

EPS Practicum Manual

EPS 692

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INTRODUCTION

PLEASE NOTE THAT THESE POLICIES APPLY TO ALL MASTER'S AND DOCTORAL COUNSELORS-IN-TRAINING ENROLLED IN PRACTICUM CLASS AND MUST BE FOLLOWED WHEN SEEING CLIENTS IN A NAU PRACTICUM CLINIC

Electronic Version of this Manual can be found at:
<https://nau.edu/ed-psych/forms-checklists-manuals/>

PRACTICUM CLINIC vs FIELD/FIELD-BASED/SITE

For clarification purposes, "Practicum Clinic" refers to the NAU Practicum Clinic, whereas "Field/Field-Based" and/or "Site" pertain to the counselor-in-trainings' experiences in other locations (i.e., schools, behavioral health agencies, mental health practices, etc.) See Guidelines for master's Practicum Hours Conducted in the Field section of this manual.

PREREQUISITES

Prerequisites for the masters' practicum include EPS 601, EPS 660 and EPS 670 and admission to the EPS graduate program, for which the course is required. Prerequisites for the doctoral practicum include EPS 670, EPS 692, and EPS 737, and admission to the doctoral program in Educational Psychology. Prior to seeing clients, each counselor-in-training should re-read and familiarize themselves with the latest APA and ACA and other relevant ethical guidelines.

ARRANGING FOR A PRACTICUM SITE

Upon completion of the pre-requisites, students should start looking for sites at which they are interested in completing their practicum. Students should discuss with their faculty members areas they are interested in and what agencies they can contact.

STUDENT LIABILITY INSURANCE

To enroll in and practice as a practicum student and intern, students are required to have their own professional liability insurance. Students are not allowed to see clients unless they have submitted proof of their insurance. Students can obtain liability insurance thorough their professional organization:

- 1- American Counseling Association
- 2- American School Counselor Association
- 3- HPSO

AZ FINGERPRINT CLEARANCE CARD

To enroll in and practice as a practicum student and intern, students are required to have their AZ Fingerprint Clearance Card.

COUNSELING PEOPLE YOU KNOW

Since some of the clients in practicum come from courses in Educational Psychology, you may know some potential clients and wonder whether it is ethical for you to counsel them. Other questions may come up regarding seeing relatives of people you know or relatives of clients you

have in a group. To resolve such issues, refer to the APA Ethical Standards or ACA Code of Ethics, and if you still have any questions or are unsure how to proceed, be sure to consult with your supervisor.

MASTER'S PRACTICUM (EPS 692) GRADING PHILOSOPHY

At the semester's midpoint and at the conclusion of the semester, counselors-in-training should be advised where they stand regarding their practicum skills and obligations.

A final grade of "Pass" shall be indicative of "A" or "B" work.

If the student does not complete the practicum obligations a grade of "In Progress" may be given, if appropriate. A grade of In-Progress can be interpreted in two ways:

- 1) The counselor-in-training is making satisfactory progress toward completion of course requirements but has not completed all requirements yet. This counselor-in-training, if enrolled in practicum, shall be allowed to begin their internship if both the practicum and internship supervisor agree. Again, if the counselor-in-training cannot realistically complete course requirements in the given semester, they should register to repeat the entire course.
- 2) The counselor-in-training is making progress toward completion of course client contact requirements, but there is doubt about the counselor-in-training ultimate ability to demonstrate knowledge and/or skill requirements. This counselor-in-training, if enrolled in practicum, shall not be allowed to begin their internship until all practicum requirements are successfully completed.

Incomplete - may be earned when a counselor-in-training is unable to complete requirements due to circumstances beyond their control. This may include things such as serious illness or severe crisis situation.

A final grade of "Fail" shall necessitate a professional growth plan and a requirement for the student to repeat the course. Failure a second time could necessitate removal from the program.

CACREP 2024 Standards

	GENERAL COURSE OBJECTIVES	CACREP	MEASURE
1	professional counseling credentialing, including certification, licensure, and accreditation practices and standards, and the effects of public policy on these issues	(3A.7)	Supervision meetings
2	ethical standards of professional counseling organizations and credentialing bodies, and applications of ethical and legal considerations in professional counseling	(3A.10)	Case conceptualizations KPI
3	Technology's impact on the counseling profession	(3E.5)	Supervision meetings
4	strategies for personal and professional self- evaluation and implications for practice	(3A.11)	Supervision meetings
5	the role of counseling supervision in the profession	(3A.12)	Supervision meetings
6	multicultural and pluralistic characteristics within and among diverse groups nationally and internationally	(3B.4)	Supervision meetings
7	theories and models of multicultural counseling, cultural identity development, and social justice and advocacy	(3B.1)	Supervision meetings
8	multicultural counseling competencies	(3B.1)	Supervision meetings
9	the impact of heritage, attitudes, beliefs, understandings, and acculturative experiences on an individual's worldviews	(3B.2)	Case conceptualizations KPI
10	the effects of power and privilege for counselors and clients	(3B.5)	Supervision meetings
11	help-seeking behaviors of diverse clients	(3B.3)	Supervision meetings
12	the impact of spiritual beliefs on clients' and counselors' worldviews	(3B.11)	Supervision meetings
13	strategies for identifying and eliminating barriers, prejudices, and processes of intentional and unintentional oppression and discrimination	(3B.9)	Supervision meetings
14	Theories of individual and family development across the lifespan	(3C.1)	Case conceptualizations KPI
15	theories and models of counseling	(3E.1)	Supervision meetings
16	critical thinking and reasoning strategies for clinical judgement in the counseling process	(3E.2)	Supervision meetings
17	case conceptualization skills using a variety of models and approaches	(3E.3)	Supervision meetings

18	consultation models and strategies	(3E.4)	Supervision meetings
19	application of technology related to counseling	(3E.5)	Supervision meetings
20	essential interviewing, counseling, and listening skills	(3E.9)	Faculty Evaluations (Mid-Point and Final) KPI
21	developmentally relevant counseling treatment or intervention plans	(3E.13)	Supervision meetings
22	development of measurable outcomes for clients	(3E.14)	Supervision meetings
23	evidence-based counseling strategies and techniques for prevention and intervention	(3E.15)	Supervision meetings
24	principles and strategies of caseload management and the referral process to promote independence, optimal wellness, empowerment, and engagement with community resources	(3E.17)	Supervision meetings
25	suicide prevention models and strategies	(3E.19)	Supervision meetings
26	crisis intervention, trauma-informed, and community- based strategies, such as Psychological First Aid	(3E.20)	Supervision meetings
27	processes for developing a personal model of counseling grounded in theory and research	(3E.21)	Supervision meetings
28	basic concepts of standardized and non-standardized testing, norm-referenced and criterion-referenced assessments, and group and individual assessments vs. methods of effectively preparing for and conducting initial assessment meetings	(3G.2)	Faculty Evaluations (Mid-Point and Final) KPI
29	procedures for assessing and responding to risk of aggression or danger to others, self-inflicted harm, and suicide	(3G.13)	Supervision meetings
30	procedures for assessing clients' experience of trauma	(3G.14)	Supervision meetings
31	use of culturally sustaining and developmentally appropriate assessments for diagnostic and intervention planning purposes	(3G.7)	Supervision meetings
32	use of assessments relevant to academic/educational, career, personal, and social development	(3G.8)	Supervision meetings
33	use of symptom checklists, and personality and psychological testing	(3G.10)	Use with clients in clinic Case conceptualizations KPI
34	diagnostic processes, including differential diagnosis and the use of current diagnosis classification system vs. use of assessment results to diagnose developmental, behavioral, and mental disorders	(3G.11)	Supervision meetings
35	the importance of research in advancing the counseling profession, including how to critique research to inform counseling practice	(3H.1)	Supervision meetings

36	identification and evaluation of the evidence-based counseling theories, interventions and practices	(3H.2)	Supervision meetings
37	development of outcome measures for counseling programs	(3H.9)	Supervision meetings
38	evaluation of counseling interventions and programs	(3H.2)	Supervision meetings
39	analysis and use of data in research	(3H.6)	Supervision meetings
40	principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning	(5C.4) CMHC	Supervision meetings
41	roles and settings of clinical mental health counselors		Supervision meetings
42	etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders	(5C.1) CMHC	Supervision meetings
43	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	(5C.2) CMHC	Supervision meetings
44	record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling	(5C.9) CMHC	Supervision meetings
45	intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management	(5C.4) CMHC	Supervision meetings
46	strategies for interfacing with integrated behavioral health care professionals	(5C.7) CMHC	Supervision meetings
47	strategies to advocate for persons with mental, behavioral, and neurodevelopmental conditions	(5C.8) CMHC	Supervision meetings
48	characteristics, risk factors, and warning signs of students at risk for mental health and behavioral disorders	(5H.12) SC	Supervision meetings
49	common medications that affect learning, behavior, and mood in children and adolescents		Supervision meetings
50	signs and symptoms of substance abuse in children and adolescents as well as the signs and symptoms of living in a home where substance use occurs		Supervision meetings
51	skills to critically examine the connections between social, familial, emotional, and behavior problems and academic achievement	(5H.11)	Supervision meetings
52	approaches to increase promotion and graduation rates	(5H.16)	Supervision meetings

GUIDELINES FOR MASTER'S PRACTICUM HOURS CONDUCTED AT SITE/ FIELD

The Site/Field Practicum provides counselors-in-training the opportunity to apply the theoretical concepts and skills learned thus far in their academic program and supplement the knowledge and skills with practical experience. The Site-Based Practicum also allows counselors-in-training to gain direct service skills in working with individuals and groups.

