

Student Outcomes Assessment and Success Report AY2019-20

Consult with your college dean's office regarding due date and how to submit. Deans will submit reports to the Office of Assessment & Accreditation annually by October 15.

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Part 1a: Summary of Student Learning Outcomes Assessment

NOTE: If data from Spring 2020 is missing due to COVID-19 transition issues, please describe these issues, their impact on your ability to assess student learning, and what, if anything, will change as a result.

<p>a. What learning outcomes did you assess this past year?</p> <p>If this is a graduate program, identify the Graduate Student Learning Outcome each outcome aligns with.</p>	<p>b. (1) What assignments or activities did you use to determine how well your students attained the outcome? (2) In what course or other required experience did the assessment occur?</p>	<p>c. What were your expectations for student performance?</p>	<p>d. What were the actual data/results?</p>	<p>e. What changes or improvements were made or will be made in response to these assessment results or feedback from previous year's report? Can expand on this in Part 2.</p>
<p>1. 1.3: Students will use counseling theories to conceptualize client concerns</p> <p>CGPS SLO G1: Students demonstrate professional communication proficiencies.</p> <p>G4: Students achieve mastery of the knowledge required in their discipline or profession.</p>	<p>Students complete case conceptualizations in multiple courses in their clinical sequence (COUN533, COUN634, COUN739D, & COUN740). A brief oral conceptualization is completed in COUN533 as an introduction to the process, but then each semester of the clinical sequence, students complete oral and written case conceptualizations on a minimum of two clients per semester.</p>	<p>Students are expected to obtain an overall score of at least 80 out of 100 possible on each of their case conceptualizations (both the written and oral are out of 100).</p>	<p>Students in their practicum (COUN 634) earned scores on the written case conceptualization of 87.64 (out of 100) and 90.65 on their oral presentations (also out of 100). During their fall internship (COUN 739D) students (all now graduated) earned 90.88 on their written case conceptualizations 90.69 on their oral presentations.</p> <p>During their advanced internship (COUN 740) students average written case conceptualization was 93.875 and their oral presentation was 97.13.</p>	<p>Last year a recommendation was made that where the rubric indicates "Meets Expectation" that the wording may need to change because the description in some areas under this area is "MC data is sketchy and/or incomplete" which does not signify Meets Expectation. We are shifting language to address this issue and new language should be in place for the practicum and advanced internship class in Spring 2021 and will be able to provide more information about the impact of this change in future reports. Additionally, in the past year we had new faculty teaching courses which had impacted the scoring. We have made improvements to our scoring through discussions on the</p>

				grading rubrics and through averaging scores between faculty, when possible, to create a more consistent score.
<p>2. 2.2: Students will demonstrate skill in working with diverse populations</p> <p>CGPS SLO: G2: Students engage in and meaningfully contribute to diverse and complex communities and professional environments.</p> <p>G3: Students recognize and act on professional and ethical challenges that arise in their field or discipline.</p>	<p>In addition to their observed clinical opportunities with diverse populations in a community facing clinic, a section of the case conceptualization includes skill around working with diverse populations. This is measured in COUN533, COUN634, COUN739D, and COUN740 through oral and/or written case conceptualizations.</p>	<p>Students are expected to obtain a score of 4 out of 5 on this section of the case conceptualization rubric. We expect the students to follow the RESPECTFUL including areas of</p> <ul style="list-style-type: none"> • Religious – Spiritual Background • Economic Class Background • Sexual Identity • Psychological Maturity: • Ethnic • Chronological Developmental Challenges: • Trauma and Other Threats to One’s Well-Being: • Family History and Dynamics: • Unique Physical Characteristics: • Location of Residence and Language Differences: 	<p>During practicum students average score was 4.09 in the written area and 4.31 on the oral case conceptualization (both out of 5).</p> <p>In Internship Students averaged 4.0 on the written and 4.5 on the oral presentations. In Advanced internship students scored 4.75 on the written and 4.6 on the oral (both out of 5 in this area)</p>	<p>We have not made substantive changes to this area in the past year, however, we have continued to focus our coursework to more comprehensively include discussion related to diverse populations, particularly in relation to financial diversity, and cultural diversity in our coursework. As compared to the 18-19 SOAS report, students this year have scores that were lower this year and we believe more accurately reflected students showing growth while continuing to have room to grow in this area. Additionally, our faculty teaching these courses have been new to grading these assignments, and we are working with each other to ensure consistency and reliability of grading. In sections taught with colleagues we grade and average the scores to ensure more reliability of the scores.</p>
<p>3. 3.2: Students will accurately conceptualize client problems according to theory and best practices</p>	<p>Two additional sections of the case conceptualization include the application of counseling theory to clinical</p>	<p>Two sections of the oral case conceptualization rubric cover this student learning outcome. Two sections of the written case</p>	<p>In their practicum semester, students’ average scores were 13.98 & 13.03 on the written components. During</p>	<p>This learning outcome is tied to the same assignment as the previous learning outcomes. And as such, we</p>

