COUNSELING 530: Clinical Mental Health Counseling
Course Syllabus: Fall, 2023
In-Person Course

AI use policy as of May 25, 2023

Texas A&M University-Commerce acknowledges that there are legitimate uses of Artificial Intelligence, ChatBots, or other software that has the capacity to generate text, or suggest replacements for text beyond individual words, as determined by the instructor of the course.

Any use of such software must be documented. Any undocumented use of such software constitutes an instance of academic dishonesty (plagiarism).

Individual instructors may disallow entirely the use of such software for individual assignments or for the entire course. Students should be aware of such requirements and follow their instructors 'guidelines. If no instructions are provided the student should assume that the use of such software is disallowed.

In any case, students are fully responsible for the content of any assignment they submit, regardless of whether they used an AI, in any way. This specifically includes cases in which the AI plagiarized another text or misrepresented sources.

13.99.99.R0.03 Undergraduate Academic Dishonesty
13.99.99.R0.10 Graduate Student Academic Dishonesty

INSTRUCTOR INFORMATION

Instructor: Roberta Jacobs, PhD, LPC-S
Office Location: Metroplex/Mesquite
Office Hours: By Appointment
Email Address: bbiejacobs_@hotmail.com
Preferred Form of Communication: Text
Phone Number: (903) 274-9901
Communication Response Time: 24-48 hours, Monday – Friday
Class Time and Location: Mondays – 7:20 pm – 10:10 pm —Metroplex

COURSE INFORMATION

Materials –Textbooks, Readings, Supplementary Readings

Required Textbooks
American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders.* (5th ed.) Washington, DC: Author.

MacCluskie, K. C., & Ingersoll, R. E. (2001). *Becoming a 21st century agency counselor.* Belmont: Wadsworth. (Shredded)

Seligman, L. (2004) *Diagnosis and treatment planning in counseling.* (3rd ed.), (shredded). New York: Kluwer Academic/Plenum Press. (Shredded)

Watson, J. C., & Schmit, M. K. (2020) *Introduction to Clinical Mental Health Counseling.* Los Angeles: SAGE Publications, Inc.

COURSE DESCRIPTION

Catalogue Description of the Course
COUN 530 – Clinical Mental Health Counseling. Three semester hours.
As the foundation course for those planning to be counselors in mental health setting, this course includes theoretical and applied information regarding mental health counseling services in the context of the larger social services system. A variety of delivery systems, staffing procedures, case management procedures, emergency services, treatment paradigms, and the need for consultation and collaboration among mental health professionals are discussed. Prerequisites:

Successful completion of Level 1 Counseling Courses (COUN 501, 510, 516, 528) and Level 1 Examination or consent of instructor.

General Course Information
Clinical mental health counseling is based on the premises that counseling helps clients to identify, develop, and use a variety of resources to achieve goals, and that the desired outcomes of counseling are positive change, person growth, and the acquisition of coping mechanisms and skills. The course examines the identity, professional standards, professional organizations, and employment settings of the professional counselor. Models of problem definition, administrative structure, and service delivery in the clinical mental health settings will be explored.

Student Learning Outcomes

2016 CACREP Standards Addressed in COUN 530

Doctoral Standard	Learning Activity or Assignment	Assessment	Assessment Rubric	Benchmark
5.C.1.a. history and development of clinical mental health counseling	Lecture Notes, Readings, Threaded Discussion Prompt MacCluskie et al (2001) Chapters 1, 2, 3, & 6; Seligman (2004) Chapters 1, 2, & 13; Watson, et al (2020) Chapter 2	1. Threaded Discussion Rubric 2. Knowledge: Exam 1	1. Threaded Discussion Rubric 2. N/A	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation 2. ≥80% will score ≥80% on knowledge exam 1
5.C.2.l. legal and ethical considerations specific to clinical mental health counseling	Readings: Seligman (2004) Chapter 12; Watson et al (2020) Chapters 4 & 5; 2014 ACA Code of Ethics; 2019 LPC Code of Ethics; Current Texas Health and Safety Code & Texas & Family Code	1. Threaded Discussion Rubric 2. Knowledge Exam 1 3. Project A: Ethics	1. Threaded Discussion Rubric 2. N/A 3. Project A: Ethics Rubric	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation 2. ≥80% will score ≥80% on knowledge exam 1 3. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation for Project A: Ethics
5.C.2.a. roles and settings of clinical mental health counselors 5.C.2.c. mental health service	Readings: MacCluskie et al (2001). Chapters 1, 2, 3, & 6; Seligman (2004) Chapters	1. Threaded Discussion 2. Knowledge Exam 1	1. Threaded Discussion Rubric 2. N/A	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation

delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks	1, 2, & 13; Watson et al (2020) Chapter 1			2. ≥80% will score ≥80% on knowledge exam 1
5.C.2.k. professional organizations, preparation standards, and credentials relevant to the practice of clinical mental health counseling	Readings: MacCluskie et al. (2001) Chapters 1, 2, 3, & 6; Selected Professional Organizations' website; Seligman (2004) Chapters 1, 2, & 13; Watson et al (2020)	1. Threaded Discussion 2. Knowledge Exam 1	1. Threaded Discussion Rubric 2. N/A	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation 2. ≥80% will score ≥80% on knowledge exam
5.C.2.m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling	Readings: Seligman (2004) Chapter 11; selected SOAP note and practice management platform websites; MacCluskie et al (2001) Chapters 7 & 8; Watson et al (2020) Chapters 6 & 7	1. Threaded Discussion 2. Project E: Sicko 3. Project F: Professional Interviews	1. Threaded Discussion Rubric 2. Project E: Sicko Rubric 3. Project F: Professional Interviews Rubric	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation 2. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation on Project E: Sicko rubric 3. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation of Project F: Professional Interviews rubric
5.C.2.i. legislation and government policy relevant to clinical mental health counseling	Readings: MacCluskie et al (2001) Chapters 2, 3, & 6; Watson et al (2020) Chapter 4; Selected websites (TCA public policy; ACA public	1. Threaded Discussion: Advocacy Prompt 2. Knowledge Exam 1	1. Threaded Discussion rubric 2. N/A	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation on advocacy prompt 2. ≥80% will score ≥80% on

	policy); NAMI and other advocacy groups mentioned in lecture notes			knowledge exam
5.C.1.b. theories and models related to clinical mental health counseling	Readings: MacCluskie et al (2001) Chapters 2, 3, & 6; Watson et al (2020) Chapters 3 & 14	1. Threaded Discussion 2. Knowledge Exam 2	1. Threaded Discussion rubric 2. N/A	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation 2. ≥80% will score ≥80% on knowledge exam 2
5.C.2.c. mental health service delivery modalities within the continuum of care, such as impatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks	Readings: MacCluskie et al (2001) Chapters 2, 3, & 6; Watson et al (2020) chpaters 3 & 14; Project D Assignment	1. Threaded Discussion 2. Project D: Intervention 3. Knowledge Exam 2	1. Threaded Discussion rubric 2. Project D: Intervention rubric 3. N/A	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation 2. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation on Project D: Intervention rubric 3. ≥80% will score ≥80% on knowledge exam 2
2.F.5.i development of measurable outcomes for clients	Lecture notes and selected online sites; Readings: MacCluskie et al (2001) Chapter 5; Seligman (2004) Chapters 4 & 5 minus dated DSM material; Watson et al (2020) Chapter 14	1. Threaded Discussion 2. Project B: Diagnosis Conceptualization 3. Project C: Treatment Plan 4. Knowledge Exam 2	1. Threaded Discussion rubric 2. Project B: Diagnosis Rubric 3. Project C: Treatment rubric 4. N/A	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation 2. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation on Project B: Diagnosis 3. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation on Project C: Treatment

				Planning 4. ≥80% will score ≥80% on knowledge exam
2.F.5.k. strategies to promote client understanding of and access to a variety of community-based resources	Readings: Selected websites on community-based resources; DSM-5 Appendix; Seligman (2004) Chapter 3	1. Threaded Discussion	1. Threaded Discussion rubric	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation.
5.C.2.j. cultural factors relevant to clinical mental health counseling	Readings: Selected websites; DSM-5 Appendix; Seligman (2004) Chapter 3; Watson et al (2020) Chapter 15	1. Threaded Discussion	1. Threaded Discussion rubric	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation.
2.F.5.j. evidence based counseling strategies and techniques for prevention and intervention	Readings: MacCluskie et al (2001) Chapter 5; Seligman (2004) Chapters 3, 4, & 5; DSM-5 Appendix; Watson et al (2020) Chapters 3 & 14	1. Threaded Discussion on Assessment	1. Threaded Discussion on Assessment rubric	1. ≥80% of average rubric scores will either meet (2) or exceed (3) expectation on Assessment rubric

