

Summary of Program Data Collection 2018-2019

Academic Year 2018-2019

Each annual and three-year review generates recommendations that are then forwarded to appropriate department, whether it be recruiting, admissions, enrollment, institutional advancement, financial aid, registrar, or counseling program faculty and staff. Certain modifications require approval by one of two administrative committees: 1) the SSW Academic Affairs committee, or 2) the SSW Faculty and Administrative Committee. Policy changes, significant procedural changes, and changes requiring notification and/or approval by accrediting bodies must be proposed and approved by one or both of these committees before changes can be implemented.

Data from academic year 2018-2019 are summarized below for review in determining any program or curricular modifications that might be needed.

External Data Type 1 - Changes in State of Texas Laws, Licensure Policies, and Accreditation Standards

In 2019, the State of Texas updated the LPC rules to include an alternate choice of the required licensure exam. In addition to the NCE, the NCMHCE (National Clinical Mental Health Counseling Exam) is now being accepted.

Improvements/Modifications Recommended:

Pertinent documents have been updated to reflect both exams and students in the program have been notified of the change.

External Data Type 2 – Mental Health Requirement & The 2018-2021 ACA Strategic Framework

As a response to our profession's emphasis on self-care and advocacy, the MHC program has identified section 1.3 of the *2018-2021 ACA Strategic Framework* (see link below) as a call to action. This section focuses on "Promoting holistic wellness, prevention, and empowerment that can be achieved through quality counseling services for every human being" (ACA, 2018, p. 2). In application to counselor education, we have aligned our mental health requirement with this section as our action item. For the past few years MHC students have been required to complete a mental health program requirement which consists of 6 sessions of counseling within the first 12 months of being admitted to the program. If a student had completed therapy within the year prior to admission they may have had the requirement waived. Students would write an essay about their experience of being a client and how they might apply that experience to their vocational goals of being a counselor. This essay was submitted to the Center Director and each student's advisor was made aware of the requirement being met.

https://www.counseling.org/docs/default-source/aca-strategic-plan/aca-strategic-framework_wfinal80dc32f16116603abcacff0000bee5e7.pdf?sfvrsn=e7ca522c_2

Improvements/Modifications Recommended:

Upon review of this requirement and the procedures accompanying it, it was recommended to make the requirement mandatory for all new students to complete after being enrolled (therefore eliminating the provision that previous sessions could meet this requirement). It was also recommended to change the reporting format from an essay to a questionnaire. The questions ask students to self-reflect on their ability to a) use counseling to gain in self-awareness, b) practice openness to their counselor and the counseling process, and c) engage in counseling as a support for spiritual wellness. Students rate their responses to

these 3 questions after their 3rd and 6th sessions on a five point Likert scale ranging from disagree to agree. It is our hope that these changes may promote a deepened understanding for students of the promotion of ‘holistic wellness, prevention, and empowerment’ within the experience of the client and of a counselor in training. The shift to this new format of documentation will be reviewed at the end of the next academic year to determine its effectiveness and continued use.

Program Data Type 1 - MHC Program Vital Statistics

Vital Statistics were informative to the program. The recommendation from the previous report was implemented to make an attempt to obtain NCE exam pass rates data directly from alumni via the Alumni Feedback Survey.

This academic year, there were 21 MHC graduates. Our graduates achieved a 95% pass rate on the NCE exam last year (there were no students who took the NCMHCE exam this year). Approximately 45 students are currently enrolled in the Clinical Mental Health Counseling program. Approximately 96% of accepted students graduated in the expected time period, three years for full-time students in the counseling program. Our counseling courses accommodate both part-time and full-time students and our program serves populations from mostly Central, South, and East Texas. In addition, based on alumni survey results, 100% of our graduates pursued post-graduate licensure, with the majority pursuing an LPC/LPC-Intern license post-graduation. Also based on our alumni survey results, 100% of graduates sought and successfully secured a job placement post-graduation. In addition, 72% of the 2019 graduates have secured a job placement by graduation.

Program Data Point 2 - MHC Program Admission and Enrollment

In academic year 2018-2019, admission rates met benchmarks at 85%. Retention rate changed from 98% to 93%. Average course completion rates improved from 75% to an average of 98.5%.

