

SCHOOL OF GRADUATE STUDIES

Rehabilitation Counseling Program
Program Assessment Report
AY 2023 - 2024

TABLE OF CONTENTS

MISSION	3
PROGRAM LEARNING OBJECTIVES	3
PROGRAM COMPOSITION	6
FACULTY & PROGRAM GRADUATES	7
PROGRAM EXPERIENCE	9
STUDENT ASSESSMENT	10
SUMMARY, PROPOSED CHANGES, PLANNED DISTRIBUTION	12
APPENDIXES A: Program Assessment & Communication Plan B: CRCC Score Reports (2023 & 2024) & JTA Study (2021) C: Typical Sequence of Courses D: Key Performance Indicator (KPI) Table E: Disposition Assessment	

All graduate programs at Assumption University must submit an annual report to the Graduate Dean. The requirements of the traditionally submitted report do not adequately meet the program assessment requirements required by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) – the accrediting body for the Rehabilitation Counseling program. Throughout the current accreditation period, the program has been working to fully align with the program evaluation standards as set forth in Section 4 of the 2016 standards. This report is our latest effort at more fully complying with these standards. It summarizes all collected and analyzed data available as of August 2024 as outlined in the Program Assessment and Communication Plan (Appendix A)

Assumption University's Rehabilitation Counseling program had a history of successful accreditation through the Council or Rehabilitation Education (CORE) and had successfully achieved accreditation through CORE in 2016. In July 2017 CORE and CACREP merged. Assumption's Rehabilitation Counseling program submitted its accreditation self-study in June 2023 and was due for accreditation review during the 2023-2024 academic year, but it was delayed until the 2024-2025 academic year.

Mission Statement

The mission of the Rehabilitation Counseling graduate program is to provide the full array of a sequenced and integrated course of professional study that addresses current and emerging professional issues, community needs, and the needs of people with disabilities. Students will acquire the needed knowledge, competencies, values, and professional identity to provide individuals with significant disabilities the assistance and opportunities they need to achieve high quality employment, independent living, and active participation in their communities.

Program Learning Objectives

- 1) *Professional Identity and Ethical Behavior* To provide supervised clinical experiences that prepare students to engage in effective rehabilitation counseling practice consistent with the Code of Professional Ethics for Rehabilitation Counselors.
- 2) Psychosocial, Medical, Cultural and Environmental Aspects of Disability To provide students with the ability to be aware of and effectively assess psychosocial, medical, cultural, and environmental aspects of disability.
- 3) *Employment and Career Development* To enhance employment and career development through a course of study that addresses current and emerging professional issues, community needs, and the needs of people with disabilities including consumer-centered practice, assessment, job placement, assistive technology, job modification, informed choice, and empowerment.
- 4) Counseling, Group Work, Family Systems and Assessment To educate students in the following core rehabilitation counselor practice domains: affective counseling, case management, community resource utilization, job development and placement, assessment, rehabilitation planning, vocational counseling, group work, rehabilitation technology, rehabilitation research utilization, and ethical rehabilitation counselor practice.
- 5) Rehabilitation Services and Case Management To educate students in counseling and rehabilitation principles and practices so that they can assist people with disabilities to maximize their employment and independent living potential including applying the principles of caseload management and providing appropriate rehabilitation services.
- 6) CRC Exam Pass Rate To prepare students to become Certified Rehabilitation Counselors (CRC).

The Program Learning Objectives (above) of Assumption's Master of Arts in Rehabilitation Counseling program are derived from the Commission on Rehabilitation Counselor Certification (CRCC) *Knowledge Domains, Competencies*, and *Tasks*. These are determined by the *Job Task Analyses* (often referred to as role-and-function studies, role delineation studies, practice analyses, audits of practice, task analyses or

job analyses) that are conducted every 5 years. The JTA ensures that the content specifications for the CRC Exam are current and relevant by assessing what Certified Rehabilitation Counselors do in their practice (CRCC, 2021).

Program Objectives

Data Collected	Collection Method	Review/Analysis	<u>Use</u>
699 site supervisor evaluations	End of Spring Semester	Enter into spreadsheet; Mean/Median for each domain	Identify strong and weak performance trends
CRC Exam Pass Rate	Mid-March exam	Calculate pass rate for blended & online programs	Compare to past years
CRCC Score Report	Provided to us in Oct or Nov	Compare Program to national scores	Review in Faculty meeting; compare to past years

The Program Learning Objectives where revised during the Summer 2022 so they were directly assessed by the Internship II (699) Site Supervisor evaluation. Multiple items for each of the first five objectives are rated:

- 1=Far Below Expectations-needs much improvement, a concern.
- 2=Below Expectations-needs some improvement to meet standards
- 3=Acceptable-meets standards at average level
- 4=Above Expectations-performs at an above average level
- 5=Far Above Expectations-a definite strength, performs well beyond average levels
- N/A=Not Applicable to this Site

The information from each site supervisor evaluation is entered into a spreadsheet and average scores for each of the five groups are calculated (scores with N/A are excluded).

AY 2023 – 2024 Internship II (699) Site Supervisor Evaluation Data

Program Learning Objective Domain	Group Mean	Lowest Average	Individual Score <3
1) Professional Identity and Ethical Behavior	4.8	4.3	0
2) Psychosocial, Medical, Cultural and Environmental Aspects of Disability	4.4	3.7	0
3) Employment and Career Development	4.2	3.3	0
4) Counseling, Group Work, Family Systems and Assessment	4.5	3.7	0
5) Rehabilitation Services and Case Management	4.5	3.8	0

CRC Exam Student Outcome Data: 2011-2024

Year	On Campus	Online	Total
	Number/Percent Pass	Number/Percent Pass	Number/Percent Pass
2011	10/12 - 83%	14/16 – 88%	24/28 - 86%
2012	7/9 – 78%	11/14 – 79%	18/23 – 78%
2013	10/10 - 100%	13/14 – 93%	23/24 – 96%
2014	11/15 – 73%	18/19 – 95%	29/34 – 85%
2015	10/15 - 67%	12/14 - 86%	22/29 – 76%
2016	11/11 – 100%	7/8 – 88%	18/19 – 95%
2017	13/18 – 72%	3/5 - 60%	16/23 – 70%
2018	10/13 - 77%	3/3 – 100%	13/16 – 81%
2019	10/14 - 71%	4/9 - 44%	14/23 - 61%
2020	6/6 - 100%	4/5 - 80%	10/11 - 90%
2021	1/6 - 17%	5/6 - 83%	6/12 - 50%
2022	5/5 - 100%	1/4 - 25%	6/9 - 67%
2023	2/5 - 40%	1/2 - 50%	3/7 - 43%
2024	1/2 - 50%	6/7 - 86%	7/9 - 78%
TOTAL	107/141 - 76%	102/126 - 81%	209/267 - 78%

The 78% pass rate aligned with the program's historical averages and reflected a significant improvement over the 2021 and 2022 cumulative pass rates. The CRCC March 2024 national pass rate was 66% (203/308).

CRCC Score Report

Each year, CRCC sends institutions a report (usually in October or November) about how Assumption students (aggregate data) performed on the CRC exam compared to national minimal passing score. While there are some issues with how the reporting occurs (e.g., it only includes students sitting for the exam for the first time, at least 5 students must have taken the exam or the report is not sent in order to protect student confidentiality, includes the three testing dates), it nicely differentiates the data into the 12 Knowledge Domains as well as both the Counseling and Rehabilitation/Disability sections.

AY 2023 – 2024 CRCC Score Report

Appendix B includes the CRCC Score Report from 2023, the 2021 JTA Study, and the CRCC Report from 2024. The 2023 report was provided and reviewed during a faculty meeting, the JTA Study was provided,

faculty were encouraged to review their courses in relation to the JTA Study and identify areas for tweaking or improvement. It is ambitious to suggest that the improved 2024 score report is directly correlated with this review, but it is encouraging to receive such a strong score report.

Program Composition

Assumption University's Rehabilitation Counseling program welcomes and creates a safe environment that celebrates individual diversity. We actively try to "preach what we teach" by embracing accessibility and accommodation, acting and educating in a non-judgmental and stigma free manner, and running a program that is designed to provide necessary supports to help students achieve.

To evaluate and track trends in program composition, a variety of information is pulled from applicant and admitted student applications, enrollment reports, practicum and internship site selections, and lists of graduating students.

