

Basic and Advanced
Pastoral Counseling Practicum Manual



Care and Counseling Center of Georgia

PASTORAL COUNSELING PRACTICUM
MANUAL
2003-2004

The Pastoral Counseling Training Program of the Care and Counseling Center of Georgia teaches the theory and practice of pastoral counseling. Training in pastoral counseling takes place in three different ways:

- * through the basic practicum in which residents involved are enrolled either in a doctoral or masters degree program through one of the seminaries of the Atlanta Theological Association;
- * through an advanced practicum in which residents have completed their academic work and are working toward increasing their counseling skills;
- * through individual contractual arrangements with CCCG staff.

This manual covers procedures in the basic and advanced practicum.

1.0 PASTORAL COUNSELING: DEFINITION AND SUPERVISORY GOALS

Pastoral counseling is a theological discipline. Faith in God has implications for the counseling practitioner. Its impact is felt in our values, in our esteem for others, in our manner of relating to our clients, in our view of human nature, in our thinking about psychological ills and their healing, and the hopes we hold for those who seek our help. Implicit in our vocation as pastoral counselors are certain responsibilities. First is our responsibility to have a thorough knowledge of our respective theological traditions. Second, we must be able to integrate our theological and psychological understandings. Third, we must engage in self-examination to discern how our practice reflects what we believe. Thus, we are constantly in a position to revise our statements of belief and to change the way we practice so that our professed faith and our practice come into harmony. The training program is a context in which this theological activity can take place.

From a psychological perspective, pastoral counseling, as taught by the CCCG practicum staff, can be thought of as interpersonal psychotherapy. It is based upon the belief that the most important element is the establishment of a healing relationship between the therapist and client. The theoretical foundation for this psychotherapy is psychodynamic, including object relations theory, self psychology and attachment theory. This psychotherapy can be seen as facilitating such processes as increasing self-acceptance, personal growth, resolution of blocked developmental processes, increased freedom and the ability to choose, and improved personal relationships. Both the therapist and client will experience healing in the process.

In the supervisory process, residents are expected to integrate the theoretical material that is presented in the didactic portion of the practicum in such a way that they are able to relate authentically and spontaneously to their clients. Residents will also be expected to integrate their

theology and pastoral identity into their experience as pastoral counselors. This will require an intensive personal therapeutic experience for residents in addition to the supervision provided by the CCCG staff.

2.0 GENERAL ADMINISTRATIVE INFORMATION

2.1 Calendar

The practicum generally follows the academic calendar of the participating seminaries. The practicum continues in a reduced form during the summer. Residents are expected to continue to see their clients during breaks. The exact calendar and schedule for the practicum will be available several weeks prior to the beginning of each semester.

2.2 Practicum Tuition

Residents who are getting course credit for the practicum pay tuition for the practicum to the seminary in which they are enrolled. The seminaries then pay a portion of that tuition to CCCG. Residents who are not receiving course credit pay CCCG directly. CCCG's tuition is based on the amount of tuition residents pay to the seminaries. Since that tuition does not meet CCCG's expenses in providing the practicum, the fees which residents get from their clients are used to pay the full amount of the tuition. Because of that, residents are expected to carry a caseload of at least 3-5 clients per week, assuming referrals are available. For those residents who pay CCCG directly, tuition must be paid within the first week of the semester unless a payment plan is arranged with the Business Manager. If a payment agreement is signed, the first payment is due the first week of class. Tuition may be fully refunded for residents who withdraw from the program within the first week of the semester, 60% in the second week, 40% in the third week, and no refund for residents who withdraw after the fourth week. Although residents do not get academic credit for summer semester, they are expected to continue with their clients and in supervision. All residents must pay summer tuition directly to CCCG. The tuition policy stated above also applies to summer semester.

2.3 Relation of Practicum to Academics

For residents who are participating in an advanced degree program, the practicum and the academic requirements of the seminaries are complementary. The content and structure of the clinical teaching of the practicum presumes that residents appropriate that material presented through the core curriculum of the Th.D. program. The didactic seminar of the practicum is intended to supplement the theological emphasis of the core curriculum with psychotherapeutic and personality theories. Residents receive nine hours of credit each year for successful completion of the practicum. As with any graduate level course, residents are expected to meet high standards of performance, e.g., reading material relevant to the practicum beyond that which is required for the didactic seminar.

