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SECTION 1

Introduction

This handbook informs prospective applicants and currently enrolled master’s students about the academic and experiential requirements necessary to earn the Master’s of Education in Professional Counseling at The University of Mississippi.

The handbook contains valuable information about successfully progressing through the program. It identifies program goals and objectives, program requirements and procedures, the student review, retention and dismissal policy, the process of planning a program of study, the supervised counseling experiences in our programs, the exit requirements for graduation, and procedures for obtaining licensure and endorsement following graduation.

Program faculty members encourage prospective applicants to review this handbook in order to facilitate their decision about whether to apply to the program. Potential applicants are welcome to contact the Counselor Education Graduate Activities Advisors or the Program Coordinator with questions.

Enrolled master’s students will thoroughly familiarize themselves with the content of this handbook. It is distributed at the program orientation for new students and available on the department website. Newly admitted students are required to read it in its entirety and to provide written verification that they have done so and understand their student responsibilities (see Appendix A). Current students are welcome to contact their assigned advisor with questions.

Be Successful!

The Counseling Education faculty welcomes you to the program and wants you to have a successful and academically enriching experience while progressing through our program. Advisors are available to schedule appointments with you to assist you in progressing through your program. However, you are responsible for knowing the content contained within this handbook. Advisors and instructors in our program will assume you have read it thoroughly and will hold you responsible for the information. Therefore, reviewing this handbook periodically is highly recommended. For specific questions and concerns it is always a good idea to speak directly with your advisor or course faculty. Contact information for each faculty member is listed in this handbook in Section 11. Each of us has scheduled weekly office hours, so please feel free to contact us.
**SECTION 2**

**Mission**

The principle mission of the Counselor Education Program is to prepare counselors of excellence. Specifically, we strive to graduate qualified K-12 school counselors and clinical mental health counselors to serve in public and private community settings. Along with the masters’ programs, the Counselor Education Program offers an on-line educational specialist degree in counselor education – play therapy specialization and a doctoral program in counselor education and supervision. Faculty members in Counselor Education strive to instill in students a strong sense of professional identity, to help students develop mastery over the rich knowledge base of the counseling profession, and to mentor the development of excellent counseling skills. As part of professional identity and career development, students are encouraged to obtain licensure and certifications to promote their professional success.

**Philosophy**

The general philosophy of the Counselor Education Program at The University of Mississippi is based upon the following premises:

- Individuals have a self-actualizing tendency, characterized by positive growth.
- The counseling relationship is one that is best conducted in a setting of equality, cooperation, and mutual respect.
- Clients have the capacity to accept and to take responsibility for their behavior and environment.
- All individuals should be treated with respect, dignity, and worth.
- As a result of the counseling process, clients can better understand their perceptions, attitudes, and behaviors so that they can help themselves in the future.
- The professionally trained counselor should develop a personally congruent and integrated counseling style, characterized by the awareness of individual influences such as cognitive, emotional, behavioral, biological, and environmental factors.
- The counseling process is an effective means for helping clients learn how to interact constructively with themselves, others, and their environments.
- Counselors should also understand the influence of culture and the systematic impact of the clients’ social system including family, work, and community.
Programs in Counseling

The master’s program in Professional Counseling is housed in the Counselor Education Program within the Department of Leadership and Counselor Education in the university’s NCATE/CAEP-accredited School of Education. Currently, there are four professional counseling programs at The University of Mississippi:

1. M.Ed. in Professional Clinical Mental Health Counseling
2. M.Ed. in Professional School Counseling
3. Ed.S. in Counselor Education – Play Therapy Track
4. Ph.D. in Counselor Education and Supervision

The master’s and doctoral programs are accredited by the Council for Accreditation of Counseling and related Educational Programs (CACREP), a specialized accrediting body that grants accreditation to graduate level programs in professional counseling. CACREP does not offer accreditation for Ed.S. programs.

M.Ed. in Professional Clinical Mental Health Counseling

Professional clinical mental health counselors work with individuals, families, and other groups to address and treat mental and emotional disorders and to promote mental health. Clinical mental health counselors are trained to assist individuals dealing with a variety of concerns including career goals, wellness issues, depression, addiction and substance abuse, suicidal impulses, stress, grief, and problems with self-esteem. The clinical mental health counseling track qualifies graduates to work in a wide variety of mental health settings including inpatient, outpatient, college counseling, and private practice. Graduates may choose to work with a specialized population such as children, adolescents, couples, or families.

The objective of the Master of Education in professional counseling curriculum is to prepare students to be professional counselors. The counselor education faculty believes that the development of a strong professional identity, rich knowledge base, and expertise in the skills of counseling are essential to becoming a professional counselor. A priority for the program is to serve the people of Mississippi by providing highly qualified counselors. The professional clinical mental health counseling program is a 60 credit hour program that requires experiential components including a 100 clock-hour practicum and 600 clock-hour internship.

The program is accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). The program meets the academic and internship requirements for licensure as a professional counselor (LPC) in the State of Mississippi. Upon graduation students are eligible to sit for National Clinical Mental Health Counseling Examination (NCMHCE) and to apply to the State for the LPC credential. Information on licensure as a professional counselor (LPC) can be found later in this handbook.
M.Ed. in Professional School Counseling

Professional school counselors are licensed professionals who assist students in their academic, social, emotional and career development, and help them define the best pathways to achieve satisfaction and success. Professional school counselors also serve as leaders and effective team members, working with parents/guardians, teachers, administrators, and other school personnel to ensure that each student succeeds. The school counseling track provides students with minimum qualifications to serve as licensed school counselors at the elementary, middle, or high school level.

The objective of the Master of Education in professional counseling curriculum is to prepare students to be professional counselors. The counselor education faculty believes that the development of a strong professional identity, rich knowledge base, and expertise in the skills of counseling are essential to becoming a professional counselor. A priority for the program is to serve the people of Mississippi by providing highly qualified school counselors.

The school counseling track requires that all students successfully complete a range of program experiences, which include satisfactory completion of required courses, development of basic counseling skills, performance in a school-based practicum and internship, and demonstration of counseling and track-specific competencies beyond class requirements. The professional school counseling program is currently a 51 credit hour program that requires experiential components including a 100 clock-hour practicum and 600 clock-hour internship. However, in accordance with newly released CACREP standards, the professional school counseling program at the University of Mississippi will be expanded to a 60 credit hour program by the year 2020.

The program is accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). The program meets the academic and internship requirements for licensure as a school counselor in the State of Mississippi. Upon graduation students are eligible to sit for the national PRAXIS examination in school counseling and to apply to the State for licensure as a school counselor. Information on licensure as a school counselor can be found later in this handbook.

Note:
Students may not dually enroll in both master’s degree programs but must instead select a single specialization track (clinical mental health counseling or school counseling). Students in a master’s degree program may only change from one specialty area to another with permission of the full counselor education faculty. Please speak with your advisor immediately if you are reconsidering your choice of specialty areas.
Additional Programs

Ed.S. in Counselor Education – Play Therapy Track

The University of Mississippi’s Counselor Education Program and its Clinic for Outreach and Personal Enrichment (COPE), an approved center for play therapy education by the Association for Play Therapy, is pleased to offer a post-master's specialist degree in counselor education for those interested in play therapy and becoming credentialed as a Registered Play Therapist. Our program is provided online for national and international students.

This one-year program consists of a fall to summer curriculum with a two-semester clinical practicum experience and an intensive supervision residency. Students will complete 18 credit hours, record at least 335 hours of play therapy sessions, and receive 35 hours of supervision from Registered Play Therapist-Supervisors. An onsite residency is required for three days in the summer semester. The residency is held at The University of Mississippi at the Counselor Education Clinic for Outreach and Personal Enrichment. The residency is limited to 10 students, so several residencies may occur through the months of June and July to accommodate all students in a given cohort.

Ph.D. in Counselor Education and Supervision

The objective of the doctoral program in counselor education and supervision is to develop counselor educators who are prepared to be skillful teachers, expert supervisors, competent quantitative and qualitative researchers, and outstanding professional faculty members at colleges and universities. Fundamental to the mission statement is the conviction that the master's degree in counseling is the clinical degree in counselor education and that doctoral study, while it enhances the clinical skills of students, aims to develop effective counselor educators and supervisors.

The doctoral program in counselor education and supervision requires that all students successfully complete a range of program experiences. These experiences include satisfactory completion (grade of B or higher) of required coursework, development of program of study as well as a cognate area. Clinical and internship experiences include leadership and advocacy, supervision, teaching, development of a research agenda, satisfactory completion of comprehensive exams, and the successful completion of the dissertation.

The doctoral program is accredited by the Council for the Accreditation of Counseling and Related Educational Programs (CACREP).
SECTION 3
Program Goals and Objectives

The primary objective of the Master’s of Education in Professional Counseling curriculum is to prepare students to become successful professional counselors in community and educational settings. The Counselor Education faculty believes that the development of a strong professional identity, a rich knowledge base, and expertise in the skills of counseling are essential to becoming a professional counselor. The program’s first priority is to serve the people of local, state, national, and international communities by providing highly qualified counselors.

The Master of Education in Professional Counseling curriculum is designed to build a strong foundation for graduates entering the helping counseling professions. This program prepares counselors to respond to the multitude of changes in a diverse society and to be responsive to the expanding counseling profession and their roles as professionals in the field of counseling. The foundation of the program is developed upon the eight common-core areas of the Council of Accreditation for Counseling and Related Educational Program (CACREP). www.counseling.org/cacrep/

Core Curricular Objectives
All students enrolled in the M.Ed. in professional counseling program will gain knowledge about the following areas as specified by the 2016 CACREP Standards:

1. PROFESSIONAL COUNSELING ORIENTATION AND ETHICAL PRACTICE
   A. History and philosophy of the counseling profession and its specialty areas
   B. The multiple professional roles and functions of counselors across specialty areas, and their relationships with human service and integrated behavioral health care systems, including interagency and inter-organizational collaboration and consultation
   C. Counselors’ roles and responsibilities as members of interdisciplinary community outreach and emergency management response teams
   D. The role and process of the professional counselor advocating on behalf of the profession
   E. Advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients
   F. Professional counseling organizations, including membership benefits, activities, services to members, and current issues
   G. Professional counseling credentialing, including certification, licensure, and accreditation practices and standards, and the effects of public policy on these issues
   H. Current labor market information relevant to opportunities for practice within the counseling profession
   I. Ethical standards of professional counseling organizations and credentialing bodies, and applications of ethical and legal considerations in professional counseling
   J. Technology’s impact on the counseling profession
   K. Strategies for personal and professional self-evaluation and implications for practice
   L. Self-care strategies appropriate to the counselor role
   M. The role of counseling supervision in the profession
2. SOCIAL AND CULTURAL DIVERSITY
   A. Multicultural and pluralistic characteristics within and among diverse groups nationally and
      internationally
   B. Theories and models of multicultural counseling, cultural identity development, and social justice and
      advocacy
   C. Multicultural counseling competencies
   D. The impact of heritage, attitudes, beliefs, understandings, and acculturative experiences on an
      individual’s views of others
   E. The effects of power and privilege for counselors and clients
   F. Help-seeking behaviors of diverse clients
   G. The impact of spiritual beliefs on clients’ and counselors’ worldviews
   H. Strategies for identifying and eliminating barriers, prejudices, and processes of intentional and
      unintentional oppression and discrimination

3. HUMAN GROWTH AND DEVELOPMENT
   A. Theories of individual and family development across the lifespan
   B. Theories of learning
   C. Theories of normal and abnormal personality development
   D. Theories and etiology of addictions and addictive behaviors
   E. Biological, neurological, and physiological factors that affect human development, functioning, and
      behavior
   F. Systemic and environmental factors that affect human development, functioning, and behavior
   G. Effects of crisis, disasters, and trauma on diverse individuals across the lifespan
   H. A general framework for understanding differing abilities and strategies for differentiated interventions
   I. Ethical and culturally relevant strategies for promoting resilience and optimum development and
      wellness across the lifespan

4. CAREER DEVELOPMENT
   A. Theories and models of career development, counseling, and decision making
   B. Approaches for conceptualizing the interrelationships among and between work, mental well-being,
      relationships, and other life roles and factors
   C. Processes for identifying and using career, avocational, educational, occupational and labor market
      information resources, technology, and information systems
   D. Approaches for assessing the impact of the work environment on clients’ life experiences
   E. Strategies for assessing abilities, interests, values, personality and other factors that contribute to career
      development
   F. Strategies for career development program planning, organization, implementation, administration, and
      evaluation
   G. Strategies for advocating for diverse clients’ career and educational development and employment
      opportunities in a global economy
   H. Strategies for facilitating client skill development for career, educational, and life-work planning and
      management
   I. Methods of identifying and using assessment tools and techniques relevant to career planning and
      decision making
   J. Ethical and culturally relevant strategies for addressing career development
5. COUNSELING AND HELPING RELATIONSHIPS
A. Theories and models of counseling
B. A systems approach to conceptualizing clients
C. Theories, models, and strategies for understanding and practicing consultation
D. Ethical and culturally relevant strategies for establishing and maintaining in-person and technology-assisted relationships
E. The impact of technology on the counseling process
F. Counselor characteristics and behaviors that influence the counseling process
G. Essential interviewing, counseling, and case conceptualization skills
H. Developmentally relevant counseling treatment or intervention plans
I. Development of measurable outcomes for clients
J. Evidence-based counseling strategies and techniques for prevention and intervention
K. Strategies to promote client understanding of and access to a variety of community-based resources
L. Suicide prevention models and strategies
M. Crisis intervention, trauma-informed, and community-based strategies, such as psychological first aid
N. Processes for aiding students in developing a personal model of counseling

6. GROUP COUNSELING AND GROUP WORK
A. Theoretical foundations of group counseling and group work
B. Dynamics associated with group process and development
C. Therapeutic factors and how they contribute to group effectiveness
D. Characteristics and functions of effective group leaders
E. Approaches to group formation, including recruiting, screening, and selecting members
F. Types of groups and other considerations that affect conducting groups in varied settings
G. Ethical and culturally relevant strategies for designing and facilitating groups
H. Direct experiences in which students participate as group members in a small group activity, approved by the program, for a minimum of 10 clock hours over the course of one academic term

7. ASSESSMENT AND TESTING
A. Historical perspectives concerning the nature and meaning of assessment and testing in counseling
B. Methods of effectively preparing for and conducting initial assessment meetings
C. Procedures for assessing risk of aggression or danger to others, self-inflicted harm, or suicide
D. Procedures for identifying trauma and abuse and for reporting abuse
E. Use of assessments for diagnostic and intervention planning purposes
F. Basic concepts of standardized and non-standardized testing, norm-referenced and criterion-referenced assessments, and group and individual assessments
G. Statistical concepts, including scales of measurement, measures of central tendency, indices of variability, shapes and types of distributions, and correlations
H. Reliability and validity in the use of assessments
I. Use of assessments relevant to academic/educational, career, personal, and social development
J. Use of environmental assessments and systematic behavioral observations
K. Use of symptom checklists, and personality and psychological testing
L. Use of assessment results to diagnose developmental, behavioral, and mental disorders
M. Ethical and culturally relevant strategies
8. RESEARCH AND PROGRAM EVALUATION
   A. The importance of research in advancing the counseling profession, including how to critique research to inform counseling practice
   B. Identification of evidence-based counseling practices
   C. Needs assessments
   D. Development of outcome measures for counseling programs
   E. Evaluation of counseling interventions and programs
   F. Qualitative, quantitative, and mixed research methods
   G. Designs used in research and program evaluation
   H. Statistical methods used in conducting research and program evaluation
   I. Analysis and use of data in counseling
   J. Ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation

Curricular Objectives for Clinical Mental Health Counseling Entry-Level Specialty Area

Students enrolled in the M.Ed. program in Clinical Mental Health Counseling are preparing to specialize as clinical mental health counselors and will demonstrate the knowledge and skills necessary to address a wide variety of circumstances within the context of clinical mental health counseling. Toward this end, all students in this program will gain knowledge about the following areas as specified by the 2016 CACREP Standards:

1. FOUNDATIONS
   A. History and development of clinical mental health counseling
   B. Theories and models related to clinical mental health counseling
   C. Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning
   D. Neurobiological and medical foundation and etiology of addiction and co-occurring disorders

2. CONTEXTUAL DIMENSIONS
   A. Roles and settings of clinical mental health counselors
   B. Etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders
   C. Mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks
   D. Diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the diagnostic and statistical manual of mental disorders (DSM) and the international classification of diseases (ICD)
   E. Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders
   F. Impact of crisis and trauma on individuals with mental health diagnoses
   G. Impact of biological and neurological mechanisms on mental health
   H. Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation
   I. Legislation and government policy relevant to clinical mental health counseling
   J. Cultural factors relevant to clinical mental health counseling
   K. Professional organizations, preparation standards, and credentials relevant to the practice of clinical mental health counseling
   L. Legal and ethical considerations specific to clinical mental health counseling
   M. Record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling
3. PRACTICE
   A. Intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management
   B. Techniques and interventions for prevention and treatment of a broad range of mental health issues
   C. Strategies for interfacing with the legal system regarding court-referred clients
   D. Strategies for interfacing with integrated behavioral health care professionals
   E. Strategies to advocate for persons with mental health issues

Curricular Objectives for School Counseling Entry-Level Specialty Area

Students enrolled in the M.Ed. program in School Counseling will demonstrate the professional knowledge and skills necessary to promote the academic, career, and personal/social development of all P–12 students through data-informed school counseling programs. Toward this end, all students in this program will gain knowledge about the following areas as specified by the 2016 CACREP Standards:

1. FOUNDATIONS
   A. History and development of school counseling
   B. Models of school counseling programs
   C. Models of p-12 comprehensive career development
   D. Models of school-based collaboration and consultation
   E. Assessments specific to P-12 education

2. CONTEXTUAL DIMENSIONS
   A. School counselor roles as leaders, advocates, and systems change agents in p-12 schools
   B. School counselor roles in consultation with families, p-12 and postsecondary school personnel, and community agencies
   C. School counselor roles in relation to college and career readiness
   D. School counselor roles in school leadership and multidisciplinary teams
   E. School counselor roles and responsibilities in relation to the school emergency management plans, and crises, disasters, and trauma
   F. Competencies to advocate for school counseling roles
   G. Characteristics, risk factors, and warning signs of students at risk for mental health and behavioral disorders
   H. Common medications that affect learning, behavior, and mood in children and adolescents
   I. Signs and symptoms of substance abuse in children and adolescents as well as the signs and symptoms of living in a home where substance use occurs
   J. Qualities and styles of effective leadership in schools
   K. Community resources and referral sources
   L. Professional organizations, preparation standards, and credentials relevant to the practice of school counseling
   M. Legislation and government policy relevant to school counseling
   N. Legal and ethical considerations specific to school counseling
3. **PRACTICE**

A. Development of school counseling program mission statements and objectives  
B. Design and evaluation of school counseling programs  
C. Core curriculum design, lesson plan development, classroom management strategies, and differentiated instructional strategies  
D. Interventions to promote academic development  
E. Use of developmentally appropriate career counseling interventions and assessments  
F. Techniques of personal/social counseling in school settings  
G. Strategies to facilitate school and postsecondary transitions  
H. Skills to critically examine the connections between social, familial, emotional, and behavior problems and academic achievement  
I. Approaches to increase promotion and graduation rates  
J. Interventions to promote college and career readiness  
K. Strategies to promote equity in student achievement and college access  
L. Techniques to foster collaboration and teamwork within schools  
M. Strategies for implementing and coordinating peer intervention programs  
N. Use of accountability data to inform decision making  
O. Use of data to advocate for programs and students

**Student Professional Objectives**

In addition to the above curricular objectives and dispositions, the Counselor Education Program has specific professional objectives for each student. These include:

- Graduates of the School Counseling program will obtain state licensure/certification in school counseling and the National Certified Counselor (NCC) credential.  
- Graduates of the Clinical Mental Health Counseling program will obtain state licensure (Licensed Professional Counselor - LPC), and the National Certified Counselor (NCC) and/or Certified Clinical Mental Health Counselor credentials.  
- Graduates of both programs will become active members of the counseling profession as evidenced by membership and involvement in professional associations such as the American Counseling Association and its many divisions and by demonstrating a commitment to continuing education.
SECTION 4

Program Application and Admission

The program admission process is designed to assess the candidate's suitability and commitment for graduate study and for a professional career in counseling. Not all applicants are admitted, and Admissions are competitive for a limited number of seats. Candidates who are admitted to these programs are expected to make a major commitment to their graduate training. Students are admitted once each year for entry in the fall.