Program Composition

Data Collected	Collection Method	Review/Analysis	<u>Use</u>
Demographic (Disability, Ethnicity, Gender Identity, Experience)	Student applications	Annual Summary (June); Accepted/Admitted/Not	Comparison
Program (Online, Blend)	Applications & Annual	Enrollment Report; Summary	Comparison/Correlation
Practicum Placements	Spring & Summer	Data entered by instructors; Summary	Comparison; Site & Supervisor Evaluation
Internship Placements	Fall & Spring	Data entered by instructors; Summary	Comparison; Site & Supervisor Evaluation
Graduate List	December/May/ August	Summary	Program length; RSA Scholars

Applications & Admissions

	<u>FY22</u>	<u>FY23</u>
Total Completed Applications Received	22	21
Total Admitted	22	21
Admissions Rate	100%	100%
Total Deposited	21	17

Courses are capped at 20 students and, with the move away from independent campus and online programs to an online program with a blended option allowing less than half the courses to be taken oncampus, we typically only accept as many students as we can manage in a non-experiential course. The 100% acceptance rate could raise cause for concern; however, only students meeting admission criteria are accepted into the program.

Active Student Characteristics (55 Students)

Gender Identity		Disability		Ethnicity	y	Progran	1
Female	42	Yes	19	Black	4	Online	43
Male	13	No/Unknown	36	Latin	5	Blended	12
Other	0			Asian	2	6in5	5
Unknown	0			White	39	Non-matric	3
		Veterans	4	Multi	1		
LGBTQIA+	3			Unknown	4	On Leave	18

Our student body remains overwhelmingly female (76%) and white (78%). Nearly 35% of the student body has a disability or has requested accommodation. A strong majority (78%) of our students are part of the online program with 90% of the total student body having some professional experience prior to entering the program.

Practicum & Internship Placement Data

	Practicum	Internship
StateVR/CIL	10	8
Education	0	0
Addiction	3	2
Psychiatric	5	1

This is the first year we have tracked this data.

Program Graduates (AY 2023 – 2024) – TWELVE (12)

Grad semester	Program	RSA	CRC	Pass	<u>Oral</u>
Fall 23	Online	Yes	No	n/a	Yes
Fall 23	Online	No	No	n/a	Yes
Spring 24	Blended	Yes	Yes	Y	
Spring 24	Online	Yes	Yes	Y	
Spring 24	Online	No	Yes	Y	
Spring 24	Online	Yes	Yes	Y	
Spring 24	Online	Yes	Yes	Y	
Spring 24	Online	Yes	Yes	Y	
Spring 24	Online	Yes	Yes	Y	
Spring 24	Blended	Yes	Yes	N	Yes
Spring 24	Online	Yes	Yes	N	Yes
Summer 24	Blended	No	No	TBD	TBD
	TOTALS	9	9	7	

Faculty & Program Graduates

The strength of Assumption's Rehabilitation Counseling program is its faculty and graduates. Although small in the number of full-time dedicated faculty, the adjunct faculty provided experience-based education and diversified student professional networks.

Faculty & Program Graduates

Data Collected	Collection Method	Review/Analysis	<u>Use</u>
Faculty Evaluations	Individual & Aggregate reports	Program Director	Monitoring; RSA grant reporting
Graduate Survey	November	Employment Data	Annual Reporting

Faculty. All student evaluations of faculty and courses are managed by the Assumption University course evaluation process. Students are invited to anonymously complete course evaluations at the end of every semester and faculty do not gain access to the results until after grades have been submitted. Each semester, Program Directors can review each faculty member's course evaluations and receive an aggregate report. In addition to basic quality monitoring, student course ratings (mean) and student instructor rating (mean) are metrics provided as part of our RSA Long-term Training grant reporting.

	<u>22-23</u>	<u>23-24</u>
Mean overall rating of the courses offered by students	4.5	4.3
Mean overall rating of the instructors offered by students	4.6	4.5

The following table lists RC program faculty and the courses they teach on-campus (RCP) and/or online (RCPL):

	Faculty	Summer 23	Fall 23	Spring 24	Courses/ year
1	Castello, Laura (Private Practice)	RCPL 599	RCPL 698	RCPL 699	3
2	Cioe, Nicholas* (AC)	RCPL 599	RCPL 503, RCP 530	RCP 599	4*
3	Coraccio, Andrea (UNUM)		RCPL 514		1
4	Corneau, Jessica (BRS-CT)		RCPL 513	RCPL 512	2
5	Demore-Taber, Michelle (Advocates)		RCPL 698	RCPL 699	2
6	Filkins, Mearlene (VA)	RCPL 630			1
7	Harris, Heather M. (UKY-Private Practice)		RCPL 510		1
8	Hill, Calvin R. (Springfield College)		RCPL 631		1
9	Howe, Stefani (Anna Maria College)	RCPL 502		RCP 501	2
10	Kinsella ,Kristi* (VA – New York)	RCPL 550	RCPL 501	RCPL 525	3*
12	Paskins, Ryan* (AC)	RCPL 530, RCP 520	RCP 525	RCPL 505, 619 RCPL 520	6*
13	Rinaudo Robert, Nicole (Providence VA)			RCP 540	1
14	Scully, Susan* (AC)		COPER 1: M	**	

^{*}Faculty meets the CACREP definition of CORE Faculty Member

** Susan Scully (Core Faculty) was supposed to teach RCP 599 in the spring and Nicholas Cioe (Core Faculty) was supposed to teach RCP 630. This would have resulted in 14 of the 28 courses taught by core faculty. However, enrollment issues with RCP 630 resulted in Cioe having to teach 599, one less class being offered, and us missing the expected 50% requirement.

Semester	# Courses offered	# Courses taught by core faculty
Summer 23	7	4 (57%)
Fall 23	10	4 (40%)
Spring 24	10	5 (50%)
TOTAL	27	13 (48%)

After many years teaching and supporting Assumption's rehabilitation counseling program, Laura Castello is taking a break from teaching. Dr. Calvin Hill has also expressed a desire to step back from teaching. Nicole Robert is expected to take over teaching the 599/698/699 sequence and Tyshawn Thompson, who is already teaching the cultural responsiveness course in the school counseling program, is expected to being teaching 631.

Regarding meeting the CACREP standard (having at least 50% of the courses taught by CORE faculty), it remains to be seen whether they will accept Dr. Kinsella (who meets the education and professional requirements of a CORE faculty member but is not a full-time faculty member) unless and until additional full-time faculty are approved.

2024 Graduate Survey Data

	Before 2016	2016 or later	Current employer	
Graduates who completed the survey	13	32	State VR	13 (41%)
% who are/have been employed since graduating		100%	Federal	4 (13%)
# that received RSA tuition support		24 (75%)	Education	4 (13%)
			Private	3 (9%)
			Community Rehab	8 (25%)

Meaningfulness of work	
Extremely	19 (59%)
Very	9 (28%)
Moderately	3 (9%)
Slightly	1 (3%)

How well prepared were they				
Very well	16 (50%)			
Well	12 (38%)			
Somewhat	4 (12%)			

Program Experience

Student feedback has always been the primary source of program review and revision. Feedback about faculty leads to adjustments in hiring decisions, feedback about course content (not enough or too much redundancy), course sequence, desire for an elective, desire for additional CRC exam prep support, and course delivery (e.g., online asynchronous, hybrid, campus, blended) have all resulted in program modifications.

Program Experience

Data Collected	Collection Method	Review/Analysis	<u>Use</u>
Portfolio Feedback	699 (Spring)	Qualitative Summary	Annual Review Meeting

The Portfolio Review feedback is supposed to be synthesized, summarized, and included in the annual program report for discussion at the annual review meeting. Unfortunately, this synthesized and summarized data is not available for this report.

Employers of Program Graduates

The Rehabilitation Counseling program does not do a good job systematically gathering information from employers of program graduates. Historically, a survey was sent to employers every 3-5 years, but this has not continued. It is an accreditation requirement, so we are hopeful that our advisory committee has recommendations for ways to accomplish this requirement in a beneficial and efficient manner.

