

CNS6051: Diagnostics of Psychopathology and Treatment

Instructor/Personal Pronouns	Quarter
Instructor Email	Class Days and Times
Instructor Phone	Course Location
Office Location	Office Hours
Technical Support: 866-848-5515	

COURSE DESCRIPTION This course provides advanced training in the assessment, diagnosis, and treatment of serious psychopathology as depicted in the standard nomenclature of the DSM-IV-TR and subsequent revisions/editions. Students will focus on the descriptions, etiology, and major diagnostic categories in order to effectively utilize Axis I through Axis V diagnostic dimensions to develop appropriate treatment options. In addition, students will learn how to utilize the International Classification of Diseases (ICD) and Clinical Modification System according to the latest version. Upon completing the course, students will have an understanding of the techniques practitioners use in the diagnosis and treatment of psychopathology.

PREREQUISITES None

COREQUISITES None

CREDIT HOURS 4.5

COURSE MATERIALS

Technological Requirements

Each student in the Clinical Mental Health Counseling program must have access to a reliable computer, internet connection and the required computer software and hardware. Cell phones and tablets are not acceptable computer or laptop replacements.

Requirements include:

- Computer with Windows 7 or higher or Mac OSX 10.7 or higher
- Microsoft Office 365 (available to all South University students)
- Adobe Acrobat Reader
- Browsers
 - For Windows users, Internet Explorer (latest 2 releases), Mozilla Firefox or Google Chrome
 - For Mac users, Apple Safari (2 latest releases), Mozilla Firefox or Google Chrome
- Virtual classes require access to a camera and microphone.

Required Textbooks

American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders text revised (5th ed.)*. American Psychiatric Publishing, Inc.

Barlow, D. H. (2021) *Clinical handbook of psychological disorders: Step-by-step treatment manual*. (6th edition). New York: Guilford Press. (ISBN: 978-1462513260)

Berghuis, D. J., Pastoor, K., & Jr., A.E. J. (2021). *The Adult Psychotherapy Progress Notes Planner* (6th ed.). Wiley Professional Development (P&T).

Jongsma, A. E. (2021). *The complete adult psychotherapy treatment planner* (6th edition). Hoboken, J: John Wiley. (ISBN: 9780471763468)

Required Articles

Suggested/Supplemental Readings

Required Materials

GRADING SCALE

- A = 90 – 100
- B = 80 – 89
- C = 70 – 79
- D = 60 – 69
- F = 69 or below

PROGRAM OVERVIEW/MISSION

The South University Master of Arts degree program in Clinical Mental Health Counseling is intended to meet the local and regional need for qualified counselors. The Master of Arts in Clinical Mental Health Counseling is designed to provide advanced and broad training for South University graduate students regarding theories, principles, and dynamic applications in the field. Students develop the skills necessary to engage in effective assessment and treatment practices, achieve competence for ethical, legal, and professional issues, and understand the significance and utility of research to the field. Faculty members are dedicated to maintaining high teaching standards, developing intellectual curiosity, advancing critical thinking, and engaging in service to the University, community, and profession.

Please Note: Successful completion of the MA CMHC program meets the requirements for licensure application in the state where the program is offered. Students considering relocation to another state are encouraged to review the licensure requirements for that state(s) in order to compare required coursework. Completion of the program does not guarantee licensure or certification.

Students enrolled in the Savannah virtual program are aligned to the licensure standards in Georgia.

PROGRAM STUDENT LEARNING OUTCOMES (PSLO)s

PSLO 1	Professional Counseling Orientation and Ethical Practice: Demonstrate knowledge and application of all aspects of professional functioning, to include ethical standards, legal implications, advocacy and social justice, counselor roles, and professional credentialing.
PSLO 2	Social and Cultural Diversity: Demonstrate the ability to apply multicultural research and core theory to issues and relationships in the context of culturally competent counseling.

