Community Counseling Training Center

Handbook

MSEd and PhD Counseling Programs
Counseling, Adult, & Higher Education Department
Northern Illinois University
# Table of Contents

Introduction ........................................................................................................................................... 5  
Community Counseling Training Center (CCTC) .................................................................................. 5  
CCTC Staff ........................................................................................................................................... 5  
  CCTC Administrative Staff .................................................................................................................. 5  
  CCTC Professional Staff ..................................................................................................................... 6  
  CCTC Counseling Staff ....................................................................................................................... 6  
  CCTC Research Assistants ................................................................................................................ 6  
  CCTC Trainees ................................................................................................................................... 6  
Prerequisites to Working in the CCTC ................................................................................................. 6  
  Criminal Background Check ............................................................................................................. 6  
  Liability Insurance ............................................................................................................................ 7  
  Mandated Reporter Training ........................................................................................................... 7  
  Health Insurance Portability and Accountability Act ....................................................................... 7  
  Orientation to the CCTC .................................................................................................................... 7  
Prerequisites for Counseling Practicum ............................................................................................... 8  
General Practicum Requirements ....................................................................................................... 8  
  Required School Counseling Specialization K-12 School Practicum Hours .................................... 9  
    Optional Group Practicum for MSEd Practicum Counselors ......................................................... 9  
  Required Process Group Co-Facilitating for PhD Advanced Practicum Counselors .................. 10  
Prerequisites to CCTC Internship ....................................................................................................... 10  
General CCTC Internship Requirements ........................................................................................... 10  
CACREP Standards (2016) .................................................................................................................... 11  
Developmental Counseling Goals ....................................................................................................... 11  
Developmental Objectives .................................................................................................................. 12  
  General Objectives .......................................................................................................................... 12  
  Objectives for Group Counseling .................................................................................................... 13  
  Objectives for Family and Couples Counseling: ........................................................................... 13  
  Objectives for Child Counseling: ................................................................................................... 13  
Supervision ........................................................................................................................................... 14  
Consultation ....................................................................................................................................... 15  
Ethics .................................................................................................................................................... 15  
Professional Behaviors ...................................................................................................................... 16  
  Professional Disposition .................................................................................................................. 16  
  Professional Development .............................................................................................................. 16  
  Professional Organizations .............................................................................................................. 16  
Evaluation .......................................................................................................................................... 17  
Confidentiality ..................................................................................................................................... 17  
HIPAA .................................................................................................................................................. 19  
CCTC Protocols ................................................................................................................................... 19  
  Client Requests for Services .......................................................................................................... 19  
  Scheduling Binder ............................................................................................................................ 20  
  Titanium Scheduler ......................................................................................................................... 20  
  Assignment of Clients ...................................................................................................................... 20  
  Appointment Reminder/Confirmation .............................................................................................. 21  

Last Updated 12/15/2017
Rights and Responsibilities in CCTC Supervisory Relationships

Counselor Rights

Group Supervision Interactions

Meals/Food

Sending Termination Notices

Client Files

Counseling Sessions

Keys

The Phone

The Lobby

Preparation for Sessions

Arriving for Sessions

Intake/Termination Assessments

CCAPS-62

SCL-90R

CBCL

Intake Sessions

First Counseling Session

Recording Sessions

Personal Laptop

Personal Video Recorder/Tablet

CCTC Laptop

Landro

School-based Session Audio Recorders

Record Keeping

Family/Group Files

School-Based Client Files

Paperless Client Files

Scheduling Ongoing Client Sessions

Weekly Client Outcome Assessments

Rescheduling Client Sessions

Referral of Clients

Crisis/Emergencies

Client Termination

Mutual Termination

Client or Counselor Initiated Termination

Administrative Termination

CCTC Procedures

The Lobby

The Phone

Voicemail

Keys

Forms

Counseling Sessions

Client Files

Sending Termination Notices

E-mail Notices

Mailing Physical Notices

Supplies

Computer/Equipment Use

Reviewing Session Recordings

Meals/Food

Group Supervision Interactions

Rights and Responsibilities in CCTC Supervisory Relationships

Counselor Rights

Last Updated 12/15/2017
Counselor Responsibilities

Supervisor Rights

Supervisor Responsibilities

Final Reminders

Assessments

DSM

CCTC Research GAs

Appendices

Appendix A: Statement of Liability Awareness

Appendix B: Description of CCTC Forms

Appendix C: General CCTC Scheduling and Documentation Structure

Appendix D: Professional Disclosure & Informed Consent Statements Template

Appendix E: Initial Session Suggested Procedures

Appendix F: Appointment Reminder Card Sample

Appendix G: Confirmation of Counseling Completed for Course Opportunity Sample

Appendix H: Termination Notice Templates

Appendix I: Crisis Procedures

Appendix J: Personal Agreement Plan Card Sample

Appendix K: Safety Plan Sample

Appendix L: Counseling Resources in DeKalb County

Appendix M: Feedback

Appendix N: Counseling Competencies Scale (CCS)
Introduction

This handbook was written to answer some basic questions regarding the counseling practicum and internship field-experiences in the Community Counseling Training Center (CCTC). The established set of standards can be easily read and followed. This handbook addresses the general policies and procedures that all counselors and supervisors experience rather than specific approaches that each University Supervisor/Instructor generates in supervising specific counselors and supervisors in training. From time to time this handbook will be revised to update information or include new content. Counselors, supervisors, and faculty are encouraged to make suggestions about future revisions.

Community Counseling Training Center (CCTC)

The Community Counseling Training Center (CCTC) is an instructional facility operated by the counseling program within the Department of Counseling, Adult and Higher Education (CAHE) in the College of Education (Coe) at Northern Illinois University (NIU). The mission of the CCTC is to provide comprehensive training for counselors and counseling supervisors in training for both master's and doctoral counselors by providing high quality, culturally responsive counseling services to NIU students, faculty, staff, and community members.

The counseling graduate students, who constitute the CCTC practicum counselors, interns, supervisors-in-training, and their faculty supervisors, provide confidential counseling services to the people of DeKalb County and the surrounding areas. Clients of the CCTC are not required to be university affiliates. The services offered are designed to be responsive to the needs of the CCTC clients.

Individual, couple, family, and group counseling services are available. Play therapy and parent consultation are also available on a more limited basis. Clients seeking these services receive appropriate help for diverse concerns and goals, and CCTC counselors are afforded the opportunity to become knowledgeable and skillful in a variety of areas. All professional activity in the CCTC conforms to the American Counseling Association (ACA) Code of Ethics and Standards of Practice.

CCTC Staff

The CCTC staff includes administrative staff, professional staff, counseling staff, and research assistants.

CCTC Administrative Staff

The Clinical Director oversees the functioning of the CCTC. The CCTC Director provides individual and triadic supervision for masters-level CCTC Counseling Interns. The current Director is Kimberly Hart Phone: 815-753-9308, Office: GH 416-E.

The CAHE Department Chair functions as the operating and financial manager for the CCTC. The department chair advises and approves policy changes suggested by the Clinical Director in consultation with Counseling Faculty.
CCTC Professional Staff

The University Supervisor for each counseling group is the counseling faculty, or adjunct faculty member who serves as primary instructor for each course section of counseling practicum.

The Doctoral Supervisors-in-training are doctoral-level graduate students, enrolled in the Counselor Education & Supervision (CES) program, who have completed or are in the process of completing CAHC 752: Supervision in Counseling. Generally, a doctoral supervisor will attend and co-facilitate weekly group supervision for master’s counselors-in-training, weekly individual/triadic supervision, and live supervision in the CCTC. Doctoral SITs function under the direction and supervision of the faculty university supervisor.

CCTC Counseling Staff

The Practicum Counselors are masters and doctoral level practicum counselors enrolled in the CAHC 550 or CAHC 750 practicum courses. Practicum Counselors are supervised in small groups by a designated university supervisor each semester.

The CCTC Interns are masters and doctoral level counselors who have successfully completed CAHC 550 or CAHC 750 and working towards advanced counselor development and program/licensure hours. CCTC Interns are supervised by the CCTC Clinical Director.

CCTC Research Assistants

The Graduate Research Assistants (GAs) are doctoral and sometimes masters level students enrolled in the counseling programs. GAs help orient CCTC staff members to CCTC policies and procedures, collect and aggregate data related to CCTC operations and services. By extension of the CCTC service provisions, the GAs maintain recruitment and research protocols for counseling admissions and counseling field-experiences under the supervision of the CCTC Clinical Director. The GAs are not acting as counseling professionals in their roles; although they have access to confidential client records, and may conduct intake interviews, it is not appropriate for CCTC counselors to disclose session content to the GAs. In counseling matters, GAs typically receive instructions directly from the Clinical Director and/or University Supervisors. GAs should be informed of equipment and supply needs immediately. Requests for new clients should be communicated to University Supervisors who will inform the GAs.

CCTC Trainees

CCTC Trainees are students enrolled in pre-practicum counseling related courses in which they are using CCTC resources and counseling rooms on a limited basis for education in assessment and/or basic skills. These students and their instructors communicate directly with CCTC Research Assistants about procedures, scheduling, and access to approved CCTC resources.

Prerequisites to Working in the CCTC

There are several basic and universal expectations that all CCTC staff, who are direct service providing affiliates of the CCTC, must adhere to.

Criminal Background Check

The Counseling faculty requires that prior to practicum and internship all counselors submit to a criminal background check (CBC) by the Illinois State Police and the Federal Bureau of Investigation (Adam Walsh Child Protection Act) as outlined in. This is consistent with the state
law that requires Illinois school districts to conduct criminal background investigations of applicants for certified and non-certified positions, including counseling licensure. An applicant whose background check results in a status of "no record" is documented as having “passed” the required CBC. An applicant who does not pass their CBC must receive specific departmental review and consultation to be approved for advancement into practicum, working in the CCTC, and internship.

**Liability Insurance**

Each counselor and supervisor must have a Proof of Liability Coverage sheet on file prior to working in the CCTC. Each counselor and supervisor must submit a copy of the first page of your current professional insurance policy showing counselors’/supervisors’ name, policy number, and dates of coverage. No counselor will be allowed to see clients without providing this proof of liability insurance.

Information concerning liability insurance may be obtained from the faculty or doctoral supervisor. Practicum counselors can obtain insurance through ACA, AMHCA, ASCA, or CPH insurance with ICA membership (www.cphins.com). Doctoral insurance can be obtained through HPSCO discounted with ACA membership or CPH insurance with ICA membership.

**Mandated Reporter Training**

Professional Counselors are part of the group of individuals identified as mandated reporters of suspected abuse or neglect experienced by minors and incapacitated/vulnerable/elderly adults. As counselors in training, CCTC counselors are required to complete online mandated reporter training for reporting child abuse to DCFS prior to starting work in the CCTC. There are other reporting agencies for vulnerable aging adults and vulnerable individuals with disabilities.

**Health Insurance Portability and Accountability Act**

The CCTC works to maintain the highest ethical principles and adheres to Health Insurance Portability and Accountability Act (HIPAA). HIPAA is a Federal Law passed regarding confidentiality measures undertaken in settings where confidentiality is expected to be legally observed. Although the CCTC does not fall under regulations put forth by the Federal law, it does fall under the regulations put for by Illinois State Law. As mandated by Illinois State Law, CCTC is required to follow HIPAA.

**Orientation to the CCTC**

CCTC counselors and supervisors are provided a detailed orientation to the CCTC. This is a two-hour introduction usually scheduled the Friday evening or Saturday morning just before the start of the fall and spring semesters. Practicum counselors are required to follow CCTC, professional, and ethical guidelines, which include: (a) proper operation of hardware equipment and software platforms, (b) appropriate attire and professional behaviors, (c) client requests and scheduling, (d) record-keeping, and (e) maintaining client confidentiality. Failure to comply with these guidelines may result in temporary suspension of seeing CCTC clients and/or unsatisfactory assessment for the practicum or internship course semester.

An abridged version of the CCTC orientation is provided to counselors and supervisors who have attended a full two-hour CCTC orientation within the prior two years.
Prerequisites for Counseling Practicum

Each practicum counselor enrolled in CAHC 550: Practicum in Counseling and CAHC 750: Applied Practicum in Counseling must meet the prerequisites cited in the current Northern Illinois University Graduate Catalog under the course listing and noted on their Program of Study.

General Practicum Requirements

1. The client contact requirement for practicum courses is minimum of 40 recorded clock hours of counseling sessions with clients.

2. Individual sessions in the CCTC are 50 minutes and counted as one direct hour. Sessions lasting less than 50 minutes should be rounded to the nearest quarter hour (i.e., .25-hour, .5-hour, .75-hour).

3. All practicum counselors must attend the weekly group supervision practicum class which they are assigned. Practicum counselors must make arrangements with work or home responsibilities to be available for the entirety of all group supervision class times.

4. All practicum counselors must provide the CCTC staff with 8 to 10 clock hours that you would be available to see clients each week. You should keep these hours reserved for seeing clients for the entire semester. Maintaining 8 to 10 clock hours of client availability allows for a margin of error in obtaining your 40 direct client hours.

5. The format of counseling practicum typically includes 2 to 3 client hours in the CCTC before or after group supervision. These hours are devoted to individual counseling and peer observations. Typically, your other 6 to 8 of client hours are scheduled on one or two other days between Monday and Saturday each week. School counseling specialization practicum counselors will be able schedule up to half of their weekly client hours at an approved K-12 school site.

6. All practicum counselors must prepare for and attend one to one and a half hours of individual or triadic, face-to-face supervision outside your assigned group supervision class each week. Individual and triadic supervision is typically scheduled on a different day than the group supervision class. Individual or triadic supervision sessions alternate and are scheduled throughout each practicum semester based on developmental needs of the practicum counselor.

7. Practicum counselors must be prepared to work in the CCTC 2 to 3 days each week in order to meet with clients, complete client notes, and attend individual; triadic; and group supervision. Practicum counselors who are unable to be actively present for all client and supervision sessions may need to postpone practicum to a semester when all weekly meeting, preparation, and documentation requirements can be met.

8. Regardless of if practicum counselors complete their minimum number of required clock hours for CAHC 550 or 750, all practicum counselors must be working with between two and three clients in the CCTC for the entirety of the semester.
Required School Counseling Specialization K-12 School Practicum Hours

Practicum counselors preparing for school counseling licensure (PEL) are required to find a K-12 school placement where they can complete at least 20 direct contact hours with school-aged clients. These hours can be a combination of group and individual school counseling hours. All individual school counseling hours must be audio-recorded individual (seeing 3-6 individual counseling clients). There must be an emergency contact person at this site, who usually is a PEL School Counselor, but may be a school administrator. The emergency contact person is not required to provide supervision, but may choose to provide ongoing consultation. All other things being equal, the best option for school counseling practicum counselors is to complete their school practicum requirements at the same school where they plan to conduct their counseling internship.

Optional Group Practicum for MSEd Practicum Counselors

Practicum counselors enrolled in CAHC 550 have the option to complete some of their minimum 40 direct client contact hours through co-facilitated group counseling work. If this option is chosen two pieces of documentation must be submitted. First the school or clinical training agreement must be completed, signed, and submitted via Blackboard 550 course assessment link by the first group supervision class meeting of the semester. Second, a group plan (accessed through Blackboard course) is submitted within the first week of the group session meetings.

A maximum of 15 co-facilitated group clock hours will be counted towards the minimum 40 contact clock-hours requirement for counseling practicum, even if the group is scheduled for more than 15 clock hours within that NIU semester time frame. For school counseling practicum counselors, the group may be at the same school where individuals are being seen, or the group may be in a different location.

The following elements must be present for this option:

- The group can be one of the following group types:
  - counseling or therapy
  - psychoeducation
  - CAHC 211 career teaching (only if completed during

- The group sessions must be co-facilitated for the entirety of each group session by one of the following:
  - an experienced group co-facilitator (minimum two years of experience)
  - another current practicum counselor enrolled in CAHC 550, with additional supervision from the University Supervisor
  - a current intern counselor enrolled in CAHC 586, with additional supervision from the University Supervisor
  - a PhD CES student in the NIU Counseling program

It is expected that these group practicum sites be secured several months prior to the start of semester. At the end of the semester, the co-facilitators and/or faculty supervisor will submit a Group Counseling Feedback form for respective practicum counselors.
**Required Process Group Co-Facilitating for PhD Advanced Practicum Counselors**

All advanced practicum counselors enrolled in CAHC 750 must co-facilitate at least 15 hours of group work—the process group experience for master’s students enrolled in CAHC 540—as part of their minimum 40 direct contact hours before moving on to internship. At the end of the semester the doctoral co-facilitators will provide a peer (or faculty supervisor if the co-facilitator is another practicum counselor) of the group must submit a Group Counseling Feedback form for each other.

**Prerequisites to CCTC Internship**

Each CCTC counseling intern must have applied for, been approved for, and be enrolled in CAHC 586 or CAHC 786: Internship Counseling, or be employed by NIU, during any semester in which they are working in the CCTC. Satisfactory completion of CAHC 550: Practicum in Counseling or CAHC 750: Applied Practicum in Counseling is required prior to being approved for internship within the CCTC.

