



**Southern  
New Hampshire  
University**

# **M.A. in Clinical Mental Health Counseling Annual Data Report**

**21TW1 to 22TW5: October 11, 2021 – August 14, 2022**

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## Introduction

This annual data report is part of an ongoing process of data collection, analysis, and integration designed to support the students, faculty, and leadership of the Master of Arts in Clinical Mental Health Counseling (CMHC) program. It reflects data collected across the span of the academic reporting year, as outlined in our Comprehensive Assessment Plan, and demonstrates how that data was used to make meaningful changes within the program. The report includes key data and findings relative to the knowledge, skills, dispositions, and demographic profiles of our students from the period of October 11, 2021 through August 14, 2022. It also includes subsequent actions and program improvements made based on our review of this data, as well as our larger comprehensive assessment plan.

## Term Dates in Review Period

The data report below reflects data collected from academic terms 21TW1 through 22TW5. An academic year for our program consists of consecutive 10-week graduate terms with a week allotted for winter break. Term codes reflect the combination of the calendar year and the graduate coding (the abbreviation TW = 10 weeks). As an example, term 21TW1 was the graduate academic term that fell in the year 2021 and the first term of the academic year. The reporting period and data collected in each period is identified within each section. Term dates for this report are as follows:

Term	Term Start	Term End
21TW1	October 11, 2021	December 19, 2021
22TW3	January 3, 2022	March 13, 2022
22TW4	March 21, 2022	May 29, 2022
22TW5	June 6, 2022	August 14, 2022

*\*Note: There was not a TW2 term in this academic year*

## Program Outcomes

Program Outcome 1: Develop a professional counseling identity in alignment with ethical and legal standards that advocates on behalf of the profession and promotes client access, equity, and success

(CACREP 2F1: d, e, i)

Program Outcome 2: Cultivate socially, culturally, and spiritually appropriate skills and practices in professional counseling that promote social justice and minimize barriers between counselors and clients

(CACREP 2F2: b, g, h)

Program Outcome 3: Apply theories and etiology of human growth and development and relevant environmental factors to promote optimum wellness for diverse clients across the lifespan

(CACREP 2F3: a, b, c, g, h)

Program Outcome 4: Develop strategies for supporting and advocating for clients in relation to their

career development based on client needs, industry information, and identified opportunities within the global economy  
(CACREP 2F4: b, c, e, g, h, i)

Program Outcome 5: Utilize appropriate counseling theories, models, and culturally relevant strategies in developing professional skills for client consultation, treatment, intervention, and prevention  
(CACREP 2F5: a, b, c, d, g, h, j, n)

Program Outcome 6: Determine and implement appropriate strategies for effectively forming and facilitating group counseling and group work in a variety of settings with a diverse range of clients  
(CACREP 2F6: a, b, c, d, e, f, g)

Program Outcome 7: Assess the needs of counseling clients validly and reliably through the application of basic testing principles, key statistical concepts, and industry-appropriate procedures  
(CACREP 2F7: b, c, d, e, f, g, h, i, j, k, l, m)

Program Outcome 8: Evaluate counseling research, programs, and practices using a variety of methods and designs for advancing the counseling profession and incorporating evidence-based, data-driven approaches into current practice  
(CACREP 2F8: a, b, c, d, e, f, g, h, i)

Program Outcome 9: Apply culturally relevant strategies, techniques, theories, and models of clinical mental health counseling to the assessment and treatment planning of mental health issues, adhering to the legal and ethical standards of clinical and mental healthcare professionals  
(CACREP 5C1: b, c, e; 5C2: d, j, l; 5C3: a, b)

## **Required Curriculum (Does Not Include Electives)**

COU 500: The Counseling Profession: Orientation, Identity, and Ethics

COU 510: Human Development

COU 520: Diversity in Counseling

COU 530: Theories of Counseling

COU 540: Helping Skills and Techniques: Residency I

COU 600: Research Methods and Program Evaluation

COU 610: Assessment and Evaluation in Counseling

COU 630: Career Counseling

COU 640: Substance Use Disorders and Process Addictions

COU 650: Diagnosis of Emotional and Mental Disorders

COU 660: Group Counseling

COU 680: Prevention and Intervention of Crisis and Trauma

COU 690: Advanced Individual and Group Helping Skills and Techniques: Residency II

MHC 500: Professional Issues, Ethics, and Laws in Clinical Mental Health Counseling

MHC 610: Treatment Planning in Clinical Mental Health Counseling

MHC 670: Clinical Mental Health Counseling Practicum

MHC 680: Clinical Mental Health Counseling Internship

MHC 690: Advanced Internship in Clinical Mental Health Counseling

# Summary of Program Evaluation Results

## Curriculum Key Performance Indicators

As part of our annual data collection process, we gather aggregate performance data on each program outcome. Our program outcomes are based on a compilation of standards from each of the eight core areas and CMHC specialty area standards outlined by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). Because our program outcomes were developed from the CACREP standards, we have further designated our program outcomes to serve as our key performance indicators (KPIs) for individual student and program-level assessment.

For the purposes of measuring our KPIs, specific signature assessments were selected by the program faculty to evaluate the skills and knowledge deemed necessary for students to progress and ultimately succeed in graduating from our program. They include multiple measures of the KPIs and are taken over multiple points in time within the program of study. There are a total of 20 signature assessments within the CMHC program curriculum, reflecting a minimum of two per KPI. Additionally, students are assessed on their skills demonstrations five additional times throughout the program to further evaluate program outcome #5 using the *Counselor’s Developing Competencies Scale* (CDCS).

A detailed breakdown of aggregate performance by term is noted below. *Average Grade* reflects the average grade on the designated assignment for a single term, *Academic Year Avg* reflects the average grade for the terms in the reporting year. We expect all signature assignment grades to meet or exceed the threshold of a B- (80%) or above.

### Program Outcome 1: Develop a professional counseling identity in alignment with ethical and legal standards that advocates on behalf of the profession and promotes client access, equity, and success

Signature Assessment KPI	Term	Student Count	Average
COU 500 The Counseling Profession: Orientation, Identity, and Ethics: 8-1 Final Project Submission: Ethical Case Study Analysis	21TW1	149	91.3%
	22TW3	147	96.8%
	22TW4	139	93.2%
	22TW5	143	91.1%

Academic Year Avg = 93.1%

Signature Assessment KPI	Term	Student Count	Average
COU 520 Diversity in Counseling: 10-1: Discussion: Advocacy for Different Cultures	21TW1	109	86.8%
	22TW3	125	91.0%
	22TW4	131	91.1%
	22TW5	140	88.7%

Academic Year Avg = 89.4%

**Program Outcome 2: Cultivate socially, culturally, and spiritually appropriate skills and practices in professional counseling that promote social justice and minimize barriers between counselors and clients**

Signature Assessment KPI	Term	Student Count	Average
COU 520 Diversity in Counseling: 8-2 Final Project: Multicultural Case Analysis	21TW1	110	90.2%
	22TW3	126	91.3%
	22TW4	131	90.1%
	22TW5	142	89.3%

*Academic Year Avg = 90.2%*

Signature Assessment KPI	Term	Student Count	Average
COU 680 Prevention and Intervention of Crisis and Trauma: Video Discussion: Spiritual and Cultural Considerations	21TW1	49	87.8%
	22TW3	80	92.0%
	22TW4	68	97.3%
	22TW5	93	97.9%

*Academic Year Avg = 93.8%*

**Program Outcome 3: Apply theories and etiology of human growth and development and relevant environmental factors to promote optimum wellness for diverse clients across the lifespan**

Signature Assessment KPI	Term	Student Count	Average
COU 510 Human Development: 9-1 Final Project	21TW1	148	87.4%
	22TW3	139	94.4%
	22TW4	140	93.5%
	22TW5	128	91.4%

*Academic Year Avg = 91.7%*

Signature Assessment KPI	Term	Student Count	Average
COU 530 Theories of Counseling: 9-1 Final Project I	21TW1	106	93.4%
	22TW3	121	94.9%
	22TW4	134	96.0%
	22TW5	123	91.7%

*Academic Year Avg = 94.0%*

**Program Outcome 4: Develop strategies for supporting and advocating for clients in relation to their career development based on client needs, industry information, and identified opportunities within the global economy**

Signature Assessment KPI	Term	Student Count	Average
COU 630 Career Counseling: 6-1 Worksheet: Appropriate Tools and Resources	21TW1	77	92.8%
	22TW3	101	96.2%
	22TW4	99	92.3%
	22TW5	102	96.4%

Academic Year Avg = 94.4%

Signature Assessment KPI	Term	Student Count	Average
COU 630 Career Counseling: 9-2 Final Project I Submission: Career Assessment Report	21TW1	77	95.0%
	22TW3	101	94.6%
	22TW4	97	96.0%
	22TW5	101	96.5%

