Community Counseling Training Center

Handbook

MSEd and PhD Counseling Programs
Counseling, Adult, & Higher Education Department
Northern Illinois University
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Introduction

This handbook was written to answer some basic questions regarding the counseling practicum and to establish a set of standards that can be easily read and followed. This handbook addresses the general issues that all practicum sections experience rather than specific operations that each faculty member generates in supervising a specific practicum section. From time to time this handbook will be revised to update information or include new sections. Practicum counselors, instructors, and supervisors 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 in the College of Education, NIU. The mission of the CCTC is to provide comprehensive training for practicum counselors and counseling supervisors in training for both master’s and doctoral practicum counselors by providing high quality, culturally responsive counseling services to NIU practicum counselors, faculty, staff, and community members.

The counseling graduate practicum counselors, who constitute the practicum counselors, 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 practicum counselors. The services offered are designed to be responsive to the needs of the CCTC clients.

Individual, couple, family, and group counseling are available. Play therapy, and parent consultation are also available on a more limited basis. Clients seeking these services receive appropriate help for diverse problems, and practicum 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, the professional staff, and the GAs.

CCTC Administrative Staff

The Clinical Director oversees the functioning of the CCTC. The current Director is Kimberly Hart Phone: 815-753-9308, Office: GH 416-E.

CCTC Professional Staff

The faculty supervisor for each practicum section is the counseling faculty, or adjunct faculty member who serves as practicum supervisor.

The doctoral supervisor(s) are counseling doctoral practicum counselors who have completed or are in the process of taking CAHC 752: Supervision in Counseling. Occasionally, a doctoral supervisor will be in a practicum section and functions under the authority of the faculty supervisor to provide supervision to practicum counselors-in-training.
The practicum counselors are master’s and doctoral level practicum counselors enrolled in the practicum. GAs will collect information and distribute a list of names and phone numbers of practicum classmates within the first few weeks of the semester.

**Graduate Assistants (GAs)**

The GAs in the CCTC act as the GAs, maintain forms, files, and records, and coordinate maintenance and repair of equipment. *Phone: 815-753-9312.* The GAs are not acting as counseling professionals in their roles; although they have access to confidential client records, it is not appropriate for them to discuss clients with practicum counselors or for practicum counselors to disclose session content to the GAs. In practicum matters, the GAs typically receive instructions directly from the faculty supervisor or Clinical Director. Practicum counselors should direct information, such as notification of equipment in need of repair, to their practicum faculty supervisor, who will inform the GAs.

**Prerequisites to Practicum**

**Enrollment Prerequisites**

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

**Liability Insurance**

Each practicum counselor must have on file a signed Proof of Liability Coverage form. In addition, prior to seeing clients in practicum, each practicum counselor must provide the faculty supervisor with a copy of the first page of her/his current professional insurance policy – the page showing the practicum counselor’s name, policy number, and dates of coverage. No practicum counselor will be allowed to counsel without providing this proof of 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](http://www.cphins.com)). Doctoral insurance can be obtained through HPSCO discounted with ACA membership or CPH insurance with ICA membership.

**Criminal Background Check for Counseling**

The Counseling program requires that prior to Practicum and Internship all practicum counselors submit to a criminal background fingerprint check by the Illinois State Police and the Federal Bureau of Investigation (Adam Walsh Child Protection Act) as outlined in the attached NIU Criminal Background Check Information Sheet prior to admission to the master’s or doctoral programs. 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" may be admitted into the counseling program. Northern Illinois University will not accept criminal background check reports from other sources.

**General Practicum Requirements**

1. The client contact requirement for this course is approximately 25 recorded counseling sessions with **individual** clients and 15 hours co-facilitating groups.

2. Individual sessions in the CCTC are 50 minutes and counted as one direct hour. When providing individual counseling at the school site, 35 minutes or more is counted as one direct hour. Less than 35 minutes will be counted as one half of a direct hour.

3. All Master’s practicum counselors must attend the Practicum class for the five hours for which they are assigned. Evening classes meet from 4:30 p.m. – 9:30 p.m. Practicum counselors who are available in the day can be assigned a class from 11:00 a.m. – 4:00 p.m. Practicum counselors must make arrangements with work or home responsibilities to be available during class times.
   - All Doctoral practicum counselors must attend the Practicum class for which they are assigned. Practicum counselors must make arrangements with work or home responsibilities to be available during class times.
   - All Doctoral practicum counselors must provide the CCTC GA’s with 4 hours that you would be available to see clients. You should keep these hours reserved for seeing clients for the entire semester. Maintaining a 4 hour availability allows for a margin of error in obtaining your 25 direct individual client hours.

4. The typical format of CAHC 550 involves 5 consecutive class hours in the CCTC, Room 416 Graham Hall. Three of these hours are devoted to individual counseling and peer observation, with the remaining time spent on preparation/discussion/group supervision.

5. Besides the five class hours, one to one and a half additional hours of individual or triadic, face-to-face supervision outside of class is required. Supervision is held on a different day than the class, so practicum counselors must be prepared to come to campus on a second day of the week to meet for supervision. Practicum counselors who are unable to schedule time for supervision meeting may need to postpone Practicum to a semester when a weekly supervision meeting time convenient for both supervisee and supervisor is able to be scheduled.

6. CAHC 550 practicum counselors are given a detailed orientation of the CCTC. Practicum counselors are required to follow CCTC, professional, and ethical guidelines, which include: (a) proper operation of mechanical equipment, (b) proper attire and behavior, (c) client scheduling, (d) record-keeping, and (e) maintaining client confidentiality. Failure to comply with these guidelines may result in an unsatisfactory grade for practicum and not being approved to advance into internship. The CCTC works to maintain the highest ethical principles and adheres to Health Insurance Portability and Accountability Act (HIPAA).
7. Practicum counselors preparing for school counseling licensure (PEL) are required to find a school where they can obtain at least 16 audio-recorded direct contact hours with practicum counselor clients. Of these 16 hours, the practicum counselor must see at least one client for 4 consecutive sessions. There must be an emergency contact person at this site, who usually is a school practicum counselor but may be an administrator. The emergency contact person is not required to provide supervision but may choose to do so.

8. All practicum counselors must find a site in which they are able to co-facilitate a group for approximately 15 hours with an experienced co-facilitator. 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. All other things being equal, the best option for school counseling practicum counselors is to complete their practicum requirements at the same school where they plan to conduct their internship. It is strongly recommended that these practicum sites be secured several months prior to the semester beginning. A training agreement must be completed and signed by you, the site representative, the group co-facilitator (if different from the site representative), and the practicum supervisor (see appendices E & F).

9. Regardless of the number of hours that have already been completed, all practicum counselors must be working with between one and three clients in the CCTC during the practicum class time for the entirety of the semester.

10. Doctoral practicum counselors must provide the CCTC GA’s with 4 hours that you would be available to see clients. You should keep these hours reserved for seeing clients for the entire semester. Maintaining a 4-hour availability allows for a margin of error in obtaining your 25 direct individual client hours.

**Practicum Counselor’s Rights and Responsibilities**

**Rights**

Practicum counselors have the following rights:
1. To know the criteria for evaluation in the course and to receive progress evaluations from the instructor on a regular, systematic basis.
2. To know the expectations and procedures established by the practicum supervisor.
3. To expect supervision and feedback in the management of cases on both regularly scheduled and case needed bases, as conforms to the ethical standards of ACA and the Association for Practicum counselor Education and Supervision (ACES).
4. To know the procedure for handling emergencies.
5. To ask questions regarding the counseling process and the correct handling of cases.
6. To have the rules and regulations of the CCTC explained fully.

**Responsibilities**

Practicum counselors have the following responsibilities:
1. For prompt, regular attendance in practicum.
2. To provide clients with a quality experience.
3. To be prepared for class and sessions.
4. To request additional supervision as needed.
5. To immediately inform the practicum supervisor of problems with cases or of client emergencies.
6. To compile and maintain complete client records in a timely and professional manner.
7. To follow the ACA Code of Ethics and Standards of Practice.
8. To be aware of legal issues related to counseling, such as confidentiality and privilege, duty to warn, malpractice, and negligence.

Practicum Supervisor’s Rights and Responsibilities

Rights
The practicum supervisor has the following rights:
1. To determine the expectations and requirements of the practicum.
2. To expect the practicum counselor’s regular and punctual attendance in class.
3. To evaluate the practicum counselor’s performance based on the stated criteria of the practicum section in which the practicum counselor is enrolled.
4. To expect the practicum counselor to follow directives when they are given.
5. To provide corrective remediation for practicum 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.
6. To determine the assignment and/or reassignment of cases based on the interface of the practicum counselor’s skill level and the client’s therapeutic needs.

Responsibilities
The practicum supervisor has the following responsibilities:
1. To clearly state expectations, requirements, and grading criteria.
2. To inform practicum counselors of the ethical responsibilities and standards of the profession.
3. To inform practicum counselors of legal issues related to the profession such as confidentiality, duty to warn, minor clients, and malpractice.
4. To ensure that practicum counselors provide adequate disclosure so that clients make informed choices about entering and continuing in therapy.
5. To ensure that case records on each client are complete and present evidence of the adequacy of care a client has received.
6. To schedule supervision with the practicum counselor for each case carried by the practicum counselor on the basis of a careful assessment of the needs of both the supervisee and the client. The instructor and supervisor must be familiar with each client case.
7. To provide feedback to each practicum counselor regarding their skill development and course grade at regular intervals during the semester, at minimum at midterm and end of term.
8. To inform the practicum 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.
9. To establish and support the role of the doctoral supervisor.
10. The practicum supervisor has the responsibility 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).

**Counseling Practicum Goals and Objectives**

CAHC 550/750, Practicum in Counseling, has been developed to provide practicum counselors with closely supervised counseling experiences to facilitate further development as a professional practicum counselor. Practicum, as the word implies, is about practical experiences. This course actually combines three essential elements in practicum counselor training, counseling skills, peer group collaboration skills, and essential professional development/work place skills. The practicum should prepare practicum counselors for successful development and preparation for practicum counselors’ next field-based experiences. The practicum experience requires dedication, a willingness to risk new behaviors and experiment with new methods, assumption of personal responsibility, and a major commitment of emotional and physical energy.

Practicum counselor education literature defines three areas of mastery for practicum counselors in training: counseling skills, cognitive development and professional maturity. During this practicum 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 anticipated that through the practicum experience each practicum counselor will develop and demonstrate an integration of several conceptual and behavioral skills: basic counseling skills (such as reflective responses), use of a guiding theory of counseling, session and case management, and ethical and legal conduct. Emphasis on various objectives of practicum may vary from professor to professor. However, the following list, taken in part from Engels and Dameron (1990), constitutes the generally acceptable objectives of this experience. Faculty members are encouraged to discuss their additional individual objectives for practicum.

**Counseling Objectives**

It is anticipated that through the practicum experience each practicum counselor will develop and demonstrate an integration of several conceptual and behavioral skills: basic counseling skills (such as reflective responses), use of a guiding theory of counseling, session and case management, and ethical and legal conduct. Additional objectives are specified below.

