

IUPUI Reviewer Form
With IUPUC responses (indented and in red)

Documents Reviewed: IUPU-Columbus: Master of Arts in Counseling Psychology

Summary of Proposal:

1. Are the goals clear and achievable?

The goals are clear and reasonable. At IUPUI, we offer a masters in clinical psychology and some of our applicants have desired an LMHC following training. Our program is not geared to address all of these requirements. Having a masters program at IUPUC directly addressing LMHC needs would be a good addition to our university system.

I have some concerns about the feasibility as currently described. Is it feasible to recruit two PhD psychologists as faculty members in the first year, and expect them each to teach 5-6 courses/year as well as provide clinical work and supervision in the proposed clinic? Someone will need to oversee practicum/internship placements as well. I am not familiar with the average teaching load at IUPUC, but this would be extremely high, particularly for new faculty in our department.

Each new full-time (FT) faculty member would teach 4 courses per year + 1 practicum or internship. This is not a high teaching load for IUPUC faculty. We would also use part-time (PT) faculty as needed, and in some case, faculty currently in the undergraduate program; for example, Kathy Compton can teach counseling courses and Gary Felsten can teach psychopharmacology. Staff support will be provided to help coordinate practicum and internship placements.

Year 1 includes 9 content courses, 1 practicum and 1 internship. Two FT faculty will cover all but 1 course, which would be taught by a PT faculty member. Year 2 and beyond includes 17 content courses, 4 internships, and 1 practicum. When we add a third FT faculty member in year 2, FT faculty will cover 12 content courses and 3 internships/practica. We will supplement FT teaching with PT faculty covering 5 content courses and 2 internships and/or practica. When we reach steady state in year 4, FT faculty will be able to cover all but 1 content course and 1 internship or practicum, which will be taught by PT faculty. However, we may continue to have PT faculty teach several courses to allow FT faculty to fulfill other responsibilities, such as clinical work. We are fortunate to have many appropriately credentialed individuals in our region who would be interested in teaching in this graduate program at IUPUC.

Not much detail is provided on the practicum and internship requirements, but these will be critical to professional development for the students. One concern may be the requirement of 5 courses in the 1st semester, followed by 3 courses and one day/week practicum experience. If students are not receiving assistantship or fellowship funding, will they be able to afford to complete this program? If they have to work part time, will they have time to devote to the program?

An important feature of our program is having two-year and three-year tracks. We expect most students to enroll in the three-year program, which will have lighter loads each semester, allowing students to work for pay if necessary. The two-year track will be for individuals who have the time and financial resources to complete the requirements in two years.

Practicum placements in the community are great opportunities, but also take a large amount of time to identify, evaluate, and maintain over time. Who in the program will oversee this? Are there really going to be enough placements and supervisors available for this? The connection with Centerstone appears strong, but other solid relationships with community providers will be important (with letters of support). For example, by year 3, there will be approximately 49 students who will require practicum and/or internship opportunities. The proposal says that 100 hours of face-to-face supervision will occur in internship and practicum settings. These seems extremely high and given the timing of the clinical opportunities, it is unclear how and when this will occur (e.g., often supervision is 1 hour a week).

The IUPUC Psychology Program has a long history of placing undergraduate students in practicum settings, and a great many of our graduates now work in these settings. We have established relationships with a large number of potential practicum and internship sites. These include community mental health centers, such as Centerstone (with a coverage area of about 10 counties in South Central Indiana), Adult and Child Mental Health in Johnson County, and Life Springs in Jefferson and Scott Counties. Other potential sites include Family Services, a non-profit counseling organization with various community programs; Columbus Regional Hospital, Schneck Medical Center, and Johnson Memorial Hospital; private organizations that provide counseling, including home based services, group homes, and court ordered services for families and people with addiction issues; Columbus Behavioral Center, a residential treatment center for children and adolescents; and Volunteers in Medicine, a free medical clinic that also offers mental health services. Upon program approval, we will solicit letters of support from potential practicum and internship sites. A staff member will assist in identifying placement opportunities, help recruit external supervisors, and provide support to faculty who will evaluate the placements. Please note that the described hours for the practicum, internships, and face-to-face supervision are cited directly from Indiana Code 25-23.6-8.5-3 for mental health counselors.

