Competencies in Professional Counseling and Related Human Services

(Introduction, Table of Contents, and Counseling Master's Competency Grid) Product of joint CCPTP/SCP Master's Competencies Work Group

September 2012

INTRODUCTION to *Competencies in Professional Counseling and Related Human Services* (Counseling Master's Competency Grid)

A working group was convened by the Council of Counseling Psychology Training Programs and co-sponsored by the Society of Counseling Psychology to develop a set of competencies that could be used to guide competency development at the masters-level for professional counseling programs (i.e., mental health counseling). The competencies were designed to be relevant for individuals who will enter professional practice as licensed professional counselors. Some but not all competencies in the constructed grid can be applied to other contexts such as school counseling. However, the group was aware that a different set of competencies would be needed for another master's-level specialty such as in school counseling master's training. The working group included Michael J. Scheel (co-chair), Nadya A. Fouad, James Lichtenberg (co-chair), and Margo A. Jackson. Each has been a training director in an APA-accredited doctoral program in Counseling Psychology and has also been involved in training masters –prepared professional counselors. Their master's programs varied by size of student cohort (from 12- 100), size of faculty (3-7), type of institution (public and private), region of country (Midwest and Northeast), size of city in which student are trained (90,000 to8 million) and type of practicum training available (in-house clinic to external practicum sites).

The group met for 2 ½ days in September 2011. Their charge was to draft masters-level developmental competencies that would (a) capture the breadth of competency domains relevant to entry level practice as a professional counselor, (b) identify the core aspects of those domains and (c) identify the developmental trajectory for a master's in professional counseling. The group began by clarifying the following assumptions:

- Professional counseling includes psycho-educational interventions, psychotherapy, mental health counseling, systems change interventions, and career counseling and interventions.
- Professional counseling occurs in schools, hospitals, agencies, university counseling centers, organizations, or university student services.
- Professional counseling is distinct from professional doctoral-level psychology, and the professional socialization of counselors is also distinct.
- Interventions may be at the individual, family, group, or system level.
- The competencies students develop in their master's program will prepare them for additional post-master's supervised experience to be a professional counselor or for entry into a doctoral program in professional psychology
- The specific requirements of post-master's supervised experience are determined by each state's licensing or certification board.
- The master's degree in professional counseling consists of at least 48 semester credit hours or 2 full time years of study/preparation.

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- The master's degree in professional counseling includes at least two semesters of supervised practicum in counseling, psychotherapy, or responsive services in schools, with appropriate supervision.
- The competencies are designed to be flexible, not to be proscriptive, and to be adapted for each individual program's emphasis.
- The competencies focus on individual student learning outcomes, rather than on program accreditation. However, the competencies need to relate to accreditation standards. Thus the group decided to first delineate the competencies, and then evaluate how they related to the Master's in Counseling Accreditation Program standards.
- The group decided to organize the benchmarks developmentally, with the first level to be assessed early in the program and the second level at the point of degree conferral. This was done for two reasons: (a) to provide mechanisms for annual evaluation and (b) to provide a timely means to intervene in any identified competency problem.
- Programs can set their own minimal expected level of competence for each competency domain as well as for overall performance.
- The ratings for each competency would be "lacking" "emerging" "proficient"
- Flexibility exists in determining the period of "early" development and should be determined by individual programs. The "exit" stage is intended to be assessed at the end of the master's program of training.
- Although many of the competencies are identified discretely, they are in fact, integrated and infused throughout the curriculum.
- The competencies form the basis for general training in professional counseling and should not be identified as competencies specific to counseling psychology. That said, some core values of counseling psychology such as social justice and an emphasis in training on diversity and multicultural competence are evident in a review of the MA competencies.

Process.

The domains identified at the doctoral level provided a starting point from which the group could determine a) the appropriateness of the competency for professional counselors at the master's level, b) the appropriateness of the benchmark of each competency for early development and entry to post-master's supervised experience, c) the appropriateness of the behavioral indicators at the master's level, d) other needed domains of competency not

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covered by the 2009 Competency Benchmarks, and e) linked each MCAC professional domain standard (8a-8k) to one or more of the competencies.