**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.

CACREP Objectives

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| 1. Knows the major counseling theories, including their strengths and weaknesses, theoretical bases for efficacy, applicability to multicultural populations, and ethical/legal considerations. | IV. G. 1     | • Individual/triadic supervision  
• professional background and goals statement |
| 2. Understands various methods for evaluating counseling effectiveness.          | IV. G. 2     | • Individual/triadic supervision                                                  |
| 3. Understands the research base for existing counseling theories.              | IV. G. 3     | • Final project                                                                   |
| 4. Understands the effectiveness of models and treatment strategies of crises, disasters, and other trauma-causing events. | IV. G. 4     | • Individual/triadic supervision                                                  |
| 5. Demonstrates a personal theoretical counseling orientation that is based on a critical review of existing counseling theories. | IV. H. 1     | • Individual/triadic supervision                                                  |
| 6. Demonstrates effective application of multiple counseling theories.          | IV. H. 2     | • Individual/triadic supervision                                                  |
| 7. Demonstrates an understanding of case conceptualization and effective interventions across diverse populations and settings. | IV. H. 3     | • Case Documentation                                                             |
Co-Leading Group(s)

Practicum counselors must co-lead at least one group during practicum. The group may be co-led with a doctoral practicum counselor, a faculty member, or another practicum counselor under close faculty supervision on campus, with a professional practicum counselor in the field, or with a certified school practicum counselor. At the beginning of the semester, you must submit a Practicum Group Plan to your instructor (see Appendix H) along with the Site Training Agreement if you are co-facilitating a group at a school or agency (see Appendices E & F). All practicum counselors must accrue at least 15 hours of group experience before moving on to internship (Doctoral practicum counselors may use their facilitation of CAHC 540 process groups completed during or adjacent semesters to enrollment in practicum). At the end of the semester, the co-facilitator (or faculty supervisor if the co-facilitator is another practicum counselor) of the group must submit a Group Counseling Feedback Report (see Appendix S).

The first semester that Doctoral practicum counselor co-facilitates a CAHC 540 group, it counts towards practicum hours; the second semester and any additional semesters count towards internship hours.

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 a play therapy approach with children.

Evaluation

Criteria for evaluation of the practicum counselor include:
1. Adherence to General CCTC Procedures and Protocol outlined in this handbook
2. Regular attendance
3. Maintenance of complete and accurate case records
4. Professional behavior (including being on time, being prepared, and appropriate attire)
5. Case presentation
6. Participation in observation, feedback, and consultation sessions
7. Attainment of acceptable levels of the performance guidelines detailed in the Counseling Competency Scale (Appendix L)
8. Completion of the minimum required number of hours (100 total, 25 individual direct, 15 group direct, 60 indirect). Please note that school counseling practicum counselors need to provide 16 hours of individual counseling at a school site, which is included in the required 25 individual direct hours.

Each faculty member who directs a practicum assigns a weighting system to these criteria and may require additional work. At a minimum, each practicum counselor will be evaluated at mid-semester using the Modified Counseling Competency Scale (Appendix L). Some faculty members also use other feedback and evaluation instruments. Practicum counselors should feel free to ask questions regarding the evaluation criteria that their faculty supervisor is using.

Supervision

The supervision relationship is one in which the supervisor assumes some responsibility for the practicum counselor’s behavior with the client. Supervision is an integral part of a practicum counselor’s professional growth and development. A supervisory relationship is advisable even after graduation. The benefits of supervision are: (1) to obtain feedback regarding specific skills, (2) to develop strategies for using and/or improving in these areas, (3) to provide structure for examining the dynamics of cases, (4) to develop a consistent model of counseling practice, and (5) to have clinical expertise available for cases that are beyond the practicum counselor’s current level of counseling expertise. It is assumed that in most cases the beginning practicum counselor has little or no experience with clients and should be guided to develop both counseling experience and professional habits.
The role of the supervisee is logistic as well as experiential. The supervisee is required to bring their video recording from the CCTC to supervision each week. Not having a recording in a clinical class is equivalent to not having a paper to turn in during a lecture class. The experiential role of the supervisee is to come to supervision open, willing to explore some personal traits that may affect your counseling style, and collaborative.

Practicum counselors will attend one – two hours of Individual (1 practicum counselor with 1 supervisor) or Triadic Supervision (2 practicum counselors with 1 supervisor) per week with their supervisor outside of the practicum class time. Generally, this supervision period should be scheduled for a different day than the practicum counselor’s practicum section. For example, individuals who are in practicum Monday night cannot have supervision earlier in the day on Monday. Practicum counselors will also attend one and a half hours of group supervision per week during practicum. Practicum counselors who see clients in the Community Counseling Training Center outside of practicum class time are required to schedule those clients during arranged supervised times, which must be set up through the practicum counselor’s supervisor. Once these sessions have been set up, the practicum counselor 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.

**Expectations and Procedures**

Several routine tasks are the responsibility of the practicum counselor, often in collaboration with the practicum counselor’s supervisor or the CCTC GA(s). These responsibilities and expectations include general ground rules, assignment of clients, initial session procedures, record keeping, scheduling binders, recording sessions, co-leading a group, respect for confidentiality, professional behavior, and preparation for sessions. This section covers each of these expectations and describes the forms used.

**General Ground Rules**

Certain basic ground rules must be adhered to in the practicum setting:

1. Appointments with clients must be kept promptly. In the event of illness, emergency, or if NIU closes (i.e. bad weather), the practicum counselor must notify the CCTC GA(s) to cancel the appointment. If neither GA(s) is available then call the Clinical Director. Be sure to inform the CCTC GA(s) 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).

2. The practicum supervisor and supervisor must be notified immediately if a client is threatening harm to self or others. This way an appropriate course of action can be determined immediately.

3. The practicum counselor has a responsibility to seek supervisory help with cases in which the practicum counselor questions his/her own effectiveness. For instance, the practicum counselor may recognize that one or more factors such as the client’s presenting problem, values, race, or sexual orientation is impacting the practicum counselor’s ability to be
helpful; in this case the practicum counselor should request supervision to address this concern.

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

In addition to the ground rules stated above, each practicum group should develop ground rules about how feedback is given, the role and limits of peer consultation, and the role of the doctoral supervisor. Ground rules allow everyone to know the limits of their authority and responsibility and establish a reasonable chain of command for difficult cases. Appendix I contains the Peer Supervisor Rating Scale, a form to use when observing other practicum counselors during their counseling sessions. Also in Appendix J is a document entitled Feedback, a list of suggestions to use when giving feedback to peers.

Assignment of Clients

The CCTC practicum supervisors make preliminary assignments of clients to practicum counselors after receiving the intake form(s). The client fills out the paperwork and it is collected by the practicum counselor, supervisor, or CCTC GA(s). The practicum counselor and supervisor(s) confer on a final assignment before and/or after the initial session. The final assignment includes several options:

1. The client continuing with the initial practicum counselor.
2. The client being assigned to another practicum counselor within the same practicum class.
3. The client being assigned to a practicum counselor in another practicum class.
4. The client being referred to another NIU mental health facility such as the Counseling and Practicum counselor Development Center, Psychological Services, or the Family Center of NIU.
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 an off-campus mental health or other health provider.

Whereas practicum counselors are ethically obligated to offer only services for which they are competent, practicum counselors-in-training need to assume cases that provide them the opportunity to become competent. The counseling faculty assumes that practicum counselors who have completed prerequisites to practicum are prepared to become competent to work with, and may accept clients from, the population of adolescents and adults seeking individual or group counseling. In addition, practicum counselors who have completed coursework pertaining to specific populations, such as Marriage and Family Therapy or Counseling with Children are prepared to become competent to work with, and may accept clients from, those populations. CCTC practicum counselors are urged to consult with a supervisor if they believe a particular client’s case exceeds their current competence or preparedness to become competent.

Once a client is assigned to a practicum counselor, they continue until one of the following conditions occurs:
1. Mutual termination. Client and practicum counselor agree to terminate because client has achieved agreed upon goals.

2. Client or practicum counselor initiated termination: The client or practicum counselor terminates counseling without the client having achieved agreed-upon counseling goals. The practicum counselor provides for termination issues to be addressed in session.
   a. If the client attends the termination session, the practicum counselor provides the client with referral options whether or not the client indicates the intention to pursue the options.
   b. If the client does not attend the termination session, the practicum counselor is not obligated to provide the client with referral options unless a special condition exits such as client suicide risk.

3. Passive termination: The client is absent, whether by notification or by no-show, for two consecutive sessions. In this case, the practicum counselor notifies the practicum supervisor. Unless practicum counselor and supervisor decide otherwise, the supervisor asks the CCTC GA(s) to place the client’s name at the bottom of the CCTC waiting list and assigns the practicum counselor a new client. In this occurrence, it is the practicum counselor’s responsibility to send out pre-termination and termination letters as appropriate.

Practicum counselors must document in case notes the steps taken in the disposition of a case.

**Initial Session**

1. The client should have filled out the Intake Form prior to the initial session. It is the practicum counselor’s responsibility to check the client’s file folder and/or the scheduling binder to make sure all of the appropriate forms are in the folder and filled out completely. Incomplete forms should be brought in the counseling room on the initial session for the practicum counselor to complete with the client. **All paperwork should be removed from the scheduling binder and added to the appropriate client’s file.**

2. Before counseling begins, the practicum counselor provides the client with the practicum counselor’s Professional Disclosure Statement (Appendix P). After answering any questions the client may have, the practicum counselor and client each sign two (2) copies of the form. The practicum counselor keeps one in the client’s file and the client keeps one for future reference.

3. The practicum counselor then initiates a discussion with the client of the purpose of the initial session of mutual expectations about the counseling process. This discussion is followed by the “working phase” of the session, in which the client’s specific issues/concerns are addressed.

4. During the last few minutes of the initial session, the practicum counselor and client each decide whether they will continue to work together. If a referral is deemed appropriate by either client or practicum counselor, the practicum counselor provides the client with referral sources (Counseling Resources, Appendix Q). If they decide to continue, the practicum counselor provides the client with a CCTC appointment card with the practicum counselor’s name, the date, day, and time of the next counseling session. These cards can be found on the front of the CCTC GA(s)’s desk in the main lobby.

5. For clients continuing at or returning to the CCTC, initial session procedures are modified as deemed appropriate by practicum counselor and supervisor(s).
6. In the case of a minor client, the practicum counselor provides the initial information to the parent as well as to the client if the client is sufficiently cognitively developed to comprehend the information. If the intake form so indicates, the practicum counselor must have a photocopy of the pages of a legal document (such as divorce decree) specifying that the parent or guardian signing the Informed Consent included in each practicum counselors Professional Disclosure Statement (Appendix P) is the managing conservator (not just the possessory conservator). The practicum counselor staples this copy to the Informed Consent form prior to adding it to the client’s file.

7. Practicum counselor should seek feedback from clients after each session using the Weekly Client Report of Counseling Session form (Appendix T).

8. During or after the initial session, the client 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 educational purpose of the clinic. The practicum counselor cannot guarantee that the clients’ sessions will not be observed.

