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UNIVERSITY
SCHOOL *of* BEHAVIORAL
SCIENCES

DEPARTMENT OF COUNSELOR EDUCATION AND FAMILY STUDIES

School Counseling

Practicum Site Supervisor Manual

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From the Clinical Director to the School Counseling Site Supervisor

Dear School Counseling Practicum Site Supervisor,

Thank you for your commitment to invest in the Liberty University School Counseling program. School counseling supervisees have completed coursework to prepare for practicum and look forward to the opportunity to demonstrate their knowledge through their supervised school counseling experience. Your expertise is valuable in the development of our school counseling candidates. We sincerely thank you for taking the time to make their supervised school experience meaningful.

The purpose of this manual is to introduce both site supervisors and practicum supervisees to the requirements of the practicum experience and provide clear expectations and guidelines. I encourage you to read this manual to orient yourself with the requirements of the practicum for both supervisee and supervisor. Some requirements include weekly supervision with an approved site supervisor, supervised school counseling work (which includes both direct and indirect hours), and collaboration with Liberty faculty for student evaluations.

Thank you for taking some time to become acquainted with this manual for a comprehensive review of the responsibilities and privileges of the site supervisor role. We sincerely thank you for investing in the training of our school counseling candidates in the comprehensive school counseling program and for providing them with an opportunity to practice their skills.

Dr. Kerry Bowles

Kerry Lamphere Bowles, *PhD, NCC, NCSC*
Clinical Director for School Counseling Practicum & Internship
Assistant Professor
School of Behavioral Sciences

M.Ed. in School Counseling Practicum Fieldwork Manual

1. Student Practicum Requirements

A. Course Requirements

This field experience requires completion of supervised practicum with a minimum of **100 clock hours for a minimum of 10 weeks and a maximum of 16 weeks (or the end of the semester in the event the semester is longer than 16 weeks)**. Students may not accrue hours prior to the semester or after the semester. Students who need additional time to complete hours may only do so after an 'Incomplete' grade is granted, and appropriate documentation is approved through ODAS (or other documented medical leave.) Students are still required to engage in weekly supervision during their incomplete hour accrual. It is the practicum student's responsibility to communicate needs/accommodations for these circumstances.

Each practicum experience includes the following:

1. **Direct Hours.** Minimum 40 clock hours of direct service with K-12 students that contribute to the development of school counseling/clinical knowledge, skills, attitudes, and abilities.
   Examples (not an exhaustive list) of Direct Student Services:
   - **a.** Individual Counseling (social, emotional, career, academic, etc.)
   - **b.** Leading/Co-leading Small group Counseling/Individual Counseling
   - **c.** Individual Student Planning (career planning, personal planning, scheduling)
   - **d.** Leading/Co-leading Classroom Guidance Lessons
   - **e.** Assessment (when practicum student is directly interacting with the K-12 student to engage in the assessment or interpretation of the assessment results.)
   - **f.** Large group activities that support Core School Counseling Curriculum (*examples*: School-wide career day, Red Ribbon week activities whereby the practicum student is interacting directly with K-12 students on projects, Drug Awareness assembly given to students, other programs such as peer mediation/peer mentoring whereby the practicum student trains and meets with K-12 students to facilitate mediation/mentoring sessions, etc.).
   - **g.** IEP/504 meetings **only when the K-12 student is present.**
   - **h.** Parent meetings **only when the K-12 student is present.**

2. **Indirect Hours.** The remainder of practicum hours (60 hours) consist of indirect services/activities.
   Examples (not an exhaustive list) of Indirect Student Services/Activities:
   - **a.** 2-hour group supervision per week by a Liberty Faculty Supervisor. An average of 2 hours per week for the duration of the semester (14-16 weeks) with no more than 2 excused absences of the synchronized faculty group supervision.
   - **b.** An average of 1 hour per week of individual site supervision throughout the practicum with the approved site supervisor. Each practicum student is expected to initiate contact with his/her supervisor. It is the practicum

student's responsibility to ensure that he/she meets for supervision throughout the semester.

c. Case Notes/Email
d. Collaboration with teachers, staff, agencies
e. Consultation with teachers, staff, agencies
f. 504/IEP meetings on behalf of the student **(K-12 student not present)**
g. Program planning
h. Parent meetings **(K-12 student is not present)**

3. Individual Counseling Session Video Recording

The practicum student will develop one program-appropriate video recording for use in supervision to receive live supervision feedback of his or her interactions with K-12 students. Practicum students are required to share at least one video recording of an individual counseling session during the faculty group supervision. Practicum students must also submit one verbatim transcript with skill identification of the entire 20-minute session into Canvas. In the event the recorded counseling session is longer than 20 minutes, practicum students will only be required to transcribe 20 minutes of the session.

