

DOCTORAL STUDIES STUDENT HANDBOOK

Department of Rehabilitation Studies

College of Allied Health Sciences

East Carolina University

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INTRODUCTION

The mission of the Department of Rehabilitation Studies' doctoral program is to serve as a national and international leader in the education of excellent and responsible rehabilitation and clinical counseling, and administration professionals. The doctoral program is designed to meet the critical need for doctoral prepared rehabilitation and clinical counseling, and administration professionals across the nation. The primary obligations of our program include:

1. Extending the knowledge base of the rehabilitation and clinical counseling, administration profession in a climate of scholarly inquiry.
2. Supporting faculty and students in publishing and/or presenting the results of scholarly inquiry.
3. Preparing students to contribute to the conversations that inform professional practice by generating new knowledge for the profession through dissertation research focusing on areas relevant to rehabilitation and clinical counseling practice, counselor education, clinical supervision, and/or administration.
4. Preparing students to assume positions of leadership in the profession and/or their area(s) of specialization.

This Handbook is written to assist the student in their journey through the doctoral program in the Department of Rehabilitation Studies. The procedures within this document are guidelines and policy of the department and the university. We urge you to refer to this handbook as you make progress through the program; however, please remember that this program is dynamic and procedures may be modified by the department as needed. Please refer to the Graduate Catalog of the year you were admitted for specific university requirements.

It is important as students that you keep abreast of all changes. If you have any questions concerning the program, please feel free to communicate your questions or concerns to your advisor or the director of the doctoral studies.

Good luck with your studies, and remember to take the time to enjoy the journey and the experience.

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ADMISSION INTO THE PHD PROGRAM

The PhD in Rehabilitation Counseling and Administration is designed for advanced students with interest in the rehabilitation and clinical counseling, and administration.

Admission Criteria

Admission to study at the doctoral level requires acceptance by the graduate school and the department. Department faculty will make a comprehensive review of the each applicant's qualifications. The following criteria will be considered collectively for admission to the program:

- An earned master's degree in rehabilitation counseling or a related field from an accredited university or college-
 - Those applying to the concentration in rehabilitation and clinical counseling must have a master's from a CACREP accredited program or,
 - The applicant must demonstrate their master's curricular experiences were equivalent to CACREP entry level standards (i.e., section II and III). The applicant must contact the director of doctoral studies to facilitate this process (see below).
- Earned GPA of 3.5 in all graduate work;
- A minimum of 1000 (quantitative and verbal) on the Graduate Record Examination (GRE) or a score of 50 (400 on the new version) on the Miller Analogy Test (MAT)
 - Score must be within the past 5 years;
- A minimum of two (2) years of post-masters related professional experience is preferred;
- A personal statement that summarizes in as much detail as possible the reasons for pursuing doctoral study and doctoral research objectives;
- Professional and personal accomplishments;
- Professional references; and
- A personal interview with the faculty.

Application Deadline: February 1st.

Application Process

The ECU application process is designed to be self managed by the applicant. Applicants will need to collect all application materials, including transcripts and recommendations, and send them to the Graduate School.

GRE or MAT scores should be sent to the Graduate School directly. Applicants must retake the GRE or MAT if their scores are more than five years old. Scores **MUST** be received by the Graduate School by the February 1st deadline.

Transcripts for all undergraduate and graduate work, writing samples, resume, personal statement, and the three letters of recommendation should be included with the application packet.

Applicants to the concentration in rehabilitation and clinical counseling who do not possess a master's degree from a CACREP accredited program must contact the director of doctoral studies (toriello@ecu.edu) who will facilitate a process for determining if the applicants' master's curricular experiences were equivalent to CACREP entry level standards (Sections II and III). This process will be documented using the CACREP Equivalency Form (see Appendix A1).

Once the application file is received and completed at the Graduate School, it will be sent to the Department and the faculty will then review all materials and make a recommendation to the Graduate School. The Graduate School will notify all applicants as to whether the application has been accepted or rejected.

ACCOMMODATIONS FOR PERSONS WITH DISABILITY

East Carolina University seeks to comply fully with the Americans with Disabilities Act (ADA). Students requesting accommodations based on a disability must be registered with the Department for Disability Support Services located in Slay 138. Phone: (252) 737-1016 (voice/TTY).

PROGRAMS OF STUDY

The PhD in Rehabilitation Counseling and Administration is designed to prepare higher education faculty in rehabilitation and clinical counseling, related fields, and/or administrators in rehabilitation, substance abuse, mental health and related health care programs. The program prepares advanced clinical professionals for rehabilitation, mental health and substance abuse counseling in clinical settings as well. Students select a program in either rehabilitation and clinical counseling, or rehabilitation administration. All students are required to fulfill a one year residency requirement and complete a dissertation under supervision of a departmental faculty member.

The program in rehabilitation and clinical counseling requires a minimum of 98 s.h. of graduate course work including acceptable graduate course work in a CACREP accredited counseling graduate program or a program with curricular experiences equivalent to CACREP entry level standards (i.e., section II and III; see Appendix A1). Required course credit which may be completed as part of a prior graduate program include the following courses (or the equivalent): REHB 5100, 6000, 6010, 6250, 6300, 6310, 6320, 6350, 6351, 6360, 6370, 6401, 6550, 6991, 6992, 6993, 6994. This concentration requires a minimum of 49 s.h. beyond the masters degree, including BIOS 7021, 7022; 3 s.h. of an advanced statistics course approved by the program director; REHB 7340, 7601, 8210, 8360, 8380, 8420, 8550, 8810, 8811, 8812, 8813, 8991, 8992, 8993, 8994, and 9000. Additional concentrations in specialty areas may be chosen from courses sequences listed below:

- A. Substance Abuse and Clinical Counseling includes 12 s.h. selected from REHB 6330, 6703, 8710, and an approved elective.
- B. Vocational Evaluation includes 12 s.h. selected from REHB 6405/6406, 7403, 7404, 8410.
- C. Rehabilitation Research includes 12 s.h. selected from BIOS 5010, 7501, 7560; NURS 7250, EDUC 7001, and NURS 7235 or EDUC 7430.
- D. Concentration area of focus chosen by the candidate and approved by the program director.

The program in rehabilitation administration requires a minimum of 98 s.h. of graduate course work including acceptable graduate course work in a counseling or rehabilitation related graduate program. Required course credit which may be completed as part of a prior graduate program include a masters' degree in a related rehabilitation or health care field and the following courses (or the equivalent): REHB 5100, 6000, 6010, 6300, 6401.

This concentration requires a minimum of 45 s.h. beyond the masters degree, including BIOS 7021, 7022, and 6 s.h. selected from BIOS 7550, 7560, NURS 7235, 7250, EDUC 7001, 7430; REHB 7601, 8420, 8550, 8630, 8810, 8811, 8812, 8813, and 9000. This concentration also requires the completion of a 12 s.h. area of focus selected by the candidate and approved by the program director.

Developing a Program of Study

During the first semester of enrollment students will meet with their assigned advisor to develop a tentative Program of Study (Appendices A2 and A3). This document is to plan for the student's course enrollment. This document will serve as a guide for the student and will be reviewed at least annually by the student and his/her advisor.

Transfer Credit

As noted above, students accepted into the doctoral program may transfer required courses (or equivalents) that were completed during previous graduate work. Additionally, a maximum of 18 s.h. of doctoral credit (course work taken beyond the master's degree) may be transferred to the degree program. Students must complete the course waiving process to receive credit for prior graduate course work (see Appendices B1 and B2).

Program Enrichment

In addition to course requirements, students will be assigned various clinical and teaching learning experiences, involving mentored classroom and clinical instruction and administration to assist the student in gaining perspective and experience in university teaching, clinical supervision, and management. Students will be encouraged to participate in university-wide and other professional seminars.

DOCTORAL FIELDWORK

Advanced Practicum

Students completing the Rehabilitation and Clinical Counseling program are required to complete 3 credit hours of Advanced Practicum.

For Advanced Practicum, students are required to participate in a supervised doctoral-level practicum of a minimum of 100 hours in counseling, of which 40 hours must be in direct service with clients. Requirements for Advanced Practicum will follow those detailed in the Department of Rehabilitation Studies Counseling Practicum Manual, with the following exceptions:

- a. Advanced Practicum students may NOT be supervised by other doctoral students.
- b. Advanced Practicum students will attend a Practicum Seminar to receive the required group supervision from the faculty assigned to the Practicum Seminar. Moreover, this

faculty will provide the required individual or triadic supervision, unless the individual/triadic supervision is being provided by a qualified site supervisor who is not a student in the doctoral program. If the latter is the case, then the site supervisor must work in bi-weekly consultation with the faculty assigned to the Practicum Seminar.

- c. Advanced Practicum students may NOT attend the same Practicum Seminar in which masters students they are providing individual or triadic supervision are attending.

Advanced Internship

Students completing the Rehabilitation and Clinical Counseling program are required to complete 12 credit hours of Advanced Internship.

For Advanced Internship, students are required to complete doctoral-level counseling internships totaling a minimum of 600 clock hours. The 600 hours may include supervised experiences in counselor education and supervision (e.g., clinical practice, research, teaching). The internship includes most of the activities of a regularly employed professional in the setting. The 600 hours may be allocated at the discretion of the students' Advisor and the student on the basis of experience and training.

Students completing internship experiences in teaching, research, clinical supervision, and/or clinical practice must:

- a. Complete the "Advanced Internship Site and Mentor/Field Supervisor Information" form (see Appendix C1).
- b. Complete an average of 1 hour per week of individual and/or triadic supervision that is performed by an assigned faculty mentor(s). This supervision will be documented using the "Advanced Internship Supervisory Record and Development Form" (see Appendix C2).
- c. The student will also work with their assigned faculty mentor(s) to complete the "Evaluation of Advanced Internship Student Performance" form (see Appendix C3). This form should be completed at the midpoint and completion point of the advanced internship experience.
- d. Complete an average of 1 hour per week of group supervision with other Advanced Internship students that is performed by a faculty member.
- e. Document their actual clock hours of Advanced Internship activities using the "Advanced Internship Log" (see Appendix C4).