Record Keeping
1. Upon assignment of a case, the practicum counselor creates a client file. **THIS FILE MUST NOT LEAVE THE CCTC UNDER ANY CIRCUMSTANCES.**

2. Each client file must be labeled appropriately: Last Name, First Name. A year sticker should also be attached, being sure not to cover any previous year stickers. Each client’s file MUST contain the following forms accurately completed and appropriately signed:

**Left Side (in order of top to bottom):**
A. Adult/Child Intake Form
B. Professional Disclosure Consent
C. Consent to Record Counseling Session Form
D. Preliminary Intake or Returning Client Form

**Right Side (in date order from top to bottom):**
A. CCTC Satisfaction Survey
B. Termination Assessments
C. If applicable:
   a. Copy of Release of Information form
   b. Copy of Termination Letter
   c. Copy of Pre-Termination Letter
   d. Copy of any information the CCTC/Practicum counselor releases
   e. Copy of Assessment/Assessment results
      (including intake assessments; CCAPS-62 or SCL-90R)
   f. Copy or photo of Creative Arts
D. Intake Assessments

The following forms (also mentioned above) are included as needed. You have the responsibility of making sure these forms are in the file when appropriate, accurately completed and appropriately signed:
1. Authorization for Disclosure of Mental Health Information form is:
   a. 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
   b. 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 the 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.
2. Permission to Use Counseling Recording for Educational Purposes (Appendix V) – completed whenever a practicum counselor wishes to contribute an example of model or “blooper” counseling to the Counseling CCTC clinical collection.
3. Any further documentation deemed appropriate by the faculty supervisor.
4. When a CAHC 211 or CAHC 400 practicum counselor completes the counseling requirement, the practicum counselor provides the client with a completed Counseling Confirmation Slip at the end of the last required session.
5. Family Counseling. All information in family counseling and sibling group therapy is kept in one file, including, a separate Intake Summary Report (when applicable), Practicum counselors are responsible for noting in a client’s file any change in the configuration of family members receiving counseling at the NIU Counseling CCTC. If a group of two or more individuals attends counseling sessions and then decide that only one individual will come, a separate file must be created for the individual client. Also, if individuals from within a group of two or more clients want to also attend individual sessions, they must do so with a different practicum counselor in a different practicum section.

**Scheduling Binder**

The CCTC uses a room scheduling binder for the purposes of reserving rooms. Practicum counselors and all other individuals who use the CCTC are required to use the room scheduling binders to reserve rooms for counseling. Also, there are practicum scheduling binders for each section of practicum, labeled by the day and time of the section. There are several different sections within each of the scheduling binders. Each is described below with some directions on the purpose and use of each:

**Client Schedule Form:**

This form is to be filled out by the practicum supervisor, practicum counselors, and the CCTC GA(s). At the end of each practicum session the practicum counselors must write down the full names of those clients who will be there the following week (on the form with the following week’s date). Also, practicum counselors should indicate on the current week’s form what the session status was using the key at the bottom of the form. The GA(s) will then use this form when scheduling new clients. Once they have scheduled someone new and recorded their initials on the client request form, they will write down the new client’s name and phone number on the schedule form. They will also indicate whether or not they have given the new clients a reminder call the day before their session on this form.
The practicum supervisor uses the new client request section – top left – to communicate with GA’s about how many new clients they would like scheduled for the following week. Once the practicum supervisor has filled-out this section, GA’s use it to start scheduling new clients.

If any of the practicum counselors are currently teaching 211 – their students coming in for counseling/extra credit CANNOT be placed in their section – they must be scheduled for an appointment time in another section to avoid any potential conflicts.

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 “Permission to Participate and Confidentiality” section of the Professional Disclosure Statement. Practicum counselors MAY NOT release information TO ANYONE outside the CCTC staff without permission from the faculty supervisor or Clinical Director. Before photocopied records are released, the Release of Information form must be completed and added to the client file.

2. A secure place for files is provided in the CCTC, located in the back room; all files must be kept there. Practicum 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, client’s first name only or initials are indicated on a completed form until the practicum counselor is placing the form in the client’s file, at which time client’s complete name is entered on the form.

3. Practicum counselors are expected to video record each counseling session for review, for use during supervision with faculty and doctoral supervisors, and for review by and feedback from peers. These recordings must be kept secure to protect the client’s confidentiality. Recordings labeled in a way that reveals client’s identity or left in the open where others have access to them violate the client’s 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, a Permission to Record for Educational Purposes form is completed, signed, and retained in the client’s file. In some cases, potential internship sites request to see a videotape of the applicant’s work. In such cases, the practicum counselor may obtain a client’s permission to use a session videotape by having the client complete a form. With the exception of these cases, all recording of counseling session are destroyed by the practicum counselor at the end of practicum.

4. Practicum counselors should refrain from talking about clients while in the hallways or any other non-secure area of the CCTC. Practicum counselors should consult with colleagues or instructors in the practicum group/conference room, the back/computer room, in the supervision room, or in a closed, private place.

5. Under certain circumstances, the practicum counselor is required to contact the client. These include reminding of an upcoming appointment or if the client has not arrived within 15 minutes of the scheduled appointment time. The intake form contains an item addressing
whether messages may be left on a client’s answering machine or with a third party. The practicum counselor’s requirement to contact the client is waived if the client has requested not to be contacted. The practicum counselor may leave a message ONLY when the intake form clearly states that the client has given permission for messages to be left.

6. Practicum counselors are prohibited from accessing closed files. Any practicum counselor who wishes to see her/his counseling file should contact the faculty supervisor or the Clinical Director.

7. A practicum counselor in possession of client-related information and/or materials should handle them with the same respect as if they were confidential materials about the practicum counselor her/himself.

**HIPAA**

The Health Insurance Portability and Accountability Act 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. The following clinic 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. Each client must receive the Notice of Privacy and Practice and Informed Consent form. The practicum counselor should review this form with the client due to its length and breadth.
2. Each client must sign a Confirmation of Receipt of Privacy and Informed Consent form. This form must be filed in the client’s file.
3. The Notice of Privacy Practice and Informed Consent must be displayed in the waiting room of the CCTC.
4. Client information cannot be electronically transacted. This means the client information cannot be transferred by computer (e-mail) to another party or to the client.
5. HIPAA also affects the client filing system. On the left side of the client’s file, the practicum 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.
6. Confidentiality must be strictly guarded which includes conversations on phones, conversations in the hallway, and transferring of client information by mail. If you have a question regarding confidentiality, always make the decision that ensures confidentiality until you consult with your supervisor or the Clinical Director.
7. Any practicum counselor who does not adhere to confidentiality procedures at the clinic will be reviewed for program continuation, and could risk program termination.

**Computers**

1. The computers and laptops in the CCTC resource room 416-H and the computer in room 416-G 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.

2. The computer on the front desk of the CCTC is for CCTC GA(s) ONLY. Confidential client information may not be worked on or saved to this computer in any manner.

**Professional Behavior**

Behavior – A wide range of actions come under this category. CCTC practicum counselors are expected to maintain a professional and responsible demeanor including appropriate professional dress (no blue jeans, no low-cut shirts, and no cleavage displayed), good grooming, and courtesy. Any perfume, cologne, etc. should be used sparingly. Some of the clients may be allergic or can be adversely affected by strong fragrances. Practicum 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, and report any malfunctioning equipment to the faculty supervisor. Some procedures may differ from one practicum to another. Ask questions and observe the behavior of your supervisors and peers.

1. Professional Organizations – It is strongly recommended that, at this stage of professional growth, practicum 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 practicum 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.

2. Professional Development – The practicum is a time to continue professional reading. Practicum counselors are urged to select readings on topics related to current client’s counseling issues and goals and/or the practicum counselor’s guiding theory. Some faculty members require books and readings for the practicum. 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.

**Preparation for Sessions**

The practicum counselor comes to practicum prepared for each session keeping in mind the faculty supervisor’s specific expectations for case preparation. A practicum counselor significantly enhances preparation for a counseling session by viewing the recording of the previous session. The practicum counselor who needs help in planning for a session should talk to the faculty or doctoral supervisor sufficiently ahead of the session to allow for a well-formulated plan.

**Consultation**

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

Included in this category are:

a. The client who is experiencing such extreme emotionality that the client cannot function enough to care for her/his basic needs, or who is psychotic, severely anxious, or extremely depressed.

b. The client who is presenting with suicidal ideation, and consequently, there is immediate danger to the individual.

c. The client who is 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).

d. The client who reports or implies abuse or neglect of a child, an elderly person, or a person with a disability.

e. The client who is taking substances or medications that appear to have an adverse effect on emotions, or the client appears to have toxic reactions.

f. The client who is taking psychotropic medicines and is not under the direct supervision of a physician.

g. The client who has been taking psychotropic medicines and is considering discontinuing or has discontinued the use of these drugs without the physician’s approval.

2. In the case of potential suicide or harm to others, the practicum counselor should consult the Emergency Procedures packet (see Appendix N) and may consider using as part of the intervention a Safety Plan with the Client (see Appendix O). As appropriate and with supervision consultation, the practicum counselor may administer optional assessment instruments. At the CCTC these include the Beck Depression Inventory (BDI), the Beck Scale for Suicide Ideation (BSS), and the Substance Abuse Subtle Screening Inventory (SASSI).

3. The practicum counselor MUST consult with the faculty supervisor or the Clinical Director for information concerning referral sources and MUST have the consent of one of these counseling professionals before initiating any action. The University Health Services are for current practicum counselors only. A private practitioner may be needed in the event that a client is not a University practicum counselor.

**Referral of Clients**

1. Referral of a case is in order when the client’s problem(s) and/or needs do not seem appropriate or amenable to the services provided in the CCTC. Referral may also be appropriate when it is the ethical and legal responsibility of the CCTC staff to report specific information.

2. A list of additional counseling resources/referral sources in DeKalb can be found in the practicum/group/conference room in the shelving unit with all of the CCTC paperwork.

3. Referrals may be made to a private physician, a psychiatrist, Psychological Services (if the client is an NIU practicum counselor), The Family Center of NIU (only for NIU practicum
counselors), 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 a client. Referral should be made with the advice of a faculty supervisor and documented appropriately.

**Crisis/Emergencies**

1. If a practicum counselor determines that a client is showing potential to require emergency services between counseling sessions, the practicum counselor re-supplies the client with the Counseling Resources in DeKalb handout (having already supplied the client with this form during the Intake Session).

2. If a practicum counselor becomes aware that a client emergency exists, whether the client is in person or on the phone, the practicum counselor immediately informs a counseling professional: the faculty supervisor, the Clinical Director, or any faculty member who serves in a supervisory capacity. The counseling professional determines the course of action.

   If an emergency exists the counseling professional considers these options:
   a) For an emergency occurring on the NIU campus, call the NIU Police Department at 815-753-1212.
   b) For an emergency occurring off the NIU campus, call the Ben Gordon Center Response Line at 866-242-0111 or 911.

3. For crises/emergencies occurring at the CCTC, please discuss with the practicum supervisor, the policies and procedures of our CCTC (see Appendix L)

4. Emergencies are, in most instances, considered properly referred when the client is:
   a) In the custody of a family member who takes responsibility for the client, or
   b) In the custody of a Licensed Professional Practicum counselor, Psychologist, or M.D. who takes responsibility for the client, or
   c) In the custody of police.

**General CCTC Procedures and Protocol**

**Arriving for Practicum**

When you arrive for practicum, especially if CCTC GA(s) are not present, you (and your practicum supervisor/supervisor) are responsible for the following list of tasks:

- Doors (to Counseling Rooms and Observation Rooms) need to be unlocked
  - Counseling Room light should be turned on, door left ajar
  - Observation Room lights should be kept off, door closed
- Hallway lights should be turned OFF (otherwise you can see people in the observation room from the counseling room)
- Dry-erase boards must be clean
- Noise machines should be turned on (preferably on the HIGH setting)
- Music should be playing (CD player is on desk in Lobby)
- Appointment binder should be brought into conference room (stored in top left drawer of front desk)
Clients need to be greeted at arrival (and provided with clipboard packet and pen to fill out paperwork if it is their first session)

Please arrive for practicum on time and try to get here early if possible. 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.