A CCTC Intern application must be submitted by both masters and doctoral CCTC interns each semester they desire to see counseling clients as part of CCTC services. This CCTC Intern Application is required in addition to the general application for advancement and/or continuation of counseling internship expectations for degree completion. The CCTC Intern Application is to be completed one month before the start of each new CCTC intern contract semester:

- August 1st for Fall
- December 1st for Spring
- May 1st for Summer

PhD supervisors in training only need to complete their general PhD internship application in order to be considered for supervision work in the CCTC during each semester.

**General CCTC Internship Requirements**

- Have successfully completed practicum (CAHC 550 or CAHC 750)
- Be registered for internship while providing counseling in the CCTC (CAHC 586 or CAHC 786)
- Provide proof of professional liability insurance coverage
- Have passed Criminal Background Check within last two years
- Attend weekly individual/triadic supervision with the CCTC Internship designated supervisor
- Maintain 8 hours of non-client working hours in the CCTC each week, including:
  - 3 hours for intake sessions as assigned*
  - 2 hours for bi-weekly staffing (Mondays at 10:00 a.m.)
  - 2 office work hours each week for CCTC duties as assigned (scheduling, client reception, community outreach, etc.)
  - 1 hour of clinical supervision
- Master's interns maintain a minimum* client load of 4 ongoing clients each week, excluding NIU breaks

Last Updated 12/15/2017
• Doctoral interns maintain a minimum* client load of 3 ongoing clients each week, excluding NIU breaks

*Actual intake and client loads are dependent upon client requests received and CCTC client service need.

CACREP Standards (2016)

• 2.F.1.l - self-care strategies appropriate to the counselor role
• 2.F.1.k - strategies for personal/professional self-evaluation and implications for practice
• 2.F.1.m - the role of counseling supervision in the profession
• 2.F.2.c - multicultural counseling competencies
• 2.F.3.h - a general framework for understanding differing abilities and strategies for differentiated interventions
• 2.F.4.i - methods of identifying and using assessment tools and techniques relevant to career planning and decision making
• 2.F.5.c - theories, models, and strategies for understanding and practicing consultation
• 2.F.5.f - Counselor characteristics and behaviors that influence the counseling process
• 2.F.5.i - development of measurable outcomes for clients
• 2.F.7.c - Procedures for assessing risk of aggression or danger to others, self-inflicted harm, or suicide
• 2.F.7.e - Use of assessments for diagnostic and intervention planning purposes
• 2.F.7.k - use of symptom checklists, and personality and psychological testing
• 2.F.8.k - Identification of evidence-based counseling practices
• 5.C.3.a - intake interview, mental status evaluation, biopsychosocial history, mental health
• 5.D.3.c - Strategies to advocate for persons with disabilities
• 5.G.3.e - Use of developmentally appropriate career counseling interventions and assessments

Developmental Counseling Goals

Practicum, as the word implies, is about practical experiences. Practicum in Counseling has been developed to provide counselors with closely supervised counseling experiences that facilitate further development as emerging professional counselors. The practicum field-experience combines three essential elements in counselor training: counseling skills, peer group collaboration skills, and essential professional development/workplace skills. The practicum should prepare counselors for successful advancement into counseling internship field-experiences. The practicum field-experience requires dedication, a willingness to risk new behaviors, experiment with new methods, take on the assumption of personal responsibility, and a major commitment of emotional and physical energy.

Counselor education literature outlines three areas of mastery important for practicum counselors in training: counseling skills, cognitive development and professional maturity. During your practicum field-experience you will be developing individual counseling and peer group member skills, conceptualization, observation and process skills, and work habits that reflect your
personal ability to adapt to supervision, remain organized and manage the real life demands of advanced clinical practice.

It is expected that through counseling practicum experiences, each Practicum Counselor will develop and demonstrate an integration of several conceptual and behavioral skills: basic counseling skills (such as reflective and empathetic responses), use of a counseling theory to guide counseling conceptualizations and interventions, session management, client treatment, personalization awareness, ethical practices, and legal conduct. Counseling objectives are specified below.

**Developmental Objectives**

The following list, taken in part from Engels and Dameron (1990), constitutes the generally acceptable objectives for practicum field-experiences and CCTC internship. Emphasis on the various goals and objectives for counselor development may vary from professor to professor, supervisor to supervisor. University Supervisors and Supervisors in Training will discuss their additional individualized objectives for practicum counselors.

**General Objectives**

Each practicum counselor will demonstrate:

1. An understanding of the basic principles of human growth, development, and learning and how these principles facilitate the learning and counseling process.
2. A clear and concise understanding of the theories, techniques, and procedures specific to the practicum counselor’s guiding theory of counseling.
3. Skills basic to the practicum counselor’s guiding theory of counseling.
4. An understanding of the dynamics of individual behavior in the counseling relationship and recognize, if necessary, the need for change in attitudes and behavior.
5. The ability to establish and maintain counseling relationships consistent with the ACA Ethical Standards.
6. The ability to discern and implement the counseling mode most facilitative to the problem presented by the client. (This implies recognition of referral responsibility when the client can be best served in this manner).
7. The ability to establish and maintain a constructive, facilitative, and ongoing relationship with clients through the use of a variety of interpersonal skills.
8. The ability to evaluate data gathered from counseling sessions and to interpret the data to a client in a way the client can understand and integrate the data.
9. Effective communication of relevant information to clients.
10. The ability to communicate about a client with other health professionals when necessary without violating the confidentiality of the counseling relationship.
11. The ability to render a DSM-V diagnosis on at least one client.
12. Recognition of personal and professional limitations and the ability to make appropriate referrals that enhance the achievement of a client’s counseling goals.
13. A personal life-style that is relatively open, transparent, and experimental, yet communicates a commitment to personal values.

**Objectives for Group Counseling**

Each practicum counselor will demonstrate:

1. An understanding of the Association of Specialists in Group Work’s (ASGW) Best Practice Guidelines and demonstrates application of planning, performing, and processing.

2. An understanding of the principles of group dynamics, including group process components, developmental stage theories, group members' roles and behaviors, and therapeutic factors of group work.

3. An understanding of group leadership as facilitation styles and approaches, including characteristics of various types of group leaders and leadership styles.

4. An ability to apply theories of group counseling, including commonalities, distinguishing characteristics, and pertinent research and literature.

5. An understanding of group counseling methods, including group practicum counselor orientations and behaviors, and apply appropriate selection criteria and methods, and methods of evaluation and effectiveness.

6. An understanding of group strategies for working with and advocating for diverse populations, including multicultural competencies.

**Objectives for Family and Couples Counseling:**

Each practicum counselor will demonstrate:

1. An understanding of the shift from an individual focus to a family focus.

2. The ability to describe the client family systematically in a manner consistent with specific model(s) of family counseling.

3. The ability to recognize and describe interactions within the family.

4. The ability to access the current problem as a function of the system.

5. Skills basic to a specific model(s) of family counseling.

6. The ability to establish and maintain counseling relationships consistent with the ACA Code of Ethics and Standards of Practice

**Objectives for Child Counseling:**

Each practicum counselor will demonstrate:

1. An understanding of the world of children.

2. The ability to describe the developmental needs of children.

3. An effective approach to communicating with children.

4. An understanding of children’s behavior.

5. Reflection of the feelings children express through their behavior.

6. The ability to describe the theoretical approach the practicum counselor would use with a child and demonstrate that approach with children.
7. If play therapy will be used, the ability to describe the toys and materials essential to play therapy sessions and demonstrate play therapy approaches with children.

Supervision

The supervision relationship is one in which the supervisor assumes some responsibility for the counselors’ behavior with clients. Supervision is an integral part of counselors’ professional growth and development. A supervisory relationship is advised even after graduation. It is assumed that in most cases, the counselor in training has little or no experience with clients and should be guided to develop both counseling experience and professional habits. The benefits of supervision are:

- to obtain feedback regarding specific skills,
- to develop strategies for using and/or improving in these areas,
- to provide structure for examining the dynamics of cases,
- to develop a consistent model of counseling practice, and
- to have clinical expertise available for cases that are beyond the practicum counselor’s current level of counseling expertise.

The role of the counselor in training is logistic as well as experiential. Counselors are required to video record all CCTC client sessions (audio recording of school-based clients when applicable) and share these prior to supervision each week. Not having a recording for clinical supervision meetings is equivalent to not having a paper to turn in during a lecture class. The experiential role of the counselor is to come to supervision:

- having reviewed and reflected on conceptualizations; personalization; and interventions observed from client recordings,
- open to reflective and directive feedback,
- willing to explore some personal traits that may affect your counseling style, and
- collaborate on developmental objectives and clinical intervention plans

At times, the university supervisor may indicate that the counselor should administer a particular intervention with a client. The supervisor should advise the counselor when an intervention is not optional, but must be performed to ensure the client’s well-being. The counselor may disagree, but the supervisor’s directive must be carried out.

Counselors have a responsibility to seek supervisory help with clients in which the counselor questions their own effectiveness. For instance, the counselor may recognize that one or more factors such as a client’s presenting concern, values, or demographic identity is impacting the counselor’s ability to be helpful. In such instances, counselors should request supervision to address this concern.
Consultation

In a number of instances, it is important for counselors to seek consultation with a physician, make a direct referral of clients to a physician, warn potential victims of threats of harm, or notify proper authorities. The counselor MUST notify the university supervisor of these situations immediately and, under the supervisor’s guidance, execute an appropriate plan of action. Such situations include:

- Clients who are experiencing such extreme emotionality that the client cannot function enough to care for their basic needs, or who is psychotic, severely anxious, or extremely depressed.
- Clients who are presenting with suicidal ideation, high risk, and consequently, there is immediate danger to the individual.
- Clients who are so homicidal that there is a clear and immediate threat to one or more other identifiable persons (either implied or direct intent to do harm).
- Clients who report or imply abuse or neglect of a child, an elderly person, or a person with a disability.
- Clients who are taking substances or medications that appear to have an adverse effect on emotions, or the client appears to have toxic reactions.
- Clients who are taking psychotropic medicines and are not under the direct supervision of a physician.
- Clients who have been taking psychotropic medicines and are considering discontinuing or have discontinued the use of these medications without the physician’s approval.

In the case of potential suicide, homicide, or harm to others, the counselor should consult the CCTC Crisis Procedures (Appendix I) and consider using Safety Plan (Appendix K) as part of the intervention with the client. As appropriate, counselors may consult about administering formal assessment instruments. In the CCTC, these include the Beck Depression Inventory (BDI), the Beck Scale for Suicide Ideation (BSS), and the Substance Abuse Subtle Screening Inventory (SASSI).

CCTC counselors MUST consult with the university supervisor or the CCTC Director for information concerning referral sources and MUST have the consent of one of these counseling professionals before initiating any action.

Ethics

All CCTC Staff are expected to abide by the American Counseling Association Code of Ethics (2014). This includes professional values, boundaries, scope of practice, supervision, and best practices in counseling interventions. CCTC Staff who make choices in contradiction to ethical guidelines, will receive remediation. CCTC Staff who have difficulty following ethical guides and legal mandates will be suspended from their work in the CCTC pending further review by the counseling faculty and potential dismissal from the counseling program.
Professional Behaviors

CCTC staff, counselors, and supervisors are expected to demonstrate and maintain responsible professional behaviors including appropriate professional dress (i.e., all cleavage covered, no torn/ripped clothing, bottoms no shorter than just above your knees) kempt grooming, and courtesy. Any perfume, cologne, or other fragrances, should be used sparingly as some clients may be allergic or sensitive to and can be adversely affected by particular fragrances. Counselors are expected to arrive on time for scheduled counseling appointments, vacate counseling rooms promptly, leave counseling rooms and the entire CCTC clean and orderly, re-place supplies in their respective storage locations, and report any malfunctioning equipment to the GAs and CCTC supervisors. Some micro processes in following CCTC procedures may differ between group supervision classes based on University Supervisors’ personal style and emphases. Observe seasoned CCTC staff, ask questions, and consult this handbook throughout your time working in the CCTC.

Professional Disposition

The Counseling faculty is responsible for preparing candidates who have the required knowledge, skills, and professional dispositions to become effective clinical mental health and professional school counselors, counselor educators, clinical supervisors, as well as counseling advocates and consultants. The counseling faculty and University Supervisors evaluate your demonstration of these professional dispositions and provide you with feedback about your progress. Professional dispositions include attitudes, values, and beliefs demonstrated and impact on others communicated through both verbal and nonverbal behaviors counselors in training interact with educators, peers, clients, students, families, colleagues, and communities. These positive behaviors support student learning and counselor development. They include the ideal of fairness and the belief that all students can learn. The American Counseling Association’s (2014) Code of Ethics articulates the necessary characteristics expected.

Professional Development

The practicum is a time to continue professional reading and experiment with application of theoretical knowledge. Counselors are urged to select readings on topics related to clients’ counseling needs and goals and the counselor’s guiding theory. Some university supervisors require books and readings for the counseling field-experiences. In addition to reading, workshops and seminars are helpful to professional development. Observing the work of other practicum counselors in other settings also can be very instructive.

Professional Organizations

It is strongly recommended that, at this stage of professional growth, counselors join the American Counseling Association (ACA), the Illinois Counseling Association (ICA), the Illinois Mental Health Practicum Counselors Association (IMHCA), and/or the Illinois School Practicum Counselors Association (ISCA). These and other professional affiliations keep counselors informed about developments in the field and conferences of interest, provide liaisons with other professional colleagues, and contribute to the formation of professional identity.
Evaluation

Criteria for evaluation of the practicum counselor include:

1. Adherences to CCTC policies and procedures outlined in this handbook
2. Regular attendance at all client and supervision meetings
3. Maintenance of complete and accurate client records
4. Professional behavior (including being on time, being prepared, and appropriate attire)
5. Client conceptualization presentations
6. Active participation in peer observation, feedback, and consultation sessions
7. Demonstration of meeting competency expectations with 70% consistency (score of six) in all areas of the Counseling Competency Scale (CCS; Appendix N; completed in Blackboard)
8. Completion of the minimum 40 direct and 60 indirect counseling service hours for practicum. Completion of contracted direct and indirect counseling hours for CCTC internship as outlined in the counselor’s internship plan and agreement form.

Each University Supervisor who directs a practicum group supervision section assigns a weighting system to these criteria and may require additional work. At a minimum, each practicum counselor will be evaluated at mid-semester and the end of the semester using the CCS. Some University Supervisors use additional feedback and evaluation instruments. Practicum counselors should feel free to ask questions regarding the evaluation criteria that their faculty supervisor is using.

Confidentiality

1. CCTC client files are the property of the CCTC. Information in the client’s file must remain confidential unless the client signs a Release of Information form or other exceptions cited in the “Participation in Confidentiality” section of the Professional Disclosure Statement. Practicum counselors MAY NOT release information TO ANYONE outside the CCTC staff without permission from University Supervisors or CCTC Director. This includes confirming that an individual is a client of the CCTC. Before photocopied records are released, the Release of Information form must be completed, signed, and added to the client file.

2. A HIPAA compliant location for client documentation and files is provided in the CCTC, located in the Graham Hall 416H. All client documents and files must be stored in the GH 416H file cabinets. Counselors completing paperwork away from the CCTC, prior to adding it to the client file, should take every precaution to protect client confidentiality. For example, only client’s initials are indicated on a form or electronic draft until the counselor is placing the form or completing the official notes in the client’s file, at which time client’s complete name is entered on the form.

3. Counselors are expected to video record each counseling session for self-reflective learning processes and for observation and feedback from peers and supervisors. These recordings must be kept secure to protect the client’s confidentiality. Recordings labeled with client
initials and session date is acceptable. If in any way, the saving, transfer, and storage processes used reveal clients’ identity or client information is left in the open where others have access to them, this violates clients’ right to privacy and may result in disciplinary action. In some cases, client recordings may be used or retained for educational purposes. In such cases, the Consent for Use of Client Counseling Recording form is completed, signed, and retained in the client’s file. In some cases, potential internship sites request to see a video recording of the applicant’s work. In such cases, the counselor may obtain a client’s permission to use a session video recording by having the client complete an additional consent form for this specific use. With the exception of these cases, all recordings of counseling session are destroyed by the counselor at the end of each field-experience semester.

4. Counselors should refrain from talking about clients while in the hallways or any other non-secure area of the CCTC. Counselors should consult with colleagues or supervisors in the CCTC conference room (GH 416I), the CCTC resource/file room (GH 416H), in an unreserved counseling or observation room (GH 416A-G), or an alternative closed, private place.

5. Counselors in possession of client-related information and/or materials should handle it with the same respect as if it were confidential materials about the counselor yourself.

6. Under certain circumstances, counselors are required to contact clients between scheduled sessions. These include reminding of an upcoming appointment or if the client has not arrived within 10 minutes of the scheduled appointment time. The client file and intake report contain an item addressing whether messages may be left with a client’s voice mail service.

   a. The counselor may leave a message ONLY when the intake form clearly states that the client has given permission for messages to be left. Avoid using client’s names in voice mail messages.

   b. Messages cannot be left with third parties unless the client has signed a release of information requesting a third party to receive messages about their CCTC.

   c. Client e-mails can be sent when clients do not have a working phone number and e-mail contact is preferred by the client. Counselors should draft the desired e-mail to be sent to the client, including the client’s initials and send the message from their student e-mail to cahc_cctc@niu.edu GAs will send out the client message and inform counselors and their supervisors of the client’s response.

   d. The counselor’s requirement to contact the client is waived if the client has requested not to be contacted.

