BOSTON UNIVERSITY

MENTAL HEALTH COUNSELING & BEHAVIORAL MEDICINE PROGRAM

DIVISION OF GRADUATE MEDICAL SCIENCES
BOSTON UNIVERSITY SCHOOL OF MEDICINE

Comprehensive Evaluation Plan
Annual Report 2020-2021

PROGRAM INTRODUCTION

The Mental Health Counseling and Behavioral Medicine (MHCBM) Program is a two-year Master of Arts program designed to meet the educational requirements for licensure as a Mental Health Counselor in the Commonwealth of Massachusetts as granted by the Massachusetts Board of Allied Mental Health Professions. Program faculty also work closely with students to ensure that they meet requirements for licensure in states all across the country.

The curriculum consists of a combination of academic coursework and clinical fieldwork experiences that align with the standards set forth by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). The program is CACREP-accredited in the specialty area, Clinical Mental Health Counseling. Students generally complete the program in two years of full-time study. Students are encouraged to identify topics of interest and are provided with education and experience related to those interests. They are also exposed to a wide array of patient populations, clinical topics, and career paths.

Students are very well-trained in clinical assessment and diagnosis, theory and application, and modalities of care. The Program's emphasis on behavioral medicine and neuroscience provides students with a unique education in integrated care. Teaching faculty, in fact, routinely integrate physical health/wellness and behavioral health throughout the curriculum. Because the Program is housed in an academic medical center, students have a unique opportunity to avail themselves of research, clinical, and training opportunities throughout the center and are exposed to cutting-edge therapies and interventions.

PROGRAM EVALUATION

The Program has developed a Comprehensive Evaluation Plan to systematically evaluate its objectives as well as student learning with the overarching goal of curriculum and program improvement. Data from multiple sources are collected and analyzed throughout the academic year. Thus, program modifications are data-driven and empirically-based through the use of objective information systematically collected from faculty and site supervisors at planned timepoints in time throughout the academic year. The culmination of the evaluation process is an annual report.

This report illustrates the degree to which the MHCBM Program met its three objectives during the 2020-2021 academic year. The data and findings highlighted in this reported are based on the assessment of the 1st- and 2nd-year cohorts of students (Class of 2021 and 2022). Findings from these assessments resulted in action items and program modifications to ensure that the Program is meeting its objectives and students are obtaining requisite knowledge and skills for working in behavioral healthcare as license-eligible mental health counselors. Program evaluation is a continual agenda item on the faculty and staff meetings throughout the academic

year. Assessment procedures, data collection strategies and tools, the comprehensive student database, and analytic methods are reviewed and discussed.

At the conclusion of each academic year, the core faculty and staff hold an annual retreat to analyze the data and findings for identifying action items and needed program modifications. The Program's CACREP liaison is responsible for spearheading this effort and writing the annual report, which is subsequently disseminated electronically via the Program's website.

PROGRAM ASSESSMENT AND THE 2016 CACREP STANDARDS

The Program's objectives were revised in 2019 to adhere to the 2016 CACREP Standards. The objectives and corresponding evaluation measures are as follows:

The MHCBM Program's objectives are to:

1) Instill in students the knowledge, skills, attitudes, and values that uniquely embody clinical mental health counselors
   a. Measure: Aggregate student assessment data on key performance indicators of student knowledge, skills, and professional dispositions
   b. Measure: Data from systematic follow-up studies of graduates, site supervisors, and employers of program graduates
2) Educate and train students of varied backgrounds, identities, and experiences as part of a vibrant learning environment that reflects the diverse communities in which they will be working
   a. Measure: Demographic and other characteristics of applicants, students, and graduates
   b. Measure: Data from systematic follow-up studies of graduates, site supervisors, and employers of program graduates
3) Prepare students for the process to become licensed to practice as mental health counselors within the healthcare workforce
   a. Measure: Data from systematic follow-up studies of graduates, site supervisors, and employers of program graduates

Coursework and Standards Matrix

The table below documents where each of the 2016 CACREP Standards for the eight core areas as well as the specialty area, clinical mental health counseling, is found in the Program curriculum.

Table 1

2016 CACREP Standards	Techniques	Group	Psychopath	Research	Assessment	Orientation Neuro	Theory	S&CF	Neuro	Psychopharm	Practicum	Internship	HG&D	BMed	Addictions	Ethics	Career
II.F.1.a						X											
II.F.1.b						X								X			
II.F.1.c						X											
II.F.1.d						X											
II.F.1.e						X											
II.F.1.f						X											
II.F.1.g						X											
II.F.1.h						X											
II.F.1.i						X										X	
II.F.1.j						X											
II.F.1.k									X								
II.F.1.l						X											
II.F.1.m						X											
II.F.2.a								X									
II.F.2.b			X			X	X	X						X			
II.F.2.c						X		X									
II.F.2.d								X									
II.F.2.e	X				X	X											
II.F.2.f								X									
II.F.2.g								X									
II.F.2.h						X		X									
II.F.3.a													X				
II.F.3.b													X				
II.F.3.c			X						X								
II.F.3.d									X						X		
II.F.3.e									A					X			
II.F.3.f								X					X				
II.F.3.g						X											
II.F.3.h													X	X			
II.F.3.i								X	X								X
II.F.4.a																	X
II.F.4.b																	X
II.F.4.c																	X
II.F.4.d																	X
II.F.4.e																	X
II.F.4.f																	X
II.F.4.g																	X
II.F.4.h																	X
II.F.4.i																	X
II.F.4.j																	X
II.F.5.a							X										
II.F.5.b							X										
II.F.5.c						X											
II.F.5.d						X										X	