Counseling Sessions

- Prior to ALL of your sessions, check the counseling room you will be using
  - 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, ask the GA(s) to find you one (or if there is no GA(s) here – check the cupboards in the back/computer room)
  - 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 (leave the room as you found it – clean dry-erase board, 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
- Practicum counselors-in-training are responsible for recording their sessions – make sure your flash-drive is plugged in correctly before your sessions start

The Lobby

- CCTC GA(s) will not always be present for your entire practicum. Please help make sure the clients feel welcome. See that new clients get a clipboard with the appropriate paperwork, make sure fellow practicum counselors know when their client has arrived, etc.
  - If there are no clipboards with client forms on them, there are additional copies (all clipped together) in the bottom left-hand drawer of the desk in the folder labeled
    - Adult Intake Form [1 copy]
    - Consumer Rights and Responsibilities (Yellow) [2 copies – one for client, one for practicum counselor]
    - CCAPS Assessment
  - If there are no clipboard packets in the desk drawer, you will have to assemble them yourself. All of the necessary forms are in the conference room in the filing system.
- DO NOT leave any client paperwork in the lobby, even for a minute. This includes anything with any information about a client or a potential client.
- Make sure when your section finishes for the day that the appointment book is put back where it belongs - in the top left hand drawer of the desk and out of sight. Please try to keep the binders in order as this makes it easier for everyone.
- If you notice that the CD player is not playing during practicum time, please press play to start it back up. Please check the bookshelf next to the main desk in the lobby or ask the CCTC GA(s) if you want a different CD as we have several available.
- If there is no CCTC GA(s) present or you notice the sound machines are not on DURING practicum time (when clients are being seen), please turn them on. There is a switch on the side of each one that you can use to turn them on Low or High. It doesn’t really matter which
setting you put them on as long as you turn them on. Generally turn them on to High as to block out more noise.

Rescheduling Clients

- After your first session with a new client, you are responsible for scheduling the client in your Titanium schedule. Please ask the CCTC GA(s) or your supervisor if you have any questions.
- It is also your responsibility to confirm each client’s appointment for the following week with the client BEFORE they leave the session (if your client will be back for an appointment the following week – same day, same time). Once you have seen a client, it is no longer the CCTC GA(s)’s job to confirm their appointments. There are appointment cards on the front desk if you would like to make one out for your client.
- Please double check to make sure you write your clients in for the appropriate time and day.
- The CCTC GA(s) will also mark cancellations and rescheduled appointments in Titanium.

The Phone

- If no CCTC GA(s) is present, feel free to answer the phone when it rings. It could be a client calling for someone in your practicum section.
- If the phone call is not for someone in your practicum, please take a detailed message, including the person’s phone number. *Please be sure that the phone number the individual gives you is number that someone could leave a message on.* Record the details of the message in the Message Log (kept on the front desk) [this includes the caller’s phone number, day and time they called, their name, and a detailed message]. Please inform the CCTC GA(s) when they arrive or leave a post-it note on the desk for them.
- DO NOT schedule first-time clients or any clients that are not your own. If a potential client calls, take a message. The CCTC GA(s) will return the call and set up an appointment as necessary.

Voicemail

- If no CCTC GA(s) are present during your CCTC period, feel free to check the voicemail. If the red light on the machine is blinking, this means there is a new message waiting. Clients often leave messages for their practicum counselors wanting to cancel or reschedule. The instructions are on the clipboard with “Message Log” written on it. PLEASE DO NOT DELETE ANY MESSAGES that are not for you. The CCTC GA(s) will take care of remaining messages.
- If the message is for you or someone in your practicum: Please inform the practicum counselor of the message so that they are aware, especially since they may wish to call the client back to get more information.
- If the message is NOT for you or someone in your practicum: Please fill in the appropriate information in the message log, including the client’s phone number, name, when they called, and a brief description of the message. Please try to inform the CCTC GA(s) (even just leaving a post-it note on the desk) so that we can return calls as soon as possible.

Location of the Keys

- The keys to the filing cabinet are kept in the middle drawer of the main desk. Please only use the keys as needed and replace them 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 front desk middle drawer.

- The GA and your professor have the keys to the CCTC and to the file room.

**Forms**

- Copies of all forms are located in the conference room (416-I) on the back wall in the filing system. They are all labeled. If you need a form, check in the appropriate slot or ask the CCTC GA(s) for assistance. **If you notice that a certain form is running low, please inform the CCTC GA(s) ASAP.** Please do not wait until you use the last form up, as we have to send copies out to be made elsewhere on campus and this can often take up to a week. Please see Appendix A for a complete description of forms as well as the required order of forms within client folders.

- Extra clipboard packets (the intake packet and 2 copies of the rights and responsibilities form) can be found in the upper left-hand drawer of the desk in the folder labeled “Clipboard Packets.” If you notice the clipboards on the desk are running low, please take a moment to refill them. Paperclips can be put in the basket on the front desk. If you notice the file folder is running low, please inform the CCTC GA(s), although they check this folder frequently.
  - For minor clients: exchange adult intake for child intake and remove CCAPS-62
  - For community clients: exchange CCAPS-62 for SCL-90R

**Client Files**

- Client files for your practicum are located in the 2nd drawer down (closer to top) of the 5-drawer filing cabinet. A section will be created for your practicum section, and inside this section, there will be a folder for you. Your client files will go inside of YOUR folder, in alphabetical order. You may create a folder for yourself (NOT for clients – this is typically used to hold copies of practicum counselor insurance, professional disclosure statements, etc.) and place it in the appropriate place (check with the CCTC GA(s)). Any practicum counselors who are not seeing clients within a practicum section will have folders that are in the section of whoever is supervising them.

- Blank client file folders can be found in the 5-drawer filing cabinet in the second drawer down from the top. Please inform CCTC GA(s) if this pile of folders is running low.

- When creating a new folder for a client, please put a label on the folder with the client’s name (Last Name, First Name) and also put a year sticker on. Please do not cover up previous year stickers. Many clients come to the CCTC for many years and it is essential that their files can be found easily. Each year sticker must be visible. The files are all kept for seven years (unless the client is a minor) and then shredded. Inside the folder, please keep all client documents (including the 211 recruitment forms) in them. You must keep our client folders in alphabetical order by last name. Also, please keep CCTC clients and non-CCTC (school, group, etc.) clients files separately. Please ask for additional folders if necessary. Any minor clients should have a colored file folder.

- 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 filing system in the conference room.

- Please see Appendix A for a complete description of forms as well as the required order of forms within client folders.
Mailing Termination Letters

- When a client misses one session without calling to cancel or reschedule, the practicum counselor **must** send them the first pre-termination form. Fill out all necessary information and get an envelope from the file room (they are located in the top drawer of the 5-drawer file cabinet). Fill out the address and give it to the CCTC GA(s) (or leave on desk) for the CCTC GA(s) to put in outgoing mail. You do not need to put a stamp on the envelope.

- When a client misses two sessions without calling to cancel or reschedule, you **must** send them the termination form (that states that because they have missed two sessions without contacting the CCTC, they are officially terminated). Fill out all necessary information and get an envelope from the file room (they are located in the top drawer of the 5-drawer file cabinet). Fill out the address and give to the CCTC GA(s) (or leave on desk) for the CCTC GA to put in outgoing mail. You do not need to put a stamp on the envelope. If you are in the practicum section on Thursday nights, please try to put the letter in the outgoing mailbox in Graham 427. If you do not, it will not be mailed until at LEAST Monday, and the client likely won’t receive it before their next session.

Recording Counseling

- Whenever possible, please have your flash-drive ready to go in the system and be sure it is recording BEFORE your client arrives. Follow the directions provided in the conference room. If your flash-drive does not appear to light up correctly, then it is not recording. Take it out and start over.

- Make sure the amplifier is on (in the observation rooms) or else you will end up with fifty minutes of silence. Ask your supervisor or the CCTC GA(s) if you need help with this.

- The Landro recording system will create a folder on your flash-drive entitled “LNDRO” when you first use it and subsequent recordings will automatically be saved in this folder EXCEPT for sessions conducted in Room G. Room G automatically saves Landro recordings in MP4 format and creates a separate “Landro Videos” folder on your flash-drive.

- Once you recorded your file on Landro immediately upload the recording to OneDrive. Your supervisor for your section would have created a folder on OneDrive to upload the recordings. After you have uploaded the file, delete the recording off of your flash-drive immediately. This is to help maintain confidentiality of clients.

Meals/Food

- **If it is okay with your practicum supervisor**, you may order food at any time (although you may only eat when not seeing clients). If you order food, **please inform the CCTC GA(s)** (if there is one on duty). If a CCTC GA(s) will be coming in, please leave them a note regarding the food. If you will be seeing a client when the food arrives, supply the CCTC GA(s) with the information on what restaurant is delivering and the money needed to pay the delivery person (**please specify how much you want to tip or how much money you want back, etc.**).
  - If you decide you would like to order food, **all orders must be placed during scheduled practicum breaks. You may not, under any circumstance, delay client session start time because you are ordering or making food.** Please try to plan orders before coming to practicum and place orders only during break times.

- There is a microwave and a fridge in the file room that is available for your use. As the fridge is not very big, please do not bring a lot of food at a time. Also, please be sure to remove any
food that has spoiled or you will not be eating – prevents a stinky room! 😊 The fridge will be cleaned out once a week, so do not leave ANY food in there longer than this or it will be thrown away! Also, 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 making with a paper towel and place one underneath the food.

Parking Passes
- It is the GA’s responsibility to supply parking passes to approved clients of the CCTC that are community members. Passes may not be given to faculty, staff, or practicum counselors.
- When providing passes:
  - Write the date the pass is for (the date of the session) on the pass line in black permanent marker.
- Record parking pass information (number, date for issued use, and client initials) on parking pass record log attached to envelope in the middle drawer of the CCTC GA(s) reception desk.
- If the appointment is reoccurring, provide the client the pass for the next session with the appropriate date written on the pass and record it for the GA(s).

Supplies
- If you notice we are running low on any supplies (paper, staples, etc.) please notify the CCTC GA(s) ASAP. Please leave a note if no one is around and the CCTC GA(s) can pick up the necessary supplies when they have time. The supplies have to be picked up from another building and they often need to be ordered, which means they may take a while to come in. Please notify the CCTC GA(s) 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 practicum. Also, if you take ANY supplies into the conference room (paper clips, pens, file folders, etc.) PLEASE return them to their proper place as soon as you are finished.
- Most of the supplies you will need can be found in the top drawer of the five-drawer filing cabinet. Here you will find envelopes, staples, paperclips, folder clips/prongs, post-it notes, tacks, pens, pencils, and dry-erase markers. If you cannot find what you are looking for here, try the cabinets on the left side of the back/computer room (closest to the filing cabinet, not above the computers). Extra supplies are kept there as well as batteries, paper towels, cups, and cleaning supplies. If you still can’t find what you’re looking for ask one of the CCTC GA(s) to help you find what you need.

General Computer/Equipment Use
- The computers in the file room are available for your use at any time when the CCTC is open. Please be courteous to others that may need the computers, as the CCTC GA(s), research assistants, practicum counselors, supervisors, and/or staff and faculty all have access to these computers and may need to use them. The printer and fax/copy machine are NOT for personal use at ANY time. There is a computer lab in the basement of this building where you can print for free. The CCTC GA(s) has a right to question what you are printing at any time. Please be aware of what you are printing and be sure to print documents only as needed for CCTC use.
  - We strongly recommend and encourage you to print several copies of your Professional Disclosure Statement at the start of the semester in the Computer Lab in the basement of Graham Hall and keep them in your file folder in the filing cabinet.

