

## School of Theology and Ministry

Seattle University  
901 12<sup>th</sup> Avenue, PO Box 222000  
Seattle, WA 98122-1090

Fall Quarter 2013

### COURSE INFORMATION

#### STMC 555 Clinical I

Tuesdays, 1:30pm-4:20pm

Classroom: HUNT 160

Pre-requisites: STMM 500 or STMA 575, and  
STMM 552, STMC 551, STMC 571, STMC 572.

### INSTRUCTOR

#### Gretchen Gundrum PhD

Office: HUNT 219

Office Hours: Tuesdays 12:30-1:30

Office Phone: 206-651-4305

SU Email: [gundrumg@seattleu.edu](mailto:gundrumg@seattleu.edu)

### REQUIRED READING

Cooper-White, P. (2004). *Shared Wisdom: Use of the Self in Pastoral Care and Counseling*. Minneapolis: Fortress Press.

Faiver, C., S. Eisengart, & R. Colonna. (2004). *The Counselor Intern's Handbook* (3rd ed.). Belmont, CA: Brooks/Cole.

Kennedy, E. & S. Charles (2001). *On Becoming a Counselor* (3<sup>rd</sup> ed.). NY: The Crossroad Publishing Company.

### RECOMMENDED READING FOR REVIEW AND ON-GOING DEVELOPMENT

*American Association of Marriage and Family Therapists (AAMFT) Code of Ethics*  
[www.aamft.org/imis15/content/legal\\_ethics/code\\_of\\_ethics.aspx](http://www.aamft.org/imis15/content/legal_ethics/code_of_ethics.aspx)

Bender, S & E. Messner. (2003). *Becoming a Therapist: What Do I Say, and Why?* NY: The Guilford Press.

Hersen, M. & V. Van Hasselt. (1998). *Basic Interviewing*. NY: Psychology Press.

### COURSE DESCRIPTION

This first practicum of six focuses on launching the neophyte counselor into actual clinical practice as a pastoral and relational therapist. Students carry a caseload of 14-18 clinical hours per week as they move through their training. Intense individual and group supervisory experiences in counseling services are integral to the course. Provides classroom opportunities to role-play challenging scenarios between therapist and client, addresses ethical challenges that may occur in the consulting room, and fosters growing competencies in establishment of the therapeutic alliance, case conceptualization, and beginning awareness of transference and countertransference dynamics. *The instructor may make changes to this syllabus as needed to enhance students' learning.*

### COURSE GOALS:

1. Demonstration of ability to establish and maintain rapport with clients.
2. Deepening capacity for effective, reflective listening, which includes reflecting, mirroring, active listening, re-framing, and other techniques of building the therapeutic alliance.
3. Transparency about confusion, struggles, self-doubt, and uncertainty; actively seeks and integrates supervisory suggestions for resolving practice and treatment dilemmas.
4. Reliability and accountability for site norms and office procedures, timeliness, paperwork requirements, and record-keeping.
5. Beginning understanding of transference and countertransference dynamics as they emerge in treatment and classroom settings.

## LEARNING OUTCOMES: MARPT

1. *Develop an identity as a relationship and pastoral therapist.*  
Be able to reflect on self as a therapist, committing to ongoing growth, implementing self-awareness, and use of self in clinical practice.
2. *Learn skills and theory necessary for competent, effective practice as a relationship and pastoral therapist.*  
Demonstrate ability to produce written documentation and oral presentation for purpose of clinical practice, adhering to APA written guidelines where assigned.
3. *Demonstrate intention to approach relationship and pastoral therapy with openness to the presence of diversity.*
4. *Integrate theological education, psychological and systems theories, and spiritual formation with supervised clinical experience.*  
Understand and reflect on clients' spiritual/faith assumptions and practices, and balance knowledge of relationship and pastoral therapy within client/system's spiritual dimensions.

## COURSE REQUIREMENTS:

### Presentations and Assignments

1. Students will present **two case studies** using the appropriate *Clinical Case Report* forms (see MARPT *Student Handbook*). Use of the case report forms and the oral and written presentations should follow the guidelines below. Case presentations and discussions will be limited to 35 minutes.

#### *Overall Case Presentation Criteria:*

- ◆ Student describes client's history and symptoms in enough detail so that participants get a sense of the flow, progression, and difficulties of the case, as well as the logic of the 5-axis diagnosis.
- ◆ Recommendations and treatment plan should be clear and practical, indicating which are the intern therapist's and which are the client's goals for treatment.
- ◆ Use of theoretical applications must be appropriate to the issues presented and within the skill level of the intern therapist.