OBJECTIVES OF THE PRACTICUM HOURS CONDUCTED ON SITE

1. To provide additional experiences to complement the practicum clinic experiences to assist in the development of counseling skills which enhances their knowledge and skills in the following areas: (1) professional counseling orientation and ethical practice, (2) social and cultural identities and experiences (3) lifespan development, (4) career development, (5) counseling practice and relationships, (6) group counseling and group work, (7) assessment and diagnostic processes, and (8) research and program evaluation. (CACREP, 2024)
2. To provide experience in group work and skills for the practice of counseling.
3. To learn how to establish and maintain effective working relationships with supervisors, coworkers, and clients of different ethnic and racial backgrounds.

RESPONSIBILITIES OF THE COUNSELOR-IN-TRAINING

1. Obtain a minimum 40 direct and 60 indirect hours during practicum. Information about direct and indirect hours:

Direct Hours (Total Hours= 40 hours minimum)

	Practicum Clinic	Site/ Sites
Individual Hours	Minimum 20 hours (North Valley and Tucson) 25-40 hours (Flagstaff)	Minimum 20 hours (Non-Flag only)
Group Hours	10 to 15 hours (Flagstaff only)	10 to 15 hours (Non-Flag Only)

Indirect Hours (Total Hours= 60 hours minimum)

1. Indirect hours constitute time spent by a counselor in training engaged in the following activities on site or at NAU.
 - Progress Notes writing
 - Treatment Plan writing
 - Report Writing
 - Case Conference / Staff Presentations
 - Advocacy Activities
 - Individual Supervision
 - Group Supervision at Practicum site (if appropriate)
 - Group Supervision at NAU (class time)
 - Seeking Consultation
 - Research
 - Professional development activities
 - Other
2. Obtain an average of 1 hour of individual supervision and 1.5 hours of group supervision per week. Check with your practicum instructor about specific site practices.
3. Complete activity log sheets weekly, electronically in Tevera, and submit to the Faculty Supervisor/Instructor weekly or monthly during supervision (per your faculty)
The activities must include:
 - a. A minimum of 10 group hours and a maximum of 15 group hours
 - These hours may be completed during internship if enough opportunities are not available during the practicum experience.
 - b. Weekly individual supervision by NAU faculty or the site supervisor
(1 hour per week minimum)
4. Understand and practice the procedures, policies, and regulations established by the site.
5. Ask for assistance and supervision as needed outside of supervision to assure the client(s) receives adequate services.
6. Attend conferences, staff meetings, and training sessions assigned by the Site Supervisor.
7. Follow the dress code of the site at which you agreed to be at – show the professionalism that they want to display to their clients.
8. Inform the Site Supervisor when you will be late or absent.
9. Ensure that the Site Supervisor completes a mid-point and final evaluation of your performance. It is preferable that this evaluation take place with both supervisor and student present. This will be found in Tevera.
10. The student should complete the Site Supervisor and Field-Based Feedback Forms in Tevera at the end of practicum or as instructed by your practicum supervisor.

THE ROLE OF THE SITE

1. Provide the counselor-in-training with an opportunity to practice group counseling skills.
2. Provide opportunities to integrate knowledge with practice in the following areas: (a) human growth and development, (b) social and cultural foundations, (c) helping relationships, (d) groups, (e) career and lifestyle development, (f) appraisal, (g) research and program evaluation, (h) professional orientation, and (i) foundations, contextual dimensions and practice of community mental health counseling.
3. Provide best practice models of counseling services.
4. Provide the counselors-in-training with the opportunity to interact with professional role models.

THE ROLE OF SITE SUPERVISOR

1. Orient the student to the agency and their role
2. Maintain regular communication with students you supervise and provide contact options for emergency situations.
3. Provide weekly individual (1 hour/ week)
4. Complete mid-point and final evaluations on the student's performance

SITE SUPERVISOR QUALIFICATIONS

1. School Counseling counselors-in-training: Site supervisors must have a minimum of a master's degree in counseling or related field and have the following credential: School Counselor with a K-12 Guidance Counselor Certification by the Arizona Department of Education*
2. Clinical Mental Health Counseling counselors-in-training: Site supervisors must have a minimum of a master's degree in counseling or a related profession; active certifications and/or licenses in the geographic location where the counselor-in-training is placed, preferably in counseling or a related profession including one of the following credentials: (a) Arizona Licensed Professional Counselor, or (b) Certified Rehabilitation Counselor *. Other credentialed professionals will also be considered including (a) Licensed Psychologist, (c) Licensed Associate Counselor, (d) Licensed Clinical Social Worker, and (e) Licensed Marriage and Family Therapist.
3. All site supervisors must have a minimum of two years post-master's professional experience relevant to the CACREP specialized practice area in which the student is enrolled (CACREP, 2024)
4. All site supervisors must have relevant training in the technology utilized for supervision (CACREP, 2024)
5. All sites supervisors must have knowledge of the program's expectations, requirements and evaluation procedures for students (CACREP, 2024)

DOCUMENTATION NEEDED FOR UPLOAD TO TEVERA

- (1) Current copy of vita/resume
- (2) current copy of credentials (license and/or certifications must be valid through the counselor-in-training's field experience)
- (3) Completion of Site Supervisor Training with quiz.
- (4) Copy of Liability Insurance

Requirements for clients seen in the field: The requirements of the site prevail.

GUIDELINES FOR MASTER'S PRACTICUM HOURS CONDUCTED IN PRACTICUM CLINIC

Students will see clients in the NAU practicum clinic. The schedule will vary for each site. The following procedures apply while seeing clients in the NAU practicum clinic.

CONFIDENTIALITY

According to *ACA 2014 Code of Ethics* (2014), it is the ethical duty of counselors to protect a client's identity, identifying characteristics, and private communications. You are practicing professional skills in a university setting. This means that there is a wide range of university students and members of the public who use the clinic. The university policies of confidentiality and the ethical codes of counselors and psychologists are applicable in the Practicum Clinic.

Viewing Clinical Sessions: No unauthorized faculty member or counselor-in-training can observe clinical sessions without the written consent of the parties. Such consents are to be maintained by the professors or GAs involved. When students are viewing their own clinical sessions be aware of your surroundings. Make sure your screen is not visible to others, you are in a private space, and you have headphones on.

Inspections of Records: No unauthorized faculty member or counselor-in-training is allowed to inspect records maintained on clients without the written consent of the parties. Such consents are to be maintained by the professors or GAs involved.

Conversations with/about Clients: No faculty member or counselor-in-training is to discuss any client outside of the Practicum or Practicum Supervision unless otherwise specified by your Practicum Supervisor. When discussing client information telephonically or in person, it is imperative that they be confidential, private, and not overheard by others. *NAU Email system is not encrypted and not guaranteed to be confidential.* Keep emails concise and avoid confidential information. It is best to use language that is not associated with "treatment" per se (i.e., in other words use "meeting" instead of "session" and so forth). Most communication between the counselor-in-training and their client should be done using the "Messages" feature in TherapyNotes as it ensures HIPAA compliance.

Session Recordings and Client Records: The Practicum Clinic makes wide use of Session Recordings and Client Records. Sessions Recordings involving clients must be protected in the same way as other confidential records and materials. Such records must be used only for teaching and learning, and they should be destroyed immediately after use in the teaching-learning process or upon upload into the NAU Valt system. Under no circumstances should any counselor-in-training or faculty member take client records with them when they leave the university.

RECORDING CLIENT SESSIONS

ALL counseling sessions in the practicum clinic must be recorded without exception.

Applicants for counseling who refuse to be recorded must be referred to other mental health agencies. At the end of the semester, all recorded sessions will be destroyed. Sessions not recorded due to equipment malfunction must be documented as usual but may not count toward direct counseling hours. Make sure the equipment is working at the start of each session.

Counselors-in-training will be trained to properly administer session recordings at the beginning of each semester in accordance with applicable NAU, state, federal privacy requirements. If applicable, counselors-in-training should have session recordings ready for their instructor during weekly individual and/or group supervision.

CLIENT NO-SHOW POLICY

Please let the clients know if they miss more than 2 appointments without notice, services may be discontinued.

GENERAL APPEARANCE AND BEHAVIOR

Counselors-in-training are involved in professional preparation programs and are expected to dress like a professional when meeting with the public. **Personal conduct and dress should conform to professional standards reasonably expected of individuals offering counseling services.** Please maintain a quiet and professional atmosphere in the Practicum Clinic.