Last Updated 1/12/2017
This saves the CCTC paper and keeps you from having to scramble to print a copy out before each session you have with a new client.

- If you are interested in using the computers, you must sign up in the reservation binder located in the top left-hand drawer of the reception desk. Whoever has signed up in the reservation binder has priority for that computer and reserves the right to “kick others off” (nicely of course! 😊) if they are using the computer that person signed up for.
- Please log in and sign off the computer each time you use it, and save things ONLY to your z-drive. If you need assistance, please ask one of the CCTC GA(s) or your supervisor. You should never save anything to the actual computer, only to your z-drive or a flash-drive.
- If you are going to be listening to anything out loud from the computers, you must use headphones. See below for the policy on headphone use with the Landro system.

**Landro**

- When buying a flash-drive to use with the recording system in the CCTC, please remember that one session hour equates to about 1 GB. It is recommended that you buy a flash-drive that is at least 8 GB to avoid filling your flash-drive up too quickly. Also, please note that you should purchase 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. Please come into the CCTC and try your flash-drive and the recording system prior to your first session.
- Landro is the recording system that you will be using to view your sessions. When using the Landro computers in the file room, you must have headphones to listen to the session. Using Landro without headphones is a breach of client confidentiality. Any headphones work – including iPod headphones. Please bring them every time you come to listen to your tapes. You are welcome to keep them in the CCTC if that is easier for you to remember – just ask the CCTC GA(s) where you should put them. In the past, people have elected to keep them in their file in the filing cabinet. You will not be able to use the headphones from the observation rooms, so please be sure to always bring your headphones.
- Please see Appendix B for more information about Landro usage.

**Intake/Termination Assessments**

**CCAPS-62**

- The Counseling Center Assessment of Psychological Symptoms-62 assessment (CCAPS -62; on pink paper) is given to every college client when they start and end their sessions. Extra CCAPS-62 and CCAPS-34 (on green paper – short form that does not assess family stressors) assessments are located in the conference room with the extra paperwork.
- Once a client has finished the CCAPS-62 please write “Pre” for intake counseling sessions and “Post” for termination on the form in the upper right corner. Make sure that your client has put their name and date on the form. Place the completed form in the manila envelope marked “Completed CCAPS” in plastic organizer on the CCTC GA(s) desk. The CCTC GA(s) will regularly check the folder and score all CCAPS given. Once the CCAPS have been scored, the CCTC GAs will put the CCAP form and score report in your client’s folder in the file cabinets.
SCL-90R

- The Symptom Checklist-90-R (SCL-90R) is an assessment that is given to all community clients (i.e. who are not college practicum counselors). This assessment is administered at a minimum during the initial intake and final session. If your client is a community member rather than a college practicum counselor, please remove the CCAPS from the initial intake packet and replace it with the SCL-90-R. Copies are located in the cabinet in room 416-H. Please familiarize yourself with this assessment. The procedures manual is also located in room 416-H.

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 procedures manual is located in room 416-H.

Final Reminders

- When you leave the CCTC, please be sure everything is left better than you found it! Push in chairs, wipe down tables and white boards, log off computers, turn off music; capture boxes; and noise machines, re-place clipboards on shelf, lock file cabinets and 416-H, make a note for any maintenances or supply needs to CCTC GA(s), etc. We are responsible for keeping the CCTC a welcoming and clean place!

- CCTC GA(s) are not always working during your practicum. If you need assistance with something, speak to your supervisor. If something needs to be addressed by the CCTC GA(s), please leave a sticky note on the desk with all of the information.

- If there is no one present in the main area of the CCTC, the door to the back/computer room where the Client Files are kept MUST be locked, along with the filing cabinet in which the files are stored.

- Assessments: Counselors need to sign-out any assessments used and manuals borrowed overnight, minimize removal of manuals as these are shared

- DSM: The CCTC has two copies of the DSM-V these are not to leave the CCTC for any reason

- THE CCTC GA(s) ARE HERE TO HELP. IF YOU HAVE ANY QUESTIONS, COMMENTS, OR SUGGESTIONS ABOUT THE PROCEDURES IN THE CCTC, PLEASE ASK!
Appendix A: Client File and Form Explanation

This appendix explains how client files are to be organized and brief explanations for each form.

**Client File Organization**

<table>
<thead>
<tr>
<th>LEFT SIDE (FROM TOP TO BOTTOM)</th>
<th>RIGHT SIDE (FROM TOP TO BOTTOM BY DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult/Child Intake Form</td>
<td>CCTC Satisfaction Survey</td>
</tr>
<tr>
<td>Professional Disclosure Consent Form</td>
<td>Termination Assessment</td>
</tr>
<tr>
<td>Consent to Record Counseling (blue)</td>
<td>Release of Information (if applicable)</td>
</tr>
<tr>
<td>Client Request for Services Form</td>
<td>Termination Letter (pink; if applicable)</td>
</tr>
<tr>
<td>New client (white)/Returning client (blue)</td>
<td>Pre-Termination Letter (yellow; if applicable)</td>
</tr>
<tr>
<td></td>
<td>Assessments (if applicable)</td>
</tr>
<tr>
<td></td>
<td>Creative Arts (if applicable)</td>
</tr>
<tr>
<td></td>
<td>Intake Assessments</td>
</tr>
<tr>
<td></td>
<td>CCAPS-NIU student assessment</td>
</tr>
<tr>
<td></td>
<td>SCL90R-community assessment</td>
</tr>
<tr>
<td></td>
<td>CBCL-minor assessment</td>
</tr>
</tbody>
</table>

Description of each form to be included in client file:

**Consent to Record Counseling Sessions** (on blue paper) – This form is reviewed and signed by clients when they first arrive to complete intake processes. If a client does not sign this form, they cannot be recorded and therefore, cannot be seen in this CCTC. Practicum will discuss this process with clients during their first meeting as part of their informed consent disclosure. Practicum counselors and practicum supervisors must also sign this form.

**Adult/Child Intake Form** – This form is filled out by the client upon their initial arrival, or possibly ahead of time if they stop in to the CCTC. This form is 4 pages long 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, topics the client would like to discuss, and several questions for the client to answer about themselves. This form can be found in the conference room, on client clipboards, and must be included in every client file. For minor clients have legal guardians complete the Child Intake Form instead.

**Professional Disclosure Statement** – This form is to be completed by the practicum counselor and attached to each client file. This basically goes over the qualifications, level of experience, supervision, etc. of each practicum counselor. The practicum counselor must go over this information with each client, preferably in their first session with them. This form informs the client that the practicum counselor is in practicum and is being supervised. It also goes over when confidentiality can be broken (danger to self and/or others, abuse, etc.). Again, the
practicum counselor should be sure the client has signed and initialed in ALL places required. This form must be signed by the client, the practicum counselor, and the supervisor. It is recommended the practicum counselor keep extra copies of the completed form in the provided folder in the filing cabinet to make sure the practicum counselor adds a copy to every client file. *To conserve CCTC resources, this document should be printed double-sided and these copies should be printed on one of the NIU Anywhere printers and NOT from CCTC printer in the back room.*

**Client Request for Services Form** – These forms are filled out prior to most clients’ first session. The intake form is the form the GA’s take to CAHC 211 (and other) classes to recruit clients for the CCTC. The Returning Client Form is completed by clients’ at the end of each semester who 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 Counseling CCTC. These forms have contact information, availability, and potential topics of interest for the client to discuss in counseling sessions.

**Counseling Session Progress Notes (DAP Notes)** – These progress notes are completed by the practicum counselor after each session with a client within Titanium. These notes should be completed electronically within Titanium. Online software notes do NOT need to be printed. All sections of the note should be completed and any required data forms.

Included as Applicable:

**Pre-Termination Letter** (on yellow paper) – This letter is completed by the practicum counselor and sent to clients if they miss ONE session without contacting the CCTC. The letter informs the client that if they miss another session without contacting the CCTC, their services will be terminated. This letter is generally not used if the client has a good excuse (family emergency, etc.) or if the client calls ahead of time; however, this is at the practicum counselor and supervisor’s discretion. If you have any questions, please ask. After the practicum counselor fills-out this form, the practicum counselor should get an envelope out of the top drawer of the 5-drawer filing cabinet and address it to the client (whose address should be found in their client file). The practicum counselor must include the client’s ENTIRE address, even if they live in the residence halls. If the address is not filled out correctly for clients who live in the residence halls, it will be returned. Once the practicum counselor has addressed this letter, they can leave it in the front desk or give it one of the GA’s to put in *outgoing mail in GH 427*. You do not need to put a stamp on this letter! For counseling sessions on Thursday evenings, the practicum counselor or practicum supervisor should put the letter in outgoing mail in GH 427 so that it can be mailed on Friday.

**Termination Letter** (on pink paper) – This letter is completed by the practicum counselor and sent to the clients if they miss TWO sessions without contacting the CCTC. This letter informs the client that because they have missed two sessions without contacting the CCTC, their counseling services have been terminated. If a client has been terminated and wants to continue counseling sessions for extra credit, they must start their sessions over (most classes require four) and they may see a different practicum counselor if necessary. 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, after filling this form out, the
practicum counselor should get an envelope out of the top drawer of the 5-drawer filing cabinet and address it to the client (whose address should be found in their client file). The practicum counselor must include the client’s ENTIRE address, even if they live in the residence halls. If the address is not filled out correctly for clients who live in the residence halls, it will be returned. Once the practicum counselor has addressed this letter, they can leave it on the desk or give it one of the GA’s to put in outgoing mail in GH 427. You do not need to put a stamp on this letter! For counseling sessions on Thursday evenings, the practicum counselor or practicum supervisor should put the letter in outgoing mail in GH 427 so that it can be mailed on Friday.

**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).

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).

**Confirmation of Counseling for Course Opportunity Slip** – These slips can be found in the filing system in the conference room. Each client that is seeking counseling for extra credit or a class assignment MUST take one of these slips to their instructor upon completing their counseling sessions. A copy of this slip should be retained in the clients file. 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 practicum counselor should fill it out and give them the form that day. If for some reason the client leaves and the practicum counselor does not give them a slip, have the practicum counselor fill out the slip accordingly and leave it in the client’s file for one of the GA’s to retrieve in case the client comes back for it.

**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.

**Client File Check Forms** (on pink paper for school client files, on green paper for CCTC client files) – This form is an excellent way for the practicum counselor to keep track of forms, be sure everything is included in the files that should be, and forms are organized appropriately. At mid-term and towards the end of each semester, the GA’s will do file checks and will go through each
file to be sure all forms are in place. If forms are missing or disorganized, the practicum counselors are responsible for getting them into the file appropriately. Practicum supervisors are expected to review file organization with practicum counselors. This is a good way for practicum counselors to keep track as the semester progresses and to save time/stress at the end of the semester!

