over 95% of respondents stated that their expectations were met or exceeded by Availability of Program Information (m = 2.49), Expertise of Full Time Faculty (m = 2.58), Quality of Full Time Faculty (m = 2.47), Relevance of Courses for your Goals (m = 2.33), Opportunity to Develop Professional Counselor Role (m = 2.58), Opportunity to Develop Critical Thinking Skills (m = 2.51), Instructional Facilities (m = 2.44), and Overall Rating of Program (m = 2.45).

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Number of Students Enrolled in the Program

2014-2015 Academic Year	54
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Number of Graduates from Program

2014-2015 Academic Year	16
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Student Retention within Program

The University of Scranton allots six years for the completion of a master's degree. Students in the Clinical Mental Health Counseling (CMHC) program have the ability to take classes at a good pace for themselves. The master's of science degree requires the completion of 60 academic credit hours, and students can take up to 12 academic credit hours in one semester. Of students who started the Community Counseling program (the program switched from Community Counseling to CMHC in the 2014-2015 academic year) in the 2008-2009 academic year, 47% of students had completed their program by the beginning of the current (2015-2016) academic year. Of students who started the Community Counseling program in the 2009-2010 academic year, 64% of students completed their program by the beginning of the current academic year. Of students who started the Community Counseling

program in the 2010-2011 academic year, 60% of students completed their program by the beginning of the current academic year.

Average time to complete the program:

Students who graduated during the 2014 – 2015 academic year took an average of 2.3 years to complete the program. Because our program provides scheduling flexibility that allows for both part- time and full-time students, the time to complete the program can be as low as 2.5 years.

Employment Rates:

Academic Year	In-field employment rates
2014-15	83.3% (6 out of 9 graduates polled responded, and 5 out of 6 were fully employed)

Results of Alumni Survey

Alumni who graduated during the 2007 – 2008 and 2010 – 2011 academic years were surveyed to assess how well prepared graduates of our program were for professional practice in both knowledge and skill. Respondents used a Likert Scale (1 = not at all prepared, 2 = poorly prepared, 3 = adequately prepared, 4 = well prepared, 5 = thoroughly prepared) to respond to 26 questions.

Strengths

On average, respondents indicated that graduates were more than adequately prepared on all 26 items and well prepared on 15 of the 26 items. A few examples of areas in which respondents believed our graduates were well prepared were: Ability to treat each client with respect as a unique individual (4.6); Understanding of and ability to apply concepts of cultural diversity to work with clients (4.4, 4.2); Ability to accurately assess client’s needs (4); Ability to apply ethical and legal

guidelines (4); and Ability to use crisis intervention strategies when appropriate (4).

Areas for Improvement

Although respondents reported that they were adequately prepared in all program objectives, we have identified a few areas in which we aim to strengthen student learning. These areas are: Understanding of research design and methodology (3.4); Ability to incorporate assessment into the counseling process in a meaningful, ethical manner (3.4); and Ability to develop treatment plans (3.8).

To address the first two areas of improvement, we made relevant changes to the Appraisal Techniques (COUN 504) and Research Methods (COUN 505) courses and will continue to assess student learning in both courses to determine the effectiveness of changes made. To address the third area of improvement, we created a new required course, COUN 577: Evidence Based Practice, which is designed to teach students to develop and implement appropriate treatment plans. These changes were part of a comprehensive redesign of the entire program which was completed in August of 2013.

Results of Employer Survey

Employers of alumni who graduated during the 2007 – 2008 and 2010 – 2011 academic years were surveyed to assess how well prepared graduates of our program were for professional practice in both knowledge and skill. Respondents used a Likert Scale (1 = not at all prepared, 2 = poorly prepared, 3 = adequately prepared, 4 = well prepared, 5 = thoroughly prepared) to respond to 27 questions.

Strengths

On average, respondents indicated that graduates were more than adequately prepared on all 27 items and well prepared on 11 of the 27 items. A few examples of areas in which respondents believed our graduates were well prepared were: Ability to treat each client with respect as a unique individual (4.4); Understanding of the importance of the

counseling relationship (4.4); Ability to conduct individual counseling (4.2); Ability to accurately assess client’s needs (4); and Ability to apply ethical and legal guidelines (4.2).

Areas for Improvement

Although respondents reported that they were adequately prepared in all program objectives, we have identified a few areas in which we aim to strengthen student learning. These areas are: Understanding of appraisal processes including assessment, psychometric concepts, relevant ethical and legal concerns, and the integration of appraisal results into the counseling process (3.4); Ability to develop treatment plans (3.8); and Ability to accurately assess (diagnose) client needs/concerns (4).

To address the first area, we made relevant changes to the Appraisal Techniques (COUN 504) course. To address the second area, we created a new required course, COUN 577: Evidence Based Practice, which is designed to teach students to develop and implement appropriate treatment plans. To address the third area, we made significant changes to the Assessment and Diagnosis (COUN 549) course. We will continue to assess student learning outcomes in each of these courses in order to determine the effectiveness of our changes. These changes were part of a comprehensive redesign of the entire program which was completed in August of 2013.

National Counselor Examination (NCE) Pass Rate for Both CACREP-accredited Programs

Academic Year	Number of Test Takers	Pass Rate
2010	17	94%
2011	15	87%
2012	Pending	Pending
2013	18	72%
October 2014	14	86%
April 2015*	12	92%

*Data for CMHC students only