TELEPHONE USAGE AND MESSAGE SERVICE

Telephones will be made available for counselor-in-training or faculty use. It is to be used exclusively for practicum-related calls, such as contacting clients or calling parents of clients. If you are ever calling from your personal phone, please preface the number with *67 to block your personal number from the client. Counselors-in-training are not permitted to give out their cell phone numbers to clients.

Parents, clients, and children will occasionally call with messages for their counselors-in-training. Please familiarize yourself with the message procedures at your respective site.

CONFIDENTIALITY AND ONLINE RECORDINGS

All counselors-in-training must complete the "confidentiality statement" the practicum clinic instructors will distribute on the first day of class.

Client files will be saved electronically using Therapynotes. Students should view the tutorial before practicum begins and seek clarifications. Therapynotes account information should not be shared with anyone in or outside of NAU. All physical documents including informed consent,

treatment plan, termination note, activities etc. should be scanned and uploaded to the client file on therapy notes. Once these documents have been successfully uploaded on TherapyNotes, they should be shredded immediately.

Students can access the TherapyNotes tutorial using the link:

https://mediaspace.nau.edu/media/Student+Intro+to+TherapyNotes/0_vjcsrtsg

MAINTAINING CLIENT FILES

All client files will be maintained electronically on TherapyNotes. Students must view the tutorial before the first day of class to familiarize themselves with the website. Once a student has created a client file and scheduled them, students must complete the following forms:

- 1- Intake form (first session)
- 2- Informed Consent (first session- to be uploaded once signed by the client, See Appendix)
- 3- Treatment Plan (Second session)
- 4- Progress Note (Each session - to be completed with 24 - 48 hours)
- 5- Psychotherapy Termination form
- 6- Contact Note – when applicable: this includes emails to or from client, voicemails to and from the client, etc.

Any client-related form must be scanned and uploaded in the accurate client file. Any physical case documents must remain in the NAU building at all times and should be scanned and uploaded in the accurate client file on TherapyNotes.

If facilitating group counseling sessions in the clinic, students must create individual client files for all group members following the above steps.

REFERRALS AND CONSULTATION

1- REFERRAL FOR PSYCHIATRIC CONSULTATION

If you feel a client may have a severe mental disorder or think a client may benefit from medication, discuss the case with your supervisor. If both of you agree that a psychiatric consultation is beneficial, discuss the case with the practicum instructor. With the instructor's approval, you may refer the client to the appropriate professional.

2- PROCEDURES FOR REFERRAL OF CASES

- a. Referral of a case is in order when the client's problem or needs do not seem appropriate or amenable to the services provided in the Practicum Clinic. Referral may also be appropriate when it is the legal and ethical responsibility of the Practicum Clinic staff to report specific information. See the *ACA 2014 Code of Ethics* and the *APA Code of Ethics and Professional Standards*.
- b. The counselor-in-training must consult with the practicum instructor for information concerning referral sources and must have their consent before initiating any action. If

the practicum instructor is not available, the counselor-in-training must contact another faculty member. Campus Health Services is for NAU students only. A private practitioner or referral to a local mental health agency is needed if the client is not a university student or if you are located at a site away from Flagstaff.

When possible, three referral sources should be provided to a client – This is in accordance with the Arizona Board of Behavioral Health Examiners. Referral should be made with the advice of the practicum instructor.

CONSULTATION

Sometimes it is important for a counselor-in-training to seek consultation with a physician or make a direct referral to a physician. The counselor-in-training should discuss with their supervisor in cases where a consultation is warranted.

SUPERVISION

Students will meet for weekly group supervision with NAU faculty supervisor. Only doctoral students who have completed all entry-level counseling degree requirements consistent with CACREP standards; have completed or are receiving preparation in counseling supervision, including instruction for in-person and/or distance supervision; and be under supervision on a regular schedule that averages one (1) hour a week from a qualified core or affiliate counselor education program faculty supervisor can provide practicum/internship supervision to our School Counseling and CMHC masters. (CACREP, 2024)

EMERGENCY PROCEDURES

Make sure your supervisor is aware of the following situations as soon as possible. Included in this category are:

1. The client who reports or implies abuse or neglect of a child, an elderly person, or a person with a disability.
2. When working with minors, issues that may need to be brought to the attention of the custodial parents.
3. The client is suicidal and there may be immediate danger to the individual.
4. The client is homicidal and there is a clear and immediate threat to one or more other identifiable persons (either implied or direct intent to do harm).
5. The client is experiencing such extreme emotionality that the client cannot function well enough to care for his/her basic needs, or who is psychotic, severely anxious, or extremely depressed.
6. The client who is taking medications that appear to have an adverse effect on emotions, or who appears to have toxic reactions.
7. The client taking psychotropic medicines is not under a physician's supervision.
8. The client who has been taking psychotropic medicines and is considering discontinuing or has discontinued their use without the physician's approval.

If you see a client and an emergency develops (such as clients who say they are planning to harm themselves or someone else), ask them to wait in the counseling room while you consult your supervisor.

Flagstaff Students: Then call the practicum instructor or go to his/her office and discuss the situation. If you cannot reach the practicum instructor, call or contact one of the members of the counseling faculty. Faculty telephone numbers will be posted in the practicum clinic. If your practicum site is in Flagstaff and you cannot reach any of these people, call the NAU Counseling Services at 928.523.2131, explain that you are a counselor-in-training at the Practicum Clinic and have an emergency situation, and ask for consultation with the Counseling Services Director or Counselor on call.

NAU Practicum Labs do not offer after-hour services or services when a practicum class is not in session. Should an emergency arise in which you need the police, fire department or an ambulance, the first number in Flagstaff to call is 928.523.3000 which is the NAU Police Department. If you need emergency consultation outside regular working hours, the NAU Police Department will contact the staff member on call from NAU's Counseling Services, or you can call Counseling Services directly at 928.523.2131.

Statewide Students: Consult with your practicum instructor and call 9-1-1 or the crisis if necessary. NAU Practicum Labs do not offer after-hour services or services when a practicum class is not in session.

CLIENTS WHO ARE POTENTIALLY SUICIDAL OR HARMFUL TO OTHERS

This topic will be extensively covered prior to counselors-in-training seeing clients and resources will be provided. See additional guidelines and flow charts in the Practicum Manual Resources and consider using the Safety Contract. As appropriate and with the instructor's consultation, the counselor-in-training may administer optional assessment instruments such as the Beck Depression Inventory and the Substance Abuse Subtle Screening Inventory.

ENDANGERMENT

No counselor-in-training or faculty member is expected to be endangered as a function of teaching or learning in the Practicum Clinic. Any faculty member or counselor-in-training who believes there is imminent danger should take immediate steps to remove themselves from the situation. The individual should report the situation and attendant circumstances to their immediate supervisor and Practicum Instructor.

If a client threatens significant harm to themselves or others, the event should be reported to the immediate supervisor or Practicum Instructor. The event should be documented in writing at the earliest possible moment. In such instances, proactive measures are pursued to assist the client.

PRACTICUM DOCUMENTATION

In addition to client files, students must complete the following practicum documentation. All documents can be found at: <https://nau.edu/ed-psych/forms-checklists-manuals/>

<u>NAME</u>	<u>Location</u>
Confidentiality Statement	Appendix A
Informed Consent	Appendix B
Student Liability Insurance Face Sheet	Student to Submit on Tevera
Supervisor credentials (License/ Certificate and resume) *	Student to Submit on Tevera
Practicum Contract	Student to Complete and Submit on Tevera
Hourly Logs (Excel file)	Track on Tevera
Supervision Logs	Appendix E
Mid-point evaluation BY NAU instructor	Completed in Tevera
Case Staffings	Appendix C- Outline
Final evaluation BY site supervisor	Completed in Tevera
Final evaluation BY self	Completed in Tevera
Final evaluation BY NAU instructor	Completed in Tevera
Counselor in training's evaluation of site	Completed in Tevera
Counselor in training's evaluation of site-supervisor	Completed in Tevera

Documentation of Observation Form (word doc)	Completed in Canvas
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Additional forms are available at: <https://nau.edu/ed-psych/forms-checklists-manuals/> and students should download them when necessary.

GUIDELINES FOR WORKING WITH CLIENTS AND COMPLETING REQUIRED FORMS

INITIAL STEPS FOR NEW CLIENTS

1. The Informed Consent and Request for Services forms are to be filled out for each new client who requests services at the Practicum Clinic.
2. Select the appropriate form for your client. Generally, if it is an individual or a child, use the individual form. If services are being requested for a family or a couple, use the family/couples form.
3. The client completes the Request for Services forms. Following completion of the forms, the counselor-in-training or the practicum administrator reads them and signs the forms. Be sure to date the forms.

Screeners at the Statewide campuses in North Valley & Tucson conduct phone calls with potential clients to complete the Request for Services over the phone. The Request for Services completed form is uploaded to the client's Therapy Notes file. All forms are then deleted and removed from the screener's computer.