DOCTORAL COMPREHENSIVE EXAMS

Following completion of required course work and prior to admission to Candidacy for the PhD, students must pass *written* comprehensive exams (Comps) intended to test fundamental knowledge in three areas: Core Content (i.e., Rehabilitation and Clinical Counseling or Rehabilitation Studies), Concentration/Specialization (e.g., Substance Abuse, Mental Health, Clinical Supervision, Theories), and Research/Statistics. Critical analysis and synthesis of all related academic, research, and clinical aspects of the field of preparation must be demonstrated.

Comprehensive Exams Policy and Procedure

The process for completing Comps involves several policies and procedures:

1. Comps are offered twice a year: during the time after Spring and before Summer Semesters, and during the time after Fall and before Spring Semesters.
2. Students who believe they are ready to take Comps, typically after their second year in the program, need to petition (in writing) their advisor that they wish to take Comps.
 - a. A petition should include a cover letter stating why the student believes they are ready for Comps and a current vitae highlighting their accomplishments during their time in the program.
3. The student's advisor will then facilitate:
 - a. The dates, times, and locations of Comps;
 - b. The questions for students taking Comps; and
 - c. The readers and evaluators of students' answers to the questions (e.g., Doctoral Faculty and doctoral course instructors). NOTE: The Advisor can solicit pertinent faculty inside and outside the department to write questions, and read and evaluate students' answers to the questions.
4. Comps will be spread across three days. Each day, students will have six hours to answer two questions.
 - a. Day 1 will consist of students answering two Core Content questions.
 - b. Day 2 will consist of students answering two Concentration/Specialization questions.
 - c. Day 3 will consist of student answering two Research/Statistics questions.
 - d. Comps will be proctored by a designated department staff.
 - e. Student's answers must be typed on a computer and saved on removable drives. Students will be provided access to a computer and space in which they can complete the examination.
 - f. Specific accommodations will be provided if requested by the student and the Department for Disability Support Services (Telephone number: 252-737-1016) according to University guidelines.
 - g. Students are not permitted to refer to notes, literature, etc. during the exams.
5. Departmental support staff will then electronically store, de-identify, copy and distribute students' answers to the designated readers/evaluators.
6. Two faculty members will read and evaluate answers as exemplary, satisfactory, or unsatisfactory.
 - a. If one faculty member rates an answer as unsatisfactory, then a third faculty will evaluate the answer.
7. Once all faculty have turned in their ratings, the student's advisor will review ratings and make recommendations.
 - a. For a recommendation for Doctoral Candidacy, a student must receive a passing score on answers to all questions.
 - i. An answer must receive at least two satisfactory ratings to be considered a passing score.
 - ii. An answer that receives two unsatisfactory ratings will be considered a failing score.
 - b. For a recommendation for Re-write, a student must receive a failing score on one or more of his/her answers.
 - i. Students who receive a failing score on an answer(s) will re-write their answer(s) under the same conditions specified under #6 above, within four weeks of the Advisor's recommendation.
 - ii. Re-written answers will be rated by the same faculty and evaluated using the same system.

- c. For a recommendation for Retake, a student must receive a failing score on one or more of his/her re-written answers.
 - i. Students who receive a failing score on a re-written answer(s) will have to retake the area of Comps they failed when Comps are offered again.
 - ii. Before students can retake Comps, they must develop and complete a remediation plan. Students will develop their remediation plans with their Advisors. A remediation plan can include additional course work as well as other specific activities geared toward passing Comps.
- d. For a recommendation of Program Termination, a student must receive a failing score on one or more of his/her retaken answers.
 - i. Students who receive a failing score on a retaken answer(s) will be terminated from the doctoral studies program.
8. Students will be made aware of the recommendation by their Advisor.
9. For students who successfully complete Comps, the Comps Committee will forward a written recommendation to the Dean of the Graduate School that the student be accepted into Doctoral Candidacy, and thus, allowed to proceed with his/her Dissertation.

DOCTORAL DISSERTATION

After passing Comps, the Doctoral Candidate must initiate the development of an appropriate dissertation research project. The dissertation must reflect independent, scholarly research that will contribute significant new knowledge to the Candidate's area of concentration. The guidelines for completion of the doctoral dissertation described herein are in accordance with of the regulations of the Department of Rehabilitation Studies and the general requirements of the Graduate School found in the East Carolina University Graduate School.

Doctoral Dissertation Policy and Procedures

Completing a doctoral dissertation involves several steps:

1. The Doctoral Candidate will form a Dissertation Committee that consists of three department faculty (including the Dissertation Committee Chair) and at least one faculty member from outside of the department.
2. Under the direction of their Dissertation Committee Chair and counsel of the Dissertation Committee, Doctoral Candidates will develop a Dissertation Proposal. The proposal will consist of a standard first three chapters containing the elements listed in Appendix D3.
 - a. The basic format of the Dissertation Manuscript will follow the East Carolina University guidelines (see <http://www.ecu.edu/cs-acad/gradschool/Thesis-and-Dissertation.cfm>).
 - b. Tables, figures, references, and others aspects not specified by ECU should follow the most current edition of the American Psychological Association Publication Manual.
3. When the Dissertation Proposal is sufficiently developed, Doctoral Candidates will make their Oral Dissertation Proposal to their Dissertation Committee at a meeting that is open to students and other interested university guests.
 - a. Doctoral Candidates must distribute copies of the Dissertation Proposal to their Dissertation Committee members at least 5 business days prior to the meeting.
4. For a Dissertation Proposal to be approved, the Dissertation Committee must agree that the research proposal is satisfactory, with only one dissenting vote allowed. Approvals will be documented using the Dissertation Proposal Approval form (see Appendix D1).
5. With Doctoral Committee approval and modifications made, Doctoral Candidates may proceed, under the direction of their Dissertation Committee Chair, to obtain necessary Institutional Review Board (IRB) approvals.
6. Upon IRB approval, Doctoral Candidates may conduct their studies under the direction of their Dissertation Committee Chair and counsel of the Dissertation Committee.
7. Upon completion of the study, Doctoral Candidates will develop a Dissertation Manuscript under the direction of their Dissertation Committee Chair.
8. When the Dissertation Manuscript is sufficiently developed, including the elements of chapters 4 and 5 (see Appendix D3), Doctoral Candidates will make their Oral Dissertation Defense to their Dissertation Committee at a meeting that is open to students and other interested university guests.
 - a. Public announcement of Dissertation Defense must be made to the university community.
 - i. Doctoral Candidates must make arrangements for public announcements of the Oral Dissertation Defense with the News Bureau of East Carolina University. Announcements should be published in The East Carolinian and Pieces of Eight.

- ii. Doctoral Candidates must comply with submission deadlines and publication dates for these publications in order that the announcement of the Oral Dissertation Defense appears at least two weeks prior to the defense.
 - iii. Public defense of the dissertation cannot occur without published announcements of the title, date, place, time and name of the defender.
- b. Doctoral Candidates must distribute copies of their Dissertation Manuscripts to Dissertation Committee members at least 5 business days prior to the meeting.
- 9. For a Dissertation Defense to be successful, the Dissertation Committee must agree that the research is satisfactory. Successful Dissertation Defenses will be documented using the Dissertation Defense Approval form (see Appendix D2).
 - a. A Doctoral Candidate may attempt to defend a dissertation no more than twice.
 - b. Two unsuccessful defenses will result in termination from the doctoral studies program.
- 10. Upon a successful Dissertation Defense, the Dissertation Committee will recommend that the Departmental Chairperson recommend to the Dean of the Graduate School that the Doctoral Candidate be awarded the PhD in Rehabilitation Counseling and Administration.
- 11. Upon making modifications, outlined by the Dissertation Committee, to the Dissertation Manuscript, Doctoral Candidates will proceed to submit an original copy of the Dissertation Manuscript, prepared and printed on the required paper with the required format to the Dean of the Graduate School.
 - a. This document must contain original copies of the Dissertation Proposal and Defense Approval Forms as well as a copy of any approval letters from the IRB.
 - b. This document must be delivered at least ten business days prior to the last day of classes of Doctoral Candidates' final semester and it must be left in the Graduate School for five full days for complete review.
- 12. After approval by the Dean of the Graduate School, additional copies of the Dissertation Manuscript may be prepared by photocopy or printed by offset printing. Three copies (including the original) of the final, approved Dissertation Manuscript must be submitted to the university library. Two of these copies remain in the university library and the third will be delivered to the department.

PROFESSIONAL EXPECTATIONS

Doctoral Student Ethics

Doctoral students will be expected to adhere to all rules, regulations, and policies contained with the East Carolina University Student Handbook (see www.ecu.edu/studenthandbook) as well as the School of Allied Health Sciences Code of Conduct (see <http://www.ecu.edu/cs-dhs/ah/studentresources.cfm>).

Additionally, doctoral students will have the opportunity to engage in research and teaching. When engaging in these activities, students will be expected to conduct themselves in a professional manner, exhibiting a deep commitment and concern for their research subjects and/or students. Below are excerpts from relevant professional codes of ethics that should serve as a guide to doctoral students who engage in research and/or teaching:

EXCERPTS FROM THE CODE OF PROFESSIONAL ETHICS FOR REHABILITATION COUNSELORS

(For a complete copy of this code, see <http://www.crcertification.com/pages/30code.html>)

F.3. RESEARCH AND TRAINING

- a. **DATA DISGUISE REQUIRED.** Use of data derived from counseling relationships for purposes of training, research, or publication will be confined to content that is disguised to ensure the anonymity of the individuals involved.
- b. **AGREEMENT FOR IDENTIFICATION.** Identification of a client in a presentation or publication will be permissible only when the client has agreed in writing to its presentation or publication.

SECTION G: TEACHING, TRAINING, AND SUPERVISION

G.1. REHABILITATION COUNSELOR EDUCATORS AND TRAINERS

- a. **RELATIONSHIP BOUNDARIES WITH STUDENTS AND SUPERVISEES.** Rehabilitation counselors will clearly define and maintain ethical, professional, and social relationship boundaries with their students and supervisees. They will be aware of the differential in power that exists and the student or supervisee's possible incomprehension of that power differential. Rehabilitation counselors will explain to students and supervisees the potential for the relationship to become exploitive.
- b. **SEXUAL RELATIONSHIPS.** Rehabilitation counselors will not engage in sexual relationships with students or supervisees and will not subject them to sexual harassment.
- c. **SUPERVISION PREPARATION.** Rehabilitation counselors will supervise only within the boundaries of their competence, based on their education, training, supervised experience, state and national professional credentials, and appropriate professional experience. Rehabilitation counselors who are doctoral students serving as practicum or internship supervisors will be adequately prepared and supervised by the training program.
- d. **RESPONSIBILITY FOR SERVICES TO CLIENTS.** Rehabilitation counselors who supervise the rehabilitation counseling services of others will perform direct supervision sufficient to ensure that rehabilitation counseling services provided to clients are adequate

and do not cause harm to the client.

