



Missouri State
U N I V E R S I T Y

Assessment and Diagnosis (COU 724)

INSTRUCTOR INFORMATION:

Instructor Name:

Email:

STUDENT SUCCESS AND INCLUSIVITY:

At Missouri State University we are committed to your success and the creation of an environment where all students are welcome. As a community of learners, we acknowledge the value in the engagement and exchange of ideas with individuals, whose backgrounds may be different than our own.

A key element to your success as a student is to actively engage in the course activities, with your peers, and me - your instructor. If you anticipate or experience academic barriers during the course, contact me right away so we can discuss options for addressing those barriers. Missouri State University (as an institution) and I (as a human being and instructor of this course) are committed to full inclusion in education for all persons. Services and reasonable accommodations are available to persons with temporary and permanent disabilities, to students facing mental health or other personal challenges, and to students with other kinds of learning challenges. Please let me know if there are circumstances affecting your ability to participate in class. Some resources that might be of use include:

- [Disability Resource Center](#)
- [Counseling Center](#)
- [Multicultural Center](#)
- [Academic Advising & Transfer Center](#)

COUNSELING PROGRAM OBJECTIVES

Knowledge. Students will demonstrate appropriate breadth and depth of knowledge and comprehension in the areas of culturally relevant service, prevention, treatment, referral, and program management associated with the broader field of counseling as well as the selected specialty (i.e., mental health or school counseling).

Clinical Skills. Students will demonstrate meaningful, therapeutic alliances that utilize culturally sensitive appraisal and assessment techniques for working with individuals and groups in a culturally pluralistic world.

Research and Appraisal. Students will demonstrate analytical knowledge and skills for

appraising and contributing to professional counseling literature and program evaluation in selected specialty areas ((i.e., mental health or school counseling).

Professional Dispositions. Students will conduct themselves in accordance with the highest ethical standards and values of professional counseling and develop an understanding of oneself and the use of self in the counseling process.

Specialty Areas. Students will demonstrate appropriate breadths and depth of knowledge and skills in their respective specialty areas (i.e., mental health or school counseling).

DEFINITION OF COUNSELING: Recently ACA and 28 other Counseling Organizations adopted the following definition: “Counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals.”

REFLECTIVE COUNSELING PRACTICE: The Counseling Programs are committed to providing students with opportunities for self-reflection as those practices are congruent with the beliefs of the Professional Education Unit at Missouri State University and constitute the cornerstone of modern professionalism. Self-reflective practice requires openness, awareness, honesty, self-analysis, problem solving, conflict resolution, tolerance, and responsibility. These personal attributes and skills are crucial to the development of excellence in our schools and community agencies serving a diverse, multicultural society.

COURSE DESCRIPTION:

Prerequisite: admission to Counseling program; and COU 710 and COU 711. Study of and practice in conducting clinical interviews, appraising and assessing level of functioning and mental status, and developing diagnoses of psycho-emotional disorders. Includes assessment of learning and functioning of children, introduction to counseling theories, interventions and issues in working with clients from diverse, minority and ethnic cultures. Values, beliefs and norms of various cultures, including the student's, will be examined as they pertain to the counseling process. 3(3-0) D

COURSE OVERVIEW:

This course is designed to develop knowledge and skills for clinical interviewing, and conceptualization and diagnosis, using the most current DSM and ICD information that professional counselors will be expected to utilize in the field. A critical-analysis perspective will be expected, so that students integrate current research in neurological, trauma, and developmental literature, as well as understanding the critiques, potential bias, and appropriate use of diagnosis. Students will also be introduced to and practice utilizing assessment tools, including biopsychosocial, suicide risk, mini-mental health, substance use, and diagnostic assessments (including discussion about co-occurring disorders). The course is both didactic and experiential, focusing on specific knowledge and skill-sets critical to the ethical and effective counseling professional. Students are expected to demonstrate facility utilizing both knowledge and clinical skills to ethically and effectively navigate client presentations from diverse backgrounds and experiences, with lifespan and cultural identity considerations, and to be able to demonstrate professional report writing ability.

METHODS OF INSTRUCTION:

Didactic In-Person: This course is a “traditional” learning style in the classroom. Methods involved in this form of student-centered approach include small group discussion, problem-based learning, reflective writing, and contemplative work as well as skills practice and report writing.

COURSE MATERIALS:

Required Texts:

(DSM) = American Psychiatric Association, (2013). *Diagnostic and Statistical Manual of Mental Disorders-5*. Washington, D. C.: American Psychiatric Association.

(SFSF) = Sommers-Flanagan, J., & Sommers-Flanagan, R. (2017). *Clinical Interviewing (6th ed)*. Wiley.

