I. TITLE: Clinical Diagnosis & Treatment Planning

II. COURSE DESCRIPTION AND PREREQUISITE(S): Course is designed to prepare students in the knowledge and understanding of human behavior, diagnosis, and methods in assessment. Students will gain knowledge and skill in conducting mental status exams, intake assessments, biopsychosocial histories, and risk assessments. 

Prerequisite: permission of instructor.

III. COURSE OBJECTIVES: 
Class activities will be centered on the attainment of the course objectives listed below. Following each objective, and enclosed in parentheses, are numbers that reference the Council for Accreditation of Counseling & Related Education Programs (CACREP) Standards addressed by that objective. Upon successful completion of this class, students will be able to

A. Understand diagnostic criteria of psychiatric disorders and methodology utilized in the Diagnostic and Statistical Manual of Mental Disorders 5 and IV –TR (Section II: G.5.d.; Section III CMHC: C2, E2, G1, G2, K2, K4, L1, L2, L3; SC: D3, G1, G2);
B. Demonstrate a basic knowledge and understanding of writing psychological evaluations using mental status exam and psychosocial history when formulating a treatment plan for clients (Section II: G.5.c., G.7.b.; Section III CMHC: C2, C7, D2, G1, G2, H1, H2, K1, K2, K3, L1; SC: D3, D4);
C. recognize basic psychopharmacological interventions for psychological disorders and demonstrate knowledge of commonly used psychotropic medications (Section II, G.5.c, G.7.b.; Section III CMHC: C2, G2, G3);
D. identify ethical and legal issues regarding diagnosis (Section II: G.1.j.; Section III CMHC: D2; Section III SC: A2);
E. conduct research on best practices/evidenced based treatments (Section II: G.7.b., G.8.e.; Section III CMHC: K1, K2, K4; SC: D3);
F. understand the wellness/developmental model as distinct from medical model (Section II: G.3.d., G.5.a.; Section III CMHC: C2, G1);
G. understand and demonstrate principles of risk assessment and identify the impacts of crisis, disaster, and other trauma causing events (Section II G.3.d., G.7.b., G.5.c.; Section III CMHC D6, G1, L1; SC: D4);
H. demonstrate correct diagnoses clients’ mental disorders in classroom case studies and related course assignments (Section II: G.5.c.; Section III CMHC: G1, G2, H1, H2, H3, K1, K2, L1, L2; SC: D3, D4, G2);
I. be familiar with the age, race, cultural and gender assessment issues (Section II: G.3.b., G.3.d., G.3.f., G.7.b.; Section III CMHC: D2, E2, G1, K4; SC: D3, D4); and
J. demonstrate the ability to create treatment plans consistent with DSM 5 and DSM-IV,TR criteria (Section II: G.5.c.; Section III CMHC: G1, H2 ; Section III SC: G2).

The CAEP/EPSB theme of diversity will be addressed via students engaging in experiential activities, including risk assessments and mental status exams that promote interaction with individuals and populations with whom they would not normally interact. Furthermore, this course promotes reflective decision making as students increase their self-awareness and understanding of how one’s biases and judgements can affect the counseling relationship and the diagnosis of mental health disorders.

The MSU counseling faculty recognize diversity and embrace a cross-cultural approach in support of the worth, dignity, potential, and uniqueness of people within their social and cultural contexts (ACA 2014 Code of Ethics Preamble).

IV. CONTENT OUTLINE:
A. Introduction to Diagnosis
B. Treatment Planning and Case Documentation
C. Mental Status Exam
D. Psychosocial History and Intake Assessments
E. Risk Assessments
F. Competency-Based Assessments
G. Multi axial system
V. INSTRUCTIONAL ACTIVITIES:
   A. Small group and whole class discussions
   B. Assigned readings
   C. Experiential activities
   D. Digital media
   E. Research
   F. Case study applications
   G. Demonstration of risk assessments, intake assessments and mental status examinations

VI. FIELD, CLINICAL, AND/OR LABORATORY EXPERIENCES:
   Risk assessment, intake interviews and mental status examination interviews

VII. TEXT AND RESOURCES:
   A. Required Texts:

   B. Other Required Selections:
      Instructor assigned readings (e.g., journal articles)

   C. References:

VIII. EVALUATION AND GRADING PROCEDURES:
   A. Course Requirements:
      Diagnosis Belief Paper 50 points
      Assessment Demonstration
      Intake Assessment 20 points
      Mental Status Examination 20 points
      Biopsychosocial Assessment 20 points
      Risk Assessment Demonstration 30 points
      Case Study One 50 points
      Case Study Two 50 points
Revised August 13, 2015

Beck Depression Inventory 20 points
Beck Anxiety Inventory 20 points
Symptom Checklist 90-R 20 points
Pop Culture Paper 100 points
Attendance and Participation 100 points
Total 500 points

B. Grading Scale:
A = 91-100  91%
B = 81- 90  81%
C = 71- 80  71%

1) Diagnosis Belief Paper (50 points). (CACREP Section II: G.1.b., G.1.j., G.3.b, Section III CMHC: D6; SC: D4)
Write a 4-6 page paper, not including title page, abstract, and references, describing your personal beliefs about the purpose, roles, benefits and biases, and dangers of diagnosis. In addition, describe any ethical issues that may arise when diagnosing clients. Describe how you believe the client’s developmental level may impact diagnosis. Lastly describe your thoughts/concerns regarding conducting risk assessments. This assignment will be completed in APA (sixth edition) style. Due 6/1/15