We submitted this draft in September 2011 for comment to CCPTP, SCP, and other relevant training groups with the following questions (and asking respondents to keep in mind that professional counseling is broadly defined as delineated in the above assumptions):

- 1. Are there any missing competency domains?
- 2. Are any of the competencies not needed or not essential for entry-level supervised professional counselors?
- 3. Are there additional behavioral examples?
- 4. Are the examples appropriate for each stage (early and exit)?
- 5. How well do the MCAC professional domain standards align with the competencies and are there suggestions for better alignment?
- 6. Other feedback?

In June 2012, the working group reviewed feedback and comments collected, further edited the master's competency grid, and now disseminates these documents as resources that may be used for adaptation by counseling master's training programs.

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September 2011

Table of Contents

Competencies in Professional Counseling and Related Human Services key to Counseling Master's Competency Grid:

5 CLUSTERS (IN BOLD CAPS)

→11 Core Competencies (in Bold Italics)

→Essential Components

→Indicators

→Examples

Added column on left for proposed alignment with MCAC accreditation standards]

I. PROFESSIONALISM

A. Professional Values and Attitudes

- 1. Integrity
- 2. Deportment
- 3. Accountability
- 4. Concern for the Welfare of Others
- 5. Professional Identity

B. Individual and Cultural Diversity

- 1. Self as Shaped by Individual and Cultural Diversity and Context
- 2. Others as Shaped by Individual and Cultural Diversity and Context
- 3. Interaction of Self and Others as Shaped by Individual and Cultural Diversity and Context
- 4. Applications based on Individual and Cultural Context

C. Ethical/Legal Standards and Policy

- 1. Knowledge of Ethical, Legal and Professional Standards and Guidelines
- 2. Awareness and Application of Ethical Decision Making
- 3. Ethical Conduct

D. Reflective Practice/Self-Assessment/Self-Care

- 1. Reflective Practice
- 2. Self-Assessment
- 3. Self-Care
 - 4. Participation in Supervision Process
- RELATIONAL

A. Relationships

- 1. Interpersonal Relationships
- 2. Affective Skills
- 3. Expressive Skills

III. SCIENCE

II.

A. Scientific Knowledge and Methods

- 1. Scientific Mindedness
- 2. Scientific Foundation of Professional Counseling

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3. Scientific Foundation of Professional Practice

IV. APPLICATION

A. Evidence-Based Practice

1. Knowledge and Application of Evidence-Based Practice

B. Assessment

- 1. Knowledge of Measurement and Psychometrics
- 2. Knowledge of Assessment Methods
- 3. Application of Assessment Methods
- 4. Diagnosis
- 5. Conceptualization and Recommendations
- 6. Communication of Assessment Findings

C. Intervention

- 1. Intervention Planning
- 2. Skills
- 3. Intervention Implementation
- 4. Progress Evaluation

V. SYSTEMS

A. Interdisciplinary Systems

1. Knowledge of the Shared and Distinctive Contributions of Other Professions

B. Advocacy

- 1. Empowerment
- 2. Systems Change

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COMPETENCIES IN PROFESSIONAL COUNSELING AND RELATED HUMAN SERVICES*

The competency areas are represented at two levels of development in a master's degree program: (a) early and (b) exit. The former is hoped to reflect a student's competency attainment at an early stage in the graduate program. Flexibility exists such that individual programs have the freedom to determine the appropriate time in their program to rate early stage competencies. For instance, competencies directly related to practicum training or being in a supervisory relationship cannot be rated until engaged in (formative evaluation) or completion of that activity (summative evaluation), and that may not occur in some cases until the second year of a master's program; the latter (i.e., exit level of development) is intended to reflect an expected level of competence at the conclusion of the student's masters-level program of studies. We recognize and wish to respect that the coverage and emphases of these competencies and the level of proficiency expected may differ among different counseling master's programs.