(This text includes video key; please secure a copy of the text that includes that access.)

Current Research Articles in Course:

Bremness, A., & Polzin, W. (2014). Commentary: Developmental Trauma Disorder: A Missed Opportunity in DSM V. *Journal of the Canadian Academy of Child and Adolescent Psychiatry = Journal de l'Academie canadienne de psychiatrie de l'enfant et de l'adolescent*, 23(2), 142–145.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4032083/>

Cappas, N.M., Andres-Hyman, R., & Davidson, L. (2005). What psychotherapists can begin to learn from neuroscience: Seven principles of a brain-based psychotherapy. *Psychotherapy: Theory, Research, Practice, Training*, 42(3), 374-383.

https://www.researchgate.net/publication/232460900_What_Psychotherapists_Can_Be_gin_to_Learn_from_Neuroscience_Seven_Principles_of_a_Brain-Based_Psychotherapy

Kapadia, M., Desai, M., & Parikh, R. (2020). Fractures in the framework: Limitations of classification systems in psychiatry. *Dialogues in Clinical Neuroscience* 22(1): 17–26. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7365290/>

Gaines, J. (2021) Mental Status Examination: Ten best Templates and Questions. *Positive Psychology.com*. <https://positivepsychology.com/mental-status-examination/>

Minnesota Suicidal Ideation Risk Assessment. (n.d.).

<https://www.health.state.mn.us/people/syringe/suicide.pdf>

SAMHSA TIP 57 Trauma Informed Care in Behavioral Health Services.

<https://www.ncbi.nlm.nih.gov/books/NBK207195/>

Schmid, M., Petermann, F., & Fegert, J. M. (2013). Developmental trauma disorder: pros and cons of including formal criteria in the psychiatric diagnostic systems. *BMC psychiatry*, 13, 3. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3541245/>

Tomlinson-Clark, S. M., & Georges, C. M. (2014). "*DSM-5*": A Commentary on Integrating Multicultural and Strength-Based Considerations into Counseling Training and Practice. *Professional Counselor* 4 (3), 272-281. <https://files.eric.ed.gov/fulltext/EJ1063194.pdf>

Required Audiovisual access:

Fogelman, D., Khosla, S., Tanida, Y., Pawlak, B., Ventimiglia, M., Moore, M., Brown, S. K., ... Twentieth Century Fox Home Entertainment, Inc., (2017). *This is us: The complete fifth season*. <https://www.nbc.com/this-is-us/episodes/season-5>

MSU COUNSELING SYLLABUS MATRIX

This course is designed to meet certain content standards for accreditation adopted by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) 2016 standards. As such, CACREP standards covered in the course, goals, learning outcomes, learning objectives, curricular activities, and curricular assessments are displayed below:

THEMES	LEARNING OBJECTIVES	CACREP STANDARDS (2016)	LEARNING ACTIVITIES	LEARNING OUTCOMES	EVALUATION TOOLS
Trauma-Informed Approach to Mental Health and Diagnosis across the Lifespan <i>Case Conceptualization, Holistic approach to person-in-context; Sociocultural factors related to diagnosis and labeling; Culturally relevant assessment; Complex Trauma and potential manifestation; Neuro basics related to adaptations to trauma (“symptoms”); Wellness perspective</i>	Theories of normal and abnormal personality development Theories and etiology of addictions and addictive behaviors Use of environmental assessments and systematic behavioral observations Impact of biological and neurological mechanisms on mental health Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders Impact of crisis and trauma on individuals with mental health diagnoses Characteristics, risk factors, and warning signs of students at risk for mental health and behavioral disorders Common medications that affect learning, behavior, and mood in children and adolescents	2.F.3.c 2.F.3.d 2.F.7.j 5.C.2.g 5.C.2.e 5.C.2.f 5.G.2.g 5.G.2.h	-video: pre-intake role play—how to introduce screenings and assessments to client -“This Is Us” Big Three Conceptualization; application to tv series characters; -video: van der Kolk What is Trauma -video: Health Across the Gender Spectrum -video: Antwone Fisher, discussion and participation worksheet -video: Gabor Mate-How Childhood Trauma Leads to Addiction	Students will learn holistic conceptualization skills that consider the person-in-context, and apply sociocultural lens to understanding behavior. Students will utilize a trauma-informed approach to understanding behaviors.	Targeted Participation Worksheets; Assessment Screening Summary, Case Conceptualization Paper, Midterm, Final Exams, Diagnostic Evaluation Report
Ethical Use of Assessment and Diagnostic Manual <i>Ethical use of variety of assessment and screening tools; Critical analysis and</i>	Use of symptom checklists, and personality and psychological testing Suicide prevention models and strategies Intake interview, mental status evaluation,	2.F.7.k 2.F.5.1 5.C.3.a	-video: Dr. Paula Caplan (author and formerly on DSM review panel) -video: what’s it like living with OCD	Students will demonstrate ethical intake, screening, and assessment skills and interpretation.	Targeted Participation Worksheets; Assessment Screening Summary,

