MENTAL HEALTH COUNSELING & BEHAVIORAL MEDICINE PROGRAM

GRADUATE MEDICAL SCIENCES
BOSTON UNIVERSITY CHOBANIAN & AVEDISIAN SCHOOL OF MEDICINE

Comprehensive Evaluation Plan Annual Report 2022-2023

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 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 2022-2023 academic year. The data and findings highlighted in this report are based on the assessment of the 1st- and 2nd-year cohorts of students (Class of 2023 and 2024). 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 leading 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 adhere to the 2016 CACREP Standards. These objectives and their 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				

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.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	
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															

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.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													

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.a						X											
5.C.1.b							X										
5.C.1.c			X									X	X				
5.C.1.d									X						X		
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: • Does not demonstrate understanding of ethical standards • Does not demonstrate synthesis of professional ethical standards into decision making	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: • Understands the importance of maintaining appropriate boundaries with clients • Incorporates knowledge of ethical standards whenever establishing new professional relationships and work with clients	Surpasses expectations for level of training and experience when evaluating ethical dilemmas and establishing and maintaining relationships with clients, evidenced by the following: • 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	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	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

Key Performance Indicator	Below Expectations	Meets Expectations	Exceeds Expectations
	• Does not demonstrate an attitude of openness regarding issues of diversity	• Enters into collaborative relationships with an attitude of openness regarding issues of diversity	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 development of their clients.	Does not meet expectations for level of training and experience when discussing beliefs about what impacts their own personal development and the development of their clients	Meets expectations for level of training and experience when discussing beliefs about what impacts their own personal development and the development of their clients	Surpasses expectations for level of training and experience when discussing beliefs about what impacts their own personal 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

Key Performance Indicator	Below Expectations	Meets Expectations	Exceeds Expectations
			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, drawing out, and summarization	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 out, and summarization	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, 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

Key Performance Indicator	Below Expectations	Meets Expectations	Exceeds Expectations
			• 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 inform decision-making	Meets expectations for level of training and experience in critically evaluating research related to counseling practice, evidenced by the following: • Uses this information to inform decision-making	Surpasses expectations for level of training and experience in critically evaluating research related to counseling practice, evidenced by the following: • Uses this information 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, evidenced by all of the following: • 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*	Does not meet expectations for level of	Meets expectations for level of training and	Surpasses expectations for level

Key Performance Indicator	Below Expectations	Meets Expectations	Exceeds Expectations
Neuroscience. Conceptualizes and demonstrates how a behavioral medicine framework and neuroscience evidence can inform mental health counseling practices.	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	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	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	Does not meet expectations for level of training and experience with verbal behaviors in	Meets expectations for level of training and experience with verbal behaviors in interpersonal

Professional Disposition	Below Expectations	Meets Expectations
interactions with clients, peers, supervisors, staff, and faculty.	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	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 clients, peers, supervisors, staff, and faculty.	Does not meet expectations for level of training **and** experience with nonverbal behaviors in interpersonal interactions with clients, peers, supervisors, staff, and faculty, evidenced by the following: ● Does not nonverbally communicate attending behavior and active listening	Meets expectations for level of training and experience with nonverbal behaviors in 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	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

Professional Disposition	Below Expectations	Meets Expectations
	● 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 ● 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	● 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 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:	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

Professional Disposition	Below Expectations	Meets Expectations
	● Does not act thoughtfully and is reactive and impulsive ● 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	● 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 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	Meets expectations for level of training and experience with 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	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

Professional Disposition	Below Expectations	Meets Expectations
	● 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	● 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, 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	Meets expectations for level of training and experience with engagement in promoting their growth and development as a professional counselor within the 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	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

Professional Disposition	Below Expectations	Meets Expectations
	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	● 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

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

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 in faculty-determined professional growth plan. 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 2024)

	Introductory		
	n	%BE	%ME	%EE
KPI 1	41	0	0	100
KPI 2	41	0	7.3	92.7
KPI 3	41	0	17.1	82.9
KPI 4	41	0	0	100
KPI 5	41	0	75.6	24.4
KPI 6	41	0	97.6	2.4
KPI 7	41	0	73.2	26.8
KPI 8	41	0	85.4	14.6
KPI 9	41	0	100	0
KPI 10	41	4.9	73.2	22.0