2) Risk Assessment Role Plays (30 points) (CACREP Section II G.5.c., Section III CMHC: D6; SC: D4). Student will demonstrate via video recording, conducting a risk/suicide assessment. Students will upload the video to Canvas along with an overview of the session and decision regarding the level of care needed for the individual. My preference is that you role play with classmates. In order to get the most out of this assignment, it will be helpful to ask your partner to play someone that is struggling with thoughts of harm to self or suicide. You may use family/friends, however, you must be sure to inform them that this is just practice and you are not in the role of a counselor. Due 6/3/15

3) Case Study Assignments (Two at 50 points each, total, 100 points). (CACREP Section II: G.1.j.; Section III CMHC: A2, C2, C4, C7, D1, D2, D6, G1, G3, H1, J2, K1, K2, K3, K4, L1, L2, SC: D4) Write a 5-6 page paper, not including title page, abstract, references, or treatment plan, addressing: Due 6/8/15 and 6/17/15

1. Justify why this individual would be diagnosed with having a mental illness.
2. Identify the specific disorder and explain why.
3. Why would this be considered this particular diagnosis and not something else?
4. Describe any co-occurring issues and/or medical issues that might mimic a diagnosis.
5. Conduct a risk assessment. Describe how you would assess for suicidal or homicidal ideation.
6. Address any cultural considerations that may be necessary to assess in relation to diagnosis
7. Identify any ethical considerations that need to be addressed.
8. Complete all 5 axes, in to the DSM 5 diagnosis.
9. Identify the assessment instruments utilized to assess client case study (MSE, biopsychosocial assessment, symptom inventories etc.)
10. Determine if there would be a need for any psychopharmacological medications and discuss why or why not.
11. Is there a need for referral and if so to where?
12. Complete a 30 day treatment plan identify measurable outcomes for interventions and treatment goals.

This assignment will be completed in APA (sixth edition) style.

4) Intake Interview, Mental Status Evaluation, and Biopsychosocial Assessment Demonstration (60 points total, 20 points each) (CACREP Section II: G.5.c., G.7.b.; Section III CMHC G2, H2). Students will demonstrate via video recording, conducting a biopsychosocial assessment, intake interview, and mental status examination. Videos will be uploaded to Canvas along with the completed intake interview, mental status exam and biopsychosocial reports. My preference is that you role play these with classmates. You can ask a friend or family member to participate, but you must be clear that this is not a real assessment. Sample forms will be provided in class. For the intake assessment, you will record a shortened intake (about 30 minutes). Follow the blueprints that will be provided in class and on Canvas. You will then write-up the report form the assessment (I recommend using the format provided though you do not have to). You will post the video and the report. For the Mental Status exam, you will complete this after you do the intake. You do not have to record this as you will complete the form based on what was observed in the session. You will upload the completed form. For the Biopsychosocial, you will record the session with a peer and upload both the video and the form. Due 6/10/15
5) **Beck Depression Inventory, Beck Anxiety Inventory, Symptom Checklist 90- Revised (20 points each, 60 total).** Students will complete the above mentioned assessments. Assessments will be conducted using yourself as the subject or a fictional character. You are NOT permitted to perform the assessments on anyone else. These will be discussed in class. **Due 6/22/15**

6) **Pop Culture Paper (100 points)** (CACREP Section II: G.1.j.; Section III CMHC: A2, C2, C7, D1, D2, D6, G1, G3, H1, J2, K1, K2, K3, K4, L1, L2, SC: D4) Write a 4 page paper on a pop culture icon, celebrity, prominent newsworthy figure that you believe may warrant a clinical diagnosis. You may be as creative as you like (i.e. provide additional informational and observational data based on a clinical interview you conducted with this person). The paper must include a diagnosis, signs and symptoms of the diagnosis, developmental concerns, and a sound rational supporting the diagnosis. Include a description of the risk assessment you would complete with this client and the level of risk he/she is currently at. In addition, include any ethical/cultural concerns that might be present and a treatment plan for working with this client. **Due 6/24/15**

This assignment will be completed in APA (sixth edition) style.

7) **Attendance & Participation (100 points):** Given the interactive nature of this course, attendance is necessary and mandatory in order to develop knowledge and skills to be ethical and effective professional counselors. This course adheres to the attendance policy published in the current MSU Graduate Bulletin. CNS 676 is a didactic as well as experiential and skills-based course. Experiential means in-class participation. Participation includes, but not limited to, application of the learned concepts and techniques, observing others, giving and receiving feedback, discussing, role playing, analyzing case studies, and sharing experiences. Attendance is paramount and sessions cannot be substituted by papers or reading.

In Class Participation: Students are expected to attend all classes and participate in class activities and discussions. If a student is in the borderline between two grades at the end of the semester, attendance and participation in class activities can be the reason for the instructor to give the student the higher grade.

Additional notes on assignments:
A. For each paper be ready to have a class discussion about the subject matter.
B. Concerning the assignments, this syllabus is subject to change throughout the course of the semester. Updated versions of the syllabus will be posted on Canvas.
C. All papers will be written in APA format. If you have questions about formatting, refer to the sample and power point instructions.
D. All assignments will be posted to Canvas, unless otherwise stated in the syllabus or in class. When uploaded assignments save in the following format pender_rebecca_nameofassignment.
E. **Policy on late assignments:** Due to the fast pace nature of this summer course, late assignments are not accepted. Please see me if you are struggling.

IX. **ATTENDANCE POLICY:**
Students are expected to adhere to the MSU Attendance Policy outlined in the current MSU Bulletin. Additionally, students are expected to be on time for class. Tardiness and/or missed classes can result in a drop in letter grade. Cell phones will need to be off. If you anticipate a situation that requires your immediate attention, put your phone to vibrate.