CACREP Vital Statistics

The Council for Accreditation of Counseling and Related Educational Programs (CACREP) requires accredited programs to submit and post vital statistics every year. Although much of this information is contained in the annual report, the following vital statistics are reported to CACREP annually:

	2024	2023	2022
# of students	55	56	61
# of graduates for the past academic year	12	9	13
pass rates on credentialing examinations	71-80%	71-80%	78%
completion rates (uninterrupted)	72%	88%	93%
job placement rates	100%	100%	100%

Student Assessment

The Rehabilitation Counseling program uses a cohort model and offers each required course online once per year with the option of taking some of the courses in an alternate format (on campus). Students are encouraged to, and the vast majority do, take courses in the sequence that begins in the Fall semester. Appendix C is the typical sequence of courses assuming adequate program enrollment. Student performance is measured by their (a) course grades (must receive a B- or higher for the course to count toward program of study, one retake allowed), (b) grade point average (students with a GPA < 3.0 are placed on academic probation and cannot graduate with a cumulative GPA < 3.0), (c) performance on Key Performance Indicator (KPI) assignments, and (d) professional disposition (expectation is for graduating students to exhibit external representation (through behavior and relationships with others) of one's internal mind) that align with the CRCC Code of Ethics).

Student Assessment

Data Collected	Collection Method	Review/Analysis	<u>Use</u>
Grades (Core content)	Each Semester	Registrar report	Academic Standards; Student Learning & Progress
Grade Point Average	Each Semester	Registrar report	Academic Standards
Key Performance Indicators	Each Semester	Director Review & Catalogue	Student Learning & Progress; Program Effectiveness
Disposition	503, 599, 550, 699	Survey completed by faculty; Semester Summary	Student Learning & Progress; Program Effectiveness

Grades & GPA (AY 2023 – 2024)

Currently, other than students who are on leave, there are no students who need to re-take a class because they failed to earn a B- or higher. There also are no students with a cumulative GPA below a 3.0.

Key Performance Indicators (AY 2023 -2024)

Appendix D summarizes the key performance indicators (KPI) measured throughout a student's program of study. These indicators were selected by asking each faculty member to select an assignment that best captured essential knowledge they expected from an Assumption Rehabilitation Counseling program graduate. Program leadership reviewed the assignments to try and maximize differentiation in what was being measured (e.g., analytic, comprehension, skill, cultural, theoretical) and in what format the assessment occurred (e.g., quiz, presentation, case study, paper), explored alternative course assignment options, and presented this information to the faculty with labels of CORE or Specialty.

Class	<u>501</u>	<u>502</u>	<u>503</u>	<u>505</u>	<u>510</u>	<u>512</u>	<u>513</u>	<u>514</u>
Average KPI assignment score	96	95	98	100	95	95	93	96
# grades that did not meet expectations	0	1	0	0	1	0	1	0
Class	<u>520</u>	<u>525</u>	<u>530</u>	<u>550</u>	<u>619</u>	<u>630</u>	<u>631</u>	
Average KPI assignment score	94	96	93	97	99	97	100	
# grades that did not meet expectations	1	1	0	0	0	0	0	

NOTE: No student had more than one KPI grade that failed to meet expectations

Graduating Class	ALL KPI Assignments Average (range)	
AY 2023 - 2024	90% – 99%	

Student Disposition

The disposition tool (see Appendix E) is designed to measure student's professional dispositions at multiple points in the program (after completion of courses 503, 599, 550, 699). Doing so helps faculty and students to identify areas of strength and opportunities for growth. Importantly, students should conceptualize *disposition* as external representation (through behavior and relationships with others) of one's internal mind. Faculty are thus asked to evaluate knowledge, skills, attitudes, beliefs, and stereotypes based on student behavior, relationships, and class contributions with regard to their 1) *Ethical Behavior*, 2) ability to set and maintain appropriate professional and personal *Boundaries*, 3) ability to understand *Culture* and the intersectionality of culture and counseling, 4) *Openness to feedback* and supervision, 5) ability to be present, attentive, and *Accepting* of those they serve, and 6) ability to *Adapt* and be *Flexible*.

Universal implementation of the disposition tool has not happened as planned, making it difficult to review and analyze data. Completed dispositions consistently show professional behavior expected of rehabilitation professionals. Ubiquitous utilization of these assessments is a priority.

Summary, Program Changes, Planned Distribution

All AY 2023 – 2024 graduates met or exceeded the standard of professional performance according to their internship site supervisor evaluation with group means in the "above expectations" range.

The AY 2023 – 2024 CRC Exam cumulative pass rate was 78% (7 of 9 students taking the exam passed), exceeding the published March 2024 pass rate of 66% (203/308).

Faculty review of the 2023 CRCC score report with the 2021 JTA Study contributed to an improved 2024 CRCC score report with ZERO university averages falling below the minimal passing score.

The program admissions rate remained high (100%) with at or near max admissions for the 2022 and 2023 cohorts. The program completion rate also remained high (72%) though it showed a continued dip as many of the students who began before or during the pandemic are starting to time-out of the program.

Our student body remains overwhelmingly white (78%). Nearly 35% of the student body has a disability or has requested accommodation, which speaks to the inclusiveness of the admissions process. The asynchronous format of the online program continues to attract students from throughout the country, especially individuals who are active in the professional workforce and need flexibility.

State Vocational Rehabilitation (StateVR) and Centers for Independent Living (CIL) had most placements for practicum and internship sites. This is partially due to the opportunity for students currently working in these organizations to also complete their experiential learning at their place of employment.

Nine (9) of the twelve (12) AY 2023 – 2024 graduates received tuition support from the RSA grant.

Students continue to rate the quality of courses offered (4.3) and the instruction provided (4.5) as excellent (on of a 5-point scale).

Program graduates are employed in various organizations across the rehabilitation landscape. For those who graduated in 2016 or later and completed the survey (32), the vast majority (88%) of them find their

work "very" or "extremely" meaningful and felt "well" or "very well" prepared by the Assumption Rehabilitation Counseling program.

A proper review, synthesis, and summary of the Portfolio Review Assignments was not conducted nor available as it should have been. This is an area for improvement.

Measurement of Key Performance Indicators (KPI) shows most students meet the assignment expectations with only FIVE (5) individual assignments falling below the standard. No student has multiple KPI assignments that fell below the standard and the average KPI assignment grade for AY 2023 – 2024 graduates ranged from 90% - 99%.

Measurement of student dispositions has not been implemented as designed, thus preventing for proper review and analysis of aggregate data. Completed dispositions do not suggest problematic dispositions. This is an area for improvement.

Program Changes

As referenced in the Summary, improvements to ensure a proper review, synthesis, and summary of the Portfolio Review Assignments is conducted, and full implementation of professional disposition assessments to allow for aggregate review and analysis must occur for the AY 2024 – 2024 report.

The program must also identify a way of systematically gathering information from employers of program graduates in a way that is beneficial and efficient.

Two long-time adjunct faculty will be stepping away from teaching in the rehabilitation counseling program. One current adjunct faculty will be taking over the practicum (599) and internship (698/699) sequence. A faculty currently teaching cultural responsiveness in the school counseling graduate program has been identified to teach RCP/L 631. An adjunct faculty brought on to teach the advanced treatment in addictions elective (601) was very effective and has expressed an interest in teaching the introduction to substance use disorders and addiction class (RCP/L 501).

Students continue to explore ways to meet state licensure requirements as part of their Rehabilitation Counselor training program. While there is room for one elective in the program, two electives are required to meet most state regulations. Students are allowed to take the necessary courses, but these courses are not offered by the Rehabilitation Counseling program. The situation is more complex than at face value but remains an area for exploration over the current years.

The program is expecting a CACREP accreditation site visit during AY 2024 – 2025. This certainly may result in programmatic changes. Regardless of the site visit report, CACREP released new standards in 2024, which will require programmatic review, curriculum mapping, and adjustments as needed.

Planned Distribution

This report will be reviewed by the Rehabilitation Counseling program Advisory Council at its annual meeting. It then will be uploaded to the program website, sent to the Graduate Dean, all faculty, and current students. Notification about the report's availability will be sent to all recorded practicum and internship site supervisors as well as established program partner contacts.