BE = Below Expectations; ME = Meets Expectations; EE = Exceeds Expectations
*Two students dropped out of the program during the fall semester
**A third student dropped out of the program during the spring semester

Table 7. Key Performance Indicators for the 2ⁿᵈ-Year Cohort (Class of 2023)

	Introductory				Mastery			
	n	%BE	%ME	%EE	*n*	%BE	%ME	%EE
KPI 1	38	5.3	60.5	34.2	35	0	68.6	31.4
KPI 2	35**	0	91.4	8.6	35	0	65.7	34.3
KPI 3	35**	0	5.7	94.3	35	0	0	100
KPI 4	38	5.3	73.7	21.1	35	0	100	0
KPI 5	35**	0	37.1	62.9	35	0	60	40
KPI 6	35**	0	74.3	25.7	35	0	58.8	41.2
KPI 7	38	0	73.7	26.3	35	0	68.6	31.4
KPI 8	36*	0	52.8	47.2	35	17.1	62.9	20.0
KPI 9	35**	0	65.7	34.3	34***	3.0	73.5	23.5
KPI 10	35**	0	45.7	54.3	35	17.1	62.9	20.0

BE = Below Expectations; ME = Meets Expectations; EE = Exceeds Expectations
*Two students dropped out of the program during the fall semester of Year 1
**A third student dropped out of the program during the spring semester of Year 1
***One student's internship was completed off-cycle

Table 6 illustrates that all but two students met or exceeded expectations across all KPIs at the Introductory level. The two KPIs for which these two students did not meet expectations are assessed for the course, Neuroscience for Mental Health Professionals. Given the type of assessment utilized and content covered, the small percentage of students who were below expectations is unsurprising.

As shown in Table 7, the most notable finding is that six students were below expectations on the two KPIs that are assessed for the course, Behavioral Medicine & Applied Health Psychology. The same assessment is used for both KPIs: a project focused on assessment and treatment planning for a patient with an identified chronic medical illness. As a follow-up, all students successfully passed the make-up assignment. In addition, one student failed their internship training and thus scored "Below Expectations" on KPI 9 (Clinical Mental Health Counseling) at the Mastery level. They consequently received additional training, achieved clinical competence, and graduated from the Program.

CPCE
Table 8 delineates the CPCE scores for the Class of 2023. The cohort scored almost eight percentage points higher than the national mean on the total score (70.6% versus 62.9%). The three highest scores correspond to the following content areas: Research and Program Evaluation, Group Counseling and Group Work, and Professional Counseling Orientation and Ethical Practice. Consistent with previous years, this cohort of students scored significantly higher across all content areas and the total score compared to other students nationwide.

Table 8. CPCE scores for the 2nd-Year Cohort (Class of 2023)

Content Area	Cohort Mean (%)	National Mean (%)
Professional Counseling Orientation and Ethical Practice	70.6	65.9
Social and Cultural Diversity	66.5	58.8
Human Growth and Development	69.7	62.4
Career Development	66.8	60.6
Counseling and Helping Relationships	69.9	57.6
Group Counseling and Group Work	78.7	68.8
Assessment and Testing	61.5	59.4
Research and Program Evaluation	81.2	68.8
Total	*70.6*	*62.9*

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, all students maintained this level of performance at the second timepoint.

Table 9. Professional Dispositions for the Class of 2024

	Time 1			Time 2		
	n	%BE	%ME	*n*	%BE	%ME
Written Expression	41	0	100	41	0	100
Verbal Expression	41	0	100	41	0	100
Nonverbal Expression	41	0	100	41	0	100
Comportment	41	0	100	41	0	100
Emotional Regulation	41	0	100	41	0	100
Interpersonal Boundaries	41	0	100	41	0	100
Openness to Feedback	41	0	100	41	0	100
Career Goals	41	0	100	41	0	100
Respect for Individual & Group DIfferences	41	0	100	41	0	100

BE = Below Expectations; ME = Meets Expectations

Table 10 illustrates 2nd-year students' performance on the professional dispositions across all assessment timepoints. As can be seen, all but one student met expectations at every timepoint.

