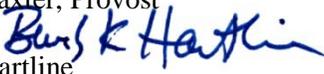


March 1, 2011

To: Graeme Baxter, Provost  
From: Beverly Hartline   
Subject: Transmittal of Proposal to Initiate a Master of Arts Program in Rehabilitation Counseling

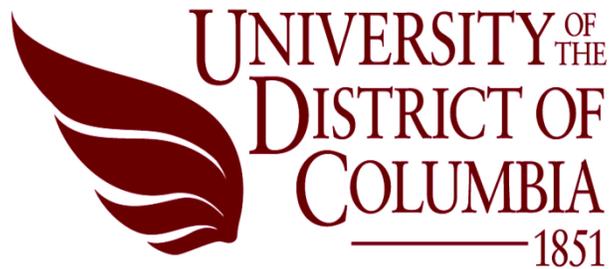
The attached proposal to initiate a Master of Arts Program in Rehabilitation Counseling was approved this afternoon unanimously by the Senate and is ready for consideration by the Academic Affairs Committee of the Board. This program was developed and would be administered within the Department of Psychology and Counseling in the College of Arts and Sciences. The proposed program has two options: a 48-credit-hour curriculum leading to certification as a Rehabilitation Counselor or a 60 credit-hour curriculum leading to licensure. Both options have been designed to satisfy the accreditation requirements of the two national accreditation bodies overseeing preparation for the rehabilitation counseling profession: CORE (Council of Rehabilitation Education) and CACREP (Council for Accreditation of Counseling and Related Educational Programs). The credit hours specified are higher than the norm for master's degrees, due to the accreditation requirements.

Rehabilitation counseling is a high and growing-demand profession in our region and nationally. The DC Department of Rehabilitative Services has been urging the University to offering a degree program leading to certification or licensure. Support letters from DC-DRS and counterpart agencies in Maryland and Virginia are included in Appendix B. This program aligns strongly with our mission and goals to offer exceptional professional programs of importance to the District and the nation. To acquire funding that would help support program development, Dr. Lisa Moon and colleagues submitted a proposal last summer, which was awarded nearly \$1 million from the US Department of Education this past fall. This funding substantially covers the cost of start-up, as will be seen in the Fiscal Impact Statement, and also will provide scholarships to some of the students in the first cohorts. A prerequisite and requirement of the grant is that the University develop the degree program and open it to students, ideally not later than fall 2011.

The proposed program has been designed by the faculty to satisfy the accreditation requirements. These requirements are detailed in Appendix A of the proposal. Some of the needed courses are shared with the existing Counseling M.S. program. Others are already available in our catalog, because we had offered them previously to serve the continuing education needs of the Department of Rehabilitative Services. Other courses are new. Syllabi for the new and significantly modified courses are included in Appendix E of the attached program proposal. Appendix F provides a crosswalk between the accreditation requirements and the proposed curriculum.

Cc: Rachel Petty, Shelley Broderick, Eugene Johnson, Lisa Moon

**UNIVERSITY OF THE DISTRICT OF COLUMBIA**  
**COLLEGE OF ARTS & SCIENCE**  
**DEPARTMENT OF PSYCHOLOGY & COUNSELING**  
**PROPOSED MASTER OF ARTS IN REHABILITATION COUNSELING**



Submitted by

Department of Psychology & Counseling

Fall Semester 2011

Washington, DC

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# Master of Arts Degree in Rehabilitation Counseling

*Submitted by*

*The Department of Psychology and Counseling*

*University of the District of Columbia*

## **A. TYPE OF REVIEW REQUESTED: New Program**

The department of Psychology and Counseling submits this proposed graduate program in Rehabilitation Counseling and Psychological and Rehabilitation Assessment for review and approval. This would be a new Master's Degree program.

## **B. DESCRIPTION OF PROPOSED PROGRAM**

In October 2010, University of the District of Columbia (UDC) Department of Psychology and Counseling was awarded a 5-year, \$1million Rehabilitation Capacity Building grant from the U.S. Department of Education-Rehabilitation Services Administration. With the University administration's support and commitment, the Department has initiated building the necessary infrastructure that such a project requires. This effort includes: developing a strategic plan in collaboration with the vocational rehabilitation agencies in DC, MD, and VA, improving the partnership between the UDC and the local rehabilitation community, establishing a Master's level Rehabilitation Counseling Program, developing a recruitment plan, developing a retention plan, and implementing an assessment plan. The proposed program in Rehabilitation Counseling is consistent with the mission and goals of UDC to provide higher education that serves the needs of the District of Columbia.

The goals and objectives of the master's program in Rehabilitation are to:

1. Increase the number of qualified rehabilitation professionals in the District of Columbia, Maryland-Region IV-Washington Suburbs, and Northern Virginia area.
2. Increase the number of rehabilitation professionals at the District of Columbia, Rehabilitation Services Administration (DCRSA), Department of Rehabilitation Services (DORS)-Region IV-DC Suburbs, Commonwealth of Virginia Rehabilitative Services (VRS) and the community rehabilitation centers (CRC's) in the District, Maryland, and Virginia areas.
3. Provide academic training to existing personnel so that they become professionally credentialed, which includes certification or licensure;

4. Provide continuing education courses for DCRSA, DORS, and VRS personnel and the larger community; and
5. Train RSA personnel to be able to provide comprehensive and independent living services to persons with disabilities to promote their opportunities for employment, self-sufficiency, and independence.

## **1. Curriculum Requirements**

The proposed Master's Degree program is a two/three year program (including summers) and requires a minimum of 48 semester hours of coursework for certification and 60 semester hours of coursework for licensure. Students are exposed to a series of foundation and theoretical courses in research, ethics, case management, techniques of counseling, psychosocial, medical aspects of disability. Applied courses in case management, assessment, psychotherapeutic intervention, and job development, as well as special topic courses, addressing innovative clinical topics follow (i.e., traumatic brain injury, developmental disabilities, educational disabilities). A two-semester internship sequence provides for direct clinical work with clients. This counseling program requires more semester hours than the typical graduate level program due to the rigorous accreditation standards established by the accrediting agencies. Advanced-level academic programs must adhere to these accreditation standards if they desire to graduate students who are eligible for professional state certification and/or licensure.

This track of the Rehabilitation curriculum design adopts both traditional and contemporary therapeutic rehabilitative approaches with special emphasis on evidence based practices and techniques used in community-based care. Additionally, the program's educational objectives, the proposed fieldwork, and the required internship activities adhere to the standards and guidelines established by the National Council on Rehabilitation Education (NCRE) and the Council of Rehabilitation Education (CORE; Appendix A). The track of the proposed Master's Degree program, which is designed to prepare students for certification as a rehabilitation counselor, is a 48 semester hour program. Specifically, the curriculum includes 39 credit hours of required courses in rehabilitation, case management, medical aspects of disability, job development, assessment methods, professional ethics, and rehabilitation legislative issues, research/program evaluation, and counseling applications, three credit hours of practicum, and six credit hours of internship.

The second track of the Rehabilitation Counseling curriculum adopts both traditional and contemporary mental health treatment approaches with special emphasis on evidenced-based practices and techniques used in community-based and outpatient therapeutic care. Additionally, the program's educational objectives, the proposed practicum, and the required internship

activities adhere to the standards and guidelines established by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). This track is designed to prepare students for licensure as a professional counselor in addition to certification as a rehabilitation counselor. Specifically, the curriculum is a 60 semester hour program and includes 39 credit hours of required courses in the aforementioned area of rehabilitation as well as 12 credit hours of courses in human development, marriage & family counseling, diagnosis, and ethics, and nine credit hours of practicum/internship.

This two/three year curriculum of study prepares students for employment opportunities in rehabilitation, counseling and psychological rehabilitation assessment. Thus graduates would become qualified to assume the role of rehabilitation counseling professionals serving the community of people with disabilities of many types. The prospective work settings for our graduates include State/Federal rehabilitation agencies, mental health centers, developmental disability centers, residential and outpatient clinical dependency treatment centers, community-based facilities, supported employment facilities, school facilities, veterans administrations, private and non-profit hospitals, independent living centers, UDC, Disability Resource Center, (DRC) and community rehabilitation centers.

The proposed curriculum includes a focus on knowledge, skills, abilities and values that students need for a successful career in rehabilitation counseling. As such, the proposed curriculum is constructed in accordance with CORE guidelines. CORE is the accrediting body that endorses graduate programs that provide academic preparation in the professional rehabilitation counseling area. Specifically CORE Guidelines C (Professional Identity) and D (Clinical Experience), which outline curriculum standards, knowledge, abilities, competency domains, educational outcomes, clinical experience expectations, internships and practicum standards, have been identified as critical (CORE, 2009; Appendix A). Ultimately, the proposed program curriculum will provide students with a comprehensive graduate study curriculum that will provide essential knowledge, skills, attitudes, values, cultural diversity components necessary to function as effectively as a professional rehabilitation counselor, responding to cultural issues and rights of individuals with disabilities. The proposed program, moreover, addresses the need to highlight theory, and research as the critical underpinning of counseling, rehabilitation, and related disciplines. More specifically:

1. The proposed master's program highlights the need to integrate theory and practice,
2. The proposed program supports the need of the program to utilize various pedagogical models, to include experiential components, in a way that is suitable to the subject matter, and which may also include: traditional lecture/classroom experiences, distance learning approaches, research, and laboratory experiences. Moreover, distance learning resources are available at UDC; for instance, Internet capabilities as well as the use of Blackboard, a web-based Internet and multimedia

- resource instructional protocol that students and faculty communicate via discussion forum, academic forum, and academic chat rooms to facilitate exchange of academic instructions, grading, assessments, assignments, course documents, information, and announcements respectively. Thus, UDC instructors can create class forum through blackboard capabilities, and conduct distance learning instruction.
3. The proposed program promotes the development of lifelong learning skills and fosters the development of competencies that will prepare students for entrance into the Workforce or acceptance into graduate or professional schools upon receipt of the master degree,
  4. The proposed program addresses diversity and cross-cultural issues in the discipline, with an emphasis on those matters relevant to individuals with disabilities,
  5. The proposed program provides students with sufficient information regarding the growing internationalization of counseling, rehabilitation, and related behavioral and allied health disciplines,
  6. The proposed program offers students the opportunity to understand behaviors that may be effected by or ignore geographic boundaries,
  7. The proposed program supports the pursuit of excellence,
  8. The proposed program offers insight into the fact that observations are meaningful only to the extent that they accurately reflect what is being observed, and
  9. The proposed program supports the notion that there are many legitimate ways to reach a learning outcome.

This configuration of new courses and existing ones, complies with the accreditation standards of CORE. Considerable attention has been given to incorporate a wide range of teaching methods, approaches and techniques into the curriculum of the proposed program to ensure that the students have a comprehensive educational program to meet the needs of the diverse student population enrolling in the Master's in Rehabilitation Counseling program. The following curriculum has been designed:

Table 1: Course listing for Master's Degree Program in Rehabilitation Counseling

Course Number	Required Core Courses – Total of 45 Credit Hours Needed	Credit Hours
1318-500	Foundations of Rehabilitation Counseling*	3
1318-501	Psychosocial and Medical Aspects of Disability in Rehabilitation I*	3
1318-502	Career Counseling in Rehabilitation*	3
1318-503	Rehabilitation Counseling Theories*	3
1318-504	Principles and Practices of Case Management in Rehabilitation*	3
1318-505	Introduction to Rehabilitation Research*	3
1315-510	Group Counseling*	3

1315-513	Cultural Diversity Issues and Multicultural Counseling *	3
1315-519	Appraisal Techniques of Counseling *	3
1315-530	Techniques of Counseling *	3
1318-506	Practicum in Rehabilitation Counseling <sup>1</sup>	3
1318-507	Internship in Rehabilitation Counseling I <sup>1</sup>	3
1318-508	Internship II in Rehabilitation Counseling II <sup>1</sup>	3
1318-509	Job Development and Placement in Rehabilitation <sup>2</sup>	3
1318-510	Psychosocial and Medical Aspects of Disability in Rehabilitation II <sup>2</sup>	3
<b>Certification Track Electives – Total of 3 Credit Hours Needed</b>		
1318-515	Developmental Disorders in Rehabilitation <sup>2</sup>	3
1318-516	Rehabilitation & Traumatic Brain Injury <sup>2</sup>	3
1318-517	Rehabilitation and Psychiatric Disabilities <sup>2</sup>	3
1318-518	Rehabilitation, Transition and the Educational Setting <sup>2</sup>	3
1315-543	Addiction Disorders*	3
<b>Licensure Track Requirements – Total of 12 Credit Hours Needed</b>		
1171-537	Advanced Developmental Psychology*	3
1171-504	Psychopathology*	3
1315-544	Family Counseling*	3
1315-531	Ethics, Legal, and Legislative Issues *	3
<b>Rehabilitation Assessment Specialization—Total of (15) Credit Hours</b>		
1171-523	Assessment of Intelligence Lecture*	3
1171-530	Assessment of Intelligence Laboratory *	1
1171-525	Assessment of Personality Lecture *	3
1171-526	Assessment of Personality Laboratory *	1
1318-519	Neurological Assessment Lecture <sup>2</sup>	3
1318-520	Neurological Assessment Laboratory <sup>2</sup>	1
1318-521	Clinical Report Writing in Rehabilitation <sup>2</sup>	3

\*existing courses; <sup>1</sup>newly titled; <sup>2</sup>new courses

## 2. Course Descriptions

The catalog-style course descriptions indicate by underlines or cross-throughs changes to the descriptions of existing courses.

## Required Core Courses – 45 Credit Hours

### **1318-500 Foundations of Rehabilitation Counseling (3)**

Examines the history, philosophy, and legislation related to the development of the field. Focus is on research findings, current policies, government entities, and ethical issues; included are modules of organization and administration.

### **~~1318-501 Psychosocial and Medical Aspects of Disability in Rehabilitation~~ Psychosocial and Medical Aspects of Disability in Rehabilitation I (3) **NEWLY TITLED & NEW DESCRIPTION****

Overview of major physical, cognitive, neurological, developmental and substance use and psychiatric disorders, and sensory impairments. Emphasizes functional limitations, intervention resources, contributions of medical and allied health professions and psychosocial implications of adjustment to disabling conditions; includes a module on DSM-IV-TR.

### **~~1318-502 Career Counseling and Job Placement in Rehabilitation~~ Career Counseling in Rehabilitation (3) **NEWLY TITLED & NEW DESCRIPTION****

~~Explores occupational information job matching systems and job placement approaches. Focuses on demand side job development, job seeking skills training, supported employment, transitional work, and placement techniques, including job analyses, ADA implementation, and labor market surveys.~~

Involves the study of career theories and other practices associated with successful job placement activities. Includes transferable skills analysis, labor market analysis, job seeking skills training, employer identification, management of job development campaign, as well as supported employment strategies. Technology related to these areas is explored.

### **~~1318-503 Introduction to Assistive Technology in Rehabilitation Counseling~~ Rehabilitation Counseling Theories (3) **NEWLY TITLED & NEW DESCRIPTION****

~~Examines technology in rehabilitation to support functioning of individuals with physical, cognitive, and sensory disabilities.~~

Examines conceptual frameworks of major counseling theories and guides rehabilitation counselors in the development of their conceptual and theoretical preference. Focus on principles and approaches relevant to rehabilitation counseling and supervision. Includes a module on family and systems theory.

### **1318-504 Principles and Practices of Case Management in Rehabilitation (3)**

Examines rehabilitation delivery systems. Explores benefit systems ethic goal development and rehabilitation planning and documentation.

### **~~1318-505 Directed Readings in Rehabilitation~~ Introduction to Rehabilitation Research (3)**

~~Provides intensive study in one or more topical areas of rehabilitation through directed readings under supervision of a faculty member.~~ **NEWLY TITLED & NEW DESCRIPTION**

Examines quantitative and qualitative methods used in human services research. Prepares students to read, analyze, and evaluate research. Equips students with the skills to evaluate the effectiveness of service delivery programs.

**1318-506 Practicum in Rehabilitation Counseling (3) NEW COURSE**

Students supervised by qualified Certified Rehabilitation Counselors (CRC) will complete a 100 hour practicum. Demonstration of counseling skills with individuals with disabilities in a rehabilitation agency or community rehabilitation centers.

**1318-507 Internship in Rehabilitation Counseling I (3) NEW COURSE**

Demonstration of counseling skills in a rehabilitation setting, agencies and community rehabilitation centers with primary supervision by a qualified CRC. Students are required to spend significant time within an agency functioning as a professional rehabilitation counselor. Students should complete 300 hours in part I and II totaling 600 hours.

**1318-508 Internship in Rehabilitation Counseling II (3) NEW COURSE**

Demonstration of advanced rehabilitation counseling skills in a rehabilitation setting, agencies and community rehabilitation centers with primary supervision by a qualified CRC. Students are required to spend significant time within an agency functioning as a professional rehabilitation counselor. Students will complete 300 hours during Internship I and II totaling 600 hours.

**1318-509 Job Development and Placement in Rehabilitation (3) NEW COURSE**

Explores occupational information job matching systems and job placement approaches. Focuses on demand-side job development, job-seeking skills training, supported employment, transitional work, and placement techniques, including job analyses, ADA implementation, and labor market surveys. Includes a module on assistive technology.

**1318-510 Psychosocial & Medical Aspects of Disability II (3) NEW COURSE**

Part II focuses on the psychosocial and psychological aspects of medical conditions. Covers cardiovascular, respiratory, renal, gastrointestinal, musculoskeletal, blood/immune systems, endocrine and dermatologic conditions disability. Emphasizes functional limitations, intervention resources, contributions of medical and allied health professions; implications of adjustment to disabling medical conditions.

**1315-510 Group Counseling (3)**

Examines the major schools, as well as contemporary trends in group counseling, including didactic and experiential models. Provides laboratory exercises which demonstrates different group approaches, offering opportunities for students to experience both group leadership and group participation.

**1315-513 Cultural Diversity Issues and Multicultural Counseling (3)**

Reviews counseling theories and the appropriateness of each for counseling minorities; the aged, disabled, gifted, talented, mentally disabled, women and members of racial and ethnic groups.

**1315-519 Appraisal Techniques of Counseling (3)**

Examines techniques and methods of human appraisal, including standardized testing, autobiographical techniques, case histories, case studies, and interviews. Practical application of

Ecological and Assistive Technology assessment as well as other commercially available evaluation systems

### **1315-530 Techniques of Counseling (3)**

Surveys major counseling models and their application in schools and mental health settings. Focuses on helping the student integrate theory and practice in order to develop a personal counseling philosophy.

### **Certification Track Electives – 3 Credit Hours**

#### **1318-515 Developmental Disorders & Rehabilitation (3) NEW COURSE**

Using a 20-hour field experience component which involves individuals with developmental disabilities in local DRS agencies, this course provides an opportunity for students to better understand the unique challenges of individuals with developmental disabilities as well as to learn about the ways in which rehabilitation adapt to meet these challenges. The course utilizes a life span approach to increase awareness and sensitivity about the variety of issues an individual with a developmental disability and their family may encounter.