4. The counselor-in-training then begins to discuss the Informed Consent form with emphasis on confidentiality and its limits. Once the client understands the limits to confidentiality and the necessity of recording sessions, and signs the informed consent of treatment form, the counselor-in-training begins the recorded session. (Statewide campuses send the informed consent and initial intake to the client prior to the initial appointment to their record through the Therapy Notes portal).

5. NAU Practicum Clinic uses TherapyNotes for case charting. Flagstaff Campus: The counselor-in-training or practicum administrator will scan the Request for Services and the Informed Consent Form and upload them in the client's case file. The counselor-in-training will then shred the hard copy of those documents.

* If it appears that the client already has a case in TherapyNotes, please advise your supervisor/course instructor so that the case may be reassigned to the current counselor-in-training.

NAU Practicum Clinic at the Statewide campuses in North Valley & Tucson also use Therapy Notes for case charting and sending forms. The Practicum Administrator and Graduate Assistant(s) electronically complete and upload the Request for Services into the client's account in Therapy Notes. The Informed Consent is also electronically sent and completed through Therapy Notes in the client's portal.

*The Practicum Administrator also creates and assigns counselors-in-training to the course instructor and counselors-in-training as well as create a new client profile.

6. If the client is an incoming freshman at NAU and has completed the College Student Inventory (CSI) and is requesting services as part of the program to facilitate their success at NAU, please have them complete the special authorization for release of information form. Please inform clients that if they give us permission, we will release only information regarding the number of sessions and type of sessions (for group counseling only) that he/she attended using NAU ID to the NAU Office of Orientation, Transition, and Retention Services.

- If the client is an incoming freshman, please ensure the client is at least 18 years of age. If not, a minor consent form must be completed.

GUIDELINES FOR INTAKE INTERVIEW REPORT

Instructions for Completing Intake Interview Report:

1. The Intake Interview is located in TherapyNotes. It may be distracting to your client if you continually glance at a laptop, iPad, or other electronic device during the session, so familiarize yourself with the questions on the form. The counselor-in-training fills out this form online. Even if the client came to counseling in a previous semester, it is a good idea to complete a new Intake Interview form as presenting problems may change over time.
2. Complete the form immediately after the first session to ensure the accuracy of information recorded. If you are unsure about certain information, go back and review the recording.
3. All counselors-in-training, especially doctoral and 60-hour master's Clinical Mental Health Counseling students are encouraged to make a diagnostic impression. Many clients may not get a clinical diagnosis per se; however, you can give V codes. Giving a diagnosis will help you get some practice using the DSM-5. If you need assistance with diagnosis, consult with your supervisor.
4. Sign and date all forms when applicable.

GUIDELINES FOR COMPLETING COUNSELING SUPERVISION LOG

This form (clinical supervision session form) is to be used to record a comprehensive description of the topics discussed during each supervision meeting with your NAU supervisor.

Supervision form must be completed by the counselor-in-training during or immediately after each supervision session and should be signed by the supervisor.

All completed supervision forms should be uploaded under “Staff Files” on TherapyNotes by the end of the semester.

GUIDELINES FOR COMPLETING TREATMENT PLANNING FORM

A treatment planning form must be filled out for each client that you see during each semester. This form is helpful in giving some direction to your session, especially if you have a class credit client who is functioning well or has no admitted problems. Treatment Planning Forms are located on TherapyNotes.

Instructions for Completing Treatment Planning:

1. Treatment plans are a common practice in most agencies, so become familiar with the procedure and gain practice in filling out these forms.
2. The goals and objectives within the treatment plan are usually identified during sessions with your client and generally at the end of the first session or, at the latest, during the second session.
3. The counselor-in-training and the client will complete the client's treatment plan together. The agreed upon treatment plan will be input into a formal Treatment Plan Note in TherapyNotes.
4. You do not have to complete this form for clients in group. However, occasionally you may have goals for the entire group. In that case, complete one form and upload a copy in each individual case in TherapyNotes.

Information included in Treatment Planning

- Diagnosis: Use the main symptoms the client is experiencing in order to come to a diagnosis. Use the information collected to form a (DSM-V or descriptive) diagnosis. If you are unsure about the diagnosis or you need expert assistance, speak to your clinical supervisor.
- Presenting Problem: Why is the client coming in to treatment? Include current symptoms and behaviors, history of the problem, impairments in life functioning, current risk and safety concerns.
- Treatment Goals: A goal is a description of a destination. The counselor-in-training and client decide, together, what goals should be included in the treatment plan. Goals should be realistic and achievable.
- Objectives: An objective is a measure of the progress that is needed to get to the destination. Make sure objectives are quantifiable, such as reducing depression from 9/10 severity to 6/10, exercising 3 days a week or journaling daily.

- Treatment Strategy / Interventions: Therapeutic interventions are identified for each objective. Identify types of treatment or interventions you might use to achieve the objective.
- Prescribed Frequency of Treatment: Frequency of sessions

GUIDELINES FOR PSYCHOTHERAPY TERMINATION NOTE

The Psychotherapy Termination Note is located in TherapyNotes and must be completed when the counselor-in-training will no longer be working with the client - even if the client will be continuing with another counselor-in-training in this or the following semester.

If a client has a completed "Request for Services" form and has a case number assigned, a termination note must be completed if the client fails to show for an appointment. Attempted contacts must also be noted in TherapyNotes.

Practicum Manual Appendices

Appendix A: Confidentiality Statement

PRACTICUM LABORATORY **CONFIDENTIALITY STATEMENT**

Counselors-in-training participating in observing recorded sessions that take place in the College of Education Practicum Clinic are expected to adhere carefully to the current ACA Ethical Code regarding confidentiality and to NAU course policies. The mandatory rules for observing recorded sessions are as follows: (1) All session material must be watched privately (in a private setting and with no one else present), or with their course instructor/supervisor in a private setting; (2) session material must never be shared in any way, nor uploaded for any reason to the Internet, etc.; and (3) session material must also never be downloaded to one's desktop/laptop, etc.

Failure to adhere to any of these policies will be expediently reviewed by the Counseling Committee, with program dismissal as a probable outcome.

Counselor-in-training (Printed)

Signature/Date

Course/Instructor (Printed)

Signature/Date

Appendix B: Informed Consent



Department of Educational Psychology

Department of Educational Psychology

Northern Arizona University
PO Box 5774
Flagstaff, AZ 86011-5774

928-523-7103
928-523-9284 fax
<https://nau.edu/coe/ed-psych>

Flagstaff Practicum Informed Consent Agreement

Counselor-in-training's Qualifications: Your counselor-in-training is a graduate student in the Educational Psychology department at Northern Arizona University, and is working toward completion of a master's degree in clinical mental health counseling, school counseling, or student affairs, or a doctoral degree in the combined counseling/school psychology program. Your counselor-in-training provides counseling under the supervision of a faculty member who is a doctoral-level licensed mental health professional or a doctoral-level student. Your counselor-in-training has completed courses in counseling theories, counseling processes, professional ethics and problems, and many other courses.

As counselors-in-training are students in training rather than licensed professionals, they do not write letters of support for disability determination, assistance animals, transition procedures, and similar situations. If you are seeking counseling for current or potential court-related issues, including child custody, you should seek counseling elsewhere, since the counselors-in-training are not qualified to evaluate such issues.

Records and Confidentiality: All counseling sessions are digitally recorded for use in supervision and training, and only the people listed at the bottom of this form may see session recordings. The digital recordings made of counseling sessions are not available for viewing by anyone other than counselors-in-training and their supervisors. All counseling sessions are recorded. The recordings are used only for supervision and training purposes. All digital recordings are deleted at the end of the semester.

What you say during counseling is confidential and will not be disclosed to anyone outside the Practicum without your permission, but there are some exceptions. Counselors-in-training are required by law, and by their professional ethics, to break confidentiality (a) if you are seriously considering or likely to attempt suicide; (b) if you threaten to harm or assault someone; (c) if you engage or intend to engage in behavior that will expose someone to a potentially life-threatening communicable disease; (d) if a counselor-in-training suspects abuse, neglect, or exploitation of a minor or an incapacitated adult; (e) if your mental condition renders you gravely disabled; (f) if required by law to disclose information; (g) if records of clients need to be read by authorized auditors or researchers for approved purposes. Counselors-in-training are required to keep records of their services. Your records are maintained securely and electronically. Records of sessions include your reason for seeking counseling, the goal and progress of counseling, a diagnosis, topics discussed, etc. and will be kept for seven years and 3 years after your eighteenth birthday – whichever is longer.

Please know that E-mail is not guaranteed to be a confidential form of communication with the Practicum Clinic or your counselor-in-training.

Effects of Counseling: Counseling has been shown to benefit most clients, but there are no guarantees about what will happen, and you may experience uncomfortable feelings since counseling may involve discussing unpleasant aspects of your life. Counseling may lead to changes in your view of your life, which may affect your relationships, your job, and your understanding of yourself. At any time, you may ask your counselor-in-training about the potential positive or negative effects of counseling. Counseling requires your active effort and you will also need to work on improving your life situation outside of the counseling sessions.