<p>CGPS SLO: G1: Students demonstrate professional communication proficiencies. G4: Students achieve mastery of the knowledge required in their discipline or profession.</p> <p>G5: Students achieve mastery of the skills (including using appropriate tools) required in their discipline or profession.</p>	<p>practice and the student's ability to conceptualize the clinical case from a theoretical perspective. Students must consider presenting issues and assessment of the client, client goals, diagnostic impression, and theoretical orientation in a succinct but thorough manner.</p>	<p>conceptualization cover this area of student learning. Students are expected to obtain a minimum of 13 of 15 points on "Diagnostic Impression" and "Case Conceptualization."</p> <p>The Oral case conceptualization includes a video section where students demonstrate their mastery of skills and show their ability to conceptualize client problems. Students are expected to obtain 13 out of 15 points on the 'Counselor's Assessment of the Problem' and 'Progress in Counseling.'</p>	<p>the Internship semester, students' average scores on the written components were 14.6 & 13.63. During the Advanced Internship semester, students' written scores for these components were 14.63 & 14.5.</p> <p>Students received average scores of 13.48 & 13.57 on the oral components of Diagnostic Impression and Case conceptualization respectively in practicum, 14 & 13.71 in internship and 14.3 & 14.46 in advanced internship.</p>	<p>are addressing the meeting expectations language as of Spring 2021 in Practicum and Advanced Internship. As noted in the previous section, our students scored lower this year than they did in the last year. However, the scores this year showed growth over the course of the time that students were in the program with students in practicum scoring lowest (13.98 and 13.03), internship scoring in the middle (14.6 and 13.63) and students almost ready to graduate scoring the highest (14.6 and 13.63). This demonstrates student growth over their time in the program. Unrelated to the scores we have modified the texts the order we will be providing texts in and have eliminated one text we have been requiring. However, this was unrelated to the coursework.</p>
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Note: If you would like to report on more than three outcomes, place the cursor in the last cell on the right and hit "tab" to add a new row.

Helpful Hints for Completing this Table

- a. Use your outcomes library as a reference. Note any alignment with professional standards, as applicable.
- b. Each outcome should be assessed by at least one direct measure (project, practica, exam, performance, etc.). If students are required to pass an examination to practice in the field, this exam should be included as one of the measures. At least one of the program's outcomes must use an indirect measure (exit interview, focus group, survey, etc.). Use your curriculum map to correlate outcomes to courses. Describe or attach any evaluation tools such as rubrics, scales, etc.
- c. Identify the score or rating required to demonstrate proficiency (e.g., Students must attain a score of "3" to be deemed proficient; at least 80% of students in the program will attain this benchmark.)
- d. Note what the aggregate level of proficiency actually was and the number of students included in the cohort or sample (e.g., 85% of the 25 students whose portfolios were reviewed met the established benchmark).