Academic Year Avg = 95.5%

**Program Outcome 5: Utilize appropriate counseling theories, models, and culturally relevant strategies in developing professional skills for client consultation, treatment, intervention, and prevention**

Signature Assessment KPI	Term	Student Count	Average
COU 530 Theories of Counseling: 9-2 Final Project II Submission: Applied Client Case Conceptualization	21TW1	106	94.9%
	22TW3	121	97.5%
	22TW4	134	98.4%
	22TW5	123	95.5%

Academic Year Avg = 96.6%

Signature Assessment KPI	Term	Student Count	Average
COU 660 Group Counseling: 9-2 Final Project Two Submission: Justify Group Curriculum	21TW1	44	97.5%
	22TW3	49	96.6%
	22TW4	64	95.8%
	22TW5	65	94.7%

Academic Year Avg = 96.2%

Signature Assessment KPI	Term	Student Count	Average
COU 680 Prevention and Intervention of Crisis and Trauma: 9-2 Final Project Two: Case Conceptualization	21TW1	49	87.9%
	22TW3	75	93.8%
	22TW4	66	97.0%
	22TW5	91	94.6%

Academic Year Avg = 93.3%

**Program Outcome 6: Determine and implement appropriate strategies for effectively forming and facilitating group counseling and group work in a variety of settings with a diverse range of clients**

Signature Assessment KPI	Term	Student Count	Average
COU 660 Group Counseling: 9-1 Final Project One Submission: Group Curriculum	21TW1	45	92.8%
	22TW3	49	88.2%
	22TW4	64	89.0%
	22TW5	65	92.2%

*Academic Year Avg = 90.6%*

Signature Assessment KPI	Term	Student Count	Average
COU 690 Advanced Individual and Group Helping Skills and Techniques: Residency II: 6-4 Virtual Practice Process Group Counseling Session	21TW1	41	89.9%
	22TW3	36	98.2%
	22TW4	46	97.1%
	22TW5	60	93.5%

*Academic Year Avg = 94.7%*

**Program Outcome 7: Assess the needs of counseling clients validly and reliably through the application of basic testing principles, key statistical concepts, and industry-appropriate procedures**

Signature Assessment KPI	Term	Student Count	Average
COU 600 Research Methods and Program Evaluation: 9-1 Final Project II Submission: Program Evaluation	21TW1	113	89.7%
	22TW3	111	89.6%
	22TW4	127	89.8%
	22TW5	110	91.3%

*Academic Year Avg = 90.1%*

Signature Assessment KPI	Term	Student Count	Average
COU 610 Assessment and Evaluation in Counseling: 9-1 Final Project I Submission: Comprehensive Case Conceptualization	21TW1	103	92.9%
	22TW3	108	96.8%
	22TW4	116	96.1%
	22TW5	107	95.2%

*Academic Year Avg = 95.3%*

**Program Outcome 8: Evaluate counseling research, programs, and practices using a variety of methods and designs for advancing the counseling profession and incorporating evidence-based, data-driven approaches into current practice**



Signature Assessment KPI	Term	Student Count	Average
COU 600 Research Methods and Program Evaluation: 8-1 Final Project I Submission: Annotated Bibliography	21TW1	114	88.6%
	22TW3	111	87.2%
	22TW4	127	89.4%
	22TW5	110	91.1%

Academic Year Avg = 89.1%

Signature Assessment KPI	Term	Student Count	Average
COU 680 Prevention and Intervention of Crisis and Trauma: 8-1 Short Paper: Intervention for Working with a Disaster	21TW1	49	84.6%
	22TW3	76	87.6%
	22TW4	67	92.0%
	22TW5	93	93.5%

Academic Year Avg = 89.4%

**Program Outcome 9: Apply culturally relevant strategies, techniques, theories, and models of clinical mental health counseling to the assessment and treatment planning of mental health issues, adhering to the legal and ethical standards of clinical and mental healthcare professionals**

Signature Assessment KPI	Term	Student Count	Average
MHC 500 Professional Issues, Ethics, and Laws in Clinical Mental Health Counseling: 9-2 Final Project Two Submission: Case Conceptualization	21TW1	51	90.0%
	22TW3	73	95.7%
	22TW4	68	98.7%
	22TW5	90	94.8%

Academic Year Avg = 94.8%

Signature Assessment KPI	Term	Student Count	Average
MHC 610 Treatment Planning in Clinical Mental Health Counseling: 9-1 Final Project Part Three Submission: Treatment Plan	21TW1	45	92.4%
	22TW3	48	95.6%
	22TW4	65	95.7%
	22TW5	69	92.3%

Academic Year Avg = 94.0%

Signature Assessment KPI	Term	Student Count	Average
MHC 690 CMHC Advanced Internship: 8-5 Advanced Internship Comprehensive Performance	21TW1	44	97.7%
	22TW3	41	99.0%
	22TW4	62	96.0%
	22TW5	42	99.7%

Academic Year Avg = 98.1%

**Key Performance Indicator Findings**

The KPI signature assessment data analysis demonstrates that our aggregate student performance

was at or above the benchmark of 80% for the academic year average on each assignment. Additionally, there were no individual terms in the academic year where KPI scores fell below the benchmark of 80%.

In monitoring trends from last year's data report, we continue to see improvement in our students' most challenging areas such as the two COU-600: Research Methods and Program Evaluation KPI assignments (Program Outcome 7: COU-600 9-1 and Program Outcome 8: COU-600 8-1) where academic year averages increased from 82.8% to 90.1% and 81.5% to 89.1%, respectively. We believe these improvements reflect curriculum changes we implemented in 21TW3 as well as a focused effort to train and consistently assign strong research faculty.

An analysis of KPI signature assignments was completed in collaboration with current and former faculty course leads and subject matter experts (SMEs) in the fall of 2022. In particular, we evaluated situations where final grade variance was high between terms. We discovered this was frequently associated with faculty who were new to teaching a course in that term. Examples of this include the 21TW1 terms for the [COU 520 assignment for Program Outcome 1](#), the [COU 680 assignment of Program Outcome 2](#), the [COU 680 assignment of Program Outcome 5](#), and the [COU 690 assignment of Program Outcome 6](#). Using this information, we plan to continue refining our onboarding and support of faculty, particularly in teaching new courses.

In addition to this information, we gathered feedback from our course leads and course SMEs on whether existing signature assignments continue to align well for assessing program outcomes and where issues exist in assignment performance overall. We plan to use the feedback we gathered to support curriculum changes in the upcoming academic year as well as to consider places to revise signature assessment alignment once the 2024 CACREP standards are released.

### **Skill Key Performance Indicators**

Student skill performance was evaluated using the *Counselor's Developing Competencies Scale* (CDCS) for the reporting period from 21TW1 to 22TW5. The CDCS is comprised of four main sections (microskills, dispositions, mesoskills, and group skills) and is used across the program at specific evaluation points. The CDCS is a developmental assessment designed to capture student improvement on the noted skills and dispositions as students progress through the program.

Performance on the skills sections of the CDCS are scored as 0 (did not demonstrate), 1 (ineffective), 2 (somewhat effective), 3 (mostly effective), or 4 (always effective). In the two residency courses (COU 540 and COU 690), students are evaluated at the end of the term by their faculty member. In the field experience courses (MHC 670, MHC 680, and MHC 690), students are evaluated at the end of the term by their site supervisor as well as their faculty supervisor. Students were evaluated in the following courses, with the associated scores set as the minimum required final score to pass each section of the assessment in that course:

Course/Experience	Total # of Students in Course 21TW1-22TW5)	CDCS Skills Section(s) Evaluated	Minimum Required Passing Score
COU 540 Helping Skills and Techniques: Residency I (Term 2)*	479	Microskills	2
COU 690 Advanced Individual and Group Helping Skills and Techniques: Residency II (Term 9)*	184	Microskills Mesoskills Group Skills	2 2 2
MHC 670 CMHC Practicum (Term 10)*	198	Microskills Mesoskills	3 2
MHC 680 CMHC Internship (Term 11)*	177	Microskills Mesoskills	3 3
MHC 690 CMHC Advanced Internship (Term 12)*	147	Microskills Mesoskills Group Skills	3 3 3

\*Note: The term number reflects the term in which a full-time student (two courses/term) would take the course.