- e. **ENDORSEMENT.** Rehabilitation counselors will not endorse students or supervisees for certification, licensure, employment, or completion of an academic or training program if they believe students or supervisees are not qualified for the endorsement. Rehabilitation counselors will take reasonable steps to assist students or supervisees who are not qualified for endorsement to become qualified.

G.2. REHABILITATION COUNSELOR EDUCATION AND TRAINING PROGRAMS

- a. **ORIENTATION.** Prior to admission, rehabilitation counselor educators will orient prospective students to the counselor education or training program's expectations, including but not limited to the following: (1) the type and level of skill acquisition required for successful completion of the training, (2) subject matter to be covered, (3) basis for evaluation, (4) training components that encourage self-growth or self-disclosure as part of the training process, (5) the type of supervision settings and requirements of the sites for required clinical field experiences, (6) student evaluation and dismissal policies and procedures, and (7) up-to-date employment prospects for graduates.
- b. **EVALUATION.** Rehabilitation counselor educators will clearly state, in advance of training, to students and internship supervisees, the levels of competency expected, appraisal methods, and timing of evaluations for both didactic and experiential components. Rehabilitation counselor educators will provide students and internship supervisees with periodic performance appraisal and evaluation feedback throughout the training program.
- c. **TEACHING ETHICS.** Rehabilitation counselor educators will teach students and internship supervisees the ethical responsibilities and standards of the profession and the students' and supervisees' professional ethical responsibilities.
- d. **PEER RELATIONSHIPS.** When students are assigned to lead counseling groups or provide clinical supervision for their peers, rehabilitation counselor educators will take steps to ensure that students placed in these roles do not have personal or adverse relationships with peers and that they understand they have the same ethical obligations as counselor educators, trainers, and supervisors. Rehabilitation counselor educators will make every effort to ensure that the rights of peers are not compromised when students are assigned to lead counseling groups or provide clinical supervision.
- e. **VARIED THEORETICAL POSITIONS.** Rehabilitation counselor educators will present varied theoretical positions so that students may make comparisons and have opportunities to develop their own positions. Rehabilitation counselor educators will provide information concerning the scientific bases of professional practice.
- f. **FIELD PLACEMENTS.** Rehabilitation counselor educators will develop clear policies within their training program regarding field placement and other clinical experiences. Rehabilitation counselor educators will provide clearly stated roles and responsibilities for the student and the site supervisor. Rehabilitation counselor educators will confirm that site supervisors will be qualified to provide supervision and are informed of their professional and ethical responsibilities in this role. Rehabilitation counselor educators will not accept any form of professional services, fees, commissions, reimbursement, or remuneration from a site for student placement.
- g. **DIVERSITY IN PROGRAMS.** Rehabilitation counselor educators will respond to their institution and program's recruitment and retention needs for training program administrators, faculty, and students with diverse backgrounds and special needs.

G.3. STUDENTS AND SUPERVISEES

- a. LIMITATIONS.** Rehabilitation counselors, through ongoing evaluation and appraisal, will be aware of the academic and personal limitations of students and supervisees that might impede performance. Rehabilitation counselors will assist students and supervisees in securing remedial assistance when needed, and will dismiss students or supervisees who are unable to provide competent service due to academic or personal limitations. Rehabilitation counselors will seek professional consultation and document their decision to dismiss or to refer students or supervisees for assistance. Rehabilitation counselors will advise students and supervisees of appeals processes as appropriate.
- b. SELF-GROWTH EXPERIENCES.** Rehabilitation counselor educators, when designing training groups or other experiences conducted by the rehabilitation counselor educators themselves, will inform students of the potential risks of self-disclosure. Rehabilitation counselor educators will respect the privacy of students by not requiring self-disclosure that could reasonably be expected to be harmful and student evaluation criteria will not include the level of the student's self-disclosure.
- c. COUNSELING FOR STUDENTS AND SUPERVISEES.** If students or supervisees request counseling, supervisors or rehabilitation counselor educators will provide them with acceptable referrals. Supervisors or rehabilitation counselor educators will not serve as rehabilitation counselors to students or supervisees over whom they hold administrative, teaching, or evaluative roles unless this is a brief role associated with a training experience.
- d. CLIENTS OF STUDENTS AND SUPERVISEES.** Rehabilitation counselors will make every effort to ensure that clients are aware of the services rendered and the qualifications of the students and supervisees rendering those services. Clients will receive professional disclosure information and will be informed of the limits of confidentiality. Client permission will be obtained in order for the students and supervisees to use any information concerning the counseling relationship in the training process.
- e. PROFESSIONAL DEVELOPMENT.** Rehabilitation counselors who employ or supervise individuals will provide appropriate working conditions, timely evaluations, constructive consultations, and suitable opportunities for experience and training.

SECTION H: RESEARCH AND PUBLICATION

H.1. RESEARCH RESPONSIBILITIES

- a. USE OF HUMAN PARTICIPANTS.** Rehabilitation counselors will plan, design, conduct, and report research in a manner that reflects cultural sensitivity, is culturally appropriate, and is consistent with pertinent ethical principles, federal and state/provincial laws, host institutional regulations, and scientific standards governing research with human participants.
- b. DEVIATION FROM STANDARD PRACTICES.** Rehabilitation counselors will seek consultation and observe stringent safeguards to protect the rights of research participants when a research problem suggests a deviation from standard acceptable practices.
- c. PRECAUTIONS TO AVOID INJURY.** Rehabilitation counselors who conduct research with human participants will be responsible for the participants' welfare throughout the research and will take reasonable precautions to avoid causing injurious psychological, physical, or social effects to their participants.

- d. PRINCIPAL RESEARCHER RESPONSIBILITY.** While ultimate responsibility for ethical research practice lies with the principal researcher, rehabilitation counselors involved in the research activities will share ethical obligations and bear full responsibility for their own actions.
- e. MINIMAL INTERFERENCE.** Rehabilitation counselors will take precautions to avoid causing disruptions in participants' lives due to participation in research.
- f. DIVERSITY.** Rehabilitation counselors will be sensitive to diversity and research issues with culturally diverse populations and they will seek consultation when appropriate.

H.2. INFORMED CONSENT

- a. TOPICS DISCLOSED.** In obtaining informed consent for research, rehabilitation counselors will use language that is understandable to research participants and that (1) accurately explains the purpose and procedures to be followed; (2) identifies any procedures that are experimental or relatively untried; (3) describes the attendant discomforts and risks; (4) describes the benefits or changes in individuals or organizations that might reasonably be expected; (5) discloses appropriate alternative procedures that would be advantageous for participants; (6) offers to answer any inquiries concerning the procedures; (7) describes any limitations of confidentiality; and (8) instructs that participants are free to withdraw their consent and to discontinue participation in the project at any time.
- b. DECEPTION.** Rehabilitation counselors will not conduct research involving deception unless alternative procedures are not feasible and the prospective value of the research justifies the deception. When the methodological requirements of a study necessitate concealment or deception, the investigator will be required to explain clearly the reasons for this action as soon as possible.
- c. VOLUNTARY PARTICIPATION.** Participation in research is typically voluntary and without any penalty for refusal to participate. Involuntary participation will be appropriate only when it can be demonstrated that participation will have no harmful effects on participants and is essential to the investigation.
- d. CONFIDENTIALITY OF INFORMATION.** Information obtained about research participants during the course of an investigation will be confidential. When the possibility exists that others may obtain access to such information, ethical research practice requires that the possibility, together with the plans for protecting confidentiality, will be explained to participants as a part of the procedure for obtaining informed consent.
- e. PERSONS INCAPABLE OF GIVING INFORMED CONSENT.** When a person is incapable of giving informed consent, rehabilitation counselors will provide an appropriate explanation, obtain agreement for participation, and obtain appropriate consent from a legally authorized person.
- f. COMMITMENTS TO PARTICIPANTS.** Rehabilitation counselors will take reasonable measures to honor all commitments to research participants.
- g. EXPLANATIONS AFTER DATA COLLECTION.** After data are collected, rehabilitation counselors will provide participants with full clarification of the nature of the study to remove any misconceptions. Where scientific or human values justify delaying or withholding information, rehabilitation counselors will take reasonable measures to avoid causing harm.
- h. AGREEMENTS TO COOPERATE.** Rehabilitation counselors who agree to cooperate with

another individual in research or publication will incur an obligation to cooperate as agreed.

- i. INFORMED CONSENT FOR SPONSORS.** In the pursuit of research, rehabilitation counselors will give sponsors, institutions, and publication channels the same opportunity for giving informed consent that they accord to individual research participants. Rehabilitation counselors will be aware of their obligation to future researchers and will ensure that host institutions are given feedback information and proper acknowledgment.

H.3. REPORTING RESULTS

- a. INFORMATION AFFECTING OUTCOME.** When reporting research results, rehabilitation counselors will explicitly mention all variables and conditions known to the investigator that may have affected the outcome of a study or the interpretation of data.
- b. ACCURATE RESULTS.** Rehabilitation counselors will plan, conduct, and report research accurately and in a manner that minimizes the possibility that results will be misleading. They will provide thorough discussions of the limitations of their data and alternative hypotheses. Rehabilitation counselors will not engage in fraudulent research, distort data, misrepresent data, or deliberately bias their results.
- c. OBLIGATION TO REPORT UNFAVORABLE RESULTS.** Rehabilitation counselors will make available the results of any research judged to be of professional value even if the results reflect unfavorably on institutions, programs, services, prevailing opinions, or vested interests.
- d. IDENTITY OF PARTICIPANTS.** Rehabilitation counselors who supply data, aid in the research of another person, report research results, or make original data available will take due care to disguise the identity of respective participants in the absence of specific authorization from the participants to do otherwise.
- e. REPLICATION STUDIES.** Rehabilitation counselors will be obligated to make sufficient original research data available to qualified professionals who may wish to replicate the study.