<p><i>limitations of DSM system; benefits and risks of diagnosis; Historical and current sociopolitical factors driving diagnosis, including pharma;</i></p>	<p>biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management</p> <p>Use of assessment results to diagnose developmental, behavioral, and mental disorders</p> <p>Ethical and culturally relevant strategies for selecting, administering, and interpreting assessment and test results</p> <p>Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning</p> <p>Psychological tests and assessments specific to clinical mental health counseling</p> <p>Etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders</p> <p>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)</p> <p>Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation</p>	<p>2.F.7.1</p> <p>2.F.7.m</p> <p>5.C.1.c</p> <p>5.C.1.e</p> <p>5.C.2.b</p> <p>5.C.2.d</p> <p>5.C.2.h</p>	<p>-video: what's it like living with Schizophrenia</p> <p>-video: Differential dx</p> <p>-video: SBIRT for alcohol use</p> <p>-video: Reality of life for OCD sufferers</p>	<p>Students will learn a critical analysis of the use and potential misuse of the DSM system, considering its history and appropriate applications. Students will learn ethical use of the DSM system and utilize differential diagnosis skills to deliver a comprehensive case presentation and recommendations.</p>	<p>Case Conceptualization Paper, Midterm, Final Exams, Diagnostic Evaluation Report</p>
<p>Key Performance Indicator: Diagnostic Evaluation Report</p>					

COURSE EXPECTATIONS

Attendance and Engagement Policy: I ask that you attend each class and be a consistent, appropriate, and knowledgeable participant in class discussion. Unexcused absences, excessive excused absences as well as repeated tardiness or leaving class early, will result in lowering of your final course grade. Given the nature of this course, students who miss more than two classes will be dropped from the course and will be encouraged to take the course at its next offering. Everyone learns differently, and it is important to me to honor a variety of learning styles and ways of knowing. If you are unsure how you are engaging in the class, please set up a meeting with me and we can discuss perceptions. Engaged and contemplative engagement can be demonstrated by the following:

- verbal contributions in larger classroom discussion
- verbal contributions in small group discussions
- clear demonstration of course content knowledge in assignments
- introspection of course content
- voicing dissenting thoughts in a respectful way to course content
- asking questions/adding comments which indicate thoughtful reflection on material
- gaining and compiling resources outside of what is required for the course
- engaging in advocacy outside of course

Technology: The use of technology is a part of our everyday lives at the university and there is important information you should know about your own computer's capabilities, Internet access, Blackboard, and other technology tools whether you are participating in a classroom on campus or taking an online class. For information on the basic computer requirements to be successful in class visit the [Knowledge Base for Computer Requirements](#) on the Missouri State University website. It is strongly recommended that, in addition to your standard means of access, you have an alternative plan for acquiring course materials, should your computer fail to function, or your Internet connectivity becomes disrupted. The MSU campus library is an excellent option if it is nearby; otherwise, most public libraries offer Internet access. If you have a laptop computer, then familiarity with local "hotspots" might also serve you well. It is your responsibility to actively and proactively address technical problems, therefore, develop a plan to address technical problems before they arise. If you need assistance with Blackboard the MSU helpdesk can be reached by phone at 417-836-5891 or by emailing HelpDesk@MissouriState.edu. You can also visit the [Help Desk website](#) for a live chat option.

Blackboard. We will utilize Blackboard throughout the semester. I will use the announcements tool to post information about the course as the semester progresses. All course assessments will be submitted through Blackboard (this includes any written assignments, quizzes, tests, etc.), and should be **uploaded in PDF format only**. You will also have access to view your grades through the My Grades link so you can stay up to date on how you are doing in the course. If you are unfamiliar with how to use Blackboard, I recommend reviewing the [Blackboard Basics for Students](#) on the Computer Services Knowledge Base. **Blackboard Ally:** To help ensure you have access to your digital learning materials in formats that work for your different devices, learning needs, and preferences, Blackboard includes a new tool called Ally. Explore the [Accessibility website](#) to learn more.

