



TEXAS A&M UNIVERSITY  
**COMMERCE**

## **COUN 530: CLINICAL MENTAL HEALTH COUNSELING**

*Course Syllabus: Summer II 2024 (July 8 – August 8)*

*Monday/Wednesday, 5:00 to 9:30 PM, Mesquite  
Metroplex Room TBA*

### **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**  
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## **INSTRUCTOR INFORMATION**

**Instructor:** Dr. Karl Vonzell Mitchell, NCC, LCDC, LPCA

**University Email Address:** [Karl.Mitchell@tamuc.edu](mailto:Karl.Mitchell@tamuc.edu)  
<https://www.tamuc.edu/people/karl-mitchell-ph-d/>

**Preferred Form of Communication:** E-mail  
**Communication Response Time:** 24 hours Monday - Friday

**Main Office Location:** Commerce, Binnion 219  
**Office Hours:** By appointment

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## **COURSE INFORMATION**

### **Materials – Textbooks, Readings, Supplementary Readings**

#### **Required Textbooks**

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Author.

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

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

Watson, J. C., & Schmit, M. K. (2020). *Introduction to Clinical Mental Health Counseling*. 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 settings, 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, personal 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 clinical mental health settings will be explored.

#### **Student Learning Outcomes (SLOs):**

Measurement 1 (Knowledge): Two multiple-choice exams (50 questions each). This is the multiple-choice section of the exam based on knowledge acquired over material covered via texts, outside links, and lecture notes.

Measurement 2 (Skills): Two Exams:

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Exam I: Using similar format as your ethics' project review and then deliberate and respond to the presented two case scenarios. You may also use notes, books, webpages, ethical codes, etc. to guide your responses.

Exam II: Using a similar format as your diagnostic project, develop formal diagnoses for case #1 and #2, and complete a Case Study Diagnostic Worksheet for each of these cases.

\*All SLOs address the respective CACREP Standards evident in the syllabus.

**2016 CACREP Standards Addressed in COUN 530**

Doctoral Standard	Learning Activity	Assessment	Assessment Rubric	Benchmark
2.F.5.i. development of measurable outcomes for clients	<ul style="list-style-type: none"> <li>Lecture (week 11-13)</li> <li>MacCluskie &amp; Ingersoll (2001) Chap. 5; Seligman (2004), Chap. 4 &amp; 5 minus dated DSM material; Watson &amp; Schmit (2020) Chap 14</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion</li> <li>Project B: Diagnosis Conceptualization</li> <li>Project C: Treatment Plan</li> <li>Knowledge: Exam 2</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> <li>Project B: Diagnosis Rubric</li> <li>Project C: Treatment Plan Rubric</li> <li>n/a</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation</li> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation on Project B: Diagnosis</li> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation on Project C: Treatment Planning</li> <li>≥80% will score ≥ 80% on knowledge exam 2</li> </ol>
2.F.5.j. evidence-based counseling strategies and techniques for prevention and intervention	<ul style="list-style-type: none"> <li>MacCluskie &amp; Ingersoll Chap. 5; Seligman (2004) Chap 3,4 &amp; 5; DSM-5 Appendix; Watson &amp; Schmit (2020) Chap 3, 14</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion on Assessment</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion on Assessment Rubric</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation on Assessment rubric</li> </ol>
2.F.5.k. strategies to promote client understanding of and access to a variety of community-based resources	<ul style="list-style-type: none"> <li>Selected websites on community-based resources</li> <li>Readings: DSM-5 Appendix; Seligman (2004) Chap. 3</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussions 3</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation</li> </ol>
5.C.1.a. history and development of clinical mental health counseling	<ul style="list-style-type: none"> <li>Lecture Notes, Threaded Discussion Prompts 1</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion 1</li> <li>Knowledge Exam 1</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or</li> </ol>