**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.
Appendix B: Recording with Landro

Frequently Asked Questions about How to Record

- How do I plug my flash-drive in to record?
  o Make sure the Capture Box is plugged in and turned on
    ▪ The cord it needs to be plugged into should be on the shelf, directly behind the corresponding Capture Box
    ▪ If no lights are lit up, press and hold the Record button until the lights come on and turn blue
  o Put flash-drive into the Capture Box corresponding to the room you are using
    ▪ The light on the Box will turn red
  o Once the light turns Blue – check to see how many Mode dots are lit up
    ▪ Only want 2 Mode dots lit up - this will save you space on your flash-drive
      - These dots indicate the quality of your video – one is poor quality, three is very high quality but it eats up a lot of space on your flash-drive
    ▪ If more/less than 2 are lit up – press the Mode button (on the bottom of the circle) until only 2 are lit up
  o Once the light is Blue and only 2 mode dots are lit up:
    ▪ Press record (on the top of the circle)
      - Light will turn red – this means it is recording
        o If the Red light is blinking- unplug and start over

- How do I unplug my flash-drive when I’m done recording?
  o Press record – then wait for the light to turn blue
    ▪ DO NOT unplug before light turns from red to blue – you will lose your session if you do!
  o Your session should be saved to your flash-drive and ready for you to watch it!

Frequently Asked Questions about the Landro software

- I just uploaded my video from my flash-drive but it’s not showing up in the list of videos – Where is it?
  o Close and re-open Landro, your video should appear in the Videos List

- Landro is asking if I want to save a Local File of my video – Do I click yes or no?
  o Click No – Clicking Yes will save a copy to the desktop and you don’t need to do this

- What’s the difference between “Save Video” and “Save Play Data”? 
  o Clicking Save Video – will save a copy of your video
  o Clicking Save Play Data – will save a copy of all the Tags you made in an Excel spreadsheet
• How do I save my video with the tags?
  o Have to save it twice
    ▪ FIRST – Save to Hard Drive on computer
      • File – Save Video – Save to Custom Location – My Documents – LNDR
        o Save your file with a different name so you know which one is the original version and which (e.g.: ChristineBR1Coded)
    ▪ SECOND – Save the file you just saved (the one you renamed) to your flash-drive
      • Find the video in the list of videos in Landro – right click – Save Video
        o Save to External Drive (should automatically be set save to your flash-drive)

• What should I name my video?
  o Practicum counselor First Name-Client Initials-Session#

• I made a mistake – how do I delete a Play?
  o Click on the Play you want to delete
  o Press the pause button
  o Click Edit → Delete Play

• What kind of stuff do I need to tag?
  o Ask your Practicum supervisor

Frequently Asked Questions about Watching Videos on TV

• How do I change the counseling room on the TV?
  o Output – 1
  o Input – Room #
  o Press the “Take” button

Frequently Asked Questions about Scheduling Computer Time to Watch Videos

• When can I come in to watch my sessions?
  o Generally speaking, anytime when the CCTC is open
  o Non-CCTC hours – you need to find a professor to let you in
  o If you are here on a Practicum day and a Practicum counselor needs a computer – they get first priority
  o To guarantee computer time – Use the Reservation Binder (kept in the top-left drawer in the front desk) to reserve a time for a specific computer
    ▪ This time will be yours – if you show up and someone else is on the computer you reserved they have to get off and find another computer or another time to come in

Frequently Asked Questions about Purchasing Landro Practicum counselor Edition

• What’s the web address for purchasing Landro?
You must have a credit card to purchase Landro

- How long will my subscription last?
  - After purchasing Landro, you will have the license for the software for 2 years
- How long will it take before I can start using it once I purchase it?
  - Approximately 2 days
    - Landro will send you an email with a link to activate the software on your computer within approximately 48 hours of you purchasing it
- I need additional help purchasing the software or have more questions about purchasing it, who do I talk to?
  - Email Landro’s support desk, they usually respond within 24 hours
    - support@landro.com
- Where can I find a copy of the Landro User’s Guide?
Appendix C: Graduate Assistant & Practicum counselor-in-Training
Responsibilities

Paperwork Responsibilities

<table>
<thead>
<tr>
<th>Graduate Assistant</th>
<th>Practicum counselors-in-Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Request for Services Form</td>
<td>Adult Intake</td>
</tr>
<tr>
<td>Mailing completed and addressed Pre-Termination and Termination Letters</td>
<td>Filling out, putting in an envelope, and addressing Pre-Termination and Termination Letters</td>
</tr>
<tr>
<td>Supplying folders and year stickers</td>
<td>Putting a year sticker on each file, and client’s name (Last Name, First Name) w/o covering sticker</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>Assisting clients with intake 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>Scheduling first clients for first session. Completing first session reminder call has been made</td>
<td>Scheduling weekly client appointments after first session in Titanium Scheduler. Completing client session notes within 48 hours. Confirming with Supervisor when new clients are 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 Initial Appointments</td>
<td>Schedule all Subsequent Appointments with Returning Clients</td>
</tr>
<tr>
<td>Reminder Calls for Initial Appointments</td>
<td>Reminder Calls for all Subsequent Appointments with Returning Clients</td>
</tr>
<tr>
<td>Cancel appointments if there are scheduling mishaps or conflicts</td>
<td>Contacting Graduate Assistant to request appointment cancellation.</td>
</tr>
<tr>
<td>Return all Phone Calls and Messages received in the CCTC</td>
<td>Answer phone and pick up messages on machine (if GA(s) is not at work) and share messages with GA’s</td>
</tr>
</tbody>
</table>
Appendix D: 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 E: Site Training Agreement for Clinical Mental Health

Northern Illinois Counseling Program
CAHC 550 Clinical Mental Health Practicum Training Agreement

Practicum counselor-in-Training’s Role and Responsibilities
- Complete 18 hours of core courses.
- Maintain malpractice insurance and produce a copy of the policy for review.
- Complete background check with NIU police department.
- Complete any backgrounds checks required by your agency.
- Complete the DCFS online mandated reporter training.
- Participate in 3-5 intake sessions.
- Accrue a minimum of 15 hours co-facilitating a psychoeducational or counseling group, or groups, in the clinical setting. (*Co-facilitator must be present at all group sessions*).

Community Agency Role and Responsibilities
- Agency Representative and Group Co-facilitator (if different) must have been in the field for at least two years, and have appropriate license or certification for specialty.
- Serve as an on-site emergency contact should issues of risk, or mandating reporting arise.
- Agree to *co-facilitate, and remain present during the group experiences*.
- Agree to set aside processing time for reviewing group responses and planning for future sessions.
- Permit participation in 3-5 intake sessions (approximately 5 hours).

University Role and Responsibilities:
- Supervisor meets with practicum counselor-in-training for 5 hours a week in live supervision and peer group supervision.
- Supervisor meets with practicum counselor-in-training for 1-2 hours a week in individual or triadic supervision.
- Supervisor reviews the audio recordings with the practicum counselor-in-training.
- Supervisor reviews counseling goals and strategies being used with practicum counselor client.
- Supervisor and Practicum coordinator serve as liaison to school for concerns about any and all issues that may arise during the practicum experience.

Note: All parties will receive a copy of the training agreement and contact information after all signatures are complete.
Appendix F: Site Training Agreement for School Counseling

Northern Illinois Counseling Program
CAHC 550 School Counseling Practicum Training Agreement

Practicum counselor-in-Training’s Role and Responsibilities:

☐ Complete 18 hours of core courses.
☐ Maintain malpractice insurance and produce a copy of the policy for review.
☐ Complete background check with NIU police department.
☐ Complete any backgrounds checks required by your district.
☐ Complete the DCFS online mandated reporter training.
☐ Obtain signed parental consent forms for every client seen in the school setting (see enclosed English and Spanish Versions). Informed consent describes the counseling process, the role of the practicum counselor-in-training, and permission to audio-record counseling sessions.
☐ Accrue a minimum of 16 clock hours of audio-recorded, individual counseling sessions. This would likely be 4-6 clients.
☐ Accrue a minimum of 15 hours co-facilitating a psychoeducational or counseling group, or groups, in the clinical setting. (Co-facilitator must be present at all group sessions).

School Site Role and Responsibilities:

☐ School Representative and Group Co-facilitator (if different) must have been in the field for at least two years, and have appropriate license or certification for specialty.
☐ Select and refer practicum counselors with psychosocial, emotional, behavioral, or developmental needs to the practicum counselor-in-training.
☐ Assist with the distribution of the consent for services form.
☐ Serve as an on-site emergency contact should issues of risk, or mandating reporting arise.
☐ Agree to co-facilitate, and remain present during the group experiences.
☐ Agree to set aside processing time for reviewing group responses and planning for future sessions.
☐ Permit the audio recording of individual sessions.

University Role and Responsibilities:

☐ Supervisor meets with practicum counselor-in-training for 5 hours a week in live supervision and peer group supervision.
☐ Supervisor meets with practicum counselor-in-training for 1-2 hours a week in individual or triadic supervision.
☐ Supervisor reviews the audio recordings with the practicum counselor-in-training.
☐ Supervisor reviews counseling goals and strategies being used with practicum counselor client.
☐ Supervisor and Practicum coordinator serve as liaison to school for concerns about any and all issues that may arise during the practicum experience.

Note: All parties will receive a copy of the training agreement and contact information after all signatures are complete.
Appendix G: Feedback

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 (s)he 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 (s)he 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 H: The Initial Session: A Suggested Procedure

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 I: Counseling Competencies Scale (CCS)

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.

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

- **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.

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])