2.4 Attendance

Practicum residents are expected to be present and on time for all components of the training program. Tardiness and/or absences can result in grade reduction or termination from the program. Residents should notify supervisors or training staff group leaders (e.g., didactic leader) about expected or sudden absences. Absences that eliminate a scheduled presentation must be covered by finding another resident to present at that time. When absences are to be extended, residents must arrange for emergency coverage for their clients and inform the clients of this arrangement. That information must be on your voice mail message and shared with your supervisor.

3.0 PERSONAL ADMINISTRATIVE INFORMATION

3.1 Relationship to AAPC

All first-year residents who are seeking AAPC certification should apply for student member with AAPC. The pastoral counseling curriculum and the number of hours spent in individual supervision, case conferences, and small group supervision meet the current Standards for Member Associate in AAPC. Residents are responsible for keeping accurate records of hours of counseling and supervision. Accreditation by AAPC requires documentation of the number of hours in each of these categories. Contact AAPC at 703-385-6967 or info@aapc.org.

3.2 Licensing

State licensure has become a critical issue for our ability to offer credible pastoral counseling. A law regulating licensure for marriage and family therapists and professional counselors went into effect July 1, 1993 replacing a title protection law with a practice protection law. This law states that anyone who practices marriage and family therapy or professional counseling must be licensed by the state. Although persons doing such therapy in church-related agencies may be exempted, it is not clear that they are. This law is the manifestation of a national trend toward licensure. Most pastoral counselors are heeding this trend by becoming licensed. In the environment of managed care, licensure is clearly one requirement for any therapist who wants to be included in third-party reimbursement, and it is now the norm in mental health care.

Although the Care and Counseling Center of Georgia seeks to provide an opportunity for residents to meet as many of the licensing requirements as possible, it cannot include offerings that meet all of them. The law and its associated regulations change frequently, and residents should make themselves aware of these requirements and make provision for those that cannot be met in this training program. Since licensing laws are frequently changed, residents should call The Georgia Composite Board and get the current laws and rules or download those from the internet.

3.3 Ethics

The Care and Counseling Center of Georgia adheres to the Codes of Ethics of AAPC, AAMFT, and The Georgia Composite Board. Residents' professional conduct is subject to these Codes. Before seeing their first client, residents are expected to be thoroughly familiar with these documents which are included in the Appendix.

3.4 Record Keeping

Residents will adhere to CCCG's record keeping policy and to the following:

1. Residents should use the sample form included in the Appendix for keeping routine process notes. These notes should be kept up to date and provided for your supervisor at each supervisory session.
2. Your supervision presentation form should be destroyed and your tapes for supervision erased once they have been used.
3. You must get permission from your clients to tape your interviews and you must inform them that you are a resident. Use the Authorization for Resident Clinical Services form for that purpose. It must be signed both by you and your client(s) during the first interview. That form, along with the Intake form, must be given to the receptionist immediately after the first interview.
4. Client records must be kept in the building, and care must be taken to maintain confidentiality.
5. Case conference reports should be prepared prior to presenting in case conference with a copy given to the case conference supervisor and consultant prior to the presentation. After your presentation, give a copy to the Administrative Manager. Copies will then be made for your supervisor and your training file.

3.5 Personal Therapy

Residents are **strongly urged** to be in personal psychotherapy at their own expense while in the training program. This is consistent with the AAPC requirement that applicants have had sufficient therapy to protect their clients from the residents' issues, and it is also essential in learning how to do psychotherapy. The therapist should be someone whose therapeutic approach is congruent with that of the CCCG training program, i.e., psychoanalytically oriented psychotherapy. Residents should

consult their supervisor in choosing a therapist. The therapist must not be someone with whom a dual relationship is possible, such as a CCCG staff person or a seminary professor. Residents must have established a therapy relationship by the second semester of the first year.

3.6 Complaint Procedure

Any resident who has a complaint regarding the training program should first attempt to resolve the complaint with his/her immediate supervisor and secondly with the Director of Training. If the complaint is against the Director of Training, the complaint should be directed to the Executive Director of the Care and Counseling Center of Georgia.