PSLO 3	Human Growth and Development Through the Lifespan: Apply research and core theory to the needs of diverse individuals across the lifespan, to include atypical personality and neurological development, addictive disorders, family and social relationships, and crisis response.
PSLO4	Lifestyle and Career Development: Demonstrate implementation of research and core theory related to the processes of decision-making in career development and planning in the context of the psychology of work.
PSLO5	Counseling and the Helping Relationship: Demonstrate knowledge and skill application of the major theories of change, consultation practices, diagnostic impressions, and evidence-based interventions to a diverse clientele for the delivery of effective and ethical treatment.
PSLO6	Group Dynamics and Group Work: Apply culturally appropriate group skills, techniques, and theory-based interventions in the context of group counseling dynamics while exploring effective facilitation styles.
PSLO7	Assessment and Appraisal: Analyze historical and current testing and assessment methods for implementing ethical and accurate appraisal of diverse clients by individual or group methods.
PSLO8	Research and Program Evaluation: Apply needs assessment, program evaluation, and research methods to ethical and effective practice and to add to the body of literature in the counseling profession.

**COURSE LEARNING OUTCOMES ALIGNMENT TO
PROGRAM STUDENT LEARNING OUTCOMES**

CLO1	Demonstrate an understanding of psychiatric diagnosis.	PSLO – 3, 5, 7
CLO2	Demonstrate an understanding of the operational definition of psychopathology.	PSLO – 3, 5, 7
CLO3	Demonstrate knowledge of the etiology of the major DSM-5 diagnostic categories.	PSLO – 3, 5, 7
CLO4	Demonstrate an ability to effectively discuss the DSM-5 classification of mental disorders and the criteria for diagnosing these disorders.	PSLO – 3, 5, 7
CLO5	Apply the DSM-5 classification system in determining the appropriate diagnosis of clinical cases.	PSLO – 3, 5, 7

CLO6	Demonstrate substantial formation of knowledge about psychopathology to apply in formulating appropriate and effective diagnostic evaluations and treatment.	PSLO – 2, 3, 5, 7
CLO7	Demonstrate knowledge of ethical and legal considerations when diagnosing.	PSLO - 1, 2, 3, 5, 7
CLO8	Analyze diagnosing issues with such factors as culture, ethnicity, age, gender, sexual orientation, attitudes, beliefs, religious differences, and other unique characteristics.	PSLO - 1, 2, 3, 5, 7
CLO9	Analyze the etiology, the diagnostics process and nomenclature, treatment, referral, and prevention of mental and emotional disorders.	PSLO – 3, 5, 7
CLO10	Demonstrate an understanding of the principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.	PSLO – 1, 3, 5, 7
CLO11	Demonstrate knowledge of how living in a multicultural society affects clients seeking clinical mental health counseling services.	PSLO – 2, 3, 5, 7
CLO12	Demonstrate an understanding of how current literature that outlines theories, approaches, strategies, and techniques shown to be effective when working with specific populations of clients with mental and emotional disorders.	PSLO – 2, 3, 5, 7, 8
CLO13	Analyze evidenced-based treatments and basic strategies for evaluating counseling outcomes in clinical mental health counseling.	PSLO – 2, 3, 5, 7
CLO14	Demonstrate an ability to utilize the International Classification of Diseases and Clinical Modification system according to the latest version.	PSLO – 3, 7

CACREP STANDARDS/ASSIGNMENTS

CAREP STANDARD	PSLO	CHAPTER/ READING	ASSIGNMENT
SECTION 2.F: COUNSELING CURRICULUM			
<u>3) HUMAN GROWTH AND DEVELOPMENT</u>			
c. theories of normal and abnormal personality development	PSLO 3, 5	Ch. 1-19 (Barlow)	Reading, Final Exam , Case Conceptualization , Role Plays, Movie Character Analysis and Presentation
<u>5) COUNSELING AND HELPING RELATIONSHIPS</u>			
h. Developmentally relevant counseling treatment or intervention plans.	PSLO 3	Ch. 1-19 (Barlow) Jongsma, et al.	Reading, Final Exam, Case Conceptualization
i. Development of measurable outcomes for clients.	PSLO 5, 7	Jongsma, et al.	Reading, Final Exam, Case Conceptualization
<u>7) ASSESSMENT AND TESTING</u>			
j. Use of environmental assessments and systematic behavioral observations.	PSLO 7	Ch. 1-19 Barlow	Reading, Final Exam, Case Conceptualization
k. Use of system checklists, and personality and psychological testing.	PSLO 7	Ch. 1-19, Barlow	Reading, Final Exam, Case Conceptualization
<u>8) RESEARCH AND PROGRAM EVALUATION</u>			
b. Identification of evidence-based counseling practices.	PSLO 5	Ch. 1-19 Barlow	Reading, Final Exam, Case Conceptualization, Role Plays
<i>Section 5.C: CLINICAL MENTAL HEALTH COUNSELING STANDARDS</i>			
<u>1) FOUNDATIONS</u>			

c. Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning	PSLO 5	Jongsma, et al. Berghuis, et al.	Reading, Final Exam, Case Conceptualization
d. Neurobiological and medical foundation and etiology of addiction and co-occurring disorders	PSLO 3	Ch. 14-15, Barlow	Reading, Final Exam, Case Conceptualization
2) CONTEXTUAL DIMENSIONS			
b. Etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders	PSLO 3	Ch. 1-19, Barlow	Reading, Final Exam, Case Conceptualization
d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the <i>Diagnostic and Statistical Manual of Mental Disorders (DSM)</i> and the International Classification of Diseases (ICD)	PSLO 1,2,3,5,7	DSM-V-TR	Reading, Final Exam, Case Conceptualization, Role Plays, Movie Character Analysis and Presentation
e. Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders	PSLO 5, 7	Ch. 14, 15 Barlow	Reading, Final Exam, Case Conceptualization
g. Impact of biological and neurological mechanisms on mental health	PSLO 3	Ch. 1-19 Barlow	Reading, Final Exam, Case Conceptualization
3) PRACTICE			
a. Intake interview, MSE, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management	PSLO 3, 7	Ch. 1-19 Barlow Jongsma, et al.	Reading, Final Exam, Case Conceptualization
b. Techniques and interventions for prevention and treatment of a broad range of mental health issues	PSLO 3	Ch. 1-19 Barlow	Reading, Final Exam, Case Conceptualization

GRADUATION REQUIREMENTS

In order to graduate from the Master of Arts in Clinical Mental Health Counseling program, a student must:

1. Evidence a cumulative GPA of 3.0 (on a 4.0 scale) or greater for all academic work required for the degree.
2. Successfully pass the Comprehensive Examination.
3. Successfully remediate or repeat all courses in which a grade lower than a "C" was earned.
4. Successfully meet all conditions of a remediation plan(s) as provided by the Progress & Promotions Policy during periods of probation or suspension.

Note: Students with a CGPA that falls below 3.0 in any given quarter will need to earn a CGPA of 3.0 or higher in the next quarter to avoid receiving an automatic dismissal notification from the registrar. Students receiving a dismissal notification can appeal for reinstatement in the program. Please see the South University Academic Catalog for appeal processes.

COURSE REQUIREMENTS

COURSE ASSIGNMENTS AND SCHEDULE

Week	Topic(s)	Required Readings	Activities & Assessments
1	Introduction to the DSM-V-TR Role, risks, & benefits of diagnosis Conducting a biopsychosocial history WHODAS 2.0 and Cultural Formulation Mental status assessment/exam (MSE)	Kress et al. article DSM-5-TR	
2	Assessments in counseling Treatment plans Evidence-based treatment Differential diagnosis Ethical and Cultural Considerations	Barlow: pgs. 1-48; 114-148 Jongsma (treatment planner): pgs. 1-8 DSM-5-TR	

	V codes/Z codes Anxiety Disorders Roleplaying Exercise		
3	Anxiety Disorders continued Obsessive-Compulsive and Related Disorders Feeding and Eating Disorders Roleplaying Exercise	Barlow: pgs. 155-198; 207-232; 670-700 DSM-5-TR	
4	Depressive Disorders Bipolar and Related Disorders Roleplaying Exercise	Barlow: pgs. 275-322; 332-389; 462-496 DSM-5-TR	Treatment Plan 1
5	Disorders Involving Impairment in Awareness of Reality: Psychotic Disorders (including Disorders of Dissociation) Roleplaying Exercise	Barlow: pgs. 502-529 DSM-5-TR	Treatment Plan 1
6	Substance Use Disorders and Dual Diagnosis Trauma-and Stressor-Related Disorders	Barlow: pgs. 62-107; 617-637 DSM-5-TR	
7	Disorders of Behavior and Impulse Control Neurodevelopmental Disorders	Kazdin et al. article Fullen et al. article DSM-5-TR	Biopsychosocial History and Treatment Plan
8	Presentations Catch-up on missed material		
9	Presentations Personality Disorders Roleplaying Exercise	Barlow: pgs. 394-455 DSM-5-TR	
10	Presentations Disorders in Which Physical and Psychological Factors	Barlow: pgs. 640-665 DSM-5-TR	Movie Character Analysis Paper Due