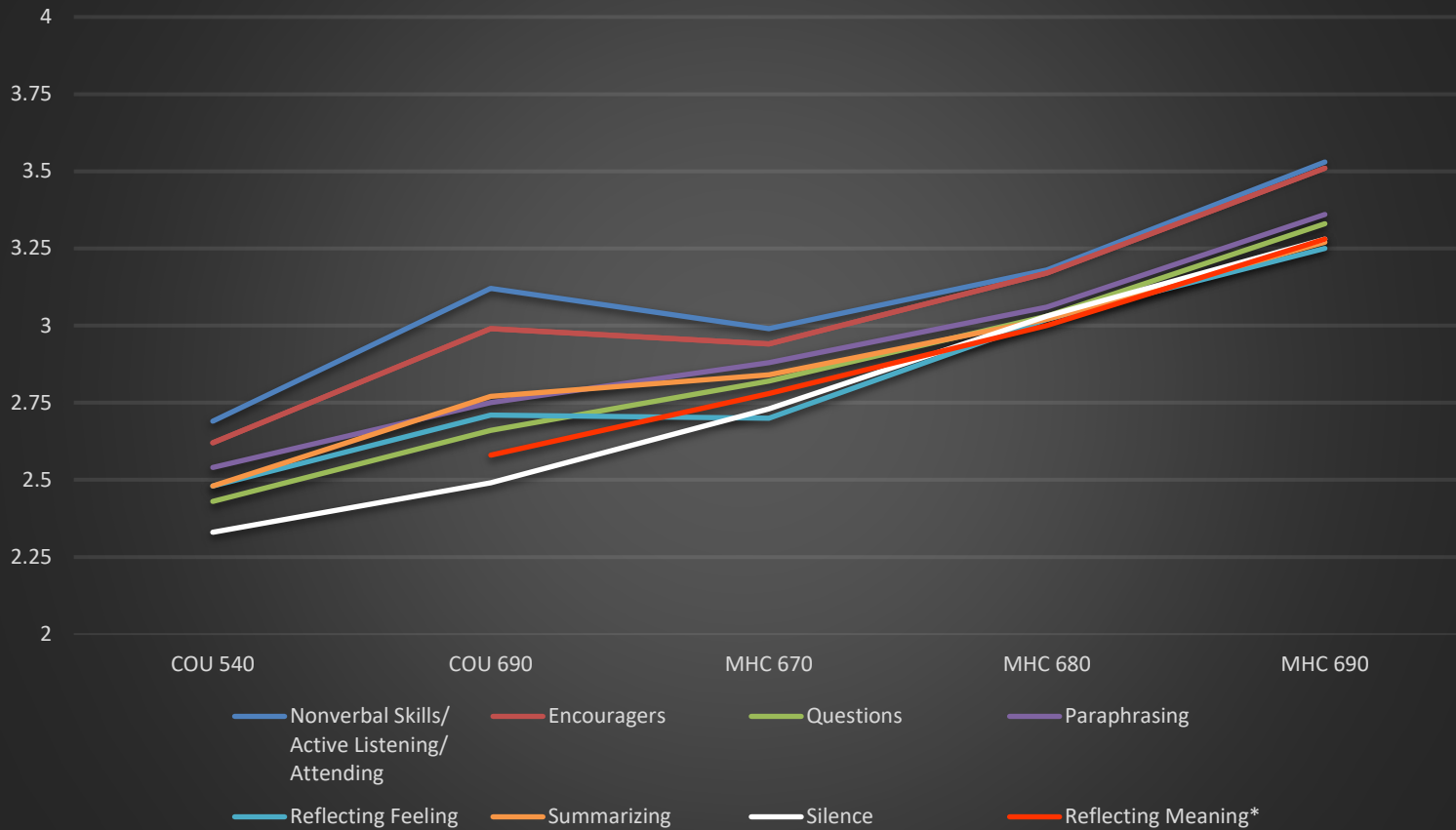
### CDCS Microskills Scores by Course

The CDCS Microskills are assessed in COU 540: Helping Skills and Techniques: Residency I, COU 690: Advanced Individual and Group Helping Skills and Techniques: Residency II, and in all three field experience courses (MHC 670: CMHC Practicum, MHC 680: CMHC Internship, and MHC 690: CMHC Advanced Internship). In COU 540 and COU 690, scores are provided by the faculty member. In the field experience courses, scores are provided by the site supervisor and the faculty member. Aggregate scores by skill and type of assessor are provided in the table below. The additional chart represents final faculty scores on each skill by course.

Course	Assessor	Nonverbal Skills/Active Listening/Attending	Encouragers	Questions	Paraphrasing	Reflecting Feeling	Summarizing	Silence	Reflecting Meaning*
COU 540	Faculty Member (N = 479)	2.69	2.62	2.43	2.54	2.48	2.48	2.33	N/A
COU 690	Faculty Member (N = 184)	3.12	2.99	2.66	2.75	2.71	2.77	2.49	2.58
MHC 670	Site Supervisor Avg (N = 198)	3.27	3.23	3.10	3.16	3.15	3.17	2.97	3.02
	Faculty Member Avg (N = 188)	2.99	2.94	2.82	2.88	2.70	2.84	2.73	2.78
MHC 680	Site Supervisor Avg (N = 177)	3.39	3.44	3.26	3.34	3.28	3.32	3.19	3.21
	Faculty Member Avg (N = 177)	3.18	3.17	3.03	3.06	3.02	3.02	3.03	3.00
MHC 690	Site Supervisor Avg (N = 147)	3.70	3.71	3.63	3.59	3.59	3.65	3.50	3.52
	Faculty Member Avg (N = 146)	3.53	3.51	3.33	3.36	3.25	3.27	3.28	3.28

\*Note: Reflecting Meaning is not evaluated in COU 540

## Microskills Scores by Course



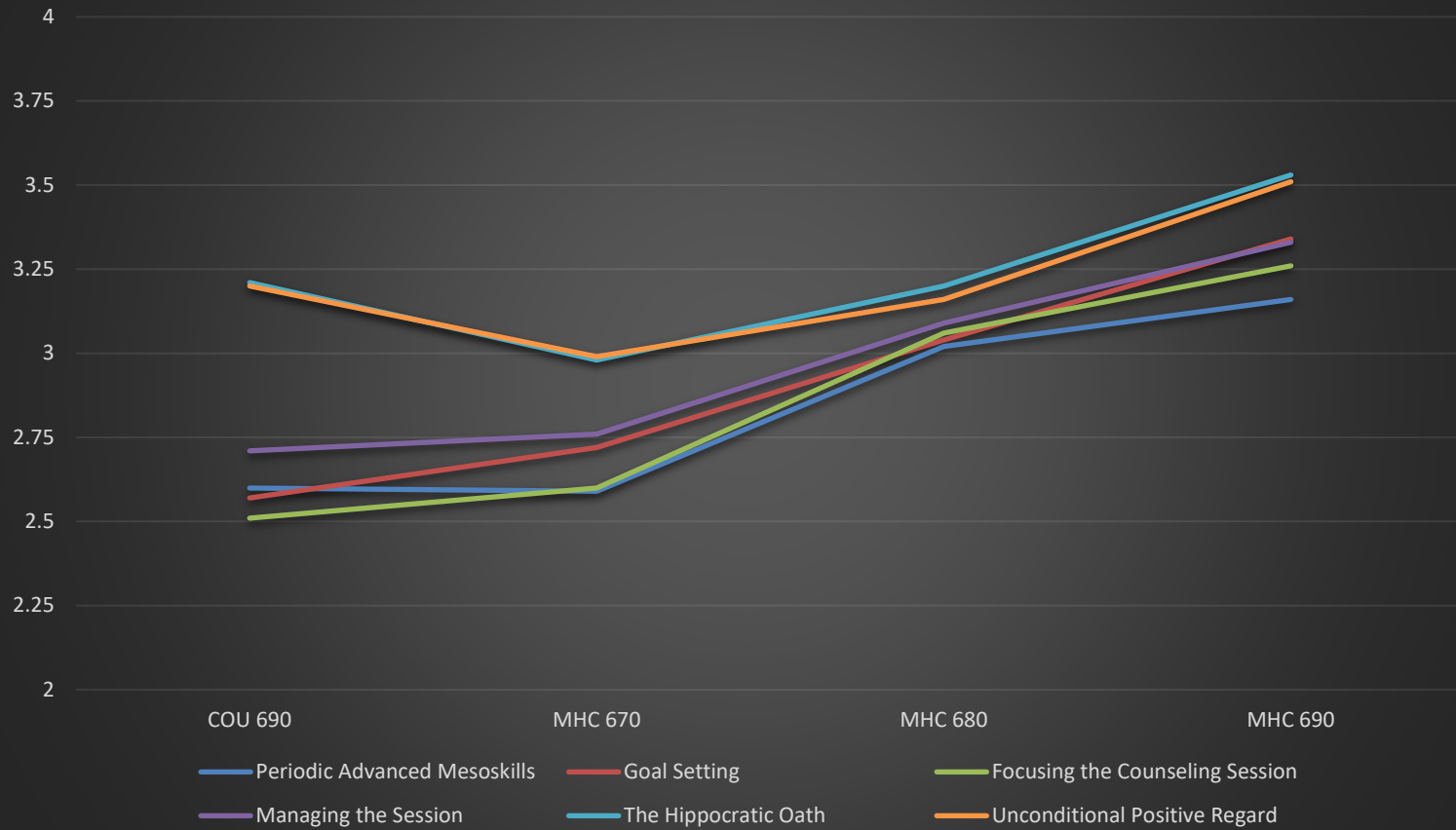
\*Note: Reflecting Meaning is not evaluated in COU 540; Data reflects faculty member final scores by course.