Content areas include, but are not limited to, the following:
I.   The role(s), functions, and professional identity of counselor in a variety of clinical mental health practice settings.
II. The structures and operations of professional organizations, preparation/accreditation's boards, and credentialing bodies related to clinical mental health counseling.
III. Pertinent developments in historical, philosophical, societal, cultural, economic, and political contributions to the mental health movement.
IV. Appropriate behavior with regard to ethical and legal issues in the practice of clinical mental health counseling. Demonstration of such behavior may also be required.
V.   Implications of professional issues unique to clinical mental health counseling including but not limited to recognition, reimbursement, and right to practice.
VI. Implications of diversity issues relevant to clinical mental health counseling.
VII. The clinical mental health counselor's relationship to other professionals in various settings.

VIII. Organizational, administrative, fiscal, and legal dimensions of clinical mental health practice settings and institutions.

IX. Theories and techniques of needs assessment in designing, implementing, and evaluating clinical mental health counseling interventions, programs, and systems.

X. Linkages with other entities with regard to consultation, education, and outreach.

XI. The need for and process of creating and developing human services programs and networks, public, private, and volunteer, in local communities.

XII. Characteristics of individuals seeking clinical mental health counseling services, including but not limited to the effects of socioeconomic status, unemployment, aging, gender, culture, race, ethnicity, chronic illness, developmental transitions, and interpersonal, family, and community violence.

XIII. Principles of program development and service delivery for a clinical mental health practitioner's clientele, including but not limited to prevention, implementation of support groups, peer facilitation training, parent education, career information and counseling, and encouragement.

Students will identify, describe, explain, and/or demonstrate:

XIV. Effective strategies to promote client understanding of an access to community resources.

XV. Principles and models of biopsychosocial assessment, including techniques, and/or methods for conducting an intake interview, case-conceptualization, theories of human development and concepts of normalcy and psychopathology leading to diagnoses and appropriate treatment plans with regard to planning counseling interventions and tracking client progress.

XVI. Knowledge of the principles of diagnosis and the use of current diagnostic tools, including the current edition of the Diagnostic and Statistical Manual

XVII. Appropriate and effective strategies for client advocacy in public policy and governmental relations.

XVIII. Application of appropriate treatment modalities for initiating, maintaining, and terminating counseling, including the use of crisis intervention, brief, intermediate, and long-term approaches.

Course Requirements

Minimal Technical Skills Needed
In this class, you will utilize the Learning Management System (LMS) entitles D2L for portions of the instructional and learning methods and submitting assignments. You will need to utilize other technologies such as Microsoft Word, PowerPoint, etc. If you have issues with this system, it is your responsibility to contact the help desk immediately.

Instructional Methods
This course consists of an online format (D2L), with lecture and didactic learning methods, small group discussions, and assignments couples with practical application projects.

Student Responsibilities or Tips for Success in the Course

As a student in this course, you are responsible for the active learning process. Expectations of this course include the following:

1. You are expected to display professionalism at all times. Be respectful to your professor and peers. Be open feedback, as you will receive this throughout the program.
2. Prepare for classes. Complete any and all reading prior to class time.
3. Complete all assignments by the deadline.
4. Adhere to the university student code of conduct.
5. Participate. During face-to-face classes, you are expected to actively participate in all activities and discussion. In the online format, you are expected to participate in all online discussions/activities. This is crucial to your learning.
6. All writing assignments must be done according to APA 6th edition.
7. Regularly check your university email. My suggestion is to check it at least once a day as your instructors and others from the department and university may contact you.
8. Begin your readings ASAP. Sometimes it may take more than one attempt to digest the material.
9. Deadlines are the last possible moment something is due – not the first moment to start. Work ahead. I realize this may not always be possible; however, when you can, do so.
10. Be open to the process. This degree takes time, work, effort, and growth.

Assignments/Assessments

***Note: All assignments are to be submitted in D2L
1. **Threaded Discussion (1 point each: 10 points total).** Appropriate (as defined by instructor) level of interaction/participation during online discussions and presentations is expected. Concerns/infractions will be addressed individually by the instructor and recommendations made.