H.4. PUBLICATION

- a. RECOGNITION OF OTHERS.** When conducting and reporting research, rehabilitation counselors will be familiar with and give recognition to previous work on the topic, observe copyright laws, and give full credit to those to whom credit is due.
- b. CONTRIBUTORS.** Rehabilitation counselors will give credit through joint authorship, acknowledgment, footnote statements, or other appropriate means to those who have contributed significantly to research or concept development in accordance with such contributions. The principal contributor will be listed first and minor technical or professional contributions are acknowledged in notes or introductory statements.
- c. STUDENT RESEARCH.** For an article that is substantially based on a student's dissertation or thesis, the student will be listed as the principal author.
- d. DUPLICATE SUBMISSION.** Rehabilitation counselors will submit manuscripts for consideration to only one journal at a time. Manuscripts that are published in whole or in substantial part in another journal or published work will not be submitted for publication without acknowledgment and permission from the previous publication.
- e. PROFESSIONAL REVIEW.** Rehabilitation counselors who review material submitted for publication, research, or other scholarly purposes will respect the confidentiality and proprietary rights of those who submitted it.

**EXCERPTS FROM THE AMERICAN COUNSELING
ASSOCIATION'S CODE OF ETHICS**

(For a complete copy of this code, see <http://www.counseling.org/Publications/>)

**F.6. Responsibilities of
Counselor Educators**

F.6.a. Counselor Educators

Counselor educators who are responsible for developing, implementing, and supervising educational programs are skilled as teachers and practitioners. They are knowledgeable regarding the ethical, legal, and regulatory aspects of the profession, are skilled in applying that knowledge, and make students and supervisees aware of their responsibilities. Counselor educators conduct counselor education and training programs in an ethical manner and serve as role models for professional behavior. (*See C.1., C.2.a., C.2.c.*)

F.6.b. Infusing Multicultural Issues/Diversity

Counselor educators infuse material related to multiculturalism/diversity into all courses and workshops for the development of professional counselors.

F.6.c. Integration of Study and Practice

Counselor educators establish education and training programs that integrate academic study and supervised practice.

F.6.d. Teaching Ethics

Counselor educators make students and supervisees aware of the ethical responsibilities and standards of the profession and the ethical responsibilities of students to the profession. Counselor educators infuse ethical considerations throughout the curriculum.

(*See C.1.*)

F.6.e. Peer Relationships

Counselor educators make every effort to ensure that the rights of peers are not compromised when students or supervisees lead counseling groups or provide clinical supervision. Counselor educators take steps to ensure that students and supervisees understand they have the same ethical obligations as counselor educators, trainers, and supervisors.

F.6.f. Innovative Theories and Techniques

When counselor educators teach counseling techniques/procedures that are innovative, without an empirical foundation, or without a well-grounded theoretical foundation, they define the counseling techniques/procedures as “unproven” or “developing” and explain to students the potential risks and ethical considerations of using such techniques/procedures.

F.6.g. Field Placements

Counselor educators develop clear policies within their training programs regarding field placement and other clinical experiences. Counselor educators provide clearly stated roles and responsibilities for the student or supervisee, the site supervisor, and the program supervisor. They confirm that site supervisors are qualified to provide supervision and inform site supervisors of their professional and ethical responsibilities in this role.

F.6.h. Professional Disclosure

Before initiating counseling services, counselors-in-training disclose their status as students and explain how this status affects the limits of confidentiality. Counselor educators ensure that the clients at field placements are aware of the services rendered and the qualifications of the students and supervisees rendering those services. Students and supervisees obtain client permission before they use any information concerning the counseling relationship in the training process. (*See A.2.b.*)

F.7. Student Welfare

F.7.b. Self-Growth Experiences

Counselor education programs delineate requirements for self-disclosure or self-growth experiences in their admission and program materials. Counselor educators use professional judgment when designing training experiences they conduct that require student and supervisee self-growth or self-disclosure. Students and supervisees are made aware of the ramifications their self-disclosure may have when counselors whose primary role as teacher, trainer, or supervisor requires acting on ethical obligations to the profession. Evaluative components of experiential training experiences explicitly delineate predetermined academic standards that are separate and do not depend on the student's level of self-disclosure. Counselor educators may require trainees to seek professional help to address any personal concerns that may be affecting their competency.

F.8. Student Responsibilities

F.8.a. Standards for Students

Counselors-in-training have a responsibility to understand and follow the *ACA Code of Ethics* and adhere to applicable laws, regulatory policies, and rules and policies governing professional staff behavior at the agency or placement setting. Students have the same obligation to clients as those required of professional counselors.

(See C.1., H.1.)

F.8.b. Impairment

Counselors-in-training refrain from offering or providing counseling services when their physical, mental, or emotional problems are likely to harm a client or others. They are alert to the signs of impairment, seek assistance for problems, and notify their program supervisors when they are aware that they are unable to effectively provide services. In addition, they seek appropriate professional services for themselves to remediate the problems that are interfering with their ability to provide services to others. *(See A.1., C.2.d., C.2.g.)*

F.9. Evaluation and Remediation of Students

F.9.a. Evaluation

Counselors clearly state to students, prior to and throughout the training program, the levels of competency expected, appraisal methods, and timing of evaluations for both didactic and clinical competencies. Counselor educators provide students and evaluation feedback throughout the training program.

F.9.b. Limitations

Counselor educators, throughout ongoing evaluation and appraisal, are aware of and address the inability of some students to achieve counseling competencies that might impede performance. Counselor educators 1. assist students in securing remedial assistance when needed, 2. seek professional consultation and document their decision to dismiss or refer students for assistance, and 3. ensure that students have recourse in a timely manner to address decisions to require them to seek assistance or to dismiss them and provide students with due process according to institutional policies and procedures.

(See C.2.g.)

F.9.c. Counseling for Students

If students request counseling or if counseling services are required as part of a remediation process, counselor educators provide acceptable referrals.

F. 10. Roles and Relationships Between Counselor Educators and Students

F.10.a. Sexual or Romantic Relationships

Sexual or romantic interactions or relationships with current students are prohibited.

F.10.b. Sexual Harassment

Counselor educators do not condone or subject students to sexual harassment. *(See C.6.a.)*

F.10.c. Relationships With Former Students

Counselor educators are aware of the power differential in the relationship between faculty and students. Faculty members foster open discussions with former students when considering

engaging in a social, sexual, or other intimate relationship. Faculty members discuss with the former student how their former relationship may affect the change in relationship.

F.10.d. Nonprofessional Relationships

Counselor educators avoid nonprofessional or ongoing professional relationships with students in which there is a risk of potential harm to the student or that may compromise the training experience or grades assigned. In addition, counselor educators do not accept any form of professional services, fees, commissions, reimbursement, or remuneration from a site for student or supervisee placement.

F.10.e. Counseling Services

Counselor educators do not serve as counselors to current students unless this is a brief role associated with a training experience.

F.10.f. Potentially Beneficial Relationships

Counselor educators are aware of the power differential in the relationship between faculty and students. If they believe a nonprofessional relationship with a student may be potentially beneficial to the student, they take precautions similar to those taken by counselors when working with clients. Examples of potentially beneficial interactions or relationships include, but are not limited to, attending a formal ceremony; hospital visits; providing support during a stressful event; or mutual membership in a professional association, organization, or community. Counselor educators engage in open discussions with students when they consider entering into relationships with students outside of their roles as teachers and supervisors. They discuss with students the rationale for such interactions, the potential benefits and drawbacks, and the anticipated consequences for the student. Educators clarify the specific nature and limitations of the additional role(s) they will have with the student prior to engaging in a nonprofessional relationship. Nonprofessional relationships with students should be time-limited and initiated with student consent.

F.11. Multicultural/Diversity Competence in Counselor Education and Training Programs

F.11.a. Faculty Diversity

Counselor educators are committed to recruiting and retaining a diverse faculty.

F.11.b. Student Diversity

Counselor educators actively attempt to recruit and retain a diverse student body. Counselor educators demonstrate commitment to multicultural/diversity competence by recognizing and valuing diverse cultures and types of abilities students bring to the training experience.

Counselor educators provide appropriate accommodations that enhance and support diverse student well-being and academic performance.

F.11.c. Multicultural/Diversity Competence

Counselor educators actively infuse multicultural/diversity competency in their training and supervision practices. They actively train students to gain awareness, knowledge, and skills in the competencies of multicultural practice. Counselor educators include case examples, role-plays, discussion questions, and other classroom activities that promote and represent various cultural perspectives.

Section G Research and Publication Introduction

Counselors who conduct research are encouraged to contribute to the knowledge base of the profession and promote a clearer understanding of the conditions that lead to a healthy and more just society. Counselors support efforts of researchers by participating fully and willingly whenever possible. Counselors minimize bias and respect diversity in designing and implementing research programs.

G.1. Research Responsibilities

G.1.a. Use of Human Research Participants

Counselors plan, design, conduct, and report research in a manner that is consistent with pertinent ethical principles, federal and state laws, host institutional regulations, and scientific standards governing research with human research participants.

G.1.b. Deviation From Standard Practice

Counselors seek consultation and observe stringent safeguards to protect the rights of research participants when a research problem suggests a deviation from standard or acceptable practices.

G.1.c. Independent Researchers

When independent researchers do not have access to an Institutional Review Board (IRB), they should consult with researchers who are familiar with IRB procedures to provide appropriate safeguards.

G.1.d. Precautions to Avoid Injury

Counselors who conduct research with human participants are responsible for the welfare of participants throughout the research process and should take reasonable precautions to avoid causing injurious psychological, emotional, physical, or social effects to participants.

G.1.e. Principal Researcher Responsibility

The ultimate responsibility for ethical research practice lies with the principal researcher. All others involved in the research activities share ethical obligations and responsibility for their own actions.

G.1.f. Minimal Interference

Counselors take reasonable precautions to avoid causing disruptions in the lives of research participants that could be caused by their involvement in research.

G.1.g. Multicultural/Diversity Considerations in Research

When appropriate to research goals, counselors are sensitive to incorporating research procedures that take into account cultural considerations. They seek consultation when appropriate.