Classroom Expectations for Students using Digital Learning Platforms: Students using a digital learning platform (Zoom, Blackboard, Teams) should maintain professional, focused behavior while in class. Be aware that the instructor and other students are observing your behavior. Successful students find that consistently using a distraction-free, well-lit, “study area” works best. Unprofessional behavior such as attending class while driving, lying in bed or stretched out on the couch, eating, playing with children or pets; or multi-tasking including texting, or working with other documents or apps while attending class using Zoom or Teams contributes to poor performance and is unprofessional. Students who engage in unprofessional behavior while using Zoom or Teams technology will be reminded of these expectations privately one time. If the behavior continues, this will be reflected in assessment of their professional dispositions, and related grading policies for participation will apply.

Digital Delivery Netiquette

- I. Make sure you have a camera so that you can be seen through video when possible. Experiment with your lighting so that your face can be seen, especially for breakout sessions.
- II. Be aware of what/who is behind you and any other sounds in the area. Choose the quietest space available and mute yourself when you are not talking. Use earphones or buds when feasible.
- III. All participants should dress appropriately, as you would for class.
- IV. Use the chat box for comments, and the Q&A section for questions, or raise your hand for questions that involve discussion with the entire class.
- V. Please do not engage in other activities on your computer during class, since research shows that our brains cannot multitask.

Participation in Asynchronous and Synchronous Learning: Participation in experiential learning, case studies, and class discussions is required. Each student is expected to treat each person with respect, even when there are differences in experiences or viewpoints. Participation points will be awarded based on class participation and in some weeks, student questions demonstrating grasp of materials to be handed in at the end of class. (Substantive contributions based on readings and class experiences, raising questions that demonstrate either the student’s areas of confusion or the depth of the student’s understanding and a furthering of the topics at hand.) Each person has something important to contribute to the collective learning in our class experience, so it is the expectation that each student will participate in class discussions. Here are some “ground rules” participation:

1. Breathe and settle your body when conversations are tough. A Mindful approach to learning has been correlated with an increase in cultural consciousness (Anderson & Blisard, 2013).
2. Be open to learning, perhaps from a new perspective than you have previously considered, especially when it comes to systems-level analysis of our society. Try to move outside your comfort zone.
3. Be fully present and be an active participant. Use “I” language and speak from your own experience.

4. Respect each person's right to be heard and to have their own experience that may differ from yours.
5. Listen to others before responding.
6. Don't mistake your discomfort of feeling ideas challenged as a lack of safety—we will aim for “Brave” space of mutual respect for each other's humanity while we strive to understand the impact of individual and group experiences as future counselors.
7. Be responsible for your own growth and development. Notice your own reactions and become curious about them as a source of deeper understanding.
8. Do not judge another person's feelings, and do not mistake your feelings for “fact”; the goal is truly hearing and understanding. Be soft on people and hard on the barriers to understanding.
9. Be gentle with yourself and others as we all learn and grow.

Student Engagement: Participation and questions are expected in class discussions. It is the responsibility of each of us to treat each other with respect, even when there are differences in experiences or viewpoints. Participation points will be awarded based on class participation and in some weeks, student worksheets or exit tickets demonstrating grasp of materials will be handed in at the end of class or posted to Blackboard. Student engagement and understanding attained from worksheets or exit surveys should demonstrate your depth of understanding of the material and a furthering of the topic at hand.)

Expectations for Written Work . Students are expected to have read required materials prior to class. These readings are complementary and cumulative and will be used as a basis for all class activities, including quizzes. My expectation is that we will build upon the readings and develop higher-order applications of the concepts: analyzing, evaluating, creating (Anderson, Krathwol & Bloom, 2001), rather than simply review the readings, so your preparation is critical. We will have guest speakers, watch films and have discussions or participation activities (graded) meant to build on the readings. If you don't understand concepts in the book or want discussion, it is up to you to initiate that conversation!

All written projects are expected to adhere to the proper use of grammar, spelling and word choice, use of nonsexist and culturally sensitive language, as well as proper acknowledgment of quotations and citations. Journals are less formal stylistically but should use proper grammar and respectful language. Assignments in this class do not require APA style for formatting sections. Instead, please use the assigned prompts in the paper itself (single spaced) and write your response below them (double spaced). All written work should demonstrate graduate-level thought and analysis (see comments regarding Bloom's revised taxonomy in #7 above), and should reflect understanding and integration of course materials and process. If you need assistance, please don't hesitate to consult the Missouri State University writing lab and the “Bear Claw” in the library. For help with APA style: https://owl.purdue.edu/owl/purdue_owl.html

Plagiarism or cheating of any form will not be tolerated (see Academic Integrity and all other University policies [here](#)):

Key Performance Indicator Policy: A key performance indicator measures your performance in either a CACREP common core area or specialty area (clinical mental health counseling or school counseling). Failure to demonstrate proficiency on a Key Performance Indicator Assignment requires for you to re-do the assignment. If one is unable to demonstrate competency after a second review, one is required to retake the course to ensure that successful demonstration of knowledge and skill in the related area is achieved.