Part 1b: Review of Student Success Data & Activities

Use [Blue Reports](#) to generate the following information (as well as any other information helpful to you). A dashboard has been created in the Chairs view:

- 1) Cohort Sizes 15 and 8
- 2) Year-to-Year Retention 89% (2 students left, one transferred to a psy.d program, and one changed programs.
- 3) 5-Year Graduation Rate (undergraduate); Average time to completion (graduate) 2 years

The Clinical Mental Health Counseling program is intensive in clinical practice and face to face work. Students are in practicums and internships throughout the local community as well as the surrounding areas such as in Indianapolis and Paris Illinois. Communication and clinical supervision with our students is vital and we pride ourselves on staying connected with our graduate students. Particularly due to COVID, during the academic year 2019-2020, we allowed students more flexibility in completing requirements for Internship. Students were allowed to complete oral presentations online, and we worked with internship sites to facilitate students continuing to receive clinical experiences virtually. While stressful as a whole, this was helpful for students, and allowed students to complete their coursework while continuing to develop as clinicians. We continued the practice this year as well with many of our internship students at sites that are entirely, or mostly, online. Additionally, we have worked to modify the counseling clinic in the William and Norma Grosjean Clinic to allow students to meet with clients via telehealth on an as needed basis. Despite the pandemic and sites moving to a virtual environment, all of our students in advanced internship completed their hours. Students currently in internship are actively making up ground with regard to required hours, and we anticipate students' ability to accomplish all required hours.

What are the most significant opportunities for improvement upon which to focus in the coming year?

Due to the pandemic and potential instability of sites remaining open, we have been as flexible as possible in working with sites to ensure that students get the experiences they need while continuing to have a robust experience that will help them develop into excellent counselors and social justice advocates. Additionally, due to shifting roles in relation to internship coordination along with stressors and requirements from sites along with having a larger cohort than in previous years thereby requiring more sites, we continue to need to develop our communication with sites and site supervisors.

What are the most significant opportunities for improvement upon which to focus in the coming year?

Part 1c: Summary of Career Readiness Activities – required for undergraduate programs; optional for graduate programs

If you submitted a report last year, you only need to resubmit if there are changes to your current career readiness competencies map.

Graduate program – we chose not to provide as our program is specifically designed to prepare clinicians to be licensed upon graduation in their field.

If you have not previously done so, please submit your Career Readiness Competencies curriculum map along with this report as a separate attachment. You can find the template here: <https://www.indstate.edu/assessment/plan-components>

Part 2: Continuous Quality Improvement

Reflect on the information shared above regarding student learning, success, and career readiness. In no more than one page, summarize:

- 1) the discoveries assessment and data review have enabled you to make about student learning, success, and career readiness

- a. Between our assessments and interviews with our sites and employers, we will continue to review the course offerings and content of courses to make sure our content is relevant to issues the counselors are likely to face. In the last year we have focused on adding trauma-informed care is something that we address in each of our courses. Additionally, to ensure that students have a practical experience with assessing and treating trauma we have added the adverse childhood experiences scale (a childhood trauma scale) as an intake assessment for new clients in the Grosjean clinic to ensure that our students are aware of the trauma that clients present with. We place all of our students in clinical positions or graduate programs upon graduation and they are successful in those endeavors. We conduct yearly site and alumni surveys and these responses regularly report our students as highly best prepared to fill positions upon graduation as compared to graduates from other programs. An area for improvement is the use of Electronic Medical Records, this is something that we made some progress on in the last year, however, we have not been able to find an EMR system that would work well with each portion of the Grosjean clinic (Porter, Rowe and Counseling clinic) and that we can afford. This is something we continue to seek. The Clinical Mental Health Counseling Program is intensively in person. We continue to strive to be able to make modifications to work within the needed online environment due to COVID, this is a continued area of growth for us.
- b. As noted, students scores show improvement from practicum to internship to advanced internship as we would expect. This clearly demonstrates continued learning and understanding of how to conceptualize clients, situations, and their skills in working with clients. Additionally, Sites and employers continued recognition that we our students are well prepared and are skilled in diagnosis, techniques, and conceptualization of clients. As such, student knowledge is clearly translating to career readiness and success in the field. Our students also experience a very high rate of employment in the field (100% placement is typical in our program and true for students that graduated in May 2020). The factors, when taken in combination are clear evidence of the success of our program in preparing students.