	(Sleep, Sexual, Somatic, and Neurocognitive Disorders) Paraphilias Review for final examination		
11	Final Examination		

**Note: Changes in the course schedule may be made at the discretion of the instructor to accommodate time and material constraints.*

ASSIGNMENT WEIGHT

Assignment	Points	Weight %	Due Date
Class Attendance and Participation	100 points	10%	
Roleplaying Exercises	100 points (20 points each)	10%	
Treatment Plans	200 points	10%	
Biopsychosocial History and Treatment Plan KPI	200 points	15%	
PowerPoint Presentation	100 points	15%	
Movie Character Analysis	150 points	20%	
Final Exam (in class) KPI	150 points	20%	
Total	850 points	100%	

ASSIGNMENT DESCRIPTIONS

Class Participation & Attendance

This course is structured so you will learn not only from the textbook and readings, but also from one another. Becoming a professional is a process, so it is important to establish a professional attitude and demeanor. As graduate students, you are responsible for active and considerate participation in class discussions. To facilitate the process, the class participation grade will be based on your (a) contribution to discussions, (b) contribution to the learning experience of your classmates; (c) attending class and being on time, (d) active participation in all in-class activities.

Role-Playing Exercises

Students will role play a counselor and client using a variety of mental disorders on designated weeks. Students will need to be prepared in advance of each class to portray an actual client so that another counselor may attempt to make

an appropriate diagnosis and design a treatment plan. Please make sure that you are consistent to the diagnosis and provide sufficient information in your responses for the counselor to make the diagnosis. You do not have to be obvious in your responses. Your ability to imitate a real-life client and your ability to be a professional interviewer will demonstrate your understanding of diagnostic criteria and interviewing skills. Moreover, your ability to write a professional report will demonstrate your ability to analyze, evaluate, and synthesize client data into an accurate diagnosis, develop appropriate **treatment goals, apply relevant treatment strategies, and write a formal report.**

Biopsychosocial History and Treatment Plan - KPI

In pairs, classmates will complete an interview as a counselor and client. Each student is responsible to complete a biopsychosocial history report and create a treatment plan for his or her peer-client. Specific guidelines include:

Write a biopsychosocial history. Be sure to use professional, clinical language. Use the Cultural Formulation interview in the DSM-V-TR and questions created in class to guide interview process. Students complete a WHODAS 2.0 and present the scores along with diagnostic impression. Presenting issues need not be deficiency based. You may, for example, write a presenting problem around maximizing self-care or personal relationships. This document should be typed, single-spaced, and presented in a way consistent with the format presented in the textbook. Although duplicating sentence content or structure is not appropriate for other academic assignments, it may be appropriate in clinical writing. Attach the WHODAS 2.0 assessment and your interview questions to final product.

*Note: If the diagnosis was possibly preventable, include a brief section that indicates prevention strategies that could have been employed to mediate or eliminate the current diagnosis. For example, if depressive symptoms were noticed in adolescence, but caregivers ignored the symptoms and they eventually became severe instead of mild, prevention strategies like psychoeducation for caregivers from a school counselor or PCP could be recommended.

Mental Status Exam. Complete a mental status examination based on one period of time. Use the MSE assessment handout to determine what to write, and practice clinical writing skills by including a narrative within the biopsychosocial history. You may (but need not) attach the MSE handout in support of your narrative.

Treatment Plan. Write a treatment plan. Use the treatment plan template available on Brightspace. Treatment plans are collaborative in nature representing the client's goals within the framework of the counselor's theoretical orientation. Treatment plans need to include one goal and two-four objectives. Remember to use the resources from class to guide the development of the presenting problems, objectives, and treatment recommendations. Students should offer an evidence-based rationale for treatment

plan choices by integrating information from at least five scholarly sources in a narrative justification of the treatment plan (include a reference page in APA format).