STUDENT OUTCOME TOOLS

- 1. Discussion Groups:** Students will be assigned to discussion groups and throughout the semester will be responsible for leading class discussions, as listed in syllabus. Their role will be to facilitate critical thought and application of the readings and/or film assigned that week. During the facilitator week, students are still required to turn in participation activity related to the materials. You will be assigned to a discussion group (A, B, C. . .) in Blackboard. This “pod” group may also become your study group, conceptualization paper discussion group, or peer support group. . .there are many tools in Blackboard, including group discussion board. Explore and have fun learning together!
- 2. Participation: Applied reading/viewing –** (CACREP 2016 standards covered as part of this assignment: 2.F.3.c, 2.F.3.d., 2.F.7.j., 5.C.2.g., 5.C.2.e., 5.C.2.f., 5.G.2.h., 2.F.7.k., 2.F.5.i., 5.C.3.a., 2.F.7.l., 2.F.7.m., 5.C.1.c., 5.C.1.c., 5.C.1.e., 5.C.2.d., 5.C.2.h.): In addition to contributing to in-class discussion and questions in class, students will be assigned a “participation worksheet” most weeks related to that week’s class activity. This is an opportunity to demonstrate your grasp of the materials. Specific prompts will be provided as an assignment in Blackboard, and this will be due by 5pm the day following class.
- 3. Case Conceptualization Paper—**(CACREP 2016 standards covered as part of this assignment: 2.F.3.c, 2.F.3.d., 2.F.7.j., 5.C.2.g., 5.C.2.e., 5.C.2.f., 5.G.2.h.): Students will watch minimum of three (3) episodes from NBC’s “This is Us—Season 5” and as many prior season episodes as needed to write a conceptualization paper of one of the “Big Three”, imagining this client presented to you for counseling. The conceptualization paper should focus on one character and address specifically Randall’s anxiety/panic attacks; Kate’s depression; or Kevin’s substance use. This is not meant to be diagnostic in a formal sense, rather should include the student’s integration of trauma, family dynamics, and other aspects as may relate to the chosen character’s writeup, utilizing a “5P” format and leaving prompts in paper. Students are encouraged to work together on discussing the characters and the television program (some may be more familiar than others), but the writeup should be your independent work and not copied from or shared with any other sources. *These articles might be helpful:* <https://psyfiction.art.blog/2020/05/15/5-ps-formulation/> has a similar application to Luke Skywalker. And, from ACA: <https://ct.counseling.org/2020/12/case-conceptualization-key-to-highly-effective-counseling/>

Additional links relating to each of the characters:

Kate: <https://ew.com/tv/2020/02/11/this-is-us-producer-kate-boyfriend-rebecca-rescue/>

Randall: [Randall Pearson’s Mental Health Journey](#)

Kevin: <https://variety.com/2017/tv/features/this-is-us-justin-hartley-season-2-interview-addiction-jacks-death-1202614001/>

Family dynamics: <https://www.psychologytoday.com/gb/blog/the-gen-y-psy/201710/what-is-us-can-teach-us-about-family-dynamics>