G.2. Rights of Research Participants

(See A.2, A.7.)

G.2.a. Informed Consent in Research

Individuals have the right to consent to become research participants. In seeking consent, counselors use language that 1. accurately explains the purpose and procedures to be followed, 2. identifies any procedures that are experimental or relatively untried, 3. describes any attendant discomforts and risks, 4. describes any benefits or changes in individuals or organizations that might be reasonably expected, 5. discloses appropriate alternative procedures that would be advantageous for participants, 6. offers to answer any inquiries concerning the procedures, 7. describes any limitations on confidentiality, 8. describes the format and potential target audiences for the dissemination of research findings, and 9. instructs participants that they are free to withdraw their consent and to discontinue participation in the project at any time without penalty.

G.2.b. Deception

Counselors do not conduct research involving deception unless alternative procedures are not feasible and the prospective value of the research justifies the deception. If such deception has the potential to cause physical or emotional harm to research participants, the research is not conducted, regardless of prospective value. When the methodological requirements of a study necessitate concealment or deception, the investigator explains the reasons for this action as soon as possible during the debriefing.

G.2.c. Student/Supervisee Participation

Researchers who involve students or supervisees in research make clear to them that the decision regarding whether or not to participate in research activities does not affect one's academic standing or supervisory relationship. Students or supervisees who choose not to participate in

educational research are provided with an appropriate alternative to fulfill their academic or clinical requirements.

G.2.d. Client Participation

Counselors conducting research involving clients make clear in the informed consent process that clients are free to choose whether or not to participate in research activities. Counselors take necessary precautions to protect clients from adverse consequences of declining or withdrawing from participation.

G.2.e. Confidentiality of Information

Information obtained about research participants during the course of an investigation is confidential. When the possibility exists that others may obtain access to such information, ethical research practice requires that the possibility, together with the plans for protecting confidentiality, be explained to participants as a part of the procedure for obtaining informed consent.

G.2.f. Persons Not Capable of Giving Informed Consent

When a person is not capable of giving informed consent, counselors provide an appropriate explanation to, obtain agreement for participation from, and obtain the appropriate consent of a legally authorized person.

G.2.g. Commitments to Participants

Counselors take reasonable measures to honor all commitments to research participants. (*See A.2.c.*)

G.2.h. Explanations After Data Collection

After data are collected, counselors provide participants with full clarification of the nature of the study to remove any misconceptions participants might have regarding the research.

Where scientific or human values justify delaying or withholding information, counselors take reasonable measures to avoid causing harm.

G.2.i. Informing Sponsors

Counselors inform sponsors, institutions, and publication channels regarding research procedures and outcomes. Counselors ensure that appropriate bodies and authorities are given pertinent information and acknowledgement.

G.2.j. Disposal of Research Documents and Records

Within a reasonable period of time following the completion of a research project or study, counselors take steps to destroy records or documents (audio, video, digital, and written) containing confidential data or information that identifies research participants. When records are of an artistic nature, researchers obtain participant consent with regard to handling of such records or documents. (*See B.4.a, B.4.g.*)

G.3. Relationships With Research Participants (When Research Involves Intensive or Extended Interactions)

G.3.a. Nonprofessional Relationships

Nonprofessional relationships with research participants should be avoided.

G.3.b. Relationships With Research Participants

Sexual or romantic counselor–research participant interactions or relationships with current research participants are prohibited.

G.3.c. Sexual Harassment and Research Participants

Researchers do not condone or subject research participants to sexual harassment.

G.3.d. Potentially Beneficial Interactions

When a nonprofessional interaction between the researcher and the research participant may be potentially beneficial, the researcher must document, prior to the interaction (when feasible), the rationale for such an interaction, the potential benefit, and anticipated consequences for the research participant. Such interactions should be initiated with appropriate consent of the research

participant. Where unintentional harm occurs to the research participant due to the nonprofessional interaction, the researcher must show evidence of an attempt to remedy such harm.

G.4. Reporting Results

G.4.a. Accurate Results

Counselors plan, conduct, and report research accurately. They provide thorough discussions of the limitations of their data and alternative hypotheses. Counselors do not engage in misleading or fraudulent research, distort data, misrepresent data, or deliberately bias their results. They explicitly mention all variables and conditions known to the investigator that may have affected the outcome of a study or the interpretation of data. They describe the extent to which results are applicable for diverse populations.

G.4.b. Obligation to Report Unfavorable Results

Counselors report the results of any research of professional value. Results that reflect unfavorably on institutions, programs, services, prevailing opinions, or vested interests are not withheld.

G.4.c. Reporting Errors

If counselors discover significant errors in their published research, they take reasonable steps to correct such errors in a correction erratum, or through other appropriate publication means.

G.4.d. Identity of Participants

Counselors who supply data, aid in the research of another person, report research results, or make original data available take due care to disguise the identity of respective participants in the absence of specific authorization from the participants to do otherwise. In situations where participants self-identify their involvement in research studies, researchers take active steps to ensure that data is adapted/changed to protect the identity and welfare of all parties and that discussion of results does not cause harm to participants.

G.4.e. Replication Studies

Counselors are obligated to make available sufficient original research data to qualified professionals who may wish to replicate the study.

G.5. Publication

G.5.a. Recognizing Contributions

When conducting and reporting research, counselors are familiar with and give recognition to previous work on the topic, observe copyright laws, and give full credit to those to whom credit is due.

G.5.b. Plagiarism

Counselors do not plagiarize, that is, they do not present another person's work as their own work.

G.5.c. Review/Republication of Data or Ideas

Counselors fully acknowledge and make editorial reviewers aware of prior publication of ideas or data where such ideas or data are submitted for review or publication.

G.5.d. Contributors

Counselors give credit through joint authorship, acknowledgment, footnote statements, or other appropriate means to those who have contributed significantly to research or concept development in accordance with such contributions. The principal contributor is listed first and minor technical or professional contributions are acknowledged in notes or introductory statements.

G.5.e. Agreement of Contributors

Counselors who conduct joint research with colleagues or students/supervisees establish agreements in advance regarding allocation of tasks, publication credit, and types of acknowledgement that will be received.

G.5.f. Student Research

For articles that are substantially based on students course papers, projects, dissertations or theses, and on which students have been the primary contributors, they are listed as principal authors.

G.5.g. Duplicate Submission

Counselors submit manuscripts for consideration to only one journal at a time. Manuscripts that are published in whole or in substantial part in another journal or published work are not submitted for publication without acknowledgment and permission from the previous publication.

G.5.h. Professional Review

Counselors who review material submitted for publication, research, or other scholarly purposes respect the confidentiality and proprietary rights of those who submitted it. Counselors use care to make publication decisions based on valid and defensible standards. Counselors review article submissions in a timely manner and based on their scope and competency in research methodologies. Counselors who serve as reviewers at the request of editors or publishers make every effort to only review materials that are within their scope of competency and use care to avoid personal biases.

Scope of Practice for PhD in Rehabilitation Counseling and Administration

Students who complete all program requirements and receive a PhD in Rehabilitation Counseling and Administration will be well suited for a variety of academic and administrative positions in both the private and public sectors of the rehabilitation field.

Generally, the scope of practice students completing the **Rehabilitation and Clinical Counseling** concentration is consistent with the principles, philosophies, ethics, and competencies within the Rehabilitation Counseling field, as a specialty within the greater counseling field. Specifically, these students will be well suited for research and teaching positions in settings such as Rehabilitation Counselor Training programs, Regional Rehabilitation Continuing Education Programs, Rehabilitation Research and Training Centers, and, depending on area of focus, Counselor Education programs (e.g., clinical mental health counseling programs), Substance Abuse Counselor Training programs, and Vocational Evaluation programs. Additionally, these students will be well prepared to work as administrators in clinical settings such as rehabilitation, substance abuse, vocational evaluation, and/or mental health counseling agencies.

Students completing the **Rehabilitation Studies** concentration will be well suited for research and teaching positions in settings such as Rehabilitation Science programs, Rehabilitation Policy programs, and other non-clinical programs in allied health and rehabilitation research centers.

PERFORMANCE EVALUATION

As counselor educators, department faculty expect prospective counselor educators to be concerned about other people, to be stable and psychologically well adjusted (personally and professionally), to be effective in interpersonal relationships, and to be able to receive and give constructive feedback. Further, students are expected to behave generally in a manner that demonstrates fitness for a role in the counseling profession. Finally, students are expected to be committed to continued personal growth and professional development and to demonstrate that a commitment through self-reflection and responsiveness to supervision in all activities related to their degree program. The faculty believes that it is ethically imperative that counselors and counselor educators be willing to do in their own lives what they ask their clients and students to do in theirs.

For the reasons cited above, the faculty will regularly monitor not only students' academic progress but also those personal characteristics which will affect their performance in the field. The purpose of this monitoring process is to ensure that all graduates of the Department of Rehabilitation Studies possess those characteristics sufficiently that they do not interfere with their professionalism or helping capacity.

Students are reviewed at the conclusion of each semester by all faculty involved in the students' matriculation (e.g., advisor, course instructors, fieldwork mentors/supervisors) according to their compliance with the following Professional Performance Standards:

1. Academics (e.g. grades)
2. Clinical Skills
3. Ability to connect and develop therapeutic alliance with clients
4. Personal and Interpersonal Behavior
5. Openness to new ideas
6. Flexibility
7. Cooperativeness with others
8. Willingness to accept and use feedback
9. Awareness of own impact on others
10. Ability to deal with conflict
11. Ability to accept personal responsibility
12. Ability to express feelings effectively and appropriately
13. Attention to ethical and legal considerations

Using the "Professional Performance Review" form (see Appendix E1), each standard is rated on a 1 (unacceptable) to 4 (excellent) scale. Students receiving a rating of 1 on any of the Non-academic Professional Performance Standards will be considered deficient in professional performance and subject to the following remediation procedure:

1. The student will be presented with a copy of the "Professional Counselor Development Plan – Student Remediation" form(s) on which are listed the deficient rating(s), the respective professor's explanation for the ratings, and any remedial actions recommended by the faculty (see Appendix E2). The student and the professor(s) will meet to discuss the Professional performance concerns and to implement recommended remedial actions. A copy of the completed Professional Performance Review form(s) will be given to the student and his/her Advisor.