2016 CACREP Standards	Techniques	Group	Psychopath	Research	Assessment	Orientation (Neuro)	Theory	S&CF	Neuro	Psychopharm	Practicum	Internship	HG&D	BMed	Addictions	Ethics	Career
II.F.5.e						X										X	
II.F.5.f	X																
II.F.5.g	X						X										
II.F.5.h			X									X					
II.F.5.i												X					
II.F.5.j												X		X			
II.F.5.k														X			
II.F.5.l						X										X	
II.F.5.m						X											
II.F.5.n							X										
II.F.6.a		X															
II.F.6.b		X															
II.F.6.c		X															
II.F.6.d		X															
II.F.6.e		X															
II.F.6.f		X															
II.F.6.g		X															
II.F.6.h		PG*															
II.F.7.a					X	X											
II.F.7.b					X												
II.F.7.c					X												
II.F.7.d					X	X									X		
II.F.7.e					X												
II.F.7.f					X												
II.F.7.g				X													
II.F.7.h					X												
II.F.7.i																	X
II.F.7.j					X												
II.F.7.k					X												
II.F.7.l					X												
II.F.7.m					X												
II.F.8.a				X													
II.F.8.b							X							X			
II.F.8.c				X													
II.F.8.d				X													
II.F.8.e				X													
II.F.8.f				X													
II.F.8.g				X													
II.F.8.h				X													
II.F.8.i				X													
II.F.8.j				X													
5.C.1.a						X											
5.C.1.b							X										
5.C.1.c			X									X	X				
5.C.1.d									X						X		

2016 CACREP Standards	Techniques	Group	Psychopath	Research	Assessment	Orientation Neuro	Theory	S&CF	Neuro	Psychopharm	Practicum	Internship	HG&D	BMed	Addictions	Ethics	Career
5.C.1.e					X												
5.C.2.a						X											
5.C.2.b			X														
5.C.2.c						X											
5.C.2.d			X														
5.C.2.e														X	X		
5.C.2.f			X			X											
5.C.2.g									X					X			
5.C.2.h										X							
5.C.2.i						X										X	
5.C.2.j	X		X		X	X	X	X								X	
5.C.2.k						X											
5.C.2.l						X										X	
5.C.2.m																X	X
5.C.3.a			X		X												
5.C.3.b	X										X	X					
5.C.3.c												X				X	
5.C.3.d						X								X			
5.C.3.e						X											

*PG = Process Group

Key Performance Indicators (KPIs)

As described in the 2016 CACREP Standards (Standard IV.F), KPIs need to be established for the assessment of students' knowledge and skills. Therefore, a total of 10 KPIs are identified and defined—eight corresponding to each core area; one for the Program's specialty area (i.e., clinical mental health counseling); and one specific to behavioral medicine and neuroscience.

Table 2

Key Performance Indicator	Below Expectations	Meets Expectations	Exceeds Expectations
1. *Professional Counseling Orientation and Ethical Practice*. Recognizes and applies professional ethical standards.	Does not meet expectations for level of training and experience when evaluating ethical dilemmas and establishing and maintaining relationships with clients, evidenced by one of the following:	Meets expectations for level of training and experience when evaluating ethical dilemmas and establishing and maintaining relationships with clients, evidenced by both of the following:	Surpasses expectations for level of training and experience when evaluating ethical dilemmas and establishing and maintaining relationships with clients, evidenced by the following:

Key Performance Indicator	Below Expectations	Meets Expectations	Exceeds Expectations
	• Does not demonstrate understanding of ethical standards • Does not demonstrate synthesis of professional ethical standards into decision making	• Understands the importance of maintaining appropriate boundaries with clients • Incorporates knowledge of ethical standards whenever establishing new professional relationships and work with clients	• Evaluates the context of a given situation and applies sound decision making skills to maintain appropriate boundaries with clients and to help them clinically
2. *Social and Cultural Diversity*. Demonstrates knowledge, awareness, skills, and attitudes of sensitivity and respect for differences related to cultural diversity.	Does not meet expectations for level of training and experience when interacting and/or collaborating with people with diverse backgrounds and identities, evidenced by one of the following: • Does not demonstrate self-awareness regarding issues of diversity • Does not demonstrate an attitude of openness regarding issues of diversity	Meets expectations for level of training and experience when interacting and/or collaborating with people with diverse backgrounds and identities, evidenced by both of the following: • Demonstrates self-awareness regarding issues of diversity • Enters into collaborative relationships with an attitude of openness regarding issues of diversity	Surpasses expectations for level of training and experience when interacting and/or collaborating with people with diverse backgrounds and identities, evidenced by both of the following: • Consistently demonstrates self-awareness regarding issues of diversity • Enters into collaborative relationships with sensitivity, respect, and awareness regarding issues of diversity
3. *Human Growth and Development*. Develops self-awareness into beliefs about what impacts the student's own development, and the	Does not meet expectations for level of training and experience when discussing beliefs about what impacts their own personal development and the	Meets expectations for level of training and experience when discussing beliefs about what impacts their own personal development	Surpasses expectations for level of training and experience when discussing beliefs about what impacts their own personal