#### **1318-516 Rehabilitation & Traumatic Brain Injury (3) NEW COURSE**

Using a 20-hour field experience component which involves individuals with developmental disabilities in local DRS agencies, this course will review various types of traumatic brain injury and their common physical, cognitive and behavioral consequences. The student will receive information about head injury and be able to discuss common causes of traumatic brain injury, continuum of care, and factors that contribute to the successful rehabilitation and recovery of a person from traumatic brain injury.

#### **1318-517 Rehabilitation & Psychiatric Disabilities (3) NEW COURSE**

Using a 20-hour field experience component which involves individuals with psychiatric disabilities in local DRS agencies, this course provides an overview of psychiatric disability and rehabilitation approaches, as well as reviewing current and evolving evidence-based practices in employment of individuals with psychiatric disabilities, including supported employment.

#### **1318-518 Rehabilitation, Transition and the Educational Setting (3) NEW COURSE**

Using a 20-hour field experience component which involves visiting sites that prepare individuals with disabilities to enter the post-school environment, this course provides an opportunity for students to better understand the unique challenges of individuals with educational disabilities and transition challenges. A key focus will be on the vocational choices, training and education available to young adults with educational disabilities as they make the transition into adulthood. Another key component will focus on differentiating the legal requirements of IDEA and ADA.

#### **1315-543 Addiction Disorder (3)**

Examines the physiological and psychological aspects of addiction to alcohol, narcotics, stimulants, psychotropic, hallucinogenic drugs, gambling, and sex. Assesses psychosocial factors associated with addiction. Explores a variety of treatment approaches.

### **Licensure Track Requirements – 12 Credit Hours (In Addition to the 48 Above)**

#### **1171-537 Advanced Developmental Psychology (3)**

Explores major theories of human development. Utilizes the lifespan perspective to explore the interrelationship of physical, cognitive, social, and emotional development at every stage from conception to death. Emphasizes the influence of social, cultural, and individual experiences in life stage transitions.

#### **1171-504 Psychopathology (3)**

Focuses on the interplay of psychological, social, and environmental factors at the onset of behavioral pathology. Reviews the traditional classification system used in the labeling of abnormal behavior, including issues of diagnostic reliability and validity. Examines theories of causation and interventional/therapeutic methods. Explores research developments in the field

#### **1315-544 Family Counseling (3)**

Focuses on traditional and non-traditional family life styles (including single-parent families, commune families, and the family in which two unmarried persons live together and procreate), family structures of various racial and economic groups, communication, and, communication breakdown in family relationships.

#### **1315-531 Ethics, Legal, and Legislative Issues (3)**

Explores major ethical and legislative issues in rehabilitation counseling and provide an insight into pertinent disability legislation, advocacy and disability rights. Ethical standards are discussed from an historical and practice perspective, and an ethical decision-making model is explored. Ethical principles are examined. Legislation issues that affect the professional practice of rehabilitation counseling are presented and examined.

### **Rehabilitation Assessment Specialization – 15 Credit Hours**

#### **1171-523 Assessment of Intelligence Lecture (3)**

Surveys representative tests and techniques utilized in the assessment of intelligence. Presents methodologies in the administration, scoring, and interpretation of selected intellectual tests. Provides instruction in the preparation of a written intellectual profile and the terminology used in reaching diagnostic decisions.

#### **1171-530 Assessment of Intelligence Laboratory (1)**

Provides a laboratory setting for teaching applied psychological assessment using intelligence tests.

#### **1171-525 Assessment of Personality Lecture (3)**

Surveys representative tests and techniques utilized in the assessment of personality. Presents methodologies in the administration, scoring, and interpretation of selected personality tests. Provides instruction in the preparation of a written personality profile and the terminology used in reaching diagnostic decisions.

**1171-526 Assessment of Personality Laboratory (1)**

Provides a laboratory setting for teaching applied psychological assessment using personality tests.

**1318-519 Neuropsychological Assessment Lecture (3) NEW COURSE**

Surveys representative tests and techniques utilized in neuropsychological assessment of brain functioning. Presents methodologies in the administration, scoring, and interpretation of selected neuropsychological tests. Provides instruction in the preparation of a written neuropsychological profile and the terminology used in reaching diagnostic decisions.

**1318-520 Neuropsychological Assessment Laboratory (1) NEW COURSE**

Provides a laboratory setting for teaching applied psychological assessment using neuropsychological tests.

**1318-521 Clinical Report Writing in Rehabilitation (3) NEW COURSE**

Provides intensive training in report writing that emphasizes the integration of relevant psychological and developmental test and non-test data results into a coherently written comprehensive description of psychological functioning. Included a module on medical terminology.

### **3. Master's Degree Program Requirements**

**Program Description**

The proposed Rehabilitation Counseling program prepares individuals to counsel disabled individuals and recovering patients in psychological, personal, social, and vocational adjustment in order to have fulfilling and productive lives. It requires two/three years of full-time study. Part-time students should consult their academic advisor to determine the length of time it will take to complete the degree requirements. Students may transfer a maximum of nine (9) semester credit hours of graduate coursework successfully completed at another accredited institution, subject to approval of the program faculty. Students must maintain a grade point average of 3.0 or better to remain in good standing, and earn at least a 3.0 in all major courses. The faculty in this program reserves the right to dismiss any student who displays unprofessional and adverse behavior.

**Rehabilitation Assessment Specialization**

Assessment and evaluation is a critical component of the rehabilitation counseling program. It is necessary to determine the capacity of the consumers to re-enter the vocational arena. Such assessments can provide valuable information regarding the psychological, neuropsychological and physiological, developmental disparities of the consumer for possible vocational/occupational independence. For those graduate students who have career aspirations in psychometrics, this specialization is designed to meet the necessary training requirements for a

career in rehabilitation assessment. This specialization requires an additional 15 credit hours in the area of psychometrics that above the 48 credit hours required for certification or 60 credit hours for licensure.

### **Certification and Licensure Track**

Credentialing is an important aspect of career marketability. In the counseling arena, credentials (i.e., certification, licensure) are essential to being hired. The Rehabilitation Counseling program will make available the opportunity to for the student to become eligible for professional credentialing. Through academic advisement students will be encouraged to explore career options so that they can be guided towards the most appropriate credentialing option. Based on their career aspirations, students can select either the certified rehabilitation counselor track option (48 credit hours required) or the licensed professional counselor track option (60 credit hours). Both credentials (i.e., certification, licensure) are recognized by the District of Columbia and the neighboring states of Virginia and Maryland.

### **Capstone Assessments**

Students must submit a request to advance to candidacy upon successful completion of 18-24 semester hours (typically after two semesters of full-time study). Readiness for candidacy will be determined by the cumulative grade point average, an acceptable score on a written qualifying examination, successful completion of foundation courses, and successful completion of the writing proficiency admissions requirement. At the conclusion of the student's academic program, each student will prepare and submit a professional portfolio and successfully pass a comprehensive examination. The development of a professional portfolio is a summative assessment which enables students to document and verify the knowledge, skills, and competencies acquired while matriculating through the program and will require students to document their knowledge and skills with supporting evidence in areas such as interviewing, case management, assessment, job development, medical aspects, and counseling. The comprehensive examination is another summative assessment that will measure the student's integration of knowledge in rehabilitation counseling ensuring competence in the field.

### **Admission Requirements**

To be considered for admission to graduate study in Rehabilitation Counseling, the applicant must meet the following requirements:

1. Hold a baccalaureate degree in rehabilitation services, psychology, sociology, or other human services fields, from an accredited college or university with a preferred cumulative GPA of 2.8 or higher.
2. Submit one official transcript from each institution attended for college and graduate work.

3. Submit three (3) professional references addressing character, academic promise, and professional suitability for the Rehabilitation program.
4. Submit personal statement (500-word) detailing interest in program, personal characteristics, and personal development for seeking this degree, personal and professional experiences that influenced your pursuit in rehabilitation counseling.
5. Submit official scores from a recent administration of the Graduate Record Examination.
6. Submit a complete UDC Graduate application.

Admitted students without the baccalaureate in rehabilitation services, psychology, sociology, or other human services fields maybe required to take additional prerequisite courses as determined by the admission committee upon review of official transcripts. Applicants are evaluated on previous academic performance and potential, relationship between career goals and career/volunteer experience, experiential background, personal characteristics that are likely to contribute to success as a rehabilitation counselor, and writing skills. Students can be considered for regular or conditional admission which is determined by the Rehabilitation Counseling admission committee. While University has a year round admission policy, the Rehabilitation Counseling program has articulated that students will be admitted in the Fall only.

### **Graduate Writing Proficiency Requirements**

The student may satisfy the University's writing proficiency requirement by scoring above a cut-off score of 4.0 on the essay section of the GRE or by enrolling in the Graduate Writing Seminar (ENGL 599) during the first semester in the program. Credit for this course will not be counted as part of the credit-hour requirement needed to complete the graduate program.

## **C. PROGRAM FEASIBILITY FACTORS**

### **1. Demonstration of Need for the Program**

Since 1999, the Department of Psychology and Counseling aided DCRSA by addressing the personnel professional enhancement needs of its rehabilitation counselors. The Department collaborated with the DCRSA in increasing the number of trained and qualified already employed RC's by offering a series of necessary courses. Over a three year period, the department and DCRSA was responsible for improving the qualifications of over 20 employed DCRSA rehabilitation counselors. Despite the notable success, statistics continue to show significant vacancies in DCRSA as well as surrounding regional state RSA agencies. Specifically, the District's 2010 State Plan illustrates that there is a severe personnel shortage of qualified Rehabilitation Counselors, numerous RSA vacancies, enormous caseloads, and large numbers of minority persons with mental and/or physical disabilities being underserved. Furthermore, the DCRSA 2010 State Plan reported that the agency employed 36 rehabilitation

counselors who provided rehabilitation counseling services to 10,395 District residents with disabilities. However, the agency projects that 108 rehabilitation counselors would be needed within the next five years to provide services to a projected population of 20,315 District residents with disabilities. The DCRSA receives the greatest proportion (85%) of rehabilitation consumers with a disability from one racial/ethnic group – Black, non-Hispanic. The largest number of consumers emerged from Wards 5, 6, 7, and 8. The RSA agencies in the surrounding metropolitan regional area (i.e., Maryland-Region VI-DC Suburbs; Northern Virginia -- Fairfax, Arlington, Alexandria) report similar trends and statistics in their 2010 State Plans.

These data show that more rehabilitation counselors are needed in this region than the academic systems currently preparing rehabilitation counselors in this region can produce annually or cumulatively over a long-term period. In an 2010, “Issue Statement”, the National Rehabilitation Association (NRA) mirrored this concern and further noted that the data clearly support at a minimum the need for aggressive, targeted recruitment and retention strategies to tackle this dilemma (NRA, 2010). Chan (2007) concluded that the current training system cannot produce more qualified personnel without expansion to produce more graduates. By expansion, Chan (2007) recommended expanding the number of university training programs as well as the capacity of university training programs. The NRA (2010) lends validity to this recommendation by stressing the “value of graduate education and training in rehabilitation as a means of producing competent, professionally committed counselor to work in the field of vocational rehabilitation.” While recognizing the significantly low operating capacity, the recommendation for training system expansion and the contributions graduate training has on building competent and professional counselors is critical, and provides the compelling need the US Department of Education addressed in its recent grant opportunity that funded UDC’s proposal in this area.

UDC’s proposed RCP is primed to remedy this systemic need. By working collaboratively with the District’s RSA and CRP agencies, UDC is committed to admitting and academically training prospective rehabilitation counselors, who upon graduation will be eligible for professional credentials in Rehabilitation Counseling and subsequently be hired by DCRSA. This will significantly target the goal of reducing the vacancies, addressing the demands and trends of serving a multicultural diverse District population, delivering quality services to District residents, and ultimately promoting the opportunities for employment, self-sufficiency, and independent living capabilities of District residents with significant disabilities.

## **2. Congruence of academic unit objectives with university mission**

The standards, goals and objectives set forth in this program proposal are consistent with those of the University and the department:

- Student access to post-secondary education to residents of the District of Columbia

- Preparing students for immediate entry into the workforce, specialized employment opportunities, and the next level of education, thus improving their urban communities as well as the lives of the citizens of the District of Columbia
- Providing high quality instruction, student support, and evaluate student achievement for success.
- Recruiting multicultural graduate students who are dedicated to preparing themselves to serve individuals with disabilities. Individuals with disabilities and/or minority status are encouraged to apply.
- Providing academic and experiential training in accordance with standards developed by the university, college, and appropriate accrediting, certifying, and licensing agencies.
- Improving the quality of rehabilitation counseling by teaching students the philosophy, theory, and skills necessary to enhance the lives of individuals with disabilities.
- Increasing the number of qualified personnel to serve DCRSA, DORS, and VRS as well as the community rehabilitation centers across the District of Columbia, Maryland-Region VI-DC Suburbs (i.e., Montgomery and Prince George's counties), and Virginia (i.e., Fairfax, Arlington, Alexandria).
- In addition to this, the UDC academic community and administrative officials as well as DCRSA, DORS, and VRS officials support the implementation of the proposed master's program, (Appendix B – Letters of support).

### **3. Avoidance of duplication/overlap with existing courses or programs**

The proposed program in Rehabilitation Counseling and Psychology would be a new graduate program housed in the Department of Psychology and Counseling. The curriculum is partly based on existing courses that defined the Rehabilitation concentration in the graduate level Counseling program but has been further enhanced to meet the accreditation standards established by the Council on Rehabilitation Education (CORE). There is no duplication or overlap with existing courses or existing programs.

### **4. Relationship with other programs/departments/schools/college**

Not Applicable.

### **5. Accrediting agencies**

Rehabilitation Counseling programs are reviewed and accredited by the Council on Rehabilitation Education (CORE). UDC's proposed Rehabilitation Counseling program was designed in alignment with the CORE accrediting standards and guidelines. Appendix F illustrates this alignment. A component of building rehabilitation capacity within the University is a commitment to seek accreditation within one year following the program implementation.

Grant funds have been awarded to UDC to support this effort and will cover the expected incremental costs associated attaining accreditation.

## **6. Number of students immediately affected, if relevant**

Because this program represents a different professional area, the proposed program will have no impact on students enrolled in the counseling program. It is possible that some current students will choose to enter the new program to pursue a rehabilitation specialty, once it is available.

## **7. Projected enrollment, if relevant**

In the District of Columbia, the District of Columbia Rehabilitation Service Administration (DCRSA) has projected a need for 93 vocational rehabilitation counselors over the next 5 years in the following areas:

- Rehabilitation Counseling
- Care/Vocation Counselors

Similar projections are noted in the metropolitan region (i.e., Maryland-Region VI – DC Suburbs; Northern Virginia—Fairfax, Alexandria, Arlington).

A portion of the grant funds have been allocated provide an RSA Scholars program. This program is designed to provide scholarships and book awards to graduate students willing to make a commitment to work for a state VR agency or non-profit rehabilitation agency upon completing the program. The Scholars program intends to include (1) full scholarship (tuition/fees), (2) book awards to cover the entire time in the program, and (3) support to attend at least 2 professional conferences. Scholarship recipients upon graduation must fulfill an employment obligation of 2 years for each academic year of scholarship support. This obligation is satisfied by working in a State/Federal VR system or other non-profit program that serves consumers with disabilities.

Additionally, a majority of the existing personnel employed by DCRSA are in need of retaining/retooling their skills, as mandated by the 2010 DCRSA State Plan policy. This program will provide the basis for them to become certified rehabilitation counselors. The information presented below outlines the estimated number of students per year. The expected capacity of the program will be to serve 30 students per cohort, and the projection assumes full-time students will complete the program in two years (plus summers).

Year One	20 students
Year Two	40 students
Year Three	50 students
Year Four	60 students

The above numbers are based on information provided by DCRSA and projections made by the *Occupational Outlook Handbook (OOH)—2009-2010 Edition*.

## **8. Effect on student development and employment**

Persons who receive the Masters of Arts degree from the Department of Psychology and Counseling will have the knowledge, abilities, and skills required to fill positions in rehabilitation such as job coaches, job placement specialists, vocational evaluators, resident care managers, outreach workers, case managers, social and life skills instructors, independent living skills trainers, therapists, counselors, technicians, and a host of other professional and paraprofessional positions. They will be able to find gainful employment with facilities, agencies and organizations that serve individuals with physical disabilities, developmental disabilities, individuals who are addicted to substances, individuals who have psychiatric disabilities and individuals who have visual and auditory disabilities.

There is an extreme shortage of trained rehabilitation professionals to provide services to consumers with disabilities from underserved populations at all levels. One solution to this problem is to increase the number of well qualified individuals graduating from graduate level programs in rehabilitation.

## **9. Adequacy and qualifications of current faculty and support staff**

The proposed program will utilize existing faculty in the Psychology Program to teach the assessment specific courses (i.e., prefix 1171) and existing in the Counseling Program to teach the counseling specific courses (i.e., prefix 1315). However, based on CORE's requirements, additional faculty are required—both full-time and adjunct “professors of practice.” The program will need an additional four (4) faculty to teach the rehabilitation specific courses (i.e., prefix 1318), to include but not limited to Foundations of Rehabilitation, Psychosocial and Medical Aspects of Disability in Rehabilitation, Practicum, and Internship. Additional personnel will do the following:

- Teach core courses as required by CORE
- Supervise practicum/internship
- Provide overall support for the program

*Program is requesting the following*

- Two Associate Professors: Estimated Salary \$66,064.
- Two Assistant Professors: Estimated Salary \$57,463.

For the first two years of the award period, the grant has allocated funds to hire a Rehabilitation Counseling Program Coordinator. The university will assume the cost of this position at the

conclusion of this 2-year period. As an in-kind contribution to the capacity building grant, the University administration articulated a commitment to gradually provide additional faculty personnel.

## **10. Adequacy of current facilities**

It is projected that additional classroom and laboratories will become available by AY 2011-2012, when Building 52 becomes available. The program will work collaboratively with the Graduate Counseling Program, the University's Health Center and the Office of Disability Services Center (DRC), where space has been allocated for clinical practice purposes. Under the proposed curriculum, the DRC will serve as a site for practicum and internship experiences. These are invaluable pedagogical experiences for the proposed master program students because they are in an academic environment which integrates theory and practice.

Additionally, given our collaborative relationship with the District's RSA agency, classroom space will be allocated for off-campus meetings. As an in-kind contribution to the Rehabilitation Capacity Building Grant, the university has articulated a commitment to provide necessary classroom, office, and clinic space.

## **11. Adequacy of supplies and equipment**

Capacity building grant funds have been allocated to purchase the necessary "start-up" equipment which includes testing kits, instructional/ clinical technology, assessment instruments/packages, and assistive technology instruments. Additionally, counseling laboratory facilities are available for clinical practice.