Appendix A

Program Assessment Table & Communication Plan

Data Collected	Collection Method	Review/Analysis	<u>Use</u>
Demographic (Disability, Ethnicity, Gender Identity, Experience)	Application	Annual Summary (June); Accepted/Admitted/Not	Comparison
Program (Online, Campus, Blend)	Application/Annual	Enrollment Report; Summary	Comparison/Correlation
Grades (Core content)	Each Semester	Registrar report	Academic Standards; Student Learning & Progress
Grade Point Average	Each Semester	Registrar report	Academic Standards
Key Performance Indicators	Each Semester	Director Review & Catalogue	Student Learning & Progress; Program Effectiveness
Course Evaluations	Each Semester	Faculty & Director review; Key metric Averages	Faculty review; RSA Grant metrics
Practicum Placements	Spring & Summer	Summary	Comparison; Site & Supervisor Evaluation
Internship Placements	Fall & Spring	Summary	Comparison; Site & Supervisor Evaluation
Disposition	503, 599, 550, 699	Survey completed by faculty; Semester Summary	Student Learning & Progress; Program Effectiveness
Portfolio Feedback	699 (Spring)	Qualitative Summary	Annual Review Meeting
Supervisor Internship Evaluation	Spring	Average/Median	Program effectiveness
Graduate List	December/May/August	Summary	Program length; RSA Scholars
Graduate Survey	November	Employment Data	Annual Reporting
CRC Exam	March; Reports from CRCC	Pass rates	Program effectiveness

Communication	<u>When</u>	<u>Purpose</u>	Included Content
Semester Introduction e-mail (Faculty)	Month prior to semester start	Provide necessary information; remind about program assessment requirements	Academic Calendar, Date/time for mid-semester meeting
Semester Introduction e-mail (Students)	Two weeks into semester	Remind students about expectations; share important information	TBD
Mid-Semester Conference Calls (Faculty)	Mid-October, Mid- March, Mid-July	Discuss program and student issues; remind about program assessment requirements	TBD
Program Review Meeting (All Faculty, Students, and Staff)	Beginning of January	Present and Review Annual Report	Annual Report; other materials as needed

Appendix B

ASSUMPTION COLLEGE

Exam Dates	Number of	Number	University Pass	National Average
	Sitting	Passing	Rate	Pass Rate
10/2022-7/2023	7	2	29%	61%

Counseling Section

Rehabilitation/Disability Section

Knowledge Domains	Minimum Passing Score	University Average Score	Minimum Passing Score	University Average Score
Professional Orientation and Ethical Practice	5.33	5.33	5.33	4.86
Counseling Theories, Techniques, and Evidence-Based Practice	8.0	6.83	2.33	2.57
Group and Family Counseling	4.0	4.0		
Crisis and Trauma Counseling and Interventions	6.0	7.17		
Medical and Psychosocial Aspects of Chronic Illness and Disability			9.0	8.0
Assessment/Evaluation, Occupational Analysis, and Service Implementation	5.67	6.50	4.33	5.0
Career Development and Job Placement	3.0	2.33	5.67	5.57
Business Engagement			7.33	7.43
Community Resources and Partnerships			8.33	7.57
Case Management	10.67	11.0		
Health Care and Disability Management			7.33	5.71
Research, Methodology, and Performance Management	1.0	4.0	1.0	1.0

ASSUMPTION COLLEGE

Exam Dates	Number	Number	University Pass	National Average
	Sitting	Passing	Rate	Pass Rate
10/2023-7/2024	10	6	60%	60%

Counseling Section

Rehabilitation/Disability Section

Knowledge Domains	Minimum Passing Score	University Average Score	Minimum Passing Score	University Average Score
Professional Orientation and Ethical Practice	5.33	6.5	5.0	5.7
Counseling Theories, Techniques, and Evidence-Based Practice	8.0	8.7	2.33	3.2
Group and Family Counseling	4.0	4.6		
Crisis and Trauma Counseling and Interventions	6.7	6.8		
Medical and Psychosocial Aspects of Chronic Illness and Disability			8.67	9.7
Assessment/Evaluation, Occupational Analysis, and Service Implementation	5.7	6.2	4.67	5.0
Career Development and Job Placement	3.0	3.8	6.33	7.2
Business Engagement			7.33	8.4
Community Resources and Partnerships			7.0	8.4
Case Management	10.33	12.2		
Health Care and Disability Management			7.67	8.0
Research, Methodology, and Performance Management	3.67	4.6	1.0	1.5



2021 Job Task Analysis Study & CRC Knowledge Domains, Competencies and Tasks

Executive Summary

The 2021 Job Task Analysis was based on a combination of expert panel meetings and a survey of Certified Rehabilitation Counselors. A description of the work in a field or profession is typically developed in job analyses through a logical analysis of the literature or through a panel of subject matter experts (SMEs). Delineating the important tasks and/or knowledge required for competent practice is a lengthy and complex process.

In this study, a CRC-credentialed expert panel was used to delineate the content for a survey of incumbents in the field. The 2017 CRC Exam blueprint served as the starting place for this work. Twelve major domains and 93 specific competencies or sub-domains resulted from the study. Two (2) meetings were held as part of the JTA process. The first meeting, a survey development meeting, was held virtually via Zoom from January 19 to January 21, 2021. It involved the CRC Job Analysis Task Force, 13 expert panelists from various practice areas of rehabilitation counseling. A pilot survey was then administered to nine SMEs and comments were returned. The actual survey was live from March 1 to April 1, 2021. An invitation and link to the survey were sent to 8,113 CRC credential holders and between 1,160 (14.3%) and 1,045 (12.9%) responses were received to the various parts of the survey. The second meeting occurred on May 4 to May 5, 2021. This was a test specification meeting held via Zoom involving 11 Task Force members from the original meeting. The detailed content outline (DCO) was established during this meeting and the weightings were specified for each of the major domains and sub-domains. On May 24, 2021, a review meeting was held with CRCC staff, and four (4) Lead SMEs from the Task Force examined the mappings between the new blueprint and the 2017 blueprint. Based on this review, several minor changes were made, and the blueprint wording and weights were finalized.

Background

The Commission on Rehabilitation Counselor Certification's (CRCC) mission is "dedicated to the excellence of rehabilitation counseling and services for individuals with disabilities by setting the national standard in certification, providing leadership, education, advocacy, and supporting research. The vision is to "serve as a leader in the unification of the rehabilitation counseling profession and for the Certified Rehabilitation Counselor (CRC) to be recognized as the credential of excellence for professionals assisting individuals with disabilities to live fully integrated lives." The organization was incorporated in January 1974 and 50,000 professionals have since participated in the certification process. Over 15,000 CRCs are practicing in the United States, Canada, and elsewhere.

The Certified Rehabilitation Counselor (CRC) process is the oldest and most reputable counseling certification mechanism in the United Sates.

As an addendum to the JTA process, the Job Analysis Task Force drafted the job description of a Certified Rehabilitation Counselor as follows:

CRCs are nationally accredited counselors educated and trained at the graduate level. They have specialized knowledge, skills, and abilities to collaborate with persons with all types of disabilities to overcome barriers to employment or other life domains. Through a comprehensive and holistic approach, CRCs work with the whole person, to help them understand the functional implications of their disability and the environmental constraints that may occur. CRCs empower individuals with disabilities to articulate their needs, achieve their personal, social, psychological, vocational, and independent living goals. CRCs provide a bridge between the individual and self-sufficiency, assisting their clients in living fully integrated lives. CRCs are unique in comparison to other counseling professionals given their interaction with individuals with disabilities. No other counseling profession is primarily dedicated to working with individuals with all types of disabilities.

Job task analyses (often referred to as role-and-function studies, role delineation studies, practice analyses, audits of practice, task analyses or job analyses) are used to validate certification examinations and provide a basis for defending the appropriateness of the examination's content. This JTA ensures that the content specifications for the CRC Exam are current and relevant by assessing what Certified Rehabilitation Counselors do in their practice. Content validity in a certification examination provides evidence that the roles addressed in the test reflect the practices that are necessary for successful performance. The Standards for Educational and Psychological Testing (2014) prepared jointly by the American Educational Research Association (AERA), the American Psychological Association (APA), and the National Council on Measurement in Education (NCME), states.

The content domain to be covered by a credentialing test should be defined clearly and justified in terms of the importance of the content for credential-worthy performance in an occupation or profession. A rationale and evidence should be provided to support the claim that the knowledge or skills being assessed are required for credential-worthy performance in that occupation and are consistent with the purpose for which the credentialing program was instituted. (Standard 11:13, pp 181-182)

Commentary on Standard 11:13 states "Typically, some form of job or practice analysis provides the primary basis for defining the content domain" (p. 182).

The CRCC is accredited by the National Commission for Certifying Agencies (NCCA). The NCCA's Standards for the Accreditation of Certification Programs states under Standard 14 entitled "Job Analysis": "The certification program must have a job analysis that defines and analyzes domains and tasks related to the purpose of the credential..." and the Commentary 2 for Standard 14 further states: "Validation of the delineated domains, tasks, and associated knowledge and or skills is typically accomplished by surveying current certificants...".

In line with the standards cited above, the job analysis study described in this report was undertaken to provide the foundation for updating the test specifications for the CRC Exam. Test

specifications created using this process encourage the development of test items that reflect the up-to-date practice in the field. The job analysis study reported herein was undertaken to provide the foundation for the test development of the rehabilitation counselor role.