X. **ACADEMIC HONESTY POLICY:**
Murray State University takes seriously its moral and educational obligation to maintain high standards of academic honesty and ethical behavior. Instructors are expected to evaluate students’ academic achievements accurately, as well as ascertain that work submitted by students is authentic and the result of their own efforts, and consistent with established academic standards. Students are obligated to respect and abide by the basic standards of personal and professional integrity.

**Violations of Academic Honesty include:**
- **Cheating** - Intentionally using or attempting to use unauthorized information such as books, notes, study aids, or other electronic, online, or digital devices in any academic exercise; as well as unauthorized communication of information by any means to or from others during any academic exercise.
**Fabrication and Falsification** - Intentional alteration or invention of any information or citation in an academic exercise. Falsification involves changing information whereas fabrication involves inventing or counterfeiting information.

**Multiple Submission** - The submission of substantial portions of the same academic work, including oral reports, for credit more than once without authorization from the instructor.

**Plagiarism** - Intentionally or knowingly representing the words, ideas, creative work, or data of someone else as one’s own in any academic exercise, without due and proper acknowledgement.

Instructors should outline their expectations that may go beyond the scope of this policy at the beginning of each course and identify such expectations and restrictions in the course syllabus. When an instructor receives evidence, either directly or indirectly, of academic dishonesty, he or she should investigate the instance. The faculty member should then take appropriate disciplinary action.

Disciplinary action may include, but is not limited to the following:

1. Requiring the student(s) to repeat the exercise or do additional related exercise(s).
2. Lowering the grade or failing the student(s) on the particular exercise(s) involved.
3. Lowering the grade or failing the student(s) in the course.

If the disciplinary action results in the awarding of a grade of E in the course, the student(s) may not drop the course.

Faculty reserve the right to invalidate any exercise or other evaluative measures if substantial evidence exists that the integrity of the exercise has been compromised. Faculty also reserve the right to document in the course syllabi further academic honesty policy elements related to the individual disciplines.

A student may appeal the decision of the faculty member with the department chair in writing within five working days. Note: If, at any point in this process, the student alleges that actions have taken place that may be in violation of the Murray State University Non-Discrimination Statement, this process must be suspended and the matter be directed to the Office of Institutional Diversity, Equity and Access. Any appeal will be forwarded to the appropriate university committee as determined by the Provost.

XI. **NON-DISCRIMINATION POLICY STATEMENT:**

**Policy Statement**

Murray State University endorses the intent of all federal and state laws created to prohibit discrimination. Murray State University does not discriminate on the basis of race, color, national origin, gender, sexual orientation, religion, age, veteran status, or disability in employment, admissions, or the provision of services and provides, upon request, reasonable accommodation including auxiliary aids and services necessary to afford individuals with disabilities equal access to participate in all programs and activities. For more information, contact the Executive Director of Institutional Diversity, Equity and Access, 103 Wells Hall, (270) 809-3155 (voice), (270) 809-3361 (TDD).

**Students with Disabilities**

Students requiring special assistance due to a disability should visit the Office of Student Disability Services immediately for assistance with accommodations. For more information, students should contact the Office of Student Disability Services, 423 Wells Hall, Murray, KY 42071. 270-809-2018 (voice) 270-809-5889(TDD).
## CACREP Counseling Program Specifics for CNS 676

<table>
<thead>
<tr>
<th>Clinical Mental Health Counseling Objectives</th>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Foundations</strong> A2</td>
<td>Understands the history, philosophy, and trends in clinical mental health counseling</td>
</tr>
<tr>
<td><strong>Prevention &amp; Intervention</strong> C2</td>
<td>Knows the etiology, the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders.</td>
</tr>
<tr>
<td><strong>Prevention &amp; Intervention</strong> C7</td>
<td>Knows the principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.</td>
</tr>
<tr>
<td><strong>Prevention &amp; Intervention</strong> C9</td>
<td>Understands professional issues relevant to the practice of clinical mental health counseling.</td>
</tr>
<tr>
<td><strong>Prevention &amp; Intervention</strong> D1</td>
<td>Uses the principles and practices of diagnosis, treatment, referral, and prevention of mental and emotional disorders to initiate, maintain, and terminate counseling.</td>
</tr>
<tr>
<td><strong>Prevention &amp; Intervention</strong> D2</td>
<td>Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders.</td>
</tr>
<tr>
<td><strong>Counseling, Prevention, &amp; Intervention</strong> D6</td>
<td>Demonstrates the ability to use procedures for assessing and managing suicide risk.</td>
</tr>
<tr>
<td><strong>Assessment</strong> G1</td>
<td>Knows the principles and models of assessment, case conceptualization, theories of human development, and concepts of normalcy and psychopathology leading to diagnoses and appropriate counseling treatment plans.</td>
</tr>
<tr>
<td><strong>Assessment</strong> G2</td>
<td>Understands various models and approaches to clinical evaluation and their appropriate uses, including diagnostic interviews, mental status examinations, symptom inventories, and psychoeducational and personality assessments.</td>
</tr>
<tr>
<td><strong>Assessment</strong> G3</td>
<td>Understands basic classifications, indications, and contraindications of commonly prescribed psychopharmacological medications so that appropriate referrals can be made for medication evaluations and so that the side effects of such medications can be identified.</td>
</tr>
<tr>
<td><strong>Assessment</strong> H1</td>
<td>Selects appropriate comprehensive assessment interventions to assist in diagnosis and treatment planning, with an awareness of cultural bias in the implementation and interpretation of assessment protocols.</td>
</tr>
<tr>
<td><strong>Assessment</strong> H2</td>
<td>Demonstrates skill in conducting an intake interview, a mental status evaluation, a biopsychosocial history, a mental health history, and a psychological assessment for treatment planning and caseload management.</td>
</tr>
<tr>
<td><strong>Diagnosis</strong> K1</td>
<td>Knows the principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the <em>Diagnostic and Statistical Manual of Mental Disorders (DSM)</em>.</td>
</tr>
</tbody>
</table>
Diagnosis K2
Understands the established diagnostic criteria for mental and emotional disorders, and describes treatment modalities and placement criteria within the continuum of care.