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	<ul style="list-style-type: none"> <li>Readings: MacCluskie &amp; Ingersoll (2001) Chapters 1, 2, 3, &amp; 6; Seligman (2004) Chapters 1, 2, 13; Watson &amp; Schmit (2020) Chapter 2</li> </ul>		2. n/a	<ul style="list-style-type: none"> <li>exceed (3) expectation</li> <li>2. ≥80% will score ≥ 80% on knowledge exam 1</li> </ul>
<b>5.C.1.b.</b> theories and models related to clinical mental health counseling	<ul style="list-style-type: none"> <li>MacCluskie &amp; Ingersoll (2001) Chap. 2, 3, &amp; 6; Watson &amp; Schmit (2020), Chap 3, 14</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion 2</li> <li>Knowledge Exam 2</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> <li>n/a</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation</li> <li>≥80% will score ≥ 80% on knowledge exam 2</li> </ol>
<b>5.C.2.a.</b> roles and settings of clinical mental health counselors	<ul style="list-style-type: none"> <li>Readings: MacCluskie &amp; Ingersoll (2001) Chap. 1, 2, 3, &amp; 6; Seligman (2004) Chap. 1, 2, &amp; 13; Watson &amp; Schmit (2020) Chapter 1</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion</li> <li>Knowledge Exam 1</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> <li>n/a</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation</li> <li>≥80% will score ≥ 80% on knowledge exam 1</li> </ol>
<b>5.C.2.c.</b> mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks	<ul style="list-style-type: none"> <li>MacCluskie &amp; Ingersoll (2001) Chap. 2, 3, &amp; 6; Watson &amp; Schmit (2020) Chap 3, 14</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion 1</li> <li>Project D: Intervention</li> <li>Knowledge Exam 2</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> <li>Project D: Intervention Rubrics</li> <li>n/a</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation</li> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation on Project D: Intervention rubrics</li> <li>≥80% will score ≥ 80% on knowledge exam 2</li> </ol>
<b>5.C.2.i.</b> legislation and government policy relevant to clinical mental health counseling	<ul style="list-style-type: none"> <li>MacCluskie &amp; Ingersoll (2001) Chap. 2, 3, &amp; 6; Watson &amp; Schmit (2020) Chap. 4</li> <li>Additional Resources: Selected websites (TCA public policy; ACA public policy); NAMI and other advocacy groups mentioned in lecture notes</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion: Advocacy prompt</li> <li>Knowledge Exam 1</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> <li>n/a</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation on advocacy prompt</li> <li>≥80% will score ≥ 80% on knowledge exam 1</li> </ol>
<b>5.C.2.j.</b> cultural factors relevant to clinical mental health counseling	<ul style="list-style-type: none"> <li>Selected websites (counseling.org)</li> <li>DSM-5 Appendix; Seligman (2004) Chap. 3;</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion 2</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation</li> </ol>



	Watson & Schmit (2020), Chap 15			
<b>5.C.2.k.</b> professional organizations, preparation standards, and credentials relevant to the practice of clinical mental health counseling	<ul style="list-style-type: none"> <li>Readings: MacCluskie &amp; Ingersoll (2001) Chap. 1, 2, 3, &amp; 6; Seligman (2004) Chap. 1, 2, &amp; 13; Watson &amp; Schmit (2020)</li> <li>Additional Readings: Selected Professional organizations' websites</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion 1</li> <li>Knowledge Exam 1</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> <li>n/a</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation</li> <li>≥80% will score ≥ 80% on knowledge exam 1</li> </ol>
<b>5.C.2.l.</b> legal and ethical considerations specific to clinical mental health counseling	<ul style="list-style-type: none"> <li>Readings: Seligman (2004) Chapter 12; Watson &amp; Schmit (2020) Chapters 4,5;</li> <li>Additional Readings: 2014 ACA Code of Ethics; 2019 LPC Code of Ethics; Current Texas Health and Safety Code &amp; Texas Family Code</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion 2</li> <li>Knowledge Exam 1</li> <li>Project A: Ethics</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> <li>n/a</li> <li>Project A: Ethics Rubric</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation</li> <li>≥80% will score ≥ 80% on knowledge exam 1</li> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation for Project A: Ethics</li> </ol>
<b>5.C.2.m.</b> record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling	<ul style="list-style-type: none"> <li>Readings: Seligman (2004) Chap. 11; MacCluskie &amp; Ingersoll (2001) Chap. 7 &amp; 8; Watson &amp; Schmit (2020) Chap 6 &amp; 7</li> <li>Additional Resources: Selected SOAP note and practice management platform websites</li> </ul>	<ol style="list-style-type: none"> <li>Threaded Discussion 3</li> <li>Project E: Sicko</li> <li>Project F: Professional Interviews</li> </ol>	<ol style="list-style-type: none"> <li>Threaded Discussion Rubric</li> <li>Project E: Sicko Rubric</li> <li>Project F: Professional Interviews Rubric</li> </ol>	<ol style="list-style-type: none"> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation</li> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation on Project E Sicko rubrics</li> <li>≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation on Project F: Professional Interviews rubric</li> </ol>

**Program Learning Objectives (PLOs):**

- I. The role(s), functions, and professional identity of counselors 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.