Table 10. Professional Dispositions for Class of 2023

	Time 1			Time 2*			Time 3*		
	n	%BE	%ME	*n*	%BE	%ME	*n*	%BE	%ME
Written Expression	38	0	100	35	2.9	97.1	35	0	100
Verbal Expression	38	0	100	35	0	100	35	0	100
Nonverbal Expression	38	0	100	35	0	100	35	0	100
Comportment	38	0	100	35	0	100	35	0	100
Emotional Regulation	38	0	100	35	0	100	35	0	100
Interpersonal Boundaries	38	0	100	35	0	100	35	0	100
Openness to Feedback	38	0	100	35	0	100	35	0	100
Career Goals	38	0	100	35	0	100	35	0	100
Respect for Individual & Group DIfferences	38	0	100	35	0	100	35	0	100

BE = Below Expectations; ME = Meets Expectations
*Three students dropped out of the program before the assessment point

Student Demographics
Table 11 outlines the demographic data of all matriculated students during the 2022-2023 academic year. Across the two cohorts, 62 (80.5%) identified as female, 12 (15.6%) as male, and 3 (3.9%) as other. Fifty-seven percent of all students identified as White. In contrast, 16.9% were African-American/Black, 32.5% were Asian, 16.9% were Hispanic/Latino, and 7.8% were multi-racial. This year's students also comprised 15.6% of international status.

Table 11. Student Demographics (2022-2023; N = 77)*

	Male (%)	Female (%)	Other (%)
African-American/Black	2 (2.6)	11 (14.3)	0 (0)
American Indian/Native Alaskan	0 (0)	0 (0)	0 (0)
Asian	2 (2.6)	21 (27.3)	2 (2.6)
White	8 (10.4)	35 (45.4)	1 (1.3)
Hispanic/Latino	2 (2.6)	10 (13.0)	1 (1.3)
Native Hawaiian/Pacific Islander	0 (0)	0 (0)	0 (0)
Multiracial	0 (0)	6 (7.8)	0 (0)
International Student/Non-Resident	2 (2.6)	10 (13.0)	0 (0)
Active Duty Military	0 (0)	0 (0)	0 (0)
Veteran	0 (0)	1 (1.3)	0 (0)

* One returning full-time student is included; One part-time student is excluded

Table 12 outlines characteristics of the 2022-2023 pool of student applicants. Of note, almost 80% of applicants identified as a woman. Whereas a little over half were White, almost 40% were of Asian descent. The percentages of Black and Hispanic/Latino prospective students were significantly lower than the Black and Hispanic/Latino population of the United States (5.8% versus 12.4% and 10.2% versus 18.7%, respectively; U.S. Census, 2020). Approximately one-third of applicants were international; about 11% were 1st generation college students; and their ages spanned from adolescence to older adults.

Table 12. Student Applicants (N = 406)

Gender	Race/Ethnicity	1st Generation College Student	Military Status	Citizenship/ Residence Status	Age
Man = 12.8%	Hispanic/ Latino = 10.2%	Yes = 10.8%	Veteran = 0.7%	Non-U.S. = 31.0%	Mean = 23.1 years
Woman = 77.7%	Asian = 38.3% (9.5% U.S. only)		Military Dependent = 0.9%	U.S./Permanent = 69.0%	S.D. = 4.4 years Range = 19-68 years
Non-Binary/ Gender Fluid = 3.1%	Black = 5.8%				
Transgender = 1.3%	Pacific Islander/ Native Hawaiian = 0%				
	Alaskan/Indian Native = 0.2%				
	White = 53.1%				

Findings from Graduates

Alumni were last surveyed in 2022 to measure the Program's objectives. They were asked to provide ratings on the extent to which they believe that the Program meets its three objectives (Figures 1-3). The percentage of respondents who endorsed "Much" or Very Much" to indicate that the Program objectives are being met is as follows: 1) Objective 1: 84.2% (16/19); 2) Objective 2: 68.4% (13/19); and 3) 89.5% (17/19). Notably, more than 30% of Program graduates indicated that the Program insufficiently meets its objective to *"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".*

Alumni also rated to what extent they believe that the Program prepares students to demonstrate foundational knowledge in the eight core CACREP areas. Sixteen of nineteen graduates (84.2%) endorsed "Very Much" or "Much" that students are adequately educated across these content domains.