Readings, Discussion, Case Studies, Pop Culture Paper

Diagnosis K3
Knows the impact of co-occurring substance use disorders on medical and psychological disorders.

Readings, Discussion, Case Studies, Pop Culture Paper

Diagnosis K4
Understands the relevance and potential biases of commonly used diagnostic tools with multicultural populations.

Readings, Discussion, Case Studies, Pop Culture Paper

Diagnosis K5
Understands appropriate use of diagnosis during a crisis, disaster, or other trauma-causing event.

Readings, Discussion, Case Studies

Diagnosis L1
Demonstrates appropriate use of diagnostic tools, including the current edition of the DSM, to describe the symptoms and clinical presentation of clients with mental and emotional impairments.

Readings, Discussion, Case Studies, Pop Culture Paper

Diagnosis L2
Is able to conceptualize an accurate multi-axial diagnosis of disorders presented by a client and discuss the differential diagnosis with collaborating professionals.

Readings, Discussion, Case Studies, Pop Culture Paper

Diagnosis L3
Differentiates between diagnosis and developmentally appropriate reactions during crises, disasters, and other trauma-causing events.

Readings, Discussion, Case Studies, Pop Culture Paper

School Counseling Objectives

Assessment

Foundations A2
Understands ethical and legal considerations specifically related to the practice of school counseling.

Readings, Discussion, DSM 5 Paper

Prevention & Intervention D3
Designs and implements prevention and intervention plans related to the effects of (a) atypical growth and development, (b) health and wellness, (c) language, (d) ability level, (e) multicultural issues, and (f) factors of resiliency on student learning and development.

Readings, Discussion, Case Studies, Pop Culture Paper

Prevention & Intervention D4
Demonstrates the ability to use procedures for assessing and managing suicide risk.

Readings, Discussion, Case Studies, Pop Culture Paper, Risk Assessment Role Plays, Diagnosis Belief Paper

Assessment G1
Understands the influence of multiple factors (e.g., abuse, violence, eating disorders, attention deficit hyperactivity disorder, childhood depression) that may affect the personal, social, and academic functioning of students.

Readings, Discussion, Case Studies, Pop Culture Paper

Assessment G2
Knows signs and symptoms of substance abuse in children and adolescents, as well as the signs and symptoms of living in a home where substance abuse occurs.

Readings, Discussion, Case Studies, Pop Culture Paper

COURSE SCHEDULE AND ASSIGNMENTS

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Assignments/ Readings Due</th>
<th>CACREP Standard(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mental Status Examination, Psychosocial History Risk Assessment</td>
<td></td>
<td>Section III CMHC: C2, D6, E2, G1, G2, H2, K2, K4, L1, L2, L3; SC: D3, D4, G1, G2</td>
</tr>
<tr>
<td>Date</td>
<td>Topic</td>
<td>Reading Material</td>
<td>Assignments</td>
</tr>
<tr>
<td>----------</td>
<td>----------------------------------------------------------------------</td>
<td>-----------------------------------</td>
<td>----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>6/1/15</td>
<td>Introduction to Competency-Based Assessment</td>
<td>Dailey et al: Chapter 1 and 2</td>
<td>Diagnosis Belief Paper Due Section II: G.1.b., G.1.j., G.3.b., G.5.d.; Section III CMHC: A2, C2, C9, D6, E2, G1, G2, K2, K4, L1, L2, L3; SC: A2, D3, D4, G1, G2</td>
</tr>
<tr>
<td>6/3/15</td>
<td>Neurodevelopmental Disorders, Elimination Disorders, Gender Dysphoria, Impulse Control and Conduct Disorders</td>
<td>Dailey et al.: Chapter 12 (Neurodevelopmental section), 8, 10, and Chapter 11 (elimination disorder section)</td>
<td>Section II: G.5.d.; Section III CMHC: C2, D6, E2, G1, G2, K2, K4, L1, L2, L3; SC: D3, D4, G1, G2</td>
</tr>
<tr>
<td>6/8/15</td>
<td>Neurocognitive Disorders, Substance Related and Addictive Disorders</td>
<td>Dailey et al: Chapters 12 (Neurocognitive section), and 9</td>
<td>Section II: G.5.d.; Section III CMHC: C2, E2, G1, G2, K2, K4, L1, L2, L3; SC: D3, G1, G2</td>
</tr>
<tr>
<td>6/10/15</td>
<td>Schizophrenia Spectrum and Other Psychotic Disorders; Bipolar and Related Disorders; Depressive Disorders</td>
<td>Dailey et al: Chapters 13, 3 and 4</td>
<td>Section II: G.5.d.; Section III CMHC: C2, E2, G1, G2, K2, K4, L1, L2, L3; SC: D3, G1, G2</td>
</tr>
<tr>
<td>6/15/15</td>
<td>Anxiety Disorders; Obsessive-Compulsive and Related Disorders; Trauma- and Stressor-Related Disorders</td>
<td>Dailey et al: Chapters 5, 6, and 7</td>
<td>Section II: G.5.d.; Section III CMHC: C2, E2, G1, G2, K2, K4, L1, L2, L3; SC: D3, G1, G2</td>
</tr>
<tr>
<td>6/17/15</td>
<td>Somatic Symptom and Related Disorders; Dissociative Disorders; Personality Disorders</td>
<td>Dailey et al: Chapters 14, 15, 16</td>
<td>Section II: G.1.j., G.5.d.; Section III CMHC: A2, C2, C4, C7, D1, D2, D6, E2, G1, G2, G3, H1, J2, K1, K2, K3, K4, L1, L2, L3; SC: D3, D4, G1, G2</td>
</tr>
</tbody>
</table>
### RUBRICS