A few tips for success:

- Keep writing clear and concise. Do not worry about fancy transitions or explanation. Use professional language. Can your peer read the document without feeling judged?
- Although you should follow the extended format, you need not include every single detail of history. Try to include only the most important aspects.
- What is not present is as important as what is present (e.g., if no history of mental illness, then state no history of mental illness), in MSE, e.g., no delusions, no hallucinations, no suicidal or homicidal ideation.
- For “diagnostic impression” section do the following: Include 799.9 Diagnosis Deferred or Z03.89 No Diagnosis. Include score from WHODAS 2.0 with narrative explanation. Include statement, “Client is an appropriate candidate for counseling services.”
- Include a title page with this assignment (which protects the exposure of your peer’s information on the following pages).

Movie Character Analysis Paper

Select a movie through which a character (i.e., child, adolescent, or adult) will be assessed according to the DSM-5-TR. Choose a movie where the disorder is not highly evident by the content of the movie (for example, do not use the movie Beautiful Mind because it is clearly on schizophrenia).

The following are guidelines for the Movie Character Analysis Paper:

1. Introduction (no abstract needed)
2. Summary of the Movie
3. Analysis of the character and proposed diagnosis – consider what etiological factors were present in the movie and provide a brief overview of the diagnosis
4. Propose a treatment for the character whether or not it is portrayed in the film
5. Conclusion

The paper should be between 7-10 pages (not including title page or reference page). Include references from **at least 4 peer reviewed professional publications** published within the past ten years from the current counseling, social work, psychology, psychiatry, nursing, or closely related literatures that adds to our understanding of the complexity of this disorder, its treatment, or the people who struggle with it. **Use the current APA 7th formatting throughout the paper.**

Movie Character Presentation

The following are guidelines for the PowerPoint Presentation:

1. In a 20–30-minute presentation, briefly describe the disorder in your own voice. *Do not regurgitate the information from the DSM-5.*
2. Discuss the character's signs, symptoms, & level of impairment
3. Tell the class how this disorder might affect an individual in their everyday life.
4. Demonstrate how you would be able to provide mental health support if they were your client.

Comprehensive Final Examination

This exam may include any and all assigned textbook material and lecture/discussion content covered throughout the quarter. The exams will be a mixture of multiple choice, True/False, and short answer. The exams are closed book, the only resource you may use is your brain.

*Note to instructors: Include questions about prevention strategies on the final exam.

ATTENDANCE

ATTENDANCE POLICY

University Attendance Policy

Note: Students receiving military education benefits should also see the VA Attendance Policy below.

South University maintains a course attendance policy to support the academic achievement of its students. Students are expected to attend all scheduled class, laboratory, and examination periods each week. Students, whether present or absent from class, are responsible for knowing all that is announced, discussed, and/or lectured upon in class or laboratory, as well as for mastering all assigned reading. In addition, students are responsible for submitting on time all assignments and examinations as required in the class.

Students are expected to attend all scheduled activities that are part of the class, including those activities scheduled during class

time and those scheduled outside of class time. An individual campus-based or online clinical programs may have specific policies (which in some cases may be more stringent than the general attendance requirements) as to the effect of attendance on class meetings, course assignments, off-campus activities, internships/externships, clinical and practicum activities, and other program requirements.

If the student misses 14 consecutive calendar days in a course, the student will be withdrawn from the course, unless the student provides official communication (communication directly from the student (letter or email) and the student provides supporting documentation for review) regarding extenuating circumstances (as outlined below) prior to violating the 14 consecutive days. The student must also provide the date the student will return into the current course. If the student fails to return on the scheduled return date the student will be withdrawn from the institution.

Note: Attendance policies for courses involving experiential learning, such as clinical fieldwork, rotations, practicum/internship and externship, are published in the programmatic handbooks (AA, CMHC, PA, Pharm, and PTA programs) and course syllabi.

Veterans Affairs Attendance Policy

Students who receive Veteran Affairs (VA) educational benefits must understand VA benefits, including tuition and fees, the monthly housing allowance, book stipend, and Yellow Ribbon benefits are based in whole or in part on the number of credit hours certified. The school is required to monitor and report enrollment status to the VA. Adjustments in enrollment will likely affect payment of VA benefits. The school will report enrollment as follows:

- VA Students who officially withdraw, the actual last date of attendance (LDA) must be determined and reported for each course to the VA.
- VA students who are administratively withdrawn or stops attending without officially withdrawing, the actual last date of attendance (LDA) must be determined and reported for each course to the VA.