Counseling Relationship: Counseling is a professional relationship rather than a social one, so counseling sessions will focus on you and your concerns. Please do not invite your counselor-in-training to social gatherings, offer gifts, or request letters of recommendation. The counselors-in-training do not interact with, accept friend requests, or follow current or former clients on any social networking site or blog (e.g. Facebook, Twitter, Snapchat, Instagram, LinkedIn, etc.). These sites are not secure and interacting on them blurs the boundaries of the counseling relationship. Counseling will only be available until the end of the semester. If you wish to continue counseling after that, you will be provided with some referral options.

Counseling Sessions: Appointments are usually 45-50 minutes long, once per week. If you are late, the session will still need to end on time. You are free to stop counseling at any time, or you can tell your counselor-in-training if you prefer to see a different counselor-in-training. If you cannot keep an appointment, please call to cancel the day before. If you miss more than one appointment without canceling in advance, your appointment time may be given to someone else. There is no charge for our services.

Availability: We are not able to provide services for all clients. If your counselor-in-training and his/her supervisor decides that you would be better served at another agency, you will be provided information on how to get such services.

Flagstaff Clients: Call NAU Counseling Services at 523-2261 (if you are an NAU student);

The Guidance Center at 527-1899 (if you are not an NAU student).

If you have an emergency or feel unable to keep yourself safe, go to the emergency room at the Flagstaff Medical Center (1200 N. Beaver St.) or call 911.

Statewide Clients: Please refer to the Counseling Resources list provided by your NAU counselor in training. In the event that this is not possible, and you have an emergency or feel unable to keep yourself safe, go to your local emergency room or call 911 for immediate response to your situation.

Postponement and Termination: The Practicum Clinic reserves the right to postpone and/or terminate counseling of clients who come to their session under the influence of alcohol or drugs, and of clients who do not comply with the medication recommendations of their physician or psychiatrist.

Counselor-in-training's Rights and Responsibilities: Your counselor-in-training will be on time to sessions and will work with you in a professional manner consistent with accepted legal and ethical standards. Your counselor-in-training will describe their approach to counseling and will work with you to write a treatment plan by the end of your second session. If your counselor-in-training decides that he or she cannot help you, you will be referred to another counselor-in-training. Your counselor-in-training may recommend that you take a career or psychological inventory if the information is needed in order to help you. Your counselor-in-training may give you tasks to do between counseling sessions based on your particular needs.

Client's Rights and Responsibilities: You will be expected to present concerns or problems to address in counseling. If you and your counselor-in-training agree on homework, you will be expected to complete it by the next session. You may be asked to fill out an anonymous evaluation form after each counseling session to assist your counselor-in-training in improving their skills.

You have the right to refuse any counseling suggestions or techniques that you think may be harmful. You have the right to receive services that respect your privacy and dignity and that respect your cultural and ethnic identity, religion, disability, gender, age, marital status, and sexual orientation. You have the right to participate in developing a treatment plan to meet your needs. You have the right to examine your records and have them explained to you. If at any time for any reason you are dissatisfied with the counselor-in-training's services, please discuss the issue with your counselor-in-training. If the counselor-in-training is not able to resolve your concern, ask to talk to the counselor-in-training's supervisor. You have the right to stop counseling at any time or to request a different counselor-in-training.

I have read the information on this form. If there is anything that concerns me or that I do not understand, I will seek clarification from my counselor-in-training before I sign.

Client Signature

Date

Witness Signature

Date

Offered a copy to the client _____ (Counselor-in-Training, please initial)

If the client is under age 18, I affirm that I am the legal parent or guardian of
(client's name): _____, I understand the information on this
form, and I grant permission for my child to participate in counseling.

Signature of parent or guardian

Date

Counselor-in-training in THIS section

Instructors/Supervisors

Statewide Practicum Informed Consent (Located in Therapy Notes)

Northern Arizona University: North Valley Campus Practicum Lab INFORMED CONSENT AGREEMENT

Counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education and career goals. Counseling has been shown to benefit most clients, but there are no guarantees about what will happen, and you may experience uncomfortable feelings since counseling may involve discussing unpleasant aspects of your life. Counseling requires your active effort, setting goals with your counselor and working on improving your life situation outside of the counseling sessions.

Appointments are usually 45-50 minutes long, once per week. If you are late, the session will still need to end on time. Clients may stop counseling at any time, or ask to see a different counselor by talking directly with your counselor. If you cannot keep an appointment, please email your counselor to cancel at least 24 hours in advance (the day before). If you miss more than one appointment without canceling in advance, your appointment time may be given to someone else. Clients who no-show to 2 appointments may be asked to terminate services. Clients who miss 3 total appointments may be asked to terminate services. There is no charge for our services. In most cases counseling will stop by the end of the current semester, the _____ week of _____.

Your records are maintained in a secure electronic health record management system. Records of sessions include your reason for seeking counseling, the goal and progress of counseling, a diagnosis, topics discussed, etc. You may ask your counselor to show you your records and review them with you.

We are not able to provide services for all clients. If your counselor and his/her supervisor decide that you would be better served at another agency, you will be provided information on how to get such services.

Practicum counselors are students in training rather than licensed professionals, so they do not write letters of support for disability determination, assistance animals, etc. If you are seeking counseling for current or potential court-related issues, including child custody, you should seek counseling elsewhere, since the student counselors are not qualified to evaluate such issues.

All counseling sessions are digitally recorded for use in supervision and training, and only the people listed at the bottom of this form may see session videos. The digital recordings made of counseling sessions are not available for viewing by anyone other than practicum counselors and their supervisors. All digital recordings are deleted at the end of the semester. We are not able to provide crisis or emergency services. If you are in crisis and need help immediately, you can call any of the following crisis hotline numbers:

1-800-631-1314 Crisis Response Network – Central Arizona

520-622-6000 Pima County Mental Health Crisis Line

1-800-SUICIDE

1-800-656-HOPE (National RAINN Sexual Assault Hotline)

480-736-4949 (Sexual Assault Hotline- Maricopa County)

If you have an emergency or feel unable to keep yourself safe, go to the nearest emergency room or call 911. You should understand that email is not a confidential form of communication with the Practicum Lab or your counselor. If between sessions you need to contact the Practicum Counseling Lab regarding an appointment, email nvcounseling@nau.edu or email your counselor directly. If you need to email your counselor regarding cancellation or schedule change, do not include personal information that you wish to keep confidential.

The counselors do not interact with, accept friend requests, or follow current or former clients on any social networking site or blog (e.g., Facebook, Twitter, Instagram, Snapchat, TikTok, LinkedIn, etc.). These sites are not secure and interacting on them blurs the boundaries of the counseling relationship.

What you say during counseling is confidential and will not be disclosed to anyone outside the center without your permission, but there are some exceptions. Counselors are required by law, and by their professional ethics, to break confidentiality (a) if you are seriously considering or likely to attempt suicide; (b) if you threaten to harm or assault someone; (c) if you engage or intend to engage in behavior that will expose someone to a potentially life-threatening communicable disease; (d) if a counselor suspects abuse, neglect, or exploitation of a minor or an incapacitated adult; (e) if your mental condition renders you gravely disabled; (f) if client records are subpoenaed by the courts or if required by law to disclose information; (g) if records of clients

need to be read by authorized auditors or researchers for approved purposes; (h) if you release the information; (i) ~~if~~ you request the information to be released to a certain party for specific purposes.

I have read the information on this form. If there is anything that concerns me or that I do not understand, I will seek clarification from my counselor before I sign.

Practicum Students in This Section:

Instructors/Supervisors/Admin:

PARENTAL CONSENT FOR MINORS (18 YEARS OF AGE AND YOUNGER):

Permission is required by parents for their child to participate in counseling at the NAU Clinic. In the state of Arizona, when parents are separated or divorced, both parents must provide written permission for their child to participate in counseling services or one parent must provide the Practicum Lab with court paperwork assigning them with sole decision-making power. If parents are married and one parent is signing, that parent attests that the other parent knows about the child(ren)'s therapy and agrees to consent of treatment.

A parent is required to accompany the child to all counseling sessions. If counseling is held at the clinic, a parent must be on campus and wait in the designated area while their child is in session. For tele-health counseling sessions, a parent is required to be at the same address as the child during all telehealth counseling sessions.

By signing this form, I give my informed consent FOR MY CHILD to participate in the counseling sessions with the NAU Graduate Student and affirm that I am the legal parent or guardian of (client's name): _____

Parent/Guardian Name and Date: _____

Other Parent/Guardian Name and Date (if no other parent/guardian, enter N/A): _____

INFORMED CONSENT FOR TELEBEHAVIORAL HEALTH SERVICES

This Informed Consent for Telebehavioral health services contains important information providing counseling services using the phone or the Internet. This Informed Consent document supplements, but does not replace, the consent form you signed previously to receive in-person services at NAU's counseling practicum laboratory. Please read this carefully and let me know if you have any questions. When you sign this document, it will represent an agreement between us.