#### *Written Presentation of Case:*

- ◆ Follows the case presentation outline format.
- ◆ Must be clearly written, without use of jargon or abbreviations that could be misunderstood—a visually pleasing, grammatically correct document. **Not to exceed three pages in length.**
- ◆ Must be available electronically to all class participants by 8:00 PM on the Saturday prior to class.

#### *Oral Presentation of Case:*

- ◆ Student states during opening remarks what questions she/he has about the case or on what aspects of the case she/he would like input (15 minutes of presentation, video, 25 minutes of discussion).
  - ◆ Student must provide and play a 5-10 minute video segment of the client's session that is a representative sample of their work with the client (especially of a problematic interaction that is a focus of the case presentation). Videos which are inaudible, barely audible, or visually indistinct are not acceptable and do not meet the standard for presentation. Audio recordings or verbatims may be accepted if videotaping is not permitted by the agency or site. They need to be in three-column format indicating client's words, the student therapist's interpretation of what is being said, and questions or countertransference issues arising within the student therapist. Verbatims need to encompass a 5-10 minute sample of the session.
2. Students will also **facilitate discussion of sections of assigned reading**. Each student will have 10 minutes to present key ideas from the reading and then will lead the class discussion for another 15 minutes. Knowing how to distill the most critical information is a discipline and skill all busy professionals need to acquire. *The rest of the students are expected to bring one question or discussion comment to class for group discussion. Comments or questions should be based on the readings or issues relevant to the issues being discussed.*

3. **Guidelines for Integration Paper:** Due on December 3, 2013 in class:

In a paper no more than four pages, double-spaced, with 12-point type and margins of 1.25" (top, sides, bottom) in APA format, students are asked to reflect on the following:

- ◆ Using pseudonyms for clients, chose three individuals, couples, or families you worked with this quarter. Describe the challenges you faced in your work with them (which may well be on-going), what your best/deepest learnings were, and what gave you joy, peace, or satisfaction in doing the clinical work.
- ◆ Identify what you see are growing edges that you will want to focus on for next quarter.

**Participation**

Leading class discussions on assigned reading and engaging in peers' case presentations are key parts of class participation. Without the active engagement of each student in discussions, the learning experience is impoverished for all. Role-plays will be integral to the class. Each student will need to take on roles of therapist and client during the quarter.

Giving feedback to peers during the case presentation process and during class discussion is an essential part of the learning process. The intention should be always to provide respectful suggestions that are helpful to the growth and development of one's classmates. Being able to hear and evaluate suggestions, ideas, and new perspectives is also part of on-going professional growth. Giving and receiving feedback requires humility, vulnerability, and openness.

**GRADING CRITERIA:**

<b>Attendance &amp; Participation</b>	50 pts
<b><u>Case Presentations &amp; Final Integration Paper</u></b>	<u>50 pts</u>
<b>Total</b>	100 pts

Grading Scale

A = 100-94	B- = 83-80
A- = 93-90	C+ = 79-77
B+ = 89-87	C = 76-74
B = 86-84	

An incomplete grade will be assigned only in the case of a health emergency. Final grades will be determined in consultation with site supervisor. If group supervisor, clinical director, and/or site supervisor document that progress is not being made, intern may not be able to move to Practicum II or beyond. Please refer to *STM MARPT Student Practicum/Internship Manual*.

**Internship Evaluations**

Your instructor will contact your site supervisors twice during the quarter to get feedback on your progress and will also meet with you to discuss how things are going for you with the course at mid-point. The rubric on the next page will be used to guide the conversation with your site supervisor. Site supervisors and your instructor will be filling out an assessment form on each of you (see page 16 of the *MARPT Student Handbook* for the competencies evaluated during the first quarter of the clinical practicum).