Application Process

To initiate the application process, applicants must complete the online graduate application found on The University of Mississippi’s Graduate School web page at http://www.olemiss.edu/applynow/. Once the online application process is initiated, applicants will be notified by the Program Coordinator to electronically submit a resume along with the names and addresses of three professional references. Admissions are competitive for a limited number of seats.

At a minimum, applicants to the program must:

- Hold a bachelor's degree from an approved institution with a grade point average of at least 3.0 on the course work attempted. [Individuals with A 2.7 undergraduate grade point average, or 3.0 on the last 60 hours, may be admitted on a conditional status.]
- Complete a Graduate School application online which includes official transcripts, and GRE scores (less than five years old with verbal, quantitative, and writing component sub-scores)
- Upload the following supplemental materials to the Graduate School application:
  - Current resume
  - Participate in an interview with faculty (if invited)
  - Personal Statement
- Submit all admissions materials no later than the March 1 deadline

Applicant information is reviewed by faculty following the March 1 deadline each year. Faculty will determine applicants who best qualify for an interview, and during the month of April, applicants will be invited to interview with the Counselor Education faculty and current doctoral students in Counselor Education. Following the interviews, applicants will be notified of the decision for admission by May 15. Potential applicants should read the materials in this handbook to ensure the program meets their career goals.

Diversity Recruitment Statement

The Master’s Program in Counselor Education is committed to recruiting a diverse student body representing a wide array of cultures, geographical regions, and socioeconomic backgrounds. The unique experiences and perspectives students bring to the master’s program present possibilities for learning not only for individual students but also for their peers.
Meeting with your Advisor

Upon program admission, each student is assigned to a faculty advisor. Students are expected to meet with their advisor to begin program planning by the end of their first semester of study. All students must have a written program of study on file in order to continue into a second semester of study.

During the first planning meeting, the student and advisor discuss issues such as career goals, program requirements, application dates for selected courses and changes, liability insurance, professional licensure and graduation, as well as personal/professional development needs. The student and advisor work together to select electives and to build a program of study that fits the student's needs and meets program requirements. The written program of study must be signed by the student, advisor, and the graduate program coordinator. The student must consult with the advisor about making any future program changes. The signed program of study becomes the university’s contract with the student. The original is kept in the department files, and copies of it are provided both to the student and the Graduate School. Sample programs of study are included on the next pages.

The student-advisor relationship is ongoing and continues after the program of study is written. The student is encouraged to meet with his or her advisor periodically to discuss progress in the program, career issues, internship placement and professional experiences.
Program of Study
Professional Clinical Mental Health Counseling M.Ed. Program
Department of Leadership and Counselor Education

Student Name: ___________________________ Student ID Number: ___________________________
Address ___________________________ Phone Number: ___________________________
Street Address ___________________________
City ___________________________ State ___________________________ Zip Code ___________________________
Email Address ___________________________

### Basic Counseling Core

<table>
<thead>
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<th>Required Courses</th>
<th>Credits</th>
<th>Required?</th>
<th>Comments</th>
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<td>COUN 601 Lifespan Development</td>
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<td>COUN 605 Research in Counseling</td>
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<td>COUN 610 Addictions Counseling</td>
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<td>COUN 621 Assessment*</td>
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<td>COUN 639 Introduction to Professional Counseling</td>
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<tr>
<td>COUN 643 Group Procedures*</td>
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<td>COUN 670 Multicultural Counseling</td>
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<td>COUN 672 Issues and Ethics in Counseling</td>
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<tr>
<td>COUN 680 Career Counseling*</td>
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<td>COUN 683 Counseling Theories*</td>
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<tr>
<td>COUN 690 Counseling Skills*</td>
<td>3</td>
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<td>COUN 682 Family Counseling</td>
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### Clinical Mental Health Counseling Specialization

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<th>Required Courses</th>
<th>Credits</th>
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<tbody>
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<td>COUN 674 Diagnostic Systems in Counseling</td>
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<tr>
<td>COUN 686 Counseling Children and Adolescents</td>
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<tr>
<td>COUN 685 Organization, Administration, and Consultation in Mental Health Counseling</td>
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### Practicum  
(Requires grade of a “B-” or better for all courses denoted with an asterisk and full faculty approval.)

<table>
<thead>
<tr>
<th>Required Courses</th>
<th>Credits</th>
<th>Required?</th>
<th>Comments</th>
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<tbody>
<tr>
<td>COUN 693 Practicum</td>
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### Internship  
(Requires prior completion of practicum and full faculty approval.)

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### Electives

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<tr>
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### Exit Requirements

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<th>Required Courses</th>
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<th>Required?</th>
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<tbody>
<tr>
<td>Counselor Preparation Comprehensive Examination</td>
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Date Passed: ___________________________

Advisor’s Name: ___________________________  Program must be completed by: ___________________________

Student Signature ___________________________  Advisor’s Signature ___________________________  Program Coordinator Signature ___________________________
# Program of Study

**Professional School Counseling M.Ed. Program**  
**Department of Leadership and Counselor Education**  

---

**Student Name:**  
**Student ID Number:**  

**Address**  
**Street Address:**  
**City:**  
**State:**  
**Zip Code:**  
**Phone Number:**  
**Email Address:**  

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## Basic Counseling Core

<table>
<thead>
<tr>
<th>Required Courses</th>
<th>Credits</th>
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<tr>
<td>COUN 601 Lifespan Development</td>
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<td>COUN 610 Addictions Counseling</td>
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<tr>
<td>COUN 621 Assessment*</td>
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<td>✓</td>
<td></td>
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<tr>
<td>COUN 639 Introduction to Professional Counseling</td>
<td>3</td>
<td>✓</td>
<td></td>
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<tr>
<td>COUN 643 Group Procedures*</td>
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<td>COUN 683 Counseling Theories*</td>
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<td>COUN 690 Counseling Skills*</td>
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<td>COUN 685 Introduction to Professional Counseling</td>
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## School Counseling Specialization

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<td>COUN 686 Counseling Children and Adolescents</td>
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<tr>
<td>COUN 688 Organization, Administration, and Consultation in School Counseling</td>
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## Practicum  
(Requires grade of a “B-“ or better for all courses denoted with an asterisk and full faculty approval.)

<table>
<thead>
<tr>
<th>Required Courses</th>
<th>Credits</th>
<th>Required?</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>COUN 693 Practicum</td>
<td>3</td>
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## Internship  
(Requires prior completion of practicum and full faculty approval.)

<table>
<thead>
<tr>
<th>Required Courses</th>
<th>Credits</th>
<th>Required?</th>
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</tr>
</thead>
<tbody>
<tr>
<td>COUN 695 Internship in School Counseling</td>
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## Electives

<table>
<thead>
<tr>
<th>Required Courses</th>
<th>Credits</th>
<th>Required?</th>
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</tr>
</thead>
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## Exit Requirements

- **Counselor Preparation Comprehensive Examination**  
  **Date Passed:**

---

**Advisor’s Name:**  
**Program must be completed by:**  

---

**Student Signature**  
**Advisor’s Signature**  
**Program Coordinator Signature**
SECTION 6

Program Completion Requirements

This section addresses important policies and procedures related to program completion. These include general requirements for all degrees, requirements specific to the professional counseling program, and policies and procedures related to situations which may result in the dismissal of a student. It is essential that all students enrolled in the M.Ed. in Professional Counseling programs read this section carefully. Questions should be directed to the Program Coordinator.

General Requirements for all Graduate Degrees

The following statement, from the current Graduate Catalog is available online at The University of Mississippi’s Graduate School Webpage, serves as the foundation for the program and degree requirements in the M.Ed. program in Professional Counseling.

Degrees higher than the baccalaureate are granted at The University of Mississippi because of special attainments achieved by degree candidates. Prospective students should understand clearly that a graduate degree is not awarded upon the basis of a collection of course credits, or the passing of certain prescribed examinations, or the submission of a thesis or dissertation. In other words, the student cannot expect to receive a higher degree because of successfully completing the individual parts of the degree program. Course schedules, examinations, and other requirements explained in this catalog are to be regarded as minimal; and any student may be required to satisfy whatever additional requirements academic advisors deem appropriate.

To receive a higher degree from The University of Mississippi, the student must demonstrate to the satisfaction of the graduate faculty of the department, school, or college of the student and to the faculty of the University that the student has attained through intelligence, scholarship, industry, and personal qualities the high level of professional and academic competence that the faculty of each department expects of a person holding the degree being sought. The determination of fitness to qualify for the degree rests solely upon the estimate that the faculty makes of the student’s right to the degree.

Required Program Experiences

The master’s program in Professional Counseling requires that all students successfully complete a range of program experiences. These experiences include satisfactory completion of required courses and course experiences, development of basic counseling skills, performance in practicum and internship, and demonstration of specific clinical competencies beyond class requirements. In addition, as stated above in the General Degree Requirements of the Graduate School of The University of Mississippi, the counselor education faculty’s judgment of students’ “fitness to qualify for the degree” is a critical element of students’ progress and successful program completion.
Required Coursework

The courses currently required for each of the M.Ed. programs in professional counseling are listed below. Course descriptions are also included in Appendix B. Your advisor or program coordinator will assist you with course sequencing and program planning.

Clinical Mental Health Counseling (60 Hours)
- COUN 601 Lifespan Development
- COUN 605 Research in Counseling
- COUN 610 Addictions Counseling
- COUN 621 Assessment
- COUN 639 Introduction to Professional Counseling
- COUN 643 Group Procedures
- COUN 670 Multicultural Counseling
- COUN 672 Issues and Ethics in Counseling
- COUN 674 Diagnostics Systems in Counseling
- COUN 680 Career Counseling
- COUN 682 Family Counseling
- COUN 683 Counseling Theory
- COUN 685 Organization, Administration, and Consultation in Mental Health Counseling
- COUN 686 Counseling Children and Adolescents
- COUN 690 Counseling Skills
- COUN 693 Practicum
- COUN 695 Internship
- Electives (9 credits)

School Counseling (51 Hours*)
- COUN 601 Lifespan Development
- COUN 605 Research in Counseling
- COUN 610 Addictions Counseling
- COUN 621 Assessment
- COUN 639 Introduction to Professional Counseling
- COUN 643 Group Procedures
- COUN 670 Multicultural Counseling
- COUN 672 Issues and Ethics in Counseling
- COUN 680 Career Counseling
- COUN 683 Counseling Theory
- COUN 690 Counseling Skills
- COUN 682 Family Counseling
- COUN 686 Counseling Children and Adolescents
- COUN 688 Organization, Administration, and Consultation in School Counseling
- COUN 693 Practicum
- COUN 695 Internship

* In accordance with newly released CACREP standards, the professional school counseling program at the University of Mississippi will be expanded to a 60 credit hour program by the year 2020.
Required Grades
Students must maintain a cumulative GPA of 3.0 or better. Additionally, students not earning a B- or higher in any letter graded course must enroll in the course again and earn a B- or higher. Students not meeting these requirements two semesters in a row will be remediated using the Student Review, Retention, and Dismissal Policy and Procedures outlined in this handbook. If a student wishes to appeal a grade, the student must follow the University’s policy for appeal, detailed in the M-Book. http://www.chaptertools.net/site_files/file_1231796593.pdf.

Transfer Credits
Students who have transferred into this program may receive credit for previous courses at another universities with the approval of their faculty advisors and subject to university policies (see http://catalog.olemiss.edu/graduate-school/academics). A maximum of 12 semester hours of graduate credit from other accredited institutions can be transferred into a master's program at the discretion of the advisor. No more than 6 hours, subject to departmental approval, may be applied from a previous master’s degree to a second master’s degree. Typically, these courses are in the cognate and elective areas and do not include experiential courses such as COUN 643, COUN 690, practicum or internship. A grade of “B” or better must have been earned in the course for the credits to be transferable. Courses taken on a pass/fail or credit/no credit basis are not transferable.

Openness to Diversity Expectations
The Master’s Program in Counselor Education is committed to recruiting a diverse student body representing a wide array of cultures, geographical regions, and socioeconomic backgrounds. The unique experiences and perspectives students bring to the master’s program present possibilities for learning not only for individual students but also for their peers.

By accepting the invitation to enter the Master’s Program in Counselor Education, students commit to the ongoing development of their understanding of their own prejudices and preconceptions and developing their comprehension of the perspectives and lived experiences of diverse human beings. Students also accept the challenge to develop their acceptance of others and to learn to communicate more effectively with diverse human beings.

Failure to acknowledge other belief systems based on religion, culture, or geographic diversity can have deleterious effects on the clients whom counselors serve. Thus, counseling students entering the program at The University of Mississippi are bound by the American Counseling Association’s (ACA) Code of Ethics and as well as the ethical principles and guidelines developed by divisions of ACA (such as the American Mental Health Counselors Association and the American School Counselor Association). Espousing rigid morals, religious beliefs, and cultural morays that may conflict with ethical principles outlined by the American Counseling Association and the many affiliate organizations in professional counseling can lead to ethical and moral dilemmas that may bring students’ fundamental belief system to the attention of the faculty in the program. Additional educational requirements may be imposed on students who express belief systems that do not align with ACA ethical guidelines, in an effort to assist students in understanding and meeting the behavioral expectations for professional counselors working in diverse cultures. Additionally, students who do not exhibit sensitivity, understanding, and adherence to the ACA Code of Ethics may be dismissed from the program using the Student Review, Retention and Dismissal Policy included in this handbook.
Required Participation in Counselor Self-Awareness Activities

An emphasis on personal development is a vital and fundamental aspect of the counseling program. The faculty is committed to creating an atmosphere of safety for students in the classroom. However, students must recognize that an atmosphere of safety is not synonymous with an atmosphere of comfort. Throughout the program, students will be asked to take necessary risks such as sharing emotional reactions and participating actively in personal growth and self-reflection activities. The personal development of the counselor is as essential to professional development as gaining knowledge and skills in the counseling field. Some of the counselor self-awareness activities:

- Exploring family of origin issues through such as assignments completing a family genogram
- Identifying biases and assumptions through such as assignments completing a cultural narrative
- Participating in role-play and small group activities as a client during skills building experiences
- Giving and receiving feedback in individual/triadic and/or group supervision

Students should understand that taking necessary emotional risks, expressing and actively engaging in personal growth, and participating in self-reflection may be stressful. Because of this, students may discover a need to participate in counseling as clients. The University Counseling Center provides services to students at no cost for this purpose. Students who are currently involved in counseling as clients should discuss their participation as a student in the program with their counselor. The faculty is available to support students, provide referrals for counseling services, and consult with students’ counselors as needed. Students should also understand that at no point in the program will they be required to disclose personal information about their past. Students are advised and will be reminded to make responsible choices regarding their disclosures.

Required Adherence to the ACA Code of Ethics

All students enrolled in the professional counseling programs at The University of Mississippi are required to adhere to the Code of Ethics published and disseminated by the American Counseling Association. Students are introduced to this Code of Ethics in their initial semester of coursework, are encouraged to carefully read the entire document, and are expected to demonstrate the knowledge, skills, and dispositions to practice in accordance with these standards. Failure to do so consistently is grounds for dismissal from the program.

The ACA Code of Ethics is included as Appendix D of this handbook and is also available online at www.counseling.org.
Required Practicum and Internship Experiences

As part of their coursework, students will have the opportunity to acquire knowledge, develop dispositions, and build skills. Practicum represents students’ first opportunity to apply and further develop their knowledge, dispositions and skills with actual clients in a counseling setting. Students will be required to complete at least part of their practicum in the department’s new Counselor Education Clinic for Outreach and Personal Enrichment (located at Insight Park) and, with faculty approval, may also complete some of the practicum in an approved site.

Practicum Requirements
In accordance with the 2016 CACREP Standards, the following are requirements of practicum:

Insurance
1. Students must be covered by individual professional counseling liability insurance policies while enrolled in practicum.

Clock Hours
2. Students complete supervised counseling practicum experiences that total a minimum of 100 clock hours over a full academic term.
3. Practicum students complete at least 40 clock hours of direct service with actual clients that contributes to the development of counseling skills.

Supervision
4. Practicum students have weekly interaction with supervisors that averages one hour per week of individual and/or triadic supervision throughout the practicum by (1) a counselor education program faculty member, (2) a student supervisor who is under the supervision of a counselor education program faculty member, or (3) a site supervisor who is working in consultation on a regular schedule with a counselor education program faculty member in accordance with the supervision agreement.
5. Practicum students participate in an average of 1½ hours per week of group supervision on a regular schedule throughout the practicum. Group supervision must be provided by a counselor education program faculty member or a student supervisor who is under the supervision of a counselor education program faculty member. Group supervision of practicum and internship students should not exceed a 1:12 faculty: student ratio.
6. Supervision of practicum students includes program-appropriate audio/video recordings and/or live supervision of students’ interactions with clients.
7. Written supervision agreements define the roles and responsibilities of the faculty supervisor, site supervisor, and student during practicum and internship. When individual/triadic practicum supervision is conducted by a site supervisor in consultation with counselor education program faculty, the supervision agreement must detail the format and frequency of consultation to monitor student learning.

Evaluation
8. Formative and summative evaluations of the student’s counseling performance and ability to integrate and apply knowledge are conducted as part of the student’s practicum and internship.

Experiences
9. Students have the opportunity to become familiar with a variety of professional activities and resources, including technological resources, during their practicum.
10. In addition to the development of individual counseling skills, must lead or co-lead a counseling or psychoeducational group during practicum and/or internship.
Practicum serves as an integrating component in master’s degree programs, affording students a structured and supportive environment in which to apply counseling theories, techniques, and skills learned in previous coursework. Ideally, practicum provides students the opportunity to provide individual and/or group counseling to diverse clients with varying life situations. Students also develop skills in observation, feedback, case preparation, interview analysis and reporting. They should also become more aware of a variety of professional resources, including technological resources, and community referral agencies.

**Internship Requirements**

In accordance with the 2016 CACREP Standards, the following are requirements of internship:

**Insurance**
1. Students must be covered by individual professional counseling liability insurance policies while enrolled in internship.

**Clock Hours**
2. Students may not begin internship until the semester after they successfully complete practicum.
3. For internship, students must complete 600 clock hours of supervised counseling internship in roles and settings with clients relevant to their specialty area.
4. Internship students complete at least 240 clock hours of direct service.

**Supervision**
5. Internship students have weekly interaction with supervisors that averages one hour per week of individual and/or triadic supervision throughout the internship, provided by (1) the site supervisor, (2) counselor education program faculty, or (3) a student supervisor who is under the supervision of a counselor education program faculty member.
6. Internship students participate in an average of 1½ hours per week of group supervision on a regular schedule throughout the internship. Group supervision must be provided by a counselor education program faculty member or a student supervisor who is under the supervision of a counselor education program faculty member. Group supervision of practicum and internship students should not exceed a 1:12 faculty: student ratio.
7. Supervision of internship students includes program-appropriate audio/video recordings and/or live supervision of students’ interactions with clients.
8. Written supervision agreements define the roles and responsibilities of the faculty supervisor, site supervisor, and student during practicum and internship. When individual/triadic practicum supervision is conducted by a site supervisor in consultation with counselor education program faculty, the supervision agreement must detail the format and frequency of consultation to monitor student learning.

**Evaluation**
9. Formative and summative evaluations of the student’s counseling performance and ability to integrate and apply knowledge are conducted as part of the student’s practicum and internship.

**Experiences**
10. Students have the opportunity to become familiar with a variety of professional activities and resources, including technological resources, during their internship.
11. In addition to the development of individual counseling skills, must lead or co-lead a counseling or psychoeducational group during practicum and/or internship.
Comprehensive Examination Procedures and Requirements

Mastery of the knowledge content of the program is assessed in many ways throughout the program. One specific milestone for assessing students’ mastery of content knowledge is the program comprehensive examination. All master’s degree students in the Counselor Education Program are required to earn a passing score on the Counselor Preparation Comprehensive Examination (CPCE) in order to graduate from the program.

About the CPCE

The CPCE is a national examination offered and scored by the Center for Continuing Education (CCE). This exam assesses knowledge content from the eight CACREP common core knowledge content areas.