Key Performance Indicator	Below Expectations	Meets Expectations	Exceeds Expectations
development of their clients.	development of their clients	and the development of their clients	development and the development of their clients
4. *Career Development*. Understands the history and development of career and vocational counseling.	Does not meet expectations for level of training and experience when discussing the history and development of career and vocational counseling	Meets expectations for level of training and experience when discussing the history and development of career and vocational counseling	Surpasses expectations for level of training and experience when discussing the history and development of career and vocational counseling
5. *Helping Relationships*. Develops treatment alliance and employs counseling techniques that are consistent with client presentation and the selected theoretical approach.	Does not meet expectations for level of training and experience when demonstrating counseling techniques while working with clients, evidenced by the following: • Haphazardly employs counseling skills without regard to the client's needs, and without considering the selected theoretical approach	Meets expectations for level of training and experience when demonstrating counseling techniques while working with clients, evidenced by the following: • Attends to the needs of the client, and uses counseling skills that are consistent with the selected theoretical approach	Surpasses expectations for level of training and experience when demonstrating counseling techniques while working with clients, evidenced by both of the following: • Interprets the interpersonal dynamics present and adapts to the needs of the client • Employs counseling skills that are consistent with the selected theoretical approach
6. *Group Counseling*. Understands dynamics associated with group process and development.	Does not meet expectations for level of training and experience when leading and co-leading groups, evidenced by one of the following: • Does not positively influence interpersonal dynamics • Does not demonstrate basic skills of linking,	Meets expectations for level of training and experience when leading and co-leading groups, evidenced by both of the following: • Positively influences interpersonal dynamics • Demonstrates basic skills of linking, drawing	Surpasses expectations for level of training and experience when leading and co-leading groups, evidenced by both of the following: • Demonstrates advanced skills such as immediacy and process illumination/ commentary,

Key Performance Indicator	Below Expectations	Meets Expectations	Exceeds Expectations
	drawing out, and summarization	out, and summarization	blocking, and diverting • Positively influences interpersonal dynamics that enhances group process and development
7. *Assessment and Testing*. Assesses to understand before intervening, including evaluation for suicide/homicide risk and reporting requirements.	Does not meet expectations for level of training and experience when conducting assessments to understand client presentation and needs, evidenced by the following: • Gathers information to assess needs and next steps in the counseling process, but does not demonstrate knowledge and skill in safety/risk assessments nor reporting requirements	Meets expectations for level of training and experience when conducting assessments to understand client presentation and needs, evidenced by the following: • Gathers information to assess needs and next steps in the counseling process, including safety/risk assessments and reporting requirements	Surpasses expectations for level of training and experience when conducting assessments to understand client presentation and needs, evidenced by both of the following: • Gathers information to assess needs and next steps in the counseling process, including safety/risk assessments and reporting requirements • Makes intervention decisions that are informed by a thorough assessment
8. *Research and Program Evaluation*. Critically evaluates research related to counseling practice.	Does not meet expectations for level of training and experience in critically evaluating research related to counseling practice, evidenced by the following: • Does not use this information to	Meets expectations for level of training and experience in critically evaluating research related to counseling practice, evidenced by the following: • Uses this information to	Surpasses expectations for level of training and experience in critically evaluating research related to counseling practice, evidenced by the following: • Uses this information