7. Counselors are prohibited from accessing closed client files and files of clients not assigned to them. Any counselor who questions about a prohibited client file should contact the CCTC Director.
HIPAA

The following CCTC procedures are requirements of HIPAA regulations, which must be respected for CCTC legal compliance. Any infraction of these regulations can lead to state investigation and a significant fine.

1. The Notice of Privacy Practice and Informed Consent must be displayed in the waiting room of the CCTC.

2. Each client must receive notice of their privacy, confidentiality, and privileged communication rights and CCTC service parameters in Professional Disclosure and Informed Consent statements. Counselors are expected to verbally review this document with clients due to its length and breadth.

3. Each client must sign a confirmation of receipt of CCTC informed consent statements. This form requires client, counselor, and supervisor signatures and must be included in the client’s file.

Client information cannot be electronically transmitted. This means client information cannot be transferred by computer (e-mail) to another party or to the client. Faxed and hand-delivered client records should be marked as confidential, addressed to the HIPAA also affects the client filing system. On the left side of the client’s file, the counselor should include any information that is subject to review by the client or another approved entity. The right side of the client file is reserved for psychotherapy notes, which have to be specially requested and approved by the Clinical Director for review, by the client or another approved entity. When using electronic client record systems these client documentation categories, must still be observed.

Confidentiality must be strictly guarded which includes conversations on phones, conversations in the hallway, and transferring of client information by fax or mail. If you have a question regarding confidentiality, always make the decision that ensures confidentiality until you consult with your supervisor or the CCTC Director.

Any counselor who does not adhere to confidentiality procedures at the clinic will be reviewed for program continuation, and could risk program termination.

CCTC Protocols

Several routine tasks are the responsibility of CCTC counselors, often in collaboration with the CCTC university supervisors or CCTC Research GAs. These responsibilities and expectations include professionalism, communication processes, client scheduling and documentation, and other important aspects of CCTC service and research protocols. This section is a delineation of these expectations and requirements.

Client Requests for Services

The client fills out the paperwork and it is collected by GAs or Interns during CCTC office hours. Clients are encouraged to come into the CCTC to complete their request for services packets prior to having an intake appointment scheduled. When this is not convenient for the client, CCTC GAs or interns will complete the client request page of the request packet for the client over the phone. This request page/packet is the first phase of scheduling and client
The Client Request for Services includes the request page, consent for recording sessions, and the adult or child intake packet (four pages).

**Scheduling Binder**

The scheduling binder forms are to be filled out by university supervisors, or CCTC GAs and counselors under the consultation of university supervisor at the end of each group supervision session or supervisor staffing meetings. This scheduling form is used to communicate with CCTC GAs how many and at what time/day counselors have openings in their client load to be filled for the following week. The GAs will then use this form when recruiting and scheduling new clients. Once GAs have scheduled a new client and recorded client initials on the scheduling binder form, they will e-mail the intake counselor, ongoing counselor, and respective supervisors about the new client appointment.

For counselors and supervisors who are teaching university courses, their, or their supervisors students CANNOT be assigned to that counselor. Clients must be scheduled with a counselor who is not or is not under the supervision of someone who has an evaluative role with that client. Counselors who want to see clients in the CCTC outside of pre-scheduled client hours are required to schedule those clients during arranged CCTC supervisory times, which must be set up through the university supervisor in consultation with the CCTC Director. Once these sessions have been set up, the university supervisor should inform the graduate assistant(s), who can create scheduling forms for the practicum counselor to fill out. It is also the practicum counselors’ responsibility to check in with the supervisor before and after the session.

The CCTC GAs are responsible for scheduling the first intake and ongoing counseling appointment into Titanium. Counselors are responsible for scheduling all follow-up client appointments in Titanium.

**Titanium Scheduler**

The CCTC uses Titanium for the purposes of reserving counseling rooms in the CCTC. Counselors, supervisors, staff, instructors, and all other individuals who are approved to use the CCTC are required to use Titanium to reserve counseling rooms. Counseling sessions and supervision meetings are prioritized over other CCTC private training and meeting needs.

Counselors must copy client appointments in Titanium each week. The counselor and counseling room should be included in each scheduled appointment for the CCTC. Also, counselors should indicate if the next weeks counseling appointment is a scheduled termination session by changing the session code in the copied appointment. The counselors name and counseling room letter should appear in the “location” line of the appointment screen.

**Assignment of Clients**

CCTC Director and university supervisors consult to make preliminary decisions about the scheduling and assignment of clients to counselors after receiving the request for services packet. The intake counselor, university supervisors, and CCTC Director confer on a final assignment before and/or after the intake session. The final assignment includes several options:

1. The client continuing with the initial counselor placement.
2. The client being assigned to another counselor with similar developmental competence.
3. The client being assigned to another counselor with advanced developmental competence to meet higher level client needs.

4. The client being referred to another NIU mental health facility such as the Counseling and Consultation Services, Psychological Services, or the Couples and Family Clinic.

5. The client being referred to another mental health facility outside of NIU, such as Ben Gordon Center or Family Service Agency.

6. The client being referred to specialized service centers (e.g., for substance use, eating disorder, etc.) or personal physician in their home county.

Whereas CCTC counselors are ethically obligated to offer only services for which they are competent, counselors-in-training need to be assigned clients that provide them the opportunity to develop such competency. The counseling faculty assumes that counselors who have completed prerequisites to practicum are prepared to become competent to work with clients with diverse histories, needs, and goals.

In addition, counselors who have completed coursework pertaining to specific populations, such as children, couples, and families are assumed to be prepared to develop competency to work with those client populations. CCTC counselors are expected to consult with supervisors if they believe particular client needs exceed their current preparedness to become competent.

**Appointment Reminder/Confirmation**

The day before client appointments (on Friday for Monday appointments), CCTC GAs call clients to confirm clients’ intentions to attend their intake appointment. Also, GAs make reminder calls to ongoing clients, unless the client has requested to not receive reminder calls (noted comments of client screen). When approved by the client, a message would be left for the client reminding/confirming their appointment.

- Calls are made based appointments scheduled in counseling rooms within Titanium Scheduler by 9:00 a.m. each Monday-Friday.
- CCTC GA’s note the outcome of client reminder calls in the comments section of client appointment for the respective date.

**Appointment No Shows**

Even when clients confirm their intentions to attend their scheduled counseling appointments, sometimes they do not show up for their appointments. In this occurrence, it is the counselor’s responsibility to send out pre-termination and termination letters to their clients as appropriate. Counselors must document this in the client file with a copy of the pre-termination and/or termination letter to be sent to the client. Both of these letters must be sent to clients via postal mail or e-mail before administrative termination can be completed.

When a potential client no shows for their intake appointment, CCTC GAs call to notify the potential client that their service request has been removed. The CCTC GA deletes any subsequent appointments that were created in Titanium Scheduler.

**Preparation for Sessions**

CCTC counselors come to the CCTC prepared for each session, on time and keeping in mind their supervisor’s specific expectations for their counseling development. Counselors significantly enhance their preparation by reviewing and critically reflecting on their previous
counseling session recordings. Counselors who need additional help, beyond weekly supervision meetings, in preparing for a client session should talk to the university or doctoral supervisors sufficiently ahead of the session to allow for a well-formulated approach. Counselor preparations should include targeted session goals and objectives to enhance their competency development.

**Arriving for Sessions**

CCTC counselors arrive to the CCTC 15 - 30 minutes prior to their scheduled client times. Often, clients arrive early to fill out paperwork and it is essential that client sessions begin on time. When you arrive in the CCTC, be sure to behave professionally at all times. Do your best to visit the restroom before scheduled session time or during scheduled breaks from client appointments. Also, please be sure that if you are placing food orders, you do so between sessions, ensuring no delay in client appointment time. When counselors arrive for counseling sessions, you are responsible for the following list of tasks:

- Check that counseling and observation room doors are unlocked
  - Counseling Room light should be turned on, door left open
  - Observation Room lights should be kept off, door closed
- Dry-erase boards must be clean, with 3-4 functioning markers, and dry eraser
- Noise machines should be turned on the HIGH setting (click switch downwards)
- Music should be playing from reception desk computer or CD player in Lobby
- Laptop should be brought into conference room with Titanium open and logged in to view the counseling room schedule (stored in GH 416H top shelf drawer, f of front desk)
- Clients and all CCTC guests need to be greeted upon arrival. Clients should be provided with clipboard, pen, and respective paperwork for intake or ongoing outcome assessment paperwork.

**Intake/Termination Assessments**

All CCTC clients complete a formal standardized assessment at intake and termination in addition to informal structured questionnaires, and semi-structured clinical interviewers. Clients complete one of these intake assessment options based on the client’s age and academic status.

**CCAPS-62**

The Counseling Center Assessment of Psychological Symptoms-62 assessment (CCAPS -62; on pink paper) is given to every client who is a current college student when they start and end their counseling services. Assessment sheets are located above the first filing cabinet in GH 416H. Once a client has finished the CCAPS-62, counselors review the quick check client risk items (12, 46, 52, and 60). Any item marked 0-4 should be clarified for meaning and level of risk within the first client session. After the session in which the CCAPS was administered, the counselor enters the client’s item ratings into the respective Titanium note data form. CCAPS reports can be reviewed within Titanium. Paper administration forms can be shredded after client data has been entered and saved in Titanium notes.

**SCL-90R**

The Symptom Checklist 90 Revised (SCL-90R) is an assessment that is given to all adult aged community clients (i.e., non-college enrolled individuals). This assessment is administered at a minimum during the intake and final sessions. Assessment booklets are located in the first right
wall cabinet in GH 416H. Please familiarize yourself with this assessment. Once a client has finished the SCL-90R, counselors review the quick check client risk items (3, 15, 63, and 79). Any item marked 0-4 should be clarified for meaning and level of risk within the first client session. After the session in which the SCL-90R was administered, the counselor needs to score the assessment using the scoring stencils and attach scanned copies of all assessment forms into the Titanium client note date for which the assessment was administered. The administration and score procedures manual is also located in the 416H wall cabinet.

**CBCL**
The Child Behavior Checklist (CBCL) is an assessment that is administered to all minor clients. This assessment is administered at intake and termination of counseling at minimum. The assessment can be given at additional intervals when applicable. There are three versions of this assessment based on the client’s age and context for attending counseling. There is the guardian form, teacher form, and youth form. The assessment forms and procedures manual are located in GH 416H. Once a client has finished the CBCL, counselors review the quick check client risk items (Youth and Parent version items 18, 36, 41, and 57). Any item marked 0-2 should be clarified for meaning and level of risk within the first client session. After the session in which the CBCL was administered, the counselor needs to enter assessment data, or request CCTC GA assistance with CBCL assessment data entry, into the ASEBA scoring platform installed on the CCTC reception desk computer. Counselors should attach the pdf score reports to the Titanium client note for the date the assessment was administered.

**Intake Sessions**

Intake sessions are required for new clients. These are 90 minute clinical interview sessions to assess client history, needs, and confirm the appropriateness of the preliminary clinical placement with the assigned ongoing CCTC counselor.

Returning clients to the CCTC who have received services within 200 days or less (6 months) do not need to attend the 90-minute intake session. Counselors will be able to gather updated contact and functionality assessment during the first few 50-minute counseling sessions. An intake assessment should be completed before the start of the first session.

Returning clients to the CCTC who have not received services within 201 to 2,200 days (6 months to 6 years) will be provided an abbreviated intake interview with their assigned ongoing counselor during their first and second 50-minute counseling sessions. Counselors will be able to update the clients Biopsychosocial Intake Report with the new information. An intake assessment should be completed before the start of the first session.

Returning clients to the CCTC who have not received services in 2,201 days or more (more than 6 years) will be scheduled for a 90-minute intake session as their first appointment. Counselors should review any client records that are accessible prior to this intake interview. All other intake procedures completed with new clients would be conducted with this category of returner clients.

- The client should have completed an intake packet prior to their intake session. It is the intake counselor’s responsibility to check for this completed paperwork before the client arrives for their intake appointment.
- Intake sessions should be video recorded in their entirety.
- After the client completes their intake assessment the counselor should check to make sure all forms in the client request for services packet and intake assessment are complete and accurate including risk assessment follow-up.
At the start of intake sessions:
  o Counselors should sign the consent to record form previously signed by the client
  o Communicate to the client if you are assigned as the clients ongoing counselor
  o Briefly review confidentiality and limits of confidentiality
  o Review the process and purpose of the intake counseling session

During the intake session, counselors enter client responses to the semi-structured clinical interview directly into the Biopsychosocial Intake Report data form of the intake note

At the end of the intake session:
  o Counselors should remind the client of the date and time of their first ongoing client appointment. This can be located in the client’s file within Titanium.
  o Offer the client an appointment reminder card and confirm their willingness to receive reminder calls
  o Finalize the intake note including clinical impressions, scan and attach any paper forms that should be retained for the client note, and shred paper forms after the intake note has been completed and saved.

Intake counselors should consult with the immediate CCTC supervisor and the CCTC Director if the current client assignment for ongoing counseling work is inappropriate or questionable prior to the client leaving if possible.

For minor clients, if the request for services or intake interview so indicates, intake counselors must request a copy of a legal document (such as divorce decree) specifying that the parent or guardian who will be signing the informed consent during the first ongoing counseling session is the managing conservator (not just the possessory conservator). The counselor attaches this copy to the Informed Consent form prior to adding it to the client’s file.

First Counseling Session

1. Incomplete intake information/forms should be completed in the counseling room during the initial counseling session for the assigned ongoing counselor to complete with the client.

2. At the start of counseling, the counselor provides clients with the counselor’s Professional Disclosure and Informed Consent statements (PDICS; Appendix D). After verbally informing clients of CCTC counselor contracting disclosures and answering any client questions, the client and counselor each sign the one-page informed consent file form and clients take the full-version PDICS copy for their records.
   a. For CCTC returning clients, initial session procedures can be modified as deemed appropriate by counselor and supervisor. Informed consent should never be skipped in its entirety.
   b. For minor clients, counselors provide informed consent discussions with their legal guardian(s)/parent(s) and clients if the client has sufficient cognitive development to comprehend and assent to the information. Counselors should receive the requested copy of a legal document (such as divorce decree) specifying that the parent or guardian who is signing the informed consent form is the managing conservator (not just the possessory conservator). The counselor scans this legal document copy with the Informed Consent file form prior to attaching it to the client’s note for that date.
c. Counselors have the informed consent file form signed by a CCTC supervisor after the session, then scan and attach it to their client not for that session date.

3. Then counselors move into “working phases” of the session, in which the client’s specific concerns/goals are addressed through diverse intervention modalities.

4. During the last few minutes of initial counseling sessions, counselors and clients decide whether they will continue to work together.
   a. If a referral is deemed appropriate by either client or counselor, counselors provide their clients with local referral sources (Appendix L).
   b. If the decision is to continue working together, counselors confirm ongoing appointments at that same day and time. Counselors can provide clients with a CCTC appointment card with date and time of the next two counseling sessions on the correct day line. These cards can be found on the CCTC reception desk in the main lobby. (Appendix F)

Recording Sessions

Sometimes during the phases of requesting services and/or first counseling session, clients may express the wish to be counseled without video recording or observation. It is the requirement of the CCTC that the client consent to video recording due to the training purpose of the clinic. The counselor cannot guarantee that the clients’ sessions will not be observed.

Counselors’ discussions of the purpose of recording sessions should be clear, including the HIPAA compliant storage and destroy timeline for such videos. Client videos are deleted at the end of each training semester unless clients sign additional consent for the retention of their counseling videos for education purposes.

If a client does not consent to services with these required counselor training protocols in place, counselors should offer alternative referral options for the client and discontinue services.

CCTC counselors have four approved video recording options for recording of their sessions. It is required that all CCTC counseling sessions are video recorded and all school based counseling sessions be audio recorded. Counselors should choose the most consistently reliable option for them. It is expected that counselors come into the CCTC and test their recording technology, conversions methods, and uploading processes to your first session.

In all instances, recordings need to be uploaded to the designated HIPAA compliant Office 365 (O365) OneDrive folder and deleted from the original recording devise immediately after sessions and before the devise is transported outside of the CCTC or school. If counselors do not budget sufficient time to upload and delete their recordings as described above, the original recording devise should be stored under double lock placement in secure office until the counselor is able to complete this protocol properly. It is illegal to retain and/or transport confidential client data by methods not compliant with HIPAA regulations.

Personal Laptop

Currently, this is the preferred recording devise option for CCTC sessions as it requires the fewest conversion and downloading steps for counselors to upload directly to the CCTC designated O365 OneDrive folder. Video files need to be in MP4 format. Once uploaded, counselors need to delete the original video file their laptop and the laptop recycling bin.
**Personal Video Recorder/Tablet**

Counselors choosing this option should be attentive to if their chosen video recorder has a USB port to transfer to a computer or other option for interfacing with the internet to upload directly to the CCTC designated O365 OneDrive folder. Video files need to be in MP4 format. If your chosen recording devise defaults to another file format (e.g., MOD), counselors are responsible for securely converting the file format before uploading the session and deleting the original file from the recording devise, computer used for upload, and the computer recycling bin.