2. If a student receives more than one deficient Professional Performance Review form during his/her program of study or otherwise fails to show reasonable progress in correcting deficiencies previously cited, the faculty may recommend either his/her discontinuation in the program or further remedial action. In either event, the student will be required to meet with his or

her Advisor and the faculty member(s) issuing the deficiencies to discuss the professional performance concerns and the recommended responsive actions to be taken. A copy of the completed Professional Performance Review form(s) will be given to the student and his/her Advisor.

3. Faculty may conduct a Professional Performance Review at any time for students who knowingly engage in illegal or unethical activities or for students whose professional performance is deemed to present an immediate threat to the well being of others. In such cases, the faculty may recommend either discontinuation in the Department of Rehabilitation Studies or remedial action for the student. In either event, the student will be required to meet with his or her Advisor and the faculty member(s) issuing the deficiencies to discuss the professional performance concerns and the recommended responsive actions to be taken. A copy of the completed Professional Performance Review form(s) will be given to the student and his/her Advisor.

All Faculty recommendations for denial of a student's continuance in the Department of Rehabilitation Studies will be decided by the departmental chair and forwarded to the Dean of the College of Allied Health Sciences.

DOCTORAL STUDIES: MISCELLANEOUS POLICIES

Time Limits for Completion of Degree Requirements

A doctoral degree program must be completed before the end of the eight academic years following initial enrollment. With endorsement of the student's Advisor, Dissertation Committee, and Departmental Chairperson, a student may request one extension of not more than two semesters, summers included.

Termination or Continuance of Graduate Study

Failure to meet the requirements of the program as outlined above will result in termination of the doctoral student. The following excerpt found in the 2005-2006 East Carolina University Graduate School Bulletin documents the university policy of general requirements:

“Each graduate student is admitted to study on the recommendation of the graduate faculty of a school or department, or its authorized agent, responsible for courses and research in the major field of the student's program. When a student's record indicates that he or she has failed to maintain standards described in this section, or specific standards of the student's program described elsewhere in the graduate catalog or in school or departmental program descriptions, the dean of the Graduate School will notify the student by letter (copy to the [Advisor] of the student) that his or her program must be terminated unless special arrangements for continuance are recommended by his or her [advisor], or an authorized agent, and approved by the Administrative Board of the Graduate School. The adviser will confer with the unit graduate faculty, or its authorized agent. Any appeal by the student must be considered at this stage in the process. Following conference and possible student appeal, the adviser will forward a written recommendation (copy to the student) to the Chairperson of the Administrative Board of the Graduate School. If the recommendation is for termination, the student's program is terminated. A recommendation for continuance should stipulate requirements through which the student could complete his or her graduate program. The Administrative Board may either accept the requirements or request that the student's [advisor] modify them. When the requirements are acceptable to the Administrative Board, the dean of the Graduate School will inform the student by

letter of the approved requirements (copy to the Dean of the Graduate School and the adviser of the student). The Graduate School office will ensure that these requirements are met before the student graduates.”

APPENDIX A1

CACREP Equivalency Form

CACREP Equivalency Form
PhD in Rehabilitation Counseling & Administration
CACREP Equivalency Form

Student Name: _____ Application Date: _____

Masters Degree: _____ Year Completed: _____ Institution: _____

Applicants to the concentration in rehabilitation and clinical counseling whose master's is ***not*** from a CACREP accredited program must provide evidence that their master's curricular experiences were equivalent to CACREP entry level standards (Section II and III). Determination of equivalency involves a 3 step process:

1. An applicant will meet with the director of doctoral studies to discuss the courses and curricular experiences the applicant believes can be deemed CACREP equivalent.
 - The applicant will need to provide a copy of the syllabus and/or handbooks for all courses and/or curricular experiences they think are CACREP equivalent. Upon discussion with the applicant and review of materials, the applicant will be directed to meet with the faculty member who instructs the course and/or curricular experiences for which the equivalency is being requested.
2. Upon meeting with instructor(s), the applicant must provide the instructor(s) with a copy of all materials of the course and/or curricular experiences they believe are CACREP equivalent. Upon review of the materials and speaking to the applicant about the course and/or experiences, the instructor will decide if equivalency should be granted.
 - If an instructor decides to grant equivalency, they will indicate so by signing in the appropriate box below.
 - If an instructor decides not to grant equivalency, they will comment as to their rationale in the appropriate box.
3. After meeting with course instructors and, when applicable, remediation plans are identified, the applicant will again meet with the director of doctoral studies to finalize and sign this form.

CACREP Section II (REHB Equivalent; Instructor)	Proposed Equivalent	Equivalent Approved/Not Approved Rationale
Professional Orientation and Ethical Practice (REHB 6010; Hartley)		
Social and Cultural Diversity (REHB 6370 Mizelle)		
Human Growth & Development (REHB 6300 Hartley)		
Career Development (REHB 5100; Chapin)		
Helping Relationships (a-c, f, g) (REHB 6310; Toriello)		
Helping Relationships (d) (REHB 6300; Hartley)		
Helping Relationships (e) (REHB 6320; Sias)		
Group Work (a-d) (REHB 6350; Goodwin)		
Group Work (e) (REHB 6351; Goodwin)		
Assessment (REHB 6401; Sligar)		
Research and Program Evaluation (REHB 6550; Alston)		

<p align="center">CACREP Section III (REHB Equivalent; Instructor)</p>	<p align="center">Proposed Equivalent</p>	<p align="center">Waiver Approved/Not Approved Rationale</p>
<p align="center">Supervisor Qualifications</p> <p><u>A. Program faculty</u></p> <ol style="list-style-type: none"> 1. doctoral degree in counseling 2. relevant experience and credentials 3. relevant supervision training/experience <p><u>B. Students as supervisor</u></p> <ol style="list-style-type: none"> 1. master's with CACREP practicum and internship 2. Completed or completing preparation in counseling supervision 3. Supervised by a program faculty with a faculty-student ratio not exceeding 1:6 <p><u>C. Site supervisors</u></p> <ol style="list-style-type: none"> 1. master's in counseling, with appropriate credentials 2. minimum of two years pertinent experience in the program the student is enrolled 3. knowledge of the program's expectations, requirements, 4. relevant training in counseling supervision 		
<p align="center">Practicum (REHB 6360; Sias)</p> <ol style="list-style-type: none"> 1. 40 clock hours direct service 2. 1 hour, on average, of weekly supervision 3. 1.5 hours, on average, of weekly group supervision (if provided by site supervisor, then bi-weekly consultation with faculty required) 4. use of audio/video recordings in supervision 5. evaluation of performance throughout practicum and formal evaluation at end of practicum. 		
<p align="center">Internship (REHB 6991-6994; Sias/Goodwin)</p> <ol style="list-style-type: none"> 1. At least 240 clock hours of direct service, including experience leading groups 2. 1 hour, on average, weekly supervision 3. 1.5 hours, on average, weekly of group supervision performed by a program faculty member 4. variety of professional activities and resources in addition to direct service 5. use of audio/video recordings in supervision 6. evaluation of performance throughout practicum and formal evaluation at end of practicum. 		

Remediation Plan(s):

Applicant Signature Date

Director Signature Date

APPENDIX A2

**PROGRAM OF STUDY FORM:
REHABILITATION AND CLINICAL COUNSELING PROGRAM**

**Course Sequence for the PhD in
Rehabilitation Counseling and Administration
Rehabilitation and Clinical Counseling Program**

Beginning Odd Year

First Year:

Fall:

REHB 8810 Seminar
REHB 8210 Pedagogy
REHB 8380 Supervision
BIOS 7021 Biostatistics I

Spring

REHB 8811 Seminar
REHB 8360 Adv Practicum***
REHB 7601 Administration^^
BIOS 7022 Biostatistics II

Second Year:

Fall

REHB 8812 Seminar
REHB 8360 Adv Practicum***
REHB 8991, 8992 Internship*
BIOS 7550 Multivariate^^

Spring

REHB 8813 Doctoral Seminar
REHB 7340 Adv Theory^^
REHB 8420 Adv Evaluation^^
REHB 8550 Adv Research
REHB 8993, 8994 Internship***

Third Year:

Remaining courses (if any)

REHB 9000 Dissertation (6 hours minimum and 18 hours maximum)

Beginning Even Year

REHB 8810 Seminar
REHB 8210 Pedagogy
REHB 8380 Supervision
BIOS 7021 Biostatistics I

REHB 8811 Seminar
REHB 8420 Adv Evaluation^^
REHB 7340 Adv Theory^^
BIOS 7022 Biostatistics II

REHB 8812 Seminar
REHB 8360 Adv Practicum***
REHB 8991, 8992 Internship***
BIOS 7550 Multivariate^^

REHB 8813 Seminar
REHB 8360 Adv Practicum***
REHB 7601 Administration^^
REHB 8550 Adv Research
REHB 8993, 8994 Internship***

^^Offered every other year.

***Fieldwork Courses are flexible when they can be completed. 3 credit hours of Advanced Practicum and 12 credit hours of Advanced Internship are required.

APPENDIX A3

**PROGRAM OF STUDY:
REHABILITATION ADMINISTRATION PROGRAM**

**Course Sequence for the PhD in
Rehabilitation Counseling and Administration
Rehabilitation Administration Program**

Beginning Odd Year

First Year:

Fall:

REHB 8810 Seminar
Concentration elective
Concentration elective
BIOS 7021 Biostatistics I

Spring

REHB 8811 Seminar
REHB 7601 Administration^^
REHB 8630 Prog Design^^
BIOS 7022 Biostatistics II

Second Year:

Fall

REHB 8812 Seminar
Concentration elective
BIOS 7550 or stat elective
Concentration elective

Spring

REHB 8813 Doctoral Seminar
REHB 8550 Adv Research
REHB 8420 Adv Evaluation^^
Stat elective

Third Year:

REHB 9000 Dissertation (6 hours minimum and 18 hours maximum)

Beginning Even Year

REHB 8810 Seminar
Concentration elective
Concentration elective
BIOS 7021 Biostatistics I

REHB 8811 Seminar
REHB 8420 Adv Evaluation^^
Concentration elective
BIOS 7022 Biostatistics II

REHB 8812 Seminar
Concentration elective
Bios 7550 or stat elective
Stat elective

REHB 8813 Seminar
REHB 8550 Adv Research
REHB 7601 Administration^^
REHB 8630 Prog Design^^

^^Offered every other year.