2) findings-based plans and actions intended to improve student learning and/or success (expansion of Part 1a, box e as needed)

- a. When students move into the field they typically use electronic management record systems. Our current lack of an EMR presents a challenge to many of our students upon entering internship. Students are typically able to make this transition well, but, moving the Counseling Clinic to an EMR would present students with an opportunity to learn these systems when surrounded by faculty and would enhance the ease of their transition into the field.

3) what your assessment plan will focus on in the coming year

- a. For accreditation purposes as a faculty we have chosen to focus on counselors roles and responsibilities as members of an interdisciplinary community, and strategies for identifying and eliminating barriers, prejudices and processes of intentional and unintentional and discrimination. These will align with CGPS standards 2 and 3. We will also continue to assess student excellence in their knowledge and skills through the case conceptualization assignment as this particular assignment, conducted multiple times in the program gives us the most comprehensive understanding of student progress of any assessment we use.

4) how this information will be shared with other stakeholders This information is shared via our web-site through our accreditation report each year. We also discuss our areas of focus, and areas of concern with site supervisors on a regular basis.

Thank you so much for sharing your assessment process and findings for AY 2019-20 with the Assessment Council. You will find feedback and ratings on the rubric below. It is understood that some of the feedback might encompass practices that you already engage in but were not documented in this report. As the purpose of this evaluation is focused on recognizing great work and helping faculty improve assessment practice, it is not necessary to retroactively add documentation. Please feel free to let me know if you have any questions or if there is any way I can assist you in further developing assessment practice and use in your program.

This report will be shared with the Associate Dean(s) and Dean of your college and summarized findings will be shared as composite college/institutional data with the President's Office and the Provost's team.

Sincerely,

Kelley (x7975)

Program: MS Clinical Mental Health Counseling	Overall Rating: Exemplary (3.00/3.00)
Strengths	Recommendations
<ul style="list-style-type: none"> • This report clearly documents exemplary assessment practice. • Learning outcomes are clear and aligned to relevant standards. • Measures are direct, related to high impact practice, and are designed to progressively demonstrate student learning and performance gains relative to aligned learning outcomes. • Evaluation of student performance is rubric-based, and sections of the rubric clearly align with distinct learning outcomes in order to best interpret student performance at the outcome-level. • Expectations of student performance are reasonable, and reporting of actual performance demonstrates a clear progression of student learning over time, allowing faculty to see positive growth or pinpoint unexpected results. This allows faculty to compare student growth within the cohort rather than just between cohorts. This is so valuable because of the differences that may exist between cohorts, especially with the influence of COVID. • Excellent information is provided on how faculty have addressed the quality of evaluation in the assessment process, from improving language in the rubric to addressing rubric use by faculty experience. Such efforts will surely yield more accurate data to allow for improved planning. • Clear information is provided about faculty collaborative involvement at different points in the assessment process beyond just the sharing of results. 	