**CCTC Laptop**

This option is limited based on the number of CCTC computers currently on hand and used for other CCTC service provisions. Nevertheless, when available, counselors can sign-out a CCTC laptop from the GH 416H first filing cabinet top shelf to video record their client sessions. After video recording has been completed, counselors need to upload the recordings to the CCTC designated O365 OneDrive folder, immediately. As these are shared computers, counselor should only use this option when you have time to upload your videos immediately after you are done using the laptop. Video files need to be in MP4 format. Once uploaded, counselors need to delete the original video file their laptop and the laptop recycling bin.

**Landro**

Landro video recording capture boxes are a first-generation play analyzer hardware/software interface system that requires counselors to be patient and follow specific user directives. When Landro is not used properly, including being turned off and the power source unplugged after segments of use, it may malfunction, which translates to sessions not being recorded or recordings being lost during conversion processes.

Counselors choosing this option should be aware that the Landro video and audio recording systems are two separate systems paired together. As such, the audio and video playback is sometimes out of sync. In these instances, when counselors are reviewing their sessions, you may need to take note of verbal and non-verbal interventions separately.

Do not alter the speaker nor the amplifier in the observation rooms or else you may end up with fifty minutes of silence. CCTC staff and make sure these are set correctly. Ask your supervisor or the CCTC GAs if you need help with this equipment.

- When choosing a flash-drive to use with Landro, remember that one session hour equates to about 1 GB. It is recommended that you choose a flash-drive that is at least 8 GB to avoid filling your flash-drive up too quickly. You should choose a flash-drive without the U3 technology or remove it before use. The brand SanDisk is one of the main flash-drives that uses this technology – it is recommended that you try to avoid this brand if possible.

- Always, have your flash-drive ready to go in the system BEFORE your client arrives and start recording BEFORE going into your counseling room with your client. Follow the directions provided in the GH 416I CCTC conference room. If your flash-drive does not appear to light up correctly, then it is not recording. Take it out and start over.

- The Landro recording system will create a folder on your flash-drive entitled “LNDRO” or “Landro Videos” when you first use it and subsequent recordings will automatically be saved in one of these folders. Video files that default to the Landro Videos folder are already saved in MP4 format on your flash-drive. Landro recordings in LMP format need to be converted to MP4 format using the Landro Play Analyzer software on select computers in GH 427 or
CCTC laptops before being uploaded to O365. There are Landro user manuals located in the GH 416I, GH 416H, and GH 427B.

- If you do not budget enough time in your schedule to convert and upload session recordings from your flashdrive to your designated O365 OneDrive folder, you need to leave our flashdrive in your respective CCTC counselor folder in the GH 416H file cabinet until you can complete this task.
  - It is recommended the counselors choose a flashdrive that is not used for any other purpose and to leave your session recording flashdrive in the CCTC at all times during semesters in which you are working in the CCTC.
- After you have converted and uploaded the file to O365, delete the recording from your flash-drive, the computer, and computers recycling bin immediately. This is to help maintain HIPAA compliance and client confidentiality.

**School-based Session Audio Recorders**

Audio recorders for school-based sessions need to have a USB port to transfer the MP3 audio file from the devise to O365. It is not acceptable to transport audio files on the devise to CCTC supervisors, even if the counselor has multiple audio recorders at their disposal. Typically, more than one CCTC supervisor is observing and providing feedback to counselors. Transporting devises between sites and supervisors is illegal, according to HIPAA regulations, and inefficient for supervisory purposes.

**Record Keeping**

When a client is first scheduled for services by CCTC GAs, a client file is automatically created for them in Titanium Scheduler. Each scheduled client appointment requires a client note for documentation of client services. Certain appointment types have default note template types:

- Intake – Personal: Biopsychosocial Intake Report data form, Mental Status Exam data form, intake assessment input or attachment, Consent to Record attachment, applicable documentation data forms and/or attachments (see Appendix B for explanation of other such as applicable forms), and any further documentation deemed appropriate by supervisors.
- Personal Counseling: DAP note (including goals and objectives for the session), Mental Status Exam data form, applicable documentation data forms and/or attachments (see Appendix A for explanation of other such as applicable forms), and any further documentation deemed appropriate by supervisors.
- Counseling Termination: Termination Form data form, Mental Status Exam data form, CCTC Satisfaction Survey data form, termination assessment input or attachment, applicable documentation data forms and/or attachments, and any further documentation deemed appropriate by supervisors.

**Family/Group Files**

For family and group counseling, each client system member has an individual client file in Titanium. When group/family appointments are scheduled, each client system member is attached to the single appointment, counselors’ complete one client note for each appointment of the client system, and distributes the note to each client member of the client system.

Counselors are responsible for noting any changes in the configuration of client systems receiving counseling in the CCTC in the client notes. If a group of two or more individuals
attends counseling sessions and then decide that only one individual will come to services independently and/or individual counseling is requested in addition to client system services, the client must do so with a different CCTC counselor and preferably a counselor from another group supervision class section.

School-Based Client Files
Student clients seen by practicum counselors as part of CAHC 550 are school-based CCTC clients because the practicum counselor is “contracted” through the CCTC to provide school counseling services and is supervised by CCTC supervisors. Client notes for school-based clients are very minimal. CCTC counselors seeing school-based clients will likely keep three different type of notes:

- The majority of ongoing notes for school-based clients are personal counselor notes that are kept individually for ongoing care. These notes should not include client names nor other identifiable demographic information. These notes should be kept secure, confidential, and destroyed when no longer needed, no later than the end of a single practicum course semester.
- The school site may require school-based CCTC school counselors to keep certain notes in alignment with the school’s protocol. School-based CCTC counselors should follow these directives for the school site.

While these first two note types are optional and contingent upon need/external CCTC protocols.

- CCTC counselors are required to complete a single client note in Titanium for each individual school based client. These notes are typically created when school-bases services have terminated for the current CCTC NIU semester. Counselors should review the note template in advance so that you are aware of what information is needed. A written list of school-based client full names need to be hand delivered to the CCTC GAs so that their Titanium client file can be created in Titanium before counselors can create client notes.
  - Do not send via email as this is not confidential nor HIPAA compliant.
  - School-based group counseling services do not require CCTC notes

CLIENT FILES CANNOT BE ACCESSED OUTSIDE THE CCTC.
TEMPORARY CLIENT NOTES SHOULD NOT INCLUDE CLIENT NAMES.
CLIENT FORMS MUST NOT LEAVE THE CCTC UNDER ANY CIRCUMSTANCES.

Paperless Client Files
All client files are maintained electronically via Titanium Scheduler. All client data collected via paper forms is either transcribed or scanned into the Titanium client note for the respective date. CCTC counselors may keep temporary client files in their counselor folders in GH 416H for items that are missing information, require follow-up, and/or the counselor has not made sufficient time to complete the electronic Titanium client note. Any client paper forms should be shredded after the documentation has been added and saved to Titanium and not later than the last day of CCTC office hours for the respective CCTC counselor contract semester.

CCTC counselors are expected to type-up their session notes within 24 hours of client sessions. If counselors do not budget enough time to complete their client notes directly in Titanium after client sessions are concluded for a given day, they can type-up session DAP notes in their O365 counselor folder temporarily until the next time you have access to Titanium on the CCTC counseling program/CCTC computers in GH 427.
Scheduling Ongoing Client Sessions

As noted above, CCTC GAs schedule intake and first counseling sessions. After your first counseling session with a new client, you, the counselor, are responsible for scheduling all follow-up counseling sessions using the Titanium Scheduler. The most efficient way to schedule follow-up sessions is to copy the previous appointment to next week and confirm the appointments details before saving it. Counseling appointments need to appear in the scheduling column for the counselor as well as the counseling room. Please ask CCTC GAs or supervisors if you have any questions.

- Counselors are responsible for confirming each client’s appointment for the following week, with the client, BEFORE they leave the session (continuation of services for the same day and time the following week). Once you have seen a client, it is no longer the CCTC GAs’ responsibility to schedule your appointments.

- There are appointment cards on the front desk if your client finds this helpful for remembering their next appointment(s). These cards have space to write out two appointment dates in advance. This can be helpful especially is there is a planned break in the typically weekly appointment routine.

- Counselors are responsible for communicating, with their clients, all CCTC office closures or individual absences that may disrupt the weekly pattern of session appointments.

- Double check to make sure you schedule your clients in for the appropriate time, date, and counseling room.

Note: When client or counselor notice is provided in advance of the session start time, CCTC staff will mark cancellations and rescheduled appointments in Titanium. Counselors should check the CCTC daily schedule in Titanium regularly and when they arrive to the CCTC for their scheduled hours in the CCTC.

Weekly Client Outcome Assessments

Ongoing client assessment is used to support potential clinical research data collection as well as counselor training in assessment of client progress and stability.

- Extra CCAPS-62 (pink form) and CCAPS-34 (green form; short form that does not assess family stressors) assessments are located in the conference room with the extra paperwork.

- Practicum counselor should seek feedback from clients after each session using the Weekly Client Report of Counseling Session form.

Rescheduling Client Sessions

In the event of counselor illness, emergency, or if NIU closes unexpectedly (e.g., bad weather), counselors must notify CCTC GAs to cancel their client appointments. If CCTC GAs are not available, call the CCTC Director on their personal number. Be sure to inform CCTC GAs of any changes in CCTC scheduling or let them know if clients may be calling the CCTC to reschedule. ALL MESSAGES MUST BE LOGGED (log sheet is next to the phone on the GA’s desk in the lobby).
Referral of Clients

Referral of clients is required when clients’ needs/goals are assessed as not appropriate or amenable to the services provided in the CCTC. Referral may also be appropriate when it is the ethical and/or legal responsibility of the CCTC staff to report specific information.

- A list of additional counseling resources/referral sources in DeKalb can be found in the GH 416I CCTC conference room in the brown shelving unit.
- Referrals may be made to private/personal physicians, psychiatrists, or therapists, a community mental health agency, a social service agency, a rehabilitation agency, or any professional or agency deemed appropriate to meet the needs of the client. When possible, three referral sources should be provided to clients when requested or ethically implied. Referrals should be made in consultation with university supervisors and/or the CCTC Director. Referrals given should be documented appropriately in client notes for the respective date when the referral was given even if no counseling session was scheduled for that date (create a new note not associated with a client appointment, General Use Documentation type of note).

Note: NIU Health Services and NIU Counseling & Consultation Services referrals are only open to currently enrolled NIU students, when appropriate. There may be instances when these referrals may not be appropriate to meet the clients’ needs even when they are a currently enrolled NIU student.

Crises/Emergencies

If counselors suspect that clients are experiencing signs and/or symptoms for a potential client crisis or may need emergency services between counseling sessions, counselors should provide a list of Counseling Resources in DeKalb handout even if the client has received it before.

If counselors become aware that a client crisis or emergency exists, whether the client is in person or on the phone, the counselor informs a counseling professional immediately (i.e., university supervisor, CCTC Director, Doctoral Supervisor in Training, or any instructor/faculty serving in a supervisory capacity). The counseling professional determines the course of action.

If a crisis or emergency exists, the counseling professional considers these options:

- For crises/emergencies occurring on the NIU campus, call the NIU Police Department switchboard at 815-753-1212.
- For crises/emergencies occurring off the NIU campus, call the Ben Gordon Center Response Line at 866-242-0111 or 911.
- For crises/emergencies occurring in the CCTC, locate and consult with the in-office CCTC supervisor working at that time. The CCTC supervisor determines the course of intervention.

All CCTC staff, supervisors, and counselors NEED to be well acquainted with the CCTC Crisis Procedures (Appendix I).

Crises/Emergencies are, in most instances, considered properly referred when the client is either:

- In the custody of an adult family member who takes responsibility for the client
- In the custody of a licensed counselor, therapist, or medical doctor who takes responsibility for the client
- In the custody of police

**Client Termination**

Once a client is assigned to a CCTC counselor, the client and counselor continue with that counseling service relationship until one of the following termination conditions occurs:

**Mutual Termination**

Client and counselor agree to terminate services because the client has achieved agreed upon goals or has adequate and appropriate plans for achieving goals outside of counseling.

**Client or Counselor Initiated Termination**

The client or counselor terminates counseling without the client having achieved agreed-upon counseling goals.

- If the client attends the termination session, the counselor provides referral options whether or not the client indicates the intention to pursue the options.
- If the client does not attend the termination session, the counselor is not obligated to provide the client with referral options unless a special condition exists, such as client suicide risk, extreme emotionality, homicide risk, as examples.

**Administrative Termination**

The client is absent, whether by notification or by no-show, for two consecutive sessions. In this case, the counselor notifies the university supervisor. Unless counselor and supervisor decide otherwise, the supervisor asks the CCTC GAs to contact the client to confirm their continued or discontinued interest in counseling services and place the client’s name at the bottom of the CCTC waiting list.

Note: In all instances of termination, counselors document the termination, needs/goals addressed in session, assessments administered, and clinical recommendations.

**CCTC Procedures**

In order to maintain professional and ethical practice of counseling services and counselor training practices, all CCTC staff, supervisors, counselors, research GAs, and trainees must abide by CCTC logistics and processes for CCTC organization, upkeep, and welcoming constituents. This section is a delineation of these logistical guidelines.

**The Lobby**

CCTC GAs will not always be present at the reception desk when clients, trainees, and guest arrive. Please help make sure CCTC constituents feel welcome. Say hello to those who enter or are sitting in the lobby. Ask if they have been helped yet. Make sure that new clients arriving for their intake session receive a clipboard with the appropriate paperwork, and make sure counseling colleagues know when their clients have arrived.

- Typically, counselors will have set out clipboards with required client paperwork ready to distribute. If not, you can inform the counselor. If the counselor has not arrived/returned to the CCTC or still in another session, you can check Titanium Schedule to see what counselor is meeting with this client and respective paperwork that may be required. Anticipated intake paperwork for clients are kept in the intake
counselor’s folder in the file cabinet. Additional copies of CCTC forms are kept in the CCTC Conference Room I brown shelving unit. The intake packet includes:

- Requests for Services and Consent to Record Forms (often completed in advance)
- Adult Intake Form or Child Intake Form (sometimes completed in advance)
- Intake Assessment (CCAPS-62, SCL-90R, CBCL; completed at start of intake session)

  o DO NOT leave any filled-out client paperwork in the lobby, even for a minute. This includes anything with any information about a client or a potential client.

Make sure the scheduling binder is stored just inside the CCTC back office room H whenever it is not in your hands being used.

If you notice that the Computer or CD player is not playing CCTC office hours, please press play on the CD player to start it back up or let CCTC staff know that the computer playback stopped.

If the sound machines are not on when you arrive for counseling sessions, take a moment to turn them all on. There is a switch on the side of each one that you can push downward toward the floor for the best setting block out more noise.

**The Phone**

Whenever CCTC GAs are not present, please answer the -9312 phone line when it rings. It is probably a client calling or potential client request. It could be your client calling to reschedule or in crisis.

If the phone call is not for someone in the CCTC at that time, take a detailed message on the CCTC message log, including the person’s name, phone number, time; day; and date of the call, and reason for calling. Confirm that the phone number the individual gives you is number that someone could leave a message on.

DO NOT schedule first-time clients or any clients that are not your own. The CCTC GAs will return the call and set up appointments as necessary.

**Voicemail**

Clients often leave messages for their counselors wanting to cancel or reschedule. If you are looking for a client message that is not recorded in the comments of your client appointment in Titanium nor listed on the CCTC message log already, and CCTC GAs are not at the reception desk, you should check the CCTC -9312 phone line voicemail.

The instructions are on the “CCTC Message Log” clipboard. DO NOT delete any messages. Record all messages that you listen to on the message log. The CCTC GAs will double check the voicemail and take care of remaining messages.

If messages are left for someone in the CCTC at that time, Please inform that individual and check-off on the far right column of the message log, marking your initials that the message has been attended to.
Keys

University Supervisors, CCTC Director, and GAs have keys to the CCTC (GH 416), the counselor/instructor office suite (GH 427) and the CCTC resource/file room (GH 416H).

The faculty/counselor bathroom key is located on the wall hanger just inside the file room. This key also opens the counselor/instructor office suite (GH 427). Counselors using this key should re-place it immediately after each use. This key should not be lent to anyone nor should it leave Graham Hall 4th floor. If you find yourself with this key and not able to return it to the CCTC (GH 416), place it in the CCTC mailbox in GH 427.

The keys to the filing cabinets are kept in the middle drawer of the CCTC reception desk. Please only use the keys as needed and re-place them in the reception desk middle draw immediately. There is no reason that these keys should ever leave the CCTC or be anywhere except for in the lock of one of the file cabinets in the back room or in the reception desk middle drawer.

Forms

Copies of all forms are located in the CCTC conference room (416I) within the brown shelving unit. They are all labeled. If you need a form, check in the appropriate slot or ask the CCTC GAs for assistance. If you notice that a certain form is running low, please inform the CCTC GAs immediately. If the CCTC GAs are not present place a note on the CCTC message log before you leave the CCTC. Please do not wait until you use the last form.