**Practicum students with a site that does not allow video recording of K-12 students will need to work with faculty and site supervisor(s) to complete a live observation of a K-12 student counseling session for assessment and complete a recording of a mock role-play individual session with the site supervisor. (Mock sessions must be transcribed as well.)*

*** To protect K-12 student confidentiality, practicum students are strictly prohibited from using any form of social media/outside media sources to record or share the counseling video. Practicum students may not record K-12 students until proper informed consent/permission is secured.*

4. Faculty Group Supervision

During the practicum course, school counseling practicum students will also participate in regular, scheduled faculty group supervision sessions in an online classroom format. Faculty group supervision involves consultation, tutorial, and mentoring forms of instruction. Practicum students meet on average of 2 hours per week for the duration of the semester (approximately 16 weeks). *Practicum students should plan for 2 hours.* Practicum students may count faculty group supervision class time towards their required indirect hours.

5. Approved Site Requirements

Approved school sites must have a functioning school counseling office/school counseling comprehensive program to complete training in. Approved sites must have a licensed/certified school counselor on-site to supervise the practicum student. In rare cases where a school counselor is not employed at the school, the Liberty University school counseling placement team and the school district will work together to secure an off-site supervisor, <u>after</u> it is demonstrated and documented that there are no other school options for the practicum student to serve in. The first and preferred option will

be to change the placement to a school setting where there is a functioning school counseling office and an on-site, employed, licensed/certified school counselor to supervise the practicum student.

a. Approved Site Supervisor Requirements

Practicum Supervisors for School Counseling must meet the following requirements:

1. A minimum of a master's degree in school counseling or a related profession with equivalent qualifications, including appropriate certifications and/or licenses.
2. Must have a minimum of two years of professional experience.
3. Knowledge of program requirements and procedures for evaluations.
4. Appropriate training in counseling supervision.
5. Must watch the pre-AIA Supervisor Training Video
6. Must hold a valid state school counseling license or school counseling certification through their state department of education.
7. Must be in good standing in the profession. For any potential supervisors with a listed disciplinary action against their license (past or present), Liberty University reserves the right to approve or deny the potential supervisor based on the nature of the violation and the disciplinary action taken by the school district or state.
8. Dual Relationship – Per ACA Ethical Code, the site supervisor cannot have a dual role. Examples may include site supervisors who are related to the practicum student/family/close friendship, etc. In the event a site supervisor is related to the practicum student, the practicum student will need to locate another licensed individual for their potential supervisor for the practicum.
9. Liberty allows practicum students to use their place of employment as their practicum site if the site meets the program requirements and has approved site supervision. *If a practicum student chooses to use their place of employment for their site, please note that dismissal from their employment will also result in dismissal from practicum.

b. Site Supervisor Responsibilities

The practicum site supervisor assesses the student's progress, consults with the practicum student regarding strategies and procedures, consults with the practicum student's faculty supervisor as needed, and completes evaluations in CORE (ELMS). The site supervisor has a significant influence on the outcome of the school counseling experience. Therefore, the supervisor's relationship with the practicum student is a matter of vital importance. It should serve as a model exemplifying professional behavior in daily school counseling activities. The supervisor ensures that relevant work experience, on-site feedback, group/individual counseling, and consultation are provided for the practicum student.

Typically, approved site supervisors will:

a. Provide placement orientation and tour with the school and introduce faculty/staff. This

should include communicating school district policies, required communication hierarchy/procedures, and any required/relevant professional development training.

b. Provide access to school crisis manuals, policy statements, comprehensive school counseling curriculum, file access, email access, etc. as needed for the practicum student.
c. Provide a private/adequate space for the practicum student to complete direct student services that require confidentiality, such as individual counseling/group counseling.
d. Assist the practicum student to refine details of practicum and activities (minimum 40 direct services) specific to the setting.
e. Provide structure for the practicum student to achieve practicum objectives, including signing off on the Practicum Plan for Placement [PPP] form, which includes expected hours/days/weeks on site (minimum of 10 weeks per CACREP.)
f. Establish **weekly** face-to-face supervisory 1-hour meetings with the practicum student. The supervisor uses this time to hear the supervisee's self-report of practicum activities, review session recording, provide feedback, plan tasks, and discuss other aspects of the practicum experience (culminating project, group counseling planning & consultation, individual counseling case conceptualization & consultation, etc.) with the practicum student.
g. Provide evaluations of the practicum student's counseling skills and progress, review these with the practicum student, and provide a copy of the mid-term and final evaluation to the practicum student. The supervisor is responsible for completing all assignments to which they have been assigned in CORE (ELMS). These assessments include: CAEP Pre-Scrip Dispositions Assessment Rubric (COSC 692) - On-Site Mentor, COSC 692/693/694 Clinical Skills Taped Session SITE SUPERVISOR, Mid-Term School Counseling Pre-AIA Rubric, Final School Counseling Pre-AIA Rubric, and Program Evaluation by On-Site Mentor.
h. Initiate immediate contact with the practicum student's faculty instructor/supervisor if problems/concerns are encountered with the practicum student during the placement.

6. Important Information:

Prior to being selected for the practicum course all students have obtained background and fingerprint clearance. All practicum students have obtained professional liability insurance through the American School Counselor Association (ASCA).

