

Professional Counseling Psychology



Case Conceptualization

Regulation & Preparation Manual

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This manual contains important information and instructions for completing the final graduate project, Case Conceptualization, which is an exit requirement for successful completion of the Professional Counseling Psychology Masters program. It is the student's responsibility to read the manual thoroughly and adhere to all instructions and deadlines for submission. Failure to do so may result in a delay in the student's graduation.

Students must sign and submit this Attestation Form confirming that the manual was received and read by the student.

Acceptance of this Agreement

I, _____, have read, understand and accept the terms and conditions included in this agreement and in the accompanying Case Conceptualization Preparation Manual. By signing this form I am agreeing to the due dates and policies given in this manual. I further understand and accept that if I do not adhere to these dates and policies, it will likely result in a delay in my graduation. Finally, I understand that if I do not successfully complete a passing case conceptualization project in the two opportunities given by the program, I will be terminated from the program without the opportunity for reinstatement. I understand that changes may be made based on changes in University policies and State of Florida laws, rules, and regulations. Any changes will be communicated in writing to the student in advance.

Signature

Date

Procedures for Completing the Case Conceptualization

The Case Conceptualization (CC) will be completed as part of the PSY 5939 Special Topics: Advanced Case Conceptualization course. This will be a capstone project where students will apply knowledge from previous courses and clinical experience to the development of an evidence-based case conceptualization. The final project for this course will consist of a paper, presentation slides, and an oral presentation to be evaluated by a committee of 2 faculty evaluators.

Timeline

This capstone project will be completed during the second year of study during the Spring semester as part of the PSY 5939 Special Topics: Advanced Case Conceptualization course, while concurrently completing the clinical internship.

Case Conceptualization Committee

Projects will be evaluated by two faculty members. The Co-Professors for Advanced Case Conceptualization will serve as Chairs on all CC's and a Faculty Reviewer will be assigned as the second committee member. The chair will guide the student and monitor progress. The Reviewer and the Chair will both participate in the assessment of the final project.

Selection of Client

The site supervisor and the faculty Chair must approve the client selected for the project. The client identified must have been treated or is currently being treated at the Internship Site. The client must be identified no later than the 3rd week of the Spring semester.

Final Case Conceptualization

The Final CC will consist of the following:

- 1) Paper
- 2) Presentation Slides
- 3) Oral Presentation

Paper

The core text of the paper should range from 10-15 pages and **must contain all elements as outlined in this manual in the exact order.**

The document will be prepared in accordance with the most current version of the *APA Style Manual*.

Presentation Slides

Students will develop a PowerPoint slide presentation of the information contained in the paper. The Presentation Slides must contain all elements as outlined in this manual.

Oral Presentation

Students will give a formal presentation of the CC slides in front of the Committee and peers. Presentations will be held during the PSY 5939 Special Topics: Advanced Case Conceptualization course during Weeks 12-16. Students will have **NO MORE than 20 minutes to present their Case** with an additional 10 minutes for Q&A from the committee and peers. Site Supervisors are invited to attend but not required. Site Supervisors will not participate in the evaluation process.

Submission of the Final Project

Students will submit two bound copies of the final project on the presentation date, containing both the final paper and the final slides. The paper must be 1-sided and slides must be printed with 2 slides per page. The paper (only) must be emailed to the Committee **one week prior to the presentation date and also submitted through Turnitin**. Papers with more than 30% overlap will be reviewed for plagiarism.

Two blank copies of the Assessment Rubric packet must be brought in by the student with the final project on the day of the presentation. The top line on all 3 pages with Student's information, should be filled out by the Student. One set of assessments should have your Faculty Chair's name and the other your Reviewer's name. Please do not bind these with the project.

Evaluation of the Final Project

The final project will be evaluated using an assessment rubric, provided in this manual that evaluates subject content knowledge, written communication, and oral presentation related to the paper, slides, and presentation.

Students must receive an average rating of 15 or higher from both evaluators in each of the areas of subject content, written, and oral, to "pass" and successfully complete the project.

Students failing to receive the minimum rating will have a second chance to submit the paper and slides.

The second submission will be reevaluated by the committee along with an additional faculty or outside faculty member using the Content Knowledge and Written Communication Rubrics. Failure to produce an acceptable project (above 15 in each area) within two chances will result in the student being terminated from the program without option for reinstatement.

Students will have two weeks from the date the CC was evaluated to resubmit the paper and slides for reevaluation.

If any part of the paper or slides is plagiarized, the entire project will be rejected, and disciplinary action will be taken.

After the final review by the Chair and Reviewer has been completed, approved projects will be signed, and one bound copy returned to the Student.

Content of the Paper

Evidence-based practice in psychology (EBPP) is the integration of the best available research with clinical expertise in the context of patient characteristics, culture, and preferences (American Psychological Association 2002). The overall purpose of the Advanced Case Conceptualization project is for students to demonstrate competency as an Evidenced-Based Practitioner, as defined by the APA.