### CDCS Mesoskills Scores by Course

The CDCS Mesoskills are assessed in COU 690 Advanced Individual and Group Helping Skills and Techniques: Residency II, and in all three field experience courses (MHC 670: CMHC Practicum, MHC 680: CMHC Internship, and MHC 690: CMHC Advanced Internship). In COU 690, scores are provided by the faculty member. In the field experience courses, scores are provided by the site supervisor and the faculty member. Aggregate scores by skill and type of assessor are provided in the table below. The additional chart represents final faculty scores on each skill by course.

Course	Assessor	Periodic Advanced Mesoskills	Goal Setting	Focusing the Counseling Session	Managing the Session	The Hippocratic Oath	Unconditional Positive Regard
COU 690	Faculty Member Avg (N = 184)	2.60	2.57	2.51	2.71	3.21	3.20
MHC 670	Site Supervisor Avg (N = 198)	2.88	3.06	2.94	3.02	3.48	3.39
	Faculty Member Avg (N = 188)	2.59	2.72	2.60	2.76	2.98	2.99
MHC 680	Site Supervisor Avg (N = 177)	3.11	3.32	3.23	3.25	3.73	3.58
	Faculty Member Avg (N = 177)	3.02	3.04	3.06	3.09	3.20	3.16
MHC 690	Site Supervisor Avg (N = 147)	3.44	3.62	3.54	3.58	3.86	3.77
	Faculty Member Avg (N = 146)	3.16	3.34	3.26	3.33	3.53	3.51

## Mesoskills Scores by Course



\*Note: Data reflects faculty member final scores by course

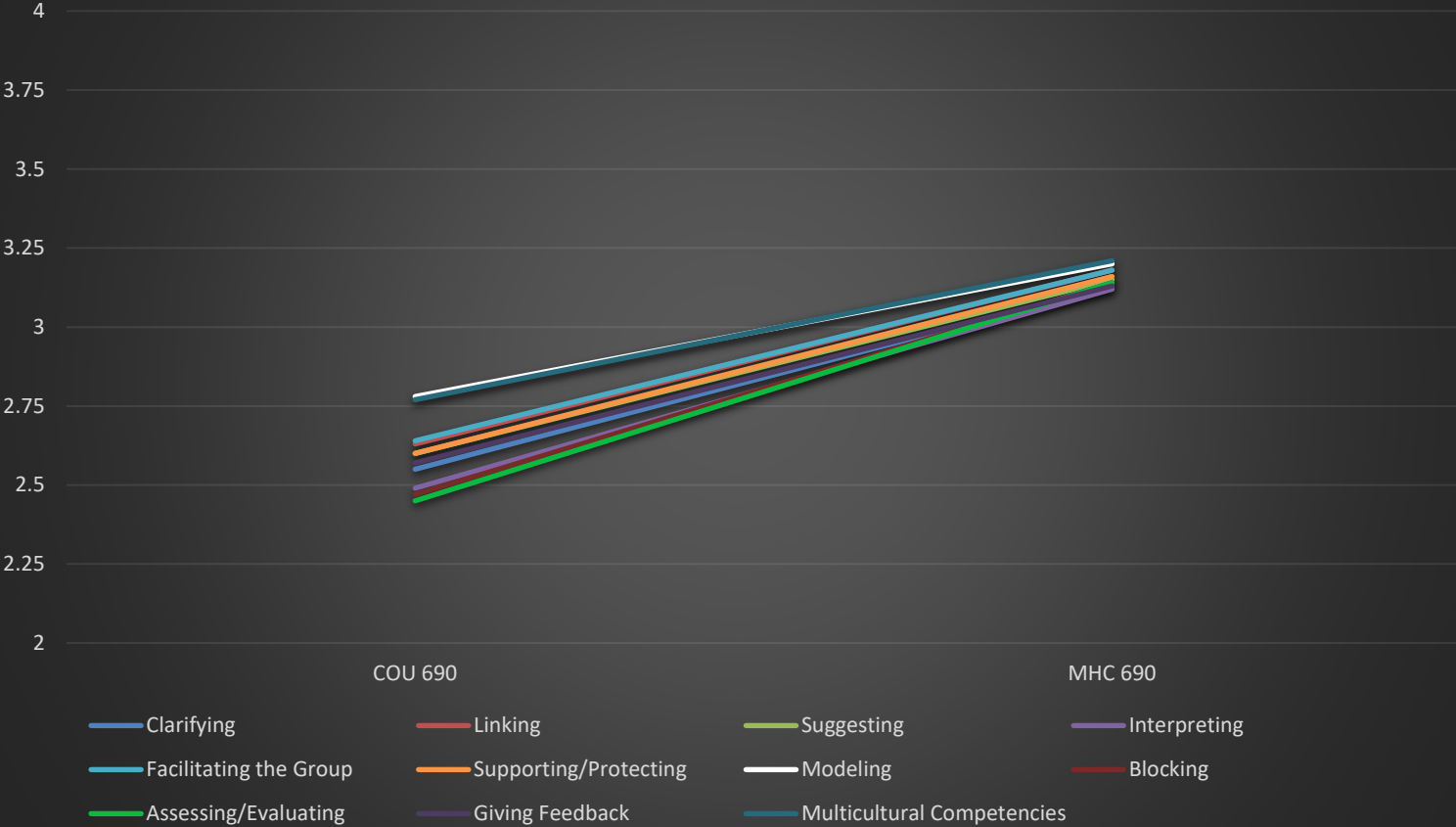
### CDCS Group Skills by Course

The CDCS Group Skills are assessed in COU 690: Advanced Individual and Group Helping Skills and Techniques: Residency II, and MHC 690: CMHC Advanced Internship. In COU 690, scores are provided by the faculty member. In MHC 690, scores are provided by the site supervisor and the faculty member. Aggregate scores by skill and type of assessor are provided in the table below. The additional chart represents final faculty scores on each skill by course.

Course	Assessor	Clarifying	Linking	Suggesting	Interpreting	Facilitating the Group	Supporting/Protecting	Modeling	Blocking	Assessing/Evaluating	Giving Feedback	Multicultural Competencies
COU 690	Faculty Member Avg (N =	2.55	2.63	2.60	2.49	2.64	2.60	2.78	2.47	2.45	2.57	2.77
	Site Supervisor Avg (N = 147)	3.16	3.19	3.18	3.16	3.16	3.27	3.27	3.13	3.18	3.21	3.33
MHC 690	Faculty Member Avg (N =	3.13	3.18	3.15	3.12	3.18	3.16	3.20	3.14	3.14	3.13	3.21



### Group Skills Scores by Course



\*Note: Data reflects faculty member final scores by course

## Skills Evaluation Findings

An analysis of each CDCS section indicates that our students are, in aggregate, achieving benchmark scores on every required skill by the end of the term with the exception of microskills in MHC 670: Clinical Mental Health Counseling Practicum. This is a consistent pattern we have seen in our skills data for practicum over the past several years. We have taken measures to increase knowledge and practice of these skills, including [enhancing our skills lab opportunities, re-training faculty on skills scores and performance expectations](#) in the preceding COU:690 Advanced Individual and Group Helping Skills and Techniques: Residency II and increasing collaboration between assessors and faculty members in the student skills [endorsement process tied to virtual Residency II](#).

We believe these efforts improved student preparation as they moved into field experience from Residency II. However, we also believe there are limitations in the scoring expectations of the CDCS which do not fully account for the natural and developmental dip in performance that coincides moving from classroom skills practice to working with clients for the first time. This particular issue was one of the primary areas of focus in our [reworking of the CDCS assessment tool and coinciding residency manual](#) across this past year.

We launched the new CDCS and residency manual with students starting our first skills course (COU 540: Helping Skills and Techniques: Residency I) in 22TW1. To ensure the integrity of the individual student evaluation process, we will maintain the original CDCS in a “teach out” mode for all students who came before the 22TW1 cohort but will bear in mind the limitations of the original CDCS as we launch the updated version.