**Assessment Demonstration Rubric 60 points (Assessed through video demonstration and write-up)**

<table>
<thead>
<tr>
<th>CACREP Standards</th>
<th>Exceeds Standards</th>
<th>Meets Standards</th>
<th>Developing Standards</th>
<th>Does Not Meet Standards</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section II Helping Relationships:</strong> G.5.c.; Assessment: G.7.b.; Section III Assessment: G2, H2</td>
<td>Student demonstrates a thorough understanding of how to conduct a MSE. = 10</td>
<td>Student demonstrates an understanding of how to conduct a MSE. = 7</td>
<td>Student partially demonstrates an understanding of how to conduct a MSE. = 4</td>
<td>Student fails to demonstrate a thorough understanding of how to conduct a MSE. = 0</td>
<td></td>
</tr>
<tr>
<td><strong>Write-up</strong></td>
<td>Student submits a thorough written report and summary of mental status exam. = 10</td>
<td>Student submits a written report and summary of mental status exam. = 7</td>
<td>Student submits a partial written report and summary of mental status exam. = 4</td>
<td>Student does not submit written report and summary of mental status exam. = 0</td>
<td></td>
</tr>
</tbody>
</table>

---

**6/22/15**  
**Paraphillic Disorders**  
Other Mental Disorders  
Medication-Induced Movement Disorders and Other Adverse Effects of Medication  
Other condition That May be Focus of Clinical Attention  
Dailey et al: Chapter 11 (paraphilic disorders section)  
DSM 5: Paraphilic Disorders; Other Mental Disorders; Medication-Induced Movement Disorders and Other Adverse Effects of Medication; Other condition That May be Focus of Clinical Attention  
**BDI, BAI, SCL-90-R Due**  
Section II: G.5.d.; Section III CMHC: C2, E2, G1, G2, K2, K4, L1, L2, L3; SC: D3, G1, G2

---

**6/24/15**  
Feeding and Eating Disorders  
Sleep-Wake Disorders  
Sexual Dysfunctions  
Course Wrap-up, Evaluations  
Dailey et al.: Chapter 11 (feeding/eating; sleep-wake; sexual dysfunctions sections)  
DSM 5: Feeding and Eating Disorders; Sleep-Wake Disorders; Sexual Dysfunctions  
**Pop Culture Paper Due**  
Section II: G.1.j., G.5.d.; Section III CMHC: A2, C2, C7, D1, D2, D6, E2, G1, G2, G3, H1, J2, K1, K2, K3, K4, L1, L2, L3; SC: D4
<table>
<thead>
<tr>
<th>Section II Helping Relationships: G.5.c.; Assessment: G.7.b.; Section III Assessment: G2, H2</th>
<th>Student demonstrates a thorough understanding of how to conduct a biopsychosocial assessment. =10</th>
<th>Student demonstrates an understanding of how to conduct a biopsychosocial assessment. =7</th>
<th>Student partially demonstrates an understanding of how to conduct a biopsychosocial assessment=4</th>
<th>Student fails to demonstrate a thorough understanding of how to conduct biopsychosocial assessment=0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Write-up</td>
<td>Student submits a thorough written report and summary of biopsychosocial assessment. = 10</td>
<td>Student submits a written report and summary of biopsychosocial assessment. = 7</td>
<td>Student submits a partial written report and summary of biopsychosocial assessment. = 4</td>
<td>Student does not submit written report and summary of biopsychosocial assessment. = 0</td>
</tr>
<tr>
<td>Section II Helping Relationships: G.5.c.; Assessment: G.7.b.; Section III Assessment: G2, H2</td>
<td>Student demonstrates a thorough understanding of how to conduct a symptoms assessment. =5</td>
<td>Student demonstrates an understanding of how to conduct a symptoms assessment. =3</td>
<td>Student partially demonstrates an understanding of how to conduct a symptoms assessment= 1</td>
<td>Student fails to demonstrate a thorough understanding of how to conduct symptoms assessment =0</td>
</tr>
<tr>
<td></td>
<td>Student submits a thorough written report and summary of intake assessment. = 10</td>
<td>Student submits a written report and summary of intake assessment. = 7</td>
<td>Student submits a partial written report and summary of intake assessment. = 4</td>
<td>Student does not submit written report and summary of intake assessment. = 0</td>
</tr>
</tbody>
</table>