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- 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 of self-help.

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

- XIV. Effective strategies to promote client understanding of and 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) entitled D2L for portions of instructional and learning methods, submitting assignments, participating in online discussions, and completing quizzes. 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 a fully online format (D2L), with lecture and didactic learning methods, small group discussions, and assignments coupled 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 to feedback, as you will receive this throughout the program.
2. Prepare for classes. Complete any and all readings 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 6<sup>th</sup> 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 Discussions (10 points each; 30 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

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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 as 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 11:59pm of each week**, again unless otherwise 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 post. See rubric titled **Threaded Discussion Post Rubric (Key Assessment 28: Threaded Discussion on Assessment Rubric & Key Assessment 27: Threaded Discussion on Professional Issues Rubric)** 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 &: Threaded Discussion on Professional Issues Rubric)**

	1 – Does Not Meet Expectation (0 points)	2 – Meets Expectation (24 points)	3 – Exceeds Expectations (30 points)
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 question OR is discussed in an illogical/inconsistent manner. Post has several grammatical/APA errors; not consistent with graduate level work	Post presents 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

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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 of 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 total points)	Less than 80% correct on exam	Between 80% and 89% correct on exam	Greater than 89% correct on exam

3. **Activities/Projects.** (all graded satisfactory/unsatisfactory based on rubric below):
- a. **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 complete Ethical Opinion Directions provided under “handouts” in the Ethics’ week section of course.

**Project A: Ethics Opinion Rubrics**

	1 – Does Not Meet Expectation (0 points)	2 – Meets Expectation (.8 point)	3 – Exceeds Expectations (1 point)
Ethical Cases	Project is not complete, not written in a clear manner OR opinion is missing; critical components (relevant ethical standards) for the cases are discussed in an illogical/inconsistent	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	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



	manner. Project has several grammatical/APA errors; not consistent with graduate level work	some grammatical/APA errors	errors.
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- b. **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 (.8 point)	3 – Exceeds Expectations (1 point)
Diagnostic Cases	Project is not complete, not written in a clear manner OR opinion is missing critical components (diagnostic criteria) for the cases; is presented in an illogical/inconsistent manner (criteria met not evidenced by case). Project has several DSM errors; not consistent with mastery of diagnostic work	Project presents most elements of the diagnostic case guidelines All elements (DSM criteria for diagnosis) discussed in a brief manner for each case. Project is evident of graduate level diagnostic work.	Project presents all elements (relevant DSM criteria for diagnosis) of the cases. Rationale discussed thoroughly and clearly. Project is evident of mastery of graduate level diagnostic work.

- c. **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 (.8 point)	3 – Exceeds Expectations (1 point)

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Treatment Plan	Project is not complete, not written in a clear, measurable manner OR plan is missing critical components (problem definition, goal, objectives, strategies) for the cases; is presented in an illogical/inconsistent manner	Project presents most elements of a workable treatment plan. 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.
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- d. **Project D: Intervention Program.** View an Intervention program on A&E, also available online via YouTube channel. After you have viewed a 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 (.8 point)	3 – Exceeds Expectations (1 point)
Intervention	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.

- e. **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 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 (.8 point)	3 – Exceeds Expectations (1 point)
Sicko	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.

- f. **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 “handouts” under documents tab in 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 (.8 point)	3 – Exceeds Expectations (1 point)
Interviews	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. Adequately compare/contrast 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 and 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
C	70%-79% and complete Projects A, B, & C

**Note.** Because the NCE for your licensure is competency based on a lot of this information you simply need to know it. Therefore, if you have less than a 90 average, you will not be able to earn an “A,” no matter how many projects you do. Similarly, if you have less than an 80 average, your course grade can be no higher than a “C.”