## **12. Estimated costs, available funds, and probably funding sources**

As mentioned above, in October 2010, the Department of Psychology & Counseling awarded a 5-year, \$1,000,000 Rehabilitation Capacity Building grant from the U.S. Department of Education-Rehabilitation Services Administration. In order to facilitate the successful capacity building efforts at UDC, the costs were calculated to be congruent with capacity building goals and objectives. During the first year, funds are available to engage in capacity building activities which include but are not limited to: establishing a graduate program, attaining accreditation, purchasing psychological equipment, purchasing intuitional professional rehabilitation memberships, purchasing technology, hiring consultants to develop assessment instruments for data collection/program monitoring, purchasing marketing/recruitment materials hiring a program coordinator, and developing a Scholars program. More specifically, during year one, the funds will be used to meet personnel needs, support professional development travel of the Project Director, Program Coordinator and one faculty member as well as covering clinical equipment costs and supplies. The funds will also cover the creation, development and

reproduction of recruitment materials and for the bulk of the five-year project period. As the personnel costs will be assumed by the University, year two will involve funding RSA Scholars. Forty-three percent (\$86,409.00) of the year two funds will be used to support nine RSA Scholars. The funds will also be used to support the travel of the nine RSA Scholars to at least two professional national conferences held both locally and out of the region. Lastly, a small portion of the funds will be used to cover costs for supplies and equipment maintenance. During years three through five, 73 percent (\$436,099.00) of the funds will be used to support 19 RSA Scholars. During these years, the remaining costs are intended to support RSA Scholar travel, local conference registration fees, supplies and equipment maintenance. Subsequent years will involve funding for student support/professional growth and development as well as continued assistance with program and curriculum development and continued recruitment efforts. The costs reasonably support the proposed project which includes all facets of capacity building.

### **13. Adequacy of supportive library and technical resources**

Specific to vocational rehabilitation the library has over 1,300 books and a combination of over 62 journals and e-journals (Appendix C). Additionally, the Rehabilitation Capacity Building grant funds have been allocated to provide additional rehabilitation related periodicals and other library resources.

The periodical databases containing information specifically related to “rehabilitation and counseling” include **PsycINFO** which contains 453 psychology related titles; **Proquest Research Library** with approximately 24 titles such as *Journal of Rehabilitation*, *Journal of Rehabilitation Research and Development*, *International Journal of Rehabilitation Research*, *Addictive Behaviors*, *Psychiatric Rehabilitation Journal*, *Psychological Assessment*, *Journal of Mental Health*, *Journal of Consulting and Clinical Psychology*, *American Journal of Psychotherapy*, *American Journal of Family Therapy*, and the *Journal of Counseling Development*; **EBSCO's Academic Premier** which also contains a significant number of periodical titles such as *Rehabilitation Counseling Bulletin*, *Counseling and Clinical Psychology Journal*, *Counseling and Values*, *Counseling Psychology Quarterly*, *Counseling and Psychotherapy Research*.

## **D. PROPOSED DATE OF IMPLEMENTATION**

The Department of Psychology and Counseling is proposing that the Rehabilitation program be implemented by Fall 2011.

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## **Appendix A: Council of Rehabilitation Education Curriculum Guidelines**

(Included only sections pertinent for program curriculum development)

## **CORE Curriculum Guidelines**

### **SECTION C: General Curriculum Requirements, Knowledge Domains, and Educational Outcomes**

- A. Graduates awarded master's degrees shall have participated in graduate study having earned a minimum of 48 semester hours or 72 quarter hours. In states that require a 60 semester hour program, or 90 quarter hours for licensure for counselors, the program shall identify an additional 12 hours for those students desiring to qualify for licensure. The 12 hours do not have to be offered by the program's department or institution.
- B. If equivalency provisions are used to meet the individual student requirements for graduation, the procedure and rationale for the equivalency provision shall be clearly documented and justified based on meeting the Section C Knowledge areas of the CORE standards. In no case may equivalency provisions result in a program with less than 36 graduate semester or 54 quarter hours, or be used for Section D.2 of these Standards.
- C. The required curriculum of graduate study shall provide for obtaining essential knowledge, skills, and attitudes necessary to function effectively as a professional rehabilitation counselor, responding to the culture and rights of people with disabilities.
- D. Course or unit syllabi must be made available, upon request by students, at the beginning of each new enrollment period and include, at a minimum: course/unit objectives; content areas; texts or required readings; student evaluation criteria; and information on reasonable accommodation process.
- E. The program shall provide ongoing opportunities throughout the course of study for interactive and collaborative experiences with individuals with disabilities in a variety of roles and settings.
- F. The program should make available to applicants, students, faculty, and supervisors information on disability services and reasonable accommodation process. Study units or courses should include, but are not limited to, the following knowledge domains and should provide for the following related outcomes:

#### **C.1 PROFESSIONAL IDENTITY**

##### **Knowledge areas:**

- Rehabilitation counseling Scope of Practice
- History and philosophy of rehabilitation
- Legislation
- Ethics
- Professional credentialing, certification, licensure and accreditation
- Informed consumer choice and consumer empowerment
- Independent living
- Assistive technology
- Public policies
- Advocacy
- Systems knowledge of healthcare, education and rehabilitation
- The ecological perspective

**Outcomes as demonstrated by the ability to:**

- C.1.1 practice rehabilitation counseling in a legal and ethical manner, adhering to the Code of Professional Ethics and Scope of Practice for the profession;
- C.1.2 integrate into one's practice, the history and philosophy of rehabilitation as well as the laws affecting individuals with disabilities including findings, purposes, and policies in current legislation;
- C.1.3 describe, in general, the organizational structure of the rehabilitation, education, and healthcare systems, including public, private-for-profit, and not-for-profit service settings;
- C.1.4 apply in one's practice, the laws and ethical standards affecting rehabilitation counseling in problem-solving and ethical decision-making;
- C.1.5 integrate into practice an awareness of societal issues, trends, public policies, and developments as they relate to rehabilitation;
- C.1.6 create a partnership between consumer and counselor by collaborating in informed consumer review, choice, and personal responsibility in the rehabilitation process;
- C.1.7 apply in one's practice, the principles of disability-related legislation including the rights of persons with disabilities to independence, inclusion, choice and self-determination, empowerment, access, and respect for individual differences;
- C.1.8 educate the public and consumers regarding the rights of people with disabilities under federal and state law;
- C.1.9 articulate the differences in philosophy and the purposes of related counseling disciplines and allied health fields; and
- C.1.10 explain differences among certification, licensure, and accreditation.

**C.2 SOCIAL AND CULTURAL DIVERSITY****Knowledge areas:**

- Family development and dynamics
- Psychological dynamics related to self-identity, self-advocacy, competency, adjustment, and attitude formation
- Sociological dynamics related to self-identity, self-advocacy, competency, adjustment, and attitude formation
- Multicultural awareness and implications for ethical practice
- Diversity issues including cultural, disability, gender, sexual orientation, and aging issues
- Current issues and trends in a diverse society

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- Personal professional development strategies for self-monitoring

**Outcomes as demonstrated by the ability to:**

- C.2.1 practice rehabilitation counseling in a manner that reflects an understanding of psychosocial influences, cultural beliefs and values, and diversity issues that affect adjustment and attitudes of both individuals with disabilities and professional service providers;
- C.2.2 utilize in one's practice an understanding of family systems and the impact of the family on the rehabilitation process;
- C.2.3 articulate an understanding of the dynamics, issues, and trends of the social system in which the individual lives;

- C.2.4 practice in a manner that shows an understanding of the environmental and attitudinal barriers to individuals with disabilities;
- C.2.5 understand individuals' cultural, gender, sexual orientation, aging, and disability differences and integrate this knowledge into practice;
- C.2.6 identify and articulate an understanding of the social, economic, and environmental forces that may present barriers to a consumer's rehabilitation;
- C.2.7 apply psychological and social theory to develop strategies for rehabilitation intervention;
- C.2.8 develop strategies for self-awareness and self-development that will support sensitivity to diversity issues;
- C.2.9 articulate an understanding of the role of ethnic/racial and other diversity characteristics such as spirituality and religion, age, gender, sexual orientation, and socio-economic status in groups, family, and society;
- C.2.10 continuously assess self-awareness and attitudinal aspects of rehabilitation counseling;
- C.2.11 articulate current demographic characteristics and trends as well as their impact on rehabilitation service policy; and
- C.2.12 identify and demonstrate an understanding of stereotypic views toward persons with disabilities and the negative effects of these views on successful completion of the rehabilitation process.

### **C.3 HUMAN GROWTH AND DEVELOPMENT**

#### **Knowledge areas:**

- Developmental theories across the life span
- Physical development
- Emotional development
- Cognitive development
- Behavioral development
- Moral development
- Theories of personality development
- Human sexuality and disability
- Spiritually
- Transition issues related to family, school, employment, aging, and disability
- Social and learning needs of individuals across the life span

- Ethical and legal issues impacting individuals and families related to adjustment and transition

#### **Outcomes as demonstrated by the ability to:**

- C.3.1 articulate a working knowledge of social, psychological, spiritual, and learning needs of individuals at all developmental levels;
- C.3.2 understand the concepts related to learning and personality development, gender and sexual identity, addictive behavior and psychopathology, and the application of these concepts in rehabilitation counseling practice;
- C.3.3 assist the consumer in developing active transition strategies to successfully complete the rehabilitation process; and
- C.3.4 develop approaches that will facilitate enhancement of the consumer's personal development, decision-making abilities, acceptance of responsibility, and quality of life.

## C.4 EMPLOYMENT AND CAREER DEVELOPMENT

### Knowledge areas:

Career development  
 Disability benefits systems including workers' compensation, long-term disability, and social security\ Career counseling  
 Job analysis, work site modification and restructuring, including the application of appropriate technology  
 Transferable skill analysis  
 Computer-based assessment tools  
 Vocational planning and assessment  
 Job and employer development  
 Employer consultation  
 Business/corporate human resource concepts and terminology  
 Workplace culture and environment

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Work conditioning/work hardening  
 Job placement strategies  
 Computer-based job matching systems  
 Follow-up/post employment services  
 Occupational information including labor market trends and the importance of meaningful employment with a career focus  
 Supported employment, job coaching, and natural supports

- Ethical issues in employment

### Outcomes as demonstrated by the ability to:

- C.4.1 articulate and apply career development theories and the importance of work to consumers with whom one works;
- C.4.2 conduct and utilize labor market analyses and apply labor market information to the needs of consumers in one's caseload;
- C.4.3 utilize career/occupational materials and labor market information with the consumer to accomplish vocational planning;
- C.4.4 understand employer practices that affect the employment or return to work of individuals with disabilities and utilize that understanding in facilitating their successful employment;
- C.4.5 explore occupational alternatives and develop career plans in collaboration with the consumer;
- C.4.6 identify the prerequisite experiences, relevant training, and functional capacities needed for career goals of the consumer and facilitate the consumer's understanding of these issues;
- C.4.7 identify the consumer's need for accommodation and facilitate the use of resources to meet those needs;
- C.4.8 apply the techniques of job modification/restructuring and the use of assistive devices to facilitate consumer placement when appropriate;

- C.4.9 assist employers to identify, modify, or eliminate architectural, procedural, and/or attitudinal barriers in facilitating the consumer's successful job placement;
- C.4.10 consult with employers regarding accessibility and issues related to ADA compliance;
- C.4.11 evaluate work activities through the use of job and task analyses and utilize the evaluation in facilitating successful job placement for the consumer;
- C.4.12 assess and resolve job adjustment problems on the part of the consumer through the provision of post-employment services; 28 01.30.2009
- C.4.13 develop job opportunities for consumers through employer contacts;
- C.4.14 apply strategies for consumer job placement and job retention;
- C.4.15 teach the consumer appropriate job seeking, job interviewing, and job retention skills;
- C.4.16 establish follow-up and/or follow-along procedures to maximize an individual's independent functioning through the provision of post-employment services to the consumer;
- C.4.17 facilitate consumer involvement in determining vocational goals and capabilities related to the world of work;
- C.4.18 review medical information with consumers to determine vocational implications of related functional limitations;
- C.4.19 identify transferable skills by analyzing the consumer's work history and functional assets and limitations and utilize these skills in assisting the consumer to achieve successful job placement;
- C.4.20 assess the consumer's readiness for gainful employment and assist the consumer in increasing this readiness;
- C.4.21 provide prospective employers with appropriate information regarding consumer work skills and abilities;
- C.4.22 discuss a consumer's return to work options with the employer;
- C.4.23 use computerized systems for consumer job placement assistance;
- C.4.24 arrange for functional or skill remediation services that will result in successful consumer job placement;
- C.4.25 identify and arrange for educational and training resources that can be utilized by consumers to meet job requirements; and
- C.4.26 provide for work conditioning or work hardening strategies and resources that can be utilized by consumers in facilitating successful job placement.

## **C.5 COUNSELING AND CONSULTATION**

### **Knowledge areas:**

- Counseling and personality theory
- Mental health counseling
- Interviewing and counseling skill development

- Theories and models for consultation
- Assistive technologies
- Vocational consultation
- Supervision theories, models, and techniques
- Consumer empowerment and rights
- Boundaries of confidentiality
- Ethics in the counseling relationship
- Multicultural issues in counseling
- Gender issues in counseling
- Conflict resolution strategies
- Computer-based counseling tools
- Internet resources for rehabilitation counseling

**Outcomes as demonstrated by the ability to:**

- C.5.1 conduct individual counseling sessions with consumers;
- C.5.2 develop and maintain a counseling relationship with consumers;
- C.5.3 establish, in collaboration with the consumer, individual counseling goals and objectives;
- C.5.4 assist the consumer with crisis resolution;
- C.5.5 facilitate the consumer's decision-making and personal responsibility in a manner consistent with the individual's culture and beliefs;
- C.5.6 recommend strategies to assist the consumer in solving identified problems that may impede the rehabilitation process;
- C.5.7 explain the implications of assessment/evaluation results on planning and decision-making;
- C.5.8 demonstrate consultation and supervisory skills on behalf of and with the consumer;
- C.5.9 assist the consumer in developing acceptable work behavior;
- C.5.10 adjust counseling approaches or styles to meet the needs of individual consumers;
- C.5.11 terminate counseling relationships with consumers in a manner that enhances their ability to function independently;
- C.5.12 recognize consumers who demonstrate psychological problems (e.g., depression, suicidal ideation) and refer when appropriate;
- C.5.13 interpret diagnostic information (e.g., vocational and educational tests, records and medical data) to the consumer; 30 01.30.2009
- C.5.14 assist consumers in modifying their lifestyles to accommodate individual functional limitations; and
- C.5.15 assist consumers to successfully deal with situations involving conflict resolution and behavior management.

**C.6 GROUP WORK****Knowledge areas:**

- Group dynamics and counseling theory
- Family dynamics and counseling theory
- Interdisciplinary teamwork
- Group leadership styles and techniques
- Group methods, selection criteria, and evaluation strategies
- Group skills development

**Outcomes as demonstrated by the ability to:**

- C.6.1 articulate the principles of group dynamics with persons with disabilities including group process components, developmental stage theories, group members' roles and behaviors, and therapeutic factors of group work;
- C.6.2 develop group leadership styles and approaches when working with persons with disabilities including characteristics of various types of group leaders and leadership styles;
- C.6.3 facilitate the group process with the individual's family/significant others, including advocates;
- C.6.4 apply approaches used for other types of group work with persons with disabilities including skill groups, psycho-educational groups, and group counseling;
- C.6.5 prepare standards for peer group leaders;
- C.6.6 apply ethical and legal issues to the group counseling process;
- C.6.7 integrate and apply racial/ethnic, cultural, and other diversity characteristics/issues when working with people with disabilities in groups;
- C.6.8 apply theories of group counseling when working with persons with disabilities including commonalities, distinguishing characteristics, and pertinent research and literature; and
- C.6.9 apply group counseling methods including group counselor orientation and behaviors, appropriate referral and selection criteria, and methods of evaluation and effectiveness. 31 01.30.2009

**C.7 ASSESSMENT****Knowledge areas:**

- Assessment resources and methods
- Measurement and statistical concepts
- Selecting and administering the appropriate assessment method (e.g., standardized tests, situational assessment, place-access vs. access-place)
- Obtaining, interpreting, and synthesizing assessment information
- Conducting ecological assessment
- Assistive technology
- Ethical, legal, and cultural implications in assessment

**Outcomes as demonstrated by the ability to:**

- C.7.1 determine an individual's eligibility for rehabilitation services and/or programs;
- C.7.2 facilitate consumer involvement in evaluating the feasibility of rehabilitation or independent living objectives;
- C.7.3 utilize assessment information to determine appropriate services;
- C.7.4 assess the unique strengths, resources, and experiences of an individual including career knowledge and interests;
- C.7.5 evaluate the individual's capabilities to engage in informed choice and to make decisions;
- C.7.6 assess an individual's vocational or independent living skills, aptitudes, interests, and preferences;

- C.7.7 assess an individual's need for rehabilitation engineering/technology services throughout the rehabilitation process;
  - C.7.8 assess the environment and make modifications for reasonable accommodations;
  - C.7.9 use behavioral observations to make inferences about work personality, characteristics, and adjustment;
  - C.7.10 integrate assessment data to describe consumers' assets, limitations, and preferences for rehabilitation planning purposes;
  - C.7.11 interpret test and ecological assessment outcomes to consumers and others; and
  - C.7.12 objectively evaluate the effectiveness of rehabilitation services and outcomes.
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## **C.8 RESEARCH AND PROGRAM EVALUATION**

### **Knowledge areas:**

- Review of clinical rehabilitation literature
- Library research for rehabilitation related current information
- Basic statistics
- Research methods
- Outcome based research

- Ethical, legal, and cultural issues related to research and evaluation

### **Outcomes as demonstrated by the ability to:**

- C.8.1 articulate current knowledge of the field;
- C.8.2 analyze research articles in rehabilitation and related fields;
- C.8.3 apply research literature to practice (e.g., to choose appropriate interventions, to plan assessments, to implement meaningful program evaluation, to perform outcome analysis, to conduct consumer satisfaction studies);
- C.8.4 participate in agency or community research activities, studies, and projects, and explain the importance of such participation to the development of the field;
- C.8.5 use data to support professional opinion and testimony;
- C.8.6 conduct a review of the rehabilitation literature on a given topic or case problem; and
- C.8.7 apply knowledge or ethical, legal, and cultural issues in research and evaluation.

## **C.9 MEDICAL, FUNCTIONAL, AND ENVIRONMENTAL ASPECTS OF DISABILITY**

### **Knowledge areas:**

- The human body system
- Medical terminology
- Medical, functional, environmental and psychosocial aspects of
  - Physical disabilities
  - Psychiatric rehabilitation
  - Substance abuse
  - Cognitive disability
  - Sensory disability
  - Developmental disability
- Assistive technology
- Dual diagnosis and the workplace (The concept of functional capacity )
- Wellness and illness prevention concepts and strategies

**Outcomes as demonstrated by the ability to:**

- C.9.1 explain basic medical aspects of the human body system and disabilities;
- C.9.2 access resources for researching disability information;
- C.9.3 explain functional capacity implications of medical and psychosocial information;
- C.9.4 determine the need for assistive technology and the appropriate intervention resources;
- C.9.5 apply working knowledge of the impact of disability on the individual, the family, and the environment;
- C.9.6 support consumer empowerment and advocacy as it relates to medical treatment;
- C.9.7 utilize existing or acquired information about the existence, onset, severity, progression, and expected duration of an individual's disability; and
- C.9.8 consult with medical professionals regarding functional capacities, prognosis, and treatment plans for consumers.