Benefits and Risks of Telebehavioral Health Services

Telebehavioral health refers to providing counseling services remotely using telecommunications technologies, such as video conferencing or telephone. One of the benefits of telebehavioral health is that the client and clinician can engage in services without being in the same physical location. This can be helpful in ensuring continuity of care in situations where meeting in person is unfeasible. It is also more convenient and takes less time. Telebehavioral health, however, requires technical competence on both our parts to be helpful. Although there are benefits of telebehavioral health, there are some differences between in-person counseling and counseling over video conference, as well as some risks. For example:

- **Risks to confidentiality.** Because telebehavioral health sessions take place outside of the therapist's private office, there is potential for other people to overhear sessions if you are not in a private place during the session. On my end I will take reasonable steps to ensure your privacy. But it is important for you to make sure you find a private place for our session where you will not be interrupted. It is also important for you to protect the privacy of our session on your cell phone or other device. You should participate in counseling only while in a room or area where other people are not present and cannot overhear the conversation. If you are under the age of 18 a parent/legal guardian must be located at the same address during the time of all telebehavioral health session in case of emergency.
- **Issues related to technology.** There are many ways that technology issues might impact telebehavioral health. For example, technology may stop working during a session, other people might be able to get access to our private conversation, or stored data could be accessed by unauthorized people or companies. While we do take precautions to protect data, these precautions are not guarantees of privacy.
- **Efficacy.** Most research shows that telebehavioral health services are about as effective as in-person psychotherapy. However, some therapists believe that something is lost by not being in the same room. For example, there is debate about a therapist's ability to fully understand non-verbal information when working remotely.
- For more information on telehealth privacy and security, please go to the U.S. Department of Health & Human Services website (<https://telehealth.hhs.gov/patients/additional-resources/data-privacy>)

Counseling services will be delivered via Zoom. You will need to download the free Zoom application prior to your first scheduled session to access the platform, at <https://zoom.us/signup>. The Practicum Scheduler or your Counselor-in-training will email you with a link to connect with Zoom for your scheduled appointment(s). There is no charge for Zoom; however, you are solely responsible for any cost to obtain any necessary equipment or internet service to take part in telebehavioral health services.

If you are unable to attend a scheduled session, or need to change your appointment time, please contact your Counselor-in-training by email. Although it is understood that unforeseen circumstances do arise, 24-hour notice, when possible, is preferred.

Confidentiality

I have a legal and ethical responsibility to make my best efforts to protect all communications that are a part of our telebehavioral health services. However, the nature of electronic communications technologies is such that I cannot guarantee that our communications will be kept confidential or that other people may not gain access to our communications. I will do my best to use updated encryption methods, firewalls, and back-up systems to help keep your information private, but there is a risk that our electronic communications may be compromised, unsecured, or accessed by others. You should also take reasonable steps to ensure the security of our communications (for example, only using secure networks for remote counseling sessions and having passwords to protect the device you use for remote counseling sessions).

The extent of confidentiality and the exceptions to confidentiality that I outlined in the initial Informed Consent still apply in remote counseling services. Please let me know if you have any questions about exceptions to confidentiality.

Crisis, Emergencies, and Technology

Crisis counseling services are not provided through the NAU counseling practicum lab, and this policy extends to services provided via telebehavioral health. If you are currently in a crisis situation requiring high levels of support and intervention, or should you enter into a state of crisis during the course of our remote work together, you are directed to access your local crisis counseling services. If you in crisis and need help immediately you can call any of the following crisis hotline numbers:

- 1-800-631-1314 Crisis Response Network – Central Arizona
- 520-622-6000 Pima County Mental Health Crisis Line
- 1-800-SUICIDE
- 1-800-656-HOPE (National RAINN Sexual Assault Hotline)
- 480-736-4949 (Sexual Assault Hotline- Maricopa County)

Assessing and evaluating threats and other emergencies can be more difficult when conducting telepsychology than in traditional in-person therapy. To address some of these difficulties, crisis response resources are provided above. Additionally, I will ask you to 1) provide the physical location(s) where you will be accessing telepsychology services 2) identify an emergency contact person who is near your location and who I may contact in the event of a crisis or emergency to assist in addressing the situation and 3) *If you are minor (under the age of 18), a parent or guardian MUST physically be at your location where you will be accessing telepsychology services to be contacted in the event of a crisis or emergency to assist in addressing the situation. Signing this Informed Consent document indicates your authorization for me or my supervisor to contact your emergency contact person as needed during such a crisis or emergency.*

If the session is interrupted for any reason, such as the technological connection fails, and you are having an emergency, call 911, or go to your nearest emergency room. If the session is interrupted and you are not having an emergency, disconnect from the session and use the original link provided to you by email to re-enter the Zoom meeting.

Records

The telehealth counseling sessions will be uploaded to a secure server. As usual, the only persons who will have access to the videos will be your counselor-in-training, and their university-based supervisor. Supervisors periodically review videos to give counselors-in-training feedback on their skills development and to offer the counselor-in-training guidance for your benefit. Supervisors uphold that same standards of confidentiality as do your counselor(s)-in-training.

Physical Location: Address(es) where you will be physically located while receiving telehealth counseling services (must be in the State of Arizona): _____

Emergency contact (name, relationship to you, and phone numbers): _____

INFORMED CONSENT

This agreement is intended as a supplement to the general informed consent that we agreed to at the outset of our clinical work together and does not amend any of the terms of that agreement.

CLIENT ELECTRONIC SIGNATURE VERIFICATION STATEMENT: This Electronic Verification Statement is intended to document and acknowledge that I have read and understood the information on this form and that I certify that all information on and submitted with this form is true and correct. If there is anything that concerns me or that I do not understand, I will seek clarification from my counselor before I sign. I understand that my verification is being provided by typing my name in the box below along with the date this form is completed. Additionally, I will submit this form to the Patient Portal on TherapyNotes which requires a computer login name and secure password. The process used is to ensure that all documentation completed under this combination is done by me. I have read and understand the statements above. I have read, understood, and agree to the items contained in this document, and agree to sign electronically.

Sign _____

Practice Acknowledgment

Sign This Form: I, Practice User, have reviewed this document on Date.

Department of Educational Psychology

Northern Arizona University
PO Box 5774
Flagstaff, AZ 86011-5774928-523-7103
928-523-9284 fax
<https://nau.edu/coe/ed-psych>

Statewide Practicum Informed Consent (Located in Therapy Notes)

Northern Arizona University: Tucson Campus Practicum Clinic Informed Consent Agreement

Counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals. Counseling has been shown to benefit most clients, but there are no guarantees about what will happen, and you may experience uncomfortable feelings since counseling may involve discussing unpleasant aspects of your life. Counseling requires your active effort, setting goals with your counselor and working on improving your life situation outside of the counseling sessions.

Appointments are usually 45-50 minutes long, once per week. If you are late, the session will still end on time. You are free to stop counseling at any time, or you can tell your counselor if you prefer to see a different counselor. If you cannot keep an appointment, please email your counselor to cancel the day before. If you miss more than one appointment without canceling in advance, your appointment time may be given to someone else. There is no charge for our services. In most cases counseling will have to stop by the end of the current semester, usually the _____ week of _____.

Counselors are required to keep records of their services. Your records are maintained in a secure electronic health record management system. Records of sessions include your reason for seeking counseling, the goal and progress of counseling, a diagnosis, topics discussed, etc. You may ask your counselor to show you your records and review them with you.

We are not able to provide services for all clients. If your counselor and his/her supervisor decide that you would be better served at another agency, you will be provided information on how to get such services. Practicum counselors are students in training rather than licensed professionals, so they do not write letters of support for disability determination, assistance animals, etc. If you are seeking counseling for current or potential court-related issues, including child custody, you should seek counseling elsewhere, since the student counselors are not qualified to evaluate such issues.

All counseling sessions are digitally recorded for use in supervision and training, and only the people listed at the bottom of this form may see session videos. The digital recordings of counseling sessions are not available for viewing by anyone other than practicum counselors and their supervisors. All digital recordings are deleted at the end of the semester. We are not able to provide crisis or emergency services. If you are in crisis and need help immediately you can call any of the following crisis hotline numbers:

- 1-800-631-1314 Crisis Response Network – Central Arizona
- 520-622-6000 Pima County Mental Health Crisis Line
- 1-800-SUICIDE
- 1-800-656-HOPE (National RAINN Sexual Assault Hotline)
- 480-736-4949 (Sexual Assault Hotline- Maricopa County)

If you have an emergency or feel unable to keep yourself safe, go to the nearest emergency room or call 911. You should understand that email is not a confidential form of communication with the Practicum Lab or your counselor. If between sessions, you need to contact the Practicum Counseling Lab regarding an appointment, email tucsonpracticumlab@nau.edu or email your counselor directly. If you need to email your counselor regarding cancellation or schedule change, do not include personal information that you wish to keep confidential.