An additional pattern we see is that site supervisors typically rate our students higher than their field experience faculty. Consultation with the Director of Counseling Programs, Professional Practice indicates this may reflect more direct exposure to student demonstration of skills at the field site than is offered in the courses themselves. Except for the microskills, where aggregate site supervisor scores were higher, differences between the two assessors do not impact whether students are meeting the threshold. With the original CDCS and evaluation process, the field experience faculty member scores ultimately determine whether or not a student passes the course. As part of the revisions to the CDCS, site supervisor scores will bear more weight in the final assessment of student skills performance, though faculty members will still make the final determination.

As we launch the new CDCS in the coming year and begin phasing out the current version, we will continue to watch for trends and monitor performance on the lower scoring skills in each category so that we offer additional assistance and training where needed.

## Dispositions

Student disposition performance was evaluated using the *Counselor's Developing Competencies Scale* (CDCS) for the reporting period from 21TW1 to 22TW5. The CDCS is comprised of four main sections (microskills, dispositions, mesoskills, and group skills) and is used across the program at specific evaluation points. The CDCS is a developmental assessment designed to capture student improvement on the noted skills and dispositions as students progress through the program.

Performance on the disposition section of the CDCS is scored as 1 (rarely displays), 2 (mostly displays), and 3 (always displays).

In the two residency courses (COU 540: Helping Skills and Techniques: Residency I and COU 690: Advanced Individual and Group Helping Skills and Techniques: Residency II), students are evaluated mid-term and at end of the term. In the field experience courses (MHC 670: CMHC Practicum, MHC 680: CMHC Internship, and MHC 690: CMHC Advanced Internship), students are evaluated at the end of the term by their site supervisor, as well as their faculty supervisor. Students were evaluated in the following courses, with the associated scores set as the minimum required final score to pass the assessment in that course:

Course/Experience	Total # of Students in Course 21TW1-22TW5)	Minimum Required Passing Score
COU 540 Helping Skills and Techniques: Residency I (Term 2)*	441	2
COU 690 Advanced Individual and Group Helping Skills and Techniques: Residency II (Term 9)	194	2
MHC 670 CMHC Practicum (Term 10)	198	Majority of 3s**
MHC 680 CMHC Internship (Term 11)	177	3
MHC 690 CMHC Advanced Internship (Term 12)	147	3

\*Note: The term number reflects the term in which a full-time student (two courses/term) would take the course.

\*\*Note: Majority of 3s = over 50% of individual dispositions received a 3 or above for the individually assessed student; when looking across groups of students, aggregate scores for each disposition should be 2.51 or above

### CDCS Disposition Scores by Course

The CDCS Dispositions are assessed in COU 540: Helping Skills and Techniques: Residency I, COU 690: Advanced Individual and Group Helping Skills and Techniques: Residency II, and in all three field experience courses (MHC 670: CMHC Practicum, MHC 680: CMHC Internship, and MHC 690: CMHC Advanced Internship). In COU 540 and COU 690, scores are provided by the faculty member. In the field experience courses, scores are provided by the site supervisor and the faculty member. Aggregate scores by skill and type of assessor are provided in the table below. The additional chart represents final faculty scores on each skill by course.

Course	Assessor	Professional Ethics	Professional Behavior	Professional and Personal Boundaries	Knowledge and Adherence to Site and SNHU Policies	Record Keeping and Task Completion	Multicultural Competencies	Emotional Management and Self-Control	Motivated to Learn & Grow/Initiative	Openness to Feedback	Flexibility and Adaptability
COU 540	Faculty Member Avg (N = 441)	2.83	2.86	2.84	2.86	2.83	2.72	2.83	2.86	2.87	2.85
COU 690	Faculty Member Avg (N = 194)	2.84	2.89	2.92	2.84	2.65	2.90	2.91	2.93	2.90	2.23
MHC 670	Site Supervisor Avg (N = 198)	3.02	3.06	3.00	2.98	2.94	2.92	2.94	3.01	2.99	2.98
	Faculty Member Avg (N = 188)	2.81	2.89	2.87	2.85	2.77	2.70	2.87	2.89	2.90	2.89
MHC 680	Site Supervisor Avg (N = 177)	3.15	3.11	3.11	3.07	3.00	3.02	3.07	3.12	3.12	3.06
	Faculty Member Avg (N = 177)	2.99	3.01	2.99	2.98	2.94	2.83	2.98	3.01	2.98	2.92
MHC 690	Site Supervisor Avg (N = 147)	3.23	3.18	3.14	3.12	3.04	3.14	3.12	3.14	3.14	3.10
	Faculty Member Avg (N = 146)	3.03	3.05	3.02	3.05	3.06	3.06	3.05	3.08	3.06	3.06

## Disposition Scores by Course



\*Note: Data reflects faculty member final scores by course

## **Disposition Evaluation Findings**

The CDCS disposition data analysis indicates that the majority of our students are achieving benchmark scores on each required disposition by the end of each term and are improving on dispositional demonstrations as they move through their skill courses and into field experience. While most students were meeting or exceeding performance expectations, there were individual students who did not meet score requirements, resulting in aggregate scores below the scale maximum of 3.

In most cases dispositional demonstration maintained or improved across the evaluation periods. However, there were a few exceptions, including demonstrations of flexibility and adaptability, professional ethics, and multicultural competencies. For the latter two, we believe the downward shift reflected movement from class-based experiences to working with clients in the field. We were grateful to see these scores rebound as students gained more experience and moved from their first field experience course into their second.

In addition, there was a noticeable dip in the “flexibility and adaptability” disposition in the COU 690: Advanced Individual and Group Helping Skills and Techniques: Residency II course that was atypical of other dispositions for that course. Consultation with the course lead for COU 690 indicated that this was likely tied to several challenges specific to the course that require students to be flexible and adaptable. In particular, COU 690 requires students to coordinate with co-leaders and fellow students as part of a group counseling experience and weekly practice sessions. Scheduling conflicts and the synchronous requirements can pose challenges for some students. In addition, this is a feedback-heavy course and students can struggle with adapting to feedback in some instances. Finally, all but the final term of this past academic year residencies were offered in a virtual format, which required attendance at weekly synchronous class times. While similar in format to the field experience students, this was also the first time many students had that additional synchronous requirement.

The data analysis also demonstrated an issue with the final scores in the field experience courses. While the scale for dispositions is intended to range from 0-3 and the descriptors for each disposition align with this scale, numerical values must be manually inserted in the evaluation by faculty and site supervisors in the form. Because the skills scales range from 0-4 and the dispositional assessment is completed as the second portion of the evaluation rather than following all of the skills components, we believe this led to some scale confusion and the periodic score of 4 for some dispositional assessments. This is why some aggregate scores reflect averages above the maximum of 3.

We became aware of this issue in the previous review cycle and worked to address this with clearer instructions; however, the issue persisted into this year. The new version of the CDCS will use drop-down scores to prevent this issue from occurring. As we launch the new CDCS in the upcoming year, we will continue to watch for trends and monitor performance on the lower scoring dispositions so that we offer additional assistance and training where needed.

## Academic and Disposition Support

Individual students who did not meet benchmark academic and dispositional requirements were referred to our Student Advancement, Dispositions, and Support Committee (SADS). Using our *Student Concern Referral form*, students can also be referred for dispositional concerns in any course, not just those in which the CDCS is administered. The referral form is based on the categories of the CDCS. In addition, concerns that could not be successfully addressed through program level processes were referred to the SNHU Professional Standards Committee for Professional Practice Programs (hereafter referred to as “the Professional Standards Committee”). The Professional Standards Committee receives, investigates, and resolves or makes recommendations regarding violations of the dispositions, proficiencies, professional standards, or an applicable code of ethics.

During the 21TW1-22TW5 reporting period, 144 students were referred to SADS for support. Thirty-five students were referred for disposition concerns. The remaining 109 students were referred for academic concerns (failing a course) and were placed on an academic support plan.

### Outcomes of Original SADS Plans

SADS Support Plan	Dispositions	Academic
Complete	17	90
Still Active	8	0
Referred to Professional Standards	7	0
Inactive	2	6
Withdrew from Program	1	0
Academically Dismissed from the Program	0	13
Total	35	109

### Outcomes of Professional Standards Referrals

All seven students who were referred to the Professional Standards Committee for dispositional concerns were dismissed from the MA in Clinical Mental Health Counseling program.

## Skills Support

During this academic year we modified our student support and remediation process specific to skills. Instead of referring students to SADS for skills support [we began offering a skills lab](#) for students enrolled in our residency courses. Students could elect to self-refer to skills lab for additional practice opportunities or were referred directly by their residency course instructor. Students who do not meet required scores on all CDCS skills by the end of term evaluation fail the course and are required to repeat it.