**C.10 REHABILITATION SERVICES AND RESOURCES****Knowledge areas:**

- Case and caseload management
- Vocational rehabilitation
- Independent living
- School to work transition services
- Psychiatric rehabilitation practice
- Substance abuse treatment and recovery
- Disability management
- Employer-based and disability case management practices
- Design and development of transitional and return-to-work programs
- Forensic rehabilitation and vocational expert practices
- Managed care
- Systems resource information including funding availability
- Utilization of community-based rehabilitation and service coordination
- Consumer advocacy and empowerment
- Marketing rehabilitation services
- Life care planning
- Strategies to develop rapport/referral network
- Case reporting
- Professional advocacy
- Clinical problem-solving skills
- Case recording and documentation
- Interdisciplinary consultation

- Computer applications and technology for caseload

**Outcomes as demonstrated by the ability to:**

- C.10.1 provide the information, education, training, equipment, counseling, and supports that people with disabilities need in order to make effective employment and life-related decisions;
- C.10.2 evaluate the adequacy of existing information for rehabilitation planning;

- C.10.3 integrate cultural, social, economic, disability-related, and environmental factors in rehabilitation planning;
- C.10.4 plan and implement a comprehensive assessment including individual, ecological, and environmental issues (e.g., personality, interest, interpersonal skills, intelligence, and related functional capabilities, educational achievements, work experiences, vocational aptitudes, personal and social adjustment, transferable skills, employment opportunities, physical barriers, ergonomic evaluation, attitudinal factors);
- C.10.5 develop jointly with the consumer, an appropriate rehabilitation plan that utilizes personal and public resources;
- C.10.6 explain insurance claims processing and professional responsibilities in workers' compensation and disability benefits systems;
- C.10.7 identify and plan for the provision of independent living services with consumers;
- C.10.8 establish working relationships and determine mutual responsibilities with other service providers involved with the individual and/or the family, or consumer's advocate, including provision of consumer involvement and choice;
- C.10.9 develop a knowledge base of community resources and refer individuals, when appropriate;
- C.10.10 assist individuals in identifying areas of personal responsibility that will facilitate the rehabilitation process and maximize their vocational rehabilitation potential (e.g., potential fiscal resources to obtain needed services);
- C.10.11 serve as a consultant to other community agencies to advocate for the integration and inclusion of individuals with disabilities within the community; 35
- 01.30.2009C.10.12 market the benefits and availability of rehabilitation services to potential consumers, employers, and the general public;
- C.10.13 identify and plan for the appropriate use of assistive technology including computer-related resources;
- C.10.14 educate prospective employers about the benefits of hiring persons with disabilities including providing technical assistance with regard to reasonable accommodations in conformance with disability-related legislation;
- C.10.15 demonstrate the knowledge of treatment and rehabilitation approaches for substance abuse;
- C.10.16 demonstrate the knowledge of treatment and rehabilitation approaches for consumers with psychiatric disabilities;
- C.10.17 demonstrate knowledge of transition from school to work;
- C.10.18 perform appropriate case documentation;
- C.10.19 apply disability-related policy and legislation to daily rehabilitation practice; and
- C.10.20 utilize resources and consult with other qualified professionals to assist in the effective delivery of service.

## SECTION D: Clinical Experience

D.1 Students shall have a minimum of 100 hours of supervised rehabilitation counseling practicum with at least 40 hours of direct service to persons with disabilities. Practicum students should have experiences that increase their awareness and understanding of the differences in values, beliefs, and behaviors of individuals from diverse populations. This sensitivity will promote cultural competence, foster personal growth, and introduce students to counseling approaches and rehabilitation issues that affect service delivery.

- D.1.1 The practicum shall include instructional experiences (audio-video tapes and individual and group interaction) dealing with rehabilitation counseling concerns, and clinical experiences (on or off-campus) that facilitate the development of basic rehabilitation counseling skills. During the practicum, students will conduct interviews that will be reviewed by a supervisor. If practicum experiences are provided off-campus, there will be direct and periodic communication throughout the semester between the site supervisor and the faculty (e.g., site visits, conference calls, video-conferencing, electronic communication).
- D.1.2 Written expectations, procedures, and policies for practicum shall be contained in a manual or other appropriate document(s) and distributed to students and supervisors. This will include the policy that the practicum is a prerequisite to the supervised rehabilitation counseling clinical internship experience. 36 01.30.2009
- D.1.3. For the practicum, an on-site supervisor must be assigned to provide supervision throughout the practicum experience.
- D.1.4 Practicum experiences shall include an average of one (1) hour per week of individual or 1½ hours per week of group (with no more than 10 students/group) supervision by a program faculty member or qualified individual working in cooperation with a program faculty member.
- D.1.5 When using distance education modalities, practicum supervision may be provided using a variety of methods such as video conferencing, teleconferencing, real time video contact, or others as appropriate.
- D.1.6 In states that have specific practicum supervision requirements for counselor licensure, the program shall make the required supervision experiences consistent with the licensure requirements available to those students desiring to qualify for licensure.
- D.1.7 There shall be a progress review of all students enrolled in a practicum.
- D.1.8 There shall be a written procedure for responding to students who do not demonstrate satisfactory practicum knowledge or clinical skills.
- D.1.9 The individual supervision of five students shall be considered equivalent to the teaching of one course due to the intensive one-on-one instruction and the ongoing evaluation necessary in practicum.

D.2 Students shall have supervised rehabilitation counseling internship activities that include a minimum of 600 hours of applied experience in an agency/program, with at least 240 hours of direct service to individuals with disabilities. Internship students should have experiences that increase their awareness and understanding of the differences in values, beliefs, and behaviors of individuals from diverse populations. This sensitivity will promote cultural competence, foster personal growth, and introduce students to counseling approaches and rehabilitation issues that affect service delivery.

D.2.1 The internship activities shall include the following:

- a. orientation to program components, policies and procedures, introduction to staff and their role and function, identification of the expectations for interns, confidentiality and due process procedures, risk assessment, and the Code of Professional Ethics for Rehabilitation Counselors;
- b. observation of all aspects of the delivery of rehabilitation counseling services, as practiced by the agency or organization, including diverse populations;
- c. work assignments, performing the tasks required of an employed rehabilitation counselor at the agency or organization; and 37 01.30.2009
- d. reporting, including all required academic reports as well as logs, weekly progress reviews, and summaries of activities.

D.2.2 Written expectations, procedures, and policies for the internship activities shall be contained in a manual or other appropriate document(s) and distributed to students and supervisors.

D.2.3 For the internship, an on-site supervisor must be assigned to provide supervision throughout the internship experience.

D.2.4 The internship shall include an evaluation of student performance, including self-evaluation by the student, the field site supervisor, and the faculty supervisor.

D.2.5 Internship experiences shall be carried out under the weekly scheduled supervision of a Certified Rehabilitation Counselor (CRC). The expectations of internship supervision shall be communicated in writing to the on-site supervisor.

D.2.6 The RCE Program shall use internship experience sites that provide rehabilitation counseling services to individuals with disabilities appropriate to the mission of the program.

D.3 Internship experiences shall include an average of one (1) hour per week of individual or 1½ hours per week of group (with no more than 10 students/group) supervision by a program faculty member or qualified individual working in cooperation with a program faculty member.

D.3.1 When using distance education modalities, supervision may be provided using a variety of methods such as video conferencing, teleconferencing, real time video contact, or others as appropriate.

- D.3.2 In states that have specific supervision requirements for counselor licensure, the program shall make the required supervision experiences consistent with the state licensure requirements and available to those students desiring to qualify for licensure.
- D.3.3 There shall be a progress review of all students enrolled in an internship.
- D.3.4 There shall be a written procedure for responding to students who do not demonstrate satisfactory internship knowledge or clinical skills.
- D.3.5 The individual supervision of five students shall be considered equivalent to the teaching of one course due to the intensive, one-on-one instruction and the ongoing evaluation necessary in internship.

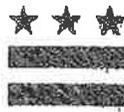
## **Appendix B: Letters of Support**

District of Columbia

Maryland

Virginia

GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DEPARTMENT ON DISABILITY SERVICES



Rehabilitation Services Administration

June 1, 2010

Dr. Lisa Moon  
University of the District of Columbia  
College of Arts and Sciences  
Department of Psychology and Counseling  
4200 Connecticut Avenue, N.W.  
Building 44 Room 200-32-38  
Washington, D.C. 20008

Dear Dr. Moon:

It is with sincere pleasure that I write this letter in support of the efforts of the University of the District of Columbia (UDC) to establish a Rehabilitation Counseling Program. A graduate program at UDC is long overdue. Because UDC is the only publically funded college in the nation's capital, this program has the potential to reach a greater cross-section of the population which seeks to pursue a graduate degree in the rehabilitation field.

Having a graduate program at UDC provides the Department on Disabilities Services/ Rehabilitation Services Administration (DDS/RSA) with increased support for its infra-structure.

DDS/RSA has a continuing need for qualified professionals that can work effectively with our very specialized consumer base. DDS/RSA faces challenges which are not present in other state VR agencies. Our combination of adult literacy issues, mental health concerns and cultural/linguistic diversity make us unique in the field. Having a partner in UDC to train and develop professionals to meet the challenges of our consumers is the key to our success.

DDS/RSA is pleased to have our staff work with UDC as adjunct faculty, to participate on its advisory committee, to supervise it students during internships and to provide practicum sites introducing new students to the field. We will assist UDC in reviewing its curriculum to ensure that it is cutting edge and meeting the needs of emerging disability populations as well as keeping up with changes in the field.

In short, DDS/RSA is an energetic and supportive partner with UDC and desires the development of the RCP. We look forward to the approval of this project. Once funded and approved, we will fully participate in making the RCP at UDC a model program.

Sincerely,

A handwritten signature in cursive script that reads "Roy Albert". The signature is written in black ink and is positioned above the typed name.

Roy Albert, Deputy Director



Nancy S. Grasmick  
State Superintendent of Schools

Robert A. Burns  
Assistant State Superintendent

**Division of Rehabilitation Services**

2301 Argonne Drive · Baltimore, MD 21218 · 410-554-9385 · Toll Free 888-554-0334 · 410-554-9411 TTY/TDD

June 1, 2010

Dr. Eugene Johnson  
Chairman  
University of the District of Columbia  
College of Arts & Sciences  
Department of Psychology and Counseling  
4200 Connecticut Avenue, NW  
Bldg. 44, Room 200-33  
Washington, D.C. 200

Dear Dr. Johnson:

The Division of Rehabilitation Services is pleased to write this letter in support of the efforts of the University of the District of Columbia (UDC) to establish a Rehabilitation Counseling Program. As the only publically funded college in the nation's capital, UDC provides potential through this grant proposal, to reach individuals from diverse backgrounds and cultures who seek to pursue a graduate degree in the rehabilitation field.

The Division is particularly interested in this application and its anticipated ability recruit and retain qualified VR counselors that are in proximity to Prince Georges and Montgomery County where the Division experiences its highest turnover rate of VR professionals. We have a continuing need for qualified professionals that can work effectively with specialized populations including; transitioning youth with disabilities, individuals from diverse cultures and backgrounds, sensory disabilities including those that are blind and visually impaired, deaf, deaf blind, and hearing impaired, acquired brain injury, and psychiatric disabilities.

We are pleased to have our staff work with UDC to participate on its advisory committee, to supervise it students during internships and to provide practicum sites introducing new students to the field. We will assist UDC in reviewing its curriculum to ensure that it is cutting edge and meeting the needs of emerging disability populations as well as keeping up with changes in the field.

The Division looks forward to the collaborative partnership with UDC to train and develop professionals to meet the needs of our consumers.

Sincerely,

Melissa C. Pemberton, MA Ed., CRC  
Staff Specialist Human Resource Development  
Maryland Division of Rehabilitation Services

[www.dors.state.md.us](http://www.dors.state.md.us)



## COMMONWEALTH of VIRGINIA

James A. Rothrock, M.S., L.P.C.  
COMMISSIONER

*Department Of Rehabilitative Services*

June 1, 2010

Ted M. Daniels  
Department of Psychology and Counseling  
College of Arts and Sciences  
University of the District of Columbia  
4200 Connecticut Avenue, N.W.  
Building 44 Room 200-32-38  
Washington, D.C. 20008

Dear Mr. Daniels:

The Virginia Department of Rehabilitative Services (DRS) is pleased to support your application for a Capacity Building grant to enable the University of the District of Columbia (UDC) to establish a Master's degree Program in Rehabilitation Counseling. We understand that you plan to focus on VR agencies and their regional offices in the Washington Metropolitan Area, including Northern Virginia and two Maryland counties.

We would be happy to meet with you to discuss the human resource needs in our VR program, and how we can work together to address our anticipated VR staff development, recruitment and retention needs. Best wishes for a successful grant application!

With best regards, I am

Sincerely,

A handwritten signature in black ink, appearing to read "James A. Rothrock", written over a large, stylized circular flourish.

James A. Rothrock

JAR/klr

## **Appendix C: Library Holdings**

## LIBRARY DOCUMENTS

### BRIEF DESCRIPTION OF THE REHABILITATION AND COUNSELING HOLDINGS

#### **Adequacy of the Collections and Budget for Subscriptions and New Acquisitions**

We believe the scope of the Learning Resources Division (LRD) collections is sufficient to support the needs of the University of the District of Columbia's students and faculty. The library has a collection of over 560,000 monographs, 20,000 media materials, 607,000 microforms, and 670 current periodical subscriptions. Membership in the Washington Research Library Consortium (WRLC) allows our students full use of the libraries of participant institutions (American University, Catholic University of America, Gallaudet University, George Mason University, Georgetown University, Marymount University, George Washington University, and Trinity College). Therefore, in addition to our own collections, students have direct access to a collection of over 5 million monographs, serials, and media material.

#### **Access to Electronic Information**

The core service for electronic information access provided by the Division is **ALADIN**. **ALADIN** is an integrated automation system maintained by the WRLC that contains the shared database of all participant institutions that also provides for online access to databases. **ALADIN** supports direct borrowing among institutions, interlibrary loans, and online delivery of articles and abstracts. It is a web-based system that allows patrons to access information either locally or remotely.

LRD presently offers access to fourteen major online databases. The periodical databases containing information specifically related to "rehabilitation and counseling" include **PsycINFO** which contains 453 psychology related titles; **Proquest Research Library** with approximately 24 titles such as *Journal of Rehabilitation*, *Journal of Rehabilitation Research and Development*, *International Journal of Rehabilitation Research*, *Addictive Behaviors*, *Psychiatric Rehabilitation Journal*, *Psychological Assessment*, *Journal of Mental Health*, *Journal of Consulting and Clinical Psychology*, *American Journal of Psychotherapy*, *American Journal of Family Therapy*, and the *Journal of Counseling Development*; **EBSCO's Academic Premier** which also contains a significant number of periodical titles such as *Rehabilitation Counseling Bulletin*, *Counseling and Clinical Psychology Journal*, *Counseling and Values*, *Counseling Psychology Quarterly*, *Counseling and Psychotherapy Research*.

Full-text books are also available online via **ALADIN internally** and externally. The books cover multiple subjects and are found in the two book databases – Ebrary and NetLibrary.

### **General Information**

The Center for Academic Technology (CAT) maintains the University learning portal, Blackboard, which supports the academic infrastructure, and assists faculty and students with online courses and technology access. A CAT's "help desk" provides assistance on site or remotely.

LRD faculty provides ample and efficient reference service on each of the two floors where most of the collections are housed. A reference collection is maintained and easily identifiable and accessible. The library also participates in the Interlibrary Loan program and as a member of the WRLC participates in a direct loan service among eight participating local institutions. Delivery of materials among member institutions is provided with a 24 hour period and includes electronic delivery of articles.

Library users have access to remote storage that is operated by WRLC. Several thousand titles are housed in those facilities. Due to the daily courier service, those materials are retrieved with little delay.

## **Appendix D: Faculty Résumés**

## Biographical Sketch

**Lisa T. Moon**

### Professional Preparation

University of Southern Mississippi

Counseling Psychology, MA, 1992

University of Southern Mississippi

Counseling Psychology, PhD, 1996

### Professional Appointments

*University of the District of Columbia (UDC)*

2005-present Associate Professor, Clinical Psychology Graduate Program, Dept. of Psychology & Counseling, College of Arts and Sciences

2005-present Coordinator of Clinical Psychology Program, Dept. of Psychology & Counseling

2006-2007 Department Chairperson, Dept. of Psychology & Counseling

*Virginia State University*

1995-2005 Assistant Professor/Associate Professor, Graduate Counseling Program, Department of Educational Leadership, School of Arts and Sciences

1995-2005 Member of the Graduate Faculty, Dept. of Educational Leadership, Counseling Program

### Licenses and Certifications

Licensed Clinical Psychologist, Commonwealth of Virginia, Board of Health Professions, 1999 to present

### Related Publications

none

### Other Significant Publications

Cooke, B. G., Cokley, K., Moon, L. T., Webb, S. C. (2007). Therapeutic Cultural Competence in Theory and Practice Following Hurricane Katrina: Culturally Appropriate Therapeutic Responses to Disaster Relief, *Journal of Race and Policy*, 3, 15-22.

Moon, L.T. (2000). Counseling sexually abused girls: The impact of sex of counselor. *Journal of Child Abuse & Neglect*, 24, 753-765.

Moon, L. T., Wagner, W. G., & Fowler, W. (1993). Counselor preference and anticipated comfort ratings for a clinic sample of sexually abused and non-abused girls. *Journal of Child & Family Studies*, 2, 327-388.

## Biographical Sketch

### Ted M. Daniels

#### Professional Preparation

University of Maryland, College Park  
 University of the District of Columbia  
 George Washington University

Family & Community Development, MS, 1980  
 Public Administration, MPH, 1986  
 Rehabilitation Leadership & Counseling, PhD, 2007

#### Professional Appointments

##### *George Washington University*

2005-present Adjunct Professor, Rehabilitation Counseling Program, George Washington University

##### *Coppin State University*

2007-present Adjunct Professor, Rehabilitation Counseling Program, Coppin State University

##### *District of Columbia Government*

2007-2008 Acting Deputy Director, District of Columbia Department on Disability Services Rehabilitation Services Administration  
 2007-2007 Deputy Administrator for Programs District of Columbia Department on Disability Services Rehabilitation Services Administration  
 2004-2006 Deputy Administrator for Programs District of Columbia Department of Human Services Rehabilitation Services Administration  
 1999-2004 Deputy Administrator District of Columbia Rehabilitation Services Administration  
 1997-1999 Chief Office of Employment Support and Facilities Management Rehabilitation Services Administration  
 1989-1993 Acting Chief of Contracts Office of Contracts and Procurement Rehabilitation Services Administration  
 1986-1997 Executive Director D.C. Committee for the Purchase of Products and Services of the Blind and Other Severely Handicapped Rehabilitation Services Administration

#### Related Publications

Daniels, T. & Mickel, E. (2002). Predicting weekly earnings for consumers with severe disabilities: Implications for welfare reform and vocational rehabilitation. *Journal of Health & Social Policy*, 16, 69-79.