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| <ul style="list-style-type: none">• Excellent insights are described from the follow-up assessment with program graduates pertaining to demands in the field that can influence curriculum and tools to better prepare students. | |
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Evaluation Criteria	3 Exemplary	2 Mature	1 Developing	0 Undeveloped
Student Learning Outcomes	<p>Identified, aligned learning outcomes are specific, measurable, student-centered, and program-level. Outcomes directly integrate institution or college-level learning goals.</p> <p>Outcomes are consistent across modes of delivery (if applicable).</p> <p>More than one outcome is assessed this cycle, and rationale is provided for why they were selected for assessment.</p>	<p>Identified, aligned learning outcomes are specific, measurable, student-centered, and program-level. Outcomes support institution or college-level learning goals.</p> <p>Outcomes are consistent across modes of delivery (if applicable).</p> <p>At least one outcome is assessed this cycle, and rationale is provided for why it was selected for assessment.</p>	<p>Learning outcomes are identified and alignment with courses is demonstrated.</p> <p>Outcomes are consistent across modes of delivery (if applicable).</p> <p>At least one outcomes is assessed this cycle.</p>	<p>No (program) learning outcomes are identified, and/or alignment of learning outcomes to courses is not demonstrated (e.g. – curriculum map).</p>
Performance Goals & Measures	<p>Performance goals are clear and appropriate, and rationale is provided for why these were selected.</p> <p>Identified measures and tools are assigned to each outcome, are clear and intentionally designed to address student performance on aligned outcomes, and rationale and examples are provided (e.g. – rubrics, checklists, exam keys). Most are direct measures, and their design enhances the validity of findings.</p> <p>Licensure exams and high-impact practices are reflected in measures (if applicable).</p>	<p>Performance goals are clear and appropriate.</p> <p>Identified measures and tools are assigned to each outcome, are clear and intentionally designed to address student performance on aligned outcomes, and examples are provided (e.g. – rubrics, checklists, exam keys). At least one direct measure is included.</p>	<p>Performance goals are identified with little rationale or clarity.</p> <p>Identified measures are poorly suited to performance goals, underdeveloped, or are solely indirect measures.</p>	<p>No goals for student performance of learning outcomes are identified, and/or no measures are provided.</p>

Analysis & Results	<p>Data collection process is clear and designed to produce valid/trustworthy results. The process is useful to those collecting and/or interpreting data.</p> <p>Data is collected and analyzed with clear rationale and description.</p> <p>Results are provided with thoughtful discussion of analysis and description of conclusions that can be drawn.</p>	<p>Data collection process is clear and designed to produce valid/trustworthy results.</p> <p>Data is collected and analyzed with clear rationale and description.</p> <p>Results are provided with some discussion of analysis.</p>	<p>Description of data collection is unclear as to process and quality.</p> <p>Some data is collected and analyzed with little rationale or description.</p> <p>Some results are provided with no discussion of analysis.</p>	<p>No information is provided about the data collection process, and/or no data is being collected.</p> <p>No results are provided</p>
Sharing & Use of Results for Continuous Improvement	<p>A plan for sharing information and included program faculty and appropriate staff in discussion and planning is detailed and enacted. Outcomes and results are easily accessible on the program website or other appropriate designated area.</p> <p>Plans for improvement or change based on results are clear and connected to results. If few students met performance goals, this is included in discussion and plans.</p> <p>Reflection if offered about results or plans moving forward, and compares prior year plans to current outcomes in an effort to foster continuous improvement as a result of assessment process.</p>	<p>A plan for sharing information broadly across program faculty is detailed and enacted.</p> <p>Plans for improvement or change based on results are clear and connected to results. If few students met performance goals, this is included in discussion and plans.</p> <p>Reflection is offered about results or plans moving forward.</p>	<p>Information is provided about sharing results, but sharing is limited in scope or content.</p> <p>Plans for improvement or change based on results are incomplete, vague, or not clearly connected to results.</p> <p>Little reflection is offered about results or plans moving forward.</p>	<p>No information is provided about sharing results and/or plans for improvement or change based on results.</p> <p>No evidence of reflection on results in provided.</p>
Overall Rating	<input checked="" type="checkbox"/> Exemplary	<input type="checkbox"/> Mature	<input type="checkbox"/> Developing	<input type="checkbox"/> Undeveloped

Please see reviewer notes for more details.