The paper is a review of the available literature and should appropriately and comprehensively summarize the research information available on the etiology, prevalence, comorbidities, impairment in functioning and other relevant information commonly associated with the disorder and/or clinical problem(s) experienced by the selected client. In addition, the student is expected to provide a review of the evidence-based or evidence-informed assessment and treatment approaches for this client that include RCT studies found in the literature. A strong rationale for the selected theoretical conceptualization, assessment and treatment choices must be presented.

The CC should comprehensively summarize the treatment of the client and include evidence from current literature applied to client. The student must evaluate treatment outcome and be able to delineate clinical decisions made at each point in the treatment (e.g., diagnosis, intervention selection, treatment plan, etc.). In addition, the student is expected to

provide evidence of competency to develop a comprehensive treatment plan and apply treatment in an ethical and clinically competent manner.

More specific instructions for each section along with examples can be found in the Presentation Slides Template provided in this manual. Be sure to review both the Paper Outline and the Presentation Slides very carefully. The student is expected to comply with American Psychological Association (APA) style by consulting the most recent edition of the Publication Manual of the APA.

Paper & Presentation Outline

I. Introduction

Provide a brief introduction of the case conceptualization (client, setting, clinical problem) EB assessment and EB treatments for the disorder

II. Problem Overview

a general description and overview of most recent information and findings related to the disorder being presented (e.g., scope, significance, diagnostic criteria, etiology, risk factors)

III. Evidence-based Assessment

What does EB assessment for this disorder look like? Provide a general *brief* description of EB assessment of the disorder and how the specific instruments are typically used. What type of instruments are used (e.g., self-report, biochemical markers) and for what (e.g., diagnosis, progress monitoring, outcome)

IV. Evidence-based Treatments

What is an EB treatment? Provide a *brief* description of the available treatments (should be related to client demographic, make sure to provide the resource for this information)

V. Client Description

- a. General description of client characteristics that includes demographic data
- b. Describe the presenting problem and/or reason for treatment
- c. Relevant historical information about the client including family history, history of the problem, and previous treatment
- d. Include a brief description of the client's strengths and challenges that effect the progress and outcome of treatment
- e. Describe relevant information about the client's clinical presentation (affect, mood, motivation, etc.) and all symptoms exhibited by the client consistent with the diagnosis
- f. Stage of Change and how it was determined

VI. Assessments

- a. Describe the assessment instruments used to determine/confirm the diagnosis.

Also include any pre-post measures used to monitor progress and measure outcome (i.e., purpose of the assessment tool)

- a. Provide a rationale for selection.
- b. DSM-5 Diagnosis

VII. Rationale for Treatment Selection

- a. Which treatment (from the available EB treatments) was selected to be used with the client and why
- b. Must be able to defend the selection of the treatment
- c. Must be based on all of the following:
 - best research data,
 - clinical data (e.g., information obtained about the client), and
 - client characteristics (demographics, stage of change, preferences, etc)

VIII. Description of Treatment with Client

- a. Treatment setting
- b. Description of treatment
- c. Specific components and application of treatment/intervention
- d. Theoretical Case Conceptualization- Provide a *theoretical* conceptualization of your client's problem that includes the etiology and is based on the selected theory

IX. Treatment Plan

- a. Treatment plan goals and objectives
 - i. Goals should be measurable and specific
 - ii. There should also be an indication of how goals will be measured (i.e., as evidenced by...clinical observation, client self-report, pre-post data)

X. Treatment Summary

- a. Summary of the sessions you conducted with the client. Should include:
 - goal of sessions,

- specific intervention used,
 - client response to intervention and progress
- b. Include any data from sessions (e.g., worksheets used, drawings, etc.)
 - c. Include any missed sessions with explanation

XI. Treatment Outcome

- a. Progress on Treatment Goals
 - i. Provide specific information and explanation regarding progress and/or deterioration, toward treatment goals **and** evidence to support claims
 - ii. Progress made toward each treatment goal should be specified.
- b. Pre-post measure data should be presented here

XII. Conclusion

Provide a general summary of your conclusion about the effectiveness of your treatment approach applied to your specific client

XIII: Prognosis- provide a description of your prediction of client's functioning post treatment

XIV: Recommendations- Provide recommendations for follow up (e.g., continued therapy, support group, medication, psychiatric consultation, etc.)

XV: Ethical & Cultural Concerns- Describe relevant ethical and/or cultural issues related to the selection of treatment, implementation process, and treatment outcome, etc.

XVI: Limitations- Include information related to client, site, assessment and treatment barriers

XVII: Special Considerations- Describe any relevant historical or clinical information about the client that was intentionally omitted from the paper and presentation. This will allow you the opportunity to explain any co-occurring diagnosis, interfering historical information, or current psychosocial stressors that may have impacted treatment progress and outcome.

XVIII. References- List all references in APA format.

Paper Template

INSERT HERE

Presentation Slides Template

INSERT HERE & UPDATE PG NUMBER ON TOC

Assessment Rubrics

INSERT HERE & UPDATE PG. NUMBER ON TOC