Daniels, T. & Mickel, E. (2002). Predicting weekly earnings for consumers with severe disabilities: Implications for welfare reform and vocational rehabilitation. In S.D. Miller (Ed), *Disability and the Black Community* (pp.69-79). New York: The Hayworth Press.

## Biographical Sketch

### Alejandro Lugo

#### Professional Preparation

Howard University

Psychoeducational Studies/SPED & Counseling, MEd,  
1990

Howard University

Educational Psychology PhD, 2004

#### Professional Appointments

*University of the District of Columbia (UDC)*

2009-present      Assistive Technology/ Rehabilitation Counselor/Visiting Professor,  
University of the District of Columbia, Department of Psychology &  
Counseling and Disability Resource Center

2006-present      Assistant Professor, University of the District of Columbia, Department of  
Psychology & Counseling

*Howard University*

2002-2004

Teaching Assistant & Computer Specialist, Howard University, School of  
Education

*District of Columbia Government*

1988-1993

Vocational Rehabilitation Specialist, District of Columbia Rehabilitation  
Services Administration

#### Licenses and Certifications

- Licensed Professional Counselor, District of Columbia Licensing Board 9/89-Present.
- Board Certified Professional Counselor, American Psychotherapy Association : 02/27/09
- George Washington & Rehabilitation Services Administration Continued Education Program, Foundations of Vocational Rehabilitation, & Counseling 5/92
- Institutional Review Board Certification, Miami University & Howard University, 10/02.
- Case Management Training: Continuing Education Certificate, George Washington University, 6/90.
- American Sign Language Level I: Continuing Ed Program Gallaudet University, 5/91.
- Internet Research Certification: George Washington University, 6/94.
- Doctoral Program, subspecialty in Computer Information Systems & Graphic: Howard University, 05/04.
- Continuing Ed. Certificate, Financing Assistive Technology: George Washington University, 5/93.
- Dreamweaver 4: Federal Government: National Institute on Disability & Rehabilitation Research: Icon Logic Training Services, 02/02.

## **Biographical Sketch**

### **Eugene H. Johnson**

#### **Professional Preparation**

Tuskegee Institute

University of Minnesota

Counseling/Guidance, MS, 1968

Educational Psychology, PhD, 1971

#### **Professional Appointments**

*University of the District of Columbia*

2007-present

Professor and Chairman, Department of Psychology and Counseling,

2002- 2005

Professor and Chairman, Department of Psychology and Counseling

1999-2002

Professor, Department of Psychology and Counseling

1994-1997

Professor Department of Education

1992-1994

Associate Dean, School of Education

1988-1990

Special Assistant to the President

1985-1988

Professor and Chair, Department of Human Resources Development

1982-1985

Professor, Department of Human Resources Development

1979-1982

Associate Vice President for Academic Affairs

1971-1978

Professor and Chairman, Department of Community Education

#### **Licenses and Certifications**

National Certification in Counseling and Rehabilitation

Licensed and Certified as a Professional Counselor by the National Commission on Rehabilitation Counselors.

Licensed Clinical Psychologist State of Maryland #910

Professional Rehabilitation Counseling #578

Commission on Rehabilitation Counselor Certification (CRC) #20927

## **Appendix E: Syllabi for New or Substantially Revised Courses**

**University of the District of Columbia  
College of Arts and Sciences  
Department of Psychology and Counseling  
Masters in Rehabilitation Counseling  
Building 44 – Room 200-35  
(202) 274-7406**

**1318-506 – Rehabilitation Counseling Practicum**

**COURSE DESCRIPTION**

Students supervised by qualified Certified Rehabilitation Counselors (CRC) will complete a 100 hour practicum. Demonstration of counseling skills with individuals with disabilities in a rehabilitation agency or community rehabilitation centers.

**COURSE OBJECTIVE**

The purpose of this course is to provide students with a supervised field experience in a rehabilitation or related human service setting. This course further provides the student with an opportunity to further develop clinical counseling skills, case recording skills, case management skills, and to see the practical application of treatment policy, client services, and counseling/rehabilitation philosophy in a vocational rehabilitation services agency or community-based program. The Practicum course is designed to provide opportunities for students to focus on the application of counseling techniques developed in on-campus laboratory situations.

**PREREQUISITE**

Foundations of Rehabilitation Counseling, Counseling Theories, Techniques of Counseling.

**STUDENT LEARNING OBJECTIVES**

Each student should display the following competencies by the end of the semester:

- a. Learn how to conceptualize client problems and abilities.
- b. Demonstrate competency in the use of counseling theories, techniques and basic counseling skills through supervised counseling experiences.
- c. Solidify theoretical perspectives on counseling.
- d. Refine the basic counseling skills.
- e. Analyze and evaluate one's own personal counseling strengths and weaknesses.

- f. Develop a greater level of sensitivity to diverse ways of thinking.
- g. Recognize and work within professional and personal limitations.
- h. Recognize where the use of referral resources may be necessary and appropriate.
- i. Develop proficiency with the information in the DSM IV.
- j. Conduct and write counseling assessment summaries, treatment and discharge/termination summaries.
- k. Build rapport and a collaborative relationship with the client.
- l. Assist the client select and meet goals.
- m. Utilize counseling strategies for commonly encountered concerns and issues.
- n. Develop an understanding of ethical standards of appropriate professional organizations.
- o. Gain an understanding of multicultural differences and issues with individuals and families.
- p. Gain broader perspectives on many of the issues and topics that may be encountered when practicing in the field.
- q. Utilize constructive feedback from supervisor and instructor to refine rehabilitation counseling skills

#### **REQUIRED TEXT**

Hackney, H. & Cormier, L.S. (2005). *The professional counselor: A process guide to helping* (5th ed.). Allyn and Bacon: Boston, MA.

Ivey, A.E. (2003 or latest ed.). *Intentional interviewing and counseling* (5th ed.) Brooks/Cole: Pacific Grove, CA.

#### **ASSESSMENT/EVALUATION METHODS**

Self-growth experiential activities are associated with this course content. Students are expected to spend a total of 100 hours in an approved setting such as a state office of rehabilitation services, or other agency settings approved by the instructor/supervisor. Students are required to spend a minimum of 40 hours supplying direct services to clients with disabilities.

#### **GRADING SCALE**

Grading:

Points earned from assignments, attendance, participation =20% of the final grade

Points earned from field based experience project = 80% of the final grade

A= 90%-100% of total possible points

B= 80%-89% of total possible points

C= 70%-79% of total possible points

F= below 70% of total possible points

**University of the District of Columbia  
College of Arts and Sciences  
Department of Psychology and Counseling  
Masters in Rehabilitation Counseling  
Building 44 – Room 200-35  
(202) 274-7406**

**1318-509 – Job Development and Placement in Rehabilitation**

**COURSE DESCRIPTION**

Explores occupational information job matching systems and job placement approaches. Focuses on demand-side job development, job-seeking skills training, supported employment, transitional work, and placement techniques, including job analyses, ADA implementation, and labor market surveys. Includes a module on assistive technology.

**COURSE OBJECTIVE**

This course involves both theory and practice in the nature of work and jobs, job selection, job analysis, job modification, job development, and job placement for the counselor working with people with disabilities. The roles and functions, as well as techniques of the rehabilitation counselor in the job placement of persons with significant disabilities, will be examined.

**STUDENT LEARNING OBJECTIVES**

Each student should display the following competencies by the end of the semester:

1. Provide information about the existence of businesses and industries within the community;
2. Understand factors shaping the economy, the nature of work and jobs, and how these changes will influence the employment services needed by persons with disabilities;
3. Be knowledgeable of hiring processes and be able to facilitate consumer knowledge about and skill in navigating the employment process;
4. Identify and contact employers to actively develop and/or identify job opportunities for rehabilitation consumers, especially those from culturally diverse backgrounds;
5. Evaluate job activities through the use of task analysis inventions and job analysis schedules to aid in job modification and restructuring;
6. Develop knowledge and skills of employment strategies and the techniques used in job development and placement (e.g., job analysis, job accommodation, labor market survey, and transferable skills analysis);

7. Assist employers to identify, modify, and/or eliminate architectural procedural and/or attitudinal barriers to the employment and advancement of persons with disabilities;
8. Develop an awareness of career, vocational, educational, occupational and labor market information resources, and career information systems;
9. Gain appropriate job seeking and retention skills, as needed, for competitive employment in integrated work settings;
10. Establishing follow-up and/or follow-along procedures for clients who are in employment.

#### **REQUIRED TEXTS**

Ryan, D. J. (2004). *Job search handbook for people with disabilities*. Indianapolis, IN: JIST Works, Inc.

Szymanski, E. M. & Parker, R. M. (2003). *Work and disability: Issues and strategies in career development and job placement*. Austin, TX: Pro-ed, Inc.

#### **SUPPLEMENTAL TEXTS**

Goren, W.D. (2007). *Understanding the Americans with Disabilities Act* (2<sup>nd</sup> Ed.). Washington, DC: American Bar Association

Department of Labor (1991). *Revised handbook for analyzing jobs*. JIST Works, Inc.

#### **ASSESSMENT/EVALUATION METHODS**

Generally, examinations, projects, field based experience project, topical assignments will be used to assess the knowledge, skills, and abilities of the student. Specific assignments will be determined.

#### **GRADING SCALE**

Grading:

Points earned from examinations, projects = 40% of the final grade

Points earned from examinations, projects = 40% of the final grade

Points earned from assignments, attendance, participation =20% of the final grade

Points earned from field based experience project = 40% of the final grade

A= 90%-100% of total possible points

B= 80%-89% of total possible points

C= 70%-79% of total possible points

F= below 70% of total possible points

## **COURSE OUTLINE**

Models and techniques of job placement

- Supported employment
- Community resources
- Coordination & Referral

Effects of legislation on job placement, equity, and disincentives to employment

Assessment including physical and emotional demands of jobs,

Job analysis

Environmental and attitudinal barriers to career and job placement

Job development, restructuring, and modification

Legal and ethical implications of the job placement process

Follow-up and post-employment services

**University of the District of Columbia  
College of Arts and Sciences  
Department of Psychology and Counseling  
Masters in Rehabilitation Counseling  
Building 44 – Room 200-35  
(202) 274-7406**

**1318-507 – Internship in Rehabilitation Counseling I**

**COURSE DESCRIPTION**

Demonstration of counseling skills in a rehabilitation setting, agencies and community rehabilitation centers with primary supervision by a qualified Certified Rehabilitation Counselor. Students are required to spend significant time within an agency functioning as a professional rehabilitation counselor. Students should complete 300 hours in part I and II totaling 600 hours.

**COURSE OBJECTIVE**

The purpose of this course is to provide students with a supervised clinical field experience in which students provide rehabilitation services in a rehabilitation agency or Community Rehabilitation Program. This it will also provide students with the opportunity to practice the theories, approaches, and skills developed in previous coursework and experiences. The internship experience is an intensive counseling experience that provides the student with the opportunity to perform a variety of counseling activities expected of a rehabilitation counselor (e.g., application of diagnostic and therapeutic skills, documentation, information and referral techniques, intake, staff meetings, and weekly supervision). This course fulfills a clinical requirement for the Master's program and, therefore, concentrates on the acquisition of clinical experience and skills. This course includes a field placement in a setting which provides clinical experiences and on-site supervision and University instructor/supervisor, a minimum of once a week for seminars designed to improve the skills and techniques of rehabilitation counseling interns. Students will learn to expand their use of approaches, theories, and models to better address the needs of their clients.

**PREREQUISITES**

Students must have completed ten (10) program core courses in addition to 1318-508- Practicum Rehabilitation Counseling. Also, a formal Internship Agreement must be completed by the student and the internship on-site supervisor and submitted to the Internship instructor prior to the initial class meeting.

## **STUDENT LEARNING OBJECTIVES**

Each student should display the following competencies by the end of the semester:

1. Provide an opportunity for practical application of clinical skills and implementation of client services in a supervised context with site and university supervisors
2. Create a climate of listening and support to encourage professional growth through field experiences and group supervision (with peers and supervisor)
3. Provide a context for sharing experiences and giving feedback in an immediate and responsive format
4. Understanding of selected topics relevant to rehabilitation counseling and agency counseling settings
5. Demonstrate the qualities of openness, tolerance, acceptance of self and others, genuineness, and self-growth
6. Apply various procedures and practices on the rehabilitation counseling of agency counseling process
7. Understand client needs in rehabilitation counseling or agency counseling settings
8. Understand his/her role as a rehabilitation counseling professional
9. Evaluate personal strengths
10. Apply and communicate professional standards and practice

## **REQUIRED TEXT**

Various readings and journal articles

## **ASSESSMENT/EVALUATION METHODS**

Self-growth experiential activities are associated with this course content. Students are also expected to spend a total of 300 hours in an approved setting such as a state office of rehabilitation services, or other agency settings approved by the instructor/supervisor. Students are required to spend a minimum of 120 hours supplying direct services to clients with disabilities.

## **GRADING SCALE**

Grading:

Points earned from assignments, attendance, participation =20% of the final grade

Points earned from field based experience project = 80% of the final grade

A= 90%-100% of total possible points

B= 80%-89% of total possible points

C= 70%-79% of total possible points

F= below 70% of total possible points

**University of the District of Columbia  
College of Arts and Sciences  
Department of Psychology and Counseling  
Masters in Rehabilitation Counseling  
Building 44 – Room 200-35  
(202) 274-7406**

**1318-508– Internship in Rehabilitation Counseling II**

**COURSE DESCRIPTION**

Demonstration of advanced rehabilitation counseling skills in a rehabilitation setting, agencies and community rehabilitation centers with primary supervision by a qualified Certified Rehabilitation Counselor. Students are required to spend significant time within an agency functioning as a professional rehabilitation counselor. Students will complete 300 hours during Internship I and II totaling 600 hours.

**COURSE OBJECTIVES**

The purpose of this course is to provide students with a supervised clinical field experience in which students provide rehabilitation services in a rehabilitation agency or Community Rehabilitation Program. This it will also provide students with the opportunity to practice the theories, approaches, and skills developed in previous coursework and experiences. The internship experience is an intensive counseling experience that provides the student with the opportunity to perform a variety of counseling activities expected of a rehabilitation counselor (e.g., application of diagnostic and therapeutic skills, documentation, information and referral techniques, intake, staff meetings, and weekly supervision). This course fulfills a clinical requirement for the Master's program and, therefore, concentrates on the acquisition of clinical experience and skills. This course includes a field placement in a setting which provides clinical experiences and on-site supervision and University instructor/supervisor, a minimum of once a week for seminars designed to improve the skills and techniques of rehabilitation counseling interns. Students will learn to expand their use of approaches, theories, and models to better address the needs of their clients.

**PREREQUISITES**

Students must have completed ten (10) program core courses in addition to 1318-508- Practicum Rehabilitation Counseling. Also, a formal Internship Agreement must be completed

by the student and the internship on-site supervisor and submitted to the Internship instructor prior to the initial class meeting.

### **STUDENT LEARNING OBJECTIVES**

Each student should display the following competencies by the end of the semester:

1. Provide an opportunity for practical application of clinical skills and implementation of client services in a supervised context with site and university supervisors.
2. Create a climate of listening and support to encourage professional growth through field experiences and group supervision (with peers and supervisor).
3. Provide a context for sharing experiences and giving feedback in an immediate and responsive format.
4. Understanding of selected topics relevant to rehabilitation counseling and agency counseling settings.
5. Demonstrate the qualities of openness, tolerance, acceptance of self and others, genuineness, and self-growth.
6. Apply various procedures and practices on the rehabilitation counseling of agency counseling process.
7. Understand client needs in rehabilitation counseling or agency counseling settings.
8. Understand his/her role as a rehabilitation counseling professional.
9. Evaluate personal strengths.
10. Apply and communicate professional standards and practice.

### **ASSESSMENT/EVALUATION METHODS**

Self-growth experiential activities are associated with this course content. Students are expected to spend a total of 300 hours in an approved setting such as a state office of rehabilitation services, or other agency settings approved by the instructor/supervisor. Students are required to spend a minimum of 120 hours supplying direct services to clients with disabilities.

### **REQUIRED TEXT**

Various readings and journal articles.

### **GRADING SCALE**

Grading:

Points earned from assignments, attendance, participation =20% of the final grade

Points earned from field based experience project = 80% of the final grade

A= 90%-100% of total possible points

B= 80%-89% of total possible points

C= 70%-79% of total possible points

F= below 70% of total possible points

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**1318-516 – Rehabilitation & Traumatic Brain Injury**

**COURSE DESCRIPTION**

Using a 20-hour field experience component which involves individuals with developmental disabilities in local DRS agencies, this course will review various types of traumatic brain injury and their common physical, cognitive and behavioral consequences. The student will receive information about head injury and be able to discuss common causes of traumatic brain injury, continuum of care, and factors that contribute to the successful rehabilitation and recovery of a person from traumatic brain injury.

**COURSE OBJECTIVE**

This course will examine rehabilitation from the neuropsychological perspective and how this may influence both the injured as well as their families. This course examines neurophysiological, cognitive, neuropsychological, and social/emotional issues associated with traumatic brain injury. The course exemplifies the Scholar-Practitioner Model in that it addresses current literature about traumatic brain injury and assists students in recognizing the link between research and clinical practice.

**PREREQUISITES**

Foundations of Rehabilitation Counseling, Psychosocial & Medical Aspects of Disability in Rehabilitation I & II

**STUDENT LEARNING OBJECTIVES**

Each student should display the following competencies by the end of the semester:

- Identify and name key anatomical areas/structures in the brain, and have an understanding of how these develop both before, and after birth.
- Develop an appreciation of key brain behavior relationships and how these develop throughout childhood and adulthood.
- Comprehend how clinical neuropsychological assessment is used with consumers with traumatic brain injuries.

- Appreciate the neuropsychological aspects/underpinnings of a variety of childhood disorders.
- Define and understand some of the principles of clinical neuropsychological rehabilitation and intervention with consumers who have suffered a traumatic brain injury.
- Understand the neurophysiological consequences of traumas to the head with regard to translational and rotational acceleration, cerebral swelling and edema, hematomas, and increased intracranial pressure.
- Be familiar with pertinent etiological, cultural, psychosocial, and neurological factors associated with traumatic brain injury.
- Be familiar with the characteristics of cognitive-communication disorders resulting from traumatic brain injury and to understand the similarities and differences between cognitive-communication disorders and other developmental or acquired speech, language, or learning difficulties.
- Be familiar with the principles and procedures used in the diagnosis and treatment of communication disorders resulting from traumatic brain injury and to be aware of the impact of changes in intellectual, psychosocial, and behavioral functioning on communicative competence and performance.
- Understand the short- and long-term psychosocial and socio-emotional issues that arise for survivors of traumatic brain injury and their families.
- Recall specific central nervous system disorders.
- Summarize implications for vocational rehabilitation of persons with central nervous system disorders.
- Compare various types of adaptive devices helpful in performing activities of daily living and recreational activities.
- Explain the importance of assistive technology with consumers who have suffered a traumatic brain injury.