*The following competencies are intended to capture the domains expected for entry-level readiness for supervised post-masters practice leading to licensure/certification in many areas of professional counseling. To facilitate use of these competencies by programs, the follow rating levels are suggested for competency attainment: (1) lacking, (2) emergent, and (3) proficient.

	I. PROFESSIONALISM		
MCAC Domain	A. Professional Values and Attitudes: as evidenced in behavior and comportment that reflect the values and attit		
8.a, k	1. Integrity - Honesty, personal responsibility and adherence to profession	onal values	
	 Understands professional values; honest, responsible Examples: Demonstrates honesty, even in difficult situations Takes responsibility for own actions Demonstrates ethical behavior and basic knowledge relevant professional ethical principles and codes of conduct 	 Adherence to professional values infuses were recognizes situations that challenge adhered values Examples: Identifies situations that challenge professional values as needed Demonstrates ability to discuss failures ar professional values with supervisors that the as occurring within a training setting 	
8.a, k	2. Deportment		
	 Understands how to conduct oneself in a professional manner Examples: Demonstrates appropriate personal hygiene and attire Distinguishes between appropriate and inappropriate language and demeanor in professional contexts 	 Communication and physical conduct (incluprofessionally appropriate, across different Examples: Demonstrates awareness of the impact be public and profession Utilizes appropriate language and demean communications 	
8.a, k	3. Accountability	•	
	Accountable and reliable	Accepts responsibility for own actions	
	Examples:	Examples:	

PROFESSIONALISM

	 Turns in assignments in accordance with established deadlines Demonstrates personal organization skills Plans and organizes own workload Follows policies and procedures of institution Follows through on commitments 	 Completes required case documentation p Accepts responsibility for meeting deadlin Available when "on-call" Acknowledges errors Utilizes supervision to strengthen effective
8.a, k	4. Concern for the Welfare of Others	
	 Demonstrates awareness of the need to uphold and protect the welfare of others Examples: Displays initiative to help others Articulates importance of concepts of confidentiality, privacy, and informed consent Demonstrates compassion (awareness of suffering and the wish to relieve it) for others 	 Acts to understand and safeguard the welfar Examples: Displays respect in interpersonal interaction those from divergent perspectives or backg Determines when response to client needs personal needs
8.a,k	5. Professional Identity	
	 Demonstrates beginning understanding of self as professional; "thinking like a professional counselor" Examples: Demonstrates knowledge of the program and profession (training model, core competencies) Demonstrates knowledge about practicing within one's competence 	 Displays emerging professional identity as p Examples: Has membership in professional organization Attends colloquia, workshops, conferences Consults literature relevant to client care Uses resources (e.g., supervision, literature) for
	B.Individual and Cultural Diversity (ICD): Awareness, sensitivity and and communities who represent various cultural and personal backgrou	nd and characteristics defined broadly.
8.d,k	1. Self as Shaped by Individual and Cultural Diversity (e.g., cultural, individentity, race, ethnicity, culture, national origin, religion, sexual orientation, di	
	Demonstrates knowledge, awareness, and understanding of one's own dimensions of diversity and attitudes towards diverse others	Monitors and applies knowledge of self as a assessment, treatment, and consultation
	 Examples: Articulates how ethnic group values influence who one is and how one relates to other people Articulates dimensions of diversity (e.g., race, gender, sexual orientation) 	Examples:Uses knowledge of self to monitor effectiveInitiates supervision about diversity issues
8.d,k	2. Others as Shaped by Individual and Cultural Diversity and Context	
	Demonstrates knowledge, awareness, and understanding of other individuals as cultural beings	Applies knowledge of others as cultural bein treatment, and consultation
	 Examples: Demonstrates knowledge, awareness and understanding of the way culture and context shape the behavior of other individuals Articulates beginning understanding of the way culture and context are a consideration in working with clients 	 Examples: Demonstrates understanding that others m identities Initiates supervision about diversity issues
8.d,k	3. Interaction of Self and Others as Shaped by Individual and Cultural Di	
	Demonstrates knowledge, awareness, and understanding of interactions between self and diverse others	Applies knowledge of the role of culture in in assessment, treatment, and consultation of d
	 Examples: Demonstrates knowledge, awareness and understanding of the way culture and context shape interactions between and among individuals 	Examples:Understands the role that diversity may pla others