Case Conceptualization

1. Identify your chosen “This Is Us” character, with the presenting issue identified by Dr. A.:
(who) _____ (what) _____
2. Sources: Identify which three (or more) Season 5 episodes you chose to explore: Identify Other sources (List all, including prior episodes, Hollywood blogs, peer conversation, etc.):
3. Case Conceptualization:
 - a. Introduction of client demographics and historical/current overview:
 - i. Presenting Issues:
 - ii. Precipitating Factors:
 - iii. Predisposing Factors:
 - iv. Perpetuating Factors/Pattern:
 - v. Protective Factors/Strengths:
 - b. Conclusion:
 - c. Plan/SMART goal related to this character:
4. **Recorded Assessment and Interview Practice**—(CACREP 2016 standards covered as part of this assignment: 2.F.7.j., 5.C.2.g., 5.C.2.e., 5.C.2.f., 5.G.2.h., 2.F.7.k., 2.F.5.i., 5.C.3.a., 2.F.7.l., 2.F.7.m., 5.C.1.c., 5.C.1.c., 5.C.1.e., 5.C.2.d., 5.C.2.h.): All students will be required to record themselves conducting an interview with a classmate who will be role-playing rather than disclosing personal information. This recording will be part of the final portfolio. You will be assigned to “groups” of 3 or 4 peers, so that any given pair will not interview each other. 1->2, 2->3, 3->1; or 1->2, 2->3, 3->4, 4->1. This initial interview recording will utilize assessments we will review in class (mental status, suicide risk, trauma), and you will conduct an additional interview with this person in the same role play character to complete the final project writeup. Skill Rating Sheets will be completed by all group participants and the professor. You will be assigned to Interview Groups in Blackboard, which may change after the first week of class if we have adjustments to the number of students enrolled in the course. This is primarily for your reference, as we will use ZOOM breakout rooms for interviews.
5. **Diagnostic Evaluation Report (Key Performance Indicator)**—(CACREP 2016 standards covered as part of this assignment: 2.F.3.c, 2.F.3.d., 2.F.7.j., 5.C.2.g., 5.C.2.e., 5.C.2.f., 5.G.2.h., 2.F.7.k., 2.F.5.i., 5.C.3.a., 2.F.7.l., 2.F.7.m., 5.C.1.c., 5.C.1.c., 5.C.1.e., 5.C.2.d., 5.C.2.h.): Each student will complete a comprehensive writeup based on the assessments in the recorded assessment/interview and a second interview (intake/biopsychosocial interview) conducted off-camera at a different time. Format for this writeup will be provided separately. This will include SMART goals for your “client”, to demonstrate treatment planning skills.
 - a. SMART format: Please review the goal using these guidelines so you can self-check to be sure the goal is properly stated. This [website](#) may help you better understand.
 1. Specific: (what, who, where, which)
 2. Measurable: (how much, how many, how accomplished)
 3. Attainable: (can client reasonably do this)
 4. Relevant: (worthwhile, timely, applicable)
 5. Time-Bound: (can be accomplished in a specified time, by when)

- 6. Final Assessment/Diagnosis Project** – (CACREP 2016 standards covered as part of this assignment: 2.F.3.c, 2.F.3.d., 2.F.7.j., 5.C.2.g., 5.C.2.e., 5.C.2.f., 5.G.2.h., 2.F.7.k., 2.F.5.i., 5.C.3.a., 2.F.7.l., 2.F.7.m., 5.C.1.c., 5.C.1.c., 5.C.1.e., 5.C.2.d., 5.C.2.h.):
- FROM THE CACREP ASSESSMENT RUBRIC: *This assessment will be completed at the end of the semester when the candidate completes COU 724. Complete instructions for individual assignments are provided to candidates in the COU 724 course syllabus. Candidates will conduct a number of activities including a targeted interview with a peer to demonstrate clinical interviewing skills with a range of assessment instruments, reflective integration of readings, and a comprehensive written case presentation.*

This is a cumulative project, to be submitted digitally as a single pdf document, to Blackboard. Items to be included in the Final Project are listed in the syllabus, and include:

1. Weekly Participation assignments
2. Video Skills Demonstration Review sheet
3. Assessments and Written Interpretation
4. Case Conceptualization Paper
5. Comprehensive Case Presentation

- 7. Midterm and Final Exams-** (CACREP 2016 standards covered as part of this assignment: 2.F.3.c, 2.F.3.d., 2.F.7.j., 5.C.2.g., 5.C.2.e., 5.C.2.f., 5.G.2.h., 2.F.7.k., 2.F.5.i., 5.C.3.a., 2.F.7.l., 2.F.7.m., 5.C.1.c., 5.C.1.c., 5.C.1.e., 5.C.2.d., 5.C.2.h.): A midterm exam will be given near the halfway point of the semester and a final exam will be posted at the end of the semester. These will be administered online through Blackboard. They will consist of a variety of question formats (multiple choice, multiple answer, matching, and short answer). They will become available on a set date and time, and must be completed within the prescribed time limit. They are to be completed individually, utilizing only the textbooks, assigned readings, and student notes. Any use of unauthorized resources, or attempt to collaborate with others (students or other persons) will be considered academic dishonesty. It is the student's responsibility to access and complete the exam at their own convenience during this time. *Group test taking or collaboration of any kind will not be tolerated.* If you fail to take an exam during the time it is open on Blackboard, you will not be allowed to take it later – be sure to set aside time and make sure you know the open and close dates.

COURSE GRADING:

Your final grade is determined by the total number of points you earn for each of the course activities (breakdown listed in the Grading Scale Table below).