7. International Practicum Guidelines for Approval of Sites and Supervisors Abroad

- **Students seeking a Site Outside of the United States**:
  - Site must be sponsored by an American Organization
  - Site must follow the general guidelines established by the counseling profession in the U.S. **(**e.g., ACA Code of Ethics, ASCA ethical standards, state board regulations, etc.).
    - Informed consent
    - Treatment plans
    - Record keeping
  - Site Supervisor must:
    - Have a minimum of a master's degree in counseling or a related profession with equivalent qualifications, including appropriate licenses and/or certifications.

- Hold a master's degree or above in counseling or related field.
- Must have a minimum of two years of professional experience.
- Have knowledge with program requirements and procedures for evaluations.
- Have appropriate training in counseling supervision.
- Hold a valid license/certification at an independent level of practice, i.e., supervisors must be able to practice without being under supervision.
- Be in good standing in the profession.
- Hold a license/certification that qualifies the individual to provide clinical or school supervision.

8. Practicum Student Professional Behavior Expectations

While at the practicum site and in all interactions with K-12 students, site supervisors, school faculty, school community members, parents/guardians, peers, and LU faculty and staff, practicum students are expected to exhibit attitudes and behaviors consistent with professionalism. This includes, but it is not limited to, the following:

- Punctuality and promptness to the site
- Appropriate dress and grooming (business attire)
- Professional written communication
- Professional oral communication (this includes correct verb usage and the avoidance of inappropriate language including informal language or slang)
- Be teachable and receptive to feedback given by the supervisor(s)
- Professional Social Media Presence. Please refer to social media disclaimer. We recommend practicum students personal social media is set to private.

Please be aware that student created and/or student led social media group pages (including posts, links, and/or other content posted on such social media group pages) related to the School of Behavioral Sciences, School Counseling, Practicums/Internships are unofficial, not sponsored by Liberty University, and views expressed in these groups do not necessarily represent those of Liberty University. Such social media group pages must state that they are unofficial and not run by Liberty University or its School of Behavioral Sciences. Official Liberty University stock photos are the property of Liberty University and may not be used to imply university affiliation. It is imperative that practicum students are mindful of professionalism, ethics, laws, university honor codes, and aware they are bound by confidentiality and cannot share confidential client/student information, as this violates HIPAA/FERPA federal law. Liberty University practicum students are expected to follow professionalism by seeking program information from Liberty University and not through social media platforms. Sharing secure links, professor course links, or email communication from faculty supervisors, professors, site supervisors, or other students (without written permission from the individual) violates confidentiality policies, counselor dispositions, and professionalism and is therefore prohibited.

- Adherence to the *American Counseling Association Code of Ethics/American School Counselor Association Ethical Standards for School Counselors*

Practicum students should conduct themselves in a way that is consistent with the ACA Code of Ethics, ASCA Ethical Standards for School Counselors, and the Graduate School Honor Code as counselors-in-training. As such, practicum students are expected to communicate their concerns and seek to resolve any conflicts or misunderstandings

directly with the person with whom the allegation occurred.

- Adherence to the Liberty Way

Per the Liberty Way (p. 14), *"Liberty student email accounts are the official means of communication for the Liberty University community. Students must check their email account on a regular basis."* The Liberty account will be the primary email address where important information and reminders will be sent regarding this course. The staff is unable to include other email addresses in regular communication. Therefore, the practicum student is responsible for checking their account for any relevant information sent to that account.

9. Professional Development and Supervision

1. Systems Approach to Case Conceptualization & Supervision

The systems approach to school counseling case conceptualization helps practicum students see each K-12 student as a part of the bigger picture that includes their family, friends, school, community, and culture. By using systems theory in case conceptualization, practicum students learn to look beyond surface concerns to understand how these different parts of a K-12 student's life connect and impact their overall well-being. This approach encourages counselors-in-training to explore relationships and influences within systems and to use strategies and interventions that support both the K-12 student and the important people or environments around them. (CACREP, 2024)

2. Counselor Hats for Supervision adapted from Edward DeBono's Six Thinking Hats

Practicum students in the School Counseling program learn to implement the use of *'hats'* to clarify roles and perspectives, helping them think more deeply when working with K-12 students. This approach helps maintain clear communication, prevents role confusion, and promotes ethical collaboration while evaluating K-12 student's presenting symptoms, treatment goals, and monitoring progress. The seven hats which include a spiritually focused hat aligned with the Liberty Way are:



Control Hat- the control hat directs the meeting, defines the purpose, keeps the focus of the meeting, summarizes the results and input. It gives direction for future meetings.



Meeting Presenter Hat- the meeting presenter hat presents the facts, gives known information, identifies missing information, identifies needed information, and identifies questions to ask.



Feelings Hat- the feelings hat expresses a wide range of feelings as they exist including, intellectual feelings, no judgment or forced judgment. Variation of cultural feelings are identified in the case, and the Red Hat student has no need to validate, justify, or explain feelings.



Optimistic Hat- the optimistic hat points out the benefits and the "value" of what has been tried.



Safety Hat- the safety hat presents caution, identifies risks from given information, problems from given information, what to avoid, and points out how ethics and values that do not fit within presented case. This hat helps to avoid mistakes.