<table>
<thead>
<tr>
<th>CPCE Area</th>
<th>Related Courses in M.Ed. Program</th>
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<tbody>
<tr>
<td>Appraisal</td>
<td>COUN 621 Assessment in Counseling</td>
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<tr>
<td>Career and Lifestyle Development</td>
<td>COUN 680 Career Counseling</td>
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<tr>
<td>Group Work</td>
<td>COUN 643 Group Procedures</td>
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<td>Helping Relationships</td>
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</tr>
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<td>COUN 683 Counseling Theory</td>
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<td>Human Growth and Development</td>
<td>COUN 601 Lifespan Development</td>
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<td>Professional Orientation and Ethics</td>
<td>COUN 539 Introduction to Professional Counseling</td>
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<td>COUN 672 Issues and Ethics in Counseling</td>
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<td>Research and Program Evaluation</td>
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<td>Social and Cultural Foundations</td>
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</tr>
<tr>
<td></td>
<td>COUN 570 Multicultural Counseling</td>
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</table>

Eligibility to Sit for the CPCE

As illustrated in the table above, the sections of the CPCE correspond closely with a number of required courses in the M.Ed. program. Therefore, students must successfully complete (with a B- or higher) all of the following content knowledge courses before taking the CPCE.

- COUN 601 Lifespan Development
- COUN 605 Research in Counseling
- COUN 621 Assessment in Counseling
- COUN 639 Introduction to Professional Counseling and Ethics
- COUN 643 Group Procedures
- COUN 670 Multicultural Counseling
- COUN 672 Issues and Ethics in Counseling
- COUN 680 Career Counseling
- COUN 683 Counseling Theory
- COUN 690 Counseling Skills
Scoring of the CPCE

All master’s degree students in the Counselor Education Program are required to earn a passing score on the Counselor Preparation Comprehensive Examination (CPCE) in order to graduate from the program.

Students will receive a total score and individual scores for each of the knowledge content areas. Students not passing the comprehensive exam on the first attempt will have an additional attempt to pass the exam. Students scoring for the second attempt will use the highest scores from the two attempts across the eight CACREP common core knowledge content areas. Students will receive a score report showing both exams scores and a total using only the highest scores from the two administrations.

Should a student not earn a total passing score, the faculty will review that student’s score. This review will identify areas of consistent weakness in the specified knowledge content areas. Students who do not pass the examination after the second attempt will be required to audit the course or courses that represent the competency areas identified in the faculty review of the student’s score reports from the two examination attempts. The student will be required to pass these identified course(s) with a grade of at least an A- in order to take the CPCE a third time. Should the student fail the CPCE a third time, the faculty will refer that student to the Student Review, Retention, and Dismissal Policy and Procedures outlined in this manual.
SECTION 7

Disciplinary and Due Process Policies and Procedures

This section of the handbook provides important information about what can happen when the faculty has concerns about a student and when a student believes his or her rights have been violated. Although these situations rarely arise, all students are encouraged to carefully read this section. It includes information about the circumstances which can lead to a student’s suspension, probation or dismissal from the program. It also includes information about students’ due process rights in disciplinary situations as well as situations in which a student wishes to appeal a decision or grieve a grade.

Counselor Education Program Student Review, Retention, and Dismissal Policy and Procedures

The University and the Department’s Counselor Education Program expect conduct of all students that is consistent with the law, all relevant University policies and rules, including the University Student Conduct Code (included in the M-Book) and the American Counseling Association (ACA) Code of Ethics (included as Appendix D of this handbook).

Non-Academic Behaviors Resulting in University Disciplinary Action

Any conduct by a student that is a violation of the University’s nonacademic policies, standards and regulations may result in disciplinary action. These policies may be viewed in the M-Book, The University of Mississippi Handbook of Standards, which is published by the Office of the Dean of Students for the benefit of all students at The University of Mississippi. Every student enrolled at the university is expected to become familiar with the contents of this book. It is available online at http://www.chaptertools.net/site_files/file_1231796593.pdf.

Conduct Code may be referred to the Student Judicial Services office for campus disciplinary action, in addition to any actions taken by the Counseling Program. The Conduct Code outlines the kinds of student behaviors (academic and non-academic) that will result in disciplinary action, including possible dismissal from the University. Conduct violations by a student off-campus in university related activities (e.g. internship) will be handled the same as if the violation had occurred on-campus.

Academic Behaviors Resulting in Disciplinary Action by the Counselor Education Program

The counselor education faculty at The University of Mississippi has responsibilities not only to the students enrolled in its programs but also to actual and potential clients as well as to the profession as a whole. The ACA Code of Ethics (2014) articulates the faculty’s gatekeeping responsibilities both as counselor educators and as supervisors.
Specifically, the Standard F.9.b of the *Code of Ethics* states that

Counselor educators, through ongoing evaluation, are aware of and address the inability of some students to achieve counseling competencies. Counselor educators do the following:

1. assist students in securing remedial assistance when needed,
2. seek professional consultation and document their decision to dismiss or refer students for assistance, and
3. ensure that students have recourse in a timely manner to address decisions requiring them to seek assistance or to dismiss them and provide students with due process according to institutional policies and procedures.

Additionally, Standard F.6.b. of the *Code of Ethics* states that supervisors must provide students and supervisees with periodic performance appraisal and evaluation feedback throughout their training programs (Standard F.2.c). Specifically, Standard F.6.b. states that

Through initial and ongoing evaluation, supervisors are aware of supervisee limitations that might impede performance. Supervisors assist supervisees in securing remedial assistance when needed. They recommend dismissal from training programs, applied counseling settings, and state or voluntary professional credentialing processes when those supervisees are unable to demonstrate that they can provide competent professional services to a range of diverse clients. Supervisors seek consultation and document their decisions to dismiss or refer supervisees for assistance. They ensure that supervisees are aware of options available to them to address such decisions.

In this on-going evaluation of students in the program, the faculty will consider performance or behavior of students that provides relevant information as to their likely performance as professional counselors as an academic progress matter. When a student’s behavior or performance raises concerns about the student’s ability to perform satisfactorily in the practice of counseling, that behavior or performance will be considered as grounds for academic discipline, in accordance with the procedures outlined in this document.
Academic disciplinary action may be initiated when a student exhibits the following behavior in one discrete episode that is a violation of law or of the ACA Code of Ethics and/or when a student exhibits a documented pattern of recurring academic behavior which may include, but is not limited to the following:

- Frequent non-attendance and/or tardiness in classes, at field placement and other required departmental functions
- Failure, after two attempts, to demonstrate competency with a grade of B or better in one or more of the required courses in the master's program
- Failure to attain a cumulative grade-point average of 3.00 for two consecutive semesters
- Dishonest academic practices, including but not limited to, plagiarism, cheating, fabrication, aiding and abetting deception or dishonesty, and the falsification of records or official documents
- Deficient written and verbal communication skills
- Violation of the American Counseling Association Code of Ethics (2014)
- Violation of the University of Mississippi’s student responsibilities as outlined on the Student Responsibility Form (see Appendix A).
- Unethical, threatening or unprofessional conduct
- Consistent inability or unwillingness to carry out academic or field placement responsibilities
- Frequent excuse-making when tasks, assignments, tests, appointments are not completed in a timely manner or require rescheduling
- Lack of insight into negative consequences of own behavior and frequent blame of others or external factors for failures and difficulties in the academic or field placement environment
- Repeated failure to respond appropriately constructive feedback or supervision
- Inability to tolerate different points of view
- Violation of the policies and procedures established by the University, the Counselor Education Program, or those established by an assistantship, employment, practicum, or internship site.
- Performance or behaviors that demonstrate poor interpersonal skills and an inability to effectively communicate with others, often evidenced by repeated complaints from the field supervisor, other students or departmental faculty
- Behaviors that place clients at risk during field placement, including current substance abuse problems; exploitation of clients; emotional, physical or verbal abuse; vindictive action toward clients; or stealing from clients
- Behavioral displays of mental or emotional difficulties judged by the counselor education faculty to have potential to harm clients, supervisees, and students
- An unwillingness or inability to bracket personal attitudes or value systems which is judged by the counselor education faculty to have potential to harm clients, supervisees, and/or students or the potential to impair their work with others in class, practicum, internship, clinical or professional settings
- Failure to maintain regular contact with supervisors, which includes keeping them apprised of clinical and ethical issues pertaining to clients.
- Verbal or physical aggressiveness toward others
Student Review Policy & Procedures for Addressing Academic Behavior Issues

The Counselor Education program utilizes a three step process to review students when faculty or supervisor concerns arise about their academic behavior.

**Step 1 – Informal Review Meeting**

When a faculty member (or a practicum/internship supervisor) has a concern about a student’s academic behavior or performance, he or she will notify the student of the need for a Step 1 Informal Review Meeting. This meeting should be scheduled in advance and should take place in a private setting. The purpose of this meeting is not to be interpreted as disciplinary but rather as an effort to assist the student in finding ways to improve his/her performance or to explore the option of the student voluntarily leaving the program.

The concerned faculty member or supervisor should notify the student of his or her concerns. These concerns should be formally documented in writing, and the faculty member should provide the student with a copy of this documentation. A copy of the documentation should also be placed in the student’s permanent academic file. If the concerns are not resolved by the conclusion of the informal review meeting, the faculty member will work with the student to develop an informal, collaborative remediation plan.

If the faculty member or supervisor believes that the student has not made adequate behavioral changes in response to the informal remediation plan, he or she should request a Step 2 meeting.

**Step 2 – Formal Review Meeting**

With student, concerned faculty member and program coordinator. This meeting will involve both faculty members giving the student feedback and identifying needed changes. Student will be required to complete a remediation plan.

**Step 3 – Final Review Hearing**

Full faculty will review case, the concerns about student performance, and the student’s progress with the remediation plan. The outcome of this hearing may be resolution of the concerns. Conversely, the student may be dismissed or suspended from the program.
Step 2 – Formal Review Meeting

If the problem is not satisfactorily resolved in Step 1, the concerned faculty member or supervisor will notify the Graduate Program Coordinator of the need for a Step 2 Formal Review Meeting. Additionally, any student who is denied admission to practicum or internship a second time will be referred directly to the Graduate Program Coordinator a Formal Review Meeting. This meeting should be scheduled in advance and should take place in a private setting. The purpose of this meeting is disciplinary.

The Graduate Program Coordinator will notify the student in writing of the need for a Step 2 Formal Review Meeting. This letter will be sent to the student via the University of Mississippi email system using the student’s assigned university email address.

The Graduate Program Coordinator will facilitate the Step 2 Formal Review Meeting. At this meeting, the faculty member will review his or her initial concerns about the student, summarize the informal remediation plan, present written documentation of ongoing concerns, and clearly articulate his or her ongoing concerns to the student. The student will have the opportunity to respond to concerns and to discuss his or her attempts at progress. A discussion will be held to explore potential ways for the student to address the concern(s).

This meeting will conclude with the development of a formal remediation plan using the collaborative process described above. The remediation plan will include the specific concern or complaint in behavioral terms and the specific goals to address the concern. Additionally, the plan will include a timeline for each specific behavioral concern and goal. Finally, the plan will include the possible outcome of failing to attain the specified goals within the timeframes established by the collaborative process described above. Following this meeting, the Graduate Program Coordinator will prepare a letter summarizing the Formal Review Meeting and the remediation plan. The faculty member’s written documentation of ongoing concerns, remediation plan, and letter will be placed in the student’s permanent academic file.

A Step 3 Final Review Meeting will then be scheduled to review the student’s progress. This meeting should coincide with the timeline established in the formal remediation plan. However, in extraordinary cases, a Step 3 Final Review Meeting may be called earlier to address very serious concerns.

Step 3 – Final Review Meeting

Any student placed on a formal remediation plan at Step 2 will be required to appear before the full faculty for a Step 2 Final Meeting. At this meeting, the faculty member whose concerns prompted the remediation plan will review his or her initial concerns about the student, summarize the formal remediation plan, present written documentation of ongoing concerns, and make recommendations regarding the disposition of the case. The student and/or his/her advisor will have the right, within reason, to question anyone presenting information to the committee during the review. In addition, the student will have the opportunity to speak on his/her behalf, bring witnesses to testify at the review, and present any written or other type of evidence to be considered by the Review Committee. If the student does not attend the scheduled meeting, the Formal Review Meeting will proceed as scheduled. The meeting will be audio-recorded.
Rights of Students during a Step 3 Final Review Meeting
In order to protect a student’s legal rights and guarantee adequate due process during a Step 3 Final Review meeting, the student is entitled to the following:

1. The student shall have the right to remain silent during the review.
2. The student shall have the right to a voluntary advisor of his/her choice. This advisor may be an active participant in the review. The advisor must be a member in good standing of the University of Mississippi community (i.e. any person who is student, faculty member, staff member or any other person employed by the University). The student does not have the right to have an attorney present at the Final Review Meeting unless that attorney is also a member in good standing of the University community as defined in this section of the policy.
3. The student undergoing review may challenge any member of the faculty on grounds of prejudice or impartiality and request the removal of that particular member from the review meeting. The challenge will be submitted, in writing, to the Graduate Program Coordinator at the beginning of the review. If this occurs, the faculty shall deliberate in private and determine, by majority vote (excluding the member being challenged), whether the faculty member should be excused from that particular case.
4. The student and the advisor will have the right, within reason, to question anyone presenting information to the committee during the review.
5. The student will have the opportunity to speak on his/her behalf, bring witnesses to testify at the review, and present any written or other type of evidence to be considered by the Review Committee. All evidence must be presented at the review in order to be considered.

Deliberation and Disposition
After the review meeting, the faculty shall deliberate in private and determine, by majority vote, the disposition of the case. Possible dispositions include:

- Resolution
- Suspension
- Dismissal

Resolution of the case should be recommended when the student has successfully completed the formal remediation plan, corrected problematic academic behaviors, and not raised any additional concerns.

Suspension of the student should be recommended only in situations in which the faculty believes that time away from the program will allow the student to successfully address concerns. Students may be suspended for a specified or unspecified length of time with or without stipulated conditions for re-admission to the program. In cases of suspension, it will be necessary for the student to apply for re-admission to the program. Such an application will necessitate a second full faculty meeting at which the student may present evidence of successful completion of the remediation plan and offer evidence of his or her readiness to re-enter the program.

Dismissal of the student should be recommended if the student fails to complete the remediation plan, the problem has not been satisfactorily resolved, and the faculty does not believe that time away from the program will allow the student to successfully address concerns. Students who are dismissed from the program will not be considered for re-admission. In the case of dismissal, the program will provide reasonable assistance to facilitate transition from the program to another academic program or career choice.
The Graduate Program Coordinator will notify the student, in writing, of the decision within five business days of the review.

**Right to Appeal**

If a recommendation for dismissal, probation, or suspension is made or if a student wishes to appeal a grade, the student must follow the University’s policy for appeal, detailed in the M-Book. [http://www.chaptertools.net/site_files/file_1231796593.pdf](http://www.chaptertools.net/site_files/file_1231796593.pdf).

**Graduate School Academic Discipline Policies and Procedures**

The Counselor Education Program’s Student Review, Retention, and Dismissal Policy and Procedures are intended as program-specific supplements to the University of Mississippi’s Graduate School’s Academic Discipline Policies and Procedures. All students in the counselor education program are also subject to the Graduate School’s policies:

The academic codes of discipline of the University extend to all students, including those in graduate programs. The Schools of Law, Engineering, and Pharmacy have separate codes and procedures. A complete statement of the academic codes of discipline can be found in the M-Book. All graduate students, especially those working as Graduate Assistants or Graduate Instructors, have a special responsibility to familiarize themselves with the disciplinary codes of the University. As stated in the M-Book, “every member of the University community is charged

... with upholding high standards of honesty and fairness in all academic matters. Any action which is contrary to these standards is subject to academic discipline as are actions which are harmful to the facilities that support the academic environment. Mutual respect and fairness are the bases of the instructor-student relationship at The University of Mississippi.” For a complete statement of all policies regarding academic discipline, consult the M-Book (available at the Dean of Students, 422 Student Union) or read “Section One: Academic Policies, Standards and Regulations,” available on the web at: [http://www.chaptertools.net/site_files/file_1231796593.pdf](http://www.chaptertools.net/site_files/file_1231796593.pdf)

**Graduate School Appeals Procedures**

The master’s program in Counselor Education implements The University of Mississippi appeal procedures included The University of Mississippi Graduate Student Handbook. These procedures apply to students wishing to appeal an academic grade or comprehensive examination results.

This procedure provides the graduate or undergraduate student with a means of appealing a course grade that he or she believes was based on prejudice, discrimination, arbitrary or capricious action, or other reasons unrelated to academic performance. As with the above standards of discipline, all graduate students, especially those serving as Instructors or Assistants, should familiarize themselves with this procedure by reading Part Three (“Academic Grade-Appeal Procedure”) of Section One in the M-Book. This section can be found on the web at: [http://www.chaptertools.net/site_files/file_1231796593.pdf](http://www.chaptertools.net/site_files/file_1231796593.pdf)
School of Education Grievance Policy and Procedures

All students in the counselor education program have rights to initiate grievances against faculty members. This is to be done in accordance with the University of Mississippi’s School of Education (SOE) Grievance Policy and Procedures:

The University of Mississippi’s School of Education (SOE) defines a legitimate grievance as a circumstance that can be substantiated and is regarded by the candidate as a just cause for complaint. A grievance can be relevant to any incident involving a classroom instructor, faculty advisor, field experience supervisor, administrator or faculty member in the SOE. A grievance may deal with circumstances involving alleged unfair or irresponsible behavior including violations of department or SOE policies. Candidates should follow the University policy for grievances related to academic issues.

Procedures Used to Initiate SOE Grievance:

Step 1: Informal Processes
The SOE encourages candidates to make every effort to resolve their problems and concerns directly and informally with the faculty members or other involved parties. Discussions among the involved parties (including the department chairperson when appropriate) constitute the first step in the informal process.

Step 2: Formal Procedures at the Department Level
If informal discussions do not result in a resolution of the problem, the candidate may initiate the formal grievance procedure by submitting a written complaint appropriate to the nature of the complaint. Should the department chair be named in the grievance, the Assistant Dean for Certification and Advisement, the SOE’s grievance officer, will appoint a faculty member in the department to conduct the departmental grievance process. A formal complaint must be filed using the School of Education Candidate Grievance Form and must be submitted within 15 class days of the point in time when the grievant had knowledge or should have had knowledge of the problem being grieved. The department chair or Associate Dean will conduct a formal grievance hearing utilizing existing departmental grievance procedures and will inform the candidate of a decision within 15 class days. A copy of the Departmental Candidate Grievance Report will be filed in the department and will be forwarded to the School if the decision is appealed to that level.

Step 3: Formal Procedures at the School Level
If, after utilizing the procedures outlined in Step 2, the candidate's problem is not resolved, the candidate has a right to file a grievance at the School level within 15 class days following the decision rendered by the department chairperson. The Associate Dean for the School of Education will appoint an ad hoc panel to conduct a hearing.

The ad hoc panel will consist of a panel of three members, one of whom is a candidate. The ad hoc panel will be selected from a pool of faculty and candidates in the standing Candidate Grievance Committee appointed by the Associate Dean, which consists of at least eight faculty members and at least four candidates. A faculty member will serve as chair (appointed by the Associate Dean) of the ad hoc panel and will conduct the hearing according to the Guidelines for the Conduct of Candidate Grievance Hearings. After the hearing, the ad hoc panel will meet in closed session to determine its
recommendations. The recommendations of the ad hoc panel will be forwarded to the Dean of the School by the Associate Dean. The Dean will inform the candidate of the School's decision.

**Step 4: Appeal of the School's Decision**
Decisions of this committee will be considered final; however, an appeal for review of a decision may be directed to the Dean. The Dean may uphold or overturn a decision of the committee. Decisions of the Dean are final and not subject to appeal within the School of Education.

**SOE Guidelines for Conduct of Formal Candidate Grievance Hearings at The School Level**

- A copy of the *Candidate Grievance Form* (see Appendix C) filed by the candidate will be forwarded to the department(s) and parties involved by the Associate Dean.

- Within ten (10) days of receipt of the candidate's grievance form, the department(s) and the candidate filing the grievance will submit supporting documents and a list of witnesses that may be called to participate in a hearing. Each party will receive a copy of the materials and list of witnesses submitted by the other party.

- An ad hoc panel will be appointed by the Associate Dean. The panel members will be selected from the pool of members on the School Candidate Grievance Committee and will consist of three members, one of which will be a candidate. One of the faculty members will be appointed to serve as chair.

- The Associate Dean will forward all materials to the hearing panel and will schedule a hearing within twenty (20) class days of receipt of all written information. All parties involved will be notified as to date, time, and location of the hearing.

- The Associate Dean will serve as hearing officer and conduct the hearing utilizing the following format:
  1. The petitioner and the respondent will each provide a brief opening statement.
  2. Each party will make a presentation of position and evidence, beginning with the petitioner. Witnesses may be called at this time. Questioning will be restricted to members of the hearing panel and the hearing officer. Questions by the involved parties to the witnesses will be addressed through the hearing officer.
  3. Each party will have the opportunity for rebuttal during which additional evidence may be introduced to refute points made by the other party.
  4. Each party will make a brief summary statement.