#### **REQUIRED TEXT**

Fraser, R. T., & Clemons, D. C. (2000). *Traumatic Brain Injury Rehabilitation: Practical vocational, neuropsychological and psychotherapy Interventions*. CRC Press: Washington, D.C.

Ashley, M (Ed.) (2004). *Traumatic Brain Injury: Rehabilitation treatment and case management*, 2<sup>nd</sup> Edition. CRC Press: Washington, D.C.

Coetzer, R. (2006). *Traumatic Brain Injury: A psychotherapeutic approach to loss and grief*. Nova Science Publisher, Inc.

## ASSESSMENT/EVALUATION METHODS

### EXPERIENCE PROJECT

The Experience Project involves the student with a person with a developmental disability, or an organization serving people with traumatic brain injuries. The project could include interviews, volunteering time, or providing respite to an adult with a traumatic brain injury. A minimum of 10 hours of direct experience is appropriate. Certainly, feel free to do more, and to divide your time between different types of experience. A 5-10 page report, a journal, or other documentation and discussion of your experience is required. You may include a variety of media to document and present your experience. The report should not only document what you did during your contact time, but be an integration of course lessons and concepts into an actual personal, hands-on experience. Tie in relevant information from lecture, discussion, and readings. You must have approval of the experience before doing it. This acts to safeguard your expenditure of time and effort, to be sure it qualifies. You must provide agency verification of your time and activities.

**Other assessment methods to be determined**

### GRADING SCALE

Grading:

Points earned from examinations, projects = 40% of the final grade

Points earned from assignments, attendance, participation = 20% of the final grade

Points earned from field based experience project = 40% of the final grade

A= 90%-100% of total possible points

B= 80%-89% of total possible points

C= 70%-79% of total possible points

F= below 70% of total possible points

### COURSE OUTLINE

**Brain and cognitive development** -- basic concepts of brain anatomy, understanding of brain development, relationship between brain development and cognitive development, primary and secondary mechanisms of traumatic brain injury

**Neuropsychological assessment** -- principles underlying neuropsychological assessment, understand the tools used to assess cognition, language, understand the principles of language and cognitive assessment

**Demographic information describing occurrence patterns and at-risk populations**

**Stages of Recovery**

**Rehabilitation and intervention** – intervention and rehabilitation issues based on different models of rehabilitation, cognitive retraining, community reintegration, family adjustment issues

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**1318-515 – Developmental Disabilities in Rehabilitation**

**COURSE DESCRIPTION**

Using a 20-hour field experience component which involves individuals with developmental disabilities in local DRS agencies, this course provides an opportunity for students to better understand the unique challenges of individuals with developmental disabilities as well as to learn about the ways in which rehabilitation adapt to meet these challenges. The course utilizes a life span approach to increase awareness and sensitivity about the variety of issues an individual with a developmental disability and their family may encounter.

**COURSE OBJECTIVE**

Overview of definition, identification, classification, and etiology of mental retardation, autism spectrum disorders, learning disabilities, behavior disorders, and other disabilities identified under the Individuals with Disabilities in Education Act.

**PREREQUISITES**

Foundations of Rehabilitation Counseling, Psychosocial & Medical Aspects of Disability in Rehabilitation I & II

**STUDENT LEARNING OBJECTIVES**

Each student should display the following competencies by the end of the semester:

- a) describe the fundamental views regarding definition and etiology of persons with developmental and intellectual disabilities, with emphasis on the effects of sociopolitical and cultural factors.
- b) define the 3 disabilities as identified under the Individuals with Disabilities in Education Act (IDEA) relevant to developmental disabilities: ID/MR, Autism, Aspergers, Childhood Disintegrative Disorder, and other Pervasive Developmental Disorders
- c) describe major etiological factors associated with developmental and intellectual disabilities.

- d) identify ways in which cultural factors influence the identification and education of persons with developmental disabilities.
- e) identify various assistive technologies needed by people with disabilities
- f) compare various types of adaptive devices helpful in performing activities of daily living and recreational activities.
- g) explain the importance of assistive technology
- h) differentiate between mild and severe developmental disabilities.

### REQUIRED TEXT

Guralnick, M. J. (2000), *Interdisciplinary clinical assessment of young children with developmental disabilities*. Baltimore: Paul H. Brookes Publishing Company.

Accardo, P.J., Whitman, B.Y. (2002). *Dictionary of developmental disabilities terminology* (2nd ed.). Baltimore, MD: Paul H. Brookes Publishing Company.

Batshaw, M.L. (2002). *Children with disabilities* (5th ed.). Baltimore, MD: Paul H. Brookes Publishing Company.

### SUPPLEMENTAL READINGS

Iovannone, R., Dunlap, G., Huber, H., & Kincaid, D. (2003). Effective educational practices for students with autism spectrum disorders. *Focus on Autism and Other Developmental Disabilities, 18* (3), 150-165.

Rocha, M. L., Schreibman, L., & Stahmer, A. C. (2007). Effectiveness of training parents to teach joint attention in children with autism. *Journal of Early Intervention, 29* (2), 154-172.

Simpson, R. L., (2005). Evidence-based practices and students with autism spectrum disorders. *Focus on autism and other developmental disabilities, 20* (3), 140-149.

### ASSESSMENT/EVALUATION METHODS

#### EXPERIENCE PROJECT -

The Experience Project involves the student with a person with a developmental disability, or an organization serving people with developmental disabilities. The project could include interviews, volunteering time, providing respite or sitting for a child/youth with a developmental disability, or some other activity that provides direct encounter and experience

with a person or people labeled "developmentally disabled." A minimum of 8 hours of direct experience is appropriate. Certainly, feel free to do more, and to divide your time between different types of experience. A 5-10 page report, a journal, or other documentation and discussion of your experience is required. You may include a variety of media to document and present your experience. The report should not only document what you did during your contact time, but be an integration of course lessons and concepts into an actual personal, hands-on experience. Tie in relevant information from lecture, discussion, and readings. You must have approval of the experience before doing it. This acts to safeguard your expenditure of time and effort, to be sure it qualifies. You must provide agency verification of your time and activities.

### **GRADING SCALE**

Grading:

Points earned from examinations, projects = 40% of the final grade

Points earned from assignments, attendance, participation =20% of the final grade

Points earned from field based experience project = 40% of the final grade

A= 90%-100% of total possible points

B= 80%-89% of total possible points

C= 70%-79% of total possible points

F= below 70% of total possible points

### **COURSE OUTLINE**

- **Typical Developmental Process**
- **Causes and Prevention of Developmental Disabilities**
- **Referral Process**
- **Placement options**
- **Family Impact**
- **Intellectual disabilities – Etiology, characteristics**
- **Autism Spectrum disorders – Etiology, characteristics**
- **Other Pervasive Developmental Disorders**
- **Transition – School, Work, Vocational Programs for Individuals with Developmental Disabilities**
- **Community Living Options**
- **Assistive Technology**

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**1318-518 – Rehabilitation, Transition & the Education Setting**

**COURSE DESCRIPTION**

Using a 20-hour field experience component which involves visiting sites that prepare individuals with disabilities to enter the post-school environment, this course provides an opportunity for students to better understand the unique challenges of individuals with educational disabilities and transition challenges. A key focus will be on the vocational choices, training and education available to young adults with educational disabilities as they make the transition into adulthood. Another key component will focus on differentiating the legal requirements of IDEA and ADA.

**COURSE OBJECTIVE**

This course will provide an overview of definition, identification, classification, and etiology of intellectual disabilities, learning disabilities, pervasive developmental disorders, communication disorders, and the five other disabilities (i.e., visual impairment, auditory impairments, emotional disabilities, orthopedic impairment, other health impairments, identified under the Individuals with Disabilities in Education Act. This course is also designed to examine those influences on the provision of high quality educational services to students who are confined, committed or selectively placed in alternative educational settings. For the purpose of this course, alternative settings will be defined as juvenile correctional facilities, day treatment and residential schools, and other non-traditional special schools for students with emotional and behavioral needs.

**PREREQUISITES**

Foundations of Rehabilitation Counseling, Psychosocial & Medical Aspects of Disability in Rehabilitation I & II, Techniques of Counseling

## STUDENT LEARNING OBJECTIVES

Each student should display the following competencies by the end of the semester:

- a) describe major etiological factors associated with educational disabilities.
- b) describe major learning characteristics of persons with disabilities.
- c) compare likenesses and differences of learning characteristics between the various disabilities identified under IDEA.
- d) identify ways in which cultural factors influence the identification and education of persons with disabilities.
- e) describe the prevailing views regarding definition and etiology of persons with disabilities, with emphasis on the effects of sociopolitical and cultural factors.
- f) define the 13 disabilities as identified under the Individuals with Disabilities in Education Act (IDEA) relevant to developmental disabilities: Learning Disabilities, Emotional or Behavioral Disorders, Communication Disorders, Hearing Impairments, Visual Impairments, Physical and Health Disorders.
- g) identify various assistive technologies needed by people with educational disabilities.
- h) describe the special education process and placement options together with inclusion.
- i) articulate well-developed positions on topics germane to the current treatment of students with disabilities in alternative settings.
- j) describe empirically sound interventions for the education and treatment of students with emotional and behavioral disabilities.
- k) demonstrates knowledge of P.L. 94-142; P.L. 99.457, P.L. 101-476 (IDEA), and Section 504 of the Rehabilitation Act.
- l) evaluate the effectiveness of rehabilitation services and outcomes
- m) assess a student's vocational and independent living skills, aptitudes, interests, and preferences.
- n) integrate assessment data to describe student's assets, limitations, and preferences for rehabilitation planning purposes.

## REQUIRED TEXT

Sitlington, P. L., Neubert, D. A., & Clark, G. M. (2009). *Transition Education and Services for Students with Disabilities* (5<sup>th</sup> ed.). Prentice Hall: Boston, MA.

Miller, R. J., Lombard, R. C. & Corbey, S. A. (2007). *Transition Assessment: Planning transition and IEP development for youth with mild to moderate disabilities*. Pearson Education: Boston, MA.

## **ASSESSMENT/EVALUATION METHODS**

Generally, examinations, projects, field based experience project, topical assignments will be used to assess the knowledge, skills, and abilities of the student. Specific assignments will be determined.

## **GRADING SCALE**

Grading:

Points earned from examinations, projects = 40% of the final grade

Points earned from assignments, attendance, participation =20% of the final grade

Points earned from field based experience project = 40% of the final grade

A= 90%-100% of total possible points

B= 80%-89% of total possible points

C= 70%-79% of total possible points

F= below 70% of total possible points

## **COURSE OUTLINE**

- Special Education Process
- Referral Process
- Placement options
- LD – Etiology, characteristics
- ED – etiology, characteristics
- Communication Disorders – etiology, characteristics
- Hearing Impairments – etiology, characteristics
- Visual Impairments
- Physical/Health Impairments
- Impact on Education
- School to Work Transition Process
- Assistive technology for academic deficits
- Augmentative communication

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**1318-510 – Psychosocial and Medical Aspects of Disability in Rehabilitation Counseling II**

**COURSE DESCRIPTION**

Part II focuses on the psychosocial and psychological aspects of medical conditions. Covers cardiovascular, respiratory, renal, gastrointestinal, musculoskeletal, blood/immune systems, endocrine and dermatologic conditions disability. Emphasizes functional limitations, intervention resources, contributions of medical and allied health professions; implications of adjustment to disabling medical conditions.

**COURSE OBJECTIVE**

This course is designed to provide an overview of medical terminology and anatomy and physiology of the organ system; describe major diseases and associated etiologies, pathologies, and disabilities; delineate the diagnosis and prognosis of major injuries and disabling conditions; and outline the vocational implications. Upon successful completion of this course, the students will be able to read and understand medical reports; assess functional abilities and transferable skills required to develop a rehabilitation plan; communicate effectively with medical professionals and health care workers; and understand the dynamics of adjustment to disabilities, and the psychosocial impact of disability. This course is designed for human services practitioners who need a basic understanding of human anatomy and physiology, diseases and the functional implications.

**PREREQUISITES**

Foundations of Rehabilitation Counseling, Psychosocial & Medical Aspects of Disability in Rehabilitation I

## STUDENT LEARNING OBJECTIVES

Each student should display the following competencies by the end of the semester:

1. Present an overview of human anatomy and physiology, including the primary organ systems.
2. Describe the etiology and pathology of diseases, injuries, and disabilities affecting human anatomy and the organ systems.
3. Describe the diagnosis and prognosis of disabling conditions which results from injuries or diseases of the bodily systems.
4. Recognize the important role that psychosocial factors play in determining the functional capacity of individuals with chronic illnesses and disabilities.
5. Describe the functional and vocational implications of various impairments.
6. Address the prevalence and impact of disease, disability and medical conditions on persons with disabilities from diverse populations.
7. Become familiar with medical terminology, common prefixes and suffixes relating to chronic medical and psychiatric illnesses.
8. Differentiate between the "medical model" and the "international classification of functioning, disability, and health" model as explanatory for conceptualizing health.
9. Review intellectual, developmental, psychiatric, substance abuse, visual and hearing disabilities.
10. Review treatment and management of various chronic illnesses and disabilities.
11. Describe the vocational aspects of chronic illnesses in the management of chronic illness and disabilities.

### REQUIRED TEXT

Falvo, D. R. (2009). *Medical and Psychosocial Aspects of Chronic Illness and Disability* (4th Ed.). Chapel Hill, NC: Jones and Bartlett.

### SUPPLEMENTAL TEXTS

*Medical Economics Co. (2001). Physician's desk reference* (55<sup>th</sup> Ed.). Montvale, NJ.

Beers, M. H., & Barlow, R. (Eds.). (1999). *The Merk Manual* (17thth Ed.). Merck Research Laboratories: Rahway, NJ:

Thomas, C.L. & Venes D. (Eds.). 2001). *Taber's cyclopedia medical dictionary* (19<sup>th</sup> Ed.). F.A. Davis Company: Philadelphia, PA.

American Psychiatric Association (2001). *Diagnostic and Statistical Manual of Mental Disorders IV*, American Psychiatric Association (4<sup>th</sup> ed.), Text Revision.

### **ASSESSMENT/EVALUATION METHODS**

Generally, examinations, projects, field based experience project, topical assignments will be used to assess the knowledge, skills, and abilities of the student. Specific assignments will be determined.

### **GRADING SCALE**

Grading:

Points earned from examinations, projects = 40% of the final grade

Points earned from assignments, attendance, participation =20% of the final grade

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**1318-517 – Rehabilitation & Psychiatric Disabilities**

**COURSE DESCRIPTION**

Using a 20-hour field experience component which involves individuals with psychiatric disabilities in local DRS agencies, this course provides an overview of psychiatric disability and rehabilitation approaches, as well as reviewing current and evolving evidence-based practices in employment of individuals with psychiatric disabilities, including supported employment.

**COURSE OBJECTIVE**

This course is designed to introduce students to the field of psychiatric rehabilitation and the rehabilitation of individuals with chronic and/or severe mental illness. Basic terminology, psychiatric constructs, techniques, consumer empowerment, family intervention, cross-cultural issues, recovery and reintegration within the community topics will be presented as it relates to rehabilitation consumers with psychiatric disabilities. Ethical considerations regarding rehabilitation will be discussed. This course examines evidence-based practices in helping people with severe mental illness achieve optimal community integration, taking into consideration psychosocial interventions, medications, and financing schemes. This course is designed to seek out the quality research-based evidence that illustrate how to implement humane, practical, innovative, practical, feasible, culturally competent, cost-effective, and replicable services.

**PREREQUISITES**

Foundations of Rehabilitation Counseling, Psychosocial & Medical Aspects of Disability in Rehabilitation I & II, Techniques of Counseling

**STUDENT LEARNING OBJECTIVES**

Each student should display the following competencies by the end of the semester:

- a. Demonstrate an in-depth understanding of the facts, concepts, and principles underlying and guiding the growth of the field of psychiatric rehabilitation.

- b. Demonstrate knowledge of the state the mission and philosophy of psychiatric rehabilitation.
- c. Describe the psychiatric rehabilitation process.
- d. Gain exposure to the application of psychiatric rehabilitation in mental-health systems and programs.
- e. Know the major ethical issues surrounding the practice of rehabilitation counseling with persons with mental health issues.
- f. Demonstrate a basic understanding of the Diagnostic and Statistical
- g. Manual of Mental Disorders to include a basic understanding of the primary approach toward classification of mental illness and underlying symptoms associated with specific categories.
- h. Identify key implementation issues for psychiatric rehabilitation.
- i. Demonstrate how to implement the psychiatric rehabilitation process
- j. Understand the complications of dual diagnosis, particularly the comorbid occurrence of substance abuse problems.
- k. Demonstrate knowledge of the major ethical issues surrounding the practice of rehabilitation counseling with persons with mental health issues.
- l. Recognize the service-system issues and impediments to the growth of consumers with psychiatric disabilities.
- m. Become involved in the issues surrounding the lives of individuals with severe mental illness through exposure and experiences in the community.
- n. Gain an understanding various programming models and service-system issues.
- o. Explore the effect of stigma on treatment paradigms toward developing a personal philosophy and approach to working with the process of rehabilitation among individuals with severe mental illness.
- p. Gained insight into the roles of the individual, his/her family, and the rehabilitation counselor in promoting change and stabilization.

#### REQUIRED TEXTS

- Pratt, C. W., Gill, K. J., Barrett, N. M., & Roberts, M. M. (2007). Psychiatric Rehabilitation, 2<sup>nd</sup> ed. Amsterdam: Academic Press.
- Corrigan, P.W., Mueser, K.T., Bond, G.R., Drake, R.E., & Solomon, P. (2008). Principles and practices of psychiatric rehabilitation. New York: Guilford.
- Fischler, G. & Booth, N. (1999). Vocational Impact of Psychiatric Disorders: A guideline for rehabilitation professionals. Gaithersburg, MD: Aspen Publishers, Inc.

## ASSESSMENT/EVALUATION METHODS

### **Critique of a popular media story**

Choose an account regarding a person or persons with mental illness from any communication medium (i.e., newspaper, magazine, television broadcast, internet, etc.). Submit a three to four page review, covering the following areas:

1. Publication information (Author - if available, Title, Source, Date, etc.).
2. A brief overview of the content.
3. Implications of account for person with mental illness and society.
4. Your reaction to the account.

### **Chapter presentation**

Each student will select 1 chapter from the textbook and prepare a presentation not about the content of the chapter but about the application of the material to professional work. Students will prepare an outline (aim for 2-3 pages in an outline form)--use of a PowerPoint slides are encouraged followed with the presentation of these materials in class for approximately 15-20 minutes.

### **Case study interview & presentation**

Students will interview two individuals with a psychiatric disability, who has agreed to be interviewed and who has signed a consent form. This interview should last a minimum of half an hour. Each student will complete a classroom presentation where they will share the results of their interview process and the results for 10-15 minutes in class. General interview content will be provided.

### **Case study report**

Students will write a 5-7 page case study report based on your interview. Use the following framework: present status (demographics, e.g.—gender, ethnicity, education), socioeconomic and family status, disability-related information, work history, short-term and long-term goals, and therapeutic challenges.