The resident should submit his/her complaint in writing with any substantiating documents to the Director of Training. Any supervisor or supervisors towards whose action the complaint is directed will submit, in turn, his/her responses in writing to the Director. If the complaint is against the Director of Training, all written documents will be submitted to the Executive Director of CCCG.

4.0 CLINICAL INFORMATION

4.1 Referrals

Referrals are of two kinds--general and specific. General referrals are those which come to the center with no reference to a particular counselor. These are generally allotted to residents according to the need of the resident and the need of the client. Specific referrals are those which are made to a particular counselor and are given directly to that counselor. Residents who expect to get referrals must check their voice mail at least twice a day.

Residents are expected to carry a case load of at least 3-5 hours a week. A caseload less than this minimum will not provide enough of an experience in therapy for optimal learning to occur. Residents are expected to develop their own referral sources as CCCG is not able to provide all the referrals necessary for an adequate caseload. They must represent themselves as pastoral counselors in training. The resident's ability to develop and maintain a caseload will be regularly evaluated and become a part of the final grade.

4.2 Room Scheduling

Counseling rooms are scheduled by making entries on the room schedule chart and in consultation with the receptionist. Entries should be accurate and current. Space is at a premium and should not be overbooked.

4.3 Forms

Residents will use the following standardized forms which are available in the Workroom and upstairs in the printer cabinet by the snack bar.

Forms which must be used during the first interview are:

General Information Sheet

Client Information Sheet -- The original is to be given to the receptionist immediately after the first interview. Residents must keep copies for their personal files. The requested administrative information is self-explanatory.

Authorization for Resident Clinical Services -- New clients are to be informed that their counselor is a resident and that their interview will be taped and used for supervision. Both clients and residents must sign this form which will be placed in the permanent client file.

Other forms which must be used as needed:

Fee Schedule -- Residents will use the Resident Pastoral Counseling Fee Scale as a guideline in setting client fees.

Daily Report -- A daily report will be filed for each counseling day. This report will include client file number, type of service, client name, check number, and fee charged. Receipts will be filled in by the office staff. Reports must be filed on the day in which the counseling takes place.

Standardized Process Note Form -- Residents will use this form to keep process notes for supervision and for the client files.

Release of Information -- Before information is shared with another professional, this form must be signed by the client and cleared with your supervisor.

Referral Slip -- This form will be filled in by the office staff and given to the resident to provide what information is available about the person(s) being referred.

Telephone Slip -- All long distance calls, including those related to counseling clients, must be reported to the Manager of Accounting using this form.

Supervision Presentation Form -- To be used in individual supervision.

Letter of Agreement -- For residents working in a satellite center.

Insurance Information Form

4.4 Audio or Video Recording

Residents are required to make audio or video recordings of all counseling interviews. These are to be used in group and individual supervision and are to be promptly erased when no longer needed for supervision. Recordings must be audible and should be cued to the portion that demonstrates the issue that the resident is presenting for supervision. Signed permission must be granted by clients for recording. This is given on the Authorization for Resident Clinical Services Form. Counseling may not begin until this is accomplished.

Audible recordings depend on both technique and equipment. Inexpensive recorders usually work well, but a powered booster microphone greatly enhances the quality of the recording. Sound pickup varies exponentially with distance, so the microphone should be placed as close to the source as possible. Microphone placement should be tested prior to the client's entering the room.

4.5 Intake and Client Evaluation

Each client must be presented at the case conference held on Thursday mornings. The case conference is a group seminar led by a CCCG staff person and one CCCG consultant with participation by all the residents regarding the case presented. At the conclusion of the intake, which should run no more than four sessions and which involves a thorough history taking and diagnostic considerations, the resident presents the client at case conference. The case conference report must be completed before presenting in case conference with copies given to the case conference supervisor and consultant. There are two different formats to be used for presentation in the case conference. One format is to be used when Anne-Marie Meehan, Ph.D., is the consultant (Case Conference Presentation Format). The other is to be used when Brian Teliho, M.D., is the consultant (Psychiatric Case Conference Format). These formats can be found in the Appendix. Each resident is expected to present twice each semester and once in the summer and will be graded on the quality of the presentation.