Creative Hat- the creative hat represents creative thinking, new ideas, different

approaches, alternatives (e.g. new way of seeing the case presented), and escapes from old ideas.



Spiritual Hat- the spiritual hat invites self-awareness of one's values and faith perspective while approaching counseling with compassion, ethical grounding, and respect for the spiritual experiences of others.

Contact Information

Students and supervisors are expected to contact university personnel with comments, questions, and/or concerns that arise during the practicum. Generally, it is best to contact us sooner rather than later in the event that challenges arise during the course of the school counseling training.

For emergencies or questions not addressed in this manual, please contact:

Kerry Bowles, Ph.D., NCC, NCSC, LSC
Clinical Director of School Counseling Practicum & Practicum
Department of Counselor
Education & Family Studies
School of Behavioral Science
kllamphere@liberty.edu

For questions about CORE (ELMS), please contact:
scfieldplacement@liberty.edu

Department of Counselor Education and Family Studies
Lynchburg, VA 24515
Fax: 434-522-0477
https://www.liberty.edu/behavioral-sciences/counselor-ed/welcome/

Graduate Student Affairs Office, Honor Codes, Handbooks & Appeal Policies
http://www.liberty.edu/index.cfm?PID=19155

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Appendices

Appendix A

Practicum Plan for Placement (PPP)

Practicum Plan for Placement

Practicum Student Name_____ LUID # _____

Practicum Site: _____

Site Supervisor Name: _____

Directions: Please indicate the agreed upon schedule for the practicum student to serve in the practicum site. Please note: 100 minimum hours are required (*at least* 40 or more direct hours and the remainder 60 are indirect.) Students MUST serve a minimum of 10 weeks or more at their sites, per CACREP. Thank you!

Week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total
Example *Week 1*	*9:00am-12:00pm*		*9:00am-12:00pm*		*9:00am-12:00pm*			*9 hrs*
Week 1								
Week 2								
Week 3								
Week 4								
Week 5								
Week 6								
Week 7								
Week 8								
Week 9								
Week 10								
Week 11								
Week 12								
Week 13								
Week 14								
Week 15								
Week 16								

TOTAL WEEKS _____ TOTAL HOURS _____

Practicum Student Signature: _____ Date: _____

Practicum Site Supervisor Signature & Approval: _____ Date: _____

(Typed names are not accepted)

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Appendix B

Permission to Record Minor

M.Ed. in School Counseling

Permission to Record (Minor)

I, _____ the parent/legal guardian give my consent for (minor/student full name) _____ to participate in individual counseling session(s) with a master's level student for Liberty University.

I acknowledge that I have been informed of and agree for my student to participate in a video recording completed by the practicum student to fulfill requirements in the M.Ed. in School Counseling program at Liberty University. All parties understand that this recording will be used for instructional purposes, viewed/heard only by the site supervisor, faculty instructor, and students in the graduate course. All parties understand that after the recording has been reviewed, it will be permanently erased/deleted.

Parent/Guardian Signature _____ Date _____

Practicum Student Signature _____ Date _____

This consent form may be filed at the student's home school in a secure/confidential location. A parent/guardian may also retain/request a copy of the consent form.

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Appendix C

Permission to Record Minor

M.Ed. in School Counseling

Permission to Record (Minor)

I, _____, site supervisor at _____, acknowledge that a child/adolescent and the parents/guardians of the child/adolescent have been informed and have agreed to participate/allow participation in a video recording completed by the practicum student to fulfill requirements in the M.Ed. in School Counseling program at Liberty University. All parties understand that this recording will be used for instructional purposes, viewed/heard only by the site supervisor, instructor, and students in the graduate course. All parties understand that after the recording has been reviewed, it will be erased. The child/adolescent's identifiable information will be retained at the site.

_____ _____

Site Supervisor Signature ***(Typed name not accepted)*** Date

_____ _____

Practicum Student Signature
(Typed name not accepted) Date

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Appendix D

Consent Form for Mock Client (ADULT)

M.Ed. in School Counseling

Permission to Record (Adult)

I, _____agree to participate as a mock client for a master's level student for Liberty University. I acknowledge that I have been informed of and agree to participate in a video recording completed by the practicum student to fulfill requirements in the M.Ed. in School Counseling program at Liberty University. All parties understand that this recording will be used for instructional purposes, viewed/heard only by the site supervisor, faculty instructor, and students in the graduate course. All parties understand that after the recording has been reviewed, it will be erased.

_____ _____

Mock Client Signature ***(Typed name not accepted)*** Date

_____ _____

Practicum Student Signature
(Typed name not accepted) Date

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Appendix E

Instructions for Sites That Do Not Allow Video Recording of K-12 Students

Students will need to role play with one of the following individuals:

- Approved site supervisor
- Fellow practicum student
- Any licensed counselor at the site

The individual listed above will role-play a student that is familiar to them:

- A current or past K-12 student
  - This will allow the individual doing the role-play to present a client history useful for the student's development of a case conceptualization and treatment plan.
  - This will allow the student to meet the recording and verbatim assignment required for the faculty supervision class.