**Total Points Possible: 60**

**Risk Assessment Role Play Rubric 30 points** (Assessed through video demonstration)

<table>
<thead>
<tr>
<th>CACREP Standards</th>
<th>Exceeds Standards</th>
<th>Meets Standards</th>
<th>Developing Standards</th>
<th>Does Not Meet Standards</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section II Helping Relationships: G.5.c.</td>
<td>Student demonstrates a thorough understanding of how to conduct risk assessments (process, documentation, and follow-up) = 15</td>
<td>Student demonstrates a thorough understanding of how to conduct risk assessments (process, documentation, and follow-up) =10</td>
<td>Student demonstrates a thorough understanding of how to conduct risk assessments (process, documentation, and follow-up) =5</td>
<td>Student demonstrates a thorough understanding of how to conduct risk assessments (process, documentation, and follow-up) =0</td>
<td></td>
</tr>
<tr>
<td>Section III Counseling, Prevention, Intervention CMHC: D6; SC: D4</td>
<td>Student demonstrates how to conduct, document and follow up on a risk assessment. = 715</td>
<td>Student demonstrates how to conduct, document and follow up on a risk assessment. = 10</td>
<td>Student demonstrates how to conduct, document and follow up on a risk assessment. =5</td>
<td>Student demonstrates how to conduct, document and follow up on a risk assessment. =0</td>
<td></td>
</tr>
</tbody>
</table>

**Total Points Possible: 30**

**Diagnosis Belief Paper Rubric (50 points)**
<table>
<thead>
<tr>
<th>CACREP Standards</th>
<th>Exceeds Standards</th>
<th>Meets Standards</th>
<th>Developing Standards</th>
<th>Does Not Meet Standards</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section II Professional Orientation and Ethical Practice: G.1.b.</strong></td>
<td>Describes a thorough understanding of personal beliefs regarding diagnosis. = 10</td>
<td>Describes the understanding of personal beliefs regarding diagnosis. =7</td>
<td>Partially Describes the understanding of personal beliefs regarding diagnosis. =4</td>
<td>Fails to address Describes the understanding of personal beliefs regarding diagnosis. =0</td>
<td></td>
</tr>
<tr>
<td><strong>Section II Professional Orientation and Ethical Practice: G.1.j.</strong></td>
<td>Thoroughly describes the ethical implications of diagnosis in counseling. = 10</td>
<td>Describes the ethical implications of diagnosis in counseling. = 7</td>
<td>Partially describes the ethical implications of diagnosis in counseling. = 4</td>
<td>Fails to describe the ethical implication of diagnosis in counseling. = 0</td>
<td></td>
</tr>
<tr>
<td><strong>Section II Human Growth and Development: G.3.b.</strong></td>
<td>Fully describes how the client’s developmental level may impact diagnosis and treatment planning. = 10</td>
<td>Describes how the client’s developmental level may impact diagnosis and treatment planning. = 7</td>
<td>Partially describes how the client’s developmental level may impact diagnosis and treatment planning. = 4</td>
<td>Fails to describe how the client’s developmental level may impact diagnosis and treatment planning. = 0</td>
<td></td>
</tr>
<tr>
<td><strong>Section III CMHC Counseling, Prevention, Intervention: D6 SC: D4</strong></td>
<td>Fully describes the importance and dangers of assessment and diagnosis in counseling and feelings/thoughts regarding conducting risk assessments. = 10</td>
<td>Fully describes the importance and dangers of assessment and diagnosis in counseling and feelings/thoughts regarding conducting risk assessments. = 7</td>
<td>Fully describes the importance and dangers of assessment and diagnosis in counseling and feelings/thoughts regarding conducting risk assessments. = 4</td>
<td>Fully describes the importance and dangers of assessment and diagnosis in counseling and feelings/thoughts regarding conducting risk assessments. = 0</td>
<td></td>
</tr>
<tr>
<td><strong>Professional Writing</strong></td>
<td>Refined level of writing that excellently adheres to APA format, including appropriate margins, font, running head, sentence &amp; paragraph structure, spelling, citations &amp; reference list (if necessary). = 10</td>
<td>Appropriate level of writing that adheres to APA format with few mistakes in margins, font, running head, sentence &amp; paragraph structure, spelling, citations &amp; reference list (if necessary). = 7</td>
<td>Writing mostly does not demonstrate APA format. = 4</td>
<td>Inappropriate writing and missing APA formatting. = 0</td>
<td></td>
</tr>
<tr>
<td><strong>Total Points Possible:</strong></td>
<td><strong>50</strong></td>
<td><strong>50</strong></td>
<td><strong>50</strong></td>
<td><strong>50</strong></td>
<td><strong>50</strong></td>
</tr>
</tbody>
</table>