Class participation/weekly engaged discussion demonstrated in participation/application (10 x 20):		200
Group facilitation of class activities (3 x 20)		60
Final Assessment/Diagnosis Project:		500
1. Weekly Participation (include; already graded)	x	
2. Video Skills Demonstration Review sheet	15	
3. Assessments and Written Interpretation	85	
4. Case Conceptualization Paper	125	
5. Diagnostic Evaluation Report	275	
Midterm exam:		120
Final exam:		120
	Total possible points:	1000**
900-1000 = A	800-899 = B	700-799 = C

GRADING SCALE:

Final grades will be determined using the total points you earned during the semester: 93.00% or higher = A; 90.00% to 92.99% = A-; 87.00% to 89.99% = B+; 83.00%-86.99% = B; 80.00% to 82.99% = B-; 77.00% to 79.99% = C+; 73.00% to 76.99% = C; 70.00% to 72.99% = C-; 67.00% to 69.99% = D+; 60.00% to 66.99% = D; 59.99% or lower = F

UNIVERSITY POLICIES:

The purpose of the [University Syllabus Policy Statements](#) is to support teaching and learning on the Missouri State campus. The established policies are in place to ensure that students, faculty, and staff may pursue academic endeavors with as few obstacles as possible. As a student at Missouri State University, you are a part of the university community therefore, you are responsible for familiarizing yourself with the [University Syllabus Policy Statements](#). These policies cover topics such as nondiscrimination, disability accommodation, academic integrity, among many others. For program and course specific policies please refer to the individual course syllabus provided by your instructor.

COPYRIGHT AND RECORDING: Class lectures are protected by copyright law and constitute the intellectual property of the faculty member. Accordingly, students are not permitted to record lectures or other class activities unless they have received an approved disability accommodation authorizing such recording, or they have obtained permission from the faculty member prior to recording. Distribution or sale of recordings or other course materials is prohibited without the written permission of the instructor and other students who are recorded. Distribution without permission is a violation of copyright law and the Code of Student Rights and Responsibilities (Sections 4.6, 4.8, 4.9). The faculty member, however, reserves the right to record lectures or other class activities, and may make any such recordings available to student who have missed a lecture or activity due to illness or another excused reason.

SUICIDE PREVENTION, AVAILABLE SUICIDE PROGRAMS AND RELATED

PROCEDURES: In accordance with Missouri law (Mo. Rev. Stat. §173.1200), Missouri State has established a new policy regarding Suicide Prevention, Available Suicide Programs and Related Procedures. The Suicide Prevention Resource Policy can be found at the following link: https://www.missouristate.edu/policy/Op1_08-suicide-prevention-available-suicide-programs-and-related-procedures.htm

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DISABILITY ACCOMMODATION POLICY FOR STUDENTS:

Policy statement

MSU perceives students with disabilities as a valued identity group and integral to our campus diversity. We strive to proactively create usable, equitable, inclusive learning environments. However, due to the design of a University course or program, students with disabilities may experience barriers to their full and meaningful participation. When this occurs students should

request an environmental or course adaptation through the process outlined below. It is the policy of Missouri State University to comply with all applicable federal and state laws prohibiting disability discrimination.

The Disability Resource Center (DRC) is the University office responsible for the evaluation and implementation of reasonable accommodations based on a disability. The DRC provides resources and collaborates with all students with disabilities. The DRC is the entry point for all disability resources and accommodations for the Springfield Campus. Students interested in receiving a reasonable accommodation must contact the DRC information: Meyer Library, Suite 111, 417-836-4192 (voice) or 417-836-6792 (TTY), MissouriState.edu/Disability. On the West Plains and Mountain Grove Campuses, students should contact the Advisement and Academic Coaching Center for Empowering Student Success (AACCESS), 128 Garfield, 417-255-7222, WPAACCESS@MissouriState.edu.

Requesting accommodations

Students with disabilities who experience or anticipate barriers to their participation are encouraged to request accommodations by going through the following process. Students should request accommodations as soon as a barrier to participation is anticipated as accommodations cannot be provided retroactively. Distance learning students should follow this same accommodation process. Students with disabilities should contact the DRC for an appointment. The purpose of the appointment is to discuss the barriers the student has experienced or anticipates. Students should then complete the online [request for accommodation form](#) and submit it. Students may also fill out a hardcopy form through the appropriate resource office.

COURSE CALENDAR: TOPICS, ASSIGNMENTS AND CACREP STANDARDS

Statement of Flexibility: Please note that the course calendar, my office hours, removing or altering assignments in advance of their due date, etc. are subject to change due to inclement weather, student needs, instructional delays, etc. I will communicate any changes that may occur in class (when possible) and through the course announcements on Blackboard.