- Attendance at hearings is limited to the hearing officer, panel members, the petitioner, the respondent, and their respective witnesses. Witnesses may be present only during their own testimony.

- After the hearing the panel will meet in closed session to determine its recommendations that will be forwarded to the Dean. The written recommendations will include a finding of fact regarding the incident and application of School or University policy. The Dean will inform all parties of a decision within five (5) class days after the hearing.
Sexual Harassment Policy

The Counselor Education faculty is committed to providing a learning environment for all students that is free of sexual harassment. Toward this end, the program has adopted The University of Mississippi Sexual Harassment Policy, which is also found in the Graduate Student Handbook. This policy states that:

The University of Mississippi has adopted the policy that all faculty, staff, and students have the right to work and learn in an environment free from harassment due to unwelcome and unwanted sexual attention. Beyond any civil and criminal repercussions (sexual harassment is a violation of federal law), offenders will be subject to appropriate University disciplinary action. Students who violate these policies may face expulsion; faculty and staff may face dismissal. Sexual harassment is defined as any unwelcome sexual advance, any request for sexual favors, and/or other verbal or physical conduct of a sexual nature when a) submission to such conduct is made (explicitly or implicitly) a condition of employment or education, b) submission to or rejection of such conduct is used as the basis of for academic or employment decisions, or c) such conduct has the purpose or effect of substantially interfering with an individual’s academic or work performance by creating an intimidating, hostile, or offensive learning or working environment. Acts of Sexual Harassment include, but are not limited to, the following:

- Physical Acts (rape, assault, touching, etc.)
- Direct or Implied Threats Regarding Employment or Academic Status
- Direct Propositions of a Sexual Nature
- Subtle Pressure for Sexual Activity
- A Pattern of Conduct that Embarrasses or Humiliates
- Use of Sexually Degrading or Vulgar Language to Describe a Student or Employee
- Suggestive or Obscene Comments or Gestures
- Gratuitous Display of Sexually Suggestive Objects, Pictures, or Cartoons

Procedures for addressing complaints of sexual harassment are described in the M-Book, the Faculty and Staff Handbook, and in the bulletin “Sexual Harassment: A Guide for Students and Employees,” available in the Office of Equal Opportunity and Regulatory Compliance (217 Martindale). During investigations of such matters, the University takes all reasonable steps to preserve confidentiality.
SECTION 8

Student and Employer Feedback

Instructor Effectiveness

Graduate students have the opportunity to evaluate faculty members through the university's course evaluation process at the end of a semester. Students are asked to use the course evaluation to provide feedback regarding the teaching effectiveness of faculty members or visiting lecturers. The course evaluations are reviewed by the department head and are then returned to the faculty member or visiting lecturer. The course evaluations are reviewed carefully when faculty members are considered for promotion and tenure or when visiting lecturers are considered for additional teaching responsibilities.

Program Evaluation

Follow-up studies are conducted periodically with program graduates and their employers to obtain feedback about our programs. We are interested in their perceptions of the graduates' preparedness to work as counselors in school, college, and community settings. The questionnaires focus specifically on the areas outlined in our program goals and objectives.
SECTION 9
Licensure, Endorsement and Certification

Endorsement by Faculty

Graduates of our master’s degree programs in professional counseling are eligible to apply for licensure by the State of Mississippi or by other states in which they later establish residency. Eligibility for licensure generally requires:

• Completion of a degree program meeting the credentialing body’s established minimum education requirements
• Endorsement by the counselor education program faculty at the university from which the degree was earned
• Passage of examinations

Consistent with the 2014 ACA Code of Ethics Standard F.6.d. on Endorsement, The University of Mississippi’s Counselor Education program faculty in their roles as instructors and supervisors will endorse students in the program for certification, licensure, employment, or completion of their degrees only when they believe these students are qualified for the endorsement. Regardless of qualifications, the Counselor Education Program faculty will not endorse students whom they believe to be impaired in any way that would interfere with the performance of the duties associated with the endorsement. Similarly, a student or graduate will be recommended for employment only in professional roles and functions for which he/she has been trained.

Professional Counselor Licensure (LPC)

Graduates of the Professional Clinical Mental Health Counseling Program are eligible to be recommended for the Mississippi Licensed Professional Counselor (LPC) license. Upon graduation, students are eligible to practice under the supervision of a licensed professional counselor. In order to begin doing so, graduates must make arrangements to be supervised by a Board Qualified Supervisor (BQS), and the supervisor must submit a Post-Graduate Supervisory Agreement Form. This form must be submitted online on the website for the Mississippi State Board of Examiners for Licensed Professional Counselors: https://www.lpc.ms.gov/secure/index.asp. Without this agreement in place and without ongoing supervision, graduates may not practice counseling.

After obtaining 3500 hours of counseling experience under the supervision of a licensed professional counselor (LPC) and passing the National Clinical Mental Health Counselor Examination (NCMHCE), the person is eligible for licensure in the State of Mississippi.

With regard to the 3500 hours of counseling experience, graduates are encouraged to consult the most recent Administrative Rules governing counselor licensure. Currently, these rules indicate that: “A total of three thousand five hundred (3,500) supervised hours of counseling (approximately 2 years) in a clinical setting post bachelor’s degree comprised of the following:
• A maximum of forty (40) supervised hours may be obtained per work week
• Up to one thousand seven hundred fifty (1,750) hours may be obtained while enrolled in a Graduate Degree program, including internship/practicum and, although not required, where possible the Board would prefer LPC Supervision during internship/practicum. A minimum of one thousand one hundred sixty-seven (1,167) supervised hours must be in direct counseling services (CACREP definition of direct services: Interaction with clients that includes the application of counseling, consultation, or human development skills. In general the term is used to refer to time that practicum or internship students or supervisees work directly with clients) and/or psychotherapy service to clients to include counseling related activities (i.e. case notes, staffing, case consultation, or testing/assessment of clients).
• One hundred (100) hours of individual face to face supervision are required. Up to 50 hours may be obtained while enrolled in a Graduate Degree program, including internship/practicum. This is based on at least (a minimum of) 1 hour of supervision for every 25 hours of supervisee’s direct service with clients. (After January 1, 2008 supervision must be by a Board Qualified Supervisor.) No more than 50 hours of individual supervision received during a Graduate Degree Program will be accepted.
• Group supervision will be acceptable for not more than fifty (50) hours of the required one hundred (100) hours of individual supervision. This is based on two (2) hours of group supervision being equivalent to one (1) hour of individual supervision.
• Individual supervision provided by multiple supervisors regarding the same direct client service hours at the same site during the same time frame will not be accepted.

Applications and further information on licensure and the licensure examination may be obtained directly from the Mississippi State Board of Examiners for Licensed Professional Counselors; 239 N. Lamar Street – Suite 402; Jackson, MS 39201; (601)-359-1010
https://www.lpc.ms.gov/secure/index.asp

Students are encouraged to consult this website very carefully upon graduation. Currently, there are regulations regarding Post-Graduate Supervisory Agreement Forms:

• The Board’s Rules and Regulations require that all supervisors submit a supervisory agreement to the Board office prior to beginning any supervisory relationship.
• Para. 4.4, A, 13: "At the beginning of a supervision relationship, supervisors shall submit to the Board a signed contract or agreement between each active supervisee and supervisor that states requirements of each party. Academic supervisors are exempt from this requirement."
• In compliance with paragraph 4.4, A, 13, and effective July 1, 2014, any hours of experience conducted under the supervision of a Board Qualified Supervisor that is submitted by an applicant for Licensed Professional Counselor must be documented with a completed, notarized, and submitted Supervision Agreement Form prior to the start of the supervised experience.
• Any hours of experience reported to have occurred on dates on or after July 1, 2014, that are not properly documented will not be accepted for application for license for Licensed Professional Counselor.
**Educator License in Guidance and Counseling**

Students completing the School Counseling Program are eligible to apply to the Mississippi Board of Education for a Class AA Five Year Educator License in Guidance and Counseling (436). Licensure guidelines are available at [http://www.mde.k12.ms.us/OEL/LG](http://www.mde.k12.ms.us/OEL/LG). There are three ways in which to meet the requirements for this credential, depending upon whether you are also licensed as a teacher.

**Either**
1. Hold a five year educator license  
2. Complete a master’s degree program in guidance and counseling  
3. Praxis II (Specialty Area Test for Guidance Counselor)

**OR**
1. Complete an approved master’s degree program for guidance and counseling which includes a full year internship  
2. Twenty-one (21) ACT equivalent or achieve the nationally recommended passing score on the Praxis Core Academic Skills for Educators examination; AND
   No less than 2.75 GPA on content coursework in the requested area of certification or passing Praxis II scores at or above the national recommended score provided that the accepted cohort of candidates of the institution’s teacher education program meets or exceeds a 3.0 GPA on pre-major coursework.  
3. Praxis CORE (Core Academic Skills for Educators)  
4. Praxis II (Specialty Area Test for Guidance Counselor)

**OR**
1. Hold National Certified School Counselor (NCSC) credential issued by National Board of Certified Counselors (NBCC)

**National Counselor Certification (NCC)**

Graduates of the Clinical Mental Health Counseling Program and the School Counseling Program are eligible for the National Certified Counselor (NCC) credential. This voluntary, national certification process recognizes counselors who have met training program and experience standards established by the National Board for Certified Counselors. The requirements to become an NCC are: (1) a master’s degree in counseling or with a major study in counseling from a regionally accredited institution; (2) 3,000 hours of counseling experience and 100 hours of supervision both over a two year post-master’s time period; and (3) passage of the National Counselor Examination (NCE). Graduates of programs accredited by CACREP do not have to meet the post-master’s experience and supervision requirement. Students in these programs are also eligible to take the NCE examination before graduation. For further information, contact NBCC, 3 Terrace Way, suite D, Greensboro, NC, 27403, (336) 547-0607, and [http://www.nbcc.org](http://www.nbcc.org).
SECTION 10
Professional Organizations

Students are encouraged to join state and national professional counseling organizations. Membership in these organizations can be beneficial to students in a number of ways. Publications and conventions help members stay in touch with the most recent developments in the profession. They also provide valuable contacts for graduates seeking positions in counseling or student affairs. Students receive reduced membership rates in most organizations. Listed below are the major organizations that students may consider joining. Additional information about joining these or other organizations can be obtained from faculty advisors.

American Counseling Association (ACA)
5999 Stevenson Ave.
Alexandria, VA 22304
703.823.9800
800.347.6647
http://www.counseling.org

Divisions of the American Counseling Association (ACA)

- Association for Adult Development and Aging (AADA)
- Association for Assessment and Research in Counseling (AARC)
- Association for Child and Adolescent Counseling (ACAC)
- Association for Creativity in Counseling (ACC)
- American College Counseling Association (ACCA)
- Association for Counselor Education and Supervision (ACES)
- Association for Humanistic Counseling (AHC)
- Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling (ALGBTIC)
- Association for Multicultural Counseling and Development (AMCD)
- American Mental Health Counselors Association (AMHCA)
- American Rehabilitation Counseling Association (ARCA)
- American School Counselor Association (ASCA)
- Association for Spiritual, Ethical, and Religious Values in Counseling (ASERVIC)
- Association for Specialists in Group Work (ASGW)
- Counselors for Social Justice (CSJ)
- International Association of Addiction and Offender Counselors (IAAOC)
- International Association of Marriage and Family Counselors (IAMFC)
- Military and Government Counseling Association (MGCA)
- National Career Development Association (NCDA)
- National Employment Counseling Association (NECA)
American Mental Health Counselors Association (AMHCA)
801 N. Fairfax Street, Suite 304
Alexandria, VA 22314
703.548.6002
800.326.2642
http://www.amhca.org

American School Counselor Association (ASCA)
1101 King Street, Suite 310
Alexandria, VA 22314
703.683.ASCA
800.306.4722
http://www.schoolcounselor.org/

Association for Play Therapy (APT)
3198 Willow Avenue, Suite 110
Clovis, CA 93612
Phone: 559.294.2128
www.a4pt.org
Mississippi Counseling Association (MCA)
P.O Box 353
Long Beach, MS 39560
Phone 228.669.5015
https://mica.memberclicks.net/

Divisions of the Mississippi Counseling Association
- Mississippi Association for Counselor Education and Supervision (MACES)
- Mississippi Association for Marriage and Family Counseling (MAMFC)
- Mississippi Association for Spiritual, Ethical & Religious Values in Counseling (MASERVIC)
- Mississippi Licensed Professional Counselors Association (MLPCA)
- Mississippi School Counselors Association (MSCA)

Interest Sections of the Mississippi Counseling Association
- Mississippi Counselor Alumni Association (MCAA)
- Mississippi Graduate Student Counselor Association (MGSCA)
- Mississippi Association for Multicultural Counseling and Development (MAMCD)
- Mississippi Community and Junior College Association (MCJCCA)
- Mississippi Vocational Counselor Association (MVCA)

Regions of the Mississippi Counseling Association
MCA regions are grouped by county.

- **Capitol Area** (Hinds, Rankin, Warren, Claiborne)
- **Delta Area** (Issaquena, Sunflower, Leflore, Coahoma, Washington, Sharkey, Bolivar, Humphries)
- **Mid-Eastern** (Scott, Lauderdale, Leake, Oktibbeha, Neshoba, Clay, Newton, Kemper, Lowndes, Winston, Noxubee)
- **Gulf Coast** (Stone, Hancock, George, Harrison, Jackson, Pearl River)
- **Magnolia** (Copiah, Lincoln, Jefferson, Adams, Wilkinson, Amite, Walthall, Lawrence, Simpson, Pike, Franklin)
- **Mid-Mississippi** (Holmes, Choctaw, Montgomery, Attala, Webster, Grenada, Madison, Yazoo, Carroll)
- **Northeast** (Alcorn, Prentiss, Tishomingo, Union, Tippah)
- **Northwest** (Benton, DeSoto, Tate, Tunica, Lafayette, Tallahatchie, Panola, Quitman, Marshall, Calhoun, Yalobusha)
- **Pinebelt** (Smith, Jasper, Clark, Jones, Covington, Wayne, Marion, Lamar, Jeff Davis, Forrest, Perry, Greene)
- **Tombigbee** (Lee, Pontotoc, Itawamba, Chickasaw, Monroe)
SECTION 11
Faculty and Staff

The counselor education program faculty includes five full-time individuals who have a continuing commitment to their students, the program, the profession, and their own professional development. Faculty members are involved in professional activities at the state and national levels, including research and publication, conference presentations, and holding offices in professional organizations.

Faculty offices are located on the first floor of Guyton Hall. The telephone number for the department office is 662-915-7069. Each faculty member can also be reached by telephone directly. Their direct office numbers and email addresses are listed below.

**Suzanne M. Dugger, Ed.D.**
Professor of Counselor Education and Program Coordinator

<table>
<thead>
<tr>
<th>Contact Information:</th>
<th>Education:</th>
</tr>
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<tbody>
<tr>
<td>Office Location: 139 Guyton</td>
<td>A. B., Harvard University</td>
</tr>
<tr>
<td>Telephone: 662-915-8821</td>
<td>M.A., Central Michigan University</td>
</tr>
<tr>
<td>Email: <a href="mailto:smdugger@olemiss.edu">smdugger@olemiss.edu</a></td>
<td>Ed.D., Western Michigan University</td>
</tr>
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Dr. Dugger experience includes 5 years of experience as a school counselor, 3 years as a college counselor, 7 years in private practice, and 25 years as a counselor educator. Her teaching and research interests include career counseling, counseling children, school counseling, the counseling process, diagnosis and treatment planning, and doctoral education.

**Alexandria K. Kerwin, Ph.D., LPC (Idaho), NCC**
Assistant Professor of Counselor Education

<table>
<thead>
<tr>
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<th>Education:</th>
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<tbody>
<tr>
<td>Office Location: 142 Guyton</td>
<td>B.A., The University of Southern Mississippi</td>
</tr>
<tr>
<td>Telephone: 662-915-2342</td>
<td>M.S., The University of Southern Mississippi</td>
</tr>
<tr>
<td>Email: <a href="mailto:akkerwin@olemiss.edu">akkerwin@olemiss.edu</a></td>
<td>Ph.D., Idaho State University</td>
</tr>
</tbody>
</table>

Dr. Kerwin has experience as a mental health counselor in a K-12 school-based setting, adolescent offenders program, and in university counseling centers. She also has worked as a community-based advocate for refugees. Courses you are likely to take from Dr. Kerwin are Introduction to Professional Counseling, Lifespan Development, and Addictions. Her research interests include professional identity, social justice, and counselor education.
Mandy L. Perryman
Assistant Professor of Counselor Education

Contact Information:
Office Location: 143 Guyton
Telephone: 662-915-7816
Email: perryman@olemiss.edu

Education:
B.A., Louisiana Tech University
M.A., Nicholls State University
Ph.D., University of New Mexico

Dr. Perryman has experience counseling children, adolescents and adults and providing play therapy. Courses you are likely to take from Dr. Perryman include Counseling Skills, Group Counseling, and Multicultural Counseling. Her research interests include eating disorders/disordered eating and compassion fatigue and wellness.

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Dr. Showalter’s teaching and research interests include counseling relationships, college counseling, and supervision. He also serves as the Clinical Coordinator at the Counselor Education Clinic for Outreach and Personal Enrichment.

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Dr. Winburn’s teaching and research interests include school counseling, at-risk students, bullying and play therapy. She also serves as the Assessment Coordinator for the Counselor Education Program.
Department Chair and Support Staff

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COPE Clinic Operations Supervisor and Graduate Activities Assistant

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APPENDIX A

Student Responsibility Form
I understand that I am responsible for the information presented in the M.Ed. Program in Professional Counseling Student Handbook.

I have reviewed these materials carefully. In particular, I reviewed information about:

- Required coursework and programs of study
- Program completion requirements, including required grades, openness to diversity expectations, required participation in counselor self-awareness activities, required adherence to the ACA Code of Ethics, practicum and internship requirements, and the comprehensive examination procedures and requirements
- Disciplinary and due process policies and procedures, including academic and non-academic grounds for discipline and/or dismissal from the program
- Post-graduation licensure, endorsement and certification procedures
- Professional associations and organizations

I understand that if I have questions concerning these materials and the statement below, it is my responsibility to ask my advisor for clarification.

I understand that some of my class assignments ask for personal reflection and that, at times, I may feel some deeper emotional experiences that may benefit from counseling or other therapeutic interventions. Should I have these types of emotional experiences, I understand that I am expected to seek professional services (i.e., University Counseling Center or private services). In addition, I understand that faculty may initiate student retention and remediation procedures should these experiences impede my performance as a counselor in training.

I understand that neither admission into the Counselor Education Program nor success in academic courses guarantee graduation.

I have carefully reviewed the M.Ed. Program in Professional Counseling Student Handbook and the statements made on this page. I understand that I am responsible for the information presented therein and that my signed form will be filed in my permanent academic record.

Printed Name  
Signature  
Date
APPENDIX B

Course Descriptions

COUN 503. PSYCHOMETRIC PRINCIPLES
Introduction to the principles and concepts basic to measurement. Test construction, evaluation procedures, interpretation, and ethics related to testing are emphasized. Knowledge of basic statistical principles is required. (3).

COUN 523. GROUP STUDY OF PROBLEMS
Area/problems approved by instructor. (For groups interested in improving areas/problems within an agency/system.) (3 or 6). (Z grade).

COUN 545. LABORATORY: INTERPERSONAL COMMUNICATION SKILLS
Experiential seminar in communication skills and group methods; emphasis on the dynamics of interpersonal relationships with consideration of current theoretical perspectives. (1-6). (Z grade).

COUN 551. INDIVIDUAL STUDY
Development of special projects under supervision. Prerequisite: consent of instructor. (1-6).

COUN 573. LEARNING SEMINAR
Systems and principles of learning. Various contributors and their theories. Knowledge of basic learning principles is required. (May be repeated for credit.) (3).

COUN 593, 594, 595.. TOPICS IN COUNSELING
Topical format to address areas of interest to professional counselors. May be repeated for credit.

COUN 601. LIFE SPAN DEVELOPMENT
Physical, emotional, and social growth. Emphasis on development across the life span. (3).

COUN 603. ADVANCED EDUCATIONAL PSYCHOLOGY
Survey of applied psychology in education; integration of learning theory and practice. (3).

COUN 605. RESEARCH IN COUNSELING
An introduction to research methods, statistical analysis, needs assessment, and program evaluation as it relates to the field of counseling. Research activities, computational and computer applications, critical consideration of research, and accountability as scientist-practitioner will be emphasized. (3).