4.6 Fees

The procedure for the setting and collecting of fees by residents from their clients will be reviewed by the training faculty at the beginning of the resident's training. Briefly, that procedure is as follows: (1) The fee should be set during the first interview, using the Resident Fee Scale. Any deviation from the scale must be cleared with one's individual supervisor. (2) The fee should be collected at each session and turned in to CCCG using the forms provided by CCCG. (3) No basic practicum resident may charge more than the Resident Fee Scale maximum. Advanced Practicum residents may not charge more than Resident Fee Scale maximum until they pass the performance exam and become members of AAPC or a similar accrediting agency.

4.7 Supervision

Clinical supervision is done in individual and group settings. Individual supervision consists of one or two students per session. The Director of Pastoral Counseling Training assigns a primary supervisor on a yearly basis for overall training responsibility, including weekly individual sessions. The supervisor explains the resident's various responsibilities and oversees the resident's work. Residents are expected to complete a supervision presentation form prior to each individual supervision session with a copy for the supervisor. Residents' copies of these forms should be destroyed when the client terminates. Group supervision is structured for weekly clinical and didactic training. All supervisors are Diplomates or Fellows of the American Association of Pastoral Counselors or have equivalent status in their discipline. All supervisors also are licensed and AAMFT approved.

4.8 Calling In

Practicum residents must call in at least twice daily to check for Voice Mail messages. When residents are going to be absent, the office staff must be informed and the Voice Mail must be changed to reflect your absence and the availability of emergency coverage.

4.9 CCCG Clinical Policies

Residents in the practicum are expected to become familiar with and follow CCCG's clinical policies. Your supervisor has a copy of the manual and will orient you to these policies.

5.0 EVALUATIONS AND GRADES

5.1 Evaluations

Formal evaluations of each resident are conducted at the end of each semester using a format provided by the training faculty. The evaluation is both written and oral, and both aspects of the exam are considered in the resident's grade for the semester. The resident's overall performance for the semester is also considered in the grade that is given. An informal mid-term evaluation may also be given. Residents should give their written work to each member of their evaluation committee at least two days prior to the evaluation

5.2 Grades

Residents are graded in the following areas: Individual supervision, group supervision, case conference, didactic, and final evaluation. The final grade comes from averaging the supervision grade, the didactic grade, and the final evaluation grade.

6.0 PERFORMANCE EXAM

The performance exam is a summary evaluation of the resident's overall performance. It is one of the qualifying exams for admission to candidacy for the Th.D. degree and for completion of other degrees. To successfully complete the exam, residents must demonstrate a thorough grasp of pastoral counseling theory and pastoral theology and have the ability to integrate those into pastoral counseling practice. Residents are expected to demonstrate that other aspects of their degree curriculum, e.g., systematic theology, theological method, etc., are being integrated into their pastoral counseling theory and practice. All residents are expected to meet the same standards for completion of the practicum whether or not they are in a degree program.

The performance exam may be taken at the end of the second year of training at the earliest and must be taken by the end of the third year. Residents, in consultation with their supervisors and upon approval by the faculty, are responsible for determining the exact time for the exam, selecting a committee, and assuring that all committee members can be present at the time selected.

The performance exam is conducted by a committee. The committee for the performance exam should consist of the resident's current supervisor, one other supervisor, the academic advisor, and one other faculty person from the seminary where the resident is enrolled. An open invitation is automatically extended to any other practicum faculty who wish to attend as well as to seminary pastoral counseling faculty (and the Th.D. Committee for residents in the Th.D. program).

Three weeks before the exam date, residents will be given two or three questions which will be answered with a ten to fifteen page paper. Residents will also submit an audio or video recording which presents their capability as a therapist. The tape and paper are provided to the committee at least one week before the exam. All committee members receive the paper and two members receive tapes to review. One tape should be given to a clinical faculty person (not the resident's supervisor) and one to an academic faculty person. When residents meet the committee for the allotted one and one-half hours, they will be asked to present themselves however they desire. Usually, residents will describe and play a pertinent portion of the tape that demonstrates their capability as therapists. The committee then responds to the tape presented and the paper previously reviewed. After discussion, residents will be asked to leave the room, and the committee will deliberate and reach a decision. Residents then will be called back to hear the results and any comments.