The counselors do not interact with, accept friend requests, or follow current or former clients on any social networking site or blog (e.g., Facebook, X, Instagram, Snapchat, TikTok, LinkedIn, etc.). These sites are not secure and interacting on them blurs the boundaries of the counseling relationship.

What you say during counseling is confidential and will not be disclosed to anyone outside the center without your permission, but there are some exceptions. Counselors are required by law, and by their professional ethics, to break confidentiality (a) if you are seriously considering or likely to attempt suicide; (b) if you threaten to harm or assault someone; (c) if you engage or intend to engage in behavior that will expose someone to potentially life-threatening communicable disease; (d) if a counselor suspects abuse, neglect, or exploitation of a minor or an incapacitated adult; (e) if your mental condition renders you gravely disabled; (f) if client records are subpoenaed by the courts or if required by law to disclose information; (g) if records of clients need to be read by authorized auditors or researchers for approved purposes; (h) if you

Practicum Students in THIS Section

Instructors/Supervisors/ Admin

I have read the information on this form. If there is anything that concerns me or that I do not understand, I will seek clarification from my counselor before I sign.

I have read, understood, and agree to the items contained in this document, and agree to sign electronically.

Sign

PARENTAL CONSENT FOR MINORS (18 YEARS OF AGE AND YOUNGER):

Permission is required by parents for their child to participate in counseling at the NAU Clinic. In the State of Arizona, when parents are separated or divorced, both parents must provide written permission for their child to participate in counseling services or one parent must provide the Practicum Lab with court paperwork assigning them with sole decision-making power. If parents are married and one parent is signing, that parent attests that the other parent knows about the child(ren)'s therapy and agrees to consent of treatment.

A parent is required to accompany the child to all counseling sessions. If counseling is held at the clinic, a parent must be on campus and wait in the designated area while their child is in session. For telehealth counseling sessions, a parent must be at the same address as the child during all sessions.

By signing this form

I give my informed consent FOR MY CHILD

to participate in the counseling sessions with the NAU Graduate Student and affirm that I am the legal parent or guardian of (client's name)

I understand the information on this form, and I grant permission for my child to participate in counseling. *Consent may be revoked at any time by requesting termination in writing.*

Parent/Guardian Name and Phone Number

Parent/Guardian Name and Phone Number

INFORMED CONSENT FOR TELEBEHAVIORAL HEALTH SERVICES

This Informed Consent for Telebehavioral health services contains important information providing counseling services using the phone or the Internet. This Informed Consent document supplements, but does not replace, the consent form you signed previously to receive in-person services at NAU's counseling practicum laboratory. Please read this carefully and let me know if you have any questions. When you sign this document, it will represent an agreement between us.

Benefits and Risks of Telebehavioral Health Services

Telebehavioral health refers to providing counseling services remotely using telecommunications technologies, such as video conferencing or telephone. One of the benefits of telebehavioral health is that the client and clinician can engage in services without being in the same physical location. This can be helpful in ensuring continuity of care in situations where meeting in person is unfeasible. It is also more convenient and takes less time. Telebehavioral health, however, requires technical competence on both our parts to be helpful. Although there are benefits of telebehavioral health, there are some differences between in-person counseling and counseling over video conference, as well as some risks. For example:

- **Risks to confidentiality.** Because telebehavioral health sessions take place outside of the therapist's private office, there is potential for other people to overhear sessions if you are not in a private place during the session. On my end I will take reasonable steps to ensure your privacy. But it is important for you to make sure you find a private place for our session where you will not be interrupted. It is also important for you to protect the privacy of our session on your cell phone or other device. You should participate in counseling only while in a room or area where other people are not present and cannot overhear the conversation. If you are under the age of 18 a parent/legal guardian must be located at the same address during the time of all telebehavioral health session in case of emergency.
- **Issues related to technology.** There are many ways that technology issues might impact telebehavioral health. For example, technology may stop working during a session, other people might be able to get access to our private conversation, or stored data could be accessed by unauthorized people or companies. While we do take precautions to

- **Efficacy.** Most research shows that telebehavioral health services are about as effective as in-person psychotherapy. However, some therapists believe that something is lost by not being in the same room. For example, there is debate about a therapist's ability to fully understand non-verbal information when working remotely.

Electronic Platform for Telebehavioral Health

Counseling services will be delivered via a HIPAA-compliant Zoom videoconferencing application. You will need to download the free Zoom application prior to your first scheduled session to access the platform, at <https://zoom.us/signup>. The Practicum Scheduler or your Counselor-in-training will email you with a link to connect with Zoom for your scheduled appointment(s). There is no charge for Zoom; however, you are solely responsible for any cost to obtain any necessary equipment or internet service to take part in telebehavioral health services.

If you cannot attend a scheduled session or need to change your appointment time, please contact your Counselor-in-training by email. Although it is understood that unforeseen circumstances do arise, 24-hour notice, when possible, is preferred.

Confidentiality

I have a legal and ethical responsibility to make my best efforts to protect all communications that are a part of our telebehavioral health services. However, the nature of electronic communications technologies is such that I cannot guarantee that our communications will be kept confidential or that other people may not gain access to our communications. I will do my best to use updated encryption methods, firewalls, and back-up systems to help keep your information private, but there is a risk that our electronic communications may be compromised, unsecured, or accessed by others. You should also take reasonable steps to ensure the security of our communications (for example, only using secure networks for remote counseling sessions and having passwords to protect the device you use for remote counseling sessions).

The extent of confidentiality and the exceptions to confidentiality that I outlined in the initial Informed Consent still apply in remote counseling services. Please let me know if you have any questions about exceptions to confidentiality.

Crisis, Emergencies, and Technology

Crisis counseling services are not provided through the NAU counseling practicum lab, and this policy extends to services provided via telebehavioral health. If you are currently in a crisis situation requiring high levels of support and intervention, or should you enter into a state of crisis during the course of our remote work together, you are directed to access your local crisis counseling services. If you in crisis and need help immediately you can call any of the following crisis hotline numbers:

- 1-800-631-1314 Crisis Response Network – Central Arizona
- 520-622-6000 Pima County Mental Health Crisis Line
- 1-800-SUICIDE
- 1-800-656-HOPE (National RAINN Sexual Assault Hotline)
- 480-736-4949 (Sexual Assault Hotline- Maricopa County)
-

Assessing and evaluating threats and other emergencies can be more difficult when conducting telepsychology than in traditional in-person therapy. To address some of these difficulties, crisis response resources are provided above. Additionally, I will ask you to 1) provide the physical location(s) where you will be accessing telepsychology services 2) identify an emergency contact person who is near your location and who I may contact in the event of a crisis or emergency to assist in addressing the situation and 3) *If you are minor (under the age of 18), a parent or guardian MUST physically be at your location where you will be accessing telepsychology services to be contacted in the event of a crisis or emergency to assist in addressing the situation. Signing this Informed Consent document indicates your authorization for me or my supervisor to contact your emergency contact person as needed during such a crisis or emergency.*

If the session is interrupted for any reason, such as the technological connection fails, and you are having an emergency, call 911, or go to your nearest emergency room. If the session is interrupted and you are not having an emergency, disconnect from the session and use the original link provided to you by email to re-enter the Zoom meeting.

Records

The telehealth counseling sessions will be uploaded to a secure server. As usual, the only persons who will have access to the videos will be your counselor-in-training, and their university-based supervisor. Supervisors periodically review videos to give counselors-in-training feedback on their skills development and to offer the counselor-in-training guidance for your benefit. Supervisors uphold that same standards of confidentiality as do your counselor(s)-in-training.

Physical Location

Please provide the address(es) of the physical locations where you will be receiving telehealth counseling services. Your address information will remain confidential, unless crisis services mobilization is deemed necessary.

Address(es) where you will be physically located while receiving telehealth counseling services (must be in the State of Arizona):

Emergency contact name, relationship to you, and phone number(s):

Informed Consent

This agreement is intended as a supplement to the general informed consent that we agreed to at the outset of our clinical work together and does not amend any of the terms of that agreement.

CLIENT ELECTRONIC SIGNATURE VERIFICATION STATEMENT: This Electronic Verification Statement is intended to document and acknowledge that I have read and understood the information on this form and that I certify that all information on and submitted with this form is true and correct. I understand that my verification is being provided by typing my name in the box below along with the date this form is completed. Additionally, I will submit this form to the Patient Portal on TherapyNotes which requires a computer login name and secure password. The process used is to ensure that all documentation completed under this combination is done by me. I have read and understand the statements above.

I have read, understood, and agree to the items contained in this document, and agree to sign electronically.

Sign

Practice Acknowledgment

Sign This Form: I, Practice User, have reviewed this document on Date.

Share on Portal

Appendix C: Case staffing outline

Case Staffing Outline

Please complete one reflective case staffing's during your practicum.