COUN 621. ASSESSMENT IN COUNSELING I
Basic assessment principles including achievement, aptitude, and intelligence tests, interest and personality inventories, clinical interviews, case conferences, and observations. (3).
COUN 622. ASSESSMENT IN COUNSELING II
Continuation of COUN 621 with more detail and emphasis on personality measures and advanced assessment techniques. (3).

COUN 623. INDIVIDUAL ASSESSMENT I
Administration, scoring, and interpretation of individual measures of intelligence (emphasis on Wechsler Scales), achievement, adaptive behavior, and related areas. Prerequisite: COUN 621 or equivalent. Permission of instructor. (3).

COUN 624. INDIVIDUAL ASSESSMENT II
Continuation of COUN 623 with emphasis on Stanford-Binet Intelligence Scale. Prerequisite: COUN 621 or equivalent and consent of the instructor. (3).

COUN 625. PRACTICUM IN SCHOOL PSYCHOMETRY
On site practicum with emphasis on administration, scoring, and interpretation of intellectual assessment instruments. Prerequisite: COUN 623 and consent of instructor; application must be submitted and approved during the preceding semester. (3-6) (Z Grade)

COUN 639. INTRODUCTION TO PROFESSIONAL COUNSELING & ETHICS
History and overview of counseling as a profession. An introduction to philosophical foundations, multicultural factors, services, theories and systems, contributors, and ethics. COUN majors only. (3).

COUN 643. GROUP PROCEDURES
Principles and dynamics of group interaction and process are examined from didactic and experiential perspectives. Application to areas of group counseling in various settings will be considered with reference to research and pertinent issues. (3).

COUN 652. ADVANCED INDIVIDUAL STUDY
Development of special projects under supervision. Prerequisite: consent of instructor. (1-6).

COUN 653. GROUP COUNSELING PRACTICUM
Supervised practicum in leading counseling and psychoeducational groups. Emphasis on leader skill development, conceptualization of group dynamics, theoretical application, and development of leadership style. Prerequisite: 643 and 693. (3).

COUN 670. MULTICULTURAL ISSUES IN COUNSELING
Introduction to cultural diversity issues and exploration of multicultural concepts related to the counseling profession. (3).

COUN 670. PSYCHOLOGICAL CONSULTATION
Principles and systems of consultation for use by the professional counselor. Specific techniques and role issues are presented from theoretical and applied perspectives. (3).
**COUN 672. SEMINAR: ISSUES AND ETHICS IN COUNSELING.** Current ethical and legal guidelines and professional issues relevant to training, research, and practice in counseling. (3).

**COUN 674. DIAGNOSTIC SYSTEMS IN COUNSELING**

**COUN 680. CAREER COUNSELING**
Career development theories and application to counseling. Implementation of educational, occupational, social informational, and placement services within counseling. (3)

**COUN 682. FAMILY COUNSELING**
This course provides an overview of the historical roots of family counseling and the major theoretical orientations. A brief overview of the role of research, multiculturalism, and ethics in family counseling is explored. (3).

**COUN 683. COUNSELING THEORY I**
Theories and systems of counseling/therapy. Foundations for an integrative approach to helping relationships based on major theoretical and research perspectives. (3).

**COUN 684. COUNSELING THEORY II**
This course will deepen students’ understanding of systems of counseling, psychotherapy, and psychological understanding. Students will develop a greater appreciation for the varying perspectives on human behavior proposed by the different theoretical orientations to counseling. Prerequisite: COUN 683. (3).

**COUN 685. ORGANIZATION, ADMINISTRATION, AND CONSULTATION IN MENTAL HEALTH COUNSELING**
Organization, administration, evaluation, and consultation in Mental Health counseling programs. Presents effective service delivery within current ethical and professional standards. (3). Prerequisites: COUN 539 and consent of instructor.

**COUN 686. COUNSELING WITH CHILDREN AND ADOLESCENTS**
Counseling interventions specific to school-age clients. Theories, techniques, and considerations specific to the developmental needs of children and adolescents. (3).

**COUN 687. SEMINAR IN SPECIAL PROBLEMS**
Selected problems. Prerequisite: consent of instructor. May be repeated for credit. (3).

**COUN 688. ORGANIZATION, ADMINISTRATION, AND CONSULTATION IN SCHOOL COUNSELING**
Organization, administration, consultation, and evaluation of school counseling programs. Presents effective service delivery within current ethical and professional standards. (3). Prerequisites: COUN 539.
COUN 690. COUNSELING SKILLS
Preparation for supervised counseling practicum. Students are taught a conceptual model for counseling process. Exercise in self-awareness and skills for the stages of the helping relationship. Prerequisites: COUN 683, permission of instructor, COUN majors only. (May be repeated for credit). (3).

COUN 693. PRACTICUM IN COUNSELING
Supervised experience in counseling with application of principles, techniques, and strategies acquired in previous course work. Skill acquisition and demonstration on competencies. Prerequisites: core course work, COUN 690, approval of program faculty; application must be completed and accepted during the preceding semester; for COUN majors only. (3-6). (Z grade).

COUN 695. INTERNSHIP
Supervised counseling internship at an approved site. Prerequisite: program faculty approval; application must be competed during the preceding semester; for COUN majors only. (3-12). (Z grade).

COUN 697. THESIS. (1-12).
APPENDIX C

SOE Candidate Grievance Form

<table>
<thead>
<tr>
<th>Today’s Date:</th>
<th>Date Incident Occurred:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td>Candidate ID #:</td>
</tr>
<tr>
<td>Address;</td>
<td>E-mail:</td>
</tr>
<tr>
<td>City, State, Zip</td>
<td>Phone: (Home) (Cell)</td>
</tr>
<tr>
<td>Department:</td>
<td>Major:</td>
</tr>
<tr>
<td></td>
<td>Graduate □ Undergraduate □</td>
</tr>
</tbody>
</table>

Statement regarding when you discovered the issue being grieved:
(Please attach additional comments.)

Statement of the Problem Being Grieved and Evidence to Support the Grievance:
(Please attach additional comments.)

Remedy or Action Being Requested:
(Please attach additional comments.)

Complete If Applicable:
Reason(s) for disagreement with previous decision if a prior hearing was held:
(Please attach additional comments.)
APPENDIX D

Ethical Standards

All students in enrolled in a counseling or counselor education program are expected to be familiar with and abide by the ACA Code of Ethics. Reading the following material is therefore essential. This material will provide you with information about the principles and values upon which the counseling profession is based and about the ethics that guide our decision-making. Discussion of ethical issues will be infused throughout the COUN curriculum. It is important that you refer back to these materials frequently over the course of your studies. In addition, there may be other codes of ethics with which you should familiarize yourself. For example, future school counselors should also read the ASCA code of ethics, future mental health counselors should read the AMHCA code of ethics, and future college counselors should read the ACPA code of ethics.
2014 ACA Code of Ethics

As approved by the ACA Governing Council
Mission

The mission of the American Counseling Association is to enhance the quality of life in society by promoting the development of professional counselors, advancing the counseling profession, and using the profession and practice of counseling to promote respect for human dignity and diversity.

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ACA Code of Ethics Preamble

The American Counseling Association (ACA) is an educational, scientific, and professional organization whose members work in a variety of settings and serve in multiple capacities. Counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals.

Professional values are an important way of living out an ethical commitment. The following are core professional values of the counseling profession:

1. enhancing human development throughout the life span;
2. honoring diversity and embracing a multicultural approach in support of the worth, dignity, potential, and uniqueness of people within their social and cultural contexts;
3. promoting social justice;
4. safeguarding the integrity of the counselor-client relationship; and
5. practicing in a competent and ethical manner.

These professional values provide a conceptual basis for the ethical principles enumerated below. These principles are the foundation for ethical behavior and decision making. The fundamental principles of professional ethical behavior are

- autonomy, or fostering the right to control the direction of one’s life;
- nonmaleficence, or avoiding actions that cause harm;
- beneficence, or working for the good of the individual and society by promoting mental health and well-being;
- justice, or treating individuals equitably and fostering fairness and equality;
- fidelity, or honoring commitments and keeping promises, including fulfilling one’s responsibilities of trust in professional relationships; and
- veracity, or dealing truthfully with individuals with whom counselors come into professional contact.

ACA Code of Ethics Purpose

The ACA Code of Ethics serves six main purposes:

1. The Code sets forth the ethical obligations of ACA members and provides guidance intended to inform the ethical practice of professional counselors.
2. The Code identifies ethical considerations relevant to professional counselors and counselors-in-training.
3. The Code enables the association to clarify for current and prospective members, and for those served by members, the nature of the ethical responsibilities held in common by its members.
4. The Code serves as an ethical guide designed to assist members in constructing a course of action that best serves those utilizing counseling services and establishes expectations of conduct with a primary emphasis on the role of the professional counselor.
5. The Code helps to support the mission of ACA.
6. The standards contained in this Code serve as the basis for processing inquiries and ethics complaints concerning ACA members.

The ACA Code of Ethics contains nine main sections that address the following areas:

- Section A: The Counseling Relationship
- Section B: Confidentiality and Privacy
- Section C: Professional Responsibility
- Section D: Relationships With Other Professionals
- Section E: Evaluation, Assessment, and Interpretation
- Section F: Supervision, Training, and Teaching
- Section G: Research and Publication
- Section H: Distance Counseling, Technology, and Social Media
- Section I: Resolving Ethical Issues

Each section of the ACA Code of Ethics begins with an introduction. The introduction to each section describes the ethical behavior and responsibility to which counselors aspire. The introductions help set the tone for each particular section and provide a starting point that invites reflection on the ethical standards contained in each part of the ACA Code of Ethics. The standards outline professional responsibilities and provide direction for fulfilling those ethical responsibilities.

When counselors are faced with ethical dilemmas that are difficult to resolve, they are expected to engage in a carefully considered ethical decision-making process, consulting available resources as needed. Counselors acknowledge that resolving ethical issues is a process; ethical reasoning includes consideration of professional values, professional ethical principles, and ethical standards.

Counselors’ actions should be consistent with the spirit as well as the letter of these ethical standards. No specific ethical decision-making model is always most effective, so counselors are expected to use a credible model of decision making that can bear public scrutiny of its application. Through a chosen ethical decision-making process and evaluation of the context of the situation, counselors work collaboratively with clients to make decisions that promote clients’ growth and development. A breach of the standards and principles provided herein does not necessarily constitute legal liability or violation of the law; such action is established in legal and judicial proceedings.

The glossary at the end of the Code provides a concise description of some of the terms used in the ACA Code of Ethics.
Section A  
The Counseling Relationship

Introduction  
Counselors facilitate client growth and development in ways that foster the interest and welfare of clients and promote formation of healthy relationships. Trust is the cornerstone of the counseling relationship, and counselors have the responsibility to respect and safeguard the client’s right to privacy and confidentiality. Counselors actively attempt to understand the diverse cultural backgrounds of the clients they serve. Counselors also explore their own cultural identities and how these affect their values and beliefs about the counseling process. Additionally, counselors are encouraged to contribute to society by devoting a portion of their professional activities for little or no financial return (pro bono publico).

A.1. Client Welfare  
A.1.a. Primary Responsibility  
The primary responsibility of counselors is to respect the dignity and promote the welfare of clients.

A.1.b. Records and Documentation  
Counselors create, safeguard, and maintain documentation necessary for rendering professional services. Regardless of the medium, counselors include sufficient and timely documentation to facilitate the delivery and continuity of services. Counselors take reasonable steps to ensure that documentation accurately reflects client progress and services provided. If amendments are made to records and documentation, counselors take steps to properly note the amendments according to agency or institutional policies.

A.1.c. Counseling Plans  
Counselors and their clients work jointly in devising counseling plans that offer reasonable promise of success and are consistent with the abilities, temperament, developmental level, and circumstances of clients. Counselors and clients regularly review and revise counseling plans to assess their continued viability and effectiveness, respecting clients’ freedom of choice.

A.1.d. Support Network Involvement  
Counselors recognize that support networks hold various meanings in the lives of clients and consider enlisting the support, understanding, and involvement of others (e.g., religious/spiritual/community leaders, family members, friends) as positive resources, when appropriate, with client consent.

A.2. Informed Consent in the Counseling Relationship

A.2.a. Informed Consent  
Clients have the freedom to choose whether to enter into or remain in a counseling relationship and need adequate information about the counseling process and the counselor. Counselors have an obligation to review in writing and verbally with clients the rights and responsibilities of both counselors and clients. Informed consent is an ongoing part of the counseling process, and counselors appropriately document discussions of informed consent throughout the counseling relationship.

A.2.b. Types of Information Needed  
Counselors explicitly explain to clients the nature of all services provided. They inform clients about issues such as, but not limited to, the following: the purposes, goals, techniques, procedures, limitations, potential risks, and benefits of services; the counselor’s qualifications, credentials, relevant experience, and approach to counseling; continuation of services upon the incapacitation or death of the counselor; the role of technology; and other pertinent information. Counselors take steps to ensure that clients understand the implications of diagnosis and the intended use of tests and reports. Additionally, counselors inform clients about fees and billing arrangements, including procedures for nonpayment of fees. Clients have the right to confidentiality and to be provided with an explanation of its limits (including how supervisors and/or treatment or interdisciplinary team professionals are involved), to obtain clear information about their records, to participate in the ongoing counseling plans, and to refuse any services or modality changes and to be advised of the consequences of such refusal.

A.2.c. Developmental and Cultural Sensitivity  
Counselors communicate information in ways that are both developmentally and culturally appropriate. Counselors use clear and understandable language when discussing issues related to informed consent. When clients have difficulty understanding the language that counselors use, counselors provide necessary services (e.g., arranging for a qualified interpreter or translator) to ensure comprehension by clients. In collaboration with clients, counselors consider cultural implications of informed consent procedures and, where possible, counselors adjust their practices accordingly.

A.2.d. Inability to Give Consent  
When counseling minors, incapacitated adults, or other persons unable to give voluntary consent, counselors seek the assent of clients to services and include them in decision making as appropriate. Counselors recognize the need to balance the ethical rights of clients to make choices, their capacity to give consent or assent to receive services, and parental or familial legal rights and responsibilities to protect these clients and make decisions on their behalf.

A.2.e. Mandated Clients  
Counselors discuss the required limitations to confidentiality when working with clients who have been mandated for counseling services. Counselors also explain what type of information and with whom that information is shared prior to the beginning of counseling. The client may choose to refuse services. In this case, counselors will, to the best of their ability, discuss with the client the potential consequences of refusing counseling services.

A.3. Clients Served by Others  
When counselors learn that their clients are in a professional relationship with other mental health professionals, they request release from clients to inform the other professionals and strive to establish positive and collaborative professional relationships.

A.4. Avoiding Harm and Imposing Values

A.4.a. Avoiding Harm  
Counselors act to avoid harming their clients, trainees, and research participants and to minimize or to remedy unavoidable or unanticipated harm.
A.4.b. Personal Values
Counselors are aware of—and avoid imposing—their own values, attitudes, beliefs, and behaviors. Counselors respect the diversity of clients, trainees, and research participants and seek training in areas in which they are at risk of imposing their values onto clients, especially when the counselor’s values are inconsistent with the client’s goals or are discriminatory in nature.

A.5. Prohibited Noncounseling Roles and Relationships

A.5.a. Sexual and/or Romantic Relationships Prohibited
Sexual and/or romantic counselor–client interactions or relationships with current clients, their romantic partners, or their family members are prohibited. This prohibition applies to both in-person and electronic interactions or relationships.

A.5.b. Previous Sexual and/or Romantic Relationships
Counselors are prohibited from engaging in counseling relationships with persons with whom they have had a previous sexual and/or romantic relationship.

A.5.c. Sexual and/or Romantic Relationships With Former Clients
Sexual and/or romantic counselor–client interactions or relationships with former clients, their romantic partners, or their family members are prohibited for a period of 5 years following the last professional contact. This prohibition applies to both in-person and electronic interactions or relationships. Counselors, before engaging in sexual and/or romantic interactions or relationships with former clients, their romantic partners, or their family members, demonstrate forethought and document (in written form) whether the interaction or relationship can be viewed as exploitive in any way and/or whether there is still potential to harm the former client; in cases of potential exploitation and/or harm, the counselor avoids entering into such an interaction or relationship.

A.5.d. Friends or Family Members
Counselors are prohibited from engaging in counseling relationships with friends or family members with whom they have an inability to remain objective.

A.5.e. Personal Virtual Relationships With Current Clients
Counselors are prohibited from engaging in a personal virtual relationship with individuals with whom they have a current counseling relationship (e.g., through social and other media).

A.6. Managing and Maintaining Boundaries and Professional Relationships

A.6.a. Previous Relationships
Counselors consider the risks and benefits of accepting as clients those with whom they have had a previous relationship. These potential clients may include individuals with whom the counselor has had a casual, distant, or past relationship. Examples include mutual or past membership in a professional association, organization, or community. When counselors accept these clients, they take appropriate professional precautions such as informed consent, consultation, supervision, and documentation to ensure that judgment is not impaired and no exploitation occurs.

A.6.b. Extending Counseling Boundaries
Counselors consider the risks and benefits of extending current counseling relationships beyond conventional parameters. Examples include attending a client’s formal ceremony (e.g., a wedding/commitment ceremony or graduation), purchasing a service or product provided by a client (excepting unrestricted bartering), and visiting a client’s ill family member in the hospital. In extending these boundaries, counselors take appropriate professional precautions such as informed consent, consultation, supervision, and documentation to ensure that judgment is not impaired and no harm occurs.

A.6.c. Documenting Boundary Extensions
If counselors extend boundaries as described in A.6.a. and A.6.b., they must officially document, prior to the interaction (when feasible), the rationale for such an interaction, the potential benefit, and anticipated consequences for the client or former client and other individuals significantly involved with the client or former client. When unintentional harm occurs to the client or former client, or to an individual significantly involved with the client or former client, the counselor must show evidence of an attempt to remedy such harm.

A.6.d. Role Changes in the Professional Relationship
When counselors change a role from the original or most recent contracted relationship, they obtain informed consent from the client and explain the client’s right to refuse services related to the change. Examples of role changes include, but are not limited to:

1. changing from individual to relationship or family counseling, or vice versa;
2. changing from an evaluative role to a therapeutic role, or vice versa; and
3. changing from a counselor to a mediator role, or vice versa.

Clients must be fully informed of any anticipated consequences (e.g., financial, legal, personal, therapeutic) of counselor role changes.

A.6.e. Nonprofessional Interactions or Relationships (Other Than Sexual or Romantic Interactions or Relationships)
Counselors avoid entering into nonprofessional relationships with former clients, their romantic partners, or their family members when the interaction is potentially harmful to the client. This applies to both in-person and electronic interactions or relationships.

A.7. Roles and Relationships at Individual, Group, Institutional, and Societal Levels

A.7.a. Advocacy
When appropriate, counselors advocate at individual, group, institutional, and societal levels to address potential barriers and obstacles that inhibit access and/or the growth and development of clients.

A.7.b. Confidentiality and Advocacy
Counselors obtain client consent prior to engaging in advocacy efforts on behalf of an identifiable client to improve the provision of services and to work toward removal of systemic barriers or obstacles that inhibit client access, growth, and development.
A.8. Multiple Clients
When a counselor agrees to provide counseling services to two or more persons who have a relationship, the counselor clarifies at the outset which person or persons are clients and the nature of the relationships the counselor will have with each involved person. If it becomes apparent that the counselor may be called upon to perform potentially conflicting roles, the counselor will clarify, adjust, or withdraw from roles appropriately.

A.9. Group Work

A.9.a. Screening
Counselors screen prospective group counseling/therapy participants. To the extent possible, counselors select members whose needs and goals are compatible with the goals of the group, who will not impede the group process, and whose well-being will not be jeopardized by the group experience.

A.9.b. Protecting Clients
In a group setting, counselors take reasonable precautions to protect clients from physical, emotional, or psychological trauma.

A.10. Fees and Business Practices

A.10.a. Self-Referral
Counselors working in an organization (e.g., school, agency, institution) that provides counseling services do not refer clients to their private practice unless the policies of a particular organization make explicit provisions for self-referrals. In such instances, the clients must be informed of other options open to them should they seek private counseling services.

A.10.b. Unacceptable Business Practices
Counselors do not participate in fee splitting, nor do they give or receive commissions, rebates, or any other form of remuneration when referring clients for professional services.

A.10.c. Establishing Fees
In establishing fees for professional counseling services, counselors consider the financial status of clients and locality. If a counselor’s usual fees create undue hardship for the client, the counselor may adjust fees, when legally permissible, or assist the client in locating comparable, affordable services.