| #  | Score | Primary Counseling Skill(s) | Specific Counseling Descriptors | Exceeds Expectations / Demonstrates Competencies (8) | Meets Expectations / Demonstrates Competencies (6) | Near Expectations / Developing towards Competencies (4) | Below Expectations / Insufficient / Unacceptable (2)
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1.A</td>
<td>Nonverbal Skills</td>
<td>Includes Body Position, Eye Contact, Posture, Distance from Client, Voice Tone, Rate of Speech, etc.</td>
<td>Practicum counselor demonstrates effective nonverbal communication skills, conveying connectedness &amp; empathy (85%).</td>
<td>Practicum counselor demonstrates effective nonverbal communication skills for the majority of counseling sessions (70%).</td>
<td>Practicum counselor demonstrates inconsistency in his/her nonverbal communication skills.</td>
<td>Practicum counselor demonstrates limited nonverbal communication skills.</td>
<td></td>
</tr>
<tr>
<td>1.B</td>
<td>Encouragers</td>
<td>Includes Minimal Encouragers &amp; Door Openers such as “Tell me more about...”</td>
<td>Practicum counselor demonstrates appropriate use of encouragements, which supports the development of a therapeutic relationship (85%).</td>
<td>Practicum counselor demonstrates appropriate use of encouragements for the majority of counseling sessions (70%).</td>
<td>Practicum counselor demonstrates inconsistency in his/her use of appropriate encouragers.</td>
<td>Practicum counselor demonstrates limited ability to use appropriate encouragers.</td>
<td></td>
</tr>
<tr>
<td>1.C</td>
<td>Questions</td>
<td>Use of Appropriate Open &amp; Closed Questioning (e.g., avoidance of double questions)</td>
<td>Practicum counselor demonstrates appropriate use of open &amp; close-ended questions, with an emphasis on open-ended question (85%).</td>
<td>Practicum counselor demonstrates appropriate use of open &amp; close-ended questions for the majority of counseling sessions (70%).</td>
<td>Practicum counselor demonstrates inconsistency in his/her use of open-ended questions &amp; may use closed-ended questions for prolonged periods.</td>
<td>Practicum counselor uses open-ended questions sparingly &amp; with limited effectiveness.</td>
<td></td>
</tr>
<tr>
<td>1.D</td>
<td>Reflecting</td>
<td>Basic Reflection of Content – Paraphrasing, Summarizing, etc.</td>
<td>Practicum counselor demonstrates appropriate use of paraphrasing &amp; summarizing as the primary therapeutic approach (85%).</td>
<td>Practicum counselor demonstrates appropriate use of paraphrasing &amp; summarizing, appropriately &amp; consistently (70%).</td>
<td>Practicum counselor demonstrates paraphrasing, summarizing inconsistently &amp; inaccurately.</td>
<td>Practicum counselor demonstrated limited proficiency in paraphrasing &amp; summarizing</td>
<td></td>
</tr>
<tr>
<td>1.E</td>
<td>Reflecting</td>
<td>Reflection of Feelings</td>
<td>Practicum counselor demonstrates appropriate use of reflection of feelings as the primary therapeutic approach (85%).</td>
<td>Practicum counselor demonstrates appropriate use of reflection of feelings appropriately &amp; consistently (70%).</td>
<td>Practicum counselor demonstrates reflection of feelings inconsistently &amp; inaccurately.</td>
<td>Practicum counselor demonstrated limited proficiency in reflecting feelings</td>
<td></td>
</tr>
<tr>
<td>1.F</td>
<td>Advanced Reflection (“Depth”)</td>
<td>Advanced Reflection of Feelings, Reflection of Values, Meanings, Core Beliefs (takes counseling to a deeper level)</td>
<td>Practicum counselor demonstrates consistent use advanced therapeutic skills &amp; promotes discussions of greater depth in counseling sessions (85%).</td>
<td>Practicum counselor demonstrates ability to appropriately use advanced counseling skills, supporting increased exploration in counseling session (70%).</td>
<td>Practicum counselor demonstrates inconsistent &amp; inaccurate ability to use advanced counseling skills: sessions appear sluggish.</td>
<td>Practicum counselor demonstrates limited ability to use advanced counseling skills: sessions appear primarily superficial.</td>
<td></td>
</tr>
<tr>
<td>1.G</td>
<td>Confrontation</td>
<td>Practicum counselor challenges client to recognize &amp; evaluate inconsistencies.</td>
<td>Practicum counselor demonstrates the ability to challenge clients through verbalizing inconsistencies &amp; discrepancies in the client’s words or actions in a supportive &amp; caring fashion.</td>
<td>Practicum counselor demonstrates the ability to challenge clients through verbalizing inconsistencies &amp; discrepancies in the client’s words or actions in a supportive &amp; caring fashion.</td>
<td>Practicum counselor demonstrates limited ability to challenge clients through verbalizing discrepancies in the client’s words or actions in a supportive &amp; caring fashion.</td>
<td>Practicum counselor demonstrates limited ability to challenge clients through verbalizing discrepancies in the client’s words or actions in a supportive &amp; caring fashion.</td>
<td></td>
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Last Updated 1/12/2017
### Part 2 (Professional Dispositions – CACREP Standards [2009] #1 [Professional Orientation & Ethical Practice] #2 [Social & Cultural Diversity], #3 [Human Growth & Development], & #5 [Helping Relationships])

<table>
<thead>
<tr>
<th>#</th>
<th>Score</th>
<th>Primary Professional Dispositions</th>
<th>Specific Professional Disposition Descriptors</th>
<th>Exceeds Expectations / Demonstrates Competencies (8)</th>
<th>Meets Expectations / Demonstrates Competencies (6)</th>
<th>Near Expectations / Developing towards Competencies (4)</th>
<th>Below Expectations / Insufficient / Unacceptable (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.H</td>
<td>1.0</td>
<td>Goal Setting</td>
<td>Practicum counselor collaborates with client to establish realistic, appropriate, &amp; attainable therapeutic goals</td>
<td>Practicum counselor demonstrates consistent ability to establish collaborative &amp; appropriate therapeutic goals with client (85%).</td>
<td>Practicum counselor demonstrates ability to establish collaborative &amp; appropriate therapeutic goals with client (70%).</td>
<td>Practicum counselor demonstrates inconsistent ability to establish collaborative &amp; appropriate therapeutic goals with client.</td>
<td>Practicum counselor demonstrates limited ability to establish collaborative &amp; appropriate therapeutic goals with client.</td>
</tr>
<tr>
<td>1.I</td>
<td>1.0</td>
<td>Focus of Counseling</td>
<td>Practicum counselor focuses (or refocuses) client on his/her therapeutic goals – i.e. purposeful counseling</td>
<td>Practicum counselor demonstrates consistent ability to primarily focus (or refocus) counseling on client’s appropriate therapeutic goal attainment (85%).</td>
<td>Practicum counselor demonstrates ability to primarily focus (or refocus) counseling on client’s appropriate therapeutic goal attainment (70%).</td>
<td>Practicum counselor demonstrates inconsistent ability to primarily focus (or refocus) counseling on client’s appropriate therapeutic goal attainment.</td>
<td>Practicum counselor demonstrates limited ability to primarily focus (or refocus) counseling on client’s appropriate therapeutic goal attainment.</td>
</tr>
<tr>
<td>1.J</td>
<td>1.0</td>
<td>Facilitate Therapeutic Environment</td>
<td>Practicum counselor expresses appropriate empathy &amp; care. Practicum counselor is “present” and open to client.</td>
<td>Practicum counselor demonstrates consistent ability to be empathic &amp; uses appropriate responses (85%).</td>
<td>Practicum counselor demonstrates ability to be empathic &amp; use appropriate responses (70%).</td>
<td>Practicum counselor demonstrates inconsistent ability to be empathic &amp; use appropriate responses.</td>
<td>Practicum counselor demonstrates limited ability to be empathic &amp; uses appropriate responses.</td>
</tr>
<tr>
<td>1.K</td>
<td>1.0</td>
<td>Facilitate Therapeutic Environment</td>
<td>Practicum counselor expresses appropriate respect &amp; unconditional positive regard</td>
<td>Practicum counselor demonstrates consistent ability to be respectful, accepting, &amp; caring with clients (85%).</td>
<td>Practicum counselor demonstrates ability to be respectful, accepting, &amp; caring with clients (70%).</td>
<td>Practicum counselor demonstrates inconsistent ability to be respectful, accepting, &amp; caring.</td>
<td>Practicum counselor demonstrates limited ability to be respectful, accepting, &amp; caring.</td>
</tr>
</tbody>
</table>

_____: Total Score (out of a possible 88 points)

Last Updated 1/12/2017
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<tbody>
<tr>
<td>2.D</td>
<td>Emotional stability &amp; Self-control</td>
<td>Practicum counselor demonstrates emotional stability (i.e., congruence between mood &amp; affect) &amp; self-control (i.e., impulse control) in relationships with supervisor, peers, &amp; clients.</td>
<td>Practicum counselor demonstrates consistent emotional resiliency &amp; appropriateness in interpersonal interactions.</td>
<td>Practicum counselor demonstrates emotional stability &amp; appropriateness in interpersonal interactions.</td>
<td>Practicum counselor demonstrates limited emotional stability &amp; appropriateness in interpersonal interactions.</td>
</tr>
<tr>
<td>2.E</td>
<td>Motivated to Learn &amp; Grow / Initiative</td>
<td>Practicum counselor is engaged in the learning &amp; development of his/her counseling competencies.</td>
<td>Practicum counselor demonstrates consistent enthusiasm for his/her professional and personal growth &amp; development.</td>
<td>Practicum counselor demonstrates inconsistency in enthusiasm for his/her professional and personal growth &amp; development.</td>
<td>Practicum counselor demonstrates limited enthusiasm for his/her professional and personal growth &amp; development.</td>
</tr>
<tr>
<td>2.F</td>
<td>Multicultural Competencies</td>
<td>Practicum counselor demonstrated awareness, appreciation, &amp; respect of cultural difference (e.g., races, spirituality, sexual orientation, SES, etc.)</td>
<td>Practicum counselor demonstrates consistent &amp; advanced multicultural competencies (knowledge, self-awareness, appreciation, &amp; skills).</td>
<td>Practicum counselor demonstrates inconsistent multicultural competencies (knowledge, self-awareness, appreciation, &amp; skills).</td>
<td>Practicum counselor demonstrates limited multicultural competencies (knowledge, self-awareness, appreciation, &amp; skills).</td>
</tr>
<tr>
<td>2.G</td>
<td>Openness to Feedback</td>
<td>Practicum counselor responds non-defensively &amp; alters behavior in accordance with supervisory feedback</td>
<td>Practicum counselor demonstrates openness to supervisory feedback &amp; implements suggested changes.</td>
<td>Practicum counselor demonstrates openness to supervisory feedback &amp; does not implement suggested changes.</td>
<td>Practicum counselor is not open to supervisory feedback &amp; does not implement suggested changes.</td>
</tr>
<tr>
<td>2.H</td>
<td>Professional &amp; Personal Boundaries</td>
<td>Practicum counselor recognizes the boundaries of her/his competencies &amp; maintains appropriate boundaries with supervisors, peers, &amp; clients</td>
<td>Practicum counselor demonstrates consistently strong &amp; appropriate boundaries &amp; appreciates his/her limitations.</td>
<td>Practicum counselor demonstrates appropriate boundaries &amp; appreciates his/her limitations.</td>
<td>Practicum counselor demonstrates inappropriate boundaries &amp; has limited appreciation of his/her limitations.</td>
</tr>
<tr>
<td>2.I</td>
<td>Flexibility &amp; Adaptability</td>
<td>Practicum counselor demonstrates ability to flex to changing circumstance, unexpected events, &amp; new situations</td>
<td>Practicum counselor demonstrates strong ability to adapt &amp; “reads-&amp;-flexes” appropriately.</td>
<td>Practicum counselor demonstrates an inconsistent ability to adapt &amp; flex to his/her clients.</td>
<td>Practicum counselor demonstrates a limited ability to adapt &amp; flex to his/her clients.</td>
</tr>
<tr>
<td>2.J</td>
<td>Congruence &amp; Genuineness</td>
<td>Practicum counselor demonstrates self-acceptance (&quot;comfortable in one's own skin&quot;) &amp; appropriate self-confidence.</td>
<td>Practicum counselor demonstrates ability to be genuine &amp; accepting of self &amp; others</td>
<td>Practicum counselor demonstrates inconsistent ability to be genuine &amp; accepting of self &amp; others</td>
<td>Practicum counselor demonstrates a limited ability to be genuine &amp; accepting of self &amp; others (incongruent).</td>
</tr>
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_____: Total Score (out of a possible 80 points)
<table>
<thead>
<tr>
<th>#</th>
<th>Score</th>
<th>Primary Professional Behavior(s)</th>
<th>Specific Professional Behavior Descriptors</th>
<th>Exceeds Expectations / Demonstrates Competencies (8)</th>
<th>Meets Expectations / Demonstrates Competencies (6)</th>
<th>Near Expectations / Developing towards Competencies (4)</th>
<th>Below Expectations / Insufficient / Unacceptable (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.A</td>
<td></td>
<td>Attendance</td>
<td>Practicum counselor attends all course meetings &amp; clinical practice activities in their entirety (engaged &amp; prompt).</td>
<td>Practicum counselor attends all class meetings &amp; supervision sessions in their entirety &amp; is engaged in the learning process.</td>
<td>Practicum counselor misses one class meeting &amp;/or supervision session &amp; is engaged in the learning process.</td>
<td>Practicum counselor misses two class meetings &amp;/or supervision sessions &amp; is engaged in the learning process.</td>
<td>Practicum counselor misses more than two class meetings &amp;/or supervision sessions &amp; is not engaged in the learning process.</td>
</tr>
<tr>
<td>3.C</td>
<td></td>
<td>Record Keeping</td>
<td>Practicum counselor completes all weekly record keeping activities correctly &amp; promptly (e.g., case notes, psychological reports, TX plan).</td>
<td>Practicum counselor demonstrates consistent adherence to all counseling site policies &amp; procedures.</td>
<td>Practicum counselor demonstrates adherence to all counseling site policies &amp; procedures.</td>
<td>Practicum counselor demonstrates inconsistent adherence to all counseling site policies &amp; procedures.</td>
<td>Practicum counselor demonstrates limited adherence to all counseling site policies &amp; procedures.</td>
</tr>
<tr>
<td>3.D</td>
<td></td>
<td>Knowledge of professional literature</td>
<td>Practicum counselor researches therapeutic intervention strategies that have been supported in the literature &amp; research.</td>
<td>Practicum counselor demonstrates strong knowledge of supported therapeutic approaches grounded in the counseling literature &amp; research.</td>
<td>Practicum counselor demonstrates knowledge of supported therapeutic approaches grounded in the counseling literature &amp; research.</td>
<td>Practicum counselor demonstrates inconsistent knowledge of supported therapeutic approaches grounded in the counseling literature &amp; research.</td>
<td>Practicum counselor demonstrates limited knowledge of supported therapeutic approaches grounded in the counseling literature &amp; research.</td>
</tr>
<tr>
<td>3.E</td>
<td></td>
<td>Application of Theory to Practice</td>
<td>Practicum counselor demonstrates knowledge of counseling theory &amp; its application in his/her practice.</td>
<td>Practicum counselor demonstrates a strong understanding of the counseling theory(ies) that guides his/her therapeutic work with clients.</td>
<td>Practicum counselor demonstrates an understanding of the counseling theory(ies) that guides his/her therapeutic work with clients.</td>
<td>Practicum counselor demonstrates inconsistent understanding of the role of counseling theory in his/her therapeutic work.</td>
<td>Practicum counselor demonstrates limited understanding of counseling theory &amp; its role in his/her therapeutic work with clients.</td>
</tr>
<tr>
<td>3.F</td>
<td></td>
<td>Case Conceptualization</td>
<td>Practicum counselor is able to effectively present &amp; summarize client history &amp; demonstrates an appreciation of the multiple influences on a client’s level of functioning.</td>
<td>Practicum counselor demonstrates a strong &amp; comprehensive case conceptualization; appreciating the multiple influences on a client’s level of functioning.</td>
<td>Practicum counselor demonstrates a strong case conceptualization; appreciating the multiple influences on a client’s level of functioning.</td>
<td>Practicum counselor demonstrates basic case conceptualization; appreciating only the influences a client presents in session on his/her level of functioning.</td>
<td>Practicum counselor demonstrates a limited case conceptualization &amp; does not appreciate the influence of systemic factors on the client’s level of functioning.</td>
</tr>
<tr>
<td>3.G</td>
<td></td>
<td>Seeks Consultation</td>
<td>Practicum counselor seeks consultation &amp; supervision in appropriate service delivery</td>
<td>Practicum counselor seeks appropriate consultation &amp; supervision to support the delivery of counseling services.</td>
<td>Practicum counselor seeks consultation &amp; supervision to support the delivery of counseling services.</td>
<td>Practicum counselor inconsistently seeks consultation &amp; supervision to support the delivery of counseling services.</td>
<td>Practicum counselor seeks limited consultation &amp; supervision to support the delivery of counseling services.</td>
</tr>
</tbody>
</table>
### 3.H Psychosocial & Treatment Planning