Client intake forms are typically placed in a blank manila file and placed in the counselor folder of the scheduled intake counselor. If forms are missing or extras needed forms can be pulled from the brown shelving unit in 416I and intake assessments can be pulled from 416H (CCAPS 62 above file cabinet; CBCL & SCL-90R in first assessment cabinet top shelf, far right).

Counseling Sessions

Prior to ALL of your sessions, check the counseling room you will be using. Counseling rooms are all assigned in Titanium Scheduler. Before taking your clients into the counseling room:

- Make sure there is NO writing on the dry-erase board – erase it if there is
- Make sure there is a box of tissues in the room, if not, pull one from the GH 416H far left cabinet bottom shelf or ask the GA to find one for you.
- Make sure the chairs are set up how you want them for recording purposes
- At the end of your session, leave the room ready for the next person (three chairs, clean dry-erase board, 3-4 dry erase markers, dry eraser, throw out any trash, etc.)
- Make sure the observation rooms are set up before you start seeing clients – sound equipment is working, no volume on unless someone is in that room observing, lights off, door closed
- Make sure your approved video recording devise is set up correctly, operational, and start the recording before your sessions start

Client Files

Permanent client files are kept electronically in Titanium Scheduler.

Temporary client files are kept in counselor folders in the resource/file room 416H. Temporary files are used to maintain secure storage for client forms and session artifacts until counselors
have time, later that same week, to transfer and/or attach client information/artifacts to client
Titanium client file notes for respective dates.

- Counselor folders are located in the 2nd drawer down from the top of the 5-drawer filing
cabinets in the resource/file room 416H. Group supervision sections are typically separated
by filing dividers based on the day of supervision meetings, from left to right across the 2nd
drawers of both filing cabinets. CCTC interns, research GAs, and staff folders are always in
the furthest right column in the second filing cabinet. Counselor folders are placed in
alphabetical order by last name from front to back of each filing section of the cabinet
column.

- Counselor folders are used to house temporary client files, disclosure statement copies, and
clinic forms and/or intervention sheets prepared for future sessions.

Counselors can choose to leave small recording equipment and ear-buds in their counselor
folders if they so choose. The CCTC staff, CAHE Department, and NIU are neither
responsible for nor liable for any personal items that are stored or left in the CCTC
counseling suite (GH 416) or counselor/instructor office suite (GH 427)

- Blank manila file folders can be found in the center of the brown shelving unit in 416I and/or
the short grey tower shelf to the left just inside 416H. Inform GAs if the pile of folders is
running low in GH 416H.

If you need to make a copy of something for a client from their record, you MUST have them fill
out a release of information form. These are located in the brown shelving unit in 416I.

Sending Termination Notices

When clients miss one counseling session without calling to cancel or reschedule within 15
minutes of the start of the client session time, CCTC GAs send them a pre-termination notice e-
mail. If the client does not have an e-mail address on file or the client has not approved e-mail
communications, a physical letter is mailed to the client (Appendix H).

When clients miss a second session without calling to cancel or reschedule within 15 minutes of
the scheduled start time for the appointment, CCTC staff send them a termination notice
following the same steps for sending pre-termination notices.

E-mail Notices

- The CCTC GA will include the session date, session time, counselor name, and counselor’s
university supervisor name.
- Copy and paste the pre-termination notice message into the e-mail.
- Blind copy the counselor and counselor’s supervisor in the message (bcc)
- Send immediately
- Note that the pre-termination notice e-mail was sent, including sender’s initials, date, and
time of message sending in the comment section of the scheduled appointment in which the
client did not show.

Mailing Physical Notices

- Fill in the date, clients name, counselor name, and obtain a CCTC supervisor’s signature.
- Get a NIU envelope from the top 416H file cabinet shelf or on top of the 416I brown
shelving unit.
Look up the clients mailing address and address the envelope with the client’s name, street address, unit/room/floor number, city, state, and zip code (NIU residence halls should have the hall name, “NIU,” and room number included.

Tri-fold the letter, place it the envelope, seal the envelope and place it in the outgoing mail box in the counselor/instructor office suite GH 427.

- If you would be locked out of the CCTC by taking this action, place the addressed and sealed envelope in the center reception desk. CCTC GAs will take care of items left in the center reception desk drawer the next day.
- The university postal system will affix postage for approved CCTC mailings.

Note: Mail created on Thursday evenings, which is not placed in the GH 427 outgoing mailbox that same evening, may not be sent out until Monday.

In all instances of clients’ missed appointments (no show), counselors should call the client in an attempt to discern client’s interest in continuing services. If the client does not answer and they have provided consent to receive voicemails, counselors should inform clients about the pre-termination or termination notice being sent to them and the clients follow-up options for counseling services.

- After the first no show, client missed appointments are scheduled for the following week.
- After the second no show, client services are terminated. Terminated clients can request to return to the CCTC and will be added to the waitlist and scheduled with a different counselor than previously assigned.

Counselors should consult with their supervisor about handling clients who consistently call to cancel and reschedule their appointments in two consecutive weeks.

Parking Passes
Clients can purchase parking passes through NIU parking services at daily and monthly rates. Daily parking passes and parking in the NIU visitor lot is currently $5 per day. NIU visitor parking passes are issued for clients to park in any parking lot and color space that is not otherwise marked as reserved/prohibited.

On a very periodic basis, CCTC clients may qualify for a free CCTC parking pass to use on scheduled session dates. These parking passes are not advertised and typically granted to clients with disabilities or high needs, and limited financial resources. The CCTC director approves such client initiated and/or counselor advocated requests.

- When providing passes, write the date the pass is for (the date of the session) on the pass line in black permanent marker.
- GAs or CCTC staff will record parking pass information (pass number, date for issued use, and client initials) on parking pass record log attached to the parking pass envelope.
- If the appointment is reoccurring, counselors should provide the client the pass for the next session with the appropriate date written on the pass and record it for the GAs record.

Supplies
Most of the supplies you will need can be found in GH 416H resource/file room top drawer-shelves of filing cabinets. In the first file cabinet, you will find envelopes, batteries, staples, post-it notes, tacks, dry-erasers, confidential ink stamp, laptops, and a few other supplies. In the
second file cabinet, you will find fax cover sheets, CCTC service filers/brochures, and other community resource pamphlets/cards. In the 416H right-side wall cabinets, you will find clinical assessment storage boxes and some expressive intervention materials. In the 416H left-side wall cabinets, you will find facial tissue, letter head paper, and meal consumption supplies. Room fans, cleaning supplies, three-hole punch, paper cutter, shredder, and other miscellaneous office supplies are visibly located in the resource/file room in GH 416H.

- Because sometimes supplies get miss-placed, check the other cabinets and 416I conference room to find what you are looking for. Ask CCTC GAs to help you find what you need.

If you notice we are running low on any supplies (paper, staples, forms, tissue, etc.) please notify the CCTC GAs immediately. You can leave a note on the CCTC message log, send an e-mail to cahc_cctc@niu, or tell them directly if they are in the office when you notice the need. Many supplies have to be picked up from another building or be ordered, which means they may take a while to come in. Please notify the CCTC GAs as soon as you notice anything running low.

Supplies found in the CCTC are not for your personal use. Please use these supplies only as needed for CCTC services. Also, if you take ANY supplies into counseling rooms, conference room, or 427 office suite return them to their proper storage place when you are finished.

**Computer/Equipment Use**

The computers in the counselor/instructor office suite (GH 427) are available for your use at any time when the CCTC is open. Please be courteous to others that may need the computers as all CCTC counselors, CCTC supervisors, 211/400 instructors, CCTC trainees, and CCTC staff need to access these nine computers (30-50 individuals any given semester). These computers are designated for completing clinical notes, uploading clinical recordings, and instructor access to NIU applications/databases. For non-clinical/instructional computer needs, counselors/instructors should use their personal devices or NIU computer labs for auxiliary research and preparations to help free-up computers for others who need to access secure CCTC/NIU instructional software.

CCTC Research GAs primarily use the CCTC reception desk and 416H resource/file room computers during their work hours.

The CCTC laptops are primarily used for conducting intake sessions and in the 416I conference room for Titanium Scheduler quick access during group supervision meetings or throughout counseling session hours for CCTC counselors. Counselors should logout of Titanium when they are not actively using it.

- Computers do not have to be reserved in advance. However, computer reservations can be made through Titanium scheduler. If you are using a computer that was reserved in advance through CCTC GAs, and no other computer with the necessary software needed by the individual who made the reservation, you will need to switch to a different computer or wait until a computer opens up for clinical/instructional use.

- If you are going to be listening to anything out loud from the computers, you must use headphones.

- Save files ONLY to your OneDrive or flashdrive. If you need assistance, ask your supervisor or CCTC GAs. Never save anything to the actual computer! Files saved to CCTC computers will be deleted. Confidential client information should not be saved/archived on computers in
any manner. All confidential client information should be entered directly into Titanium Scheduler or temporarily stored in designated CCTC OneDrive folders.

- The computers and laptops in the CCTC resource/filing room 416H and counselor/instructor office suite (GH 427) are for use by practicum counselors and may be used for confidential record keeping. Be cautious if you have confidential information up on the computer, as there may be workers or other people who do not generally have access to the practicum room(s). Either save it for another time, or make sure the name of the client is not where someone could see it by accident.

- Please log in and log off computers each time you use them. All CCTC computers and laptops (in 416 and 427) should be shut down at the end of each work day.

The CCTC fax machine is NOT for personal use at ANY time. The CCTC fax machine is for sending and receiving client-related information for which the client has provided written consent to send/receive.

- Student faxes should be sent/received through the CAHE Department office in Gable 200, Monday – Friday 8:00 a.m. to 12:00 p.m. and 1:00 p.m. to 4:30 p.m.

The CCTC printer/copier is designated for CCTC service related materials. GAs and university supervisors can print/copy CCTC client materials at no charge to the individual counselor or trainee. When counselors need to print materials for their personal or student-role purposes, the individual needs to have an active OneCard with a linked Huskie Bucks account, for which they can charge personal/student printing/copying fees to that account. There is a second printer/copier in the short hallway of Graham Hall 4th floor if the CCTC printer/copier is in use by others or malfunctioning. There are also student computer labs on the 1st floor of GH. CCTC GAs have a responsibility to confirm what you are requesting to be printed at any time.

- We strongly encourage you to print and copy several copies of your Professional Disclosure and Informed Consent Statements document at the start of the semester and keep them in your counselor folder in the filing cabinet. This saves time from having to scramble to print a copy out before each session you have with a new client.

- It is good practice to plan your client printing needs in advance. Approved CCTC client service intervention forms can be printed by CCTC GAs and University Supervisors in advance and kept in your counselor folder for future sessions as needed. If you wait until right before your session to request printing you may need to pay for your own CCTC approved printing needs (reimbursement for CCTC service costs paid by individual counselors are not provided).

**Reviewing Session Recordings**

When using CCTC computers to review sessions (GH 427), you must have headphones. Reviewing sessions without headphones is a breach of client confidentiality. Any headphones should work. Please bring your own headphones every time you review your recordings. You are welcome to keep them in your CCTC counselor folder if that is easier for you to remember. *You cannot rely on the CCTC to have extra headphones for use or to use the headphones from the observation rooms, so please be sure to always bring your headphones.*
Meals/Food
You may order food at any time (although you may only eat when not seeing clients). If you order food, try to order food when you will be available to receive it when it arrives. Also, if GAs are on duty, inform them about the expected delivery. If you will be seeing a client when the food arrives, supply GAs with information about your order (vendor and payment method) and the money needed to pay the delivery person. Specify how much money you expect back.

Consult with your supervisor about best times to order and consume food during your group supervision time or if you are not sure how to plan your meals around client session times. You may not, under any circumstance, delay client session start times because you are ordering, preparing food, or eating. Plan orders before sessions and place orders during breaks.

There is a microwave and a refrigerator in the CCTC resource/file room (GH 416H) and counselor/instructor office suite kitchenette (GH 427). These are available for counselors and 211/400 instructors to use. These refrigerators are not very big, do not bring a lot of food at one time. Do not leave food or food containers overnight. Also, be sure to remove any food that has spoiled or you do not plan to eat to prevent unpleasant smells.

- GAs or staff will dispose of items left in the CCTC and CCTC fridge at the end of each week. Reusable containers will be emptied and left in the GH 427 kitchenette.
- When using the microwave, please be sure to clean up any mess that has been made. It may be wise to cover whatever you are preparing with a paper towel and place one underneath the food. You have to press the “Time” button before entering the number of time you need.
- If you make coffee or tea make sure to turn off the machines after each use. Clean up any spills, throw away related trash, and washout any mugs used in the GH 427 kitchenette.

Group Supervision Interactions
In addition to the CCTC Protocols and Procedures stated above, each group supervision team will develop ground rules about how feedback is given, the role and limits of peer consultation, and the role of doctoral supervisors Ground rules allow everyone to know expectations for their responsibilities, limits of authority, and establish a reasonable chain of command for difficult situations.

Rights and Responsibilities in CCTC Supervisory Relationships
The creation and maintenance of all healthy and productive human relationships are inherently threaded with rights (what can be expected) and responsibilities of the persons in the relationship. This is true in counseling relationships and has a parallel presentation in supervisory relationships as well. The following list of rights and responsibilities are the noted expectations of the counseling faculty and CCTC supervisory policies.

Counselor Rights
Practicum counselors have the following rights:
- To know the criteria for competency evaluation and to receive formative evaluations from their supervisor(s) on a regular, systematic basis.
- To know the expectations and procedures established by the university supervisor.
To expect supervision and feedback in the treatment of clients on both regularly scheduled and as needed bases, as conforms to the ethical standards of ACA and the Association for Counselor Education and Supervision (ACES).

To know the procedure for handling client crises and CCTC emergencies.

To ask questions regarding the counseling process and appropriate interventions with clients.

To have the policies and procedures of the CCTC explained fully.

**Counselor Responsibilities**

Practicum counselors have the following responsibilities:

- To be on time for and in regular attendance of client sessions and scheduled CCTC meetings.
- To provide clients with a quality experience.
- To be prepared for and actively engaged in supervision and client sessions.
- To request additional supervision as needed.
- To immediately inform the university supervisor of concerns, questions, and problems with clients, client treatment interventions, or client crises.
- To compile and maintain accurate and complete client records in a timely and professional manner.
- To follow the ACA Code of Ethics and Standards of Practice.
- To be aware of legal issues related to counseling, such as confidentiality and privilege, duty to warn, malpractice, and negligence.

**Supervisor Rights**

The practicum supervisor has the following rights:

- To determine the expectations and requirements for satisfactory counselor development.
- To expect the counselor’s regular and punctual attendance in all supervisory meetings.
- To evaluate the counselor’s performance based on the stated criteria of the counseling program, CCTC, and supervision group class in which the counselor is enrolled.
- To expect the counselor to follow appropriate and ethical directives when they are given.
- To provide corrective remediation for counselors whose behavior is not consistent with the ACA Code of Ethics and Standards of Practice and/or the policies and procedures of the counseling program and CCTC.
- To determine the assignment and/or reassignment of clients based on the interface of the counselor's skill level and the client’s therapeutic needs.

**Supervisor Responsibilities**

The practicum supervisor has the following responsibilities:

- To establish and support the roles of supervisors in training.
- To clearly state expectations, requirements, and evaluation criteria.
To inform counselors of the ethical responsibilities and standards of the profession.

To inform counselors of legal issues related to the profession such as confidentiality, duty to warn, minor clients, negligence, and malpractice.

To ensure that practicum counselors provide adequate disclosure so that clients make informed choices about entering and continuing in therapy.

To ensure that client records are complete and present evidence of the adequacy of care a client has received.

To schedule supervision with the counselor for each client carried by the counselor on the basis of careful assessment of the needs of both the client and the counselor. The supervisor must be familiar with each client on the counselor’s client load.

To provide feedback to each counselor regarding their skill development and demonstration of satisfactory/unsatisfactory competencies at regular intervals during each semester (interval minimum, at midterm [formative] and end of term [summative]).

To inform the counselor, at the earliest possible time, but no later than midterm, if work is not satisfactory and to detail specific behavioral expectations that can lead to improvement.

To maintain records of supervision, and records of evaluation feedback.

To follow the ACA Code of Ethics and Standards of Practice and the ACES Ethical Guidelines for Counseling Supervisors

Final Reminders

When you leave the CCTC (416 or 427) please be sure everything is left better than you found it! Push in chairs, wipe down tables and white boards, shut down computers/laptops, turn off music; capture boxes; and noise machines, re-place clipboards on shelf, lock file cabinets, close 416H (supervisors will lock this door), write any maintenances or supply needs on the CCTC message log, and make sure not client information is left out in the open anywhere. You are responsible for keeping the CCTC a welcoming and clean place.

CCTC GAs are not always on duty when you are in the CCTC. If you need assistance with something, speak to your supervisor. If something needs to be addressed by CCTC GAs, leave a note on the CCTC message log with all information. Find the CCTC Director if/when necessary.

Whenever, there is no one present in the CCTC lobby, the CCTC main door and resource/file room 416H must be closed. If clients/CCTC guest are waiting in the lobby and no CCTC staff is sitting at the CCTC reception desk the resource/file room 416H should be locked and closed.

Assessments

Counselors and Trainees need to sign-out any assessments used and manuals borrowed overnight. Try to minimize removal of manuals form the CCTC as these are shared.