A.10.d. Nonpayment of Fees
If counselors intend to use collection agencies or take legal measures to collect fees from clients who do not pay for services as agreed upon, they include such information in their informed consent documents and also inform clients in a timely fashion of intended actions and offer clients the opportunity to make payment.

A.10.e. Bartering
Counselors may barter only if the bartering does not result in exploitation or harm, if the client requests it, and if such arrangements are an accepted practice among professionals in the community. Counselors consider the cultural implications of bartering and discuss relevant concerns with clients and document such agreements in a clear written contract.

A.10.f. Receiving Gifts
Counselors understand the challenges of accepting gifts from clients and recognize that in some cultures, small gifts are a token of respect and gratitude. When determining whether to accept a gift from clients, counselors take into account the therapeutic relationship, the monetary value of the gift, the client’s motivation for giving the gift, and the counselor’s motivation for wanting to accept or decline the gift.

A.11. Termination and Referral

A.11.a. Competence Within Termination and Referral
If counselors lack the competence to be of professional assistance to clients, they avoid entering or continuing counseling relationships. Counselors are knowledgeable about culturally and clinically appropriate referral resources and suggest these alternatives. If clients decline the suggested referrals, counselors discontinue the relationship.

A.11.b. Values Within Termination and Referral
Counselors refrain from referring prospective and current clients based solely on the counselor’s personally held values, attitudes, beliefs, and behaviors. Counselors respect the diversity of clients and seek training in areas in which they are at risk of imposing their values onto clients, especially when the counselor’s values are inconsistent with the client’s goals or are discriminatory in nature.

A.11.c. Appropriate Termination
Counselors terminate a counseling relationship when it becomes reasonably apparent that the client no longer needs assistance, is not likely to benefit, or is being harmed by continued counseling. Counselors may terminate counseling when in jeopardy of harm by the client or by another person with whom the client has a relationship, or when clients do not pay fees as agreed upon. Counselors provide pretermination counseling and recommend other service providers when necessary.

A.11.d. Appropriate Transfer of Services
When counselors transfer or refer clients to other practitioners, they ensure that appropriate clinical and administrative processes are completed and open communication is maintained with both clients and practitioners.

A.12. Abandonment and Client Neglect
Counselors do not abandon or neglect clients in counseling. Counselors assist in making appropriate arrangements for the continuation of treatment, when necessary, during interruptions such as vacations, illness, and following termination.

Section B
Confidentiality and Privacy

Introduction
Counselors recognize that trust is a cornerstone of the counseling relationship. Counselors strive to earn the trust of clients by establishing and maintaining a confidential relationship. Counselors communicate the parameters of confidentiality in a culturally competent manner.

B.1. Respecting Client Rights

B.1.a. Multicultural/Diversity Considerations
Counselors maintain awareness and sensitivity regarding cultural meanings of confidentiality and privacy. Counselors respect differing views toward disclosure of information. Counselors hold ongoing discussions with clients as to how, when, and with whom information is to be shared.

B.1.b. Respect for Privacy
Counselors respect the privacy of prospective and current clients. Counselors request private information from clients only when it is beneficial to the counseling process.
B.1.c. Respect for Confidentiality
Counselors protect the confidential information of prospective and current clients. Counselors disclose information only with appropriate consent or with sound legal or ethical justification.

B.1.d. Explanation of Limitations
At initiation and throughout the counseling process, counselors inform clients of the limitations of confidentiality and seek to identify situations in which confidentiality must be breached.

B.2. Exceptions

B.2.a. Serious and Foreseeable Harm and Legal Requirements
The general requirement that counselors keep information confidential does not apply when disclosure is required to protect clients or identified others from serious and foreseeable harm or when legal requirements demand that confidential information must be revealed. Counselors consult with other professionals when in doubt as to the validity of an exception. Additional considerations apply when addressing end-of-life issues.

B.2.b. Confidentiality Regarding End-of-Life Decisions
Counselors who provide services to terminally ill individuals who are considering hastening their own deaths have the option to maintain confidentiality, depending on applicable laws and the specific circumstances of the situation and after seeking consultation or supervision from appropriate professional and legal parties.

B.2.c. Contagious, Life-Threatening Diseases
When clients disclose that they have a disease commonly known to be both communicable and life threatening, counselors may be justified in disclosing information to identifiable third parties, if the parties are known to be at serious and foreseeable risk of contracting the disease. Prior to making a disclosure, counselors assess the intent of clients to inform the third parties about their disease or to engage in any behaviors that may be harmful to an identifiable third party. Counselors adhere to relevant state laws concerning disclosure about disease status.

B.2.d. Court-Ordered Disclosure
When ordered by a court to release confidential or privileged information without a client’s permission, counselors seek to obtain written, informed consent from the client or take steps to prohibit the disclosure or have it limited as narrowly as possible because of potential harm to the client or counseling relationship.

B.2.e. Minimal Disclosure
To the extent possible, clients are informed before confidential information is disclosed and are involved in the disclosure decision-making process. When circumstances require the disclosure of confidential information, only essential information is revealed.

B.3. Information Shared With Others

B.3.a. Subordinates
Counselors make every effort to ensure that privacy and confidentiality of clients are maintained by subordinates, including employees, supervisees, students, clerical assistants, and volunteers.

B.3.b. Interdisciplinary Teams
When services provided to the client involve participation by an interdisciplinary or treatment team, the client will be informed of the team’s existence and composition, information being shared, and the purposes of sharing such information.

B.3.c. Confidential Settings
Counselors discuss confidential information only in settings in which they can reasonably ensure client privacy.

B.3.d. Third-Party Payers
Counselors disclose information to third-party payers only when clients have authorized such disclosure.

B.3.e. Transmitting Confidential Information
Counselors take precautions to ensure the confidentiality of all information transmitted through the use of any medium.

B.3.f. Deceased Clients
Counselors protect the confidentiality of deceased clients, consistent with legal requirements and the documented preferences of the client.

B.4. Groups and Families

B.4.a. Group Work
In group work, counselors clearly explain the importance and parameters of confidentiality for the specific group.

B.4.b. Couples and Family Counseling
In couples and family counseling, counselors clearly define who is considered “the client” and discuss expectations and limitations of confidentiality. Counselors seek agreement and document in writing such agreement among all involved parties regarding the confidentiality of information. In the absence of an agreement to the contrary, the couple or family is considered to be the client.

B.5. Clients Lacking Capacity to Give Informed Consent

B.5.a. Responsibility to Clients
When counseling minor clients or adult clients who lack the capacity to give voluntary, informed consent, counselors protect the confidentiality of information received—in any medium—in the counseling relationship as specified by federal and state laws, written policies, and applicable ethical standards.

B.5.b. Responsibility to Parents and Legal Guardians
Counselors inform parents and legal guardians about the role of counselors and the confidential nature of the counseling relationship, consistent with current legal and custodial arrangements. Counselors are sensitive to the cultural diversity of families and respect the inherent rights and responsibilities of parents/guardians regarding the welfare of their children/charges according to law. Counselors work to establish, as appropriate, collaborative relationships with parents/guardians to best serve clients.

B.5.c. Release of Confidential Information
When counseling minor clients or adult clients who lack the capacity to give voluntary consent to release confidential information, counselors seek permission from an appropriate third party to disclose information. In such instances, counselors inform clients consistent with their level of understanding and take appropriate measures to safeguard client confidentiality.

B.6. Records and Documentation

B.6.a. Creating and Maintaining Records and Documentation
Counselors create and maintain records and documentation necessary for rendering professional services.
**B.6.b. Confidentiality of Records and Documentation**

Counselors ensure that records and documentation kept in any medium are secure and that only authorized persons have access to them.

**B.6.c. Permission to Record**

Counselors obtain permission from clients prior to recording sessions through electronic or other means.

**B.6.d. Permission to Observe**

Counselors obtain permission from clients prior to allowing any person to observe counseling sessions, review session transcripts, or view recordings of sessions with supervisors, faculty, peers, or others within the training environment.

**B.6.e. Client Access**

Counselors provide reasonable access to records and copies of records when requested by competent clients. Counselors limit the access of clients to their records, or portions of their records, only when there is compelling evidence that such access would cause harm to the client. Counselors document the request of clients and the rationale for withholding some or all of the records in the files of clients. In situations involving multiple clients, counselors provide individual clients with only those parts of records that relate directly to them and do not include confidential information related to any other client.

**B.6.f. Assistance With Records**

When clients request access to their records, counselors provide assistance and consultation in interpreting counseling records.

**B.6.g. Disclosure or Transfer**

Unless exceptions to confidentiality exist, counselors obtain written permission from clients to disclose or transfer records to legitimate third parties. Steps are taken to ensure that receivers of counseling records are sensitive to their confidential nature.

**B.6.h. Storage and Disposal After Termination**

Counselors store records following termination of services to ensure reasonable future access, maintain records in accordance with federal and state laws and statutes such as licensure laws and policies governing records, and dispose of client records and other sensitive materials in a manner that protects client confidentiality. Counselors apply careful discretion and deliberation before destroying records that may be needed by a court of law, such as notes on child abuse, suicide, sexual harassment, or violence.

**B.6.i. Reasonable Precautions**

Counselors take reasonable precautions to protect client confidentiality in the event of the counselor’s termination of practice, incapacity, or death and appoint a records custodian when identified as appropriate.

**B.7. Case Consultation**

**B.7.a. Respect for Privacy**

Information shared in a consulting relationship is discussed for professional purposes only. Written and oral reports present only data germane to the purposes of the consultation, and every effort is made to protect client identity and to avoid undue invasion of privacy.

**B.7.b. Disclosure of Confidential Information**

When consulting with colleagues, counselors do not disclose confidential information that reasonably could lead to the identification of a client or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided. They disclose information only to the extent necessary to achieve the purposes of the consultation.

**Section C  Professional Responsibility**

**Introduction**

Counselors aspire to open, honest, and accurate communication in dealing with the public and other professionals. Counselors facilitate access to counseling services, and they practice in a nondiscriminatory manner within the boundaries of professional and personal competence; they also have a responsibility to abide by the *ACA Code of Ethics*. Counselors actively participate in local, state, and national associations that foster the development and improvement of counseling. Counselors are expected to advocate to promote changes at the individual, group, institutional, and societal levels that improve the quality of life for individuals and groups and remove potential barriers to the provision or access of appropriate services being offered. Counselors have a responsibility to the public to engage in counseling practices that are based on rigorous research methodologies. Counselors are encouraged to contribute to society by devoting a portion of their professional activity to services for which there is little or no financial return (*pro bono publico*). In addition, counselors engage in self-care activities to maintain and promote their own emotional, physical, mental, and spiritual well-being to best meet their professional responsibilities.

**C.1. Knowledge of and Compliance With Standards**

Counselors have a responsibility to read, understand, and follow the *ACA Code of Ethics* and adhere to applicable laws and regulations.

**C.2. Professional Competence**

**C.2.a. Boundaries of Competence**

Counselors practice only within the boundaries of their competence, based on their education, training, supervised experience, state and national professional credentials, and appropriate professional experience. Whereas multicultural counseling competency is required across all counseling specialties, counselors gain knowledge, personal awareness, sensitivity, dispositions, and skills pertinent to being a culturally competent counselor in working with a diverse client population.

**C.2.b. New Specialty Areas of Practice**

Counselors practice in specialty areas new to them only after appropriate education, training, and supervised experience. While developing skills in new specialty areas, counselors take steps to ensure the competence of their work and protect others from possible harm.

**C.2.c. Qualified for Employment**

Counselors accept employment only for positions for which they are qualified given their education, training, supervised experience, state and national professional credentials, and appropriate professional experience. Counselors hire for professional counseling positions only individuals who are qualified and competent for those positions.

**C.2.d. Monitor Effectiveness**

Counselors continually monitor their effectiveness as professionals and take steps to improve when necessary. Counselors take reasonable steps to seek peer supervision to evaluate their efficacy as counselors.
C.2.e. Consultations on Ethical Obligations
Counselors take reasonable steps to consult with other counselors, the ACA Ethics and Professional Standards Department, or related professionals when they have questions regarding their ethical obligations or professional practice.

C.2.f. Continuing Education
Counselors recognize the need for continuing education to acquire and maintain a reasonable level of awareness of current scientific and professional information in their fields of activity. Counselors maintain their competence in the skills they use, are open to new procedures, and remain informed regarding best practices for working with diverse populations.

C.2.g. Impairment
Counselors monitor themselves for signs of impairment from their own physical, mental, or emotional problems and refrain from offering or providing professional services when impaired. They seek assistance for problems that reach the level of professional impairment, and, if necessary, they limit, suspend, or terminate their professional responsibilities until it is determined that they may safely resume their work. Counselors assist colleagues or supervisors in recognizing their own professional impairment and provide consultation and assistance when warranted with colleagues or supervisors showing signs of impairment and intervene as appropriate to prevent imminent harm to clients.

C.2.h. Counselor Incapacitation, Death, Retirement, or Termination of Practice
Counselors prepare a plan for the transfer of clients and the dissemination of records to an identified colleague or records custodian in the case of the counselor’s incapacitation, death, retirement, or termination of practice.

C.3. Advertising and Soliciting Clients

C.3.a. Accurate Advertising
When advertising or otherwise representing their services to the public, counselors identify their credentials in an accurate manner that is not false, misleading, deceptive, or fraudulent.

C.3.b. Testimonials
Counselors who use testimonials do not solicit them from current clients, former clients, or any other persons who may be vulnerable to undue influence. Counselors discuss with clients the implications of and obtain permission for the use of any testimonial.

C.3.c. Statements by Others
When feasible, counselors make reasonable efforts to ensure that statements made by others about them or about the counseling profession are accurate.

C.3.d. Recruiting Through Employment
Counselors do not use their places of employment or institutional affiliation to recruit clients, supervisors, or consultees for their private practices.

C.3.e. Products and Training Advertisements
Counselors who develop products related to their profession or conduct workshops or training events ensure that the advertisements concerning these products or events are accurate and disclose adequate information for consumers to make informed choices.

C.4. Professional Qualifications

C.4.a. Accurate Representation
Counselors claim or imply only professional qualifications actually completed and correct any known misrepresentations of their qualifications by others. Counselors accurately represent the qualifications of their professional colleagues. Counselors clearly distinguish between paid and volunteer work experience and correct any known misrepresentations of their qualifications by others.

C.4.b. Credentials
Counselors claim only licenses or certifications that are current and in good standing.

C.4.c. Educational Degrees
Counselors clearly differentiate between earned and honorary degrees.

C.4.d. Implying Doctoral-Level Competence
Counselors clearly state their highest earned degree in counseling or a closely related field. Counselors do not imply doctoral-level competence when possessing a master’s degree in counseling or a related field by referring to themselves as “Dr.” in a counseling context when their doctorate is not in counseling or a related field. Counselors do not use “ABD” (all but dissertation) or other such terms to imply competency.

C.4.e. Accreditation Status
Counselors accurately represent the accreditation status of their degree program and college/university.

C.4.f. Professional Membership
Counselors clearly differentiate between current, active memberships and former memberships in associations. Members of ACA must clearly differentiate between professional membership, which implies the possession of at least a master’s degree in counseling, and regular membership, which is open to individuals whose interests and activities are consistent with those of ACA but are not qualified for professional membership.

C.5. Nondiscrimination
Counselors do not condone or engage in discrimination against prospective or current clients, students, employees, supervisees, or research participants based on age, culture, disability, ethnicity, race, religion/spirituality, gender, gender identity, sexual orientation, marital/partnership status, language preference, socioeconomic status, immigration status, or any basis proscribed by law.

C.6. Public Responsibility

C.6.a. Sexual Harassment
Counselors do not engage in or condone sexual harassment. Sexual harassment can consist of a single intense or severe act, or multiple persistent or pervasive acts.

C.6.b. Reports to Third Parties
Counselors are accurate, honest, and objective in reporting their professional activities and judgments to appropriate third parties, including courts, health insurance companies, those who are the recipients of evaluation reports, and others.

C.6.c. Media Presentations
When counselors provide advice or comment by means of public lectures, demonstrations, radio or television programs, recordings, technology-based applications, printed articles, mailed material, or other media, they take reasonable precautions to ensure that

1. the statements are based on appropriate professional counseling literature and practice,
2. the statements are otherwise consistent with the ACA Code of Ethics, and
3. the recipients of the information are not encouraged to infer that a professional counseling relationship has been established.

C.6.d. Exploitation of Others
Counselors do not exploit others in their professional relationships.

C.6.e. Contributing to the Public Good (Pro Bono Publico)
Counselors make a reasonable effort to provide services to the public for which there is little or no financial return (e.g., speaking to groups, sharing professional information, offering reduced fees).

C.7. Treatment Modalities
C.7.a. Scientific Basis for Treatment
When providing services, counselors use techniques/procedures/modalities that are grounded in theory and/or have an empirical or scientific foundation.

C.7.b. Development and Innovation
When counselors use developing or innovative techniques/procedures/modalities, they explain the potential risks, benefits, and ethical considerations of using such techniques/procedures/modalities. Counselors work to minimize any potential risks or harm when using these techniques/procedures/modalities.

C.7.c. Harmful Practices
Counselors do not use techniques/procedures/modalities when substantial evidence suggests harm, even if such services are requested.

C.8. Responsibility to Other Professionals
C.8.a. Personal Public Statements
When making personal statements in a public context, counselors clarify that they are speaking from their personal perspectives and that they are not speaking on behalf of all counselors or the profession.

D.1. Relationships With Colleagues, Employers, and Employees
D.1.a. Different Approaches
Counselors are respectful of approaches that are grounded in theory and/or have an empirical or scientific foundation but may differ from their own. Counselors acknowledge the expertise of other professional groups and are respectful of their practices.

D.1.b. Forming Relationships
Counselors work to develop and strengthen relationships with colleagues from other disciplines to best serve clients.

D.1.c. Interdisciplinary Teamwork
Counselors who are members of interdisciplinary teams delivering multifaceted services to clients remain focused on how to best serve clients. They participate in and contribute to decisions that affect the well-being of clients by drawing on the perspectives, values, and experiences of the counseling profession and those of colleagues from other disciplines.

D.1.d. Establishing Professional and Ethical Obligations
Counselors who are members of interdisciplinary teams work together with team members to clarify professional and ethical obligations of the team as a whole and of its individual members. When a team decision raises ethical concerns, counselors first attempt to resolve the concern within the team. If they cannot reach resolution among team members, counselors pursue other avenues to address their concerns consistent with client well-being.

D.1.e. Confidentiality
When counselors are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, they clarify role expectations and the parameters of confidentiality with their colleagues.

D.1.f. Personnel Selection and Assignment
When counselors are in a position requiring personnel selection and/or assigning of responsibilities to others, they select competent staff and assign responsibilities compatible with their skills and experiences.

D.1.g. Employer Policies
The acceptance of employment in an agency or institution implies that counselors are in agreement with its general policies and principles. Counselors strive to reach agreement with employers regarding acceptable standards of client care and professional conduct that allow for changes in institutional policy conducive to the growth and development of clients.

D.1.h. Negative Conditions
Counselors alert their employers of inappropriate policies and practices. They attempt to effect changes in such policies or procedures through constructive action within the organization. When such policies are potentially disruptive or damaging to clients or may limit the effectiveness of services provided and change cannot be affected, counselors take appropriate further action. Such action may include referral to appropriate certification, accreditation, or state licensure organizations, or voluntary termination of employment.

D.1.i. Protection From Punitive Action
Counselors do not harass a colleague or employee or dismiss an employee who has acted in a responsible and ethical manner to expose inappropriate employer policies or practices.

D.2. Provision of Consultation Services
D.2.a. Consultant Competency
Counselors take reasonable steps to ensure that they have the appropriate resources and competencies when providing consultation services. Counselors provide appropriate referral resources when requested or needed.

D.2.b. Informed Consent in Formal Consultation
When providing formal consultation services, counselors have an obligation to review, in writing and verbally, the rights and responsibilities of both counselors and consultees. Counselors use clear and understandable language to inform all parties involved about the purpose of the services to be provided, relevant costs, potential risks and benefits, and the limits of confidentiality.
Section E
Evaluation, Assessment, and Interpretation

Introduction
Counselors use assessment as one component of the counseling process, taking into account the clients’ personal and cultural context. Counselors promote the well-being of individual clients or groups of clients by developing and using appropriate educational, mental health, psychological, and career assessments.

E.1. General

E.1.a. Assessment
The primary purpose of educational, mental health, psychological, and career assessment is to gather information regarding the client for a variety of purposes, including, but not limited to, client decision making, treatment planning, and forensic proceedings. Assessment may include both qualitative and quantitative methodologies.