## TECHNOLOGY REQUIREMENTS

### Browser support

D2L is committed to performing key application testing when new browser versions are released. New and updated functionality is also tested against the latest version of supported browsers. However, due to the frequency of some browser releases, D2L cannot guarantee that each browser version will perform as expected. If you encounter any issues with any of the browser versions listed in the tables below, contact D2L Support, who will determine the best course of action for resolution. Reported issues are prioritized by supported browsers and then maintenance browsers.

Supported browsers are the latest or most recent browser versions that are tested against new versions of D2L products. Customers can report problems and receive support for issues. For an optimal experience, D2L recommends using supported browsers with D2L products.

Maintenance browsers are older browser versions that are not tested extensively against new versions of D2L products. Customers can still report problems and receive support for critical issues; however, D2L does not guarantee all issues will be addressed. A maintenance browser becomes officially unsupported after one year.

Note the following:

- Ensure that your browser has JavaScript and Cookies enabled.
- For desktop systems, you must have Adobe Flash Player 10.1 or greater.
- The Brightspace Support features are now optimized for production environments when using the Google Chrome browser, Apple Safari browser, Microsoft Edge browser, Microsoft Internet Explorer browser, and Mozilla Firefox browsers.



### Desktop Support

Browser	Supported Browser Version(s)	Maintenance Browser Version(s)
Microsoft® Edge	Latest	N/A
Microsoft® Internet Explorer®	N/A	11
Mozilla® Firefox®	Latest, ESR	N/A
Google® Chrome™	Latest	N/A
Apple® Safari®	Latest	N/A

### Tablet and Mobile Support

Device	Operating System	Browser	Supported Browser Version(s)
Android™	Android 4.4+	Chrome	Latest
Apple	iOS®	Safari, Chrome	The current major version of iOS (the latest minor or <b>point</b> release of that major version) and the previous major version of iOS (the latest minor or <b>point</b> release of that major version). For example, as of June 7, 2017, D2L supports iOS 10.3.2 and iOS 9.3.5, but not iOS 10.2.1, 9.0.2, or any other version.  Chrome: Latest version for the iOS browser.
Windows	Windows 10	Edge, Chrome, Firefox	Latest of all browsers, and Firefox ESR.

- You will need regular access to a computer with a broadband Internet connection. The minimum computer requirements are:
  - 512 MB of RAM, 1 GB or more preferred
  - Broadband connection required courses are heavily video intensive

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- Video display capable of high-color 16-bit display 1024 x 768 or higher resolution
- **For YouSeeU Sync Meeting sessions 8 Mbps is required.** Additional system requirements found here: <https://support.youseeu.com/hc/en-us/articles/115007031107-Basic-System-Requirements>
- You must have a:
  - Sound card, which is usually integrated into your desktop or laptop computer
  - Speakers or headphones.
  - \*For courses utilizing video-conferencing tools and/or an online proctoring solution, a webcam and microphone are required.
- Both versions of Java (32 bit and 64 bit) must be installed and up to date on your machine. At a minimum Java 7, update 51, is required to support the learning management system. The most current version of Java can be downloaded at: [JAVA web site](http://www.java.com/en/download/manual.jsp)  
<http://www.java.com/en/download/manual.jsp>
- Current anti-virus software must be installed and kept up to date.

Running the browser check will ensure your internet browser is supported.

Pop-ups are allowed.

JavaScript is enabled.

Cookies are enabled.

- You will need some additional free software (plug-ins) for enhanced web browsing. Ensure that you download the free versions of the following software:
  - [Adobe Reader](https://get.adobe.com/reader/) <https://get.adobe.com/reader/>
  - [Adobe Flash Player \(version 17 or later\)](https://get.adobe.com/flashplayer/) <https://get.adobe.com/flashplayer/>
  - [Adobe Shockwave Player](https://get.adobe.com/shockwave/) <https://get.adobe.com/shockwave/>
  - [Apple Quick Time](http://www.apple.com/quicktime/download/) <http://www.apple.com/quicktime/download/>
- At a minimum, you must have Microsoft Office 2013, 2010, 2007 or Open Office. Microsoft Office is the standard office productivity software utilized by faculty, students, and staff. Microsoft Word is the standard word processing software, Microsoft Excel is the standard spreadsheet software, and Microsoft PowerPoint is the standard presentation software. Copying and pasting, along with attaching/uploading documents for assignment submission, will also be required. If you do not have Microsoft Office, you can check with the bookstore to see if they have any student copies.