## Demographic and Other Characteristics

### Demographic Data

Demographic data was collected for applicants, enrolled students, and graduates during the review period, using the following definitions:

- **Applicants:** individuals who initially applied to the Clinical Mental Health Counseling program during the calendar months associated with the academic year (October 2021-August 2022), regardless of whether they were eventually accepted to the program. During this period, there were a total of 1,931 applicants. It is important to note that demographic data for applicants is far more limited than the data we have on enrolled students. Applicants are not required to share demographic information as part of the application process. Where data exists, it is captured below.
- **Enrolled Students:** students who had an “active” status during one or more terms in the 2021-2022 academic year. During this period, there were a total of 1597 active students.
- **Graduates:** students who graduated from the program during the terms of the 2021-2022 academic year. During this period, there were a total of 191 graduates

### Ethnicity

Ethnicity	Applicants		Enrolled Students		Graduates	
	Count	%	Count	%	Count	%
White	235	12.2%	994	62.2%	133	69.6%
Black or African American	37	1.9%	200	12.5%	18	9.4%
Hispanic	33	1.7%	157	9.8%	19	9.9%
Two or More Races	10	0.5%	48	3.0%	5	2.6%
Asian	9	0.5%	29	1.8%	2	1.0%
American Indian	0	0.0%	7	0.4%	0	0.0%
Hawaiian/Pacific Islander	0	0.0%	1	0.1%	0	0.0%
Unknown	60	3.1%	161	10.1%	14	7.3%
Blank	1547	80.1%	0	0.0%	0	0.0%
Total	1931	100.0%	1597	100.0%	191	100%

### Age

Age	Applicants*		Enrolled Students		Graduates	
	Count	%	Count	%	Count	%
20-25	86	4.5%	378	23.7%	66	34.6%
26-30	87	4.5%	397	24.9%	41	21.5%
31-35	66	3.4%	255	16.0%	21	11.0%
36-40	51	2.6%	198	12.4%	24	12.6%



41-45	29	1.5%	161	10.1%	14	7.3%
46-50	65	3.4%	99	6.2%	7	3.7%
51-55	*	*	58	3.6%	12	6.3%
56-60	*	*	36	2.3%	5	2.6%
61+	*	*	15	0.9%	1	0.5%
Blank	1547	80.1%	0	0.0%	0	0.0%
Total	1931	100.0%	1597	100.0%	191	100.0%

\*Note: Applicant age is captured differently than enrolled students or graduates: <25, 25-29, 30-34, 35-39, 40- 44, 45+. For comparison purposes, applicant data was categorized in the chart above with closest alignment to the enrolled students and graduate categories.

### Gender

Gender	Applicants		Enrolled Students		Graduates	
	Count	%	Count	%	Count	%
Female	287	14.9%	1285	80.5%	158	82.7%
Male	70	3.6%	232	14.5%	31	16.2%
Genderqueer/Gender non-conforming/Non-binary	*	*	1	0.1%	*	*
Unknown	1574	81.5%	79	4.9%	2	1.0%
Total	1931	100.0%	1597	100.0%	191	100.0%

\* Note: Not an available option

### Marital Status

Marital Status	Applicants		Enrolled Students		Graduates	
	Count	%	Count	%	Count	%
Companion	1	0.1%	1	0.1%	*	*
Married	1	0.1%	144	9.0%	27	14.1%
Divorced	0	0.0%	37	2.3%	9	4.7%
Single	10	0.5%	275	17.2%	62	32.5%
Other	0	0.0%	12	0.8%	3	1.6%
Blank	1919	99.4%	1128	70.6%	90	47.1%

Total	1931	100%	1597	100.0%	191	100.0%
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\* Note: Not an available option

### Military Association

Applicant military association is solely captured as “military” or “non-military/unknown”. Because this does align with the categories for enrolled students and graduates, it is included separately:

Military Affiliation	Applicants	
	Count	%
Military	34	1.8%
Non-Military/Unknown	1897	98.2%
Total	1931	100%

Military Association	Enrolled Students		Graduates	
	Count	%	Count	%
Active Duty	18	1.1%	2	1.0%
Nat’l Guard or Reservist	14	0.9%	1	0.5%
Veteran	59	3.7%	5	2.6%
Spouse Active Duty	71	4.4%	10	5.2%
Spouse of Active/Retiree	1	0.1%	0	0.0%
Spouse of Non-Active Duty	4	0.3%	2	1.0%
Spouse of Veteran	9	0.6%	2	1.0%
Dependent	20	1.3%	1	0.5%
None	1380	86.4%	165	86.4%
Unknown	21	1.3%	3	1.6%
Total	1597	100%	191	100.0%

### Geographic Area

State	Applicants		Enrolled Students		Graduates	
	Count	%	Count	%	Count	%
AE*	0	0.0%	1	0.1%	1	0.5%
AK	2	0.1%	6	0.4%	2	1.0%
AL	2	0.1%	12	0.8%	2	1.0%

AP*	1	0.1%	2	0.1%	0	0.0%
AR	0	0.0%	1	0.1%	0	0.0%
AZ	3	0.2%	12	0.8%	3	1.6%
CA	14	0.7%	65	4.1%	7	3.7%
CO	9	0.5%	29	1.8%	0	0.0%
CT	8	0.4%	50	3.1%	9	4.7%
DC	2	0.1%	2	0.1%	0	0.0%
DE	4	0.2%	4	0.3%	0	0.0%
FL	25	1.3%	79	4.9%	8	4.2%
GA	8	0.4%	43	2.7%	5	2.6%
HI	1	0.1%	5	0.3%	1	0.5%
IA	1	0.1%	6	0.4%	0	0.0%
ID	2	0.1%	6	0.4%	0	0.0%
IL	7	0.4%	15	0.9%	1	0.5%
IN	4	0.2%	14	0.9%	1	0.5%
KY	3	0.2%	14	0.9%	1	0.5%
LA	3	0.2%	14	0.9%	1	0.5%
MA	37	1.9%	194	12.1%	30	15.7%
MD	9	0.5%	35	2.2%	5	2.6%
ME	9	0.5%	34	2.1%	4	2.1%
MI	8	0.4%	24	1.5%	3	1.6%
MN	5	0.3%	13	0.8%	3	1.6%
MO	2	0.1%	0	0.0%	0	0.0%
MS	0	0.0%	8	0.5%	1	0.5%
MT	2	0.1%	5	0.3%	0	0.0%
NC	9	0.5%	66	4.1%	6	3.1%
ND	1	0.1%	1	0.1%	0	0.0%
NE	1	0.1%	4	0.3%	1	0.5%
NH	42	2.2%	195	12.2%	24	12.6%
NJ	17	0.9%	27	1.7%	0	0.0%
NM	5	0.3%	8	0.5%	0	0.0%
NV	2	0.1%	17	1.1%	4	2.1%
NY	25	1.3%	114	7.1%	14	7.3%
OH	8	0.4%	24	1.5%	0	0.0%
OK	1	0.1%	13	0.8%	0	0.0%
OR	5	0.3%	19	1.2%	1	0.5%
PA	9	0.5%	66	4.1%	7	3.7%
RI	11	0.6%	36	2.3%	9	4.7%
SC	4	0.2%	29	1.8%	3	1.6%
SD	1	0.1%	1	0.1%	0	0.0%
TN	5	0.3%	24	1.5%	2	1.0%

TX	18	0.9%	94	5.9%	10	5.2%
UT	4	0.2%	19	1.2%	1	0.5%
VA	12	0.6%	58	3.6%	9	4.7%
VT	15	0.8%	40	2.5%	8	4.2%
WA	15	0.8%	36	2.3%	3	1.6%
WI	1	0.1%	0	0.0%	0	0.0%
WV	0	0.0%	9	0.6%	1	0.5%
WY	2	0.1%	4	0.3%	0	0.0%
Unknown	1547	80.1%	0	0.0%	0	0.0%
Total	1931	100%	1597	100%	191	100.0%

\*Note: \*AE = Armed Forces Europe, AP = Armed Forces Pacific

## Demographic Findings

Our applicant demographic data is limited in many areas. This is largely due to the fact that applicants are not required to share this information until they are enrolled in the program. While limited, we will continue to review this data and look for trends as it relates to students who ultimately enroll in our program and as an effort to review recruitment efforts.

Comparison of our enrolled student and graduate demographic data shows parallels in the categories of ethnicity and gender. While some variation exists, we are not seeing considerable deviations between the demographics of our graduates versus those who remain in our program. We will continue to monitor this in relation to student support and persistence initiatives. We are, however, continuing to see changes in the geographic area of our student population and the age of our enrolled students now that we have received CACREP accreditation. While many of our original students and current graduates were located in the Northeast, we are seeing increasing numbers of students from across the United States and anticipate this will continue. Further, the data reflects increasing numbers of enrolled in their mid-twenties and above.