E.1.b. Client Welfare
Counselors do not misuse assessment results and interpretations, and they take reasonable steps to prevent others from misusing the information provided. They respect the client’s right to know the results, the interpretations made, and the bases for counselors’ conclusions and recommendations.

E.2. Competence to Use and Interpret Assessment Instruments

E.2.a. Limits of Competence
Counselors use only those testing and assessment services for which they have been trained and are competent. Counselors using technology-assisted test interpretations are trained in the construct being measured and the specific instrument being used prior to using its technology-based application. Counselors take reasonable measures to ensure the proper use of assessment techniques by persons under their supervision.

E.2.b. Appropriate Use
Counselors are responsible for the appropriate application, scoring, interpretation, and use of assessment instruments relevant to the needs of the client, whether they score and interpret such assessments themselves or use technology or other services.

E.2.c. Decisions Based on Results
Counselors responsible for decisions involving individuals or policies that are based on assessment results have a thorough understanding of psychometrics.

E.3. Informed Consent in Assessment

E.3.a. Explanation to Clients
Prior to assessment, counselors explain the nature and purposes of assessment and the specific use of results by potential recipients. The explanation will be given in terms and language that the client (or other legally authorized person on behalf of the client) can understand.

E.3.b. Recipients of Results
Counselors consider the client’s and/or examinee’s welfare, explicit understandings, and prior agreements in determining who receives the assessment results. Counselors include accurate and appropriate interpretations with any release of individual or group assessment results.

E.4. Release of Data to Qualified Personnel
Counselors release assessment data in which the client is identified only with the consent of the client or the client’s legal representative. Such data are released only to persons recognized by counselors as qualified to interpret the data.

E.5. Diagnosis of Mental Disorders

E.5.a. Proper Diagnosis
Counselors take special care to provide proper diagnosis of mental disorders. Assessment techniques (including personal interviews) used to determine client care (e.g., locus of treatment, type of treatment, recommended follow-up) are carefully selected and appropriately used.

E.5.b. Cultural Sensitivity
Counselors recognize that culture affects the manner in which clients’ problems are defined and experienced. Clients’ socioeconomic and cultural experiences are considered when diagnosing mental disorders.

E.5.c. Historical and Social Prejudices in the Diagnosis of Pathology
Counselors recognize historical and social prejudices in the misdiagnosis and pathologizing of certain individuals and groups and strive to become aware of and address such biases in themselves or others.

E.5.d. Refraining From Diagnosis
Counselors may refrain from making and/or reporting a diagnosis if they believe that it would cause harm to the client or others. Counselors carefully consider both the positive and negative implications of a diagnosis.

E.6. Instrument Selection

E.6.a. Appropriateness of Instruments
Counselors carefully consider the validity, reliability, psychometric limitations, and appropriateness of instruments when selecting assessments and, when possible, use multiple forms of assessment, data, and/or instruments in forming conclusions, diagnoses, or recommendations.

E.6.b. Referral Information
If a client is referred to a third party for assessment, the counselor provides specific referral questions and sufficient objective data about the client to ensure that appropriate assessment instruments are utilized.

E.7. Conditions of Assessment Administration

E.7.a. Administration Conditions
Counselors administer assessments under the same conditions that were established in their standardization. When assessments are not administered under standard conditions, as may be necessary to accommodate clients with disabilities, or when unusual behavior or irregularities occur during the administration, those conditions are noted in interpretation, and the results may be designated as invalid or of questionable validity.

E.7.b. Provision of Favorable Conditions
Counselors provide an appropriate environment for the administration of assessments (e.g., privacy, comfort, freedom from distraction).

E.7.c. Technological Administration
Counselors ensure that technologically administered assessments function properly and provide clients with accurate results.
E.7.d. Unsupervised Assessments
Unless the assessment instrument is designed, intended, and validated for self-administration and/or scoring, counselors do not permit unsupervised use.

E.8. Multicultural Issues/Diversity in Assessment
Counselors select and use with caution assessment techniques normed on populations other than that of the client. Counselors recognize the effects of age, color, culture, disability, ethnic group, gender, race, language preference, religion, spirituality, sexual orientation, and socioeconomic status on test administration and interpretation, and they place test results in proper perspective with other relevant factors.

E.9. Scoring and Interpretation of Assessments

E.9.a. Reporting
When counselors report assessment results, they consider the client’s personal and cultural background, the level of the client’s understanding of the results, and the impact of the results on the client. In reporting assessment results, counselors indicate reservations that exist regarding validity or reliability due to circumstances of the assessment or inappropriateness of the norms for the person tested.

E.9.b. Instruments With Insufficient Empirical Data
Counselors exercise caution when interpreting the results of instruments not having sufficient empirical data to support respondent results. The specific purposes for the use of such instruments are stated explicitly to the examinee. Counselors qualify any conclusions, diagnoses, or recommendations made that are based on assessments or instruments with questionable validity or reliability.

E.9.c. Assessment Services
Counselors who provide assessment, scoring, and interpretation services to support the assessment process confirm the validity of such interpretations. They accurately describe the purpose, norms, validity, reliability, and applications of the procedures and any special qualifications applicable to their use. At all times, counselors maintain their ethical responsibility to those being assessed.

E.10. Assessment Security
Counselors maintain the integrity and security of tests and assessments consistent with legal and contractual obligations. Counselors do not appropriate, reproduce, or modify published assessments or parts thereof without acknowledgment and permission from the publisher.

E.11. Obsolete Assessment and Outdated Results
Counselors do not use data or results from assessments that are obsolete or outdated for the current purpose (e.g., noncurrent versions of assessments/instruments). Counselors make every effort to prevent the misuse of obsolete measures and assessment data by others.

E.12. Assessment Construction
Counselors use established scientific procedures, relevant standards, and current professional knowledge for assessment design in the development, publication, and utilization of assessment techniques.


E.13.a. Primary Obligations
When providing forensic evaluations, the primary obligation of counselors is to produce objective findings that can be substantiated based on information and techniques appropriate to the evaluation, which may include examination of the individual and/or review of records. Counselors form professional opinions based on their professional knowledge and expertise that can be supported by the data gathered in evaluations. Counselors define the limits of their reports or testimony, especially when an examination of the individual has not been conducted.

E.13.b. Consent for Evaluation
Individually being evaluated are informed in writing that the relationship is for the purposes of an evaluation and is not therapeutic in nature, and entities or individuals who will receive the evaluation report are identified. Counselors who perform forensic evaluations obtain written consent from those being evaluated or from their legal representative unless a court orders evaluations to be conducted without the written consent of the individuals being evaluated. When children or adults who lack the capacity to give voluntary consent are being evaluated, informed written consent is obtained from a parent or guardian.

E.13.c. Client Evaluation Prohibited
Counselors do not evaluate current or former clients, clients’ romantic partners, or clients’ family members for forensic purposes. Counselors do not counsel individuals they are evaluating.

E.13.d. Avoid Potentially Harmful Relationships
Counselors who provide forensic evaluations avoid potentially harmful professional or personal relationships with family members, romantic partners, and close friends of individuals they are evaluating or have evaluated in the past.

Section F
Supervision, Training, and Teaching

Introduction
Counselor supervisors, trainers, and educators aspire to foster meaningful and respectful professional relationships and to maintain appropriate boundaries with supervisees and students in both face-to-face and electronic formats. They have theoretical and pedagogical foundations for their work; have knowledge of supervision models; and aim to be fair, accurate, and honest in their assessments of counselors, students, and supervisees.

F.1. Counselor Supervision and Client Welfare

F.1.a. Client Welfare
A primary obligation of counseling supervisors is to monitor the services provided by supervisees. Counseling supervisors monitor client welfare and supervisee performance and professional development. To fulfill these obligations, supervisors meet regularly with supervisees to review the supervisees’ work and help them become prepared to serve a range of diverse clients. Supervisees have a responsibility to understand and follow the ACA Code of Ethics.

F.1.b. Counselor Credentials
Counseling supervisors work to ensure that supervisees communicate their
F.1. Informed Consent and Client Rights
Supervisors make supervisees aware of client rights, including the protection of client privacy and confidentiality in the counseling relationship. Supervisors provide clients with professional disclosure information and inform them of how the supervision process influences the limits of confidentiality. Supervisees make clients aware of who will have access to records of the counseling relationship and how these records will be stored, transmitted, or otherwise reviewed.

F.2. Counselor Supervision Competence
F.2.a. Supervisor Preparation
Prior to offering supervision services, counselors are trained in supervision methods and techniques. Counselors who offer supervision services regularly pursue continuing education activities, including both counseling and supervision topics and skills.

F.2.b. Multicultural Issues/Diversity in Supervision
Counseling supervisors are aware of and address the role of multiculturalism/diversity in the supervisory relationship.

F.2.c. Online Supervision
When using technology in supervision, counselor supervisors are competent in the use of those technologies. Supervisors take the necessary precautions to protect the confidentiality of all information transmitted through any electronic means.

F.3. Supervisory Relationship
F.3.a. Extending Conventional Supervisory Relationships
Counseling supervisors clearly define and maintain ethical professional, personal, and social relationships with their supervisees. Supervisors consider the risks and benefits of extending current supervisory relationships in any form beyond conventional parameters. In extending these boundaries, supervisors take appropriate professional precautions to ensure that judgment is not impaired and that no harm occurs.

F.3.b. Sexual Relationships
Sexual or romantic interactions or relationships with current supervisees are prohibited. This prohibition applies to both in-person and electronic interactions or relationships.

F.3.c. Sexual Harassment
Counseling supervisors do not condone or subject supervisees to sexual harassment.

F.3.d. Friends or Family Members
Supervisors are prohibited from engaging in supervisory relationships with individuals with whom they have an inability to remain objective.

F.4. Supervisor Responsibilities
F.4.a. Informed Consent for Supervision
Supervisors are responsible for incorporating into their supervision the principles of informed consent and participation. Supervisors inform supervisees of the policies and procedures to which supervisors are to adhere and the mechanisms for due process appeal of individual supervisor actions. The issues unique to the use of distance supervision are to be included in the documentation as necessary.

F.4.b. Emergencies and Absences
Supervisors establish and communicate to supervisees procedures for contacting supervisors or, in their absence, alternative on-call supervisors to assist in handling crises.

F.4.c. Standards for Supervisees
Supervisors make their supervisees aware of professional and ethical standards and legal responsibilities.

F.4.d. Termination of the Supervisory Relationship
Supervisors or supervisees have the right to terminate the supervisory relationship with adequate notice. Reasons for considering termination are discussed, and both parties work to resolve differences. When termination is warranted, supervisors make appropriate referrals to possible alternative supervisors.

F.5. Student and Supervisee Responsibilities
F.5.a. Ethical Responsibilities
Students and supervisees have a responsibility to understand and follow the ACA Code of Ethics. Students and supervisees have the same obligation to clients as those required of professional counselors.

F.5.b. Impairment
Students and supervisees monitor themselves for signs of impairment from their own physical, mental, or emotional problems and refrain from offering or providing professional services when such impairment is likely to harm a client or others. They notify their faculty and/or supervisors and seek assistance for problems that reach the level of professional impairment, and, if necessary, they limit, suspend, or terminate their professional responsibilities until it is determined that they may safely resume their work.

F.5.c. Professional Disclosure
Before providing counseling services, students and supervisees disclose their status as supervisees and explain how this status affects the limits of confidentiality. Supervisors ensure that clients are aware of the services rendered and the qualifications of the students and supervisees rendering those services. Students and supervisees obtain client permission before they use any information concerning the counseling relationship in the training process.

F.6. Counseling Supervision Evaluation, Remediation, and Endorsement
F.6.a. Evaluation
Supervisors document and provide supervisees with ongoing feedback regarding their performance and schedule periodic formal evaluative sessions throughout the supervisory relationship.

F.6.b. Gatekeeping and Remediation
Through initial and ongoing evaluation, supervisors are aware of supervisee limitations that might impede performance. Supervisors assist supervisees in securing remedial assistance when needed. They recommend dismissal from training programs, applied counseling settings, and state or voluntary professional credentialing processes when those supervisees are unable to demonstrate that they can provide competent professional services to a range of diverse clients. Supervisors seek consultation and document their decisions to dismiss or refer supervisees for assistance. They ensure that supervisees are aware of options available to them to address such decisions.
F.6.c. Counseling for Supervisees
If supervisees request counseling, the supervisor assists the supervisee in identifying appropriate services. Supervisors do not provide counseling services to supervisees. Supervisors address interpersonal competencies in terms of the impact of these issues on clients, the supervisory relationship, and professional functioning.

F.6.d. Endorsements
Supervisors endorse supervisees for certification, licensure, employment, or completion of an academic or training program only when they believe that supervisees are qualified for the endorsement. Regardless of qualifications, supervisors do not endorse supervisees whom they believe to be impaired in any way that would interfere with the performance of the duties associated with the endorsement.

F.7. Responsibilities of Counselor Educators
F.7.a. Counselor Educators
Counselor educators who are responsible for developing, implementing, and supervising educational programs are skilled as teachers and practitioners. They are knowledgeable regarding the ethical, legal, and regulatory aspects of the profession; are skilled in applying that knowledge; and make students and supervisees aware of their responsibilities. Whether in traditional, hybrid, and/or online formats, counselor educators conduct counselor education and training programs in an ethical manner and serve as role models for professional behavior.

F.7.b. Counselor Educator Competence
Counselors who function as counselor educators or supervisors provide instruction within their areas of knowledge and competence and provide instruction based on current information and knowledge available in the profession. When using technology to deliver instruction, counselor educators develop competence in the use of the technology.

F.7.c. Infusing Multicultural Issues/Diversity
Counselor educators infuse material related to multiculturalism/diversity into all courses and workshops for the development of professional counselors.

F.7.d. Integration of Study and Practice
In traditional, hybrid, and/or online formats, counselor educators establish education and training programs that integrate academic study and supervised practice.

F.7.e. Teaching Ethics
Throughout the program, counselor educators ensure that students are aware of the ethical responsibilities and standards of the profession and the ethical responsibilities of students to the profession. Counselor educators infuse ethical considerations throughout the curriculum.

F.7.f. Use of Case Examples
The use of client, student, or supervisee information for the purposes of case examples in a lecture or classroom setting is permissible only when (a) the client, student, or supervisee has reviewed the material and agreed to its presentation or (b) the information has been sufficiently modified to obscure identity.

F.7.g. Student-to-Student Supervision and Instruction
When students function in the role of counselor educators or supervisors, they understand that they have the same ethical obligations as counselor educators, trainers, and supervisors. Counselor educators make every effort to ensure that the rights of students are not compromised when their peers lead experiential counseling activities in traditional, hybrid, and/or online formats (e.g., counseling groups, skills classes, clinical supervision).

F.7.h. Innovative Theories and Techniques
Counselor educators promote the use of techniques/procedures/modalities that are grounded in theory and/or have an empirical or scientific foundation. When counselor educators discuss developing or innovative techniques/procedures/modalities, they explain the potential risks, benefits, and ethical considerations of using such techniques/procedures/modalities.

F.7.i. Field Placements
Counselor educators develop clear policies and provide direct assistance within their training programs regarding appropriate field placement and other clinical experiences. Counselor educators provide clearly stated roles and responsibilities for the student or supervisee, the site supervisor, and the program supervisor. They confirm that site supervisors are qualified to provide supervision in the formats in which services are provided and inform site supervisors of their professional and ethical responsibilities in this role.

F.8. Student Welfare
F.8.a. Program Information and Orientation
Counselor educators recognize that program orientation is a developmental process that begins upon students’ initial contact with the counselor education program and continues throughout the educational and clinical training of students. Counselor education faculty provide prospective and current students with information about the counselor education program’s expectations, including

1. the values and ethical principles of the profession;
2. the type and level of skill and knowledge acquisition required for successful completion of the training;
3. technology requirements;
4. program training goals, objectives, and mission, and subject matter to be covered;
5. bases for evaluation;
6. training components that encourage self-growth or self-disclosure as part of the training process;
7. the type of supervision settings and requirements of the sites for required clinical field experiences;
8. student and supervisor evaluation and dismissal policies and procedures; and
9. up-to-date employment prospects for graduates.

F.8.b. Student Career Advising
Counselor educators provide career advisement for their students and make them aware of opportunities in the field.

F.8.c. Self-Growth Experiences
Self-growth is an expected component of counselor education. Counselor educators are mindful of ethical principles when they require students to engage in self-growth experiences. Counselor educators and supervisors inform students that they have a right to decide what information will be shared or withheld in class.

F.8.d. Addressing Personal Concerns
Counselor educators may require students to address any personal concerns that have the potential to affect professional competency.
F.9. Evaluation and Remediation

F.9.a. Evaluation of Students
Counselor educators clearly state to students, prior to and throughout the training program, the levels of competency expected, appraisal methods, and timing of evaluations for both didactic and clinical competencies. Counselor educators provide students with ongoing feedback regarding their performance throughout the training program.

F.9.b. Limitations
Counselor educators, through ongoing evaluation, are aware of and address the inability of some students to achieve counseling competencies. Counselor educators do the following:

1. assist students in securing remedial assistance when needed,
2. seek professional consultation and document their decision to dismiss or refer students for assistance, and
3. ensure that students have recourse in a timely manner to address decisions requiring them to seek assistance or to dismiss them and provide students with due process according to institutional policies and procedures.

F.9.c. Counseling for Students
If students request counseling, or if counseling services are suggested as part of a remediation process, counselor educators assist students in identifying appropriate services.

F.10. Roles and Relationships Between Counselor Educators and Students

F.10.a. Sexual or Romantic Relationships
Counselor educators are prohibited from sexual or romantic interactions or relationships with students currently enrolled in a counseling or related program and over whom they have power and authority. This prohibition applies to both in-person and electronic interactions or relationships.

F.10.b. Sexual Harassment
Counselor educators do not condone or subject students to sexual harassment.

F.10.c. Relationships With Former Students
Counselor educators are aware of the power differential in the relationship between faculty and students. Faculty members discuss with former students potential risks when they consider engaging in social, sexual, or other intimate relationships.

F.10.d. Nonacademic Relationships
Counselor educators avoid nonacademic relationships with students in which there is a risk of potential harm to the student or which may compromise the training experience or grades assigned. In addition, counselor educators do not accept any form of professional services, fees, commissions, reimbursement, or remuneration from a site for student or supervisor placement.

F.10.e. Counseling Services
Counselor educators do not serve as counselors to students currently enrolled in a counseling or related program and over whom they have power and authority.

F.10.f. Extending Educator–Student Boundaries
Counselor educators are aware of the power differential in the relationship between faculty and students. If they believe that a nonprofessional relationship with a student may be potentially beneficial to the student, they take precautions similar to those taken by counselors when working with clients. Examples of potentially beneficial interactions or relationships include, but are not limited to, attending a formal ceremony; conducting hospital visits; providing support during a stressful event; or maintaining mutual membership in a professional association, organization, or community. Counselor educators discuss with students the rationale for such interactions, the potential benefits and drawbacks, and the anticipated consequences for the student. Educators clarify the specific nature and limitations of the additional role(s) they will have with the student prior to engaging in a nonprofessional relationship. Nonprofessional relationships with students should be time limited and/or context specific and initiated with student consent.

F.11. Multicultural/Diversity Competence in Counselor Education and Training Programs

F.11.a. Faculty Diversity
Counselor educators are committed to recruiting and retaining a diverse faculty.

F.11.b. Student Diversity
Counselor educators actively attempt to recruit and retain a diverse student body. Counselor educators demonstrate commitment to multicultural/diversity competence by recognizing and valuing the diverse cultures and types of abilities that students bring to the training experience. Counselor educators provide appropriate accommodations that enhance and support diverse student well-being and academic performance.

F.11.c. Multicultural/Diversity Competence
Counselor educators actively infuse multicultural/diversity competence in their training and supervision practices. They actively train students to gain awareness, knowledge, and skills in the competencies of multicultural practice.
federal and state laws pertaining to the review of their plan, design, conduct, and reporting of research.

G.1.d. Deviation From Standard Practice
Counselors seek consultation and observe stringent safeguards to protect the rights of research participants when research indicates that a deviation from standard or acceptable practices may be necessary.

G.1.e. Precautions to Avoid Injury
Counselors who conduct research are responsible for their participants’ welfare throughout the research process and should take reasonable precautions to avoid causing emotional, physical, or social harm to participants.

G.1.f. Principal Researcher Responsibility
The ultimate responsibility for ethical research practice lies with the principal researcher. All others involved in the research activities share ethical obligations and responsibility for their own actions.