- VA students who complete a course and receive a “NCF” grade, the school will determine and report the actual last date of attendance for each course to the VA.

It is **strongly recommended** you attend every class session as true learning only occurs when one is actively engaged in learning within the classroom setting. Please see the university attendance policy in the Academic Catalog for more information.

TARDINESS

Please arrive **on time**. Being late is disruptive and distracting to both your instructor and peers.

VIRTUAL/ONLINE NETIQUETTE

If a student is required to engage in a virtual session it must be private and free of distractions. Considerations should include the use of headphones, being alone in your meeting space, deidentifying client information, protecting written material from being read by others outside the class, and not discussing cases outside of class with colleagues, family members, friends, and classmates.

With the growth of telemental health services, students should be mindful of the importance of professional dress and demeanor during virtual instruction. All learning experiences must be treated "as if" you are in a live classroom or seated across from a future client. Therefore, if you would not wear it, eat it, or do it during a session, please refrain from doing so during your online class.

Finally, any interactions with colleagues online either via virtual meetings or written correspondence (e.g., emails, discussions) should be composed in a manner that is both professional and respectful. If you have any questions or concerns regarding this requirement, please discuss with the instructor during office hours.

Full Audio-Visual Functionality: It is the student’s responsibility to have functioning audio and visual for the entirety of the class. You should check with IT Helpdesk support prior if necessary.

ACADEMIC INTEGRITY

ACADEMIC INTEGRITY

South University defines academic integrity as the complete, accurate, specific, and truthful representation of authorship, origin of ideas, mastery of material, and data, including access to and authorized use of resources. Students must maintain academic integrity in all activities, including observing and reporting academic integrity violations committed by others.

VIOLATIONS OF ACADEMIC INTEGRITY

- Cheating. Receiving unauthorized assistance on tests/examinations or other academic work. *Contract Cheating* is a form of cheating in which students get another to complete their coursework (paid or unpaid). Cheating also includes *collusion* in which students participate in unauthorized conspiring with another for work offered as credit.
- Plagiarism. The practice of taking someone else's work or ideas and passing them off as your own work or ideas. *Self-plagiarism* is a form of plagiarism in which students submit an identical or very similar work without receiving permission from the current faculty member prior to submission.
- Fabrication. Inventing or falsifying information or data.
- Sabotage. The willful attempt to hinder another student's work.
- Academic Misconduct. Includes the alteration of grades, involvement in the acquisition or distribution of un-administered tests, or failure to report integrity violations committed by others.

For emphasis, students are required to complete their assignments on their own unless involved in a team/group project with fellow students. This includes written papers, take home exams, and projects associated with the completion of required coursework. Students needing assistance with completing assignments, written work, or other areas associated with the completion of coursework should contact the instructor or the Academic Success Center.

All written work must be original; use minimal direct quotes; be sourced from credible sources including academic peer-reviewed journals; and must follow APA 7 guidelines.

ARTIFICIAL INTELLIGENCE POLICY

In this course, any element of a class assignment must be original and fully prepared by the student. The use of generative artificial intelligence (AI) tools (ex: chat GPT) for any part of your work will be treated as plagiarism and an honor code violation. At any time, the instructor reserves the right to request evidence that student work is authentic and original. They may do this in one or more of

the following ways: requesting submission of first drafts of your work or drafts containing Track Changes showing the edits you made to your assignment as you completed it; an oral interview; and/or an additional written response. The format(s) of inquiry is up to the instructor's discretion and the professor will determine the method and timeline for the assessment of original work.

Instructors may require students to submit assignments via Brightspace using Turnitin. Assignments submitted outside of the instructor's submission policy will result in a zero. If you are struggling to upload the assignment, you can receive assistance from the campus Academic Success Coordinator or the instructor.

If you have questions about this policy, please contact the instructor.

ELECTRONIC RECORDINGS

Because class discussions and experiential activities often involve disclosure of a personal nature and because discussions often involve client cases, recording of classes (audio or video) is prohibited unless approved by South University Disability Services as a reasonable accommodation for students utilizing disability services. Taking pictures of exams or quizzes is also prohibited.

Students should refer to the South University Academic Integrity Policy in the Academic Catalog for all information regarding the Integrity Policy, Classification of Violations and Possible Penalties.