Students are expected to actively participate in and contribute to their learning experience. Active participation includes completing text readings and activity assignments in each unit and offering thoughtful contributions to online discussion. For each student, participation in discussion boards will NOT be determined by LENGTH of response, but by the level of thought put into the postings, the relevancy of the posting to the discussion, and the number of **thoughtful and relevant** postings. Students will be expected to respond to weekly discussion posts and also at least one post to a peer's per week to facilitate more of an interactive discussion. The Participation portion of your grade includes the Discussion Boards found under each week, and under Course Home. Some of your responses to discussion boards will be counted as projects listed below.

The rubrics for discussion board posts are below. These posts occur weekly, unless otherwise specified under Contents and week found in our D2L course are due by **Saturday 11:59 pm of each week,** again unless specified in a particular week.

Please be aware of discussion post for week 2 is: **Threaded Discussion on Professional Issues** and discussion post for week 10 is: **Threaded Discussion on Assessment.** The rubric used to evaluate both key assignments is the same rubric used to evaluate weekly threaded discussion posts. See rubric titled **Threaded Discussion Post Rubric (Key Assessment 28: Threaded Discussion on Assessment Rubric & Key Assessment 27: Threaded Discussion on Professional Issues)** below.

Note. Participation includes the ability of the student to interact with the professor and peers in a professional and respectful manner. Failure to do so will result in points being deducted from your final grade.

Threaded Discussion Post Rubric (AND: Threaded Discussion on Assessment Rubric AND: Threaded Discussion on Professional Issues Rubric)

	1 – Does Not Meet Expectation (0 Points)	2 – Meets Expectation (1 Point)	3 – Exceeds Expectation (1 Point)
Discussion Post Qualities	No post for the topic. Post is not complete, not written in a clear manner OR post is missing critical components of the questions OR is discussed in an illogical/inconsistent manner. Post has several grammatical/APA errors; not consistent with graduate level work.	Post present most elements of the question OR all elements discussed in a brief manner. Post is evident of graduate level work with some grammatical/APA errors. Adds response to peer's post.	Post presents all elements of the question(s) discussed thoroughly and clearly. Post is evident of graduate level work with few to no grammatical/APA errors. Adds response to peer's post.

2. **Exam 1 and Exam 2 (200 points total; 100 points each exam**): Two multiple-choice exams (~50 questions each.), with a section of application questions (~2). Students will demonstrate knowledge content areas on midterm and final exams. The exams will be multiple choice and short essay/application **over material in assigned readings and activity assignments** in units. Exams will be administered on-line. I expect the time allowed for each exam to be about two hours, however this will be determined after the exams are developed. You will have at least a 48-hour period within which you can take the exam. Instructions will be posted in D2L.

Exam 1 & Exam 2 Rubric

Exams	1 – Does Not Meet Expectation <80	2 – Meets Expectation 80-89	3 – Exceeds Expectation >89
Graded average (based on 100 points total)	Less than 80% correct on the exam	Between 80% and 89% correct on the exam	Greater than 89% correct on the exam

3. **Activities/Projects.** (all graded satisfactory/unsatisfactory based on rubric below): **Project A: Ethical Case Opinion.** Four ethical cases will be posted for student comment. Students will be assigned to one of two groups and will complete an opinion statement for two of the ethical cases presented and place in the "dropbox" by the deadline indicated. Students will be graded according to the level of thought put into the opinion and the accuracy of the content of their

opinion. Download completed <u>Ethical Opinion Directions</u> provided under "handouts" in the Ethics' week section of the course.

Project A: Ethics Opinion Rubrics

	1 – Does Not Meet Expectation (0 Points)	2 – Meets Expectation (1 Point)	3 – Exceeds Expectation (1 Point)
Ethical Cases	Did not complete the project. Project is not complete, not written in a clear manner OR opinion is missing critical components (relevant ethical standards) for the cases; is discussed in an illogical/inconsistent manner. Project has several grammatical/APA errors; not consistent with graduate level work.	Project presents most elements of the project guidelines OR all elements (standards) discussed in a brief manner. Project is evident of graduate level work with some grammatical/APA errors.	Project presents all elements (relevant standards) of the cases discussed thoroughly and clearly. Post is evident of graduate level work with few to no grammatical/APA errors.

4. **Project B: Diagnostic Conceptualization.** Two case studies will be provided with an example as to how to approach a diagnostic assessment. Place completed cases in "dropbox" section of the course listed under activities of the week listed as Diagnoses, by due date listed on syllabus.

Project B: Diagnostic Conceptualization Rubric

	1 – Does Not Meet Expectation (0 Points)	2 – Meets Expectation (1 Point)	3 – Exceeds Expectation (1 Point)
Diagnostic Cases	Did not complete the project. Project is not complete, not written in a clear manner OR opinion is missing critical components (diagnostic criteria) for the cases; is discussed in an illogical/inconsistent manner. Project has several DSM errors; not consistent with mastery of diagnostic work.	Project presents most elements of the project guidelines OR all elements (DSM criteria for diagnosis) discussed in a brief manner. Project is evident of graduate level diagnostic work.	Project presents all elements (DSM criteria for diagnosis) of the cases; rationale discussed thoroughly and clearly. Post is evident of mastery level diagnostic work.

5. **Project C: Treatment Planning.** Developed from a hypothetical case. Again, an outline will be provided to you for this project. Place in "dropbox" activity section of course, listed under Project C Treatment Plan submodule under contents, by due date listed on syllabus.

Project C: Treatment Planning Rubric

	1 – Does Not Meet Expectation (0 Points)	2 – Meets Expectation (1 Point)	3 – Exceeds Expectation (1 Point)
Treatment Plan	Did not complete the project. Project is not complete, not written in a clear manner OR opinion is missing critical components (problem definition, goal, objectives, strategies) for the cases; is discussed in an illogical/inconsistent manner.	Project presents most elements of the project guidelines OR all elements (problem definition, goal, objectives, strategies) written in objective, measurable terms such that plan could be implemented. Project is evident of graduate level work.	Project presents all elements of a good working treatment plan. Rationale discussed thoroughly and clearly in objective, measurable terms such that plan could be implemented as is. Project is evident of graduate level work.

6. **Project D: Intervention Program.** View an Intervention program on A&E, also available online via YouTube channel. After you have viewed program, please go to Course Home, click on Contents, Project D activity, Intervention (listed as a submodule), and post your comments about the program by the due date listed on syllabus. For a schedule of Intervention programs, check your local listings.

Project D: Intervention Program Rubric

	1 – Does Not Meet Expectation (0 Points)	2 – Meets Expectation (1 Point)	3 – Exceeds Expectation (1 Point)
Intervention	Did not complete the project. Project is not complete; not written in a clear, measurable manner; is presented in an illogical/inconsistent manner; numerous grammatical errors.	Project completed. Adequate critique of selected Intervention program. Project write up is evident of graduate level work.	Project represents a good working critique of the selected Intervention program. Rationale in critique discussed thoroughly and clearly. Project is evident of graduate level work.

7. **Project E: Sicko.** View and respond to questions related to **"Sicko,"** a film documentary directed by Michael Moore. After you have viewed the documentary, please go to the Course Home, click on Contents **Project E "Sicko"** and post your thoughts about the documentary in relation to the issues raised in your readings under Reimbursement and Managed Care. **Relate your responses to these issues.**

Project E: Sicko Rubric

	1 – Does Not Meet Expectation (0 Points)	2 – Meets Expectation (1 Point)	3 – Exceeds Expectation (1 Point)
Sicko	Did not complete the project. Project is not complete; not written in a clear, measurable manner; is presented in an illogical/inconsistent	Project completed. Adequate critique of selected Intervention program. Project write up is evident of graduate level work.	Project represents a good working critique of the selected Intervention program. Rationale in critique discussed thoroughly and clearly.

	manner; numerous grammatical errors.		Project is evident of graduate level work.

8. **Project F: Professional Interviews Rubric.** Structured Professional Interviews with knowledgeable representatives of **two** community mental health settings, one publicly funded and the other private. Details of how you will do this project, the product of which you will type using a consistent format such as that in the APA's *Publication Manual,* will be distributed in a separate document to be found in the "handouts" under documents tab in the course. Students will place in "dropbox" section and post relevant information from their interviews on the discussion board listed as such under Course Home.