## **ACCESS AND NAVIGATION**

You will need your campus-wide ID (CWID) and password to log into the course. If you do not know your CWID or have forgotten your password, contact the Center for IT Excellence (CITE) at 903.468.6000 or [helpdesk@tamuc.edu](mailto:helpdesk@tamuc.edu).

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**Note:** Personal computer and internet connection problems do not excuse the requirement to complete all course work in a timely and satisfactory manner. Each student needs to have a backup method to deal with these inevitable problems. These methods might include the availability of a backup PC at home or work, the temporary use of a computer at a friend's home, the local library, office service companies, Starbucks, a TAMUC campus open computer lab, etc.

## **COMMUNICATION AND SUPPORT**

### **Brightspace Support**

#### **Need Help?**

#### **Student Support**

If you have any questions or are having difficulties with the course material, please contact your Instructor.

#### **Technical Support**

If you are having technical difficulty with any part of Brightspace, please contact Brightspace Technical Support at 1-877-325-7778 or click on the **Live Chat** or click on the words “click here” to submit an issue via email.



#### **System Maintenance**

Please note that on the 4th Sunday of each month there will be System Maintenance which means the system will not be available 12 pm-6 am CST.

#### **Interaction with Instructor Statement**

Communication with your professors is key to your professional growth. I am here to support and guide you along your academic journey. With that being said, I cannot help you if you do not communicate with me. Please make an appointment if you have any concerns or questions. Because I teach in different locations, email is the best way to reach me. I will attempt to answer all emails within 24 hours, Monday-Friday, but at times will need up to 72 hours to do so. When emailing, please use your university email and address me with courtesy and respect.

## **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.

*The syllabus/schedule are subject to change*





### **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.

### **University Specific Procedures**

#### **Student Conduct**

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>

#### **TAMUC Attendance**

For 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>

#### **Academic Integrity**

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/rulesProcedures/13students/graduate/13.99.99.R0.10GraduateStudentAcademicDishonesty.pdf>



## **ADA Statement**

### **Students with Disabilities**

The Americans 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](mailto: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 (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/34SafetyOfEmployeesAndStudents/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.

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**COURSE OUTLINE / CALENDAR**

Topical Outline subject to updates with notification:

**Course Calendar**

<b>Date</b>	<b>Topic</b>	<b>CACREP Standard(s)</b>	<b>Readings</b>	<b>Assignments</b>
Week 1	Introductions, Course Overview and Expectations; History of the mental health movement; Future Directions for Mental Health Counselors	<b>5.C.1.a.</b>	<ul style="list-style-type: none"> <li>• MacCluskie &amp; Ingersoll (2001) Chapters. 1, 2, 3, &amp; 6</li> <li>• Seligman (2004) Chapters 1,2 13</li> <li>• Watson &amp; Schmit (2020) Chapters 2</li> </ul>	Discussion 1
	Role of Research; Professional Identity-training, roles, associations, accreditation, and licensure; employment settings	<b>5.C.2.a.</b> <b>5.C.2.c.</b> <b>5.C.2.k.</b>	<ul style="list-style-type: none"> <li>• MacCluskie &amp; Ingersoll (2001) Chap. 1, 2, 3, &amp; 6</li> <li>• Selected Professional organizations' websites</li> <li>• Seligman (2004) Chap. 1, 2, &amp; 13</li> <li>• Watson &amp; Schmit (2020) Chap 1</li> </ul>	Threaded Discussion on Professional Issues
	Right to practice, and Advocacy	<b>5.C.2.i.</b>	<ul style="list-style-type: none"> <li>• MacCluskie &amp; Ingersoll (2001) Chap. 2, 3, &amp; 6</li> <li>• Watson &amp; Schmit (2020) Chap. 4</li> <li>• Selected websites (TCA public policy; ACA public policy); NAMI and other advocacy groups mentioned in lecture notes;</li> </ul>	
	Self in the role of Counselor		<ul style="list-style-type: none"> <li>• MacCluskie &amp; Ingersoll (2001) Chap. 2, 3, &amp; 6</li> </ul>	
Week 2	Ethical and legal issues	<b>5.C.2.i.</b>	<ul style="list-style-type: none"> <li>• Seligman, Chap 12</li> <li>• ACA Code of Ethics; LPC Code; State of Texas Health and Safety Code; State of Texas Family Code</li> </ul>	
	Exam 1		<ul style="list-style-type: none"> <li>• Study Guide Exam 1</li> </ul>	<b>Exam 1 due</b>
Week 3	Diagnosis (dx); Treatment strategies	<b>2.F.5.j.</b> <b>5.C.1.b.</b>	<ul style="list-style-type: none"> <li>• MacCluskie &amp; Ingersoll (2001) Chap. 2,3,5,6</li> <li>• Seligman (2004) Chap 3, 4 &amp; 5</li> <li>• DSM-5 Appendix; Watson &amp; Schmit (2020) Chap 3, 14</li> </ul>	
	Diagnosis (dx); Treatment strategies	<b>2.F.5.j.</b> <b>5.C.1.b.</b>	<ul style="list-style-type: none"> <li>• MacCluskie &amp; Ingersoll (2001) Chap. 2,3,5,6</li> <li>• Seligman (2004) Chap 3, 4 &amp; 5</li> <li>• DSM-5 Appendix; Watson &amp; Schmit (2020) Chap 3, 14</li> </ul>	Discussion 2
	Diagnosis and Application of treatment strategies	<b>2.F.5.j.</b>	<ul style="list-style-type: none"> <li>• MacCluskie &amp; Ingersoll (2001) Chap. 5</li> <li>• Seligman (2004) Chap 3, 4 &amp; 5</li> <li>• Watson &amp; Schmit (2020) Chap 3, 14</li> </ul>	<b>Project B: Diagnostic Conceptualization due</b>
Week 4	Psychopharmacology and case considerations		<ul style="list-style-type: none"> <li>• Lecture Notes</li> <li>• Selected website (instructor will provide link)</li> </ul>	