Key Performance Indicator	Below Expectations	Meets Expectations	Exceeds Expectations
	inform decision-making	inform decision-making	effectively and thoughtfully to inform decision-making
9. *Clinical Mental Health Counseling*. Understands and applies theories and methods derived from the mental health counseling field to the assessment, case conceptualization, prevention, and treatment of health and mental health conditions.	Does not meet expectations for level of training and experience in understanding and applying theories and methods derived from the mental health counseling field to their work with clients, evidenced by one of the following: • Conducts an inadequate assessment to understand client presentation and needs • Plans a clinically contraindicated course of treatment	Meets expectations for level of training and experience in understanding and applying theories and methods derived from the mental health counseling field to their work with clients, evidenced by both of the following: • Conducts an adequate assessment to understand client presentation and needs • Plans a clinically indicated course of treatment	• Surpasses expectations for level of training and experience in understanding and applying theories and methods derived from the mental health counseling field to their work with clients • Conducts a thorough assessment to understand client presentation and needs • Plans a coherent and appropriate course of treatment • Considers generalization of treatment gains
10. *Behavioral Medicine and Neuroscience*. Conceptualizes and demonstrates how a behavioral medicine framework and neuroscience evidence can inform mental health counseling practices.	Does not meet expectations for level of training and experience in conceptualizing and demonstrating how a behavioral medicine framework and neuroscience evidence can inform their work with clients, evidenced by the following: • Does not use this information to inform decision-making	Meets expectations for level of training and experience in conceptualizing and demonstrating how a behavioral medicine framework and neuroscience evidence can inform their work with clients, evidenced by the following: • Uses this information to inform decision-making	Surpasses expectations for level of training and experience in conceptualizing and demonstrating how a behavioral medicine framework and neuroscience evidence can inform their work with clients, evidenced by the following: • Uses this information effectively and thoughtfully to inform decision-making and treatment planning

Professional Dispositions

Professional dispositions are identified and defined per 2016 CACREP Standards (Standard IV.G). As highlighted in the Standards, a total of nine dispositions were created that encompass *"commitments, characteristics, values, beliefs, interpersonal functioning, and behaviors that influence the counselor's professional growth and interactions with clients and colleagues"*.

Table 3

Professional Disposition	Below Expectations	Meets Expectations
Written expression. Understands context, audience, and purpose, and demonstrates a clear focus on writing tasks.	Does not meet expectations for level of training with writing tasks, evidenced by the following: ● Does not write with sufficient quality regarding syntax, semantics, and overall grammar that meets professional standards	Meets expectations for level of training and experience with writing tasks, evidenced by the following: ● Writes with sufficient quality regarding syntax, semantics, and overall grammar that meets professional standards
Verbal expression. Has appropriate verbal behaviors in interpersonal interactions with clients, peers, supervisors, staff, and faculty.	Does not meet expectations for level of training and experience with verbal behaviors in interpersonal interactions with clients, peers, supervisors, staff, and faculty, evidenced by one or more of the following: ● Does not engage in challenging conversations in a respectful manner ● Does not communicate thoughts and feelings directly to other people as appropriate ● Does not integrate feedback and modify verbal behaviors	Meets expectations for level of training and experience with verbal behaviors in interpersonal interactions with clients, peers, supervisors, staff, and faculty, evidenced by all of the following: ● Engages in challenging conversations in a respectful manner ● Communicates thoughts and feelings directly to other people as appropriate ● Integrates feedback and modifies verbal behaviors
Nonverbal expression. Has appropriate nonverbal behaviors in interpersonal interactions with	Does not meet expectations for level of training and experience with nonverbal behaviors in	Meets expectations for level of training and experience with nonverbal behaviors in

Professional Disposition	Below Expectations	Meets Expectations
clients, peers, supervisors, staff, and faculty.	interpersonal interactions with clients, peers, supervisors, staff, and faculty, evidenced by the following: ● Does not nonverbally communicate attending behavior and active listening	interpersonal interactions with clients, peers, supervisors, staff, and faculty, evidenced by the following: ● Nonverbally communicates attending behavior and active listening
Professionalism. Is respectful, thoughtful, and responsive, as well as follows through and is appropriate within professional interactions, including ethical guidelines of the profession.	Does not meet expectations for level of training and experience with respectfulness, thoughtfulness, and responsiveness as well as within professional interactions, evidenced by one or more of the following: ● Does not present self professionally, both in-person and in the use of communication technology ● Does not follow through on commitments ● Does not adhere to expectations regarding assignments and scheduled meetings ● Is not responsive to all professional communications ● Does not accept responsibility for one's role in situations	Meets expectations for level of training and experience with respectfulness, thoughtfulness, and responsiveness as well as within professional interactions, evidenced by all of the following: ● Presents self professionally, both in-person and in the use of communication technology ● Follows through on commitments ● Adheres to expectations regarding assignments and scheduled meetings ● Is responsive to all professional communications ● Accepts responsibility for one's role in situations ● Adheres to academic honesty policy of university ● Takes actions in the best interests of their clients ● Recognizes and practices within ethical guidelines of the

Professional Disposition	Below Expectations	Meets Expectations
	● Does not adhere to academic honesty policy of university ● Does not take actions in the best interests of their clients ● Does not recognize and practice within ethical guidelines of the profession of clinical mental health counseling, including the ACA Code of Ethics and AMHCA Code of Ethics	profession of clinical mental health counseling, including the ACA Code of Ethics and AMHCA Code of Ethics
Emotional regulation. Is emotionally regulated and appropriate in interpersonal interactions with clients, peers, supervisors, staff, and faculty.	Does not meet expectations for level of training and experience with emotional regulation and appropriateness in interpersonal interactions with clients, peers, supervisors, staff, and faculty, evidenced by one or more of the following: ● Does not act thoughtfully rather than impulsively ● Does not effectively manage and respond to an emotional experience ● Does not effectively manage conflict ● Is not emotionally flexible and adaptable in response to social cues and others' needs	Meets expectations for level of training and experience with emotional regulation and appropriateness in interpersonal interactions with clients, peers, supervisors, staff, and faculty, evidenced by all of the following: ● Acts thoughtfully rather than impulsively ● Effectively regulates and responds to an emotional experience ● Effectively manages conflict ● Is emotionally flexible and adaptable in response to social cues and others' needs
Interpersonal boundaries. Demonstrates consistent and appropriate boundaries.	Does not meet expectations for level of training and experience	Meets expectations for level of training and experience with