DSM

The CCTC has two copies of the DSM-V. These are not to leave the CCTC for any reason.
CCTC Research GAs
The CCTC Research GAs are around to help with CCTC protocols and answer questions about CCTC service procedures. If you have any questions, comments, or suggestions, please share!

Appendices
Some of the following appendices are additional points of policy clarification and some are CCTC form samples. All CCTC forms that counselors and supervisors need for CCTC service provisions are accessible in the CCTC conference room brown shelving unit or available via Blackboard or Office 365 OneDrive.
Appendix A: Statement of Liability Awareness

Northern Illinois University
Department of Counseling, Adult and Higher Education
Community Counseling Training Center

Statement of Liability Awareness

In light of the prevailing legal climate and increased litigation in the United States today it is increasingly apparent that practicum counselors in training for the helping professions must have adequate liability coverage for themselves during the training period. Northern Illinois University and the State of Illinois DO NOT provide legal protection for practicum counselors in the event of legal problems arising in counseling practicum or internship settings.

It is against this background and to protect practicum counselors in-training who are providing direct client services that the Counseling Program requires each practicum counselor to present evidence of adequate personal liability coverage. The practicum counselor’s insurance program must cover the counseling curriculum including on- and off-campus courses. Practicum counselors must have insurance coverage in the minimum amount of $1,000,000 incident/$3,000,000 aggregate.

Practicum counselors-in-training will choose their own insuring company. Companies that will insure practicum counselors include:
The American Counseling Association (ACA)
The American Mental Health Counseling Association (AMHCA)
The American School Counseling Association (ASCA)

In providing the names of the foregoing companies, Northern Illinois University is not endorsing them. It is the practicum counselor’s responsibility to evaluate the insurance available prior to choosing a particular company. The practicum counselor may choose to use his/her own personal insuring agent if that company can provide satisfactory coverage.

Practicum counselors will be asked to present evidence of coverage at the following times:

Master’s Practicum counselors: During enrollment in CAHC 550, CAHC 586

Each practicum counselor must provide a photocopy of the cover page of his/her professional insurance policy – the page that shows the practicum counselor’s name and policy number – in order to begin counseling in any clinical course.

If there is any change in a practicum counselor’s insurance during clinical coursework, the practicum counselor is required to notify immediately the current instructor(s).
Appendix B: Description of CCTC Forms

Client Request for Services Form (blue form side one) – These forms are filled out prior to clients’ intake session (or first counseling session for returning clients). These forms are also completed by CCTC clients at the end of each semester if they would like to continue counseling during the next semester. These forms are also completed by the GA(s) when individuals call or are referred to the CCTC. These forms have contact information, availability, and potential topics of interest for the client to discuss in counseling sessions.

Consent to Record Counseling Sessions (blue form side two) – This form is reviewed and signed by clients when they first arrive to request services and intake processes. If a client does not sign this form, they cannot be recorded and therefore, cannot be seen in this CCTC. Counselors will discuss this process with clients during their first meeting as part of their informed consent disclosure. Intake counselors and a CCTC supervisor must also sign this form. This one side of the two sided form should be attached to the intake note of the client’s file.

Adult/Child Intake Form – This form is filled out by the client (or client guardian for minor clients) during their first visit to the CCTC to request services or when arriving for their intake session. This form is four pages and includes demographic information, contact information, health information, previous experience with counseling, how the client was referred to the counseling CCTC, how the client is currently feeling, and topics the client would like to discuss.

Biopsychosocial Intake Report – This data form is completed within Titanium Scheduler as the session note for intake appointments. This note includes various client demographic, presenting concern/goal, and historical experience information. This primary information is used to confirm clinical placement decisions and discerning if external referrals are appropriate.

Mental Status Exam – This data form is completed for each client session held including intake and termination sessions. The MSE is a clinical presentation note about the client’s presence, demeanor, and basic relational behaviors at the time of contact. Much of this information is discerned by counselors based on direct observation. Some MSE data is based on client report.

Professional Disclosure and Informed Consent Statements – This form is given to clients by their assigned ongoing counselor at the start of the first counseling session. Counselors individualize the designated portions of this form. This form includes the qualifications, level of experience, supervision, and general counseling perspective of each counselor. The forms contents are verbally reviewed by the counselor with each client in their first counseling session. Other CCTC service procedures including, cancellation and no show polices, confidentiality and its limits are reviewed with clients. To conserve CCTC resources, this document should be printed double-sided and these copies should be printed on one of the NIU Anywhere printers.

Counselor Disclosure Consent File Form – This form is signed by the client and ongoing counselor at the beginning of the first ongoing counseling session to confirm client’s consent for counseling services and the client understands of the policies of the CCTC. A CCTC supervisor also signs this form after the first counseling session is concluded. This completed form should be attached to the first session progress note of the client’s file.

CCTC School-Based Counseling Consent Form – This consent form is used specifically for CCTC counselors providing school-based services as a part of their practicum counseling when the services are coordinated directly through the CCTC/CAHC 550 and no other clinical agency
is involved with the school contracting. This form requires two signatures from a primary
guardian of the student client being seen by the CCTC counselor. These are consenting to
understanding confidentiality and its limits as well as consent for services with a practicum
counselor using audio recording for supervision purposes.

**Consent to Use Recordings for Educational Purposes** – This form is completed whenever a
counselor wishes to use a client session or segment for modeling and/or critique of
developmental counseling practice to be kept as a training video. HIPAA compliant security of
client recordings is still expected to be adhered to regarding storage of such recordings.

**Counseling Session Notes** – These notes should be completed electronically within Titanium
Scheduler. Every counselor contact with clients should be documented. CCTC supervisors will
provide instruction and feedback on clinical note writing and various considerations for session
notes. Intake, Progress, Termination, and school-based client note types have corresponding
default note templates. For progress notes, a DAP (i.e., data, assessment, and plan) note structure
is typically used. All sections of the note should be completed concisely and accurately. Any
required data forms should be completed, and applicable documentation attached.

**Suicide/Homicide Risk Assessment** – These are two separate data forms within Titanium
Scheduler. One or both of these are completed when a client expresses and counselors confirm a
clients’ suicide/homicide risk. The risk assessment questions help counselors and their
supervisors determine clients’ severity of risk and appropriate intervention responses.

**Release of Information** – This is included in the file only if the client was referred from or
previous seen at another counseling facility or by another helping professional. A copy of the
ROI in addition to any paperwork on the client received through this exchange must be kept in
the client’s file (on the right side).

Authorization for Disclosure of Mental Health Information form is:

Completed (made out to the Community Counseling Training Center) before any information
about a client is released to anyone in any manner (oral, written, telephone, etc.) and then
released only with the permission of the faculty supervisor or the Clinical Director

Completed (made out to a mental health professional) whenever the client has had mental
health treatment during the past seven years. With a signed Release of Records form the
CCTC practicum counselor may seek information (request previous records or talk with the
mental health professional) at any time the CCTC deems that information may be relevant to
current treatment. To request photocopied records from a previous mental health
professional, notify your practicum supervisor. She or he will direct the CCTC GA(s) to mail
a photocopy of the release form.

**Confirmation of Counseling for Course Opportunity** – This letter can be found in the brown
shelving unit of the conference room 416I. Each client that is seeking counseling for extra credit
or an optional class assignment is typically required to provide this confirmation to their
instructor to receive course credit for attending counseling. **Clients must complete the release
consent form before this letter can be given to the client.** A copy of this letter and the release of
information consent form should be scanned and attached to the client’s file (typically attached
to the session note for the fourth counseling session attended).

Most clients will inform you of how many sessions they plan to attend. If they finish their
sessions and do not wish to continue services, the counselor should fill out the confirmation letter
and give it to the client at the end of that session. If for some reason the client leaves and counselors do not give clients the confirmation letter, counselors need to complete the confirmation letter accordingly and leave it in their counselor folder for one of the GA’s to retrieve in case clients comes back for it.

For clients who are seeking course opportunity confirmation, no show for two appointments, and have their counseling terminated, they would need to restart the counting of their four consecutive sessions with a new counselor.

**Client’s Report of Counseling Satisfaction** – This assessment is given to clients by practicum counselors after each weekly counseling session and is attached to client files as an assessment of client self-report of counseling relationship satisfaction.

**CCTC Client Satisfaction Survey** – This form is given to clients by practicum counselors at mid-semester and second to last session before clients’ termination session. This form is completed by clients and is given to GA’s for recording of client data and assessment of the CCTC. The GA(s) will compile responses to these surveys in an Excel file on the CCTC GA flash drive and forward this Excel file to the CCTC Supervisor. This form does NOT go in client files! This form is filed in the front desk bottom drawer by semester.

**Pre-Termination Notice** – This notice is sent to clients if they miss ONE session without contacting the CCTC. The message informs the client that if they miss another session without contacting the CCTC, their services will be terminated. If you have any questions, ask.

**Termination Notice** – This notice is sent to the clients if they miss TWO sessions without contacting the CCTC. This message informs the client that because they have missed two sessions without contacting the CCTC, their counseling services have been terminated. Termination notice may be rescinded if the client experienced some sort of emergency that prevented them from contacting the CCTC and has been in good standing of attending sessions prior to this second no show; however, this is at the counselor and supervisor’s discretion.

If a client is terminated and wants to continue counseling sessions, they may restart their counseling work with a different counselor. Once a client has been terminated due to missing sessions, there is no guarantee that we will be able to get them back in for sessions again, depending on the length of the waiting list. Again, if you have any questions, ask.

**Other Forms Not Generally Included in Client Files**

**Practicum Session Log** – This form is filled out by the practicum counselor in their Tk20 Practicum Field Experience Binder. It is recommended practicum counselors fill out this log each week. It is an easy way to keep track of all clients they are seeing as well as basic information about their sessions. Practicum counselors must fill out this form as it is used to keep track of their required hours (school, CCTC, and group).

**Peer Critique Form** – This form is used to help counselors-in-training structure their peer feedback when observing other counselors’ sessions. This form is two sided, allowing for counseling peer observers to provide narrative as well as scaling data. Counselors should feel free to add additional critical feedback to their peers beyond the prompts on this form.

**Counseling Resources in DeKalb** - This information can be found in the filing system in the conference room and is also included in client’s intake packets. It is recommended that practicum counselors go over this information with each new client. It has information about
other counseling resources in the area, their addresses/phone numbers, hours, and any fees that may be associated, as well as a short description of what is offered at each facility.

**Crisis Procedures** – This packet details proper procedure for client emergencies (suicidal ideation/plan, abuse, etc.). Practicum counselors should read through this packet and know it well. It is important the practicum counselors know how to handle these situations before they arise. Extra copies are found in the conference room.
Appendix C: General CCTC Scheduling and Documentation Structure

1. Client completes request for services (contact information, availability, signs consent to record, completes adult intake questionnaire)

2. CCTC Staff enters client into Titanium (place on wait list as needed)

3. CCTC staff schedules intake appointment (update client security access for intake counselor)

4. CCTC staff schedules tentative ongoing counselor first appointment (update client security access for anticipated ongoing counselor)

5. CCTC staff makes reminder call to client for intake appointment

6. Client attends intake appointment and completes formal intake assessment prior to interview (i.e., CCAPS 62 for college students, SCL-90R for non-college student adults, or CBCL for minors)

7. Intake counselor conducts intake interview

8. Intake counselor completes intake note in Titanium
   a. Biopsychosocial Intake Report data form and Mental Status Exam data form and sign, scan, and attach Consent to Record sheet and
   b. CCAPS data form OR scan and attach CBCL or SCL-90R sheets

9. Intake counselor shreds paper copies of client request and intake notes

10. Intake counselor consults with supervisor & CCTC director about any client concerns

11. CCTC Director confirms ongoing client assignment in consultation with CCTC supervisory team

12. CCTC staff updates client security access for counselors as needed

13. Ongoing Counselor reviews client Intake data forms and attachments

14. CCTC staff makes reminder call to client for first ongoing appointment

15. Client attends first ongoing counseling appointment

16. Ongoing counselor provides informed consent and acquires informed consent client signature sheet with client emergency contact information

17. Ongoing counselor provides client with full version of disclosure and informed consent statements

18. Ongoing counselor signs, acquires a supervisor signature, scans, and attaches informed consent signature sheet to first session DAP progress note (shred paper version after scanned version is attached and saved in Titanium)

19. Ongoing counselor updates client attendance for appointments in Titanium

20. Ongoing counselor reschedules ongoing client appointments in Titanium
21. Ongoing counselor makes ongoing reminder calls/emails as requested by client

22. Ongoing counselor completes session notes for every scheduled appointment: Mental status exam for every session attended and DAP progress note OR General use note documenting client absence info OR Termination note (data form with DAP note already included in form).

23. Ongoing counselor consults with supervisors about requests for new clients

24. Ongoing counselor inputs requests for new clients in Black scheduling binder green sheets based on consultation

All traces of paper forms are shredded. All traces of digital forms outside of Titanium are deleted from all inboxes, download folders and trash folders immediately after being saved in Titanium.

### Paperwork Responsibilities

<table>
<thead>
<tr>
<th>Graduate Assistant</th>
<th>Counselors-in-Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Request for Services Form</td>
<td>Biopsychosocial Intake Report</td>
</tr>
<tr>
<td>E-mailing Pre-termination and Termination notices Follow-up termination notice mailings</td>
<td>Notifying GA if termination is not being recommended after second session no show</td>
</tr>
<tr>
<td>Ordering more copies of forms</td>
<td>Informing GA’s when we are running low on CCTC forms</td>
</tr>
<tr>
<td>Distributing client intake form and follow-up assessment forms</td>
<td>Making sure clients have signed ALL necessary paperwork</td>
</tr>
<tr>
<td>Ordering office supplies and assessments</td>
<td>Filling out, copying, and giving clients any completion documentation</td>
</tr>
<tr>
<td>E-mailing counselors and counselor’s supervisor(s) when new clients are scheduled</td>
<td>Completing client session notes within 48 hours. Adding new client requests to the Black Scheduling Binder as needed.</td>
</tr>
</tbody>
</table>

### Client Contact Responsibilities

<table>
<thead>
<tr>
<th>Graduate Assistant</th>
<th>Practicum counselor-in-Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Schedule intake and first counseling appointments in Titanium Scheduler</td>
<td>Scheduling weekly client appointments after first session in Titanium Scheduler.</td>
</tr>
<tr>
<td>Reminder Calls for Appointments</td>
<td>Follow-up calls for canceled or rescheduled appointment requests</td>
</tr>
<tr>
<td>Reschedule new clients if there are scheduling mishaps or conflicts</td>
<td>Rescheduling on going client appointments if there is a client or counselor scheduling conflict. Contacting GA if counselor will be absent for scheduled appointment session.</td>
</tr>
<tr>
<td>Return all Phone Calls and Messages received in the CCTC</td>
<td>Answer phone and check CCTC messages if GA is not at the reception desk, and write all messages on the CCTC message log</td>
</tr>
</tbody>
</table>
Appendix D: Professional Disclosure & Informed Consent Statements

Template

_Counselor Name_
Community Counseling Training Center
Counselor Education Program, CAHE Department
Northern Illinois University
DeKalb, IL 60115
815-753-9312; cahc_cctc@niu.edu

Qualifications: I am a graduate student in the counseling program working towards completion of a master’s degree OR working on a doctoral degree. In my affiliation with the NIU counseling program, I am qualified to counsel under the supervision of a program faculty member. My formal education has prepared me to counsel individual adults, _adolescents, and children_; groups; couples; parents; and families [specify only those clientele for which you have completed relevant coursework]. [Specify any other qualifications you have, such as NCC certification.]

Experience: In my master’s program and under supervision I have practiced counseling skills with classmates, have counseled at least one client, and have led at least one counseling group. [Specify any other relevant experience here.]

Supervision: All sessions are conducted under the supervision of _list your section’s supervisors in training and their licenses, certifications, then your section supervisor’s name and credentials, licenses at (815) 753-9312._

Nature of Counseling: Describe your theory of counseling in terms the general public can understand. Be sure to include the goals and techniques of counseling. Write in terms of “you” (the client) and “I.”

Conditions of Counseling

Counseling Relationship: Unless you prefer otherwise, I will call you by your first name. Please call me _[your first name]._ During the time you and I work together, we usually will meet weekly for approximately 50-minute sessions. Although our sessions may be psychologically deep, ours is a professional relationship rather than a social one. Therefore, I will not attend social events with you, accept gifts from you, barter or exchange services, write references or recommendations for you, or relate to you in any way other than the professional context of our counseling relationship. You will benefit the most if your interactions address your counseling concerns exclusively.

I conduct all counseling session in English or with a translator for whom you arrange and pay. I work to be inclusive of all persons and multicultural identity dynamics including race, ethnicity, gender identity or expression, age, religion or spirituality, national origin, disability, sexual orientation, or other salient identity expressions. If significant differences, such as in culture or belief system, exist between us, I will work to understand and honor those differences.