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	Intake, assessment, and primary prevention; Treatment planning (Tx.)	<b>2.F.5.i.</b> <b>5.C.2.j.</b>	<ul style="list-style-type: none"> <li>Lecture notes and selected online sites</li> <li>MacCluskie &amp; Ingersoll (2001) Chap. 5</li> <li>Watson &amp; Schmit (2020) Chap 14</li> <li>MacCluskie &amp; Ingersoll (2001) Chap 5; Seligman Chap 4 &amp; 5; Seligman (2004) Chap. 6, 8, &amp; 9</li> </ul>	
	Treatment planning (Tx.); application; cultural considerations	<b>2.F.5.i.</b> <b>5.C.2.j.</b>	<ul style="list-style-type: none"> <li>Lecture notes and selected online sites</li> <li>MacCluskie &amp; Ingersoll (2001) Chap. 5</li> <li>Seligman (2004), Chap. 4 &amp; 5 minus dated DSM material</li> <li>Watson &amp; Schmit (2020) Chap 14</li> <li>Selected websites</li> <li>DSM-5 Appendix</li> <li>Seligman (2004) Chap. 3</li> <li>Watson &amp; Schmit (2020), Chap 15</li> </ul>	Discussion 3 <b>Project C: Treatment Planning due</b>
	Exam 2 (opens from Thursday, noon-Sunday, 11:59pm)		<ul style="list-style-type: none"> <li>Study Guide Exam 2</li> </ul>	<b>Exam 2 due</b>
Week 5	Practice policies: Record keeping; Consultation and supervision; Case management, coordination with other professionals; Referrals	<b>5.C.2.m .</b> <b>2.F.5.k.</b>	<ul style="list-style-type: none"> <li>Selected SOAP note and practice management platform websites</li> <li>MacCluskie &amp; Ingersoll (2001) Chap. 7 &amp; 8</li> <li>Watson &amp; Schmit (2020) Chap 6 &amp; 7</li> <li>Seligman Chap. 11</li> <li>Selected websites on community-based resources; DSM-5 Appendix; Seligman (2004) Chap. 3</li> </ul>	<b>PROJECT D DUE: Intervention</b>
	Reimbursement; Funding, Politics, & the role of Managed Care	<b>5.C.2.M.</b>	<ul style="list-style-type: none"> <li>Seligman (2004) Chap. 11</li> <li>Selected SOAP note and practice management platforms' websites</li> <li>MacCluskie &amp; Ingersoll (2001) Chap. 7 &amp; 8</li> <li>Watson &amp; Schmit (2020) Chap 6&amp;7</li> </ul>	Discussion <b>PROJECT E DUE: Sicko</b>
	Wrap UP		N/A	<b>Project F: Professional Interviews due</b>