Program Data Type 3 - Student Remediation Plans

In the academic year 2018-2019, approximately 5% of the students were placed on some form of pre-remediation plan, and 4.5% were placed on formal remediation. 100% of those on pre-mediation plans successfully fulfilled the goals of their plan, and 100% of those on formal remediation plans successfully fulfilled the goals of their plan. During the 2017-2018 academic year, the program began tracking and including data pertaining to pre-remediation interventions; wherein if a student obtains a 1.0 (failing to meet benchmark of 2.0) on any KLO or KPD standard, and an intervention is implemented to assist the student in making the required improvement prior to formal remediation, this will be recorded as program data. Remediation plans are required anytime a student achieves a 1.0 (failing to meet benchmark of 2.0) on any KLO or KPD standard. Pre-mediation plans are implemented anytime a student achieves a rating of one on a KLO or KPD, fails to pass a required benchmark, or is in need of more targeted support for academic or professional success. Advisors work with students to establish remediation and pre-remediation plan goals and follow-up according to established timelines. The MHC faculty supports the ongoing recommendation to continue utilizing both pre-remediation and remediation plans as planned.

It was noted that the Admissions KPD was conducted during the first month of the first semester for new students and was therefore completed by the student's self-report. Several new students rated themselves as 1.0 in at least one area of their KPD. Since this was not assessed by faculty, pre-remediation plans were not implemented for these students, but this was not in sync with the outlined procedure for the use of pre-remediation plans above.

Improvements/Modifications Recommended:

In an effort to reduce the potential number of pre-remediation plans for Admissions KPD standards, the following is recommended. The MHC faculty suggests shifting the Admissions KPD to the spring semester (the new students' second semester) so that the advisor has had time to adequately be able to assess KPD standards. Since the Admissions KPD has primarily been self-report by students within their

first few weeks of the program (and often includes self-assessed scores of 1.0), the suggestion is to make this KPD consistent with the others (KPD at candidacy & at graduation) where the advisor assesses the student. The Admissions KPD was renamed as ‘Program Entry KPD’ and in the next academic year, it will be conducted by the advisor during the spring semester.

Program Data Type 4 – Key Learning Objectives Assessments

KLO data for 2018-2019 showed 98% of students meeting standards or higher for core curriculum. MHC faculty noted the lowest scores were observed in Foundations of Clinical Mental Health (2.04; assessed in CMH5325 Professional Orientation and Ethics in Counseling), Professional counseling and ethical practice (2.38; assessed in CMH5325 Professional Orientation and Ethics in Counseling), and Social and Cultural Diversity (2.32; assessed in CMH5308 Social, Cultural, & Family Diversity). This could have been due to the combination of CMH5301 Professional Orientation and CMH5316 Ethics in Counseling into one course which increased the number of standards covered for that class. Faculty discussed how to address this domain in curriculum, advising relationships, and in practicum/internship courses. The lower scores within the area of Social Cultural Diversity primarily centered on the areas of KPDs assessed in this course. The instructor indicated that students with scores of needing improvement were making progress, but needed more time to meet the standard, which may be due to the course being offered in the summer (a significantly shorter semester).

Improvements/Modifications Recommended:

It is recommended that the MHC faculty revisit the CMH5325 Professional Orientation and Ethics in Counseling course and review the standards designated for that course. Upon reflection on the CMH5308 Social, Cultural, & Family Diversity KLO, the MHC faculty has scheduled the course within our course degree plan to be taught during the 15week semester which will provide students more time to develop skills/standards for this course.

During the 2018-2019 academic year, the MHC faculty shifted from the former practice of comparing the KLOs for each class with the corresponding course evaluations as a means of program evaluation of the curriculum. Students assess themselves on the course objectives within the course evaluations while instructors assess students on the objectives within the KLOs. For this coming academic year, the course evaluations of all courses (non-KLO designated courses as well as courses designated for KLO assessment) will be reviewed at the End-of-Semester meetings as a means of enhancing curriculum review.

MHC Faculty also discussed consolidating the course objectives within syllabi that become evaluated by students in the course evaluations. The CACREP standards would still be listed in the syllabi, but they would be included in their own section. During the End-of-Semester Review, faculty will discuss the comparison of student versus instructor ratings of the consolidated course objectives for additional curriculum review.

Recommendations for next year include shifting the assessment of “Contextual dimensions of clinical mental health counseling” from CMH5315 Psychopathology and CMH5322 Internship II to CMH5314 Abnormal Behavior and CMH5322 Internship II. This recommendation was made on the basis of Psychopathology being a non-prerequisite course that students can take during their internship courses which prevents completion of the Candidacy requirement of passing all KLOs prior to Internship I. Since Abnormal Behavior is a pre-requisite course and one of the two diagnostic courses, the KLO objectives addressing ‘Contextual dimensions of clinical mental health counseling’ have been added to the course syllabus and will be assessed within that course beginning in the 2019-2020 academic year.