Professional Disposition	Below Expectations	Meets Expectations
	with boundaries, evidenced by one or more of the following: ● Does not maintain appropriate physical and emotional boundaries ● Is not aware of one's impact on others ● Does not respect the stated boundaries of others	boundaries, evidenced by all of the following: ● Maintains appropriate physical and emotional boundaries ● Is aware of one's impact on others ● Respects the stated boundaries of others
Openness to feedback and self-reflection. Is open to feedback and implements recommended changes.	Does not meet expectations for level of training and experience with openness to feedback and self-reflection, evidenced by one or more of the following: ● Does not attempt to learn from the perspectives of others without attempting to change their position ● Is not open to learning ● Is not open to receiving feedback and does not make needed changes ● Does not seek out opportunities for personal growth, support, and any needed behavioral changes ● Is not open to risk, uncertainty, and fear	Meets expectations for level of training and experience with openness to feedback and self-reflection, evidenced by all of the following: ● Attempts to learn from the perspectives of others without attempting to change their position ● Is open to learning ● Is open to receiving feedback and makes needed changes ● Seeks out opportunities for personal growth, support, and any needed behavioral changes ● Is open to risk, uncertainty, and fear
Career goals. Has career goals in alignment with the roles and functions of professional counselors within the behavioral healthcare workforce.	Does not meet expectations for level of training and experience with engagement in promoting their growth and development as a professional counselor within the behavioral healthcare workforce,	Meets expectations for level of training and experience with engagement in promoting their growth and development as a professional counselor within the

Professional Disposition	Below Expectations	Meets Expectations
	evidenced by one or more of the following: ● Does not have career goals that align with entering and working within the helping professions ● Does not understand the identity, roles, and function of professional counselors	behavioral healthcare workforce, evidenced by all of the following: ● Has career goals that align with entering and working within the helping professions ● Understands the identity, roles, and function of professional counselors
Respect for individual and group differences. Has multicultural competencies in interactions with clients, peers, staff, faculty, and supervisors.	Does not meet expectations for level of training and experience with multicultural competencies in interactions with clients, peers, staff, faculty, and supervisors, evidenced by one or more of the following: ● Is not willing to work with people who identify cultures, backgrounds, beliefs, experiences, and values that differ from the student's own ● Does not collaborate and cooperate with others ● Does not demonstrate the core characteristics of a counselor, including unconditional positive regard, empathic understanding, warmth, and treating others with dignity, respect, and kindness	Meets expectations for level of training and experience with multicultural competencies in interactions with clients, peers, staff, faculty, and supervisors, evidenced by all of the following: ● Is willing to work with people who identify cultures, backgrounds, beliefs, experiences, and values that differ from the student's own ● Collaborates and cooperates with others ● Demonstrates the core characteristics of a counselor, including unconditional positive regard, empathic understanding, warmth, and treating others with dignity, respect, and kindness

EVALUATION OF KEY PERFORMANCE INDICATORS

The Program revised its objectives as well as identified and defined student KPIs in 2019 to align with the 2016 CACREP Standards. Each KPI is assessed at introductory and mastery levels with a specified assignment or assessment. Course instructors provide these ratings using a rubrics-driven, 3-point Likert scale: 1) Below Expectations; 2) Meets Expectations; and 3) Exceeds Expectations.

The Program maintains a database for tracking student performance on KPIs across courses and identifying areas where a student may need additional support or training. Faculty advisors meet with students after each semester to review their progress, which partly consists of an assessment of student performance on the KPIs. A make-up assignment is given if a student performs "Below Expectations" on any KPI.

KPIs are also analyzed in aggregate to determine which assignments are (or aren't) helping students demonstrate the required knowledge and skills as well as to identify KPIs in which students consistently underperform. During the summer, data collected throughout the academic year are presented to faculty at the annual retreat. The analyzed data are consequently used to guide program improvement, which may include the modification of one or more areas (e.g., course assignments, course content, instruction mode and delivery, and course sequencing).

The following timeline delineates when introductory and mastery level assignments for the KPIs are assessed.