Effects of Counseling: At any time, you may initiate with me a discussion of possible positive or negative effects of entering or not entering into, continuing, or discontinuing counseling. I expect you to benefit from counseling in some way. However, I cannot guarantee any specific
results. Counseling is a personal exploration that may lead to major or minor changes in your life perspectives and decisions. These changes may affect your significant relationships, job, and/or understanding of yourself. You may feel troubled, usually only temporarily, by some of the things you learn about yourself, or some of the changes you make. In addition, counseling can result in long lasting effects. Although the exact nature of changes resulting from counseling cannot be predicted, I intend to work with you to achieve the best possible results for you.

**Conditions of Ongoing Counseling:** If you have been in counseling or psychotherapy during the past seven years, the CCTC may request that you to sign a release so I may communicate with and/or receive copies of records from the professional(s) from whom you received mental health services, if I deem it important to our current work to do so. By signing this form, you are agreeing to disclose all previous mental health treatment and to reimburse the CCTC for any expenses charged by your previous mental health professional(s) for supplying copies of your records. While you are in counseling with me at the CCTC, you agree not to maintain or establish a professional relationship with another mental health professional unless you first discuss it with me and sign a release that enables me to communicate with the other mental health professional(s). If you decide to maintain or establish a professional relationship with another mental health professional against my advice, I may consider this your decision to change counselors and the Community Counseling Training Center at NIU reserves the right to terminate your counseling services.

**CCTC Policies**

**Appointments and Cancellation:** Our in-person contact will be limited to counseling sessions you arrange with me. My scheduled time at the Community Counseling Training Center at NIU is only 5 hours per week.

The Community Counseling Training Center at NIU (CCTC) is a training facility and maintains a strict schedule of services. If you have to miss a session, please call the CCTC at (815) 753-9312 to cancel your session as soon as possible. Please provide your name, the date and time of your session, and your counselor’s name. If you miss two counseling sessions without notifying the CCTC, your services will be terminated. If you are a student completing a counseling experience class assignment or seeking extra credit for participating in counseling services, you must attend a minimum of four “consecutive” sessions to receive your attendance confirmation. If you are terminated you may reapply for services, pending counselor availability, however you will be required to complete four consecutive sessions (count restart).

**Permission to Participate and Confidentiality:** I am a counselor-in-training in the counseling program at Northern Illinois University and am under the direct supervision of supervisors listed on page one (whom may be contacted at (815) 753-9312. All our counselor sessions are confidential. This means that no information will be released to persons or agencies regarding the fact that counseling has been received or the nature of the concerns without written consent. Danger to self and/or others (i.e. suicide or homicide) may necessitate the breaking of confidentiality. In addition, by law suspected child abuse and/or neglect, elder abuse and/or neglect, and incapacitated adult abuse and/or neglect communicated by clients must be reported to appropriate agencies by counseling staff.

**Recording and Observation:** Counselors-in-training receive consultation and supervision. To aid in this, I must request to have your sessions recorded and/or observed. Information and recordings will be treated according to ethical standards. Confidentiality will be strictly
maintained; information will not be released to any other person or agency without your written permission. In accordance with Illinois state laws, written records will be maintained for the appropriate length of time and then properly destroyed. Please read the statement below and sign if you agree. If you have questions, please talk them over with me.

**Educational Research:** As an educational training center in counseling, Northern Illinois University’s Counselor Education program may use recorded counseling session(s) for internal educational training purposes. These recordings will be used exclusively for the non-commercial, educational training of graduate-level and post-graduate level counselors-in-training and supervisors-in-training. There will be no financial or other remuneration for use of recordings, either for initial or subsequent transmission or playback. This consent includes use of written and images of non-identifiable information to be used for educational purposes including future research. Identifiers will be removed from your identifiable private information and after such removal, the information could be used for future research studies or distributed to another counseling program affiliated researchers for future research studies without additional informed consent.

Northern Illinois University, NIU CAHE Department and, NIU Counselor Education Program are released from any liability resulting from such educational and/or research work. Your permission and consent may be rescinded; however, in order for the revocation of permission/consent to be effective, it must be made in writing.

**Crisis:** The Community Counseling Training Center at NIU is not equipped for after-hours emergencies. Any messages on the CCTC answering machine after Thursdays’ hours may not be heard until Monday afternoon. If a need arises and assistance is required immediately, please contact the University Police at (815) 753-1212. If you are not a student at NIU, contact the Ben Gordon 24-Hour Community Crisis Hotline at (866) 242-0111.

In the event that I believe you are in danger, physically or emotionally, to yourself or another person, you specifically consent for me to warn the person in danger and to contact the designated emergency contact person(s), in addition to medical and/or law enforcement personnel.

* If you are a current NIU student, in accordance with Public Act 099-0278 you have been given the opportunity to declare a mental health emergency contact. While under the mental health care of the CCTC, we will default to contacting the person listed above first and any person listed as your NIU mental health emergency contact within 24 hours.

**Client Rights**

Some clients achieve their goals in only a few counseling sessions, whereas others may require months or even years of counseling. As a client, you are in complete control and may end our counseling relationship at any time. If you choose to end the counseling relationship, I ask that you participate in a termination session. You also have the right to refuse or to discuss modification of any of my counseling interventions or suggestions that you believe might be harmful. I render counseling services in a professional manner consistent with accepted ethical standards. If at any time for any reason you are dissatisfied with my services, please let me know. If I am not able to help you resolve your concerns, you may report your complaints to my supervisor(s) listed on page one. As a client you have the right to:
• Be informed of the qualifications of your counselor: education, experience, and professional counseling certification(s) and State license(s).
• Receive an explanation of services offered, your time commitments, fee scales and billing policies prior to receipt of services.
• Be informed of limitations of the counselor’s practice to special areas of expertise (e.g., career development, spirituality, etc.) or age group (e.g., adolescents, older adults, etc.).
• Have all that you say treated confidentially and be informed of any state laws placing limitations on confidentiality in the counseling relationship.
• Ask questions about the counseling interventions and strategies and be informed of your progress.
• Participate in setting goals and evaluating progress towards meeting them. Be informed of how to contact a mental health professional in an emergency situation.
• Request referral for a second opinion at any time.
• Request copies of records and reports to be used by other counseling professionals.
• Request to review your records, and make amendments.
• Receive a copy of the code of ethics to which your counselor adheres.
• Contact the appropriate professional organization if you have doubts or complaints relative to the counselor’s conduct.
• Terminate the counseling relationship at any time.
• If you have any concerns about your rights, you may contact your counselor’s supervisor or the Community Counseling Training Center Director.

Privacy Rights under HIPAA: You have the right to review your client file in the presence of your counselor, the supervisor, or the CCTC Director. You may ask for a copy of your file and will be charged a per-page copy fee at the current university copying rate. You may ask for corrections or clarifications of the content in the file and that will be recorded in the notes. You may ask to review the CCTC HIPAA procedures. You may also ask for a meeting with a HIPAA compliance officer (the Clinical Director)

Referrals: The CCTC staff recognizes that not all conditions presented by clients are appropriate for treatment at this facility. For this reason, you and/or I may believe a referral is needed. In such a case, I will provide some alternatives including programs and/or people who may be available to assist you. A verbal exploration of alternatives to counseling will also be made available upon request. You will be responsible for contacting and evaluating those referrals and/or alternatives. I most likely will be available to be your counselor at the CCTC until the end of this current academic semester. If you wish to continue counseling beyond that time, I will provide limited continuation and/or referral options.

Client Responsibilities
• Set and keep appointments with your counselor. Let him/her know as soon as possible if you cannot keep an appointment or are running late.
• Help plan your goals.
• Follow through with agreed upon goals and counseling interventions.
• Keep your counselor informed of your progress toward meeting your goals.
• Terminate your counseling relationship before entering into arrangement with another counselor.
Appendix E: Initial Session Suggested Procedures

1. Bring into the session:
   a. Yourself
      i. As relaxed as possible, knowing this is an opportunity for you to learn
      ii. Ready to focus on and serve your client to the best of your ability
   b. Pen
   c. Forms listed below
   d. Informed consent “Cheat sheet,” if you wish, to confirm you’ve thoroughly covered 2 and 4 below

2. Preliminary Matters (first 5 minutes or so, usually)
   a. Establishment of the counseling relationship
   b. Bring two copies of the Professional Disclosure Statement form to the session.
      Have the client read the form. Answer any questions. Client and practicum counselor each sign the same two forms; client keeps one and practicum counselor keeps the other to place in client file.
   c. If any other forms (Rights and Responsibilities, Intake, etc.) are missing from the file, the practicum counselor is responsible for making sure those forms are completed and added to the client file.

3. Working Phase of Session (30-35 minutes)
   a. Open invitation for client to talk
   b. Using basic counseling skills and theory:
      i. Establish rapport and understand client concerns primarily through use of reflective responses and open-ended questioning.
   c. Collaborate with client to determine counseling goal(s).
   d. If possible, begin work on goal(s).
   e. Optional: Collaborate with client to determine homework assignment

4. Ending phase of session (last 5 minutes or so)
   a. Decision to continue counseling together or refer
   b. Establishment or reiteration of tentative therapeutic goal(s) and homework (if any)
   c. Reiteration of next meeting date and time, appointment card
   d. Optional: Client Feedback Survey
Appendix F: Appointment Reminder Card Sample

Community Counseling
Training Center
Northern Illinois University
Department of Counseling, Adult
and Higher Education
Graham Hall 416
DeKalb, Illinois 60115-2828
815-753-9312
Fax 815-753-9309
cahc_cctc@niu.edu

Your Appointment is for:

<table>
<thead>
<tr>
<th>Mon.</th>
<th>Date</th>
<th>Time</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tues.</td>
<td>Date</td>
<td>Time</td>
<td>Date</td>
<td>Time</td>
</tr>
<tr>
<td>Wed.</td>
<td>Date</td>
<td>Time</td>
<td>Date</td>
<td>Time</td>
</tr>
<tr>
<td>Thurs.</td>
<td>Date</td>
<td>Time</td>
<td>Date</td>
<td>Time</td>
</tr>
<tr>
<td>Fri.</td>
<td>Date</td>
<td>Time</td>
<td>Date</td>
<td>Time</td>
</tr>
</tbody>
</table>
Appendix G: Confirmation of Counseling Completed for Course Opportunity Sample

Date: __________

This letter confirms that __________ Client Name ____________ attended __________ session # __________

individual counseling sessions in the Community Counseling Training Center.

These sessions were conducted with CCTC Counselor: __________ Counselor Name ____________

under the supervision of __________ University Supervisor Name ________ during the __________ term & year __________

semester.

CCTC Staff Signature of Affirmation: __________ Counselor Signature ____________

Community Counseling Training Center
Counselor Education Program
Northern Illinois University
DeKalb, IL 60115
cahc_cctc@niu.edu
815-753-9312
Appendix H: Termination Notice Templates

Pre-Termination Message:
The Community Counseling Training Center maintains a policy that clients participating in a counseling relationship must notify their counselor ahead of time, prior to missing a session. Two such absences may result in termination of the counseling relationship. You are receiving this message because you missed one counseling session without calling to cancel or reschedule.

Because of the training nature of the center, it is essential that we be able to rely upon attendance by clients receiving our services. For this reason, if you miss another counseling session without contacting the center first, your services may be terminated.

If your counseling sessions are terminated and you wish to resume services at the center, you would need to restart your sessions with a different counselor. Additionally, for clients seeking course credit as a part of your counseling attendance, you would need to complete all four sessions in a row, without missing a session.

If you have any questions about services at the Community Counseling Training Center, or restarting a counseling relationship, please contact the center at (815)-753-9312.

Thank you,

Termination Message:
The Community Counseling Training Center maintains a policy that clients participating in a counseling relationship must notify their counselor ahead of time, prior to missing a session. Two such absences may result in termination of the counseling relationship. You are receiving this message because you missed two counseling sessions without calling to cancel or reschedule.

Because of the training nature of the center, it is essential that we be able to rely upon attendance by clients receiving our services. According to our records, you have missed two counseling sessions without contacting the center ahead of time, and we have terminated your counseling services.

If you wish to resume services at the center, you would need to contact call or stop by the center to request that you be re-added to the center waitlist for scheduling counseling sessions with a different counselor. Additionally, for clients seeking course credit as a part of your counseling attendance, you would need to complete all four sessions in a row, without missing a session.

If you have any questions about services at the Community Counseling Training Center, completion of course opportunity counseling confirmation, or restarting a counseling relationship, please contact the center at (815)-753-9312. Be prepared to reconfirm or update your availability as your previous time slot many no longer be available, and it is very possible that you would be placed with a different counselor at a different time.

Thank you,
Appendix I: Crisis Procedures

The following steps are a guide for procedures to be followed when crisis situations arise with clients being counseled at the CCTC. Crisis situations are ones in which clients exhibit behaviors, thoughts, or feelings that are beyond the intervention abilities or experiences of the Practicum Counselor. Usually this means disorientation, erratic behaviors, delusional thoughts, hallucinations, suicidal ideation with plans or intent, threats of harm or actual harmful acts to self and/or others, moderate to severe substance intoxication, extreme anxiety about real or imagined threats, child abuse, extreme emotionality from which clients cannot deescalate, intense physical reactions, and other such events that need immediate attention.

Intervention Steps

Assessment and Supervision

1. Immediately notify the practicum supervisor. You may temporarily leave the counseling session to find the supervisor. However, do not abandon crisis clients who are at risk to self or others. If you step into the hall to locate the practicum supervisor, leave the door cracked: you may have to interrupt another counselor’s session to get assistance.

2. The practicum supervisor should assess the crisis to determine if the Practicum counselor has the ability to facilitate what needs to be done, and if so, practicum supervisors should supervise the process very closely. If the practicum counselor is unprepared to handle the situation, the supervisor should intercede and take full responsibility for crisis assessment and crisis interventions.

3. Make an assessment of the urgency of the crisis situation and risk level for potential of harm to client by self, by others, or client harm to others. The client may only need support to get through the emotionality of the moment and someone to call later if the feelings return. If there is a high risk immediate harm, consultation with other mental health professionals is warranted. Contact the CCTC Director at home if he/she/they is not available on campus, for an initial consultation.

Alternative Consultation

4. If the client is a NIU student and university offices are open, and you cannot reach the CCTC Director, call the daytime crisis counselor at the Counseling and Consultation Services at 815-753-1206. Tell the secretary who answers that you are a CCTC counselor/supervisor and that you need to consult with the crisis counselor on staff immediately. When the crisis counselor returns the call, describe the situation to her/him/them, and indicate that you are seeking consultation. It is possible that the client needs to be referred elsewhere for ongoing counseling/therapy once the crisis has been resolved. Do not expect the crisis counselor to take responsibility for the client, although she/he/they may volunteer to do so. The practicum supervisor is responsible for deciding what course of action is appropriate.

If the client is a NIU student and university offices are NOT open, and you cannot reach the CCTC Director, call the University Police switchboard at 815-753-1212, let them know you are a CCTC counselor/supervisor and that you need to consult with the crisis counselor on staff immediately. The Counseling and Consultation after-hours crisis counselor will call you back and consult with you.
If the client is a **Non-NIU student**, and you cannot reach the CCTC Director, you can call the Ben Gordon Center of Northwestern Health Network for crisis consultation at 800-373-3327. The Ben Gordon Center Hotline can provide consultation in the absence of the CCTC Director.

**Emergency Contact Notification**

5. If the client is assessed for crisis and hospitalization is not warranted the practicum counselor in consultation with their practicum supervisor or CCTC Director determine if the emergency contact person identified by the client on their informed consent form should be notified. If the decision to notify an emergency contact is made, the counselor will call the listed individual to notify them of the nature of the client crisis and provide resource for the emergency contact to consult if crisis escalate.

For **NIU students**, in accordance with Public Act 099-0278, NIU students have been given the opportunity to declare a mental health emergency contact within MyNIU. While under the mental health care of the CCTC, we will default to contacting the person listed in the consent form first and then the counselor should call the CCTC Director to retrieve any additional mental health contact person information listed as MyNIU, and notify this person within 24 hours of the nature of the NIU student crisis situation, needs, resources for helping the person keep themselves safe and resources to contact in case the crisis re-escalates.

If the crisis situation warrants hospitalization, complete the “emergency contact notification” steps as soon as possible, after client stabilization has been achieved.

**Voluntary Hospitalization (if applicable)**

6. If hospitalization is indicated and the client voluntarily agrees, transportation must be arranged. First assess whether the client has a friend or family member who can transport and accompany him/her to the Emergency Room at Kishwaukee Hospital. If not, call the university police and ask for a crisis transport for a client from the CCTC in Graham Hall to Kishwaukee Hospital. If the client is erratic, becomes unconscious, experiencing any chest pains and/or afraid of the police, call the ambulance service at 815-758-2780 and explain the client’s need for transportation to the Emergency Room at Kishwaukee Hospital.

Note: NIU students are required to have hospitalization insurance and are responsible for any charges incurred in this process. You need to ascertain whether or not a non-student has insurance, and clearly indicate that he/she/they is responsible for any charges incurred. Tell the client that upon arrival at the hospital a number of information questions will be asked regarding: insurance company, identification number, nature of the problem, and other health payment and health background assistance questions.

**Helpful Hints to Persuade Voluntary Hospitalization:**

a. Kishwaukee is a relatively small, local hospital. Your admission is kept confidential.

b. The “mental health unit” is a place where you can “get away” from the pressures of daily life for a little while.

c. Hospitalization at Kishwaukee is usually short term, from a day to several days.

d. There are people around the clock to talk to help you stay safe.

e. If you go in voluntarily, you can leave whenever you want.
f. The Student Health Insurance policy covers 80% of inpatient hospitalization.