Project F: Professional Interviews Rubric

	1 – Does Not Meet Expectation (0 Points)	2 – Meets Expectation (1 Point)	3 – Exceeds Expectation (1 Point)
Interviews	Did not complete the project. Project is not complete; not written in a clear, measurable manner; did not follow guideline questions; is presented in an illogical/inconsistent manner; numerous grammatical errors.	Project completed. Adequate compare/contrast of for profit/non-profit entities and professionals working in such centers. Project write up is evident of graduate level work.	Project represents a good working compare/contrast of reported for profit/non-profit entities. Professional's role discussed thoroughly and clearly. Project is evident of graduate level work.

GRADING

To earn a/an: You must have a test grade average of:

     A   90% - 100% and completion of all projects
     B   80% - 89% and complete projects A, B, C, & D

COURSE AND UNIVERSITY PROCEDURES/POLICIES

Course Specific Procedures/Policies
Written assignments are due on the day noted in the syllabus. All papers are due at the beginning of the class period. Late papers will have 10% deduction per day late from the final score.

Syllabus Change Policy
The syllabus is a guide. Circumstances and events, such as student progress, may make it necessary for the instructor to modify the syllabus during the semester. Any changes made to the syllabus will be announced in advance.

<div align="center">**University Specific Procedures**</div>

<div align="center">**Student Conduct**</div>

All students enrolled at the University shall follow the tenets of common decency and acceptable behavior conducive to a positive learning environment. The Code of Student Conduct is described in detail in the Student Guidebook.
http://www.tamuc.edu/Admissions/oneStopShop/undergraduateAdmissions/studentGuidebook.aspx

Students should also consult the Rules of Netiquette for more information regarding how to interact with students in an online forum: Netiquette:
http://www.albion.com/netiquette/corerules.html

<div align="center">**TAMUC Attendance**</div>

Fore more information about the attendance policy, please visit the Attendance webpage and Procedure 13.99.99.R0.01
http://www.tamuc.edu/admissions/registrar/generalInformation/attendance.aspx

http://www.tamuc.edu/aboutUs/policiesProceduresStandardsStatements/rulesProcedures/13students/academic/13.99.99.R0.01.pdf

<div align="center">**Academic Integrity**</div>

Students at Texas A&M University-Commerce are expected to maintain high standards of integrity and honesty in all of their scholastic work. For more details and the definition of academic dishonesty, see the following procedures:

Undergraduate Academic Dishonesty 13.99.99.R0.03
http://www.tamuc.edu/aboutUs/policiesProceduresStandardsStatements/rulesProcedures/13students/undergraduates/13.99.99.R0.03UndergraduateAcademicDishonesty.pdf

Graduate Student Academic Dishonesty 13.99.99.R0.10
http://www.tamuc.edu/aboutUs/policiesProceduresStandardsStatements/rulesProcedured/13students/graduate/13.99.99.R0.10GraduateStudentAcademicDishonesty.pdf

<div align="center">**ADA Statement**</div>

<div align="center">**Student with Disabilities**</div>

The American with Disabilities Act (ADA) is a federal anti-discrimination statute that provides comprehensive civil rights protection for persons with disabilities. Among other things, this legislation requires that all students with disabilities be guaranteed a learning environment that provides for reasonable accommodation of their disabilities. If you have a disability requiring an accommodation please contact:

Office of Student Disability Resources and Services
Texas A&M University – Commerce

Gee Library – Room 162
Phone (903) 886-5150 or (903) 886-5835
Fax (903) 468-8148
Email: studentdisabilityservices@tamuc.edu
Website: Office of Student Disability Resources and Services
http://www.tamuc.edu/campusLife/campusServices/studentDisabilityResourcesAndServices/

Nondiscrimination Notice

Texas A&M University –Commerce will comply in the classroom, and in online courses, with all federal and state laws prohibiting discrimination and related retaliation on the basis of race, color, religion, sex, national origin, disability, age, genetic information, or veteran status. Further, an environment free from discrimination on the basis of sexual orientation, gender identity, or gender expression will be maintained.

Campus Concealed Carry Statement

Texas Senate Bill – 11 9 Government Code 411.2031, et al.) authorizes the carrying of a concealed handgun in Texas A&M University – Commerce buildings only by persons who have been issued and are in possession of a Texas License to Carry a Handgun. Qualified law enforcement officers or those who are otherwise authorized to carry a concealed handgun in the State of Texas are also permitted to do so. Pursuant to Penal Code (PC) 46.035 and A&M – Commerce Rule 34.06.02.R1, license holders may not carry a concealed handgun in restricted locations.