Table 4

	1st Year		2nd Year	
	Fall	*Spring*	*Fall*	*Spring*
KPI 1	I			M
KPI 2		I		M
KPI 3		I	M	
KPI 4	I			M
KPI 5		I		M
KPI 6	I			M
KPI 7	I			M
KPI 8	I		M	
KPI 9		I		M
KPI 10		I		M

I = Introductory; M = Mastery

EVALUATION OF CORE KNOWLEDGE

The Program has used the Counselor Preparation Comprehensive Examination (CPCE) since 2014 as a summative evaluation of student knowledge across the eight core content areas. Utilized by over 400 college and university counseling programs nationwide, the CPCE meets high psychometric standards to provide the Program an objective view of the knowledge level of students. The exam is typically taken during the spring semester of students' 2nd year.

EVALUATION OF PROFESSIONAL DISPOSITIONS

As with the KPIs, the professional dispositions were identified and defined in 2019. Per 2016 CACREP Standards, the Program's faculty systematically and continually assesses each student's professional dispositions at the following timepoints: 1) admissions interview; and 2) end of the 1st, 2nd, and 3rd semesters of study. Evaluation can also occur at any point during the Program when a student demonstrates problems with professional dispositions. The following rubric is used for assessing professional dispositions and the program's response.

Table 5

	Below Expectations	Meets Expectations
Program Action	Applicant: may be declined admission to the Program. Student: must participate faculty-determined remediation activities. Students who continue to demonstrate problematic professional dispositions during or following remediation may be dismissed from the Program.	No action required. Student is meeting or exceeding expectations of the Program.

FINDINGS OF KPIS, CPCE, PROFESSIONAL DISPOSITIONS, DEMOGRAPHICS, EMPLOYMENT, & LICENSURE

KPIs
The tables below outline overall student performance on the KPIs at the Introductory level for the 1st-year cohort and the Introductory and Mastery levels for the 2nd-year cohort.

Table 6. Key Performance Indicators for the 1st-Year Cohort (Class of 2022)

	Introductory			
	n	%BE	%ME	%EE
KPI 1	44		37.8	62.2
KPI 2	44		43.2	56.8
KPI 3	45*		53.3	46.7
KPI 4	45*		9	91
KPI 5	45*		51	49
KPI 6	44		79.5	20.5
KPI 7	45*		64.4	35.6
KPI 8	45*		26.7	73.3
KPI 9	45*		55.6	44.4
KPI 10	46**		93.5	6.5

BE = Below Expectations; ME = Meets Expectations; EE = Exceeds Expectations
*One part-time student is included
**One part-time and one returning student are included

Table 7. Key Performance Indicators for the 2nd-Year Cohort (Class of 2021)

	Introductory				Mastery			
	n	%BE	%ME	%EE	*n*	%BE	%ME	%EE
KPI 1	35		45.7	54.3	32		59.4	40.6
KPI 2	34		88.2	11.8	32		46.9	53.1
KPI 3	34		11.8	88.2	33		36.4	63.6
KPI 4	35	14	66	20	32		81	19
KPI 5	34	3	65	32	32		44	56
KPI 6	35		91.4	8.6	32		37.5	62.5
KPI 7	35		91.4	8.6	32		59.4	40.6
KPI 8	35		87.5	12.5	33	9.1	63.6	27.3
KPI 9	34	2.9	97.1		32		46.9	53.1
KPI 10	35		100		33	3	66.7	30.3

BE = Below Expectations; ME = Meets Expectations; EE = Exceeds Expectations

Table 6 illustrates that the entire 1st-year cohort met or exceeded expectations across all KPIs at the Introductory level.

As shown in Table 7, the most significant negative findings are as follows: 1) 14% of 2nd-year students scored "Below Expectations" on KPI 4 (Career Development) at the Introductory level; 2) one student failed their practicum training and thus scored "Below Expectations" on KPI 9 (Clinical Mental Health Counseling) at the Introductory level; and 3) 9.1% of students scored "Below Expectations" on KPI 8 (Research & Program Evaluation) at the Mastery level.

CPCE
Table 8 delineates the CPCE scores for the Class of 2021. The three lowest scores correspond to the following content areas: Human Growth and Development, Social and Cultural Diversity, and Assessment and Testing. Because students nationwide (N = 800) had the lowest scores in these same three areas, whether Program students were relatively underprepared in these areas or the exam's questions were the most difficult across these domains is unclear at first glance. In comparison, the three lowest scores of the Class of 2020 were for Assessment and Testing, Social and Cultural Diversity, and Research and Program Evaluation. This cohort's highest score, in contrast, was for Human Growth and Development (mean = 77%), which was the lowest score for the following cohort at 61%. In parallel, students across the nation that year (N = 1,105) scored lowest on the same three domains. Thus, a patterns seems to be that our students perform the poorest in the CPCE content areas that have the most challenging questions, especially regarding Social and Cultural Diversity and Assessment and Testing.