Week	Date	Readings	Topics	2016 CACREP Standards Addressed Per Week	Assignments/Experiences (due before class begins—see Blackboard for due dates/times)
1		SF-SF CH 1 Intro to Clinical Interview SF-SF CH 3 Overview of Interview Process	Introductions Syllabus Review From Reflective Counseling to Intentional Interviewing: Issues and Considerations <i>Assessment, Clinical Interviewing, Diagnosis, Inclusion of Neuro/Trauma-Informed Care</i>	F.5.g.2.h.; F.7.b.; C.3.a.; C.1.c.	
2		Tomlinson-Clark & Georges (2014) SFSF-CH 8 Intake Interviewing and Report Writing	Diversity and Multicultural Considerations Conceptualization vs Diagnosis	F.5.g.2.h.; F.7.b.; C.3.a.; C.1.c.; F.2.h.; F.7.m.; F.5.f.	Film: Antwone Fisher Participation week #1
3		CH 9 The Mental Status Examination CH 10 Suicide Assessment ACA suicide fact sheet Positive Psychology Mental Status Minnesota Risk Assessment	Assessing Suicide Risk (SAFE_T, CSSRS) Assessing Mental Status (SLUMS, MMSE) Assessing Depression (BDI) Assessing Trauma (LEC)	F.5.g.2.h.; F.7.b.; C.3.a.; C.1.c.; F.7.j.; F.7.l.; 5.C.1.c.; 5.C.1.e.; 5.G.2.g.; 5.C.2.f.	Practice assessment administration (to write up each assessment, see assigned articles). Participation week #2

4		CH 11 Diagnosis and Treatment Planning Articles: Kapadia, Desai, & Parikh (2020) Cappas, Andres- Hyman & Davidson (2005)	Introducing 4-step diagnostic method (Bloom PESI seminar) Report writing Treatment Planning Overview Introduction/Refresher: NeuroCounseling Trauma DSM changes Overview DSM Critique	F.5.g.2.h.; F.7.b.; C.3.a.; C.1.c.; F.3.c.;	Caplan video <u>Assessment write-up from last week's peer interview</u> Video skills review sheet x3 (self and peers) Participation week #3
5		DSM pp 123-154 DSM pp 155-188 Articles: Schmid Bremness	Bipolar and Related Disorders Depressive Disorders	F.7.e.; C.1.c.; 5.C.2.d.; 5.C.2.h.	Film: <i>Raising Bipolar</i> Case Conceptualization Paper due van der Kolk video Participation week #4
6		DSM pp 189-234 DSM pp 265-290 DSM pp 591-644 DSM pp 291-308	Anxiety Disorders Trauma and Stressor Related Neurocognitive Disorders Dissociative Disorders (documentary: <i>Busy Inside</i> when it becomes available again!)	F.7.e.; C.1.c.; 5.C.2.d.; 5.C.2.h.	Please watch the Film: Happiness Isn't Brain Surgery: Understanding Symptoms (Counselor Toolbox 1:06) before class. Will discuss/process during class; end at 5:30. Participation week #5
7		MIDTERM EXAM			
8		DSM pp 87-122	Schizophrenia and Psychosis	F.7.e.; C.1.c.; 5.C.2.d.; 5.C.2.h.	Draft 1 of Diagnostic Evaluation Report due to professor
9		DSM pp 235-264 DSM pp 783-806	Obsessive-Compulsive Disorders Diagnoses Under Consideration	F.7.e.; C.1.c.; 5.C.2.d.; 5.C.2.h.	Participation #6
10		DSM pp 451-460	Gender Dysphoria Disorders Typically Diagnosed Outside of Counseling <i>Sleep-Wake Sexual Dysfunctions Paraphilias Somatic Symptoms</i>	F.7.e.; C.1.c.; 5.C.2.d.; 5.C.2.h.	Video: Listening Like an Anthropologist: Trans Stories Participation #7
11		DSM pp 329-360	Film: <i>Thin</i> Feeding and Eating Disorders Elimination Disorders	F.7.e.; C.1.c.; 5.C.2.d.; 5.C.2.h.	Film: "<i>Thin</i>" Participation #8

12		DSM pp 461-480	Disruptive, Impulse-Control, and Conduct Disorders	F.7.e.; C.1.c.; 5.C.2.d.; 5.C.2.h.	Draft 2 Diagnostic Evaluation Report due to peer reviewer by class time today. Draft 2 returns to author with peer feedback by class time next week (April 26/27 via email. (cc:professor)) Participation #9
13		Class will not meet—Revise Diagnostic Evaluation Report write-up Please use this class time to review peer feedback and make desired changes to your final document Final due to professor on due date listed in syllabus, in combined pdf with peer feedback attached in the back of the document.			
14		DSM pp 645-684 DSM pp 31-86	Personality Disorders Neurodevelopmental Disorders	F.7.e.; C.1.c.; 5.C.2.d.; 5.C.2.h.	Participation #10
15		DSM pp 481-590	Film: The Anonymous People Substance Abuse and Addictive Disorders	F.7.e.; C.1.c.; 5.C.2.d.; 5.C.2.h.	Final Diagnostic/Assessment Project due (upload combined pdf)
16		FINAL			