Program Data Type 5 - Key Professional Disposition Assessments

100% of students met the benchmark set at 2.0 – Meets Standard for the Key Professional Dispositions conducted at graduation in 2018-2019. The lowest scores were found in the areas of Cultural Empathy (2.78) and Personal and Spiritual Wellness (2.78).

Improvements/Modifications Recommended:

MHC Faculty will continue efforts to promote commitment to Personal and Spiritual Wellness and Cultural Empathy explicitly in curriculum and advising conversations (particularly drawing upon LHCC and Spiritual Integration in Counseling research and literature to inform program interventions), and track data to see if these scores improve in the following academic year. The seminary has a campus wide effort to increase dialogue and understanding of cultural diversity and the MHC program has included within all syllabi moving forward the encouragement to include readings from various racial and cultural perspectives. It is also recommended that MHC faculty meet to discern ways to better infuse multicultural intersectionality across the curriculum.

Program Data Type 6 – Candidacy Endorsements

100% of candidacy applications filed during the last academic year were endorsed, allowing MHC students to enter the final year of their MHC program having satisfactorily met all pre-requisite benchmarks in knowledge, skills and dispositions. The candidacy application was updated to provide clarification and direction on occasions when a student does not meet the requirements (i.e. receives a B- instead of a B in the course). The updated form includes the following: “If the student has not met the above requirements a student remediation plan will be created to address the missing requirement(s). The goals created in the remediation plan must be successfully completed no later than one week prior to the first day of seminary registration for the upcoming semester.” The advisor is then able to endorse the student’s candidacy with or without a remediation plan.

Improvements/Modifications Recommended:

It is recommended that this year a committee consider the possibility of a pre-candidacy endorsement for students to facilitate the discernment of goodness of fit between a) the student and b) the vocation of counseling (with the intention of this occurring sometime after or during their first year of the program).

Program Data Type 7 – Final Clinical Internship Evaluations

100% of Clinical Internship II students met or exceeded standards according to Final Clinical Supervisor Evaluation Forms. The recommendation from last academic year to make slight revisions on the Supervisor Evaluation Form was implemented and this form seems to be working well.

Improvements/Modifications Recommended:

It is recommended that the evaluation be further revised to clarify areas that are consistently rated as ‘Not Assessed (NA).’ This revision will allow the MHC program to articulate the program expectations for the CACREP standards most often rated as ‘NA.’

Program Data Type 8 – Student Site Evaluations

75% of sites evaluated (six out of eight) were rated as meeting or exceeding standards and six sites were retained as approved sites for the coming academic year. Final Student Site Evaluation data was collected on practicum/internship sites and two sites were found needing improvement/remediation, out of eight sites evaluated in Fall 2018, seven sites evaluated in Spring 2019, and two sites evaluated in Summer 2019. One site needing improvement served as a secondary site and was marked low for areas where the student did not have exposure due to limited time and a concentrated role there (HS group counseling). The MHC faculty will keep this site on our radar if it is pursued as a primary site. The faculty met with the director of the other site needing improvement. For future student placement at this site, consideration will be given to the fit of the student and the site's specific requirements. In addition, there were two sites identified as needing intervention despite being sites that were rated 'meeting the standard.' Due to administrative/personnel changes at both sites, the students did not recommend it as a continued site for students in the near future. These sites may be considered again, once they have more administrative stability (and supervisors who meet our program standards).

Program Data Type 9 - Counseling Program Comprehensive Exams (CPCE)

This past academic year, 16 students completed the CPCE exam, and 100% of exams taken were passed by students at all points in the program. There were four students who required an oral exam for a failed section and each passed allowing for a rate of 100% of exams taken that were passed by students by graduation. MHC faculty noted that the sections where students required an oral exam included Assessment and Testing, Career Development, and Counseling & Helping Relationships.

Improvements/Modifications Recommended:

MHC Faculty will make efforts to attend to domain knowledge areas of Assessment and Testing, Career Development, and Counseling & Helping Relationships within curriculum and advising conversations, and track data to see if these sections of the CPCE exam are passed in the following academic year.

Program Data Type 10 – Capstone Paper Assessments

Based on “Capstone Paper” data from academic year 2018-2019, 100% of papers evaluated were found to meet the benchmark set at 2.0 or above. This data was determined to be meaningful as a form of program assessment and the decision was made to retain this data type. As per last year’s recommendation, the Capstone Paper instructions were updated to direct students to cite at least one resource per section. In addition, the rubric was updated to better align with the instructions.