Table 8. CPCE scores for the 2nd-Year Cohort (Class of 2021)

Content Area	Mean Score (%)
Professional Counseling Orientation and Ethical Practice	89
Social and Cultural Diversity	62
Human Growth and Development	61
Career Development	72
Counseling and Helping Relationships	72
Group Counseling and Group Work	79
Assessment and Testing	68
Research and Program Evaluation	78
Total	*73*

Professional Dispositions

Table 9 shows the 1st-year students' ratings on the identified professional dispositions at the first two assessment timepoints (Time 3 is at the Fall semester of Year 2). Not only did students meet expectations across all dispositions when first assessed, they maintained this level of performance at the second timepoint.

Table 9. Professional Dispositions for the Class of 2022

	Time 1			Time 2		
	n	%BE	%ME	*n*	%BE	%ME
Written Expression	45*	0	100	46	0	100
Verbal Expression	46	0	100	46	0	100
Nonverbal Expression	46	0	100	46	0	100
Comportment	46	0	100	46	0	100
Emotional Regulation	46	0	100	46	0	100
Interpersonal Boundaries	46	0	100	46	0	100
Openness to Feedback	46	0	100	46	0	100
Career Goals	46	0	100	46	0	100
Respect for Individual & Group DIfferences	46	0	100	46	0	100

BE = Below Expectations; ME = Meets Expectations
*Data unavailable for one student

Table 10 illustrates 2nd-year students' performance on the professional dispositions across all assessment timepoints. As can be seen, significant progress was observed in six of the nine dispositions from Time 1 to Time 2. All students met expectations at Time 3 as well.

Table 10. Professional Dispositions for Class of 2021

	Time 1			Time 2*			Time 3**		
	n	%BE	%ME	*n*	%BE	%ME	*n*	%BE	%ME
Written Expression	36	8.3	91.7	35	0	100	33	0	100
Verbal Expression	36	11.1	88.9	35	0	100	33	0	100
Nonverbal Expression	36	2.8	97.2	35	0	100	33	0	100
Comportment	36	11.1	88.9	35	0	100	33	0	100
Emotional Regulation	36	5.6	94.4	35	0	100	33	0	100
Interpersonal Boundaries	36	0	100	35	0	100	33	0	100
Openness to Feedback	36	2.8	97.2	35	0	100	33	0	100
Career Goals	36	0	100	35	0	100	33	0	100
Respect for Individual & Group DIfferences	36	0	100	36	0	100	33	0	100

BE = Below Expectations; ME = Meets Expectations
*One student took a leave of absence
**One part-time student is not included, one student took a leave of absence, and one student withdrew

Student Demographics
Table 11 outlines the demographic data of all matriculated students during the 2020-2021 academic year. Across the two cohorts, 85% identified as female, 12.5% as male, and 2.5% as other. Seventy percent of all students identified as White. In contrast, 6.2% were African-American/Black, 25% were Asian, 18.8% were Hispanic/Latino, and 5% were multi-racial. This year's students also comprised 8.8% of international status.

Table 11. Student Demographics (2020-2021; N = 80)*

	Male (%)	Female (%)	Other (%)
African-American/Black	0 (0)	5 (7.4)	0 (0)
American Indian/Native Alaskan	0 (0)	0 (0)	0 (0)
Asian	2 (20)	18 (26.5)	0 (0)
White	8 (80)	46 (67.6)	2 (100)
Hispanic/Latino	3 (30)	11 (16.2)	1 (50)
Native Hawaiian/Pacific Islander	0 (0)	0 (0)	0 (0)
Multiracial	0 (0)	4 (5.9)	0 (0)
International Student/Non-Resident	0 (0)	7 (10.3)	0 (0)

*Males = 10 (12.5%); Females = 68 (85%); Other = 2 (2.5%)

Table 12 outlines characteristics of the 2020-2021 pool of student applicants (N = 360).

Sex/Gender	Race/Ethnicity	First Generation College Student	Citizenship/Residence Status	Age
Male = 13%	Hispanic/Latino = 10.3%	No = 75.3%	Non-U.S. = 21.9%	Mean = 23.7 years
Female = 85%	Asian = 30.3%	Yes = 18.3%	U.S. = 78.1%	S.D. = 3.8 years
Other = 2%	Black = 8.1%	Not reported = 6.4%		
	Pacific Islander/ Native Hawaiian = 0.6%			
	American Indian = 0.6%			
	White = 61.7%			

Findings from Graduates

To measure the Program's objectives, alumni were most recently surveyed in 2020. Because the objectives were updated in 2019 (after these former students graduated), they were asked to provide an overarching rating on the extent to which they believe that the Program meets its objectives. Of the respondents (N = 54), all but one graduate (98.2%) endorsed "Much" or Very Much" to indicate that the Program objectives are being met.

Graduates were also asked about their employment status immediately post-graduation and their licensure status. All but one (52/53; 98.1%) obtained a position within the first six months after graduating. One-hundred percent of graduates who took a licensure or certification exam and provided performance data passed their tests (N=31; 90% on the first time).

Findings from Site Supervisors and Employers

To measure the Program's objectives, data are also collected from site supervisors and employers of graduates, which was conducted most recently in 2020. Site supervisors (n = 5) and employers (n = 18) collectively rated that the Program meets its objectives to a great extent. (i.e., all ratings > "Some"). Specifically, "Very Much" was endorsed by 82.6%, 94.4%, and 78.3% of them across objectives #1, #2, and #3, respectively. The remaining respondents all endorsed "Much".

Site supervisors and employers were also asked to rate the extent that the program prepares its graduates to demonstrate knowledge and skills in the eight core counseling areas outlined in the 2016 CACREP Standards. Again, the respondents collectively provided quite high ratings (i.e., all ratings > "Some"). Specifically, "Very Much" was endorsed by 78.3% of them and the remaining respondents endorsed "Much" at 21.7%.

PROGRAM MODIFICATIONS

Program Objectives

Objective #1: *Instill in students the knowledge, skills, attitudes, and values that uniquely embody clinical mental health counselors*. One anomaly in the KPI data is that 9.1% of 2nd-year students scored "Below Expectations" on the Research & Program Evaluation indicator at the Mastery level. In contrast, those students achieved an average score of 78% on the corresponding content area of the CPCE—the third highest score on the exam and well above the Program's minimum passing score. The findings from surveys of recent graduates, site, supervisors, and employers all indicate that the Program continued to meet this objective regarding relevant knowledge and skills. In addition, students across both cohorts performed at expected levels on the assessed professional dispositions. Thus, no modifications were decided upon based on these combined data to address Objective #1.

However, revisions to two courses and the addition of a new course will be made based on the "exit interviews" of the Class of 2021 cohort and professional interest of a core faculty member, respectively. First, the Research & Evaluation and Psychopharmacology courses will be revamped to be more clinically focused and relevant to counseling. Second, Dr. Laurie Craigen will continue to spearhead efforts to develop a service learning project

in Barbados with an accompanying course, Global Mental Health. This learning activity was essentially put on hold with the onset of the COVID-19 pandemic.

Additionally, two other curricular changes will be made in response to a core faculty member resigning his position and an adjunct faculty member relocating out-of-state. First, the 1st-year courses, Theory & Practice of Child & Adolescent Counseling and Group Work Dynamics and Process, will be switched and offered in Fall 2021 and Spring 2022, respectively. Second, one section of the 2nd-year course, Behavioral Medicine and Applied Health Psychology, will be offered remotely so that the Program can retain the expertise of the adjunct professor.

Objective #2: *Educate and train students of varied backgrounds, identities, and experiences as part of a vibrant learning environment that reflects the diverse communities in which they will be working*. Demographic data of the Program students indicate that students who identify as Asian, Hispanic/Latino, or international/non-resident were well represented across the two cohorts. Characteristics less represented included male gender and African-American/Black. For prospective students, their demographic characteristics were relatively misaligned with the 2020 U.S. Census. Whereas students who identified as Asian or Pacific Islander/Native Hawai'ian were overrepresented in the applicant pool, students who are Black, Hispanic/Latino, or American Indian were underrepresented. Consistent with the data of current students, fewer prospective students who are male applied to the Program (13% of the applicants versus an estimated 25%-30% of licensed mental health counselors who identify as male nationwide).

As described in last year's Annual Report, our most recent student recruitment and retention efforts have included the following activities: 1) prioritizing non-traditional students (i.e., individuals with life/work experience who may not have had the privilege of attending graduate school immediately after their undergraduate education); 2) identifying socially conscious students with demonstrated commitment to diversity in their actions/behaviors; 3) utilizing strategies to affirmatively offer acceptances to applicants from diverse backgrounds (e.g., race, ethnicity, sexual orientation, gender identity, and first generation status); 4) using a "high touch" strategy to help ensure that applicants feel connected to the Program throughout the admissions process; 5) offering more tuition scholarships both in numbers and amounts; and 6) supporting current students' interests and investment in diversity-related activities (e.g., summer book club). Although the "fruits of the labor" did not completely materialize this year, the overall strategy is a relatively new one that is expected to be increasingly fruitful in the near future. Faculty and staff will also continue to capitalize on existing recruitment pipelines that aim for prospective students with diverse backgrounds and identities (e.g., relations with HBCUs) as well as to work to establish new ones.

One positive note is that the Program will be participating in a multi-year training project funded by a Health Resources and Services Administration grant awarded to the Center for Multicultural Mental Health at Boston Medical Center. The project is focused on training future behavioral healthcare clinicians who come from communities that are underrepresented (e.g., BIPOC, LGBTQQ+, first generation college students) and who want to work in community health settings with clients/patients ages 0-25 years. Starting in Fall 2021, two 2nd-year Program students will be identified for each year of the project and will receive a $10,000 stipend for their participation. This grant and accompanying stipends will be used as marketing tools to attract more applicants with diverse identities and backgrounds.

Objective #3: *Prepare students for the process to become licensed to practice as mental health counselors within the healthcare workforce*. No program modifications were decided upon for this objective as findings from surveyed alumni, site supervisors, and employers of alumni indicate that this objective was adequately met.