**Diagnosis Case Study Rubric (50 points)**
<table>
<thead>
<tr>
<th>CACREP Standards</th>
<th>Exceeds Standards</th>
<th>Meets Standards</th>
<th>Developing Standards</th>
<th>Does Not Meet Standards</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section II</strong> Professional Orientation and Ethical Practice: G.1.j.</td>
<td>Fully describes any ethical considerations pertaining to diagnosis and treatment planning. =5</td>
<td>Describes any ethical considerations pertaining to diagnosis and treatment planning. =3</td>
<td>Partially describes any ethical considerations pertaining to diagnosis and treatment planning. =1</td>
<td>Fails to describe any ethical considerations pertaining to diagnosis and treatment planning. =0</td>
<td></td>
</tr>
<tr>
<td><strong>Section III</strong> CMHC Counseling, Prevention, Intervention: C2</td>
<td>Student thoroughly utilizes the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders. =5</td>
<td>Student utilizes the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders. =3</td>
<td>Student partially utilizes the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders. =1</td>
<td>Student fails to utilize the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders. =0</td>
<td></td>
</tr>
<tr>
<td><strong>Section III</strong> CMHC Counseling, Prevention, Intervention: C7; Section III CMHC Assessment: G2; Section III CMHC Diagnosis: K1</td>
<td>Thoroughly identifies the documentation formats of biopsychosocial case conceptualization and treatment planning and how he/she would utilize them in the case study. =5</td>
<td>Partially identifies the documentation formats of biopsychosocial case conceptualization and treatment planning and how he/she would utilize them in the case study. =3</td>
<td>Partially identifies the documentation formats of biopsychosocial case conceptualization and treatment planning and how he/she would utilize them in the case study. =1</td>
<td>Fails to identify the documentation formats of biopsychosocial case conceptualization and treatment planning and how he/she would utilize them in the case study. =0</td>
<td></td>
</tr>
<tr>
<td><strong>Section III</strong> CMHC Counseling, Prevention, Intervention: D1; Section III CMHC Diagnosis: K2, L1, L2</td>
<td>Student thoroughly utilizes and practices diagnosis, treatment, and referral of mental disorders (using diagnostic code). =5</td>
<td>Student utilizes and practices diagnosis, treatment, and referral of mental disorders (using diagnostic code). =3</td>
<td>Student partially utilizes and practices diagnosis, treatment, and referral of mental disorders (using diagnostic code). =1</td>
<td>Student fails to utilize and practices diagnosis, treatment, and referral of mental disorders (using diagnostic code). =0</td>
<td></td>
</tr>
<tr>
<td><strong>Section III</strong> CMHC Counseling, Prevention, Intervention: D2; Section III CMHC Diagnosis: K4</td>
<td>Student thoroughly addresses multicultural concerns related to case conceptualization, diagnosis, and treatment of mental disorders. =5</td>
<td>Student addresses multicultural concerns related to case conceptualization, diagnosis, and treatment of mental disorders. =3</td>
<td>Student partially addresses multicultural concerns related to case conceptualization, diagnosis, and treatment of mental disorders. =1</td>
<td>Student fails to address multicultural concerns related to case conceptualization, diagnosis, and treatment of mental disorders. =0</td>
<td></td>
</tr>
<tr>
<td><strong>Section III</strong> CMHC</td>
<td>Student thoroughly identifies the risk assessment</td>
<td>Student identifies the risk assessment</td>
<td>Student partially identifies the risk</td>
<td>Student fails to identify the risk assessment</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Assessment: G1; Section III CMHC Assessment: H1</td>
<td>Student thoroughly identifies the models of assessment, case conceptualization and concepts of psychopathology leading to diagnoses and appropriate treatment planning. =5</td>
<td>Student identifies the models of assessment, case conceptualization and concepts of psychopathology leading to diagnoses and appropriate treatment planning. =3</td>
<td>Student partially identifies the models of assessment, case conceptualization and concepts of psychopathology leading to diagnoses and appropriate treatment planning. =1</td>
<td>Student fails to identify the models of assessment, case conceptualization and concepts of psychopathology leading to diagnoses and appropriate treatment planning. =0</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Assessment: G3</td>
<td>Student thoroughly identifies psychopharmacological medications that would be appropriate for client diagnosis and any necessary referrals. =5</td>
<td>Student identifies psychopharmacological medications that would be appropriate for client diagnosis and any necessary referrals. =3</td>
<td>Student partially identifies psychopharmacological medications that would be appropriate for client diagnosis and any necessary referrals. =1</td>
<td>Student failed to identify psychopharmacological medications that would be appropriate for client diagnosis and any necessary referrals. =0</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Research and Evaluation: J2</td>
<td>Student thoroughly develops measurable outcomes for interventions and treatment goals in treatment plan. = 5</td>
<td>Student develops measurable outcomes for interventions and treatment goals in treatment plan. = 3</td>
<td>Student partially develops measurable outcomes for interventions and treatment goals in treatment plan. = 1</td>
<td>Student fails to develop measurable outcomes for interventions and treatment goals in treatment plan. = 0</td>
<td></td>
</tr>
<tr>
<td>Professional Writing</td>
<td>Refined level of writing that excellently adheres to APA format, including appropriate margins, font, running head, sentence &amp; paragraph structure, spelling, citations &amp; reference list (if necessary). = 5</td>
<td>Appropriate level of writing that adheres to APA format with few mistakes in margins, font, running head, sentence &amp; paragraph structure, spelling, citations &amp; reference list (if necessary). = 3</td>
<td>Writing mostly does not demonstrate APA format. = 1</td>
<td>Inappropriate writing and missing APA formatting. = 0</td>
<td></td>
</tr>
</tbody>
</table>