STUDENT SERVICES

DISABILITY SERVICES

South University Disability Services ensures students with disabilities equal access to the College's educational programs, opportunities and activities. Qualified students requesting reasonable and appropriate accommodations receive services to eliminate physical, programmatic and attitudinal barriers that may arise with disabilities.

Students who seek reasonable accommodations should notify the Dean of Student Affairs at their campus location. Students will be asked to submit medical documentation of the need for accommodation to the campus Dean of Student Affairs. Classroom accommodations are not retroactive, but are effective only upon the student sharing approved accommodations with the instructor. Therefore, students are encouraged to request accommodations as early as during the Admissions process to allow for time to gather necessary documentation. If you have further questions, contact the **Dean of Student Affairs, insert name, email and phone number at the ^^^^^^^ campus.**

*Complaints will be handled in accordance with the school's Internal Grievance Procedure for Complaints of Discrimination and Harassment included in this section of the Academic Catalog.

CMHC DIVERSITY, INCLUSION, EQUITY, AND JUSTICE STATEMENT

The Clinical Mental Health Counseling program at South University attests to the common belief that diversity, equity, and inclusion are the essential foundation for cultivating a safe and productive learning environment. Instructors are expected to promote diversity, equity, and inclusion throughout all areas of student engagement. This includes, but is not limited to:

- a. representation of diversity in lived experience across course design;
- b. implementation of multicultural competencies throughout learning goals and objectives;
- c. modeling a practice of cultural humility;
- d. supporting student efforts toward empowerment and advocacy;
- e. facilitating open and respectful student discourse;
- f. building counselor efficacy from a strengths-based approach;
- g. and, preparing students to identify and navigate cultural differences and systemic barriers in the field;
- h. increase awareness of contemporary social justice issues;
- i. and develop skills for engaging in social justice and advocacy.

To ensure fidelity, students are highly encouraged to provide feedback regarding how they perceive these initiatives are being maintained within their course of study through end of course evaluations. As a result, it is the hope of the CMHC program that students may find the freedom to conceptualize their professional identities from a clinical lens that is both authentic to their own experiences, as well as, inclusive of the lives of others.

HEALTH AND WELLNESS

Students of South University have access to our student assistance program, Be Well at South University, for counseling needs 24 hours a day, 7 days per week. You can access the service by calling **833-434-1217** or via application, **Telehealth**, or **in-person** counseling sessions with a local provider. These are available to you regardless of location, and no insurance is necessary.

The Wellness Hub includes articles and videos on mental health and wellness topics, including mental and emotional health, fitness and nutrition, academic performance, stress management, healthy relationships, and more. To access the Wellness Hub, go to bewellatsouth.com or download the CampusWell app at campuswell.com/get-the-app; the program is easy and confidential.

Be Well at South University Program licensed counselors are available to assist you with balancing school with work and other responsibilities, short-term counseling services, life, and career coaching, medical advocacy, and personal concierge services. Please contact the Dean of Student Affairs with any questions about this service.

WRITING SUPPORT

Students may utilize Tutor.com to help with writing support by submitting papers for review ahead of submitting them in class. It is important to plan ahead if you utilize this service as it may take up to 24 hours turnaround time.

<https://leo.tutor.com/Student/Index>

LIBRARY SERVICES

South University provides library facilities for its students at each of the main campus locations. Virtual support services are provided for all campuses, including branches. The libraries are easily accessible and house print collections consisting of general and reference books, periodicals, and other non-print media to support students in their studies. Campus library facilities offer students group and quiet study spaces. Campus libraries post their operating hours.

Electronic resources are available to all students, faculty, and staff through the Library's web site. Digital resources include e-books, journals, and video content. Electronic resources are available 24 hours a day/365 day a year. Virtual support services include email, text, and chat services. Chat hours are posted on the Library home page.

EQUAL OPPORTUNITY EDUCATION POLICY

South University, **campus** does not discriminate or harass on the basis of race, color, national origin, sex, gender, sexual orientation, disability, age, religion, genetic marker, or any other characteristic protected by state, local or federal law, in our programs and

activities. South University provides reasonable accommodations to qualified individuals with disabilities. South University will not retaliate against persons bringing forward allegations of harassment or discrimination. The campus Dean of Student Affairs has been designated to handle inquiries and coordinate the campus' compliance efforts regarding the Non-Discrimination policy.