- Your instructor will provide you with due dates.
- Case staffing will be orally reported to your Practicum Clinic instructor and peers in group supervision.
- Complete paper using APA formatting.
- One Case Staffing paper will be considered your "Signature Assignment."
- The rubric on Qualtrics will be used to evaluate your paper. It is recommended that you use the rubric as a guide for writing your paper. Your instructor will provide you with a link to view the rubric. The case study must include the following elements:

Title page should include: Case Staffing #1 (or #2); Date; Counselor-in-training Name; Location (Which NAU campus); Client Pseudonym or Case #.

Case Staffing should include the following information, using these headings:

1. Identifying Data: Client's age, gender, marital status, ethnicity, current living situation, education, job, etc.
2. Presenting Problem: Client's description of the problem or situation that brought them to counseling.
3. Background Information: Information relevant to the presenting problem.
4. Assessment: Description of formal and informal assessment conducted, including mental status exam (if needed), psychological tests, etc. with test results and interpretations.
5. Case Conceptualization: Describe your view of the client's problem, based on the background information, your assessments, and your theoretical approach. What is the client's problem, in your view (it may differ from the client's presenting problem)? Why does the client have this problem? Why have they had difficulty resolving it? Be sure to include a strengths-based perspective.
6. Integration of a Guiding Theory: Describe your theoretical approach to counseling with this client. How does your theory guide your conceptualization of the client, their problem, your treatment plan goals and your choice of interventions with this client?
7. Use of Data in Decision Making: Describe how you gathered, analyzed and used data to make decisions in assessing your client, making a diagnosis, creating a treatment plan and choosing interventions.
8. Diagnostic Impression: The diagnosis must be based on the DSM-5.
9. Treatment Plan: Integrate your treatment plan (issues, goals, objectives, counseling methods).
10. Evaluation: What data was collected to determine whether the treatment goals were reached?
11. Literature Review: What key words or phrases did you use to define the client's problem? Summarize the recommended treatments that you found in at least three recent counseling journal articles, including evidence-based treatments.
12. Intervention: Describe your treatment approach in detail. What counseling theories/approaches and techniques did you use? What techniques do you intend to use in upcoming sessions? If you modified techniques for this client, describe how.

13. Rationale: Why did you use the treatment approach you used?
14. Outcome: To what extent did the client improve? What changes occurred?
15. Consultations: With whom did you consult regarding this case?
16. Diversity Issues: How did you deal with diversity issues in this case? Address the ways that you have used ACA multicultural competencies in order to adapt your approach to this particular client. Address how your own ethnic identity, attitudes, beliefs, understanding and acculturative experiences impact your view of this client.
17. Lifespan Development: Address how your understanding of lifespan theories and your client's stage of lifespan development impacts your conceptualization of the client's problem, treatment plan goals and choice of interventions.
18. Technology: Describe your use of recording equipment, computers, e-mail, electronic client record system, etc.
19. Ethical and Legal Standards: Describe ethical or legal issues that were relevant to this case, the relevant ACA standards, and how the issues were resolved.
20. References: in APA style.

Appendix D: Case Staffing Rubric

CASE STAFFING REFLECTION PAPER RUBRIC

	Inadequate Value: 1	Satisfactory Value: 2	Good Value: 3	Excellent Value: 4	Score/ Level
Reflective thinking & professional maturity CAEP Unit Level Standard 1, 3	Demonstrates little to no awareness of problems, and used some	Demonstrates basic awareness of problems, and used skills	Demonstrates thoughtful awareness of problems and used relevant	Demonstrates exceptional insightful and a thorough understanding	
	skills to increase client effectiveness	appropriately increase client effectiveness	counseling skills to increase client effectiveness	and exceptional use of counseling skills used to increase client effectiveness	

Integration of Counseling Theory in Case Conceptualization CAEP Unit Level Standard 1, 3	Link to theory incomplete or vague with little or no supporting details or link to presenting problem	Discusses at least one theoretical construct and makes some link to presenting problem	Discusses two or more theoretical constructs and clear link to presenting problem	Discusses two or more related theoretical constructs exceptionally well and strong links made to presenting problem	
Diagnosis/ Assessment of Presenting Problem CAEP Unit Level Standard 3	based on minimal evidence; poorly presented	Adequate and based on some evidence; presentation is weak	Adequate and based on some evidence; well presented	Accurate and based on considerable evidence; well presented	
Literature Search CAEP Unit Level Standard 1	No evidence of literature search	Three sources included; but not relevant or recent	Sources included are relevant and recent	Sources included are relevant, recent, and related to evidence-based practice	
Use of data in decision-making (e.g., treatment, assessment, evaluation, etc.) CAEP Unit Level Standard 1, 3	Does not use data in decision-making	Uses data but may not be related to decision-making	Good use of data in decision-making	Uses data effectively in decision-making	

Treatment Goals CAEP Unit Level Standard 3	No treatment goals identified	Few if any goals identified; some connection to presenting problem and evidence-based treatment	Short and long-term goals; vaguely tied to evidence-based treatment	Short and Long-term goals clearly tied to presenting problem, and evidence-based treatment	
Ethical and Legal Issues and Professional Standards CAEP Unit Level Standard 1	Little or no understanding and awareness of ethical/legal issues and professional standards	Some understanding and awareness of ethical/legal issues and professional standards	Demonstrates understanding and awareness of ethical /legal issues and professional standards	Demonstrates excellent knowledge and awareness of ethical/legal issues and professional standards	

CASE STAFFING REFLECTION PAPER RUBRIC, *CONTINUED*

	Inadequate Value: 1	Satisfactory Value: 2	Good Value: 3	Excellent Value: 4	Score/ Level
Openness to Diversity Issue and Ability to Work with Diverse	No evidence of openness, understanding and ability to	Limited evidence of openness, understanding	Some evidence of openness and/or understanding	Strong evidence of openness, understanding	
Populations CAEP Unit Level Standard 4	work with diverse populations	and ability to work with diverse populations	and ability to work with diverse populations	and ability to work with diverse populations	
Technological Skills CAPE Unit Level Standard 1	Limited or no evidence of ability and experience with technological skills	Some evidence of ability and experience with technological skills	Provides good evidence of ability and experience with technology	Strong evidence of ability and experience with technology	
Writing Skills	References do not follow the proper format (APA style) and Frequent errors in spelling, grammar, and punctuation	References do not follow the proper format (APA style) or Errors in grammar and punctuation, but spelling has been proofread	References are prepared in the proper format (APA style); Occasional grammatical errors and questionable word choice	References are prepared in the proper format (APA style); Nearly error-free which reflects clear understanding and thorough proofreading	

QUALTRICS LINK:

https://nau.co1.qualtrics.com/jfe/form/SV_6D3yGx5qkLu2gTP

Clinical Supervision Session Form*

Name of Supervisee:	<i>Mode of clinical supervision:</i> <input type="checkbox"/> Online <input type="checkbox"/> Telephone <input type="checkbox"/> Telemedicine <input type="checkbox"/> In person
	<i>Please indicate:</i> <input type="checkbox"/> Individual <input type="checkbox"/> Group (2) <input type="checkbox"/> Group (3-6)
Date of session:	Duration of session: <i>(Sessions must be at least 30 minutes)</i>
Comprehensive description of topics discussed:	
Comprehensive description of results of compliance review of supervisee's clinical documentation:	
<i>All sections above must be completed in their entirety. Refer to R4-6-212.</i>	

Supervisor's name and credentials: _____

Supervisor's telephone number: _____

_____ Supervisor signature	_____ Date signed
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_____ Supervisee signature	_____ Date signed
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Clinical Supervision Session Form*

AZBBHE Clinical Supervision – *referenced to A.A.C. - R4-6-212*

- Review of legal and ethical requirements applicable to the scope of practice, including professional conduct – C1
- Monitoring of activities to ensure that services are provided safely and competently – C2
- Verification that the supervisee provides clients with appropriate written notice of clinical supervision, including the means to obtain the name and telephone number of the supervisee's clinical supervisor – C3
- On-going compliance review to ensure that the supervisee maintains adequate written documentation – C7

ADHS/DBHS Practice Protocol – *Clinical Oversight*

The following minimum elements must be addressed when providing clinical oversight.

Additional items can be discussed as determined by clinical necessity. NOTE: The items below do not relate to the AZBBHE requirements.

- Legal and ethical requirements applicable to the scope of practice
- Adherence to agency, licensing and accrediting requirements
- ADHS/DBHS Provider Manual and Clinical Practice Protocols
- Arizona Vision and 12 Principles and Arizona Statutes
- Meet Me Where I Am practice fidelity/collaboration with services
- Special needs of Children
- Special needs of the Developmentally Disabled
- Assessment and evaluation of competence and effectiveness
- Self-monitoring of compassion fatigue, burnout and impairment
- Client's and/or family's behavioral health
- Client progress towards the agreed upon ISP goals
- Degree of client symptomatic and functional limitations
- Client adherence to treatment and interventions to improve adherence
- Promotion of culturally sensitive treatment interventions
- Promotion of recovery
- Multidisciplinary collaboration around patient's needs
- Development of strengths-based/recovery-oriented treatment goals
- Enhancement of personal/professional development
- Client and family spirituality needs