Total Points Possible: 50

### Pop Culture Paper Rubric

<table>
<thead>
<tr>
<th>CACREP Standards</th>
<th>Exceeds Standards</th>
<th>Meets Standards</th>
<th>Developing Standards</th>
<th>Does Not Meet Standards</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section II Professional Orientation and Ethical Practice: G.1.j.</td>
<td>Fully describes any ethical considerations pertaining to diagnosis and treatment planning. =10</td>
<td>Describes any ethical considerations pertaining to diagnosis and treatment planning. =7</td>
<td>Partially describes any ethical considerations pertaining to diagnosis and treatment planning. =4</td>
<td>Fails to describe any ethical considerations pertaining to diagnosis and treatment planning. =0</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Counseling, Prevention, Intervention: C2</td>
<td>Student thoroughly utilizes the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders. =10</td>
<td>Student utilizes the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders. =7</td>
<td>Student partially utilizes the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders. =4</td>
<td>Student fails to utilize the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders. =0</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Counseling, Prevention, Intervention: C7; Section III CMHC Assessment: G2; Section III CMHC Diagnosis: K1</td>
<td>Thoroughly identifies the documentation formats of biopsychosocial case conceptualization and treatment planning and how he/she would utilize them in the case study. =10</td>
<td>Partially identifies the documentation formats of biopsychosocial case conceptualization and treatment planning and how he/she would utilize them in the case study. =7</td>
<td>Partially identifies the documentation formats of biopsychosocial case conceptualization and treatment planning and how he/she would utilize them in the case study. =4</td>
<td>Fails to identify the documentation formats of biopsychosocial case conceptualization and treatment planning and how he/she would utilize them in the case study. =0</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Counseling, Prevention, Intervention: D1; Section III CMHC Diagnosis: K2, L1, L2</td>
<td>Student thoroughly utilizes and practices diagnosis, treatment, and referral of mental disorders (using diagnostic code). =10</td>
<td>Student utilizes and practices diagnosis, treatment, and referral of mental disorders (using diagnostic code). =7</td>
<td>Student partially utilizes and practices diagnosis, treatment, and referral of mental disorders (using diagnostic code). =4</td>
<td>Student fails to utilize and practices diagnosis, treatment, and referral of mental disorders including (using diagnostic code). =0</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Counseling, Prevention, Intervention: D2; Section III CMHC Diagnosis: K4</td>
<td>Student thoroughly addresses multicultural concerns related to case conceptualization, diagnosis, and treatment of mental disorders. =10</td>
<td>Student addresses multicultural concerns related to case conceptualization, diagnosis, and treatment of mental disorders. =7</td>
<td>Student partially addresses multicultural concerns related to case conceptualization, diagnosis, and treatment of mental disorders. =4</td>
<td>Student fails to address multicultural concerns related to case conceptualization, diagnosis, and treatment of mental disorders. =0</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Counseling, Prevention, Intervention: D6; SC: D4</td>
<td>Student thoroughly identifies the risk assessment procedures followed for case study. =10</td>
<td>Student identifies the risk assessment procedures followed for case study. =7</td>
<td>Student partially identifies the risk assessment procedures followed for case study. =4</td>
<td>Student fails to identify the risk assessment procedures followed for case study. =0</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Assessment: G1; Section III CMHC Assessment: H1</td>
<td>Student thoroughly identifies the models of assessment, case conceptualization and concepts of psychopathology leading to diagnoses and appropriate treatment planning. =10</td>
<td>Student identifies the models of assessment, case conceptualization and concepts of psychopathology leading to diagnoses and appropriate treatment planning. =7</td>
<td>Student partially identifies the models of assessment, case conceptualization and concepts of psychopathology leading to diagnoses and appropriate treatment planning. =4</td>
<td>Student fails to identify the models of assessment, case conceptualization and concepts of psychopathology leading to diagnoses and appropriate treatment planning. =0</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Assessment: G3</td>
<td>Student thoroughly identifies psychopharmacological medications that would be appropriate for client diagnosis and any necessary referrals. = 10</td>
<td>Student identifies psychopharmacological medications that would be appropriate for client diagnosis and any necessary referrals. = 7</td>
<td>Student partially identifies psychopharmacological medications that would be appropriate for client diagnosis and any necessary referrals. = 4</td>
<td>Student failed to identify psychopharmacological medications that would be appropriate for client diagnosis and any necessary referrals. = 0</td>
<td></td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-------------------------------------------------</td>
<td>-------------------------------------------------</td>
<td>-------------------------------------------------</td>
<td>-------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Section III CMHC Research and Evaluation: J2</td>
<td>Student thoroughly develops measurable outcomes for interventions and treatment goals in treatment plan. = 10</td>
<td>Student develops measurable outcomes for interventions and treatment goals in treatment plan. = 7</td>
<td>Student partially develops measurable outcomes for interventions and treatment goals in treatment plan. = 4</td>
<td>Student fails to develop measurable outcomes for interventions and treatment goals in treatment plan. = 0</td>
<td></td>
</tr>
<tr>
<td>Professional Writing</td>
<td>Refined level of writing that excellently adheres to APA format, including appropriate margins, font, running head, sentence &amp; paragraph structure, spelling, citations &amp; reference list (if necessary). = 10</td>
<td>Appropriate level of writing that adheres to APA format with few mistakes in margins, font, running head, sentence &amp; paragraph structure, spelling, citations &amp; reference list (if necessary). = 7</td>
<td>Writing mostly does not demonstrate APA format. = 4</td>
<td>Inappropriate writing and missing APA formatting. = 0</td>
<td></td>
</tr>
</tbody>
</table>

**Total Points Possible: 100**

<table>
<thead>
<tr>
<th>CACREP Standards</th>
<th>Exceeds Standards</th>
<th>Does Not Meet Standards</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>BDI</td>
<td>Student completed the Beck Depression Inventory = 20</td>
<td>Student did not complete the Beck Depression Inventory = 0</td>
<td></td>
</tr>
<tr>
<td>BAI</td>
<td>Student completed the Beck Anxiety Inventory = 20</td>
<td>Student did not complete the Beck Anxiety Inventory = 0</td>
<td></td>
</tr>
<tr>
<td>SCL-90-R</td>
<td>Student completed the Symptom Checklist 90 = 20</td>
<td>Student did not complete the Symptom Checklist 90 = 0</td>
<td></td>
</tr>
</tbody>
</table>

**Total Points Possible: 30**