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Appendix F

School-Wide Culminating Project: Six Session Small Group Program

Psycho-Educational Small Group

Practicum Student Name _____
Practicum Site _____
Practicum Site Supervisor _____

Please note: The following psycho-educational small group project is to align clearly with the standards for school counseling and grade level academic state standards (standards blending) to improving student academic achievement. Collaborate with your site supervisor to ensure that the project is beneficial to the group members and meaningful for you. Your project will need to align with the standards listed on the **Pre-Advanced Internship Assessment (Pre-AIA Practicum Competencies)**. It is possible for a project to align with more than one standard listed on the **Pre-AIA.** List all standards (number of the standard is sufficient) that align with your project.

Psycho-Educational Small Group Overarching Topic: *(You will describe the specific session titles later in this proposal.)* _____

Grade Level of Small Group Participants: _____

a. Needs Assessment:
   i. Discuss who will be surveyed to support the need for this group at this practicum student's particular site. *(Examples: students, parents/guardians, faculty, administrators, counselor advisory committee, etc.)*

      _____

   ii. Explain how you will identify potential group members from your needs assessment.

      _____

b. Screening:
   i. Explain your process/method to screen those students for appropriateness for the group setting.

      _____

c. Consent:
   i. Explain your process of obtaining parent/guardian consent for your identified group members.

      _____

d. Describe Goal of Small Group Program: *(What skills, knowledge items, or behaviors will your students take away from participating in this group?)*
   Example: "After six sessions of the psychoeducational small group program, students will……" _____

e. Provide a detailed description of your project. Be specific. Include the lesson breakdown of the topics for each of your six sessions. **Practicum students may implement over six sessions; however, six sessions are the minimum requirement.*

i. Session 1 Title/Topic/Description:

ii. Session 2 Title/Topic/Description:

iii. Session 3 Title/Topic/Description:

iv. Session 4 Title/Topic/Description:

v. Session 5 Title/Topic/Description:

vi. Session 6 Title/Topic/Description:

f. Provide two existing data sources to identify and support the needs for this group at this practicum student's particular site. *(Examples: behavior data, attendance data, academic achievement data, grades, test scores, etc.)* Use the school report card or other school data sources. "Needs Assessments" are NOT exiting data sources. Explain how your project is relevant to the school's specific achievement gap(s) and need(s).

g. Identify which Pre-AIA Specialty Standard(s) the group aligns with and provide rationale for this identified alignment. *(Examples: FOUNDATIONS, COUNSELING PREVENTION & INTERVENTION, DIVERSITY & ADVOCACY, ASSESSMENT, RESEARCH & EVALUATION, ACADEMIC DEVELOPMENT, COLLABORATION & CONSULTATION, and LEADERSHIP.)* Provide a rationale including how your project will address/align with the standards you chose.

h. Identify how the culminating project, your psycho-educational small group, is culturally sensitive. Identify strategies included in the group that promote a positive, caring, and protected learning environment.

i. Objective Data for Evaluation:
   i. Describe how you plan to evaluate your group for objective data to show what students learned (knowledge, skills, and/or behavior) as a direct result from attending your group. (*Helpful hint: which data- from your initial data sources- will you re-evaluate to show growth, learning, or will be positively impacted by your small group program?)* Pre/post

measures multiple choice questions are excellent data sources that provide an objective measurement of group success.

ii. Likert scales only measure how students *feel* about a topic (perception data.) If a practicum student chooses to gather perception data, they MUST also include their objective data. Perception data may be gathered <u>in addition</u> to objective data- not in the place of it.

iii. This group is specifically psychoeducational in nature; therefore, this assignment requires the practicum student to gather objective data as evidence that a skill or knowledge item was learned and to identify area to improve/enhance the group experience.

j. References

Practicum Student Signature _____ Date _____

Signature required. Typed name not accepted.

Practicum Site Supervisor Signature _____ Date _____

Signature required. Typed name not accepted.

Reference

American School Counselor Association (2021). *ASCA Student Standards; Mindsets and Behaviors for Student Success.* Alexandria, VA: Author

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Appendix G

HIPAA Privacy Authorization and Release Form

This form provides the K-12 student's legal guardian informed authorization for use and disclosure of his/her protected information, including personally identifiable information with the home school and site school counselor supervisor, at the school where the K-12 student attends as a student. This form is required by the Health Insurance Portability and Accountability Act, 45 C.F.R. Parts 160 and 164 (HIPAA) to be completed, signed, and dated by the student's legal guardian prior to the use and disclosure of the students' information for the purpose of counseling, learning, and supervision under a licensed counselor, as described below.

*Attention Liberty Graduate Student: Do **NOT** upload this form to Canvas or any similar platform used in connection with a Liberty University course. This form must be maintained securely by both the school site and the graduate student named below. Remember to also give the student's legal guardian a copy of his/her records. To protect the confidentiality and privacy of the K-12 student, the Liberty graduate student agrees to not disclose the K-12 student's name (or other identifiable information) in case conceptualization/consultation discussion or any other assignment for Liberty University.*

Section I – Authorization

I, _____ (parent/legal guardian), understand that my son's/daughter's counselor is a graduate student at Liberty University's School Counseling program and that my counselor-in-training is providing my counseling session(s) as a required part of his/her practicum or practicum course requirement for that program.