Graduates were also asked about their employment status immediately post-graduation and their licensure status. All 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 (90% on the first time).

Findings from Site Supervisors and Employers

To measure the Program's objectives, data were also collected from site supervisors and employers of graduates in 2022. Site supervisors (n = 6) and employers (n = 32) collectively rated that the Program meets its objectives to a great extent. Specifically, "Much" or "Very Much" was endorsed by 94.7%, 86.8%, and 94.7% of them across Objectives 1, 2, and 3, respectively. This pattern of findings is similar to Program graduates' data in that Objective 2 was the lowest rated one.

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. Specifically, 91.2% of them endorsed "Much" or "Very Much".

PROGRAM MODIFICATIONS

Program Objectives

Objective #1: *Instill in students the knowledge, skills, attitudes, and values that uniquely embody clinical mental health counselors*. One consistent finding over the past few years is that Program students score well above the national means on the CPCE. Combined with the questionable premise that the exam validly assesses the clinical competencies of students and its new scheduling restriction, a decision was made to drop the CPCE as a capstone. Instead, the other Program capstone—case presentation and defense—will be revamped such that the experience will better represent students' ability to assess, conceptualize, and treat patients.

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*. This past year witnessed the creation of the Justice, Equity, Diversity, Anti-Ism, & Inclusion (JEDAI) Committee. One major function of this committee was to oversee the Affinity Groups that were established to help initiate and sustain students' perception of community and belonging. The following four groups were developed, which all met regularly across the academic year: 1) LGBTQI Affinity Group; 2) International Counseling Student Affinity Group; 3) Affinity Group for Racially Minoritized Students; and 4) Ally Affinity Group.

Although the JEDAI Committee and Affinity Groups were deemed as successes, the time, effort, and commitment of faculty needed for these activities were arduous, especially in the context of competing demands. As a result, one faculty member rather than a committee will be identified as the leader of diversity, equity, and inclusion initiatives. This point person moving forward will help insure that such plans are integrated within the Program's educational and training activities. In lieu of the Program Affinity Groups, students will be encouraged to take advantage of the Community Catalyst Center (C3) of Graduate Medical Sciences (GMS), which strives to foster holistic success for the diverse GMS student community. C3 helps students gain a sense of community and belonging through its own affinity groups, provision of resources, as well as relevant event and workshop programming.

Process Group has been an integral part of students' learning since its inception in 2012. Participation in the activity meets the following 2016 CACREP Standard: *"direct experiences in which students participate as*

group members in a small group activity, approved by the program, for a minimum of 10 clock hours over the course of one academic term". However, student feedback the past couple years has indicated that the groups haven't sufficiently instilled community belonging that equitably supports students of varied identities and backgrounds. Thus, a new group activity will be developed and piloted during the upcoming fall semester that will be less process-oriented and more structured and psychoeducational.

Over the past few years, the admissions process has been continually updated, which has contributed to the most recent cohorts of students being increasingly diverse. This improved variety has been due, in part, to favorably identifying prospective students who are disadvantaged. However, the U.S. Supreme Court in June 2023 severely limited the use of affirmative action in higher education admissions (i.e., taking race into consideration as a specific basis for accepting students). Thus, the Program admissions committee will be examining new ways for future admission cycles to achieve varied student cohorts.

Objective #3: *Prepare students for the process to become licensed to practice as mental health counselors within the healthcare workforce*. Findings from surveyed alumni, site supervisors, and employers of alumni indicate that this objective was adequately met. Thus, no program modifications will be made.