For a list of locations, please refer to the Carrying Concealed Handguns On Campus document and/or consult your event organizer.

Web URL:
http://www.tamuc.edu/aboutUs/policiesProceduresStandardsStatements/rulesProcedures/34Safet yOfEmployeesAndStudents/34.06.02.R1.pdf

Pursuant to PC 46.035, the open carrying of handguns is prohibited on all A&M – Commerce campuses. Report violations to the University Police Department at (903) 886-5868 or 9-1-1.

COURSE OUTLINE/CALENDAR

Course Calendar

Date	Topic	CACREP Standard(s)	Readings	Assignments
Week 1	Introductions, Course overview and expectations; history of mental health movement, future directions for mental health counselors	5.C.1.a	MacCluskie et al (2001) Chapters 1, 2, 3, & 6; Seligman (2004) Chapters 1, 2, & 13; Watson et al (2020) Chapters 2	Discussion Week 1
Week 2	Role of research professional identity-training, roles, associations, accreditations, and licensure; employment settings	5.C.2.a. 5.C.2.c. 5.C.2.k.	MacCluskie et al (2001) Chapters 1, 2, 3, & 6; Selected professional organizations' websites; Seligman (2004) Chapters 1, 2, & 13; Watson et al (2020) Chapter 1	Discussion Week 2
Week 3	Right to practice and advocacy	5.C.2.i.	MacCluskie et al (2001) Chapters 2, 3, & 6; Watson et al (2020) Chapter 4; Selected websites (TCA public policy; ACA public policy); NAMI and other advocacy groups mentioned in lecture notes	Discussion Week 3
Week 4	Self in the role of counselor		MacCluskie et al (2001) Chapters 2, 3, & 6	Discussion Week 4
Week 5	Ethical and legal issues	5.C.2.l.	Seligman (2004) Chapter 12; ACA code of ethics, LPC code; State of Texas Health and Safety Code; State of Texas Family Code	Discussion Week 5
Week 6	Exam 1			Exam 1 due
Week 7	Diagnosis (dx): Treatment strategies	2.F.5.j. 5.C.1.b.	MacCluskie et al (2001) Chapters 2, 3, 5, & 6; Seligman (2004) Chapters 3, 4, & 5; DSM-5 Appendix; Watson et al (2020) Chapters 3 & 14	Discussion Week 8
Week 8	Diagnosis and application of treatment strategies	2.F.5.j.	MacCluskie et al (2001) Chapter 5; Seligman (2004)	Discussion Week 9; Diagnostic Conceptualization due

			Chapters 3, 4, & 5; DSM-5 Appendix; Watson et al (2020) Chapters 3 & 14	
Week 9	Psychopharmacology and case considerations		Lecture notes: selected website	
Week 10	Intake, assessment, and primary prevention; Treatment planning (Tx.)	2.F.5.i 5.C.2.j	Lecture notes and selected online sites; MacCluskie et al (2001) Chapter 5; Seligman (2004) Chapters 4, 5, 6, 8, & 9 minus dated DSM material; Watson et al (2020) Chapter 14	Assessment due
Week 11	Treatment planning (Tx.); application; cultural considerations	2.F.5.i 5.C.2.j.	Lecture notes and selected online sites; MacCluskie et al (2001) Chapter 5; Seligman et al (2004) Chapters 3, 4, & 5 minus dated DSM material; Watson et al (2020) Chapters 14 & 15	Treatment Planning due
Week 12	Exam 2			
Week 13	**Observance of Thanksgiving**	**REFLECT**	**BE THANKFUL**	**REJUVENATE**
Week 14	Practice policies: Record keeping; consultation and supervision; case management, coordination with other professionals; Referrals	5.C.2.m. 2.F.5.k	Seligman et al (2004) Chapters 3 & 11; selected SOAP note and practice management platform websites; MacCluskie et al (2001) Chapters 7 & 8; Watson et al (2020) Chapters 6 & 7; Selected websites on community based resources; DSM-5 Appendix	
Week 15	Reimbursement; Funding, politics, & the role of managed care	5.C.2.m.	Seligman et al (2004) Chapter 11; selected SOAP note and practice management platform websites; MacCluskie et al (2001) Chapters 7 & 8; Watson et al (2020) Chapters 6 & 7	