Section II – Effective Period

This HIPAA Privacy Authorization and Release Form is valid and remains in effect until the end of the counselor/student's practicum or practicum course.

Section III – Acknowledgements and Disclosures

I understand that Liberty University, the counselor-in-training, the K-12 student, as well as the LU Faculty Supervisor will be required to maintain the same confidentiality that is required by members of the professional counseling profession. However, I acknowledge that there are certain exceptions to such confidentiality that require disclosure even without my authorization. Such exceptions that may require disclosure include: (1) threat or act of serious harm to self or another, (2) disclosure of abuse of a minor, an elder, or an incapacitated adult, and/or (3) the issuance of a lawful subpoena, search warrant, or judicial court order that requires disclosure. These exceptions are required by mandated reporting laws to protect K-12 students and their families.

I understand that I have the right to revoke this authorization, in writing, at any time. I understand that my revocation will not be effective to the extent that any person or entity has already acted on my authorization. In other words, a revocation of my authorization cannot be retroactive, and it will become effective only when my written revocation is received and

processed. My written revocation of this authorization must be sent to:

Name: Kerry Bowles, Clinical Director Practicum School Counseling
Organization: Liberty University
Address: 1971 University Blvd, Lynchburg VA 24515
Email Address: kllamphere@liberty.edu

Section IV – Agreement and Signature

By signing below, I agree that I have carefully read and fully understood all of this HIPAA Privacy Authorization and Release Form, and I voluntarily agree to release my son/daughter's protected information to the counselor-in-training under the licensed counselor/site supervisor, as described above.

_____ Date: _____
Signature Parent/Legal Guardian of K-12 Student

_____ Date: _____
Signature of Liberty Practicum Graduate Student

_____ Date: _____
Signature of Liberty Practicum Site Supervisor

HIPAA Privacy Authorization and Release Form

Acknowledgement of Receipt of HIPAA Privacy Authorization and Release Form

I acknowledge that I received a copy of the above completed and signed HIPAA Privacy Authorization and Release Form from the above-named counselor/student and I agree to maintain a copy for my (or my entity's) records.

_____ Date: _____
Signature Parent/Legal Guardian of K-12 Student

_____ Date: _____
Signature of Liberty Practicum Graduate Student

_____ Date: _____
Signature of Liberty Practicum Site Supervisor

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Appendix H

Parent/Guardian Consent for Individual School Counseling Services
Sample

Dear Parent/Guardian,

This is to inform you that your student, _____, has requested/been invited to participate in individual counseling sessions at the school for _____ sessions.

Nature of Services: (Description)

Logistics: (Time of day/place of sessions/how many weeks/etc.)

Individual Counseling sessions are generally 20-30 minutes. All counseling sessions will take place in the school building in an atmosphere that supports the confidential nature of the sessions. School counseling individual sessions are short-term, solution focused, and strengths-based in nature to support the academic success of your student. In the event the counselor, guardian, or student indicates that counseling needs will require longer term or topics outside of the scope of practice of the school counselor, a collaborative referral process will take place.

Confidentiality:

It is the ethical and legal responsibility of the counselor to safeguard students from unauthorized disclosures of information given in the context of counseling sessions. Therefore, information revealed between the counselor and student during the counseling session is confidential. It is the counselor's hope that the parent, teacher, and/or administrator be involved in the helping process while maintaining counselor-student confidentiality.
Limitations to confidentiality include:

1. When student poses danger to self, others, or the property of others.
2. When counselor suspects abuse or neglect.
3. Upon authorization of parent/student.
4. Under court order.

In some circumstances school counselors may be required to breach confidentiality as a matter of school policy. These limitations will be discussed with students during initial counseling sessions.

Consent:

I, _____, have read and understand the contents of this informed consent.
(please print name)

I give my student permission to participate in individual counseling activities.

Parent/Guardian Signature: _____ Date: _____

This permission form is an optional document for the school site to obtain for school counseling services which are provided by the practicum student, if needed/requested.

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Appendix I

Parent/Guardian Consent for School Small Group Counseling Services
Sample

School Name _____

This is to inform you that your student, _____, has been invited to participate in a _____ small group for _____ sessions.
(topic) (number)

Topic: (Description)

Logistics: (Time of day/place of group sessions/how many weeks/etc.)

Small Group Counseling sessions are generally 20 -30 minutes. All counseling sessions will take place in the school building in an atmosphere that supports the confidential nature of the sessions.

Confidentiality:

It is the ethical and legal responsibility of the counselor to safeguard students from unauthorized disclosures of information given in the context of counseling sessions. Therefore, information revealed between the counselor and student during the counseling session is confidential. It is the counselor's hope that the parent, teacher, and/or administrator be involved in the helping process while maintaining counselor-student confidentiality.
Limitations to confidentiality include:

1. When student poses danger to self, others, or the property of others.
2. When counselor suspects abuse or neglect.
3. Upon authorization of parent/student.
4. Under court order.