In comparison to aggregate demographic data reflected in CACREP's 2017 Vital Statistics report, our active student ethnicity and gender demographics largely parallel what is seen among all CACREP-accredited programs with the exception of African American and male students, where our rates are lower than the CACREP aggregate (see table below). This is an important call-out and something we will use to inform our future recruitment practices. It is important to note that while the newer 2019 CACREP Vital Statistics report was published in 2022, a disclaimer in the report indicated corrupted and inaccurate results that should be interpreted with strong caution. For that reason, we decided to continue comparison of our demographic data to the published data in the 2017 report which may or may not reflect current national trends.

Also of note is that we were limited to the gender categories of "male" and "female" in our some of our data collection and the data provided from CACREP; however, we recognize the significant limitation of these binary categories and the ways in which they do not effectively capture or can otherwise marginalize non-binary and genderqueer individuals. We continue to advocate for more inclusive and representative gender identities in the future.

	CACREP	SNHU
African American	18.8%	12.5%
American Indian/Native Alaskan	0.8%	0.4%
Asian American	2.2%	1.8%
Caucasian American	59.5%	62.2%
Hispanic/Latino	7.8%	9.8%
Native Hawaiian/Pacific Islander	0.1%	0.1%
Multiracial	2.2%	3.0%
Non-resident Alien	1.4%	0.0%
Other/Undisclosed	7.2%	10.1%
Female	82.5%	80.5%
Male	17.4%	14.5%
Other/Undisclosed	0.1%	4.9%

Note: CACREP n = 35,920 (77.4% of CACREP-accredited schools reported this data; source = 2017 CACREP Vital Statistics Report); SNHU N = 1597

## Feedback from Site Supervisors, Graduates, and Employers

In addition to assignment and demographic data, the Counseling program also collects feedback from site supervisors, graduates, and employers, regarding key aspects of the program, and uses it to inform continuous improvement efforts. Results from these surveys are included below.

### Site Supervisor Feedback

We gather site supervisor feedback on program performance through our end-of-term student evaluations in each field experience course. We use this data, coupled with information from other sources, to support improved training of our students and enhanced program delivery.

Site supervisor data was pulled to align with our academic year which included the 21TW1 -22TW5 terms, and responses reflect end-of-term feedback for those terms. Areas of focus included student preparation for field experience, support of site supervisors through the field experience process, and overall satisfaction rates. We use this data to help guide decisions on training, student preparation, and facilitation of the field experience process for our site supervisors. See [Subsequent Program Modifications](#) section below.

### Student Preparation

How would you rate our program at preparing your field experience student for placement at your site?

	Blank	Very Poor	Poor	Acceptable	Good	Very Good
MHC 670 (N = 198)	0.0%	0.0%	0.0%	9.1%	47.5%	43.4%
MHC 680 (N = 177)	0.0%	0.0%	1.7%	9.0%	40.1%	49.2%
MHC 690 (N = 147)	0.0%	0.0%	1.4%	8.8%	32.0%	57.8%

### Program Facilitation of Field Experience

How would you rate our program at facilitating the field experience process this term?

	Blank	Very Poor	Poor	Acceptable	Good	Very Good
MHC 670 (N = 198)	0.0%	0.5%	2.0%	12.1%	49.5%	35.9%
MHC 680 (N = 177)	0.0%	0.5%	2.3%	10.2%	39.0%	48.6%
MHC 690 (N = 147)	0.0%	0.7%	2.0%	12.2%	33.3%	51.7%

### Future Students

Would you be willing to accept another SNHU student in the future?

Preparation	Blank	No	Yes
MHC 670 (N = 198)	0.0%	7.1%	92.9%
MHC 680 (N = 177)	0.0%	6.2%	93.8%
MHC 690 (N = 147)	0.0%	8.7%	91.2%

## Graduate Survey Feedback

We send a graduate survey to all alumni who have graduated from our program within the past year. This allows us to capture key metrics on elements of our program and evaluate the impact of our degree on various aspects of post-graduate employment as our students graduate. Of the 191 graduates in the academic year, 61 completed the graduate survey, resulting in a 32% response rate.

Data collected from this year's survey is provided below. Because we are interested in hearing from the maximum number of graduates possible, we continue to look for ways to expand our response rates and engage our graduates in program improvement beyond their enrollment at SNHU.

### Evaluation of Program Outcomes

Using a Likert scale (0 = Not well at all, 1 = Slightly well, 2 = Moderately well, 3 = Very well, 4 = Extremely well) respondents indicated the extent to which they believed their graduate program helped prepare them on the following counseling skills and associated program outcomes:

Program Element	Average Rating (N = 61)
Demonstrates a strong professional counselor identity (Program Outcome 1)	3.28
Advocates on behalf of the profession (Program Outcome 1)	3.09
Promotes client access, equity, and success (Program Outcome 1)	3.67
Demonstrates socially, culturally, and spiritually appropriate practices (Program Outcome 2)	3.58
Promotes social justice to minimize barriers (Program Outcome 2)	3.34
Applies theories and etiology of human growth and development to promote optimum wellness for clients (Program Outcome 3)	3.37
Supports and advocates for clients in relation to their career development (Program Outcome 4)	3.14
Utilizes appropriate counseling theories, models, and culturally relevant strategies in client treatment (Program Outcome 5)	3.42
Implements appropriate strategies for effectively forming and facilitating group counseling (Program Outcome 6)	3.21
Validly and reliably assesses the needs of counseling clients through industry- appropriate procedures (Program Outcome 7)	3.33
Incorporates evidence-based, data-driven, approaches into current practice (Program Outcome 8)	3.40
Adheres to the legal and ethical standards of clinical and mental healthcare professionals (Program Outcome 9)	3.75

### Assessment of Program Experiences

Using a Likert scale (0 = Extremely dissatisfied, 1 = Somewhat dissatisfied, 2 = Neither satisfied nor dissatisfied, 3 = Somewhat satisfied, 4 = Extremely satisfied) respondents rated the following program experiences:

Experiences	Average Rating
Your overall experience in the program	3.60
The quality of the instruction within your program	3.50
The quality of the curriculum in your program	3.57
The quality of your academic residencies	3.43

The quality of your field experience	3.27
The quality of your advising experience (i.e. academic, faculty, career services)	3.40

### Overall Satisfaction

Respondents were asked if they would select the MA in Clinical Mental Health Counseling program at SNHU if they were to start their studies again:

	Percentage (N = 56)
Yes	94.6%
No	5.4%

### Employer Survey Feedback

We aim to provide a strong training program that prepares students for post-graduate work in the clinical mental health field. In order to assess for this and to gather additional feedback that can be used to support the training of our students, we send out an annual employer survey to employers of our program graduates.

We request permission from graduates to survey their employers through our graduate survey. When a graduate grants permission, we send a separate survey to the employer with questions designed to help us further assess our program efficacy. Of the 61 respondents on the graduate survey, 17 granted permission to send the employer survey to their employer. Of those 17 employers, 3 completed the employer survey.

The data collected from this year's survey is provided below. It is important to note that the response size was small, and though valuable, we recognize the need to continue to monitor employer feedback and look for ways to expand our reach to employers to ensure preparedness of our graduates in the counseling field.

### Length of Employment

Respondents indicated the length of employment the graduate had with their organization:

	Percentage (N = 3)
Less than 6 months	66.7%
6 months to 1 Year	0%



1 to 3 Years	33.3%
4-5 Years	0%
More than 5 years	0%

### Evaluation of Program Outcomes

Using a Likert scale (0 = Not well at all, 1 = Slightly well, 2 = Moderately well, 3 = Very well, 4 = Extremely well) respondents indicated the extent to which they believed their employees performed the following counseling skills and associated program outcomes:

Program Element	Average Rating (N = 3)
Demonstrates a strong professional counselor identity (Program Outcome 1)	3.67
Advocates on behalf of the profession (Program Outcome 1)	3.67
Promotes client access, equity, and success (Program Outcome 1)	4.00
Demonstrates socially, culturally, and spiritually appropriate practices (Program Outcome 2)	3.67
Promotes social justice to minimize barriers (Program Outcome 2)	3.33
Applies theories and etiology of human growth and development to promote optimum wellness for clients (Program Outcome 3)	4.00
Supports and advocates for clients in relation to their career development (Program Outcome 4)	3.00
Utilizes appropriate counseling theories, models, and culturally relevant strategies in client treatment (Program Outcome 5)	3.67
Implements appropriate strategies for effectively forming and facilitating group counseling (Program Outcome 6)	3.67
Validly and reliably assesses the needs of counseling clients through industry-appropriate procedures (Program Outcome 7)	3.33
Incorporates evidence-based, data-driven, approaches into current practice (Program Outcome 8)	3.33
Adheres to the legal and ethical standards of clinical and mental healthcare professionals (Program Outcome 9)	3.67