### **Field trip report**

Each student will find and visit a facility that assists individuals with psychiatric disabilities and interview an employee for 10-15 minutes. Each student will be responsible for submitting a written 2-3 page report on your impressions, the visit and a summarization of interview.

### **Experience Conceptual Report**

Part I -- Write a one-page description of psychiatric rehabilitation, emphasizing information that is critical to the assigned agency you visited. For example, if the assigned agency uses a

predominantly treatment-oriented approach, the description of psychiatric rehabilitation might focus on principles and values. On the other hand, if the assigned agency is very sophisticated in the use of psychiatric rehabilitation, students may want to emphasize the strengths that you observe in practice.

Part II -- Prepare an agency assessment, evaluating the degree to which your assigned agency implements psychiatric rehabilitation. Be sure to include several concrete observable examples of implementation strengths and deficits.

Part III -- Describe one individual who uses the services of your assigned agency. The individual should be someone with whom you have interacted. Be sure to include information relevant to the individual's rehabilitation and recovery.

Part IV -- Provide a brief description of any questions that you have about psychiatric rehabilitation, identify at least one personal strength and one personal weakness in your own attitudes, knowledge, and skills related to implementing psychiatric rehabilitation.

### Final Project

The final project is designed to allow students to demonstrate an understanding of psychiatric rehabilitation. The implementation might be with a single individual who is in need of psychiatric rehabilitation services, or it might involve providing services to a group of individuals. Alternatively, students might implement a staff development project, a program evaluation, or a demonstration of a new service delivery method or model. Ideally, the project will demonstrate understanding of all aspects of psychiatric rehabilitation, as students have learned through the specialization courses. In designing the project, students should review materials from topics reviewed in class, including details about the psychiatric rehabilitation assistive technology. Students should attend to the principles related to psychosocial rehabilitation, consumer involvement, multicultural competency, ethics, language use, and any other areas that have been covered in the coursework. Consider challenges to implementation at the individual, program, and system levels. Discuss any barriers encountered with the project and explore how the experience might generalize to other situations creating a program or providing services or implementing change might be possible. Each student will summarize which will reference psychiatric rehabilitation principles, best practices, and any unique circumstances surrounding the project.

## GRADING SCALE

Grading:

Points earned from examinations, projects = 40% of the final grade

Points earned from assignments, attendance, participation =20% of the final grade

Points earned from field based experience project = 40% of the final grade

A= 90%-100% of total possible points

B= 80%-89% of total possible points

C= 70%-79% of total possible points

F= below 70% of total possible points

## COURSE OUTLINE

Major Clinical Disorders

Mood

Anxiety

Cognitive Disorders

Schizophrenia/Other Psychotic Disorders

Clinical Disorders Due to General Medical Disorders

Substance Dependence and Abuse

Somatoform Disorders

Factitious Disorders

Psychopharmacology

Dual Diagnosis

Community Living, Family Psychoeducation, and Social Skills Training

Job Placement of Individuals with Psychiatric Disabilities

Job Placement of Individuals with Substance Abuse

## **Appendix F: CORE & UDC's proposed RCP curriculum alignment**

CORE STANDARDS & GUIDELINES	UDC REHABILITATION CNSLNG PROGRAM (RCP)
<p data-bbox="199 281 810 308"><b>PROFESSIONAL IDENTITY AND ETHICAL BEHAVIOR</b></p> <p data-bbox="199 308 810 380">Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: <a href="#">As demonstrated by the ability to:</a></p> <p data-bbox="199 407 396 434"><b>Knowledge domains:</b></p> <p data-bbox="199 455 651 483"><b>C.1.1 Rehabilitation counseling scope of practice</b></p> <p data-bbox="199 504 764 552">C.1.1.a. explain professional roles, purposes, and relationships of other human service and counseling/psychological providers.</p> <p data-bbox="199 575 776 644">C.1.1.b. articulate the principles of independence, inclusion, choice and self-determination, empowerment, access, and respect for individual differences.</p> <p data-bbox="199 669 712 697"><b>C.1.2 History, systems, and philosophy of rehabilitation</b></p> <p data-bbox="199 720 773 789">C.1.2.a. integrate into one's practice, the history and philosophy of rehabilitation as well as the laws affecting individuals with disabilities.</p> <p data-bbox="199 814 773 884">C.1.2.b. describe, in general, the organizational structure of the rehabilitation, education, and healthcare systems, including public, private-for-profit, and not-for-profit service settings.</p> <p data-bbox="199 909 792 957">C.1.2.c. explain the role and values of independent living philosophy for individuals with a disability.</p> <p data-bbox="199 982 667 1010"><b>C.1.3 Legislation related to people with disabilities</b></p> <p data-bbox="199 1033 802 1102">C.1.3.a. apply the principles of disability-related legislation including the rights of people with disabilities to the practice of rehabilitation counseling.</p> <p data-bbox="199 1127 321 1155"><b>C.1.4 Ethics</b></p> <p data-bbox="199 1178 773 1247">C.1.4 a. practice rehabilitation counseling in a legal and ethical manner, adhering to the Code of Professional Ethics and Scope of Practice for the profession.</p> <p data-bbox="199 1272 751 1323"><b>C.1.5 Professional credentialing, certification, licensure and accreditation</b></p> <p data-bbox="199 1346 756 1394">C.1.5.a. explain differences between certification, licensure, and accreditation.</p> <p data-bbox="199 1419 773 1446"><b>C.1.6 Informed consumer choice and consumer empowerment</b></p> <p data-bbox="199 1470 740 1539">C.1.6.a. integrate into practice an awareness of societal issues, trends, public policies, and developments as they relate to rehabilitation.</p> <p data-bbox="199 1564 792 1612">C.1.6.b. articulate the value of consumer empowerment, choice, and personal responsibility in the rehabilitation process.</p> <p data-bbox="199 1638 737 1665"><b>C.1.7 Public policies, attitudinal barriers, and accessibility</b></p> <p data-bbox="199 1688 704 1736">C.1.7.a. assist employers to identify, modify, or eliminate, architectural, procedural, and/or attitudinal barriers.</p> <p data-bbox="199 1761 350 1789"><b>C.1.8 Advocacy</b></p> <p data-bbox="199 1812 802 1881">C.1.8.a. educate the public and individuals with a disability regarding the role of advocacy and rights of people with disabilities under federal and state law.</p>	<p data-bbox="826 281 1330 308"><b>1318-500 Foundations of Rehabilitation Counseling (3)</b></p> <p data-bbox="826 308 1373 375">Examines the history, philosophy, and legislation related to the development of the field. Focus is on research findings, current policies, government entities, and ethical issues.</p>

<b>CORE</b>	UDC RCP
<b>C.2 PSYCHOSOCIAL ASPECTS OF DISABILITY AND CULTURAL DIVERSITY</b>	<b>1315-513 Cultural Diversity Issues and Multicultural Counseling (3)</b>
<p>Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: <a href="#">As demonstrated by the ability to:</a></p> <p><b>Knowledge domains:</b></p> <p><b>C.2.1 Sociological dynamics related to self-advocacy, environmental influences, and attitude formation</b></p> <p>C.2.1.a. identify and articulate an understanding of the social, economic, and environmental forces that may present barriers to a consumer's rehabilitation.</p> <p>C.2.1.b. identify strategies to reduce attitudinal barriers affecting people with disabilities.</p> <p><b>C.2.2 Psychological dynamics related to self-identity, growth, and adjustment</b></p> <p>C.2.2.a. identify strategies for self-awareness and self-development that will promote coping and adjustment to disability.</p> <p>C.2.2.b. identify and demonstrate an understanding of stereotypic views toward individuals with a disability and the negative effects of these views on successful completion of the rehabilitation outcomes.</p> <p>C.2.2.c. explain adjustment stages and developmental issues that influence adjustment to disability.</p> <p><b>C.2.3 Implications of cultural and individual diversity including cultural, disability, gender, sexual orientation, and aging issues</b></p> <p>C.2.3.a. provide rehabilitation counseling services in a manner that reflects an understanding of psychosocial influences, cultural beliefs and values, and diversity issues that may affect the rehabilitation process.</p> <p>C.2.3.b. identify the influences of cultural, gender, sexual orientation, aging, and disability differences and integrate this knowledge into practice.</p> <p>C.2.3.c. articulate an understanding of the role of ethnic/racial and other diversity characteristics such as spirituality and religion, and socio-economic status in groups, family, and society.</p>	<p>Reviews counseling theories and the appropriateness of each for counseling minorities: the aged, handicapped, gifted, mentally disabled, women and members of racial and ethnic groups.</p>

CORE	UDC RCP
<p><b>C.3 HUMAN GROWTH AND DEVELOPMENT</b></p> <p>Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: <a href="#">As demonstrated by the ability to:</a></p> <p><b>Knowledge domains:</b></p> <p><b>C.3.1 Human growth and development across the life span</b></p> <p>C.3.1.a. articulate a working knowledge of human development and the needs of individuals with disabilities across the life span.</p> <p>C.3.1.b. describe and implement approaches that enhance personal development, decision-making abilities, personal responsibility, and quality of life of individuals with a disability.</p> <p><b>C.3.2 Individual and family response to disability</b></p> <p>C.3.2.a. assist the development of transition strategies to successfully complete the rehabilitation process.</p> <p>C.3.2.b. recognize the influence of family as individuals with disabilities grow and learn.</p> <p>C.3.2.c. demonstrate counselor sensitivity to stressors and the role of positive attitudes in responding to coping barriers and challenges.</p> <p><b>C.3.3 Theories of personality development</b></p> <p>C.3.3.a. describe and explain established theories of personality development.</p> <p>C.3.3.b. identify developmental concepts and processes related to personality development and apply them to rehabilitation counseling practice.</p> <p><b>C.3.4 Human sexuality and disability</b></p> <p>C.3.4.a. identify impact that different disabilities can have on human sexuality.</p> <p>C.3.4.b. discuss sexuality issues with individuals with a disability as part of the rehabilitation process.</p> <p><b>C.3.5 Learning styles and strategies</b></p> <p>C.3.5.a. develop rehabilitation plans that address individual learning styles and strengths of individuals with a disability.</p>	<p><b>1171-537 Advanced Developmental Psychology (3)</b></p> <p>Explores major theories of human development. Utilizes the lifespan perspective to explore the interrelationship of physical, cognitive, social, and emotional development at every stage from conception to death. Emphasizes the influence of social, cultural, and individual experiences in life stage transitions.</p>

CORE	UDC RCP
<p><b>C.4 EMPLOYMENT AND CAREER DEVELOPMENT</b></p> <p>Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: <a href="#">As demonstrated by the ability to:</a></p> <p><b>Knowledge domains:</b></p> <p><b>C. 4.1 Disability benefits systems including workers' compensation, long-term disability, and social security.</b></p> <p>C.4.1.a. demonstrate understanding of various public and private disability benefits systems and the influence on rehabilitation, independent living, and employment.</p> <p>C.4.1.b. explain the requirements of benefits available to people with disabilities through systems such as workers' compensation, long-term disability insurance, and social security.</p> <p><b>C. 4.2 Job analysis, transferable skills analysis, work site modification and restructuring</b></p> <p>C.4.2.a. Utilize job and task analyses methodology to determine essential functions of jobs for employment planning and placement, worksite modifications or job restructuring.</p> <p>C.4.2.b. apply the techniques of job modification/restructuring and the use of assistive devices to facilitate placement of people with disabilities.</p> <p>C.4.2.c. apply transferable skills analysis methodology to identify alternative vocational and occupational options given the work history and residual functional capacities of individuals with a disability.</p> <p><b>C. 4.3 Career counseling, career exploration, and vocational planning</b></p> <p>C.4.3.a. provide career counseling utilizing appropriate approaches and techniques.</p> <p>C.4.3.b. utilize career/occupational materials to assist the individual with a disability in vocational planning.</p> <p>4.3.c. facilitate involvement in vocational planning and career exploration.</p> <p><b>C. 4.4 Job readiness development</b></p> <p>C.4.4.a. assess individuals with a disability' readiness for gainful employment and assist individuals with a disability in increasing this readiness.</p> <p><b>C. 4.5 Employer consultation and disability prevention</b></p> <p>C.4.5.a. provide prospective employers with appropriate consultation information to facilitate prevention of disability in the workplace and minimize risk factors for employees and employers.</p> <p>C.4.5.b. consult with employers regarding accessibility and issues related to ADA compliance.</p> <p><b>C 4.6 Workplace culture and environment</b></p> <p>C.4.6.a. describe employer practices that affect the employment or return to work of individuals with disabilities and utilize that understanding to facilitate successful employment.</p>	<p><b>1318-502 Career Counseling in Rehabilitation (3)</b></p> <p>Involves the study of career theories and other practices associated with successful job placement activities. Includes transferable skills analysis, labor market analysis, job seeking skills training, employer identification, management of job development campaign, as well as supported employment strategies. Technology related to these areas is explored.</p> <p><b>1318-509 Job Development &amp; Placement in Rehabilitation (3)</b></p> <p>Explores occupational information job matching systems and job placement approaches. Focuses on demand-side job development, job-seeking skills training, supported employment, transitional work, and placement techniques, including job analyses, ADA implementation, and labor market surveys. Includes a module on assistive technology.</p>

<p><b>C. 4.7 Work conditioning/work hardening</b></p> <p>C.4.7.a. identify work conditioning or work hardening strategies and resources as part of the rehabilitation process.</p> <p><b>C. 4.8 Vocational consultation and job placement strategies</b></p> <p>C.4.8.a. conduct and utilize labor market analyses and apply labor market information to the needs of individuals with a disability.</p> <p>C.4.8.b. identify transferable skills by analyzing the consumer's work history and functional assets and limitations and utilize these skills to achieve successful job placement.</p> <p>C.4.8.c. utilize appropriate job placement strategies (client-centered, place then train, etc.) to facilitate employment of people with disabilities.</p> <p><b>C. 4.9 Career development theories</b></p> <p>C.4.9.a. apply career development theories as they relate to individuals with a disability with disabilities.</p> <p><b>C.4.10 Supported employment, job coaching, and natural supports</b></p> <p>C.4.10.a. effectively use employment supports to enhance successful employment.</p> <p>C.4.10.b. assist individuals with a disability with developing skills and strategies on the job.</p> <p><b>C. 4. 11 Assistive technology</b></p> <p>C.4.11.a. identify and describe assistive technology resources available to individuals with a disability for independent living and employment.</p>	
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<b>C.5 COUNSELING APPROACHES AND PRINCIPLES</b>	<b>1318-503 Rehabilitation Counseling Theories (3)</b>
<p>Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: <a href="#">As demonstrated by the ability to:</a></p> <p><b>Knowledge domains:</b></p> <p><b>C.5.1 Individual counseling and personality theory</b></p> <p>C.5.1.a. communicate a basic understanding of established counseling theories and their relationship to personality theory.</p> <p>C.5.1.b. articulate a personal philosophy of rehabilitation counseling based on an established counseling theory.</p> <p><b>C.5.2 Mental health counseling</b></p> <p>C.5.2.a. recognize individuals with a disability who demonstrate psychological or mental health related problems and make appropriate referrals when appropriate.</p> <p>C.5.2.b. analyze diagnostic and assessment information (e.g., vocational and educational tests, records and psychological and medical data) and communicate this information to the consumer.</p> <p>C.5.2.c. explain and utilize standard diagnostic classification systems for mental health conditions within the limits of the role and responsibilities of the rehabilitation counselor.</p> <p><b>C.5.3 Counseling skills and techniques development</b></p> <p>C.5.3.a. develop and maintain confidential counseling relationships with individuals with a disability using established skills and techniques.</p> <p>C.5.3.b. establish, in collaboration with the consumer, individual counseling goals and objectives.</p> <p>C.5.3.c. apply basic counseling and interviewing skills.</p> <p>C.5.3.d. employ consultation skills with and on behalf of the consumer.</p> <p><b>C.5.4 Gender issues in counseling</b></p> <p>C.5.4.a. counsel individuals with a disability who face lifestyle choices that may involve gender or multicultural issues.</p> <p>C.5.4.b. identify gender differences that can affect the rehabilitation counseling and planning processes.</p> <p><b>C.5.5 Conflict resolution and negotiation strategies</b></p> <p>C.5.5.a. assist individuals with a disability in developing skills needed to effectively respond to conflict and negotiation in support of their interests.</p> <p><b>C.5.6 Individual, group, and family crisis response</b></p> <p>C.5.6.a. recognize and communicate a basic understanding of how to assess individuals, groups, and families who exhibit suicide ideation, psychological and emotional crisis.</p> <p><b>C.5.7. Termination of counseling relationships</b></p> <p>C.5.7.a. facilitate counseling relationships with individuals with a disability in a manner that is constructive to their independence.</p> <p>C.5.7.b. develop a plan of action in collaboration with the consumer for</p>	<p>Examines conceptual frameworks of major counseling theories and guides rehabilitation counselors in the development of their conceptual and theoretical preference. Focus on principles and approaches relevant to rehabilitation counseling and supervision. Includes a module on family and systems theory.</p> <p><b>1315-530 Techniques of Counseling (3)</b></p> <p>Surveys major counseling models and their application in schools and mental health settings. Focuses on helping the student integrate theory and practice in order to develop a personal counseling philosophy.</p>

<p>strategies and actions anticipating the termination of the counseling process.</p> <p><b>C.5.8 Individual empowerment and rights</b></p> <p>C.5.8.a. promote ethical decision-making and personal responsibility that is consistent with an individual's culture, values and beliefs.</p> <p><b>C.5.9 Boundaries of confidentiality</b></p> <p>C.5.9.a. explain the legal limits of confidentiality for rehabilitation counselors for the state in which they practice counseling.</p> <p>C.5.9.b. identify established rehabilitation counseling ethical standards for confidentiality and apply them to actual case situations.</p> <p><b>C.5.10 Ethics in the counseling relationship</b></p> <p>C.5.10.a. explain the practical implications of the CRCC Code of ethics as part of the rehabilitation counseling process.</p> <p>C.5.10.b. confirm competency in applying an established ethical decision-making process to rehabilitation counseling case situations.</p> <p><b>C.5.11 Counselor Supervision</b></p> <p>C.5.11.a. explain the purpose, roles, and need for counselor supervision in order to enhance the professional development, clinical accountability and gate-keeping functions for the welfare of individuals with a disability.</p>	
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CORE	UDC RCP
<p><b>C.6 GROUP WORK AND FAMILY DYNAMICS</b></p> <p>Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: <a href="#">As demonstrated by the ability to:</a></p> <p><b>Knowledge domains:</b></p> <p><b>C.6.1 Group Dynamics and Counseling Theory</b></p> <p>C. 6.1.a. Apply theories and principles of group counseling when working with persons with disabilities.</p> <p><b>C.6.3. Group leadership styles and techniques</b></p> <p>C.6.3.a. demonstrate effective group leadership skills.</p> <p><b>C.6.4. Family dynamics and counseling theory</b></p> <p>C.6.4.a. apply an understanding of family systems and the impact of the family on the rehabilitation process.</p> <p><b>C.6.5. Family support interventions</b></p> <p>C.6.5.a. use counseling techniques to support the individual's family/significant others, including advocates.</p> <p>C.6.5.b. facilitate the group process with individual's family/significant others, including advocates to support the rehabilitation goals.</p> <p><b>C.6.6. Ethical and legal issues impacting individuals and families</b></p> <p>C.6.6.a. apply ethical and legal issues to the group counseling process and work with families.</p> <p>C.6.6.b. Know the ethical implications of work in group settings with racial/ethnic, cultural, and other diversity characteristics/issues when working with people with disabilities.</p>	<p><b>1315-510 Group Counseling (3)</b></p> <p>Examines the major schools, as well as contemporary trends in group counseling, including didactic and experiential models. Provides laboratory exercises which demonstrates different group approaches, offering opportunities for students to experience both group leadership and group participation.</p>