<i>Consultation Between STM Group Supervisor and Site Supervisor</i>	Poor	Fair	Average	Above Average	Excellent
Establishment of basic rapport with client					
Basic capacity for effective, reflective listening (i.e., mirroring, active listening, redefining, etc.)					
Capacity for basic empathy					
Beginnings of effective mirroring at both emotional and cognitive levels					
Reliability in fundamental contracting with client (keeps appointments, manages paperwork, returns calls, keeps appropriate records of sessions, etc.)					
Participates in individual supervision and case conferences by coming prepared with all written requirements					
Makes available a sufficient number of hours per week for case load to appropriately develop skills					
Routinely tapes (audio or video) all counseling hours and routinely makes those recordings available to supervisor					
Learns and accurately performs office procedures					
Demonstrates beginning willingness/ability to integrate supervisory suggestions/interventions/requirements in therapeutic hour					
Demonstrates beginning ability/willingness to expose and utilize counter-transferential and other self-of-the-therapist issues in supervision					

## CLASSROOM AND UNIVERSITY POLICIES

**Attendance and Tardiness:** Attendance for supervision is MANDATORY. Because the *Practicum* depends on the collaboration, collective experience, and wisdom of the cohort, **on-time** attendance at all classes and prompt return to the classroom after breaks is essential. Students are required to contact the instructor if an unforeseen absence or delay arises. Depending on circumstances, grades may be affected and supervisory hours reduced. It will be up to the instructor's discretion if any additional work can be given to offset such an absence.

**Missed Assignments and Failure to Meet Deadlines:** Students will be penalized 5 grade points per day for missed or delayed assignments, unless previous permission has been obtained from the instructor.

**Use of Social Media During Class Time is Not Permitted:** This includes checking cell phones, tablets, and laptops for email, texts, and other personal information. The distraction caused by social media engagement impairs the active participation of students in the class process. Students who cannot observe this norm will lose grade points and be docked supervision time.

**Academic Honesty (including plagiarism):** The School of Theology and Ministry strictly adheres to the academic policy regarding Academic Integrity as indicated on the Seattle University Registrar website, as noted in the box below.

**Disability:** If you have, or think you may have, a disability (including an 'invisible disability' such as a learning disability, a chronic health problem, or a mental health condition) that interferes with your performance as a student in this class, please see related note in the box below.

## University Resources and Policies

### Academic Resources

- Library and Learning Commons (<http://www.seattleu.edu/learningcommons/>)
  - *(This includes: Learning Assistance Programs, Research [Library] Services, Writing Center, Math Lab)*
- Academic Integrity Tutorial (*found on Angel and SU Online*)

### Academic Policies on Registrar website (<https://www.seattleu.edu/registrar/academics/performance/>)

- Academic Integrity Policy
- Academic Grading Grievance Policy
- Professional Conduct Policy (*only for those professional programs to which it applies*)

### Notice for students concerning Disabilities

*If you have, or think you may have, a disability (including an 'invisible disability' such as a learning disability, a chronic health problem, or a mental health condition) that interferes with your performance as a student in this class, you are encouraged to arrange support services and/or accommodations through Disabilities Services staff located in Loyola 100, (206) 296-5740. Disability-based adjustments to course expectations can be arranged only through this process.*

### Candidacy

*Candidacy* is the process by which STM declares that it considers a student qualified academically, clinically, and pastorally to obtain the Master of Arts in Relationship and Pastoral Counseling degree. Candidacy is a safeguard for the student as well as the university. When a student's Candidacy is approved, the student receives a letter from STM indicating that the student is ensured the opportunity to complete the degree if the student meets all remaining requirements. This agreement prevents last-minute surprises about the student's ability to earn the degree.

**By the end of the quarter, you must attend a meeting with STMC faculty regarding your progress toward candidacy. A sign-up schedule will be provided. The rubric on the next page will be used:**

**Candidacy Evaluation Issues:**

<b>Name of Student</b>	<b>Exceeds</b>	<b>Meets</b>	<b>Area of Growth</b>
Paperwork Proficiency	Student turned in legal forms, supervision reports, client hours on time	Student turned in many forms on time; sometimes late with paperwork	Student has outstanding required paperwork and/or shows pattern of turning in forms late
Punctuality	Student attends class, meetings, and supervision on time	Most of the time, student attends class, meetings, and supervision on time. Some report of tardy or missed events	Student established pattern of being late or leaving early to meetings, class, and/or supervision.
Making Arrangements for Unanticipated Issues		Student takes initiative and makes arrangements for make-up work/sessions	Student does not follow through on makeup work and/or sessions. Instructors, clients and/or supervisor left without back-up plan
Being Teachable	Student listens to new ideas, takes supervisors' suggestions, and attempts innovative approaches to expand their clinical effectiveness	Student is open to new approaches, yet falls back on previous strengths or ways of being when newer approaches would expand their skill level	Student does not follow through with suggestions and/or does not seek/try new ways of learning/doing
Social Demeanor	Student exhibits strong personal and interpersonal care and compassion. Student has a strong set of appropriate boundaries when working with others (clients, supervisor, etc.)	Student demonstrates good care of self and others. Sometimes boundaries are unclear, but not ethically violated. Student seeks clarification for future improvement.	Student lacks personal and interpersonal skills. Possible ethical boundary violations occur.
Individual Therapy	Student uses therapy to resolve conflicts and increase professional and personal competence. Paperwork is on file.	Student attends therapy. Spillage of personal issues over to treatment or classroom setting indicates issues need more focus. Paperwork is on file	Student is not attending therapy, or has not made several sessions. Paperwork may not be on file.
Knowledge of Emergency Procedures	Student is well-versed in emergency procedures (e.g., contacting supervisor for ethical concerns). Anticipates possible at-risk situations and plans for response.	Student knows emergency procedures and can apply them when needed.	Student is unaware of emergency procedures or fails to apply them when indicated. Clients and colleagues may be placed at risk.