	 Articulates beginning understanding of the way culture and context are a consideration in the therapeutic relationship 	Initiates supervision about diversity issues
8.d,k	4. Applications based on Individual and Cultural Context	
	 Demonstrates basic knowledge of and sensitivity to the scientific, theoretical, and contextual issues related to ICD as they apply to professional work. Understands the need to consider ICD issues in all aspects of professional work (e.g., assessment, treatment, research, relationships with colleagues) Examples: Demonstrates basic knowledge of literatures on individual and cultural differences Engages in respectful interactions that reflect ICD knowledge Seeks out literature on individual and cultural differences to inform interactions with diverse others 	 Applies knowledge, sensitivity, and understatissues to work effectively with diverse other treatment, and consultation Examples: Demonstrates knowledge of ICD literature Works effectively with diverse others in pro- Demonstrates awareness of effects of opp self and others
	C. Ethical/Legal Standards and Policy: Application of ethical concept	s and awareness of legal issues regarding pr
0 1	individuals, groups, and organizations.	
8.a,k	1. Knowledge of Ethical, Legal and Professional Standards and Guideline	
	Demonstrates basic knowledge of relevant ethical/professional codes and basic skills in ethical decision making; demonstrates beginning level knowledge of legal and regulatory issues in the practice of professional counseling that apply to practice while placed at	Demonstrates intermediate level knowledge relevant ethical/professional codes, standard statutes, rules, and regulations
8.a,k	 practicum setting Examples: Demonstrates beginning knowledge of typical legal issues, including child and elder abuse reporting, confidentiality, and informed consent Identifies key documents/policies that guide the practice of professional counseling Demonstrates beginning knowledge of ethical principles and the ACA ethics code 2. Awareness and Application of Ethical Decision Making	 Examples: Identifies ethical dilemmas effectively Actively consults with supervisor to act upor of practice Addresses ethical and legal aspects within Discusses ethical implications of profession Recognizes and discusses limits of own ethics Demonstrates intermediate knowledge of the including child and elder abuse reporting, of informed consent
0.a,K	Demonstrates awareness of the importance of applying an ethical	Demonstrates the application of an ethical d
	 decision model to practice Examples: Recognizes the importance of basic ethical concepts applicable in initial practice (e.g. child abuse reporting, informed consent, confidentiality, multiple relationships, and competence) Demonstrates awareness of an ethical decision making model through responses to case vignettes 	 applying it to ethical dilemmas Examples: Uses an ethical decision-making model wh supervision Identifies ethical implications in cases and elements present in ethical dilemma or que Discusses ethical dilemmas and decision r meetings, presentations, practicum settings
8.a,k	3. Ethical Conduct	
	 Displays ethical attitudes and values Examples: Evidences desire to help others Shows honesty and integrity; values ethical behavior Demonstrates personal courage consistent with ethical values of professional counselors Displays appropriate boundary management 	 Integrates own moral principles/ethical value conduct Examples: Is able to articulate knowledge of own more values in discussions with supervisors and Is able to spontaneously discuss intersection professional ethical and moral issues