APPENDIX B1

**COURSE WAIVER FORM:
REHABILITATION AND CLINICAL COUNSELING PROGRAM**

PhD in Rehabilitation Counseling & Administration
Course Waiver Form: Rehabilitation and Clinical Counseling Program

Student Name: _____

Program Start Date: _____

Masters Degree: _____ Year Completed: _____ Institution: _____

Required course credit which may be transferred from a prior graduate program include the following courses (or the equivalent): REHB 5100, 6000, 6010, 6250, 6300, 6310, 6320, 6350, 6351, 6360, 6370, 6401, 6550, 6991, 6992, 6993, and 6994. Additionally, a maximum of 18 SH hours of doctoral credit (course work taken beyond the master's degree) may be transferred to the degree program. Students must complete the course waiving process to receive credit for prior graduate course work.

Waiving of courses involves a 3 step process:

1. A student will meet with their assigned doctoral advisor to discuss the courses the student believes can be waived in lieu of a course they previously completed at the graduate level.
 - For courses taken at a “CORE” or “CACREP” accredited programs, the advisor can decide to grant a waiver, they will indicate so by signing in the appropriate box below.
 - For graduate courses taken at programs not accredited by CORE or CACREP, the student will need to provide a copy of the syllabus for all courses they think are equivalent for waiver credit. Upon discussion with the student and review of syllabi, the advisor will direct the student to meet with the faculty member who instructs the course for which the equivalency waiver is being requested.
 - For courses taken beyond the master’s degree, the student will need to provide a copy of the syllabus for all courses they think are equivalent for waiver credit. Upon discussion with the student and review of syllabi, the advisor will direct the student to meet with the faculty member who instructs the course for which the equivalency waiver is being requested.
2. Upon meeting with course instructor(s), the student must provide the instructor(s) with a copy of the syllabus of the course they believe is equivalent to the course for which they are requesting a waiver. Upon review of the syllabus and speaking to the student about the course, the instructor will decide if a waiver should be granted.
 - If an instructor decides to grant a waiver, they will indicate so by signing in the appropriate box below.
 - If an instructor decides not to grant a waiver, they will comment as to their rationale in the appropriate box.
3. After meeting with course instructors and, when applicable, remediation plans are identified, the student will again meet with their doctoral advisor to finalize and sign this form.

Master's Level Required Courses (Instructor)	Proposed Equivalent	Waiver Approved/Not Approved Rationale
REHB 5100 Occupational Analysis & Career Counseling (Chapin)		
REHB 6000 Medical & Psychosocial Aspects of Disability (Stebnicki)		
REHB 6010 Introduction to Counseling & Rehabilitation (Hartley)		
REHB 6250 Psychiatric Rehabilitation (Alston)		
REHB 6300 Rehabilitation Counseling, Human Growth & Development Theory (Hartley)		
REHB 6310 Prepracticum in Rehabilitation Counseling (Toriello)		
REHB 6320 Family Treatment (Sias)		
REHB 6350 Group Counseling (Goodwin)		
REHB 6351 Small Group (Goodwin)		
REHB 6360 Rehabilitation Counseling Practicum (Goodwin)		
REHB 6370 Multicultural Issues in Rehabilitation Counseling (Mizelle)		
REHB 6401 Rehabilitation Evaluation (Sligar)		
REHB 6550 Rehabilitation Research (Toriello)		
REHB 6991-6991 Internship in Rehabilitation Counseling (Advisor)		
Courses Beyond Master's Degree-List Course(s) and Instructor(s)	Equivalent	Waiver Approved/Not Approved Rationale

Remediation Plan(s):

Student Signature Date

Advisor Signature Date

APPENDIX B2

**COURSE WAIVER FORM:
REHABILITATION ADMINISTRATION PROGRAM**

PhD in Rehabilitation Counseling & Administration
Course Waiver Form: Rehabilitation Administration Program

Student Name: _____

Program Start Date: _____

Masters Degree: _____ Year Completed: _____ Institution: _____

Required course credits which may be transferred from a prior graduate program include the following courses (or the equivalent): REHB 5100, 6000, 6010, 6300, and 6401. Additionally, a maximum of 18 SH hours of doctoral credit (course work taken beyond the master's degree) may be transferred to the degree program. Students must complete the course waiving process to receive credit for prior graduate course work.

Waiving of courses involves a 3 step process:

1. A student will meet with their assigned doctoral advisor to discuss the courses the student believes can be waived in lieu of a course they previously completed at the graduate level.
 - For courses taken at a “CORE” or “CACREP” accredited programs, the advisor can decide to grant a waiver, they will indicate so by signing in the appropriate box below.
 - For graduate courses taken at programs not accredited by CORE or CACREP, the student will need to provide a copy of the syllabus for all courses they think are equivalent for waiver credit. Upon discussion with the student and review of syllabi, the advisor will direct the student to meet with the faculty member who instructs the course for which the equivalency waiver is being requested.
 - For courses taken beyond the master’s degree, the student will need to provide a copy of the syllabus for all courses they think are equivalent for waiver credit. Upon discussion with the student and review of syllabi, the advisor will direct the student to meet with the faculty member who instructs the course for which the equivalency waiver is being requested.
2. Upon meeting with course instructor(s), the student must provide the instructor(s) with a copy of the syllabus of the course they believe is equivalent to the course for which they are requesting a waiver. Upon review of the syllabus and speaking to the student about the course, the instructor will decide if a waiver should be granted.
 - If an instructor decides to grant a waiver, they will indicate so by signing in the appropriate box below.
 - If an instructor decides not to grant a waiver, they will comment as to their rationale in the appropriate box.
3. After meeting with course instructors and, when applicable, remediation plans are identified, the student will again meet with their doctoral advisor to finalize and sign this form.

Master's Level Required Courses (Instructor)	Equivalent	Waiver Approved/Not Approved Rationale
REHB 5100 Occupational Analysis & Career Counseling (Chapin)		
REHB 6000 Medical & Psychosocial Aspects of Disability (Stebnicki)		
REHB 6010 Introduction to Counseling & Rehabilitation (Hartley)		
REHB 6300 Rehabilitation Counseling, Human Growth & Development Theory (Hartley)		
REHB 6401 Rehabilitation Evaluation (Sligar)		
Courses Beyond Master's Degree- List Course(s) and Instructor(s)	Equivalent	Waiver Approved/Not Approved Rationale

Remediation Plan(s):

Student Signature Date

Advisor Signature Date

APPENDIX C1

Advanced Internship Site and Mentor/Field Supervisor Information

Advanced Internship Site and Mentor/Field Supervisor Information

Student Name: _____ Semester/Year: _____

Your cell phone number: _____ Your home phone number: _____

ECU email _____

Advanced Internship Students

As soon as you secure your Advanced Internship site complete the following information on this form. *Complete on computer by putting cursor toward the beginning of the line and hit "insert".*

For Advanced Internships *within* the ECU Department of Rehabilitation Studies:

- Complete all that apply:
 - Faculty Mentor for **Research**: _____
 - Faculty Mentor for **Teaching**: _____
 - Faculty Mentor for **Clinical Supervision**: _____
 - Faculty Mentor for **Clinical Practice**: _____

For Advanced Internships *outside* the ECU Department of Rehabilitation Studies:

- Name of field site program/agency: _____
- Address (include zip): _____
- Phone number of field site: _____ Website address: _____
- Highlight type of program: Outpatient / Inpatient / Residential / Methadone/ Other _____
- Highlight primary type of disorders served: SA / MH / Physical Disabilities / Other _____
- Does program specialize in certain types of treatment (e.g. DUI) or counseling interventions (e.g. CBT)? If yes describe: _____
- Check with your practicum/internship site to see if you need any of the following trainings prior to starting your field experience. If yes, what are they: _____
 - Highlight those trainings/ items you have completed: HIPPA / CPR / Drug Screening / Blood Bourne Pathogens / Paid Malpractice Insurance / Other (describe) _____
- Highlight the Code of Ethics you have reviewed: LPC (see www.counseling.org) / LCAS (see www.ncsappb.org) / CRC (see www.crccertification.com) / VE (see director of VE program)
- Site driving directions: _____
- _____
- **Field Site Supervisor Information**
 - Name of field supervisor(s) (Include full name, credentials (i.e. degree, licensure, certifications): _____
 - Field site supervisor's phone number: _____
 - Field site supervisor's email address: _____
 - List any training the supervisor has received in clinical supervision: _____
 - Highlight whether or not your field site supervisor(s) have emailed his or her resume to you?
 - yes / no

Directions: Email completed form to REHB departmental secretary at moorec@ecu.edu and your Advanced Internship Instructor. For external Advanced Internships, email a copy of your Field Site Supervisor's resume as well.

APPENDIX C2

Advanced Internship Supervisory Record and Development Form

Advanced Internship Supervisory Record and Development Form

Doctoral Student _____

Faculty Mentor _____

1. Activities discussed (check all that apply):

Research Teaching Clinical Supervision Clinical Practice

2. Concerns discussed: _____

3. Recommendations/Action Plans: _____

Faculty Mentor Signature _____ Date _____

*Use back of form for more space on any item.

APPENDIX C3

Evaluation of Advanced Internship Student Performance

Evaluation of Advanced Internship Student Performance

Evaluation of Student Performance by Faculty Mentor or Field Site Supervisor

Doctoral Student Name: _____

Name of Field Site (if applicable) _____

Name of Field Site Supervisor (if applicable) _____

Name(s) of Faculty Mentor(s) (if applicable) _____

Advanced Internship Instructor _____

Note to Field Site Supervisor: Please complete the following evaluation for the above named student's performance at the **MIDWAY POINT** and again upon **COMPLETION** of his/her placement with your organization, and return it to the Advanced Internship Instructor either through the student (please return in a sealed envelope with your signature on the back) or by mail (East Carolina University – CAHS, Dept. of Rehabilitation Studies, Health Sciences Building, Greenville, NC 27858). Please feel free to contact the faculty instructor (Paul Toriello at 252-744-6297 or toriellop@ecu.edu) with questions or problems regarding this task. Thank you for your assistance.