G.2. Rights of Research Participants

G.2.a. Informed Consent in Research
Individuals have the right to decline requests to become research participants. In seeking consent, counselors use language that
1. accurately explains the purpose and procedures to be followed;
2. identifies any procedures that are experimental or relatively untried;
3. describes any attendant discomforts, risks, and potential power differentials between researchers and participants;
4. describes any benefits or changes in individuals or organizations that might reasonably be expected;
5. discloses appropriate alternative procedures that would be advantageous for participants;
6. offers to answer any inquiries concerning the procedures;
7. describes any limitations on confidentiality;
8. describes the format and potential target audiences for the dissemination of research findings; and
9. instructs participants that they are free to withdraw their consent and discontinue participation in the project at any time, without penalty.

G.2.b. Student/Supervisee Participation
Researchers who involve students or supervisees in research make clear to them that the decision regarding participation in research activities does not affect their academic standing or supervisory relationship. Students or supervisees who choose not to participate in research are provided with an appropriate alternative to fulfill their academic or clinical requirements.

G.2.c. Client Participation
Counselors conducting research involving clients make clear in the informed consent process that clients are free to choose whether to participate in research activities. Counselors take necessary precautions to protect clients from adverse consequences of declining or withdrawing from participation.

G.2.d. Confidentiality of Information
Information obtained about research participants during the course of research is confidential. Procedures are implemented to protect confidentiality.

G.2.e. Persons Not Capable of Giving Informed Consent
When a research participant is not capable of giving informed consent, counselors provide an appropriate explanation to obtain agreement for participation from, and obtain the appropriate consent of a legally authorized person.

G.2.f. Commitments to Participants
Counselors take reasonable measures to honor all commitments to research participants.

G.2.g. Explanations After Data Collection
After data are collected, counselors provide participants with full clarification of the nature of the study to remove any misconceptions participants might have regarding the research. Where scientific or human values justify delaying or withholding information, counselors take reasonable measures to avoid causing harm.

G.2.h. Informing Sponsors
Counselors inform sponsors, institutions, and publication channels regarding research procedures and outcomes. Counselors ensure that appropriate bodies and authorities are given pertinent information and acknowledgment.

G.2.i. Research Records Custodian
As appropriate, researchers prepare and disseminate to an identified colleague or records custodian a plan for the transfer of research data in the case of their incapacitation, retirement, or death.

G.3. Managing and Maintaining Boundaries

G.3.a. Extending Researcher–Participant Boundaries
Researchers consider the risks and benefits of extending current research relationships beyond conventional parameters. When a nonresearch interaction between the researcher and the research participant may be potentially beneficial, the researcher must document, prior to the interaction (when feasible), the rationale for such an interaction, the potential benefit, and anticipated consequences for the research participant. Such interactions should be initiated with appropriate consent of the research participant. Where unintentional harm occurs to the research participant, the researcher must show evidence of an attempt to remedy such harm.

G.3.b. Relationships With Research Participants
Sexual or romantic counselor–research participant interactions or relationships with current research participants are prohibited. This prohibition applies to both in-person and electronic interactions or relationships.

G.3.c. Sexual Harassment and Research Participants
Researchers do not condone or subject research participants to sexual harassment.

G.4. Reporting Results

G.4.a. Accurate Results
Counselors plan, conduct, and report research accurately. Counselors do not engage in misleading or fraudulent research, distort data, misrepresent data, or deliberately bias their results. They describe the extent to which results are applicable for diverse populations.

G.4.b. Obligation to Report Unfavorable Results
Counselors report the results of any research of professional value. Results that reflect unfavorably on institutions, programs, services, prevailing opinions, or vested interests are not withheld.

G.4.c. Reporting Errors
If counselors discover significant errors in their published research, they take
reasonable steps to correct such errors in a correction erratum or through other appropriate publication means.

G.4.d. Identity of Participants
Counselors who supply data, aid in the research of another person, report research results, or make original data available take due care to disguise the identity of respective participants in the absence of specific authorization from the participants to do otherwise. In situations where participants self-identify their involvement in research studies, researchers take active steps to ensure that data are adapted/changed to protect the identity and welfare of all parties and that discussion of results does not cause harm to participants.

G.4.e. Replication Studies
Counselors are obligated to make available sufficient original research information to qualified professionals who may wish to replicate or extend the study.

G.5. Publications and Presentations

G.5.a. Use of Case Examples
The use of participants’, clients’, students’, or supervisees’ information for the purpose of case examples in a presentation or publication is permissible only when (a) participants, clients, students, or supervisees have reviewed the material and agreed to its presentation or publication or (b) the information has been sufficiently modified to obscure identity.

G.5.b. Plagiarism
Counselors do not plagiarize; that is, they do not present another person’s work as their own.

G.5.c. Acknowledging Previous Work
In publications and presentations, counselors acknowledge and give recognition to previous work on the topic by others or self.

G.5.d. Contributors
Counselors give credit through joint authorship, acknowledgment, footnote statements, or other appropriate means to those who have contributed significantly to research or concept development in accordance with such contributions. The principal contributor is listed first, and minor technical or professional contributions are acknowledged in notes or introductory statements.

G.5.e. Agreement of Contributors
Counselors who conduct joint research with colleagues or students/supervisors establish agreements in advance regarding allocation of tasks, publication credit, and types of acknowledgment that will be received.

G.5.f. Student Research
Manuscripts or professional presentations in any medium that are substantially based on a student’s course papers, projects, dissertations, or theses are used only with the student’s permission and list the student as lead author.

G.5.g. Duplicate Submissions
Counselors submit manuscripts for consideration to only one journal at a time. Manuscripts that are published in whole or in substantial part in one journal or published work are not submitted for publication to another publisher without acknowledgment and permission from the original publisher.

G.5.h. Professional Review
Counselors who review material submitted for publication, research, or other scholarly purposes respect the confidentiality and proprietary rights of those who submitted it. Counselors make publication decisions based on valid and defensible standards. Counselors review article submissions in a timely manner and based on their scope and competency in research methodologies. Counselors who serve as reviewers at the request of editors or publishers make every effort to only review materials that are within their scope of competency and avoid personal biases.

Section H
Distance Counseling, Technology, and Social Media

Introduction
Counselors understand that the profession of counseling may no longer be limited to in-person, face-to-face interactions. Counselors actively attempt to understand the evolving nature of the profession with regard to distance counseling, technology, and social media and how such resources may be used to better serve their clients. Counselors strive to become knowledgeable about these resources. Counselors understand the additional concerns related to the use of distance counseling, technology, and social media and make every attempt to protect confidentiality and meet any legal and ethical requirements for the use of such resources.

H.1. Knowledge and Legal Considerations

H.1.a. Knowledge and Competency
Counselors who engage in the use of distance counseling, technology, and/or social media develop knowledge and skills regarding related technical, ethical, and legal considerations (e.g., special certifications, additional course work).

H.1.b. Laws and Statutes
Counselors who engage in the use of distance counseling, technology, and social media within their counseling practice understand that they may be subject to laws and regulations of both the counselor’s practicing location and the client’s place of residence. Counselors ensure that their clients are aware of pertinent legal rights and limitations governing the practice of counseling across state lines or international boundaries.

H.2. Informed Consent and Security

H.2.a. Informed Consent and Disclosure
Clients have the freedom to choose whether to use distance counseling, social media, and/or technology within the counseling process. In addition to the usual and customary protocol of informed consent between counselor and client for face-to-face counseling, the following issues, unique to the use of distance counseling, technology, and/or social media, are addressed in the informed consent process:

• distance counseling credentials, physical location of practice, and contact information;
• risks and benefits of engaging in the use of distance counseling, technology, and/or social media;
• possibility of technology failure and alternate methods of service delivery;
• anticipated response time;
• emergency procedures to follow when the counselor is not available;
• time zone differences;
• cultural and/or language differences that may affect delivery of services;
• possible denial of insurance benefits; and
• social media policy.

H.2.b. Confidentiality
Maintained by the Counselor
Counselors acknowledge the limitations of maintaining the confidentiality of electronic records and transmissions. They inform clients that individuals might have authorized or unauthorized access to such records or transmissions (e.g., colleagues, supervisors, employees, information technologists).

H.2.c. Acknowledgment of Limitations
Counselors inform clients about the inherent limits of confidentiality when using technology. Counselors urge clients to be aware of authorized and/or unauthorized access to information disclosed using this medium in the counseling process.

H.2.d. Security
Counselors use current encryption standards within their websites and/or technology-based communications that meet applicable legal requirements. Counselors take reasonable precautions to ensure the confidentiality of information transmitted through any electronic means.

H.3. Client Verification
Counselors who engage in the use of distance counseling, technology, and/or social media to interact with clients take steps to verify the client’s identity at the beginning and throughout the therapeutic process. Verification can include, but is not limited to, using code words, numbers, graphics, or other nondescript identifiers.

H.4. Distance Counseling Relationship

H.4.a. Benefits and Limitations
Counselors inform clients of the benefits and limitations of using technology applications in the provision of counseling services. Such technologies include, but are not limited to, computer hardware and/or software, telephones and applications, social media and Internet-based applications and other audio and/or video communication, or data storage devices or media.

H.4.b. Professional Boundaries in Distance Counseling
Counselors understand the necessity of maintaining a professional relationship with their clients. Counselors discuss and establish professional boundaries with clients regarding the appropriate use and/or application of technology and the limitations of its use within the counseling relationship (e.g., lack of confidentiality, times when not appropriate to use).

H.4.c. Technology-Assisted Services
When providing technology-assisted services, counselors make reasonable efforts to determine that clients are intellectually, emotionally, physically, linguistically, and functionally capable of using the application and that the application is appropriate for the needs of the client. Counselors verify that clients understand the purpose and operation of technology applications and follow up with clients to correct possible misconceptions, discover appropriate use, and assess subsequent steps.

H.4.d. Effectiveness of Services
When distance counseling services are deemed ineffective by the counselor or client, counselors consider delivering services face-to-face. If the counselor is not able to provide face-to-face services (e.g., lives in another state), the counselor assists the client in identifying appropriate services.

H.4.e. Access
Counselors provide information to clients regarding reasonable access to pertinent applications when providing technology-assisted services.

H.4.f. Communication Differences in Electronic Media
Counselors consider the differences between face-to-face and electronic communication (nonverbal and verbal cues) and how these may affect the counseling process. Counselors educate clients on how to prevent and address potential misunderstandings arising from the lack of visual cues and voice intonations when communicating electronically.

H.5. Records and Web Maintenance

H.5.a. Records
Counselors maintain electronic records in accordance with relevant laws and statutes. Counselors inform clients on how records are maintained electronically. This includes, but is not limited to, the type of encryption and security assigned to the records, and if/for how long archival storage of transaction records is maintained.
the profession depend on a high level of professional conduct. They hold other counselors to the same standards and are willing to take appropriate action to ensure that standards are upheld. Counselors strive to resolve ethical dilemmas with direct and open communication among all parties involved and seek consultation with colleagues and supervisors when necessary. Counselors incorporate ethical practice into their daily professional work and engage in ongoing professional development regarding current topics in ethical and legal issues in counseling. Counselors become familiar with the ACA Policy and Procedures for Processing Complaints of Ethical Violations¹ and use it as a reference for assisting in the enforcement of the ACA Code of Ethics.

I.1. Standards and the Law

I.1.a. Knowledge
Counselors know and understand the ACA Code of Ethics and other applicable ethics codes from professional organizations or certification and licensure bodies of which they are members. Lack of knowledge or misunderstanding of an ethical responsibility is not a defense against a charge of unethical conduct.

I.1.b. Ethical Decision Making
When counselors are faced with an ethical dilemma, they use and document, as appropriate, an ethical decision-making model that may include, but is not limited to, consultation; consideration of relevant ethical standards, principles, and laws; generation of potential courses of action; deliberation of risks and benefits; and selection of an objective decision based on the circumstances and welfare of all involved.

I.1.c. Conflicts Between Ethics and Laws
If ethical responsibilities conflict with the law, regulations, and/or other governing legal authority, counselors make known their commitment to the ACA Code of Ethics and take steps to resolve the conflict. If the conflict cannot be resolved using this approach, counselors, acting in the best interest of the client, may adhere to the requirements of the law, regulations, and/or other governing legal authority.

I.2. Suspected Violations

I.2.a. Informal Resolution
When counselors have reason to believe that another counselor is violating or has violated an ethical standard and substantial harm has not occurred, they attempt to first resolve the issue informally with the other counselor if feasible, provided such action does not violate confidentiality rights that may be involved.

I.2.b. Reporting Ethical Violations
If an apparent violation has substantially harmed or is likely to substantially harm a person or organization and is not appropriate for informal resolution or is not resolved properly, counselors take further action depending on the situation. Such action may include referral to state or national committees on professional ethics, voluntary national certification bodies, state licensing boards, or appropriate institutional authorities. The confidentiality rights of clients should be considered in all actions. This standard does not apply when counselors have been retained to review the work of another counselor whose professional conduct is in question (e.g., consultation, expert testimony).

I.2.c. Consultation
When uncertain about whether a particular situation or course of action may be in violation of the ACA Code of Ethics, counselors consult with other counselors who are knowledgeable about ethics and the ACA Code of Ethics, with colleagues, or with appropriate authorities, such as the ACA Ethics and Professional Standards Department.

I.2.d. Organizational Conflicts
If the demands of an organization with which counselors are affiliated pose a conflict with the ACA Code of Ethics, counselors specify the nature of such conflicts and express to their supervisors or other responsible officials their commitment to the ACA Code of Ethics and, when possible, work through the appropriate channels to address the situation.

I.2.e. Unwarranted Complaints
Counselors do not initiate, participate in, or encourage the filing of ethics complaints that are retaliatory in nature or are made with reckless disregard or willful ignorance of facts that would disprove the allegation.

I.2.f. Unfair Discrimination Against Complainants and Respondents
Counselors do not deny individuals employment, advancement, admission to academic or other programs, tenure, or promotion based solely on their having made or their being the subject of an ethics complaint. This does not preclude taking action based on the outcome of such proceedings or considering other appropriate information.

I.3. Cooperation With Ethics Committees
Counselors assist in the process of enforcing the ACA Code of Ethics. Counselors cooperate with investigations, proceedings, and requirements of the ACA Ethics Committee or ethics committees of other duly constituted associations or boards having jurisdiction over those charged with a violation.

¹See the American Counseling Association web site at http://www.counseling.org/knowledge-center/ethics
Glossary of Terms

Abandonment – the inappropriate ending or arbitrary termination of a counseling relationship that puts the client at risk.

Advocacy – promotion of the well-being of individuals, groups, and the counseling profession within systems and organizations. Advocacy seeks to remove barriers and obstacles that inhibit access, growth, and development.

Assent – to demonstrate agreement when a person is otherwise not capable or competent to give formal consent (e.g., informed consent) to a counseling service or plan.

Assessment – the process of collecting in-depth information about a person in order to develop a comprehensive plan that will guide the collaborative counseling and service provision process.

Bartering – accepting goods or services from clients in exchange for counseling services.

Client – an individual seeking or referred to the professional services of a counselor.

Confidentiality – the ethical duty of counselors to protect a client’s identity, identifying characteristics, and private communications.

Consultation – a professional relationship that may include, but is not limited to, seeking advice, information, and/or testimony.

Counseling – a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals.

Counselor Educator – a professional counselor engaged primarily in developing, implementing, and supervising the educational preparation of professional counselors.

Counselor Supervisor – a professional counselor who engages in a formal relationship with a practicing counselor or counselor-in-training for the purpose of overseeing that individual’s counseling work or clinical skill development.

Culture – membership in a socially constructed way of living, which incorporates collective values, beliefs, norms, boundaries, and lifestyles that are co-created with others who share similar worldviews comprising biological, psychosocial, historical, psychological, and other factors.

Discrimination – the prejudicial treatment of an individual or group based on their actual or perceived membership in a particular group, class, or category.

Distance Counseling – The provision of counseling services by means other than face-to-face meetings, usually with the aid of technology.

Diversity – the similarities and differences that occur within and across cultures, and the intersection of cultural and social identities.

Documents – any written, digital, audio, visual, or artistic recording of the work within the counseling relationship between counselor and client.

Encryption – process of encoding information in such a way that limits access to authorized users.

Examinee – a recipient of any professional counseling service that includes educational, psychological, and career appraisal, using qualitative or quantitative techniques.

Exploitation – actions and/or behaviors that take advantage of another for one’s own benefit or gain.

Fee Splitting – the payment or acceptance of fees for client referrals (e.g., percentage of fee paid for rent, referral fees).

Forensic Evaluation – the process of forming professional opinions for court or other legal proceedings, based on professional knowledge and expertise, and supported by appropriate data.

Gatekeeping – the initial and ongoing academic, skill, and dispositional assessment of students’ competency for professional practice, including remediation and termination as appropriate.

Impairment – a significantly diminished capacity to perform professional functions.

Incapacitation – an inability to perform professional functions.

Informed Consent – a process of information sharing associated with possible actions clients may choose to take, aimed at assisting clients in acquiring a full appreciation and understanding of the facts and implications of a given action or actions.

Instrument – a tool, developed using accepted research practices, that measures the presence and strength of a specified construct or constructs.

Interdisciplinary Teams – teams of professionals serving clients that may include individuals who may not share counselors’ responsibilities regarding confidentiality.

Minor – generally, persons under the age of 18 years, unless otherwise designated by statute or regulation. In some jurisdictions, minors may have the right to consent to counseling without consent of the parent or guardian.

Multicultural/Diversity Counseling – counseling that recognizes diversity and embraces approaches that support the worth, dignity, potential, and uniqueness of individuals within their historical, cultural, economic, political, and psychosocial contexts.

Multicultural/Diversity Competence – counselors’ cultural and diversity awareness and knowledge about self and others, and how this awareness and knowledge are applied effectively in practice with clients and client groups.

Multicultural/Diversity Counseling – counseling that recognizes diversity and embraces approaches that support the worth, dignity, potential, and uniqueness of individuals within their historical, cultural, economic, political, and psychosocial contexts.

Personal Virtual Relationship – engaging in a relationship via technology and/or social media that blurs the professional boundary (e.g., friending on social networking sites); using personal accounts as the connection point for the virtual relationship.

Privacy – the right of an individual to keep oneself and one’s personal information free from unauthorized disclosure.

Privilege – a legal term denoting the protection of confidential information in a legal proceeding (e.g., subpoena, deposition, testimony).

Pro bono publico – contributing to society by devoting a portion of professional activities for little or no financial return (e.g., speaking to groups, sharing professional information, offering reduced fees).

Professional Virtual Relationship – using technology and/or social media in a professional manner and maintaining appropriate professional boundaries; using business accounts that cannot be linked back to personal accounts as the connection point for the virtual relationship (e.g., a business page versus a personal profile).

Records – all information or documents, in any medium, that the counselor keeps about the client, excluding personal and psychotherapy notes.

Records Custodian – a professional colleague who agrees to serve as the caretaker of client records for another mental health professional.

Self-Growth – a process of self-examination and challenging of a counselor’s assumptions to enhance professional effectiveness.
Serious and Foreseeable – when a reasonable counselor can anticipate significant and harmful possible consequences.

Sexual Harassment – sexual solicitation, physical advances, or verbal/nonverbal conduct that is sexual in nature; occurs in connection with professional activities or roles; is unwelcome, offensive, or creates a hostile workplace or learning environment; and/or is sufficiently severe or intense to be perceived as harassment by a reasonable person.

Social Justice – the promotion of equity for all people and groups for the purpose of ending oppression and injustice affecting clients, students, counselors, families, communities, schools, workplaces, governments, and other social and institutional systems.

Social Media – technology-based forms of communication of ideas, beliefs, personal histories, etc. (e.g., social networking sites, blogs).

Student – an individual engaged in formal graduate-level counselor education.

Supervisee – a professional counselor or counselor-in-training whose counseling work or clinical skill development is being overseen in a formal supervisory relationship by a qualified trained professional.

Supervision – a process in which one individual, usually a senior member of a given profession designated as the supervisor, engages in a collaborative relationship with another individual or group, usually a junior member(s) of a given profession designated as the supervisee(s) in order to (a) promote the growth and development of the supervisee(s), (b) protect the welfare of the clients seen by the supervisee(s), and (c) evaluate the performance of the supervisee(s).

Supervisor – counselors who are trained to oversee the professional clinical work of counselors and counselors-in-training.

Teaching – all activities engaged in as part of a formal educational program that is designed to lead to a graduate degree in counseling.

Training – the instruction and practice of skills related to the counseling profession. Training contributes to the ongoing proficiency of students and professional counselors.

Virtual Relationship – a non-face-to-face relationship (e.g., through social media).

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