	D. Reflective Practice/Self-Assessment/Self-Care: Practice conducted	with personal and professional self-awarene
	awareness of competencies; with appropriate self-care.	with personal and processing and pro
8.a,k	1. Reflective Practice	
	 Displays basic mindfulness and self-awareness; displays basic reflectivity regarding professional practice (reflection-on-action) Examples: Demonstrates openness to: considering own personal concerns and issues recognizing impact of self on others articulating attitudes, values, and beliefs toward diverse others self-identifying multiple individual and cultural identities systematically reviewing own professional performance with supervisors/teachers 	 Displays broadened self-awareness; utilizes reflectivity regarding professional practice of uses resources to enhance reflectivity; demoreflection-in-action Examples: Is able to articulate attitudes, values, and boothers Recognizes impact of self on others Self-identifies multiple individual and culture Is able to describe how others experience one might play within a group Reviews own professional performance via supervisors Displays ability to adjust professional performance
8.a,k	2. Self-Assessment	requires
	 Demonstrates knowledge of core competencies; engages in initial self-assessment re: competencies Examples: Demonstrates awareness of competencies for professional training Develops initial competency goals for early training (with input from faculty) 	 Demonstrates broad, accurate self-assessment consistently monitors and evaluates practice recognize limits of knowledge/skills, and to se knowledge/skills Examples: Self-assessment comes close to congruen peers and supervisors Identifies areas requiring further professional Writes a personal statement of professional Identifies learning objectives for overall trait Systemically and effectively reviews own p via videotape or other technology
8.a,k	3. Self-Care (attention to personal health and well-being to assure effective provide the importance of self-care in effective practice; demonstrates knowledge of self-care methods; attends to self-care	Monitors issues related to self-care with sup central role of self-care to effective practice
	 Examples: Articulates benefits of engaging in self-care Makes use of opportunities to engage in self-care 	 Examples: Takes action recommended by supervisor effective training Maintains/alters weekly schedule to allow f
8.k	4. Participation in Supervision Process	
	 Demonstrates straightforward, truthful, and respectful communication in supervisory relationship 3 Examples: Demonstrates willingness to admit errors and accept feedback Acknowledges supervisor's differing viewpoints in supervision 	 Effectively participates in supervision Examples: Seeks supervision to improve performance feedback, and integrates feedback into per Initiates discussion with supervisor of own in session Seeks supervisor's perspective on client pr

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	A. Relationships: Relate effectively and meaningfully with individuals, groups, and/or communities.	
8.a,k	1. Interpersonal Relationships	
	 Displays interpersonal skills Examples: Listens and is empathic with others Respects and shows interest in others' cultures, experiences, values, points of view, goals and desires, fears, etc. Demonstrates interpersonal skills verbally and non-verbally Receives feedback Works cooperatively and collaboratively with peers 	 Forms and maintains productive and respect clients, peers/colleagues, supervisors and prodisciplines 3 Examples: Forms effective working alliances with most Engages with supervisors to work effective Involved in departmental, institutional, or progovernance Demonstrates respectful and collegial international models or perspective and colleg
8.a,k	2. Affective Skills	
	 Displays affective skills Examples: Demonstrates affect tolerance Tolerates interpersonal conflict Demonstrates awareness of inner emotional experience Demonstrates emotional maturity Listens to and acknowledges feedback from others Notices and expresses feelings Demonstrates comfort with a range of emotions Affect does not overwhelm judgment Is flexible when things don't go according to plan 	 Negotiates differences and handles conflict seffective feedback to others and receives feed Examples: Makes appropriate disclosures regarding posituations Acknowledges own role in difficult interaction Initiates discussion regarding disagreement supervisors Efforts to resolve disagreements do not esta among the parties involved Seeks clarification in challenging interperses Demonstrates understanding of diverse visa interactions Accepts and implements supervisory feedt Maintains affective equilibrium and focus of client distress Tolerates ambiguity and uncertainty
8.a,k	3. Expressive Skills	
	 Communicates ideas, feelings, and information clearly using verbal, nonverbal, and written skills Examples: Written work is organized, easy to understand, and conveys the main points Shares opinions with others using language that others can understand Non-verbal behavior is consistent with verbal communications 	 Communicates clearly using verbal, nonvertiprofessional context; demonstrates clear und professional language Examples: Uses professional terms and concepts appidiscussions, case reports, etc. Understands terms and concepts used in proteins' case reports Communication is understandable, consist modalities Prepares clearly written assessment report Presents clinical process to supervisor in a summarized way Provides verbal feedback to client regardin diagnosis using language the client can unterpretent of the supervisor of the supervisor in a summarized way