CORE	UDC RCP
<p>Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: <a href="#">As demonstrated by the ability to:</a></p> <p><b>Knowledge domains:</b></p> <p><b>C. 7.1 Role of assessment</b></p> <p>C.7.1.a. explain purpose of assessment in rehabilitation process.</p> <p>C.7.1.b. use assessment information to determine eligibility and to develop plans for services.</p> <p><b>C. 7.2 Assessment resources and methods</b></p> <p>C.7.2.a. identify assessment resources and methods appropriate to meet the needs of individuals with a disability.</p> <p>C.7.2.b. describe resources to assist rehabilitation counselors in identifying appropriate test instruments and other assessment methods.</p> <p>C.7.2.c. describe computer-based assessments for rehabilitation and employment planning.</p> <p><b>C 7.3 Individual involvement in assessment planning</b></p> <p>C.7.3.a. facilitate individual involvement in evaluating the feasibility of rehabilitation or independent living objectives and planning.</p> <p>C.7.3.b. utilize assessment as an ongoing process in establishing individual rapport, rehabilitation service planning, objectives and goals.</p> <p>C.7.3.c. Evaluate the individual's capabilities to engage in informed choice and to make decisions.</p> <p><b>C .7.4 Measurement and statistical concepts</b></p> <p>C.7.4.a. describe basic measurement concepts and associated statistical terms.</p> <p>C.7.4.b. comprehend the validity, reliability, and appropriateness of assessment instruments.</p> <p><b>C. 7.5 Selecting and administering the appropriate assessment methods</b></p> <p>C.7.5.a. explain differences in assessment methods and testing instruments (i.e. aptitude, intelligence, interest, achievement, vocational evaluation, situational assessment).</p> <p>C.7.5.b. apply assessment methods to evaluate a consumer's vocational, independent living and transferable skills.</p> <p><b>C. 7. 6 Ethical, legal, and cultural implications in assessment</b></p> <p>C.7.6.a. know the legal, ethical, and cultural implications of assessment for rehabilitation services.</p> <p>C.7.6.b .consider cultural influences when planning assessment.</p> <p>C.7.6.c. analyze implications of testing norms related to the culture of an individual.</p>	<p><b>1315-519 Appraisal Techniques of Counseling (3)</b> Examines techniques and methods of human appraisal, including standardized testing, autobiographical techniques, case histories, case studies, and interviews. Practical application of Ecological and Assistive Technology assessment as well as other commercially available evaluation systems.</p>

CORE	UDC RCP
<p data-bbox="186 281 797 327"><b>C.9 MEDICAL, FUNCTIONAL, AND ENVIRONMENTAL ASPECTS OF DISABILITY</b></p> <p data-bbox="186 333 797 405">Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: <a href="#">As demonstrated by the ability to:</a></p> <p data-bbox="186 432 380 457"><b>Knowledge domains:</b></p> <p data-bbox="186 480 475 506"><b>C.9.1. The human body system</b></p> <p data-bbox="186 529 773 575">C.9.1.a. explain basic medical aspects related to human body system and disabilities.</p> <p data-bbox="186 602 570 627"><b>C.9.2. Medical terminology and diagnosis</b></p> <p data-bbox="186 651 724 697">C.9.2.a. demonstrate an understanding of fundamental medical terminology.</p> <p data-bbox="186 724 777 770">C.9.2.b. demonstrate an understanding of the diagnostic process used by medical and other health professions.</p> <p data-bbox="186 798 789 844"><b>C.9.3. Physical, psychiatric, cognitive, sensory and developmental disabilities</b></p> <p data-bbox="186 867 776 938">C.9.3.a. utilize existing or acquired information about the existence, onset, severity, progression, and expected duration of an individual's disability.</p> <p data-bbox="186 966 685 991">C.9.3.b. articulate the functional limitations of disabilities.</p> <p data-bbox="186 1018 766 1064">C.9.3.c. apply working knowledge of the impact of disability on the individual, the family, and the environment.</p> <p data-bbox="186 1092 704 1117">C.9.3.d. explain the implications of co-occurring disabilities.</p> <p data-bbox="186 1144 435 1169"><b>C.9.4. Assistive technology</b></p> <p data-bbox="186 1192 698 1239">C.9.4.a. determine the need for assistive technology and the appropriate intervention resources.</p> <p data-bbox="186 1266 769 1312">C.9.4.b. support the evaluation of assistive technology needs as they relate to rehabilitation services.</p> <p data-bbox="186 1339 628 1365"><b>C.9.5. Environmental implications for disability</b></p> <p data-bbox="186 1388 797 1434">C.9.5.a. evaluate the influences and implications of the environment on disability.</p> <p data-bbox="186 1461 613 1486"><b>C.9.6 Classification and evaluation of function</b></p> <p data-bbox="186 1509 745 1556">C.9.6.a. demonstrate familiarity with the use of functional classification such as the International Classification of Function.</p> <p data-bbox="186 1583 797 1629">C.9.6.b. consult with medical/health professionals regarding prognosis, prevention and wellness strategies for individuals with a disability.</p>	<p data-bbox="820 281 1360 327"><b>1318-501 Psychosocial and Medical Aspects of Disability in Rehabilitation I (3)</b></p> <p data-bbox="820 333 1433 468">Overview of major physical, cognitive, neurological, developmental and substance use and psychiatric disorders, and sensory impairments. Emphasizes functional limitations, intervention resources, contributions of medical and allied health professions and psychosocial implications of adjustment to disabling conditions; includes a module on DSM-IV-TR.</p> <p data-bbox="820 516 1360 562"><b>1318-510 Psychosocial and Medical Aspects of Disability in Rehabilitation II (3)</b></p> <p data-bbox="820 569 1424 732">Part II focuses on the psychosocial and psychological aspects of medical conditions. Covers cardiovascular, respiratory, renal, gastrointestinal, musculoskeletal, blood/immune systems, endocrine and dermatologic conditions disability. Emphasizes functional limitations, intervention resources, contributions of medical and allied health professions; implications of adjustment to disabling medical conditions.</p>

CORE	UDC RCP
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<p><b>C.10 REHABILITATION SERVICES, CASE MANAGEMENT, AND RELATED SERVICES</b></p>	<p><b>1318-504 Principles and Practices of Case Management in Rehabilitation (3)</b></p>
<p>Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: <a href="#">As demonstrated by the ability to:</a></p>	<p>Examines rehabilitation delivery systems. Explores benefit systems ethic goal development and rehabilitation planning and documentation.</p>
<p><b>Knowledge domains:</b></p>	<p><b>1315-543 Addiction Disorder (3)</b></p>
<p><b>C.10.1 Vocational rehabilitation</b></p>	<p>Examines the physiological and psychological aspects of addiction to alcohol, narcotics, stimulants, psychotropic, hallucinogenic drugs, gambling, and sex. Assesses psychosocial factors associated with addiction. Explores a variety of treatment approaches.</p>
<p>C.10.1.a. describe the systems used to provide vocational rehabilitation services to people with disabilities including the state/federal vocational rehabilitation program in the United States, private rehabilitation, and community-based rehabilitation programs.</p>	
<p>C.10.1.b. identify and plan for the provision of vocational rehabilitation services with individuals with a disability.</p>	
<p>C.10.1.c. provide information to prospective employers about the benefits of hiring people with disabilities.</p>	
<p><b>C.10.2 Case and caseload management</b></p>	
<p>C.10.2.a. evaluate the need for and utilize case and caseload management services.</p>	
<p>C.10.2.b. apply principles of caseload management, including case recording and documentation.</p>	
<p>C.10.2.c. identify rehabilitation case management strategies that are evidence-based</p>	
<p>C.10.2.d. establish follow-up and/or follow-along procedures to maximize an individual's independent functioning through the provision of post-employment services</p>	
<p><b>C.10.3 Independent living</b></p>	
<p>C.10.3.a. identify and plan for the provision of independent living service alternatives with individuals with a disability.</p>	
<p><b>C.10.4 School to work transition services</b></p>	
<p>C.10.4.a. develop knowledge of transition services that facilitate an individual's movement from school to work.</p>	
<p><b>C.10.5 Disability management</b></p>	
<p>C.10.5.a. describe employer-based disability management concepts, programs, and practices.</p>	
<p><b>C.10.6 Forensic rehabilitation and vocational expert practices</b></p>	
<p>C.10.6.a. describe the purpose of forensic rehabilitation, vocational expert practice, and the reasons for referral of individuals for services.</p>	
<p><b>C.10.7 Substance abuse treatment and rehabilitation</b></p>	
<p>C.10.7.a. describe different recovery models that apply to substance abuse treatment and rehabilitation.</p>	
<p>C.10.7.b. identify and recommend treatment options that facilitate recovery and successful rehabilitation outcomes.</p>	
<p><b>C.10.8 Psychiatric rehabilitation</b></p>	
<p>C.10.8.a. identify and recommend treatment options that facilitate</p>	

<p>recovery and successful rehabilitation outcomes.</p> <p><b>C.10.9 Wellness and illness prevention concepts</b></p> <p>C.10.9.a. promote constructive lifestyle choices that support positive health and prevents illness or disability.</p> <p><b>C.10.10 Community Resources</b></p> <p>C.10.10. a. work with community agencies to advocate for the integration and inclusion of individuals with disabilities within the community.</p> <p>C.10.10.b. identify the benefits of rehabilitation services to potential individuals with a disability, employers, and the general public.</p> <p><b>C.10.11 Community-based rehabilitation and service coordination</b></p> <p>C.10.11.a. assist individuals with a disability to access and utilize services available in the community.</p> <p>C.10.11.b. collaborate with advocates and other service providers involved with the individual and/or the family.</p> <p><b>C.10.12 Life care planning</b></p> <p>C.10.12.a. describe the purposes of life-care planning and utilize life-care planning services as appropriate.</p> <p><b>C.10.13 Insurance programs and social security</b></p> <p>C.10.13.a. demonstrate knowledge of disability insurance options and social security programs.</p> <p>C.10.13.b. explain the functions of workers' compensation, disability benefits systems and disability management systems.</p> <p><b>C.10.14 Programs for specialty populations</b></p> <p>C.10.14.a describe programs of services for specialty populations including but not limited to: spinal cord injury, traumatic brain injury intellectual disabilities sensory disability, correctional and veterans.</p> <p><b>C.10.15 Current technology and rehabilitation counseling</b></p> <p>C.10.15.a. explain and plan for the appropriate use of assistive technology including computer-related resources.</p> <p>C.10.15.b. utilize internet and other technology to assist in the effective delivery of services.</p> <p>C.10.15c. assist individuals with a disability in developing strategies to request appropriate accommodations.</p> <p>C.10.15 d. assess individual needs for rehabilitation engineering services.</p>	
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CORE	UDC RCP
<p><b>SECTION D: Clinical Experience</b></p> <p>D.1 Students shall have a minimum of 100 hours of supervised rehabilitation counseling Practicum experience with at least 40 hours of direct service to people with disabilities (not role-playing clients). Practicum students shall have experiences that increase their awareness and understanding of the differences in values, beliefs, and behaviors of individuals who are different from themselves.</p> <p>D.1.1 The practicum shall include instructional experiences (audio-video tapes and individual and group interaction) dealing with rehabilitation counseling concerns, and clinical experiences (on or off-campus) that facilitate the development of basic rehabilitation counseling skills. During the practicum, students will conduct interviews that will be reviewed by a supervisor. If practicum experiences are provided off-campus, there will be direct and periodic communication throughout the semester between the site supervisor and the faculty (e.g., site visits, conference calls, video-conferencing, electronic communication). Practicum activities shall be documented in logs, progress reviews, and summaries. The program faculty member responsible for practicum supervision must be a CRC.</p> <p>D.1.2 Written expectations, procedures, and policies for practicum will be distributed to students and supervisors. This will include the policy that the practicum is a prerequisite to the supervised rehabilitation counseling clinical internship experience.</p> <p>D.1.3 Practicum experiences shall include an average of one (1) hour per week of individual <b>and</b> 1½ hours per week of group (with no more than <b>ten</b> students/group) supervision by a program faculty member or qualified individual working in cooperation with a program faculty member.</p> <p>D.1.4 When using distance education modalities, practicum supervision may be provided using a variety of methods such as video conferencing, teleconferencing, real time video contact, or others as appropriate.</p> <p>D.1.5 In states that have specific practicum supervision requirements for counselor licensure, the program shall make the required supervision experiences consistent with the licensure requirements available to those students desiring to qualify for licensure.</p> <p>D.1.6 There shall be a written progress review of the performance/counseling skills of all students enrolled in a practicum.</p> <p>D.1.7 There shall be a written procedure for responding to students who do not demonstrate satisfactory practicum knowledge or clinical skills.</p> <p>D.1.8 The individual supervision of <b>five</b> students shall be considered to be equivalent to the teaching of one course.</p>	<p><b>1318-506 Practicum in Rehabilitation Counseling (3)</b> Students Supervised by qualified rehabilitation personnel should 100 hours practicum. Demonstration of counseling skills with individuals with disabilities in a rehabilitation agencies, and community rehabilitation centers.</p>

CORE	UDC RCP
<p>D.2 Students shall have supervised rehabilitation counseling internship activities that include a minimum of 600 hours of applied experience in an agency/program, with at least 240 hours of direct service to individuals with disabilities.</p> <p>D.2.1 The internship activities shall include the following:</p> <p>D.2.1.a orientation to program components, policies and procedures, introduction to staff and their role and function, identification of the expectations for interns, confidentiality and due process procedures, risk assessment, and the Code of Professional Ethics for Rehabilitation Counselors;</p> <p>D.2.1.b. observation of all aspects of the delivery of rehabilitation counseling services, as practiced by the agency or organization, including diverse populations;</p> <p>D.2.1.c. work assignments, performing the tasks required of an employed rehabilitation counselor at the agency or organization; and</p> <p>D.2.1.d. reporting, including all required academic reports as well as logs, weekly progress reviews, and summaries of activities.</p> <p>D.2.2 Written expectations, procedures, and policies for the internship activities shall be contained in a manual or other appropriate document(s) and distributed to students and supervisors.</p> <p>D.2.3 For the internship, an on-site supervisor must be assigned to provide weekly supervision throughout the internship experience.</p> <p>D.2.4 The internship shall include an evaluation of student performance, including self-evaluation by the student, the field site supervisor, and the faculty supervisor.</p> <p>D.2.5 The RCE Program shall use internship experience sites that provide rehabilitation counseling services to individuals with disabilities appropriate to the mission of the program.</p> <p>D.2.6 Internship students shall have experiences that increase their awareness and understanding of differences in values, beliefs and behaviors of persons who are different from themselves. Internship shall promote cultural competence, foster personal growth and assist students in recognizing the myriad of counseling approaches and rehabilitation issues that affect service delivery.</p>	<p><b>1318 -507 Internship in Rehabilitation Counseling I (3)</b>            Demonstration of counseling skills in a rehabilitation setting, agencies and community rehabilitation centers with primary supervision by qualified rehabilitation professional. Students are required to spend significant time within an agency functioning as a professional counselor. Students should complete 300 hours in part I and II totaling 600 hours.</p>

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<p>D.3 Internship experiences shall include an average of one (1) hour per week of individual <b>or</b> 1½ hours per week of group (with no more than <b>ten</b> students/group) supervision by a program faculty member who is a CRC or qualified individual working in cooperation with a program faculty member who is a CRC.</p> <p>D.3.1 When using distance education modalities, supervision may be provided using a variety of methods such as video conferencing, teleconferencing, real time video contact, or others as appropriate.</p> <p>D.3.2 In states that have specific supervision requirements for counselor licensure, the program shall make the required supervision experiences consistent with the state licensure requirements and available to those students desiring to qualify for licensure.</p> <p>D.3.3 There shall be a progress review of all students enrolled in an internship.</p> <p>D.3.4 There shall be a written procedure for responding to students who do not demonstrate satisfactory internship knowledge or clinical skills.</p> <p>D.3.5 The individual supervision of <b>five</b> students shall be considered equivalent to the teaching of one course due to the intensive, one-on-one instruction and the ongoing evaluation necessary in internship.</p>	<p><b>1318 -508 Internship in Rehabilitation Counseling II (3)</b>            Demonstration of counseling skills in a rehabilitation setting, agencies and community rehabilitation centers with primary supervision by qualified rehabilitation professional. Students are required to spend significant time within an agency functioning as a professional counselor. Students should complete 300 hours in part I and II totaling 600 hours.</p>

CORE	UDC RCP
Research	<p><b>1318-505 Introduction to Research</b> Examines qualitative and quantitative methods used in human services research. Prepares students to read, analyze, and evaluate research. Equips them to evaluate the effectiveness of service delivery programs.</p>

CORE	UDC RCP ELECTIVES
	<p><b>1318- 515 Developmental Disorders in Rehabilitation</b> Using a 20-hour field experience component which involves individuals with developmental disabilities in local DRS agencies, this course provides an opportunity for students to better understand the unique challenges of individuals with developmental disabilities as well as to learn about the ways in which rehabilitation adapt to meet these challenges. The course utilizes a life span approach to increase awareness and sensitivity about the variety of issues an individual with a developmental disability and their family may encounter.</p> <p><b>1318-516 Rehabilitation &amp; Traumatic Brain Injury</b> Using a 20-hour field experience component which involves individuals with developmental disabilities in local DRS agencies, this course will review various types of traumatic brain injury and their common physical, cognitive and behavioral consequences. The student will receive information about head injury and be able to discuss common causes of traumatic brain injury, continuum of care, and factors that contribute to the successful rehabilitation and recovery of a person from traumatic brain injury.</p> <p><b>1318- 517 Rehabilitation and Psychiatric Disabilities</b> Using a 20-hour field experience component which involves individuals with psychiatric disabilities in local DRS agencies, this course provides an overview of psychiatric disability and rehabilitation approaches, as well as reviewing current and evolving evidence-based practices in employment of individuals with psychiatric disabilities, including supported employment.</p> <p><b>1318-518 Rehabilitation, Transition, and the Educational Setting</b> Using a 20-hour field experience component which involves visiting sites that prepare individuals with disabilities to enter the post-school environment, this course provides an opportunity for students to better understand the unique challenges of individuals with educational disabilities and transition challenges. A key focus will be on the vocational choices, training and education available to young adults with educational disabilities as they make the</p>