Residents who do not pass the exam, upon the recommendation of the examining committee, may be allowed to take the exam a second time as specified by the committee.

7.0 ADVANCED PRACTICUM

Upon completion of the basic two year practicum, which goes through the summer of the second year, residents will enter the Advanced Practicum. Advanced Practicum residents continue to be governed by the same standards as specified in this manual and are expected to be present for individual and small group supervision as specified in the schedule. Excessive absences will be grounds for dismissal from the Advanced Practicum.

The Advanced Practicum of the Care and Counseling Center of Georgia provides ongoing supervision for those persons who are doing pastoral counseling, marriage and family therapy, and psychotherapy at an advanced level. It is assumed that persons in this practicum will have completed the basic two year CCCG practicum or its equivalent in their field of counseling or therapy and are seeking to increase their competence.

7.1 Who Is Eligible

1. Residents who have completed the basic two year practicum at CCCG and who wish to continue seeing clients at CCCG under supervision.
2. Persons who wish to see clients as residents at CCCG in order to complete the requirements for member and/or fellow in the American Association of Pastoral Counselors (AAPC) and/or state licensure.
3. Counselors and therapists who wish to continue in supervision and have a practice elsewhere.

7.2 Advanced Practicum Application Procedure

1. Residents who successfully complete the basic two year practicum are automatically admitted to the Advanced Practicum.
2. Persons who come to the Advanced Practicum from outside CCCG must complete an application. Upon completion of that application, they will meet with a committee from the practicum staff and that committee will recommend admission to the practicum staff.

7.3 Advanced Practicum Requirements

1. CCCG adheres to the codes of ethics of AAPC, AAMFT, and the Georgia Composite Board. Advanced Practicum residents are expected to be familiar with these standards and adhere to them. Persons who are not affiliated with AAPC are expected to familiarize themselves with these standards and ethics and to adhere to them as well as to the standards and ethics of their particular professional group.
2. Residents in the Advanced Practicum are eligible to receive CCCG referrals provided they use the CCCG sliding fee scale in setting fees. As with regular practicum residents, any deviation from the fee schedule should be discussed with the resident's supervisor. If residents are unable to arrive at a mutually agreeable fee or time to see an assigned client, it is their responsibility to consult with the Training Director regarding that referral.
3. Residents in the Advanced Practicum are required to be in both individual and group supervision for two years. During the first year, it is required that residents be in both the didactic and clinical group. At the end of the second year, residents in consultation with the Training Director and individual supervisor may continue in group supervision or make other arrangements. As long as residents are in the Advanced Practicum, they must continue in individual supervision.
4. The same attendance requirements apply to non-residents in this practicum.
5. Residents in the Advanced Practicum are strongly encouraged to be in personal therapy.

7.4 Advanced Practicum Supervision

1. Residents in the Advanced Practicum who are pastoral counselors in training are required to be in individual supervision with a member of the CCCG staff. The supervisor must be a diplomate of AAPC or a fellow under supervision.
2. The frequency of supervision for Advanced Practicum residents is as follows:
 - 2.1 Individual supervision. Residents are required to have a minimum of two hours per month of individual supervision. The guidelines for individual supervision hours are as follows:
 - 2.1.1 Up to five-ten client hours per week--twice monthly.
 - 2.1.2 Ten client hours or more per week--weekly.
 - 2.2 Bi-weekly group supervision.
 - 2.3 Bi-weekly didactic during the first year in the Advanced Practicum.
 - 2.4 Additional individual supervision may be required depending on the number of client hours.

7.5 Advanced Practicum Fees

Tuition is \$30.00 per session for group supervision and \$60.00 per session for individual supervision. Residents must pay tuition at the beginning of each semester, or they may work out a payment plan with the Business Manager. Full tuition must be paid by the end of the semester for continued participation in the Advanced Practicum. Residents must give 24 hour notice for cancellation of individual supervision. If that notice is not given, residents must pay for the missed appointment.

7.6 Advanced Practicum Stipends

1. Residents may receive a monthly stipend based on the fees collected from their clients.
2. The amount of the stipend is based on the formula of fees collected less 35% of the fees for overhead, less tuition.
3. Residents who have placement in satellite centers and who have passed the performance exam are eligible to receive subsidies at the discretion of the Advisory Committee and the satellite director.