Performance Category

Evaluation (Circle One)

1. Research Activities

Comments:

Poor	Satisfactory	Excellent	NA
1	2	3	4

2. Teaching Activities

Comments:

Poor	Satisfactory	Excellent	NA
1	2	3	4

3. Clinical Supervision Activities

Comments:

Poor	Satisfactory	Excellent	NA
1	2	3	4

8. Notable Strengths Observed in Student's Performance:

9. Notable Areas for Improvement in Student's Performance:

10. Has the student satisfactorily fulfilled your expectations in his/her assigned role in your organization? Explain.

11. May this evaluation be shared with the named student? (Please Circle)
Yes No

Additional Comments:

12. Have you reviewed this evaluation with the student? Yes ___ No ___

Completed by: _____ Date: _____
Signature/credentials- Mentor/Supervisor

APPENDIX C4

Advanced Internship Log

APPENDIX D1

DISSERTATION PROPOSAL APPROVAL FORM

APPENDIX D2

DISSERTATION DEFENSE APPROVAL FORM

APPENDIX D3
DISSERTATION OUTLINE

PhD in Rehabilitation and Clinical Counseling and Administration
Dissertation Outline

Chapter	Chapter Components	Explanation
Chapter 1: Introduction/Problem Statement	<ol style="list-style-type: none"> 1. Introduction to the chapter 2. Background of the study 3. Problem statement 4. Study justification 5. Research questions/hypotheses 6. Study significance 7. Definition of terms 8. Chapter summary 	<ol style="list-style-type: none"> 1. Narrative outline of what is covered in chapter 2. General social problem and consequences (e.g., incidence, cost) 3. Specific problem or knowledge gap study will address 4. Arguments for why study should be done 5. Should contain clearly identified variables 6. How study will advance the relevant field and help address social problem 7. Operational definitions of variables and key concepts 8. Narrative summary of above
Chapter 2: Literature Review	<ol style="list-style-type: none"> 1. Introduction to the chapter 2. Review of relevant theory 3. Review of relevant empirical research on above theory 4. Review of similar studies 5. Conclusions from reviews 6. Chapter summary 	<ol style="list-style-type: none"> 1. Narrative outline of what is covered in chapter 2. Review theory pertaining to variables being examined 3. Review empirical research on variables being examined 4. Comprehensively review the findings of similar studies 5. Draw conclusions, from above reviews, about gap in knowledge. These conclusion should point directly to doing current study 6. Narrative summary of above
Chapter 3: Methodology	<ol style="list-style-type: none"> 1. Introduction to the chapter 2. Research questions/hypotheses 3. Research design 4. Population 5. Sample & Sampling 6. Instrumentation 7. Procedures 8. Statistical analyses 9. Ethical considerations 10. Chapter summary 	<ol style="list-style-type: none"> 1. Narrative outline of what is covered in chapter 2. Restated from chapter 1 3. Description and justification for how design will appropriately answer research questions/address hypotheses 4. Describe population being studied and sampled 5. Describe justification for sample size (e.g., power analysis) and how sample will be selected, recruited, and/or assigned 6. Comprehensively describe instruments to be used, their development, psychometric properties, administration, and scoring 7. Detail procedures for how data will be collected, stored, and managed (e.g., data security) 8. Describe and justify statistical analyses to be used for answering research questions/addressing hypotheses 9. Describe issues pertaining to human subjects and risk for ethical violations and how these issues will be addressed 10. Narrative summary of above

Chapter 4: Results	<ol style="list-style-type: none"> 1. Introduction to the chapter 2. Descriptive data 3. Data analyses for research questions/hypotheses 4. Chapter summary 	<ol style="list-style-type: none"> 1. Narrative outline of what is covered in chapter 2. Reports of response rate, sample demographics, descriptive statistics for all variables, and statistical assumptions 3. Statistical results for each research question/hypothesis 4. Narrative summary of above
Chapter 5: Discussion	<ol style="list-style-type: none"> 1. Introduction to the chapter 2. Summary of the study 3. Interpretation of results 4. Study limitations 5. Implications of findings for future research, practice, and/or administration 6. Conclusion 	<ol style="list-style-type: none"> 1. Narrative outline of what is covered in chapter 2. Concise review of study's variables, participants, and data collection 3. Sequentially interpret all results (response rate, sample demos, and statistical analyses for each research question/hypothesis) based on comparison to studies reviewed in chapter 2 4. State how research design, sampling, and/or instrumentation limits the interpretation and generalizability of the results 5. State how results MAY impact practitioners and/or administrators, and what future research should address 6. Draw conclusions from results that address problem statement and study significance as described in chapter 1
Appendices	<ol style="list-style-type: none"> 1. References 2. Study timeline 3. Intervention protocols 4. Instruments 5. Informed consent 6. Copy of IRB approval 7. Copy of signed proposal approval 8. Copy of signed defense approval 	

APPENDIX E1

PROFESSIONAL PERFORMANCE REVIEW FORM

PROFESSIONAL PERFORMANCE REVIEW FORM

Student Name _____ **Faculty Advisor** _____ **Semester** _____

Students are reviewed at the conclusion of each semester by all Department of Rehabilitation Studies faculty according to their compliance with the following Professional Performance Standards:

	Deferred	1 Unacceptable	2 Acceptable	3 Good	54 Excellent
1. Academic Performance					
2. Clinical Skills					
3. Ability to connect and develop therapeutic alliance with clients					
4. Professional and Interpersonal Behavior					
5. Openness to new ideas					
6. Flexibility					
7. Cooperative- ness with others					

	1 Poor	2 Unacceptable	3 Acceptable	4 Good	5 Excellent
8. Willingness to accept and use feedback					
9. Awareness of own impact on others					
10. Ability to deal with conflict					
11. Ability to accept personal responsibility					
12. Ability to express feelings effectively/ appropriately					
13. Attention to ethical and legal considerations					

Comments (use back of sheet if needed):

APPENDIX E2

Professional Counselor Development Plan – Student Remediation

Professional Counselor Development Plan – Student Remediation

Student Name: _____ Date _____

For you to continue to progress toward receiving your counseling degree in the Department of Rehabilitation Studies at East Carolina University, the Rehabilitation faculty is collectively requiring that you engage in the following behaviors that relate to the competencies addressed within our program's retention policy.

Competency Area A: Professional Responsibility

1. Demonstrate the ability to accurately reflect back to the faculty or supervisor any suggestions or directives given by them.
2. Inquire about faculty or supervisor-generated directives that are unclear and obtain from them clarifications needed to successfully apply directives.
3. Demonstrate openness to your faculty or clinical supervisors' feedback, as evidenced by following all of your faculty or clinical supervisors' directives.
4. Apply all faculty or supervisor directives in counseling sessions.
5. Demonstrate an ability to recognize personal limitations and take appropriate steps toward increased education, consultation, and/or referral.

Competency Area B: Therapeutic Skills and Abilities

When counseling clients, the student will:

1. Demonstrate an ability to use empathic reflection of feelings.
2. Demonstrate an ability to focus sessions on client-generated concerns.
3. Demonstrate listening skills by paraphrasing the content of clients' messages.
4. Demonstrate an ability to appropriately pace a session.
5. Demonstrate the appropriate use of clinical immediacy/here-and now statements.
6. Demonstrate an understanding of clients' concerns/issues.
7. Facilitate the client's movement toward reaching his or her goals.
8. Use summarizing skills at the beginning and end of all sessions.
9. Demonstrate an ability to connect with and develop a therapeutic relationship/alliance with clients.

To successfully engage in the aforementioned behaviors, the student will be required to successfully complete an individualized remediation plan that includes the following checked items:

1. ____ Attend counseling sessions with a licensed mental health professional to improve interpersonal dynamics that relate to the counseling and supervision process as mentioned previously in this document (e.g., the ability to empathize and develop a therapeutic relationship with clients) and the student's ability to comprehend, accept, incorporate, and apply faculty and supervisor feedback in clinical practice. A letter from the mental health professional indicating that you have successfully addressed the aforementioned issues in counseling will be required before you can reenroll in future departmental courses. Please present this letter to the department chair within 2 weeks of attempting to register for any REHB courses including the practicum and internship.
2. ____ If the student deficiency was of an ethical nature the student may be required to attend 6 hours' worth of supervision-related workshops that are preapproved by the department chair before reenrolling in the practicum or internship courses. Please present proof of having completed these workshops to the department chair within 2 weeks of attempting to register for the practicum course.
3. ____ Write a 10-page (double-spaced, American Psychological Association style) essay, which applies the supervision information you learned in your remediation workshops to the supervision or related conflicts you were confronted with in practicum, internship or other courses. In your essay, you should especially focus on

issues related to accepting faculty and supervisor feedback. The faculty will evaluate this statement, and you will not be able to register for future departmental courses, including practicum and internship, until the faculty is satisfied that you can adequately understand feedback within the faculty and supervision relationship as described in this document. Please present this essay to the department chair within 2 weeks of attempting to register for departmental courses, including the practicum and internship courses.

4. ___Meet with faculty advisor every 4 weeks to discuss progress and concerns related to achieving these goals and to receive feedback about your progress toward these goals.

5. ___Be allowed to have a different practicum course instructor/supervisor from your original practicum instructor/supervisor.

6. ___Successfully complete (earn an A or B grade) in advanced practicum. You cannot register for REHB courses until you have successfully completed the first, second, and third requirements in this section. Any grade of C or lower in advanced practicum will result in your automatic and permanent removal from the counseling program. Consistent with our program policy, you will only have one more opportunity to successfully complete practicum or internship if you have already failed once.

7. ___Other:

I understand and agree to the conditions of this document. Any breach of this agreement constitutes grounds for being removed from the counseling program. I understand that I can appeal this plan prior to signing the agreement/plan. I understand and agree to all of the conditions of this document. If I do not follow through on completing all of the tasks outlined in this contract with 1 year, I understand that I will be terminated from the Department of Rehabilitation Studies. I also understand the program's retention policy and am clear that there are certain behaviors that, if violated, will supersede this agreement and may result in immediate removal from the program (e.g., ethics violations).

Date

Student

Date

Faculty Representative