III. SCIENCE

	A. Scientific Knowledge and Methods: Understanding of research, research methodology, techniques of data	colle
	biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan. Resp	ect fo

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	knowledge.	
8.a,k	1. Scientific Mindedness	
	 Displays critical scientific thinking Examples: Questions assumptions of knowledge Evaluates study methodology and scientific basis of findings 	 Values and applies scientific methods to pro Examples: Uses literature to support ideas in case co Formulates appropriate questions regarding Generates hypotheses regarding own con process and outcome
8.b,c, d,e,f, g,i,j	2. Scientific Foundation of Professional Counseling	
	No expectation at this level	 Demonstrates understanding of counseling science Examples: Demonstrates understanding of core scient human behavior Demonstrates basic knowledge of the biol cognitive bases of behavior Demonstrates understanding of human de career development Cites scientific literature to support an arg Evaluates scholarly literature on a topic as
8.b,c, d,e,f, g,h, i,j	3. Scientific Foundation of Professional Practice	
	No expectation at this level	 Understands the scientific foundation of pre Examples: Understands the development of evidence counseling Cites scientific literature to support an arg Evaluates scholarly literature on a practice
	IV. APPLICATION	
	A. Evidence-Based Practice (EBP): Integration of research and clinic	al expertise in the context of patient factors.
8.c,e, k	1. Knowledge and Application of Evidence-Based Practice	
	 Demonstrates basic knowledge of scientific, theoretical, and contextual bases of assessment, intervention and other psychological practice applications; demonstrates basic knowledge of the value of evidence-based practice and its role in professional counseling Examples: Articulates the relationship of EBP to professional counseling Identifies basic strengths and weaknesses of different assessment and intervention approaches 	 Applies knowledge of evidence-based pract bases of assessment, intervention, and other applications integrated withclinical expertise Examples: Demonstrates knowledge of interventions use based on EBP Demonstrates the ability to select intervent and consultation methods for different prorelated to the practice setting Investigates existing literature related to p Writes a statement of own theoretical persist intervention strategies Creates a treatment plan that reflects succession

		empirical findings, clinical judgment, and cl consultation with supervisor
	B. Assessment: Assessment and diagnosis of problems, capabilities and	d issues associated with individuals, groups,
8.h,i	1. Knowledge of Measurement and Psychometrics	
	 Demonstrates basic knowledge of the scientific, theoretical, and contextual basis of test construction and interviewing Examples: Demonstrates awareness of the benefits and limitations of standardized assessment Demonstrates knowledge of the construct(s) being assessed Evidences understanding of basic psychometric constructs such as validity, reliability, and test construction 	 Selects assessment measures with attention to validity Examples: Identifies appropriate assessment measured practice site Consults with supervisor regarding selection measures
8.h,i	2. Knowledge of Assessment Methods	
	Demonstrates basic knowledge of administration and scoring of traditional assessment measures, models and techniques, including clinical interviewing and mental status exam	Demonstrates awareness of the strengths an administration, scoring and interpretation o measures appropriate to their level of trainin
	 Examples: Accurately administers and scores various assessment tools in non- clinical (e.g. course) contexts Demonstrates knowledge of initial interviewing methods (both structured and semi-structured interviews, mini-mental status exam) 	 Examples: Demonstrates intermediate level ability to a administer, score and interpret assessmen populations Collects accurate and relevant data from st structured interviews and mini-mental statu
8.h,i ,j,k	3. Application of Assessment Methods	
	No expectation at this level	 Demonstrates knowledge of measurement at functioning and practice settings Examples: Demonstrates awareness of need to base on multiple sources of information Demonstrates awareness of need for select measures appropriate to population/proble
8.c,h	4. Diagnosis	
0.0,11	1. Druguono	