**Involuntary Hospitalization (if applicable)**

7. If the client will NOT voluntarily agree to hospitalization in the case of suicidality, extreme risk of self-harm or eminent danger to others, a licensed psychologist or a psychiatrist must examine the client, in person, and fill-out a certificate which permits involuntary admission.

If the client is a **NIU student** and **university offices are open**, after calling the CCTC Director, call Counseling and Consultation Services at 815-753-1206, explain who you are and the nature of the crisis, and ask to speak to a licensed psychologist who will arrange to examine the NIU student client. During evening hours, call the University Police switchboard at 815-753-1212; let them know you are a CCTC counselor/ supervisor and that you need to consult with the crisis counselor immediately. When the counselor calls you back, request an examination for involuntary hospitalization. If a client will not permit such an examination, you, your practicum supervisor or someone over age 18 who has direct information regarding lethality/suicidality, (e.g., a friend, family member, University Police, etc.) can sign a petition and request transportation of the high risk client to the hospital. Call the university police at (815) 753-1212, tell them a) you are a counselor, b) you have the petition in hand, c) the student is not agreeing to hospitalization, and d) this is a life and death situation. If they refuse to transport, call the DeKalb Police (815-748-8400) and say the same thing. If the DeKalb Policy refuse, call the Sheriff’s Office (815-895-2155) for transport. If the Sheriff’s Office refuses, contact the CCTC Director and call the State’s Attorney’s Office (815-895-7164) and ask them how to proceed. In the case of involuntary clients, they can be monitored at the hospital for 24 hours (longer if on the weekend) until they are evaluated by a psychiatrist.

For **non-NIU student clients** who need involuntary admission, bypass the CCS consultation and get the petition signed and notify DeKalb police first for transportation. If they refuse continue up the call transport list.

**Follow-up Notification and Documentation**

8. Before the voluntary/involuntary client arrives at Kishwaukee Hospital, notify the Emergency Room (815-756-1521). Tell them who you are and why you are making the referral for hospitalization. Also find out from the emergency room who the psychiatrist is who can authorize admission to the hospital and try to get a phone number to call him or her. If possible, plan to meet the client at the emergency room and provide support until they are taken care of by the hospital staff.

9. Notify all of the individuals consulted regarding the client as soon as possible. Document the entire situation from the initial assessment of the crisis until the client was hospitalized. Clearly identify the professionals with whom you consulted, the procedures you followed, and obtain your supervisor’s signature in the documentation. Notify the CCTC Director when all documentation has been completed for review.
Appendix J: Personal Agreement Plan Card Sample

PERSONAL AGREEMENT PLAN

Call (815) 753-1206, Counseling & Consultation Services,  
(Monday-Friday, 8 am- 4:30 pm) or
Call (815) 753-1212, NIU Public Safety, and ask for the  
on-call counselor (after 4:30 pm and on weekends) or
Call (800) 273-TALK, a free 24-hour hotline, if you want to talk or  
if you are in emotional distress
Call (815) 756-5228, Safe Passage, a free 24-hour hotline,
If you need emotional support, information or referrals regarding interpersonal violence.
Call 911 in the event of any possibility of bodily harm, or go to the nearest hospital emergency room.

- Sleep. Go to bed and wake up at consistent times.
- Eat healthy. Your mind needs a balanced diet.
- Live in the present. Think what to do in the next hour or two.
- Engage in activities that renew your heart and mind.
- Maintain a sense of humor. Laughing can reduce stress.
- Stay connected to family & friends who you can talk with.
- Avoid substances like alcohol and other drugs.
- Exercise can help improve mood. Walk, run, or bike.
- Remind yourself that this distress is temporary.
- Practice relaxation including breathing exercises.
- Prepare for therapy. Think of goals you would like help with.
Appendix K: Safety Plan Sample

Step 1: Warning Signs [thoughts, images, mood, situation, behavior] that a crisis may be developing:
1. _________________________________________________________________
2. _________________________________________________________________
3. _________________________________________________________________
4. _________________________________________________________________
5. _________________________________________________________________

Step 2: Making the Environment Safe – Things I can do to reduce the risk of harming myself if my thoughts become too intense and I try to act on them:
1. _________________________________________________________________
2. _________________________________________________________________
3. _________________________________________________________________

Step 3: Internal Coping Strategies – Things I can do to take my mind off my problems without contacting another person [Ex: Relaxation Technique, Physical Activity, etc.]:
1. _________________________________________________________________
2. _________________________________________________________________
3. _________________________________________________________________
4. _________________________________________________________________
5. _________________________________________________________________

Step 4: External Coping Strategies – People whom I can ask for help and social settings that provide distraction when Internal Coping Strategies are not working and my thoughts are becoming too intense:
Name: ______________________________ Phone: _______________________
Name: ______________________________ Phone: _______________________
Name: ______________________________ Phone: _______________________
Place: _____________________________________________________________
Place: _____________________________________________________________
Place: _____________________________________________________________

Step 5: Professionals or agencies I can contact when I feel I am no longer safe and am at risk of harming myself or attempting suicide:
Clinician Name: ___________________________ Phone: ____________
Clinician Name: ___________________________ Phone: ____________
Local Urgent Care Services: _______________________________
Urgent Care Services Address: _______________________________
Urgent Care Services Phone: _______________________________
Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

The one thing that is most important to me and worth living for is:
______________________________________________________________
Appendix L: Counseling Resources in DeKalb County

DeKalb and Northern Illinois University are fortunate to have several free or low-cost counseling services available to the community.

Call practicum counselor health insurance for a description of insurance coverage for therapy or counseling services.

This list is intended to help you find immediate and appropriate assistance. Occasionally one agency will have a high demand for services that necessitates a waiting period for new clients, or you will have personal reasons for choosing one agency over another. Practicum counselors at any of these agencies will be glad to assist you in making the decision.

COUNSELING & CONSULTATION SERVICES, NIU
Phone: 815-753-1206
Location: 120 Campus Life Building, NIU, DeKalb, IL 60115
Fees: Counseling is free. Moderate testing fees
Hours: Monday-Friday, 8:00 a.m. – 4:30 p.m.
For emergency assistance after hours, call 815-753-1212 and ask to speak to a counselor. The center is open whenever NIU is open, including semester breaks.
Description of Services: Individual and group counseling is a broad range of personal concerns. Career counseling services include interest assessment, workshops, and use of computerized career counseling programs. Educational counseling services include assistance with test anxiety and study skills. Assessments of drug and alcohol abuse are also provided as needed.

COMMUNITY COUNSELING TRAINING CENTER
Phone: 815-753-9312
Location: 416 Graham Hall, NIU, DeKalb, IL 60115
Fees: Free for practicum counselors, faculty, or staff. Minimal charge for testing services.
Hours: Weekdays and evenings by appointment.
Description of Services: A wide range of services are offered by the practicum counselors, including limited testing and assessment, personal and vocational counseling, and child counseling. The NIU Counseling CCTC also offers individual, family, roommate, and couples counseling. In general, the approach used is one that promotes growth and focuses on increasing the mental health of clients. All practicum counselors are either doctoral or masters level practicum counselors who are being supervised by members of the Counseling faculty.

COUPLES & FAMILY CLINIC
Phone: 815-753-1684
Location: 429 Garden Rd., NIU, DeKalb, IL 60115
Fees: Free for practicum counselors. Faculty, staff, and community members charged on a sliding scale bases.
Hours: Weekdays by appointment. Open during breaks.
Description of Services: Individual, couple, family counseling on a variety of personal problems. Counseling is provided by graduate practicum counselors under supervision of Marriage and Family faculty.

PSYCHOLOGICAL SERVICES, NIU
Phone: 815-753-0591
Fax: 815-753-0552
Address: Normal Road, at Lincoln Highway, NIU, DeKalb, IL 60115
Fees: Free for full-time NIU practicum counselors, except for testing. Income-based fees charged for faculty, staff, and community members.
Hours: Mondays, Wednesdays, Fridays 9:00 a.m. – 5:00 p.m.
Tuesdays, Thursdays 1:00 p.m. – 9:00 p.m.
Description of Services: Personal and educational problems are addressed. Clients are generally seen by advanced level graduate practicum counselor staff members. A wide variety of therapies are provided to meet the needs of children, adults, senior citizens, families, and couples.
HEALTH SERVICES, NIU
Phone: 815-753-1311
Address: Located off of Lucinda Road, near corner of Normal Road, next to Telecom/Security Building
Fees: Vary by service (Psychiatry, Initial Visit: $75; Psychiatry, Follow-Up Visit: $50)
Hours: Monday – Friday: 8:00 a.m. – 4:30 p.m.
Description of Services: NIU Health Services provides ambulatory medical and psychiatric health care for NIU practicum counselors to support them in their academic pursuits.

BEN GORDON CENTER: NORTHWESTERN/KISH
Phone: 815-756-4876
Address: 12 Health Services Drive, DeKalb, IL 60115
Fees: Based on income
Hours: 24-hour emergency services, daytime and evening hour
24-Hour BGC Response: 1-866-242-0111
Description of Services: Provide comprehensive outpatient services to DeKalb County residents, including treatment of substance abuse.

FAMILY SERVICE AGENCY
Phone: 815-758-8616
Address: 14 Health Services Drive, DeKalb, IL 60115
Fees: Based on income
Hours: Mondays through Thursdays: 9:00 a.m. – 8:00 p.m.
                  Fridays: 9:00 a.m. – 5:00 p.m.
Description of Services: Individual and group counseling for children, adults, couples, and families. Extended groups and one-time workshops are also offered, including a workshop in Marriage Preparation.

SAFE PASSAGE
Phone: 815-756-5228
Address: P.O. Box 621, DeKalb, IL 60115
Fees: None
Hours: 24-Hour Confidential Emergency Assistance
Description of Services: Safe Passage works with client in a safe, non-judgmental atmosphere to develop their inner strength so they can pursue a positive direction in their lives through: an abuse hotline, shelter, counseling, advocacy, community education, abuser services, and volunteer programs.

*PRIVATE THERAPISTS AND PRACTICUM COUNSELORS ARE AVAILABLE IN DEKALB, SYCAMORE, AND ELSEWHERE, AS LISTED IN THE YELLOW PAGES OF YOUR PHONE BOOK UNDER *MENTAL HEALTH SERVICES* OR “PSYCHOLOGISTS”
Feedback is a way of helping another person to either strengthen or consider changing his/her behavior. It is communication to a person (or group) which gives that person information about how they affects others. As in a guided missile system, feedback helps an individual keep his/her behavior “on target” and thus better achieve her/his goals. Some criteria for useful feedback:

1. **It is descriptive rather than evaluative.** By describing one’s own reactions, it leaves the individual free to use the feedback as they sees fit. By avoiding evaluative language, it reduces the need for the individual to react defensively.

2. **It is specific rather than general.** To be told that one is “reliable” may have less impact than being told, “In the months we’ve worked together, you have met every deadline we’ve faced. I really appreciate being able to count on you.” Likewise, to be told that one is “dominating” will probably not be as useful as being told that “just now when we were deciding the issue you did not listen to what other said and I felt forced to accept your arguments or face attack from you.”

3. **It takes into account the needs of both the receiver and giver of feedback.** Feedback can be destructive when it serves only our own needs and fails to consider the needs of the person on the receiving end.

4. **It is directed toward behavior which the receiver can do something about.** In particular, frustration is only increased when a person is reminded of some shortcoming over which (s)he has no control.

5. **It is solicited, rather than imposed.** Feedback is most useful when the receiver him/herself has formulated the kind of question which those observing him/herself can answer.

6. **It is well-timed.** In general, feedback is most useful at the earliest opportunity after the given behavior (depending, of course, on the person’s readiness to hear it, support available from others, etc.)

7. **It is best received if begun with an area(s) of strength followed, if appropriate, by area(s) for improvement or growth.** Feedback that focuses perpetually on the negative can foster defensiveness, discouragement, or hostility rather than openness to the information.

8. **It is checked to insure clear communication.** One way of doing this is to have the receiver try to rephrase the feedback (s)he received to see if it corresponds to what the sender had in mind.

9. **When feedback is given in a training group, both giver and receiver have opportunity to check with others in the group the accuracy of the feedback.** Is this one person’s impression or an impression shared by others?

Feedback, then, is a way of giving help; it is reinforcing of constructive behavior; it is a corrective mechanism for the individual who wants to learn how well his behavior matches his intention; it is a means for establishing and/or strengthening one’s identity. Appendix J: Counseling Competencies Scale (CCS)
Appendix N: Counseling Competencies Scale (CCS)

Contributing Authors (2008)

The Counseling Competencies Scale (CCS) assesses counseling practicum counselors’ skills development and professional competencies. Additionally, the CCS provides counseling practicum counselors with direct feedback regarding their counseling skills and professional dispositions (dominant qualities), offering the practicum counselors practical areas for improvement to support their development as effective and ethical professional practicum counselors.

Scales Evaluation Guidelines

- **Exceeds Expectations / Demonstrates Competencies (8)** = the counseling practicum counselor demonstrates strong (i.e., exceeding the expectations of a beginning professional practicum counselor) knowledge, skills, and dispositions in the specified counseling skill(s) and professional disposition(s).

- **Meets Expectations / Demonstrates Competencies (6)** = the counseling practicum counselor demonstrates consistent and proficient knowledge, skills, and dispositions in the specified counseling skill(s) and professional disposition(s). A beginning professional practicum counselor should be at this level at the conclusion of his/her practicum and/or internship.

- **Near Expectations / Developing towards Competencies (4)** = the counseling practicum counselor demonstrates inconsistent and limited knowledge, skills, and dispositions in the specified counseling skill(s) and professional disposition(s). Practicum counselors scoring at this level during their final practicum evaluation (be it practicum or internship) have not demonstrated the professional competencies needed to progress to the next level of clinical experience. Remediation may be necessary in these areas.

- **Below Expectations / Insufficient / Unacceptable (2)** = the counseling practicum counselor demonstrates limited or no evidence of the knowledge, skills, and dispositions in the specified counseling skill(s) and professional disposition(s). Practicum counselors scoring at this level during their final evaluation (practicum or internship) have not demonstrated the professional competencies needed to progress to the next level of clinical experience. Remediation may be necessary in the areas identified as deficient by the clinical supervisor.

Counseling practicum counselors NOT scoring at level Six (6) or Above will NOT be eligible to progress to their next stage of clinical experience.

CACREP (2009) Standards – Section III: Professional Practice:

Professional practice, which includes practicum and internship, provides for the application of theory and the development of counseling skills under supervision. These experiences will provide opportunities for practicum counselors to counsel clients who represent the ethnic and demographic diversity of their community.

CACREP (2009) Standards – Section III: Professional Practice: Standard F. Practicum counselors must complete supervised practicum experiences that total a minimum of 100 clock hours over a minimum 10-week academic term. Each practicum counselor’s practicum includes all of the following:
1. At least **40 clock hours of direct service with actual clients** that contributes to the development of counseling skills.

2. Weekly interaction that averages of **one (1) hour per week of individual** and/or triadic supervision throughout the practicum by a program faculty member, a practicum counselor supervisor, or a site supervisor who is working in biweekly consultation with a program faculty member in accordance with the supervision contract.

3. An average of **1 ½ hours per week of group supervision** that is provided on a regular schedule throughout the practicum by a program faculty member or a practicum counselor supervisor.

4. The development of program-appropriate audio/video recordings for use in supervision or live supervision of the practicum counselor’s interactions with clients.

5. Evaluation of the practicum counselor’s counseling performance throughout the practicum, including documentation of a formal evaluation after the practicum counselor completes the practicum.


**Florida Subject Area Competency – Guidance and Counseling Pk-12 (Section 18 [FSAC])** – (1) Knowledge of Counseling; (2) Knowledge of Activities & Programs for Addressing Current Concerns; (5) Knowledge of Consultation, Collaboration, & Coordination; & (6) Knowledge of professional, ethical, and legal considerations.

**Part I (Primary Counseling Skills – CACREP Standards [2009] #5 [Helping Relationships] & #7 [Assessment]) (out of a possible 88 points)**

**Part 2 (Professional Dispositions – CACREP Standards [2009] #1 [Professional Orientation & Ethical Practice] #2 [Social & Cultural Diversity], #3 [Human Growth & Development], & #5 [Helping Relationships]) (out of a possible 80 points)**

**Part 3 (Professional Behaviors – CACREP Standards [2009] #1 [Professional Orientation & Ethical Practice], #3 [Human Growth & Development], & #5 [Helping Relationships], #7 [Assessment], & #8 [Research & Program Evaluation]) (out of a possible 80 points)**

**Narrative Feedback from Supervising Instructor**

Please note the counseling practicum counselor’s areas of strength, which you have observed:

Please note the counseling practicum counselor’s areas that warrant improvement, which you have observed:

Please comment on the counseling practicum counselor’s general performance during his/her clinical experience to this point:

*Note. If Supervising Instructor is concerned about the Counseling Practicum counselor’s progress, he or she should complete the Counseling Depth Scale (Young, 2007) to provide additional feedback to the Counseling Practicum Student.*