| Practicum counselor demonstrates ability to construct a comprehensive & appropriate psychosocial report & treatment plan. | Practicum counselor demonstrates the ability to construct a comprehensive & appropriate psychosocial report & treatment plan (e.g., goals are relevant, attainable, & measureable) | Practicum counselor demonstrates an inconsistent ability to construct a comprehensive & appropriate psychosocial report & treatment plan. | Practicum counselor demonstrates a limited ability to construct a comprehensive & appropriate psychosocial report & treatment plan. |

### 3.I Appraisal

| Practicum counselor demonstrates ability to appropriately administer, score, & interpret clinical assessments | Practicum counselor demonstrates a strong ability to appropriately administer, score, & interpret assessment instruments. | Practicum counselor demonstrates an inconsistent ability to appropriately administer, score, & interpret assessment instruments. | Practicum counselor demonstrates a limited ability to appropriately administer, score, & interpret assessment instruments. |

### 3.J Task Completion

| Practicum counselor completes all assigned tasks in an ethical & effective fashion (e.g., individual & group counseling, supervision, reports) | Practicum counselor consistently completes all assigned tasks in a comprehensive & through fashion. | Practicum counselor completes assigned tasks in an inconsistent fashion. | Practicum counselor does not complete all assigned tasks & those tasks that are completed are not done in a competent fashion. |

| ______: Total Score (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:

---

| Counseling Practicum counselor’s Name (print) | Date |
| Supervising Instructor’s Name (print) | Date |

Date CCS was reviewed with Counseling Practicum counselor –

| Counseling Practicum counselor’s Signature | Date |
| Supervising Instructor’s Signature | Date |

*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 counselor.*
Appendix J: Practicum counselor Professional Disclosure Statement

Following is a model of a professional disclosure statement. *Italicized type like this indicates material for you to substitute with your own data.* Normal type like this indicates material for you to use exactly as it appears below, or with little modification. [Delete this and foregoing material from final form]

YOUR NAME
Community Counseling Training Center
Counseling Program
Northern Illinois University
DeKalb, IL 60115
815-753-9312

Professional Disclosure Statement

**Qualifications:** I am a graduate practicum counselor 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, please do not invite me to social events, bring me gifts, ask to barter or exchange services, ask me to write references for you, or ask me to 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 concerns exclusively. I conduct all counseling session in English or with a translator for whom you arrange and pay. I do not discriminate on the basis of race, gender, religion, national origin, disability, or sexual
orientation. If significant differences, such as in culture or belief system, exist between us, I will work to understand 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. However, I cannot guarantee any specific results. Counseling is a personal exploration that may lead to major 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. For example, one risk of couple counseling is the possibility that the marriage may end. 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.

Appointments and Cancellation: Our in-person contact will be limited to counseling sessions you arrange with me. My scheduled time at the CCTC is only 5 hours per week. Community Counseling Training Center 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 practicum counselor’s name. If you miss two counseling sessions without notifying the CCTC, your services will be terminated. If you are a practicum counselor seeking extra credit for participating in CCTC services, you must attend a minimum of four sessions to receive your extra credit. If you are terminated you may reapply for services, pending practicum counselor availability, however you will be required to complete four consecutive sessions.

X _____ I have read the above statements and understand the procedures regarding cancellation.

Crisis: The CCTC is not equipped for after-hours emergencies. Graduate Assistants and/or Practicum counselors are available during the following hours: Mondays, Tuesdays, and Thursdays 12:30 p.m.-5:30 p.m., and 11 a.m.-9 p.m. Any messages on the CCTC answering machine after Thursdays’ hours will 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 practicum counselor at NIU, contact the Ben Gordon 24-Hour Community Crisis Hotline at (866) 242-0111.

X _____ I have read the above statements and understand the procedures regarding emergency situations.

Permission to Participate and Confidentiality: I am a practicum 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 practicum 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 and elder abuse and/or neglect communicated by clients must be reported to appropriate agencies by counseling staff.

X _____ I have read the above statements and understand my rights regarding my participation and confidentiality.

Recording and Observation: Practicum 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.

X _____ I agree to the recording and/or observation of my sessions. I understand that confidentiality will be maintained, written records will be maintained, and that professional ethical standards will be observed in this process. I also understand that I may request the identities of all individuals observing my recorded counseling sessions. Recordings will be erased following supervision.

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 following person(s), in addition to medical and/or law enforcement personnel:

Name ________________________ Telephone Number ________________________

Client Rights: Some clients achieve their goals in only a few counseling sessions, whereas others may require months or even years or 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 techniques 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 resolve your concerns, you may report your complaints to my supervisor(s) listed on page one.

Privacy Rights under HIPAA: You have the right to review your client file in the presence of your practicum counselor, the supervisor, or the Clinical 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).

X _____ I have been informed of my privacy rights under HIPAA and understand how to access my client file.

Conditions of Ongoing Counseling: If you have been in counseling or psychotherapy during the past seven years, the CCTC may require 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 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 practicum counselors and the CCTC reserves the right to terminate your counseling services.

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 practicum 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 or referral options.

X _____ I have received a copy of my consumer rights and responsibilities.

By your signature below, you are indicating that you read and understand this statement, that any questions you had about this statement were answered to your satisfaction, and that you were furnished a copy of this statement. By my signature, I verify the accuracy of this statement and acknowledge my commitment to conform to its specifications.

<table>
<thead>
<tr>
<th>Client’s Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practicum counselor’s Signature</td>
<td>Date</td>
</tr>
<tr>
<td>Supervisor’s Signature</td>
<td>Date</td>
</tr>
</tbody>
</table>
Appendix K: Confidentiality Statement for Schools

Community Counseling Training Center at NIU
Dept. of Counseling, Adult, and Higher Education
Graham 416
DeKalb, IL 60115
Phone: 815-753-9312; Fax: 815-753-4135

Counseling Confidentiality Statement

I understand that my practicum counselor, ______________________, is taking a practicum in counseling at Northern Illinois University and is under the direct supervision of ______________________. All sessions with this practicum counselor are confidential. This means that no information is released to persons or agencies regarding the fact that counseling has been received nor the nature of 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 and elder abuse and/or neglect communicated by clients must be reported by counseling staff.

“I have read the above statement and understand my rights regarding confidentiality.”

Date ______________________
Signature of client (parent or guardian for minors)

Counseling Practicum Consent

Practicum counselors in training receive consultation and supervision. To aid in this, your practicum counselor must request to have your sessions taped or observed. Information and tapes 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 your practicum counselor.

“I agree to the taping and/or observation of my sessions. I understand that confidentiality will be maintained, written records will be maintained, and that professional ethical standards will be observed in this process. I also understand that I may request the identities of all individuals observing my counseling sessions on tapes. Tapes will be erased following supervision.”

Date ______________________
Signature of client (parent or guardian for minors)

Last Updated 1/12/2017
Appendix L: 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 incase 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 chess 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 M: 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 N: 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 assists you in making the decision.

COUNSELING AND 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.

COUNSELING CCTC, NIU
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.

FAMILY CENTER, NIU
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 COMMUNITY MENTAL HEALTH CENTER
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”
Appendix O: Group Counseling Feedback Report

Northern Illinois University
Master’s in Counseling Program
Practicum Group Counseling
Feedback Report

Practicum counselor ___________________________ Semester/Year _________________________

Site of Group ___________________________ Co-facilitator ___________________________
Type of Group ___________________________ Number of Meetings ___________________

Please provide your feedback and observations on the practicum counselor’s performance as a co-facilitator this semester along the following domains:

<table>
<thead>
<tr>
<th>Practicum counselor was able to demonstrate</th>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Appropriately screen clients for group admission. (if group was not ongoing or if new members were added).</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2. Appropriately plan for the group environment.</td>
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<tr>
<td>3. Initiate &amp; facilitate group process.</td>
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<tr>
<td>4. Recognize &amp; appropriately respond to group dynamics.</td>
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<tr>
<td>5. Facilitate for termination of the group, or for own termination if group continued.</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>6. Overall an effective group co-facilitator</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The following abilities:

General comments regarding practicum counselor’s performance:

Practicum counselor Signature ___________________________ Date ________________
Group Co-Facilitator Signature ___________________________ Date ________________