In some circumstances school counselors may be required to breach confidentiality as a matter of school policy. These limitations will be discussed with students during initial counseling sessions. Also, in group counseling sessions, the importance of confidentiality is stressed but cannot be guaranteed between group members.

Consent:

I, _____, have read and understand the contents of this informed consent.
(please print name)

I give my child permission to participate in small group counseling activities.

Parent/Guardian Signature: _____ Date: _____

This permission form is an optional document for the school site to obtain for school counseling services which are provided by the practicum student, if needed/requested.

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Appendix J

LIBERTY UNIVERSITY
FIELDWORK SUPERVISION AGREEMENT

STUDENT NAME {{STUDENT_NAME}}	**STUDENT ID** {{STUDENT_ID}}
DEGREE PROGRAM {{DEGREE_PROGRAM}}	**ACADEMIC SEMESTER** {{ACADEMIC_SEMESTER}}
FIELDWORK TYPE {{FIELDWORK_TYPE}}	**SITE NAME** {{SITE_NAME}}
SITE ADDRESS {{SITE_ADDRESS}}	

Purpose and Agreement

This agreement defines the shared responsibilities of the Faculty Supervisor, Site Supervisor, and Student during the field experience. By signing, the Site Supervisor and Student acknowledge that they have reviewed, understand, and agree to fulfill the responsibilities below and to communicate promptly when concerns arise.

FACULTY SUPERVISOR RESPONSIBILITIES

1. Serve as the Program's primary academic contact for the Student and Site Supervisor during the field experience and provide the Site Supervisor with current contact information at the beginning of the field experience.
2. Consult with the Site Supervisor a minimum of three (3) times during each academic term: (a) at or near the beginning of the term; (b) at or near the midpoint of the term; and (c) at or near the end of the term. Consultation may occur by telephone, email, video conference, or another University-approved method, as appropriate to the nature of the information being discussed.
3. Use the required consultations to monitor the Student's learning, progress toward Program and course objectives, school/clinical skill development, professional dispositions, supervision experience, and overall performance at the field experience site. The Faculty and Site Supervisor will also discuss, as applicable, concerns regarding K-12 student/client welfare, ethical or professional conduct, Student performance, additional support or corrective action, and the continued appropriateness of the placement.
4. Initiate additional consultation with the Site Supervisor whenever the Faculty Supervisor becomes aware of a concern involving the Student's performance, professional conduct, ability to satisfy field experience requirements, supervision, placement, or K-12 student/client welfare. The Faculty Supervisor will respond to Site Supervisor requests for consultation regarding such concerns.
5. Facilitate faculty-led group supervision and administer the academic and course requirements associated with the field experience in accordance with applicable Program requirements, the current Fieldwork Manual, and the applicable course requirements.
6. Review the Student's reported field experience hours and related documentation for consistency with course and Program requirements. The Faculty Supervisor's review of the reported hours does not replace the Site Supervisor's responsibility to verify the Student's on-site activities, supervision, and field experience hours.
7. Evaluate and monitor the Student's overall field experience using information obtained from faculty supervision, required course activities, Student submissions, Site Supervisor evaluations, program-site consultation, and other appropriate sources.

8. Consult with the Site Supervisor and appropriate Program personnel when concerns arise that may require additional supervision, corrective action, modification of the Student's field experience, or considerations of whether the placement should continue.

SITE SUPERVISOR RESPONSIBILITIES

1. Serve as the Site's primary supervisory contact for the Student's field experience and provide the Student and Faculty Supervisor with current contact information.
2. Orient the Student to applicable Site policies, procedures, professional expectations, confidentiality requirements, documentation requirements, safety procedures, and emergency and crisis-response protocols relevant to the Student's assigned activities.
3. Collaborate with the Faculty Supervisor and Student to identify field experience activities that are consistent with the Program's educational objectives, applicable course requirements, the Student's level of training and competence, and the services provided at the site.
4. Provide ongoing supervision of the Student's school, clinical, and professional activities performed at or on behalf of the Site and provide direction, consultation, and feedback appropriate to the Student's level of training and assigned responsibilities.
5. Provide the Student with a minimum of one (1) hour per week of individual and/or triadic supervision.
6. Participate in consultation with the Faculty Supervisor a minimum of (3) times during the academic term, at or near the beginning, midpoint, and at or near the end of the term, for the purpose of monitoring the Student's learning, clinical/school skill development, progress toward educational objectives, professional dispositions, supervision experience, and overall performance in the field experience.
7. Contact the Faculty Supervisor promptly when a concern arises regarding the Student's school/clinical performance, professional conduct, compliance with Site or Program requirements, ability to perform assigned responsibilities, supervision, placement, or K-12 student/client welfare. The Site Supervisor should not defer a necessary response to an immediate school, clinical, or safety matter while awaiting consultation with the University.
8. Complete and submit required Student evaluations at the midpoint and end of the academic term and participate in additional evaluation or consultation when reasonably necessary to address documented concerns regarding the Student's field experience.
9. Verify the Student's field experience activities completed at the Site and reported on the hours log for accuracy at least weekly.
10. Notify the Faculty Supervisor as soon as possible of any significant change that may affect the Student's placement, including a change in Site Supervisor, the Site Supervisor's availability or qualifications, the Student's assigned responsibilities, the Site recording permissions, or the Site or Site Supervisor's ability to provide an appropriate field experience or supervision.