## Personal Therapy

All students in the MARPT degree program must be in their own personal therapy with an experienced therapist who uses psychodynamic, and possibly, systems methods of treatment, and one who is approved by the MARPT faculty. Personal therapy is a vital part of the practical training and formation of a therapist. It is an essential adjunct to supervision that enables and catalyzes the transformation that must take place in the person of the student therapist. When interviewing and choosing your therapist, remember that NO STM students or faculty are permitted to counsel other STM students as this creates a dual relationship with conflicts of interest. Counselors chosen must have at least 10 years experience after licensure. **Completed verification of therapy forms are due in Kristin Hovaguimian's office prior to the 1<sup>st</sup> class of each quarter of your clinical internship.**

## Paperwork

Consult the *MARPT Student Handbook* for all paperwork forms. In addition to personal therapy documentation, agency agreements are due before you begin your clinical work. Your log of clinical hours and supervision hours with your site supervisor and STM faculty **must be delivered weekly to Kristin Hovaguimian.**

Three hours of group supervision may be credited for this class. Please note these hours on your log and have your course supervisor sign your forms. By doing this on a weekly basis students will develop the habit of completing paperwork on time—another important skill. Agencies undergo required, periodic audits. Therapists who don't complete paperwork in on time reflect ill on the competency of the agency itself.

## CLASS SCHEDULE

<i>Date</i>	<i>Topics</i>	<i>Reading</i>	<i>Presenter(s)</i>
October 1	<i>Checking-in &amp; Catching Up Syllabus Review &amp; Paperwork Issues Dr. McNair Presentation Hopes, Fears: Personal &amp; Professional Goals</i>		Gundrum <i>et al</i>  Dr. Clinton McNair
October 8	<i>Check-in &amp; Start-up Issues Role-plays of Interviews</i>	Faiver 18-45, 66-83 Kennedy 85-120	Opening Reflection _____ Reading Discussion 1 _____ Reading Discussion 2 _____
October 15	<i>Check-in &amp; Questions Role-plays of Professional Challenges</i>	Faiver 125-144 Kennedy 1-81	Opening Reflection _____ Reading Discussion 1 _____ Reading Discussion 2 _____ Case 1 _____ Case 2 _____
October 22	<i>Feeling in Over Our Heads</i>	Kennedy 121-158	Opening Reflection _____ Reading Discussion _____ Case 1 _____ Case 2 _____
October 29*	<i>Understanding Transference &amp; Countertransference</i>	Faiver 145-147 Kennedy 159-172	Reflection _____ Reading _____ Case 1 _____ Case 2 _____

November 5	<i>The Relational Paradigm &amp; Theological Reflection</i>	Cooper-White 1-8, 35-85	Reflection Reading 1 Case 1 Case 2	_____ _____ _____ _____
November 12	<i>Use of Self: Transference &amp; Countertransference</i>	Cooper-White 86-130	Reflection Reading Case 1 Case 2 Case 3	_____ _____ _____ _____ _____
November 19	<i>Use of Self, Continued</i>	Cooper-White 130-180	Reflection Reading Case 1 Case 2	_____ _____ _____ _____
November 26	<i>Treatment Issues with Families &amp; Couples Suicide, Grief &amp; Loss</i>	Kennedy [175-201, 311-351] Kennedy 352-400	Reflection Reading 1 Reading 2	_____ _____ _____
December 3	<i>Psychosis, Depression &amp; Stress Integration paper due Summary &amp; Wrap-up</i>		Reflection Reading Case 1 Case 2 Case 3	_____ _____ _____ _____ _____

<i>*Schedule individual meetings with instructor at mutual convenience</i>
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