2. Is the program academically sound?

Yes. The curriculum looks strong. The clinical practicum and internship opportunities could be very rich, but need more details on the settings and specific types of opportunities that will be available.

There may be some disconnect between program objectives as stated and courses as currently described. For example, the objectives refer to theories of personality, interpersonal relationships, and psychopathology. Some of the courses are related, but as currently described, may not address these areas in detail.

Course titles are tentative and selected to conform with content areas required by the State of Indiana for licensure and with Council for Accreditation of Counseling & Related Educational Programs (CACREP) guidelines for accreditation. IUPUC will hire the first full-time faculty member in advance of program implementation to serve as Program Director. That person will work with existing faculty and staff to align course content and descriptions with program objectives.

3. Are faculty resources available to offer this certificate without undercutting other key missions of the unit?

This is unclear as currently written. New faculty will be recruited, but as mentioned above, the teaching load sounds very high. The majority of current faculty are junior – will they be able to take on the additional load? It would be helpful to have a specific plan for who will teach each course, and a fall-back plan if new faculty are not both in place by fall 2012.

Teaching loads will be typical for IUPUC faculty. Current junior faculty will not be involved in the graduate program and will not have increased loads. The campus will begin the faculty recruitment process sufficiently early to assure appropriately prepared faculty are available to teach required courses in fall 2012. The Program Director will determine scheduling and who will teach which courses. We will have a back-up plan in place utilizing part-time faculty to teach some courses if necessary.

4. Is there overlap, either real or potential, with any other unit that could harm the program or be exploited to help the program?

There is overlap with the masters program in clinical psychology at IUPUI. Although some of our courses are listed, the overlap is not described in section C1c. Some of the courses are already being offered at IUPUI as mentioned, but it is not clear if their students would be expected to enroll in Indianapolis course, or if IUPUC will also be offering the courses directly. Also, some of the other new courses sound similar to existing IUPUI courses (e.g., assessment, research/program evaluation), and so it is not clear how these differ.

We plan to offer all required courses at IUPUC and do not expect our students to complete courses at IUPUI. However, credit will be awarded to students who complete equivalent courses at IUPUI. Application instructions call for listing existing courses. Since some of the courses we will need are currently offered at IUPUI and in the IU list of courses, we listed them as existing, but explained that they are not currently offered at IUPUC.

5. My recommendation, comments/concerns regarding this proposal...

I believe this program could be a useful addition to the university offerings, and could address a need in our state for training targeting the LMHC. The current faculty and adjuncts are appropriate, and if new faculty with clinical expertise are recruited, the full cadre of faculty will be available.

More details addressing feasibility concerns described above would be helpful, and greater clarification of how this program relates to the program at IUPUI. Expansion of clinical sites in the community, and a plan for the in-house counseling center will be important.

Some smaller concerns:

- Admission criteria of 3.0 GPA may be low given research on undergraduate grade inflation. **We will consider a higher standard.**
- The program may want to specify the maximum length of time a student can be considered actively enrolled. **We will evaluate this.**
- The program may consider forming an explicit steering committee to help oversee program development (if this is not already the case), with community partners involved. **This is an excellent suggestion and we will move on this as soon as approvals are received.**
- Outline a plan for achieving certification. The program is slated to begin in 2012, however, the in-house clinic will not be ready then (which is stated as a requirement for certification). Having a detailed plan and timeline for seeking certification will be important, and may help recruit faculty as well. **We plan to have the clinic in operation by the beginning of the second year. The Program Director and faculty will create a timeline for achieving accreditation from CACREP.**
- Support staff are not in the budget until year 2, however, the program will need assistance with developing program materials, recruitment, responding to applicants, screening, interviewing, etc. Having an identified support person will be helpful even in the first year. **As stated above in #2, IUPUC will hire the first full-time faculty member in advance of fall 2012 to serve as Program Director. The Director will coordinate all processes needed to initiate the program. Vice chancellor Wafa has indicated that IUPUC is committed to providing the support staff needed to assist program faculty in development of materials and processes necessary to initiate and maintain the program.**