Study Purpose

The purpose of the study is to update and validate the examination specifications for the CRC Exam. Job task analysis (JTA), (previously referred to as role-and-function studies) are used to validate certification examinations and provide a basis for defending the appropriateness of the examination's content. To assess an individual's capabilities, it is not enough to just have developed a body of knowledge. It is also necessary to define the job requirements, assess the tasks to be performed, and determine the knowledge and skills that must be applied to accomplish them and inform the development of curriculum accreditation standards for rehabilitation counselor education (RCE) programs.

For a certification program to be defensible, the use of job task analysis is an essential component for the program. The job task analysis process involves the defined body of knowledge, the job requirements of a certified person and determining the use or cognitive level the candidates need to possess for each topic and subject area. This JTA ensures that the content specifications for the CRCE are current and relevant by assessing what Certified Rehabilitation Counselors do in their practice. Content validity in a certification examination provides evidence that the roles addressed in the CRC Exam reflect the practices that are necessary for successful performance.

Historical Context

The origins of the state-federal vocational rehabilitation program and rehabilitation counseling date to the Smith-Fess Act of 1920, the civilian version of the Soldiers' Rehabilitation Act of 1918 that provided rehabilitation services to soldiers returning from World War I (Rubin et al., 2016). Since that time, rehabilitation counseling has been shaped by a professionalization movement that included the establishment of accredited master's-level training programs, national certification through an empirically based examination process, a professional code of ethics, and commitment to a periodic review of the knowledge and roles of practicing counselors to identify emerging trends. Muthard and Salomone (1969) were the first to investigate the professional practice and preparation of rehabilitation counselors; however, Rubin et.al. (1984) established the first iteration of the study of the roles and functions of rehabilitation counselors. This process was adopted as a critical task by the Commission on Rehabilitation Counselor Certification (CRCC) in 1985. In 1990, CRCC and CORE began a joint content validation research effort to achieve both of these aims (Leahy & Holt, 1993), resulting in the first evidence of a CRCE "blueprint" and validated domains and subdomains of rehabilitation counseling (RC) knowledge areas. Leahy et.al. continued the role and function studies through 2018, The most recent Job Task Analysis (JTA) study was completed by CRCC (2021).

Current 2021 Job Task Analysis Study

This study represents a shift in terminology from prior role and function studies, which should be addressed. As indicated earlier, the Job task analysis (also referred to as role-and-function studies, role delineation studies, practice analysis, audits of practice, task analysis, or job analysis) are used to validate certification examinations and provide a basis for defending the appropriateness of the examination's content. In previous studies, the terms "role", "function", and "knowledge domains" were all used; to be more applicable and recognizable to practicing certificants, roles delineate major common job responsibilities, here termed domains. Knowledge is the subdomains associated with those major responsibilities, here termed competencies (skills to perform the tasks). Functions are activities that contribute to job success, here termed tasks. The blueprint is the compilation of competencies and tasks for effective CRC practice, which form the structure for the CRCE.

In 2020, CRCC contracted with Pearson VUE, an organization specialized in computerized testing and with years of experience in the development and administration of job task analysis. Pearson VUE staff and psychometricians engaged CRCC personnel and a team of CRCs that served as subject matter experts (SMEs) in a multi-step process to complete a comprehensive JTA, with the aim to update the CRC Knowledge Domain, Competencies and Tasks Blueprint to reflect current and relevant rehabilitation counseling practice and develop the 2021 exam specifications for the CRCE.

Job Task Analysis (JTA) Survey Development

The job analysis methodology that was used to study the rehabilitation counselor's role consisted of three main steps. First, CRCC was charged with recruiting an expert panel consisting of certified rehabilitation counselors from a variety of rehabilitation settings (e.g., public, non-profit, private, academic settings) to form the JTA Task Force. Second, the JTA Task Force members were asked to delineate the major common job responsibilities (domains) of CRCs and the competencies (sub-domains) associated with each of those major responsibilities. In some cases, this expert panel of CRCs expanded these sub-domains further into more distinct categories. Note that exam items are mapped at the lowest relevant level so that the definition of these more specific areas express a desire by the committee to be highlighted for testing. Third, the JTA Task Force created a survey, based on the 2017 blueprint, to survey CRCs about the importance and/or frequency of each domain, subdomain, and sub-subdomain in their current work.

In January 2021, the JTA Task Force met virtually with CRCC personnel and a Pearson VUE staff scientist and psychometrician to develop the JTA Survey instrument. The SME panel, comprised of CRC-credentialed professionals, determined the content of the survey. The SME panel included 9 females and 4 males, with an age range between 31 to 60, and with 11 to 20 years of experience. Three panelists worked in private-for-profit settings; two worked in settings serving veterans; six worked in a state/provincial agency; one worked in a college/university, and one reported "other." Panelist self-reported job titles included Practitioner (10), Administrator (1), Educator (1), and Forensic/Administrator/Educator (1). The 2017 CRCE blueprint, informed by the KVI-R, was the starting point for the JTA Survey development process.

Before dissemination to potential participants, a pilot survey was administered to the Pilot Survey Committee (PSC), comprised of nine SMEs members from the JTA Task Force. The survey was piloted to: (a) determine whether the survey instructions and questions were clear; (b) to verify that there were no typographical errors, (c) to review and clarify the rating scales; (d) to determine how long it would take participants to complete the survey; and (e) to make any final changes to the survey tasks and demographic questions. The PSC determined the survey could be completed in approximately 40 minutes. PSC members were asked to keep and forward notes about the survey. The JTA Survey was revised after all comments were reviewed, discussed, and entered into Survey Monkey for dissemination.

JTA Survey Structure. The JTA Survey included an introduction that explained the purpose of the survey and provided a time estimate for completion of the survey. The survey contained 13 demographic questions, including age, gender, race/ethnicity, disability status, education, practice setting, years of practice, geographic location of practice, and job title. The survey contained question blocks for each of the 12 major domains and the 93 specific competencies.

To determine the relative weight of each domain, participants rated the 12 domains by importance to their role as a CRC in their work setting on a scale of 0 to 10 (0 = Of no importance to 10 = Extremely important). Participants rated the 93 subdomains and subsubdomains by importance to their role as a CRC in their employment setting using a five-point Likert scale (1 = Not important to 5 = Extremely important). Participants used a five-point Likert scale to indicate the frequency with which they performed each task in their role as a CRC in their employment setting (1 = Never to 5 = Routinely). The reliability of the two portions of the survey were $\alpha = .97$ for competency importance and $\alpha = .95$ for task frequency. Participants were given the opportunity to add open-ended responses to each Domain area:

Are there any important competencies or frequently performed tasks related to [Domain] which were not stated in the survey and that you would recommend to include? If yes, please list any that were missed. Please be concise and limit responses to 60 words or less per response.

Test Specification

Pearson Vue and CRCC reconvened the JTA Task Force to interpret the JTA survey results and develop the new CRC test specification. Eleven SMEs from the expert panel that developed the original survey convened for this test specification meeting including CRCC' Executive Director, Director of Certification and psychometricians from Pearson Vue. The JTA Task Force reviewed each of the 95 sub-domains one-by-one as a large group of panelists. Each sub-domain was also classified as belonging to the Counseling Section of the CRC Exam or the Rehabilitation and Disabilities Section.

The JTA Task Force and CRCC staff conducted a final review and approval of the CRC Knowledge Domain, Competencies and Tasks blueprint.

CRC Exam Structure

The 2021 version of the CRC Exam has 175 total multiple-choice items. It contains 25 pre-test (field-test) unscored items and 150 scored items appearing in two sections titled "Counseling" (72 items) and (78 items), definition for Rehabilitation and Disabilities Section. Definitions for counseling and rehabilitation and disability are as follows:

Definition for Counseling Section:

The counseling section of the exam will refer to knowledge and ethical application of counseling theories, assessment techniques, and interventions as well as knowledge and application of principles of human development, psychosocial and cultural issues, and case management techniques in the rehabilitation counseling process. It encompasses research, evidence-based practice, and advocacy for all stakeholders.

Definition for Rehabilitation and Disabilities Section

The rehabilitation section of the exam refers to knowledge and application of medical, environmental, and vocational aspects of disabilities. It incorporates historical and legislative foundations of rehabilitation, rehabilitation services and resources, functional capacities of those with disabilities, business engagement, community partnerships, advocacy, and healthcare and disability systems in the rehabilitation counseling process.