### Overall Satisfaction

Respondents were asked to rate their overall satisfaction with SNHU CMHC graduates:

	Percentage (N = 3)
Extremely Satisfied	100%
Somewhat Satisfied	0.0%
Neither Satisfied nor Dissatisfied	0.0%
Somewhat Dissatisfied	0.0%
Extremely Unsatisfied	0.0%

Respondents were asked if they would hire another SNHU CMHC graduate:

	Percentage (N = 3)
Yes	100%
No	0%

## Subsequent Program Modifications

### Admissions Modifications

Using feedback from our admission committee, SADS referrals, and student performance on the CDCS we refined our admissions process in the following ways:

Term Launched	Revisions	Data Source	Goal
22TW4	Modified application process so that applicants have only one attempt to address comments/suggestions by the CMHC Admissions committee.	Student Applications; SADS	To improve dispositional assessment and efficiencies within the review process.
22TW4	Required applicants to wait 6 months before reapplying to the CMHC program.	Student Applications	To align with standard SNHU practice for reapplication. Previously, applicants were encouraged to reapply in a "subsequent" term. By aligning with university practice, we were able to operationalize the word "subsequent" to provide

			increased clarity.
22TW5	Required letters of recommendation from recommenders who have known the applicant for at least 6 months	Student Applications; SADS	To provide admissions committee members with more in-depth information about potential students and improve applicant assessment. This range of time was selected to align with an instructor working with the applicant for about two terms.

### Curricular Modifications

We made curriculum revisions to several courses during the 21TW1-22TW5 terms. These were driven by various sources of data, including that presented above, student evaluations, and faculty feedback.

Course	Term Launched	Revisions	Data Source	Goal
COU 605: Counseling Families, Couples, and Children	22TW3	Updated resources for childhood sexual abuse	Faculty feedback	To reflect current information and guidance from AAMFT
COU 530: Theories of Counseling	22TW3	Rubrics and instructions updated for Practice Skill Activity Assignments	Faculty feedback; Assignment data	To provide clarity and ensure students were demonstrating techniques focused on each theory
COU 640: Substance Use Disorders and Process Addictions	22TW3	Updated assignment instructions and rubric definitions for 7-1 assignment	Faculty feedback; Assignment data	To improve clarity and ensure more accurate scoring
COU 645: Counseling Sexuality Issues	22TW3	Updated assignment instructions and rubric to align with the Biopsychosocial form	Faculty feedback; Assignment data	To improve clarity and ensure more accurate scoring

COU 650: Diagnosis of Emotional and Mental Disorders	22TW3	Updated instructions and rubric for 5-1 and 5-2 assignments	Faculty Feedback; Assignment data	To better align the rubric to the required elements of the assignment and ensure more accurate scoring
COU 610: Assessment and Evaluation in Counseling	22TW4	Updated instructions for discussion rubrics	Faculty Feedback; Assignment data	To clarify proper response format for students and to ensure more accurate scoring
COU 635: Psychopharmacology	22TW4	Updated textbook	Bookstore	To address textbook access issues and ensure students received updated and relevant information

### Enhancements to Student Advancement, Dispositions, and Support (SADS)

Using feedback from clinical and field experience faculty, student performance on the CDCS, and referrals stemming from classroom and field experiences, we have made many improvements to our SADS process. These include:

Term	Revisions
21TW1	<ul style="list-style-type: none"> <li>The Academic Coaching and Timeliness (ACT) plan was removed as a SADS voting option and made available for progression plans only.</li> <li>The Auxiliary Plan, a self-directed plan using Linked in Learning, replaced it as a voting option because it provides more in-depth remediation regarding the dispositions and can be individualized to each student's needs.</li> <li>Removed Skills remediation referrals and shifted focus back to classroom gatekeeping. It was clarified that if a student was in need of remediation at the end of the Res. I or II course, it would indicate they did not develop the required skills during the course and would therefore need to repeat the course.</li> <li>Adjusted practice for Academic Integrity referrals to require that they first go through the University Academic Concern process and be deemed a violation before being brought before the SADS committee.</li> </ul>
22TW3	<ul style="list-style-type: none"> <li>Clarified additional context to be considered with student cases: Cultural, Title IX Implications, and Policy. A graphic was created, presented and discussed with the committee.</li> <li>Academic Plan II replaced the ACT plan as a progression plan. The Academic Plan II is assigned to students who fail to pass (and therefore must repeat) a second distinct course in the program. The plan consists of 10 hours of learning modules on time management, creating learning plans and sticking with them, etc.</li> </ul>

- Academic Plan III created as a progression plan to be assigned to students who fail to pass (and therefore must repeat) a third distinct course. The plan consists of a meeting with selected members of the SADS committee to determine additional steps for remediation or professional standards referral.

**Enhancements to Skills Development: Skills Lab**

Using feedback from clinical and field experience faculty, student performance on the CDCS, and referrals stemming from the residency courses, we have made improvements to our Skills lab. These include:

Term	Revisions
21TW1	<ul style="list-style-type: none"> <li>• Academic Partners were added to assist with skills lab referrals and provide group skills lab practice sessions.</li> <li>• Offerings increased to allow students to join up to 3 group skills practice sessions per term in addition to individual 1:1 practice sessions</li> <li>• Residency students were allowed to self-refer to skills lab in addition to faculty-based referrals</li> </ul>
22TW5	<ul style="list-style-type: none"> <li>• Skills lab was offered as-needed at the in-person residencies to supplement the virtual skills lab offerings and address individual skills needs during the residency week</li> </ul>

**Counselor’s Developing Competency Scale (CDCS) and Residency Manual**

Following a year of work to revise and update the CDCS, the MA.CMHC assessment committee spent the 2021-2022 academic year reviewing and revising the associated residency manuals for COU 540: Helping Skills and Techniques: Residency I and COU 690: Advanced Individual and Group Helping Skills and Techniques: Residency II to ensure alignment with the new CDCS and course assignments. The new CDCS, associated residency manuals, and corresponding course updates will follow a progressive launch plan and begin with student cohorts taking COU 540 in the first term of the next academic year (22TW1).

**Other Substantial Program Changes**

**Return to In-Person Residencies**

Like many programs, we had to adjust policies and practices to support our students during the pandemic including the transition of our in-person residencies to a virtual format, Virtual residencies were held during the first three terms of our past academic year, We were grateful to return to our original in-person residency delivery model starting in the fourth term (running from June 6, 2022- August 14, 2022) and once again gather with our students in New Hampshire for our final term of the academic year.

**Field Experience Updates**

In the previous academic year two changes were made relative to technology use in the field experience courses. First, the Zoom platform replaced RingCentral for weekly supervision calls.

Second, updates were made to the field experience courses in 22TW4 to clarify the process for the review of student video submissions. This included adding clarifying instructions and updating the submission process in Bongo.

### **New Program Committees**

In response to program growth and changing needs within the program, we separated the assessment and curriculum committees so they could focus on independent tasks. Input is sought from both committees when collaboration is warranted. Additionally, we added a continuing education committee to expand our reach with continuing education opportunities and further support our site supervisors, faculty, students, and allied university professionals. Beginning in 21TW1 we started offering continuing education sessions (approved through the National Board for Certified Counselors) at least once per term.

### **Enhancements to Faculty Training and Support**

In an effort to further refine our course lead model and support new and continuing adjunct faculty, the Course Lead Support committee updated course resource folders, continued community building efforts with our adjunct team, and developed a new MA in CMHC Program FAQs for Faculty document to provide all new faculty starting in our program.

### **Staffing Changes**

We hired six additional clinical faculty across the academic year:

- 21TW1: Drs. Robyn Lowery and Heather Paessler-Chesterton
- 22TW3: Drs. Tamara Harris, Rebecca Sheffield, and Abby Dougherty
- 22TW5: Dr. Natasha Barnes

In August of 2022 Drs. Ljube Spiro and Eric Perry returned to clinical faculty positions. Dr. Rodney Pennamon was hired as the Director of Counseling Programs, Professional Practice to replace Dr. Spiro and Dr. Brandon Wilde was hired as the Director of Counseling Programs, Counselor Identity to replace Dr. Perry.

In the summer of 2022, we ran a search for a new Executive Director and hired Dr. Gloria Aquino Sosa who began her role in September 2022 as part of the new academic year.

## **Conclusion**

Over the past academic year, there have been continual efforts to track data, understand where gaps or changes are needed, and work to modify processes and course development accordingly. Many of the outcomes noted above were expected as part continued program growth. However, many reflected new information, were necessary responses to the pandemic, or further solidified anecdotal information we were receiving from other sources. As a program, we are grateful for opportunities to look at data points that help direct and guide our decision-making process, and we will continue to use our comprehensive assessment plan to support program and student needs in a data-driven manner.