STUDENT RESPONSIBILITIES

1. Comply with applicable University and Program requirements, the Fieldwork Manual, course requirements, Site policies and procedures, applicable professional ethical standards, and laws and regulations governing the Student's state and field experience activities.
2. Perform only those field experience activities that are authorized by the Site and Program, relevant to the Student's degree program, and that are appropriate to the Student's level of training, competence, supervision, and role as a counselor-in-training.
3. Participate in all required individual/triadic and faculty group supervision and come prepared to discuss school/clinical work, professional development, ethical concerns, and areas in which additional guidance or supervision is needed. Any absences from the Site and/or faculty supervision should follow the policies indicated by the site and the Fieldwork Manual.
4. Maintain accurate and timely documentation of field experience activities and hours and obtain Site Supervisor verification at least weekly.

5. Promptly disclose to the Site Supervisor concerns involving K-12 student/client safety, clinical emergencies, ethical concerns, or circumstances in which the Student believes an assigned activity may exceed the Student's training or competence.
6. Notify the Faculty Supervisor promptly of concerns that may affect the Student's ability to satisfy field experience requirements, including concerns involving supervision, placement conditions, professional expectations, or the Student's learning experience.
7. Follow the Site's established emergency, crisis-response, reporting, and safety procedures and promptly seek supervision when an emergency or other situation arises.

EMERGENCY OR CRITICAL INCIDENT PROCEDURES

1. The Site retains responsibility for the immediate management of emergencies and critical incidents arising from services provided at or under the authority of the Site. The student will follow the Site's applicable emergency, crisis-response, safety, supervisory, and reporting procedures.
2. When a situation presents an immediate or reasonable threat to the health or safety of a K-12 student/client, the Student, Site personnel, or another person, the Student and Site Supervisor will first take appropriate action consistent with Site procedures and applicable legal and professional obligations.
3. A Student must first promptly seek assistance from the Site Supervisor or authorized on-site supervisor when confronted with an emergency, crisis, or circumstance that exceeds the Student's training or competence. A Student should not independently manage a clinical emergency when Site policy, the Student's level of training, or applicable professional and legal requirements require supervisory involvement.
4. The requirement to notify or consult with the University does not replace, delay, or supersede the Site's responsibility to implement its emergency or crisis-response procedures or to take appropriate action to protect the health and safety of K-12 students/clients, Students, Site personnel, or others.
5. After immediate safety, school, or clinical needs have been addressed, the Site Supervisor will notify the Faculty Supervisor as soon as possible of an emergency or critical incident involving the Student or Student's field experience. An emergency or critical incident may include, as applicable, a significant K-12 student/client safety event involving the Student, an event resulting in injury or substantial risk of injury to the Student or another person, an allegation of serious professional or ethical misconduct involving the Student, circumstances resulting in the Student being removed or restricted from field experience activities, or another event expected to affect the Student's continued participation in the field experience.
6. University notification will occur according to the following order of contact: (1) Faculty Supervisor of record; (2) if unavailable within a timeframe appropriate to the circumstance, the Site Supervisor should contact scfieldplacement@liberty.edu; (3) If additional administrative intervention is necessary, the concern will be escalated to the Clinical Director of School Counseling Practicum & Internship or designated University administrator.
7. If no University representative is available, the Site will proceed according to applicable policies, professional responsibilities, and legal obligations. Inability to reach the University will not delay an emergency response or action required to protect health and safety.
8. Following an emergency or critical incident, the Faculty Supervisor, Site Supervisor, and Student, when appropriate, will consult regarding effects on the Student's field and learning experience, supervision needs, and as applicable, additional support or corrective action, and continued participation in the placement.

ACKNOWLEDGMENT AND REQUIRED SIGNATURES

The Site Supervisor and Student confirm that they have reviewed this agreement, had an opportunity to ask questions, and agree to comply with the responsibilities and procedures stated above. Signatures are required before the field experience begins or by the deadline established by the Program.

SITE SUPERVISOR PRINTED NAME {{SITE_SUPERVISOR_NAME}}	**CREDENTIALS/LICENSE** {{SITE_SUPERVISOR_CREDENTIALS}}
SITE SUPERVISOR EMAIL {{SITE_SUPERVISOR_EMAIL}}	**PHONE** {{SITE_SUPERVISOR_PHONE}}
SITE SUPERVISOR SIGNATURE {{SITE_SUPERVISOR_SIGNATURE}}	**DATE** {{SITE_SUPERVISOR_DATE}}
STUDENT PRINTED NAME {{STUDENT_PRINTED_NAME}}	**STUDENT ID** {{STUDENT_ID}}
STUDENT SIGNATURE {{STUDENT_SIGNATURE}}	**DATE** {{STUDENT_DATE}}