Each exam section has a cut score, and a candidate must take and achieve a "pass" score in both parts in the same administration to pass the exam. Candidates are allowed 3 hours and 30 minutes to complete the exam. The examination is administered at sites throughout the United States and internationally using a computer-based delivery format. The primary goal of the JTA was to update the "CRC Knowledge Domains, Competencies and Tasks Blueprint," using an "evidence-based research study for the CRC Exam. A secondary but equally important goal of the JTA was to generate integer domain targets for each of the two sections of the exam: Counseling, and Rehabilitation and Disabilities. These two sections are a key feature of the CRC Exam. They include a cut score, which candidates are required to pass in a single administration; and the assignment of sub-domains to each section, which was essential to finalizing this second CRC Exam structure.

Summary

The CRC exam is designed to differentiate between a **competent** and a **not-competent** candidate.

JTA research study Value and Purpose:

- > To update and validate the examination specifications for the CRC Exam.
- ➤ Job task analyses (JTA) are used to validate certification examinations and provide a basis for defending the appropriateness of the examination's content.
- ➤ To assess an individual's capabilities, it is not enough to just have developed a body of knowledge. It is also necessary to define the job requirements, assess the tasks to be performed, and determine the knowledge and skills that must be

- applied to accomplish them and inform the development of curriculum accreditation standards for rehabilitation counselor education (RCE) programs.
- ➤ The job analysis translates the knowledge, skills, and abilities of career practice into a usable format for test development and delineates the important tasks and knowledge deemed necessary for competent practice.
- ➤ The final product, the CRCC Knowledge Domain, Competencies and Tasks Blueprint, becomes the framework to ensure quality outcomes for individuals and their families and data driven outcomes for the employers.
- The final CRCC Knowledge Domain, Competencies and Tasks Blueprint should be the guiding document and to be used by Clinical Rehabilitation and Rehabilitation Counseling programs to define their curriculums and by CACREP to develop competency-based clinical rehabilitation and rehabilitation counseling educational standards. Both should be infused into your program's curriculum to ensure your students are well prepared to sit for the CRC exam, more importantly to deliver quality services to individuals with disabilities CRCC Knowledge Domains, Competencies, and Tasks.

References

American Educational Research Association, American Psychological Association, & National Council on Measurement in Education. (2014). *Standards for educational and psychological testing*. American Educational Research Association.

American National Standards Institute. (2009). *Guidance on psychometric requirements for ANSI accreditation* (ANSI-PCAC-GI-502). American National Standards Institute.

Institute for Credentialing Excellence. (2009). Standard for assessment-based certificate programs (ICE 1100 2010[E]). Institute for Credentialing Excellence.

NCS Pearson, Inc., Pearson Vue. (2021) Job Task Analysis Report: Commission on Rehabilitation Counselor Certification (CRCC)Certified Rehabilitation Counselor (CRC) Exam.



2021 Job Task Analysis (JTA) Evidence-based Research Study CRC Knowledge Domains, Competencies and Tasks Effective March 2022

[C]=Counseling [R]=Rehabilitation and Disability

1. Professional Orientation and Ethical Practice

10.7%

A. Uphold professional ethical standards for rehabilitation counselors and manage risk.[C]

- a) Conceptualize and articulate the counseling relationship
- b) Adhere to and ensure confidentiality, privileged communication, and privacy
- c) Understand how to promote and participate in advocacy and ensure accessibility
- d) Maintain professional roles to ensure appropriate service provision
- e) Maintain appropriate relationships with other professionals
- f) Understand the differing professional relationships in forensic and indirect services
- g) Understand the ethical requirements of evaluation, assessment, and interpretation
- h) Understand the ethical requirements in the roles of teaching, supervising, and training
- i) Understand the ethical implications of research and publication
- j) Understand the limits and ethical implications of the use of technology and distance counseling
- k) Understand and ensure appropriate business practices
- I) Understand and apply ethical decision-making models and processes.

B. Understand and apply laws and public policy affecting individuals with disabilities. [R]

- a) Summarize and synthesize the impacts of the Rehabilitation Act of 1973.
- b) Summarize and synthesize the impacts of Title V of the Rehabilitation Act of 1973 Sections 501-504.
- c) Summarize and synthesize the impacts of the Rehabilitation Act of 1973, as Amended.
- d) Understand the impact of SSI/SSDI on employment, independent living and economic self-sufficiency.
- e) Understand the impact of veteran benefits (e.g., service- connected disability compensation and non-service-connected pension) on employment, independent living and economic self-sufficiency. NEW
- f) Summarize and synthesize the impacts of the Fair Labor Standards Act.
- g) Understand the definition of a disability in ADA, the uses of the definition, and how the definition relates to the rights guaranteed by the ADA.
- h) Understand the rights guaranteed by the ADA in an employment setting.
- i) Understand the definition of a reasonable accommodation as defined by the ADA.
- j) Understand the rights guaranteed by the ADA on public transportation.
- k) Understand the changes to the definition of disability in the ADAAA, the changes to the interactive process, and the implications for employees and employers. NEW
- I) Understand the role of the EEOC in relation to discrimination.
- m) Summarize and synthesize the impacts of IDEA.
- n) Summarize and synthesize the historical impacts of WIA.

- o) Understand the rights and limits guaranteed by FMLA.
- p) Understand the confidentiality and technology requirements of HIPAA.
- q) Understand the impact of TWWIIA (Ticket to Work) on employment, independent living, and economic self-sufficiency.
- r) Understand the impact and implications of WIOA on employmentoutcomes, independentliving, and economic self-sufficiency. **NEW**
- C. Advocate for diversity, understand, and apply appropriate services that address multicultural counseling issues. [C]
- D. Understand and apply appropriate rehabilitation terminology and concepts. [R]
- E. Understand and identify the differing professional roles, functions, and effective relationships with other providers and professionals.[C]
- F. Understand the credentialing issues related to the rehabilitation counseling profession and advocate for appropriate solutions. [C]
- G. Understand the differing organizational structures of rehabilitation counseling practice settings (e.g., public, private-for-profit, and not-for-profit service delivery systems). [R]
- H. Understand, synthesize, and apply knowledge of historical and philosophical foundations of rehabilitation counseling. [R]
- 2. Counseling Theories, Techniques, and Evidence-Based Practice

11.3%

- A. Apply clinical problem-solving and critical-thinking skills. [C]
- B. Understand rehabilitation techniques for individuals with disabilities. [R]
- C. Understand individual counseling theories. [C]
 - a) Integrated/Eclectic
 - b) Rational-Emotive Behavior Therapy
 - c) Reality Therapy
 - d) Person-Centered
 - e) Psychoanalytic
 - f) Gestalt
 - g) Trait-factor/Person Environment Fit
 - h) Behavioral
 - i) Cognitive/Behavioral
 - j) Adlerian
 - k) Solution-Focused
 - I) Narrative

- m) Feminist
- n) Existential
- D. Utilize individual counseling practices, interventions, and techniques. [C]
 - a) Systematic Desensitization
 - b) Behavior Analysis and Therapy
 - c) Social Skills
 - d) Time Management
 - e) Stress Management
 - f) Restructuring
 - g) Anger Management NEW
 - h) Problem Solving Therapy NEW
 - i) Person-centered practices NEW
 - j) Mindfulness-based practices NEW
- E. Understand substance use and treatment. [C]
- F. Establish and maintain effective working alliances with clients. [C]
- G. Understand dual diagnosis and co-occurring disorders. [C] NEW
- H. Understand counseling/training to help clients develop workplace socialization skills. [R]
- I. Demonstrate motivational interviewing use and skills. [C]
- J. Facilitate treatment planning for clinical conditions (e.g., depression, anxiety, PTSD). [C]
- K. Understand human growth and development. [C]
- L. Apply evidence-based psychosocial/psychiatric rehabilitation interventions in rehabilitation counseling practice. [R]
- M. Apply evidence-based vocational interventions in rehabilitation counseling practice.[R]
- N. Apply or facilitate evidence-based counseling/therapy for clients with clinical diagnoses (e.g., depression, anxiety, PTSD). [C]
- O. Apply or facilitate evidence-based counseling/therapy for clients with substance use disorders. [C]
- P. Understand theories and techniques of clinical supervision. [C]
- Q. Recognize and utilize evidence and research-based practices. [C]

3.	Grou	o and	Family	Counse	lina
----	------	-------	---------------	--------	------

4.7%

- A. Understand family counseling theories. [C]
- B. Incorporate family counseling practices and interventions. [C]
- C. Understand group counseling theories. [C]
- D. Incorporate group counseling practices and interventions. [C]