	 Demonstrates basic knowledge regarding the range of normal and abnormal behavior in the context of stages of human development and diversity Examples: Identifies DSM criteria Describes normal development consistent with broad area of training 	 Applies concepts of normal/abnormal behav and diagnosis in the context of stages of hum diversity (what is the appropriate level to ex Examples: Articulates relevant developmental features applied to presenting question Demonstrates ability to identify problem are differential diagnosis
8.e,h, į	5. Conceptualization and Recommendations	
<u>.</u>	 Demonstrates basic knowledge of formulating diagnosis and case conceptualization Examples: Discusses diagnostic formulation and case conceptualization in courses Prepares basic reports which articulate theoretical material 	 Utilizes systematic approaches of gathering decision-making Examples: Presents cases and reports demonstrating case material Makes clinical decisions based on connect hypotheses and recommendations
<u>8.h</u>	6. Communication of Assessment Findings No expectation at this level	Demonstrates awareness of models of report notes Examples: • Demonstrates knowledge of content or notes • Demonstrates knowledge of organizat progress notes
	C. Intervention: Interventions designed to alleviate suffering and to organizations (e.g., career, group, family, and/or systems-level interventions)	promote health and well-being of individ
8.e,f, g,k	1. Intervention planning	
	 Intervention planning Displays basic understanding of the relationship between assessment and intervention Examples: Articulates a basic understanding of how intervention choices are informed by assessment (e.g., clinical intake, testing) Articulates a basic understanding of how assessment guides the process of intervention 	 Formulates and conceptualizes cases and pla utilizing at least one consistent theoretical or Examples: Articulates a theory of change and identifie implement change Writes case conceptualization reports and plans incorporating evidence-based practic
	Displays basic understanding of the relationship between assessment and intervention Examples: • Articulates a basic understanding of how intervention choices are informed by assessment (e.g., clinical intake, testing) • Articulates a basic understanding of how assessment guides the process	 utilizing at least one consistent theoretical of Examples: Articulates a theory of change and identifie implement change Writes case conceptualization reports and

	 Demonstrates basic knowledge of intervention strategies Examples: Is able to articulate awareness of theoretical basis of intervention and some general strategies Is able to articulate awareness of the concept of evidence-based practice 	 Implements evidence-based interventions Examples: Case presentations demonstrate application practice Discusses evidence based practices during
8.h,j,	4. Progress Evaluation	
k	Demonstrates basic knowledge of the assessment of intervention progress and outcome Examples: • Identifies measures of treatment progress and outcome by name • Is able to articulate an understanding of the use of repeated assessment to guide treatment • Appropriately administers and scores treatment progress and outcome	 Evaluates intervention progress and modifie on the basis of their evaluation of clients' pre- Examples: Describes instances of lack of progress an response Demonstrates ability to evaluate treatment evidence based interventions
	measures	
<u> </u>	V. SYSTEMS	uslated dissiplines. Identify and interest and
	A. Interdisciplinary Systems: Knowledge of key issues and concepts in multiple disciplines.	related disciplines. Identify and interact wi
8.e	1. Knowledge of the Shared and Distinctive Contributions of Other Profes	sions
		 professions/ professionals through incorpora and contributions Examples: Cooperates with others in task completion Demonstrates willingness to listen to others Consults with mental health professionals of Elicits others viewpoints and perspectives
	B. Advocacy: Actions targeting the impact of social, political, economi- institutional, and/or systems level.	c or cultural factors to promote change at the
8.d,e, f,g	1. Empowerment	
	Demonstrates awareness of problems as possessing social, political, economic and cultural factors that impact individuals, systems, and institutions. Examples:	Uses awareness of the social, political, econo that may impact human development in the provision
	 Articulates social, political, economic or cultural factors that may impact on human development and functioning Demonstrates consideration of social, political, economic, and cultural factors in the therapeutic process 	 Examples: Identifies specific barriers to client improve to resources Assists client in development of self-advoc
8.d.e, f,g	2. Systems Change	
	 Understands the differences between individual and institutional level interventions and system-level change Examples: Articulates role of therapist as change agent outside of direct client/patient contact Demonstrates awareness of institutional and systems level barriers to change 	 Promotes change to enhance the functioning Examples: Identifies target issues/agencies most relevent Formulates and engages in plan for action Demonstrates understanding of appropriate

	advocate on behalf of client