Improvement/Modification Recommended:

It is recommended for the next academic year that graded rubrics of the capstone paper be reviewed during the end-of-semester meetings by the Internship II instructor in order to inform program assessment. In addition, MHC faculty will further update the instructions to clarify a) the type of citations required (i.e. from a primary source), b) the specific research related information required, and c) the expectation for students to articulate one primary theoretical orientation.

Program Data Type 11 – National Counseling Exam (NCE) & National Clinical Mental Health Counseling Exam (NCMHCE)

The recommendation from last year's report to obtain NCE data directly from graduates via the Alumni Survey was implemented this academic year. Four out of four respondents who took the NCE during the 2018-2019 academic year post graduation indicated having passed their NCE exam post-graduation (yielding a 100% response rate for alumni). Seventeen MHC program graduates/alumni qualified to take the NCE exam before graduation and 16 out of 17 passed, resulting in a 94.1% pass rate.

Improvements/Modifications Recommended:

In response to the 2019 updates to the Texas Administrative Code for Professional Counselors, the recommendation is to not only track NCE scores, but also NCMHCE scores (as the NCMHCE has been approved as an alternate acceptable licensing exam in TX). In addition, due to the slow turnaround times for exam scores to be sent to the Texas licensing board for students who took the exam pre-graduation, it has been decided to inform students of the wait time and recommend taking the exam post-graduation.

Program Data Type 12 – Alumni Feedback

This academic year, data was obtained from both the alumni survey (9 graduates from 2013-2019) and the graduate student questionnaire (21 graduates of 2019) via constant contact. The average scores from both documents were included for the 2018-2019 data below. A total of 30 alumni answered the alumni questions. Overall, alumni reported that the program met the standards with the set benchmark of a 2.0. Alumni (ranging from graduates from 2013-2019) reported five areas that were under the benchmark of a 2.0 from the alumni survey. These five areas included: Research and Program Evaluation, Crisis and Trauma, Psychopathology, Addiction, and Foundations and context of clinical mental health counseling. It is likely that due to the wide range of graduation dates, that some of the areas have been improved upon in the recent years (i.e. since CACREP accreditation in 2017). When combined with the data from the 2019 graduates (from the Graduate Student Questionnaire- GSQ), the average scores for all of the standards met the benchmarks of 2.0. It was noted that even with this combination, the area of psychopathology just barely met the benchmark as it had an average rating of 1.995 or 2.0. It was recommended that the Psychopathology course be restructured and the revised syllabus will be implemented during the next academic year.

Improvements/Modifications Recommended:

It is recommended to utilize the updated Alumni Survey and GSQ as baseline data that can be compared to future data recorded in the coming years.

Program Data Type 13 – Stakeholder/Constituent Feedback

Seven stakeholders returned survey responses and 100% of respondents indicated the program met or exceeded standards.

Improvements/Modifications Recommended:

The response rate decreased from last year where there were 11 respondents compared to the seven respondents this year. The recommendation is to continue with the use of a committee that will assess

and make proposals for modifying the process to obtain stakeholder/constituent contact information. The MHC faculty will continue to explore how to improve the response rate.

Program Data Type 14 – Faculty to Student Ratios

Student to Faculty ratios were calculated at 5.3:1 for the Fall 2018 semester and 3.36:1 for the Spring 2019 semester for the 2018-2019 academic year, which is less than the 12:1 as established by CACREP. This ratio will continue to be monitored as program enrollment grows, and in light of the addition of two new core faculty members who will begin teaching in the fall of 2019.

Improvements/Modifications Recommended:

Based off the recommendation from last year to convene a faculty search, two core faculty members were recruited to the program. It is recommended to include the formulas utilized to obtain the Student to Faculty ratio and the Full-Time Equivalency MHC faculty within the Assessment Plan for next year to provide consistency and clarity.

Program Data Type 15 – Faculty Utilization

Of the 21 courses taught in academic year 2018-2019, three courses had enrollment that were above 100% optimum capacity, eleven courses had enrollment between 50-99% optimum capacity, and seven courses had enrollment at less than 50% optimum capacity. The Optimum Capacity levels for required courses remain set at 25 students enrolled, with the exception of auxiliary and independent study courses and clinical practice courses. CACREP establishes a maximum limit of 12 students per Clinical Practicum or Clinical Internship Courses (if students are receiving individual supervision at their site) and 12 for Helping Relationships and Group Counseling and these recommendations have been adopted. Counseling program course rotations are continuously updated and Faculty Utilization data will be monitored in coming academic years.