4. Crisis and Trauma Counseling and Interventions

6.0%

- A. Conduct assessment of client risk and development of a safety plan. [C]
- B. Provide effective rehabilitation counseling services for individuals with polytrauma injuries. [C]
- C. Understand the impact of crises, disasters, and other trauma-causing events on people with disabilities. [C]
- D. Use principles of crisis intervention for people with disabilities during crises, disasters, and other trauma-causing events. [C]
- E. Understand the emergency management system within rehabilitation agencies and in the community. [C]

5. Medical and Psychosocial Aspects of Chronic Illness and Disability

9.3%

- A. Evaluate the psychosocial and cultural impact of disability. [R]
 - a) Individual adjustment to disability
 - b) Human sexuality and disability issues
 - c) Family or support system adjustment to disability
- B. Understand medical terminology. [R]
- C. Apply knowledge of the medical aspects and implications of various disabilities. [R]
 - a) Mental Functions
 - b) Sensory Functions and Pain
 - c) Voice and Speech Functions and Structures
 - d) Cardiovascular, Hematological, Immunological, and Respiratory Functions and Structures
 - e) Digestive, Metabolic, and Endocrine Systems and Structures

- f) Genitourinary and Reproductive Functions and Structures
- g) Neuromusculoskeletal and Movement Related Functions and Structures
- h) Skin and Related Functions and Structures
- i) Nervous System Structures
- j) Eye, Ear, and Related Structures
- k) Learning and Applying Knowledge
- I) Interpersonal Interactions and Relationships
- m) General Tasks and Demands NEW
- n) Communication NEW
- o) Mobility NEW
- p) Self-Care NEW
- q) Domestic-Life NEW
- r) Major Life Areas NEW
- s) Community, Social, and Civic Life NEW
- D. Review the implications of medications as they apply to individuals with disabilities. [R]
- E. Address environmental and attitudinal barriers for individuals with disabilities. [R]

6. Assessment/Evaluation, Occupational Analysis, and Service Implementation

10.7%

A. Understand the vocational implications of functional limitations associated with disabilities. [R]

- a) Mental Functions
- b) Sensory Functions and Pain
- c) Voice and Speech Functions and Structures
- d) Cardiovascular, Hematological, Immunological, and Respiratory Functions and Structures
- e) Digestive, Metabolic, and Endocrine Systems and Structures
- f) Genitourinary and Reproductive Functions and Structures
- g) Neuromusculoskeletal and Movement Related Functions and Structures
- h) Skin and Related Functions and Structures
- i) Nervous System Structures
- j) Eye, Ear, and Related Structures
- k) Learning and Applying Knowledge
- I) Interpersonal Interactions and Relationships
- m) General Tasks and Demands NEW
- n) Communication NEW
- o) Mobility NEW
- p) Self-Care NEW
- q) Domestic-Life NEW
- r) Major Life Areas NEW

s) Community, Social, and Civic Life NEW

B. Access and review resources for the assessment process. [C] NEW

- a) Review of case materials for pertinent information NEW
- b) Diagnostic and Statistical Manual of Mental Disorders (DSM)
- c) International Classification of Diseases (ICD) NEW

C. Refer or conduct informal assessments. [C] NEW

- a) Interviews and initial assessments NEW
- b) Situational assessment/job shadowing/community-based work assessment

D. Refer or conduct formal assessments. [C] NEW

- a) Achievement Tests
- b) Aptitude Tests
- c) Intelligence Tests
- d) Interest Inventories
- e) Career, Work Values, and Maturity Tests
- f) Personality Tests
- g) Psychological/Neuropsychological Tests
- h) Adaptive Behavior/Behavioral Observations
- i) Mental Health Screeners NEW
- j) Learning Styles Tests
- k) Ecological/Functional Capacity Evaluations
- I) Dexterity Tests
- m) Work Samples
- n) Non-Cognitive Tests NEW
- E. Refer or perform Transferable Skills Analysis (e.g., VDARE). [C] NEW
- F. Interpret assessment results for rehabilitation planning purposes. [C]
- G. Perform job analysis. [R]
- H. Assess ergonomic, job accommodation, and assistive technology needs. [R]
- I. Advise on job modification and restructuring techniques. [R]
- J. Perform labor market analysis. [R] NEW
 - a) Occupational and labor market information (e.g., DOT, ORS, O*NET, OOH, other national, regional, or local government labor market sources, private salary surveys)
 - b) Methods and techniques used to conduct labor market surveys
- K. Use computer-based job matching systems.[C]

- A. Understand, identify, and apply career development and job placement strategies. [R]
- B. Understand, identify, and apply job readiness, seeking, and retention skills. [C]
- C. Understand the unique needs of specialized populations in relation to job development and placement. [R] NEW
- D. Understand techniques to develop and retain relationships with employers to assist with job development and placement. [R]
- E. Understand and identify evidence-based employment models and services tailored to individuals with significant disabilities and/or barriers to competitive
 - a. employment. [R]
 - i. Supported Employment (SE)
 - ii. Customized Employment (CE)
 - iii. Individual Placement and Support (IPS)
 - iv. Self-Employment
- F. Understand the unique needs of individuals with a dual diagnosis in the workplace and apply appropriate strategies. [R]
- G. Understand and apply theories of career development and work adjustment. [C]
 - a. Trait-Factor/Person Environment Fit theories.
 - b. Personality theories
 - c. Developmental/Self-Concept theories
 - d. Sociological/Self-Concept theories
 - e. Behavioral theories
- H. Understand, identify, and facilitate the appropriate use of work conditioning or work hardening resources and strategies. [R]
- I. Understand the effective use of and risks of social media as a networking tool. [C]

8. Business Engagement

7.6%

- A. Assist employers with job accommodations for their employees with disabilities (e.g., assistive technology, workspace modifications). [R]
- B. Provide consultation services and training to employers / businesses concerning disability concepts, best practices, and applicable laws (e.g., hiring, return to work, reasonable accommodations, and retention). [R]

- C. Partner with employers/businesses to address needs and concerns related to hiring and retaining individuals with disabilities. [R]
- D. Understand, communicate, and apply business-focused strategies, techniques, and terminology to improve employment outcomes for individuals with disabilities.
 - a. [R]
- E. Work with employers to develop pipelines for employing individuals with disabilities using work-based learning and training methods. [R] NEW
 - a) Apprenticeships NEW
 - b) Internships NEW
 - c) On-the-job training (OJT) NEW
- F. Understand the dual customer role (e.g., employer and person with a disability). [R] NEW

9. Community Resources and Partnerships

8.0%

- A. Understand the programs and services available for specific and underserved populations. [R]
- B. Understand Social Security programs, benefits, work incentives, and disincentives. [R]
- C. Possess knowledge of funding sources and community resources for rehabilitation services. [R]
- D. Provide or facilitate skills development and independent living services. [R]
- E. Provide or facilitate financial literacy training. [R]
- F. Understand and refer to services available through client advocacy programs (e.g., Client Assistance Program [CAP], legal aid). [R]
- G. Refer to and partner with one-stop career centers and
 - a. other community stakeholders. [R]
- H. Understand and facilitate life care planning and life care planning services. [R]
- I. Advocate with community partners for full community inclusion for people with disabilities. [R] NEW
- J. Provide or facilitate counseling on the impact of employment on community services and benefits. [R] NEW

10).Ca	se Ma	anad	eme	nt

10.0%

- A. Understand and apply the case management process. [C]
 - a) Case finding
 - b) Planning
 - c) Service coordination
 - d) Referral to and utilization of other disciplines
 - e) Advocacy
- B. Complete case recording and documentation. [C]
- C. Understand and apply negotiation, mediation, and conflict resolution strategies.[C]
- D. Understand and apply the principles of caseload management. [C]
- E. Understand and address institutional and social barriers that impede access, equity, and success for clients. [C]
- F. Apply techniques for working with individuals with limited English proficiency or varied communication methods. [C]
- G. Understand and apply principles, models, and documentation formats for biopsychosocial case conceptualization and treatment planning. [C]

11. Health Care and Disability Management

7.3%

- A. Understand and provide appropriate medical intervention resources. [R]
- B. Understand the diversity of healthcare benefits, delivery systems, and the impact of services on individuals with disabilities. [R]
- C. Understand and collaborate with health promotion and
 - a. wellness providers regarding strategies for people with chronic illness and disability. [R]
- D. Understand different insurance programs (e.g., Medicare, Medicaid, group and individual, short-and
 - a. long-term disability, personal injury no-fault liability). [R]
- E. Understand and apply disability prevention and management strategies. [R]
- F. Understand the variability of workers' compensation laws and practices. [R] NEW

12. Research, Methodology, and Performance Management

5.3%

A. Understandstatistics and psychometric concepts related to measurement. [C]

- a. Validity
- b. Reliability/ Standard Error of Measurement
- c. Norms
- d. Scaled and Standard Scores
- e. Percentiles
- f. Distributions/Bell Curve
- g. Norm- and Criterion-Referenced Measurement NEW
- B. Understand research methods (e.g., surveys, case studies) and data analysis. [C]

C. Assess research literature related to evidence - based practice. [C]

- a. Research databases (e.g., EBSCO, PsycINFO, MEDLINE)
- b. Ability to select between various levels of evidence-based research (e.g., subject matter experts to the systematic reviews and meta-analyses goldstandard) NEW

D. Comprehend concepts and principles of organizational development and stakeholder management. [C]

- a) Effective management of services and programs, including areas such as administration, finance, benefit systems, and
- b) accountability
- c) Strategic planning techniques and budget planning
- E. Understand program evaluation procedures for assessing the effectiveness of rehabilitation services and outcomes. [R]

Appendix C

Rehabilitation Counseling Program Course Offering Schedule (beginning Fall 2022 semester)

CAMPUS/BLENDED Course Offerings					
Fall	Spring	Summer			
RCPL 503	RCPL 505	RCPL 520			
RCPL 510	RCPL 512	RCPL 502 (requires residency week)			
RCP 525 (hybrid)	RCP 501 (hybrid)	RCP 631 (hybrid)			
RCP 530 (hybrid)	RCP 599	Elective			
Fall (2 nd year)	Spring (2 nd year)				
RCPL 513	RCPL 540				
RCPL 514	RCPL 619				
RCP 550 (hybrid)	RCP 630				
RCP 698	RCP 699				
ONLINE Course Offerings					
Fall	Spring	Summer			
RCPL 503	RCPL 505	RCPL 502			
RCPL 510	RCPL 512	RCPL 530			
		RCPL 550			
Fall (2 nd year)	Spring (2 nd year)	Summer (2 nd year)			
RCPL 501	RCPL 520	RCPL 599			
RCPL 514	RCPL 525	RCPL 630			
		Elective			
Fall (3 rd year)	Spring (3 rd year)				
RCPL 513	RCPL 540				
RCPL 631	RCPL 540 RCPL 619				
	RCPL 699				
I RCPL 69X					
RCPL 698	Rei E 077				
RCPL 698	Ref E 077				

NOTE: **RCPL** designates the course as online and asynchronous; **RCP** designates the course as oncampus with some (if not all) synchronous components; **Hybrid** means the course will have some synchronous and some asynchronous components; **ALL RCPL** classes offered in the summer will require students to attend the residency week (begins the 3rd Monday in June)

Appendix D

Key Performance Indicators

<u>Assignment</u>	<u>Course</u>	Core/Specialty	Area Measured
Ethical Case Study	501: Substance Use Disorders & Addiction	Specialty	Ethical practice
Journal Article Critique	502: Rehabilitation Research Seminar	CORE	Research comprehension
Average Weekly Quiz Grade	503: Foundations of the Rehabilitation Counseling Profession	CORE	Basic comprehension of weekly content
Assessments	505: Introduction to Assessment and Appraisal of Individual with Disabilities	CORE	Giving assessments
Comprehensive Final Exam	510: Introduction to Medical Rehabilitation	Specialty	Medical Aspects of Disability
Theories of Career Development Paper	512: Occupational Analysis, Career Development Theory and Job Placement Strategies	CORE	Personal & Professional approach to career counseling
Comprehensive Vocational Evaluation	513: Vocational Evaluation and Career Planning	Specialty	Write a professional vocational evaluation report
Worker Compensation Paper	514: Private Sector and Forensic Rehabilitation	Specialty	Workers Comp laws and process
Treatment Objectives	520: Principles of Psychiatric Disability	Specialty	Treatment objectives and planning
Personal Interview, Analysis, and Report	525: Human Growth, Development, and Disability across the Lifespan	CORE	Understanding the personal experience of disability
Personal Theoretical Approach	530: Introduction to Counseling Theory, Practice, and the Profession	CORE	Theoretical approach
Group Presentation	550: Principles of Family and Group Process	CORE	Group Counseling Skill
Technology Knowledge, Use, & Planning Interview and presentation	619: The Effective Use of Technology in Rehabilitation Counseling Practice	Specialty	Identification of appropriate assistive technology
Why People Change	630: Advanced Counseling	Specialty	Counseling attitudes and beliefs
Personal Cultural Growth Papers	631: Cultural Responsiveness in Counseling	CORE	Cultural Awareness

Appendix E



SCHOOL OF GRADUATE STUDIES

Rehabilitation Counseling Program

Counselor Disposition Assessment Tool

STUDENT:	COURSE:
INSTRUCTOR:	DATE:
Doing so helps faculty Importantly, students relationships with other	o measure student's professional dispositions at multiple points in the program. and students to identify areas of strength and opportunities for growth. should conceptualize <i>disposition</i> as external representation (through behavior and ers) of one's internal mind. Faculty are thus asked to evaluate knowledge, skills, stereotypes based on student behavior, relationships, and class contributions.
The following numeric	c scale will be used to evaluate student disposition:
Dangerous (1):	The student demonstrates poor knowledge, skills, attitudes, beliefs, stereotypes, of behaviors toward others and/or is not receptive to feedback about these concerns or has failed to show any improvement related to these concerns throughout the semester
Developing (2):	The student shows room for improvement related to possessing knowledge, skills attitudes, beliefs, stereotypes, and behaviors consistent with professional rehabilitation counseling. Students in this category are responsive to feedback about areas for growth and/or demonstrate improvement during the semester
Adequate (3):	The student regularly demonstrates knowledge, skills, attitudes, beliefs, stereotypes, and behaviors reflective of beginning professional rehabilitation counselors. The expectation is that students will have attained this level by the end of their Internship
Exemplary (4):	The student consistently demonstrates knowledge, skills, attitudes, beliefs, stereotypes, and behaviors in excess of what would be considered reasonable for a rehabilitation counselor at the beginning of their career.
Comments:	Individuals completing this form should provide comments (with as much

specificity as possible) for ALL (1) scores and (2) scores happening after 599

Comments: 2) The student's ability to set and maintain appropriate professional and personal Boundaries is: Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments: 3) The student's ability to understand Culture and the intersectionality of culture and counseling Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments: 4) The student's Openness to feedback and supervision is:	1) The student's Ethical Behavior (knowledge about, use of, alignment with the CRCC Code of Professional Ethics) is:						
2) The student's ability to set and maintain appropriate professional and personal Boundaries is: Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments: 3) The student's ability to understand Culture and the intersectionality of culture and counseling Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments: 4) The student's Openness to feedback and supervision is: Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments:	Dangerous (1)	Developing (2)	Adequate (3)	Exemplary (4)			
Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments: 3) The student's ability to understand Culture and the intersectionality of culture and counseling Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments: 4) The student's Openness to feedback and supervision is: Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments:							
Comments: 3) The student's ability to understand Culture and the intersectionality of culture and counseling Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments: 4) The student's Openness to feedback and supervision is: Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments:	2) The student's ability	y to set and maintain appr	ropriate professional and p	ersonal Boundaries 1s:			
3) The student's ability to understand Culture and the intersectionality of culture and counseling Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments: 4) The student's Openness to feedback and supervision is: Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments:	Dangerous (1)	Developing (2)	Adequate (3)	Exemplary (4)			
Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments: 4) The student's Openness to feedback and supervision is: Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments:	Comments:						
Comments: 4) The student's Openness to feedback and supervision is: Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments:	3) The student's abilit	ry to understand Culture a	and the intersectionality of	culture and counseling is:			
4) The student's Openness to feedback and supervision is: Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments:	Dangerous (1)	Developing (2)	Adequate (3)	Exemplary (4)			
Comments:		nness to feedback and su	pervision is:				
	Dangerous (1)	Developing (2)	Adequate (3)	Exemplary (4)			
Dangerous (1) Developing (2) Adequate (3) Exemplary (4)	Dangerous (1)	Developing (2)	Adequate (3)	Exemplary (4)			
Comments: 6) The student's ability to Adapt and be Flexible is:							
Dangerous (1) Developing (2) Adequate (3) Exemplary (4) Comments:		Developing (2)	Adequate (3)	Exemplary (4)			