SAMPLE

Appendix A
Biopsychosocial Grading Rubric

	A-range	B-range	C-range	D/F range	Comments
Biopsychosocial history interview and assessment 5.C.3.a, 2.F.7.k, 5.C.2.g	Interview contained relevant primary and follow-up questions; helper was able to discuss the purpose and findings from the WHODAS 2.0 and integrate them into the report using appropriate clinical language.	Interview contained relevant primary questions but missed some important follow-up questions; helper discussed WHODAS 2.0 score, however, did not integrate them into the report in a meaningful way.	Interview had primary questions but lacked relevant follow-up questions; helper did not adequately report WHODAS 2.0 score and it was disjointed from the rest of the report (see instructor comments)	Interview questions had significant problems and did not illicit clinically relevant information; no follow-up questions or they were irrelevant; WHODAS 2.0 score not reported (see instructor comments)	
Mental Status Exam 5.C.3.a, 2.F.7.j	MSE was completed by the helper and integrated seamlessly into the biopsychosocial report using appropriate clinical descriptors along with results that were consistent with other information	MSE was completed and reported in the biopsychosocial report; however, the writing lacked some appropriate clinical descriptors and not all elements of the MSE were integrated into the report.	MSE was incomplete and did not use clinical descriptors (ex: describes client's mood as <i>unpleasant</i> instead of <i>dysphoric</i>); MSE was disjointed in the report (see instructor comments).	MSE lacked sufficient detail, clinical descriptors, and was not appropriately integrated into the report (see instructor comments).	

	obtained in the session.				
Treatment Plan 2.F.5.h, 2.F.5.i, 5.C.2.b	<p>Treatment plan includes a presenting problem with a clear goal and 2-4 objectives that are all aligned with each other (SMART). Treatment plan is written from a distinct theoretical orientation (helper) and evidence-based practices that will be used to carry out the treatment plan are explained and supported by scholarly research.</p>	<p>Treatment plan has a presenting problem, goal, and objectives; however, the language is lacking SMART detail. Treatment plan is loosely aligned with a theoretical orientation. Contains some evidence-based practices that will be used to carry out the treatment plan and some scholarly research to support the proposed treatment plan.</p>	<p>Treatment plan is lacking in at least two key areas: Treatment plan is missing one of the following: presenting problem, goal, 2-4 objectives.</p> <p>Treatment plan is missing one of the following: lack of clear theoretical orientation, evidence-based practices that will be used to carry out the treatment plan, scholarly research to support the proposed treatment plan (see instructor comments for details).</p>	<p>Treatment plan is missing more than two key areas: presenting problem, goal, objectives, clear theoretical orientation, evidence-based practices, scholarly research to support the proposed treatment plan (see instructor comments for additional details).</p>	
Proper use of diagnostic criteria and classifications	Used most current DSM diagnostic criteria and classifications	Used most current DSM diagnostic criteria and classifications	Reported symptomology, but lacked DSM language to	Lack of relevant symptomology; did not use the DSM	

in forming clinical impressions 5.C.2.d,	in reporting client symptomology; diagnostic criteria integrated into treatment plan effectively.	in reporting client symptomology, however, symptomology did not lead to the most accurate diagnosis.	describe the client's presenting problem; diagnosis not accurate (see instructor comments).	appropriately; no diagnosis or diagnosis grossly inaccurate (see instructor comments).	
Clinical/Academic Writing 5.C.1.c	Used 5 or more scholarly sources to support evidence-based practices used in treatment plan; cited sources using appropriate APA formatting; clinical writing was clear, precise, and could be understood by a range of mental health and other medical professionals.	Used 4 scholarly sources to support evidence-based practices used in treatment plan; cited sources, but had errors in APA formatting; clinical writing was sufficient and has room for improvement (see instructor comments).	Used 2-3 scholarly sources to support evidence-based practices used in treatment plan; several problems with citations and APA formatting; clinical writing had significant errors (see instructor comments).	Used 0-1 scholarly sources to support evidence-based practices used in treatment plan; lack of APA formatting throughout the report; did not use clinical writing that is appropriate for other mental health or medical professionals (see instructor comments).	
Total Points					

Comments: