



Annual Report 2014



Council for Accreditation of Counseling and
Related Educational Programs

This is the third annual report publication of the Council for Accreditation of Counseling and Related Educational Programs (CACREP). The information in this publication reflects events and activities from January 1, 2014, through December 31, 2014, unless otherwise specified.

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“ CACREP continues to be
a leader and partner in unifying
the counseling profession... ”

LETTER FROM THE BOARD CHAIR



Dear Friends and Colleagues,

In 2014, CACREP's activities continued to grow in leaps and bounds: CACREP began new initiatives in response to the changing demands within the counseling profession and in response to the changes in the political and social arenas that impact the counseling profession. In addition, CACREP received strong endorsements from its organizational partners as well as from regulatory entities.

Of note is the 4.6% growth in the number of new institutions with CACREP-accredited programs and the Standards Revision Committee's submission of the final draft of the 2016 Standards to the Board for adoption. 2014 also saw the launching of the annual CACREP Advocacy Week and the inaugural awarding of the Martin Ritchie Award for Excellence in Advocacy. Also noteworthy is CACREP's reception of strong support from its organizational partners, with ACES recommending a CACREP degree to meet education requirements for state licensure and NBCC announcing the new educational requirement of graduation from a CACREP program for certification. Three more feathers in CACREP's cap were the notification of continued recognition by CHEA; the release of TRICARE's final rules on independent practice of counselors, retaining the CACREP-degree requirement; and two states, Ohio and Kentucky, adopting a CACREP-degree education requirement for licensure. All of these achievements are indicative of CACREP's strengthening stature in the counseling profession.

This level of productivity and prominence is possible because of the dedication and commitment of several groups of individuals. CACREP is able to sustain and successfully accomplish its quality assurance role and responsibility through the volunteerism of the many committed professionals who serve on site review teams and on the CACREP Board of Directors. I thank them for their diligence and fidelity to quality standards of preparation in the counseling profession. Under the direction and leadership of Dr. Carol Bobby, President and CEO of CACREP, the dedicated staff implement the will of the Board in advancing the vision and mission of CACREP.

With fortitude, CACREP continues to be a leader and partner in unifying the counseling profession and strengthening the reputation of the counseling profession through quality assurance in counselor preparation. It has been an honor and a privilege for me to serve CACREP and the counseling profession.

With warmest regards,

A handwritten signature in cursive script that reads "M. Sylvia Fernandez".

M. Sylvia Fernandez, Ph.D.
CACREP Chair



CACREP BOARD OF DIRECTORS

The Board of Directors is composed of a minimum of 13 and a maximum of 15 members. The Board includes at least eight counselor educators (CE), at least two counseling practitioners (CP), and at least two public members (PM) appointed from the public at large who are not current or former members of the counseling profession. All directors serve for one term of five years and are not eligible for reappointment. Terms begin July 1 and end June 30 each year.

BOARD ROSTER

Pictured above
left to right/top to bottom

M. Sylvia Fernandez (CE), Chair
 Thomas E. Davis (CE), Vice Chair
 Jeffrey Parsons (CE), Treasurer
 Kelly Coker (CE)
 Tiffany Hill-Smith (PM)
 Bethany S. Jones (PM)
 Kenyon Knapp* (CE)
 Dana Heller Levitt (CE)
 J. Barry Mascari (CE)
 Patrick Millmore (CP)
 Kok-Mun Ng (CE)

Vilia Tarvydas* (CE)
 Chanel Tazza (CP)
 Tyra Turner Whittaker* (CE)
 *Began serving on the CACREP Board in July 2014

The following CACREP Board members ended terms in June 2014:

Nancy Nishimura (CE)
 Rhonda Paul (CE)

CACREP STAFF

Carol L. Bobby
President and CEO

Jenny Gunderman
Managing Director

Robert I. Urofsky
Director of Accreditation

Tyler M. Kimbel
Director of Research and Information Services

Sarah M. Betz
*Assistant Director of Accreditation/
IRCEP Coordinator*

David Moran
Assistant Director of Accreditation

Yvette Peña
Executive Assistant

VISION MISSION VALUES

Vision

The vision of CACREP is to provide leadership and to promote excellence in professional preparation through the accreditation of counseling and related educational programs. As an accrediting body, CACREP is committed to the development of standards and procedures that reflect the needs of a dynamic, diverse, and complex society. CACREP is dedicated to:

- ✓ encouraging and promoting the continuing development and improvement of preparation programs, and
- ✓ preparing counseling and related professionals to provide services consistent with the ideal of optimal human development.

CACREP maintains collaborative relationships with other groups that focus on accreditation, licensing, certification, and the professional development of counselors and related practitioners.

Mission

The mission of CACREP is to promote the professional competence of counseling and related practitioners through:

- ✓ the development of preparation standards,
- ✓ the encouragement of excellence in program development, and
- ✓ the accreditation of professional preparation programs.

Core Values

The CACREP Board of Directors developed this Statement of Core Values to provide additional clarification and support for the existing Mission and Vision statements.

The CACREP Board of Directors believes in:

- ✓ advancing the counseling profession through quality and excellence in counselor education;
- ✓ ensuring a fair, consistent, and ethical decision-making process;
- ✓ serving as a responsible leader in protecting the public;
- ✓ promoting practices that reflect openness to growth, change, and collaboration; and
- ✓ creating and strengthening standards that reflect the needs of society, respect the diversity of instructional approaches and strategies, and encourage program improvement and best practices.

SCOPE OF ACCREDITATION

CACREP accredits master's and doctoral degree programs in counseling and its specialties that are offered by colleges and universities in the United States and throughout the world.

CACREP FACTS

CACREP accredited counseling programs at 298 institutions by the end of 2014. A majority of these institutions offer more than one counseling program area (e.g., clinical mental health counseling, and school counseling), bringing the total number of CACREP-accredited counseling programs to 660. There are approximately 1,000 graduate counseling programs offered by 531 institutions across the country, which means that, as of last year, CACREP accredited 66% of counseling programs in the United States, a 3% increase from 2013.

2014 VITAL STATISTICS SURVEY

The CACREP Vital Statistics Survey is an annual online survey completed by program liaisons at CACREP-accredited programs to collect information regarding trends in accredited counseling programs. The 2014 survey collected program data reflecting Summer 2013 through Spring 2014 from 284 institutions that included a total of 639 CACREP-accredited programs. Selected highlights from the 2014 survey results regarding programs, students, and faculty are provided in the following subsections.

Programs

Regarding counseling program areas in 2014, School Counseling was the program area with the highest number of CACREP-accredited programs (n=232). However, this is likely to change as Community Counseling and Mental Health Counseling programs continue to transition into Clinical Mental Health Counseling programs under the 2009 Standards, as demonstrated by the growth of Clinical Mental Health Counseling programs last year. Gerontological Counseling had the fewest programs, with only one accredited program due to the discontinuation of standards in this area.

In terms of graduates in the past year, School Counseling was the top program area with 3,435 graduates. However, when it comes to student enrollment, Clinical Mental Health Counseling programs claimed the largest number of currently enrolled students (n=11,390). Six program areas reported significantly lower student enrollments than the other program areas: Student Affairs (n=338), Student Affairs and College Counseling (n=194), Career Counseling (n=140), College Counseling (n=111), Addiction Counseling (n=27), and Gerontological Counseling (n=1).

Students and Faculty

Data from the 2014 Vital Statistics Survey concerning CACREP program applicants, current enrollment, and graduates in the past year appear in the tables on the next page, illustrating growth in all three areas. Additionally, demographic breakdowns of students and full-time faculty members in CACREP programs are provided.

Counseling Programs by the Numbers (2012–2014)

CACREP Program Area	Number of Programs			Enrollment			Graduates		
	2014	2013	2012	2014	2013	2012	2014	2013	2012
Addiction*	3	2	N/A	27	19	N/A	10	9	N/A
Career***	10	8	8	140	168	167	49	51	59
Clinical Mental Health*	121	74	34	11,390	8,109	5,003	2,915	2,066	1,022
College**	6	9	11	111	147	179	24	43	54
Community**	102	136	155	7,457	9,582	10,903	2,435	2,737	3,015
Counselor Ed. & Supervision***	63	62	60	2,291	2,122	2,028	355	326	323
Gerontological**	1	1	1	1	2	9	1	0	3
Marriage, Couple, & Family***	41	39	36	2,819	2,595	2,446	690	828	576
Mental Health**	35	43	54	5,144	6,014	6,742	1,254	1,167	1,201
School***	232	224	218	10,027	10,221	11,042	3,435	3,680	3,843
Student Affairs**	15	17	19	338	428	423	144	150	146
Student Affairs & College*	10	7	4	194	95	63	67	42	18

* Program area in the 2009 CACREP Standards.

** Program area in the 2001 CACREP Standards.

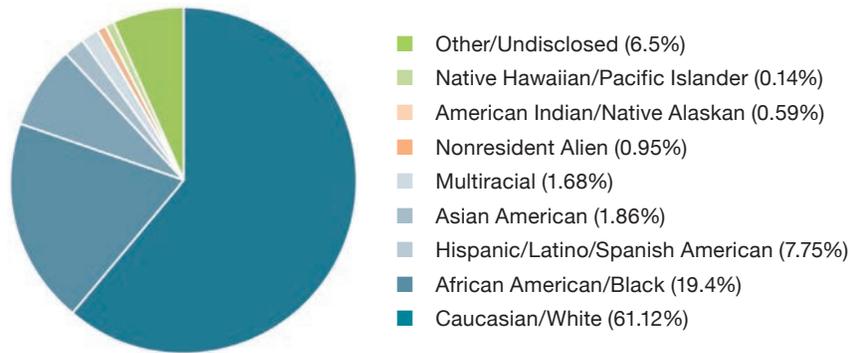
*** Program area in both the 2001 and 2009 CACREP Standards.

CACREP Vital Statistics: Student Highlights (2012–2014)

Program Type	Applicants			Enrollment			Graduates		
	2014	2013	2012	2014	2013	2012	2014	2013	2012
Masters Programs	36,959	34,480	34,885	37,648	37,380	36,977	11,024	10,773	9,937
Doctoral Programs	1,736	1,513	1,416	2,291	2,122	2,028	355	326	323
All CACREP Programs	38,695	35,993	36,301	39,939	39,502	39,005	11,379	11,099	10,260

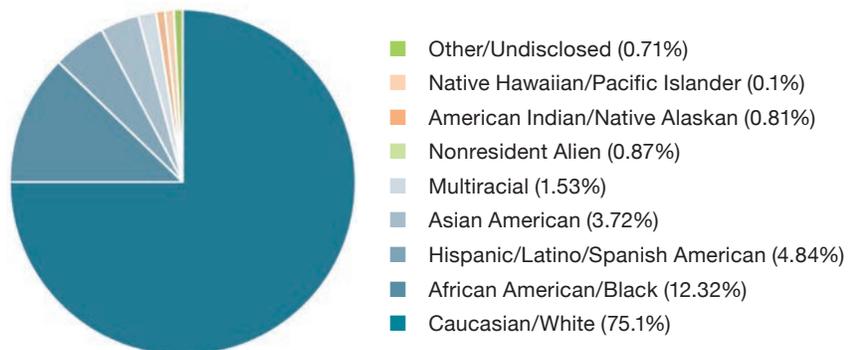
Regarding gender differences, 82.52% of students enrolled in CACREP-accredited programs are female and 17.46% are male. A small number of students (0.02%) are reported to hold an alternative gender identity. An analysis of the students' racial/ethnic background information reveals that a majority of students in CACREP programs are Caucasian/White (61.12%), with the second-largest group being African American/Black students (19.4%). Additionally, 4.17% of students enrolled in CACREP-accredited programs are reported to have a known disability.

CACREP Students: Racial/Ethnic Demographics



A reported 2,070 full-time faculty members worked in CACREP programs during 2014. Regarding gender, 60.43% of these CACREP faculty members are female, 39.47% are male, and 0.1% hold an alternative gender identity. While somewhat less diverse in racial/ethnic background, the full-time faculty are similar to students in that a majority of full-time faculty in CACREP programs are Caucasian/White (75.1%), with the second largest group being African American/Black (12.32%).

CACREP Faculty: Racial/Ethnic Demographics





ACCREDITATION UPDATES

Full Reviews

In 2014, the CACREP Board completed full reviews of counseling programs at 54 institutions of higher education, representing a combined total of 112 counseling programs. Institutions that were new applicants to CACREP comprised 19 (35.2%) of these reviews. The full reviews also included applications from four (7.4%) institutions housing one or more CACREP-accredited programs that sought to add additional counseling program areas to their current accreditation status. Of the full reviews, counseling programs at 23 (42.6%) institutions were granted accreditation for a full eight-year cycle (or through the remainder of the current accreditation cycle for institutions seeking to add additional program areas) and counseling programs at 30 (55.6%) institutions were granted accreditation for a two-year period, necessitating further reporting about specific standards prior to obtaining accreditation for the remainder of a full eight-year cycle. The Board tabled action on an application from a counseling program at one institution, requesting submission of additional information.

Interim Reviews

Interim Reports are submitted by institutions with CACREP-accredited programs to address any conditions attached to a two-year accreditation status. The CACREP Board reviewed 31 Interim Reports in 2014. Of the institutions that submitted an Interim Report on behalf of their counseling programs, 19 (61.3%) were granted accreditation for the remainder of their program's accreditation cycle and 11 (35.5%) received an additional two years of their program's accreditation cycle, requiring submission of a second Interim Report. One institution that submitted an Interim Report chose to withdraw its counseling program from accredited status prior to the Board rendering a decision.

CONGRATULATIONS to the following new applicant institutions receiving CACREP accreditation for counseling programs in 2014:

Albany State University

Boston University School of
Medicine

Cincinnati Christian University

East Carolina University

Franciscan University of
Steubenville

Hodges University

Lenoir-Rhyne University

Lincoln Christian University

Lipscomb University

Marquette University

Murray State University

New Jersey City University

New York Institute of Technology

Nicholls State University

Northwestern State University of
Louisiana

Texas A&M University Texarkana

University of Louisiana Lafayette

University of South Alabama

University of Texas Tyler

Mid-Cycle Reports

Each institution housing a CACREP-accredited counseling program submits a Mid-Cycle Report four years into its program's accreditation cycle, addressing program changes that have occurred since the original full review for the current accreditation cycle. The CACREP Board reviewed a total of 32 Mid-Cycle Reports in 2014. Of these Mid-Cycle Reports, 20 (62.5%) were accepted, 10 (31.3%) were tabled, requiring submission of further reporting, and two (6.3%) were accepted pending receipt of requested information. The Board also conducted 14 follow-up reviews of Mid-Cycle Reports on which action was tabled at the January 2013 board meeting. Regarding these Mid-Cycle Report follow-up reviews, 12 (85.7%) were accepted, one had the tabled action continued, and one was accepted pending receipt of requested information.

Conversions

Last year, the CACREP Board reviewed six applications from institutions housing Community Counseling programs accredited under the 2001 CACREP Standards, to convert the programs to Clinical Mental Health Counseling programs accredited under the 2009 CACREP Standards. The Board approved the conversion applications from five of the institutions in 2014; approval for the sixth occurred in 2015.

Also in 2014, CACREP received its first two applications from counseling programs applying for dual accreditation as Clinical Mental Health Counseling and Clinical Rehabilitation Counseling programs under the affiliation agreement between CACREP and CORE. The Board will review and render accreditation decisions for these programs in 2015.



New CACREP Recognitions

ACES Statement

The Executive Council of the Association for Counselor Education and Supervision (ACES) released an official position statement in February 2015 on the educational standards for counselors. In the statement, ACES recognized CACREP as the gold standard in counselor preparation and recommended the following degree requirement for LPC licensure:

Graduation from a clinically-focused counselor preparation program accredited by CACREP (or an approved affiliate of CACREP) that includes a minimum of 60 semester credits (or 90 quarter hour credits) of curricular experiences. Within those 60 semester credits (or 90 quarter hour credits), students must complete a practicum of at least 100 hours and an internship of at least 600 hours.

Final TRICARE Qualifications

TRICARE released the final rule establishing counselor independent practice authority in August 2014, maintaining the requirement for a master's degree from a CACREP-accredited Clinical Mental Health Counseling or Mental Health Counseling program. The final rule extended the transition period for non-CACREP graduates from December 31, 2014, to December 31, 2016. The new rule also authorized counselors without a degree from a CACREP-accredited program to continue practicing under physician referral and supervision indefinitely.

NBCC Announces CACREP Requirement

The National Board for Certified Counselors (NBCC) announced in 2014 that, beginning January 1, 2022, applicants for the National Certified Counselor (NCC) credential must be graduates of a CACREP-accredited program.

States Require CACREP

In 2014, both Ohio and Kentucky adopted legislation or new regulations that require graduation from a CACREP-accredited program for licensure in the state. Please refer to each state's licensure requirements for specific language and further details.

Revised and Newly Adopted Policies

New Policy: Submission Following Receipt of the Institutional Response

The Board may request additional information if it believes there is a good probability that clarifying information exists that could clear conditions and allow for the rendering of an eight-year accreditation decision. This option is utilized only when the Board believes an eight-year accreditation decision is possible. When requests for supplemental information to the Institutional Response are made

to an institution, the institution will be informed that the request does not guarantee an eight-year accreditation decision. The Board will not accept unsolicited material beyond the submission of the Institutional Response.

New Policy: Curriculum Content

In reviewing how programs document meeting CACREP curricular requirements, the Board will base decisions on the adequacy and appropriateness of the curricular content and practice elements against empirically supported theories and practices that are consistent with the counseling profession's current ethical guidelines and standards of practice.

New Policy: Dual Degree Programs

If a student wishes to graduate from two counseling specialty areas concurrently, he or she must meet the degree requirements for both CACREP-accredited specialties. This would include meeting the curricular requirements for each specialty, a minimum of a 600 clock hour internship for each specialty, and any differences in the core curriculum. The awarding of the degree(s) must occur simultaneously.

The Public Notice of Accreditation Status policy was revised:

Within 60 days of notification to institutions, information regarding accreditation decisions will be released to the public via the CACREP website. The publicly available information will include the following: 1) the accreditation status of the program, 2) the end date for the most recent accreditation decision made on the program, and 3) a summary of the reasons for which the Board made the decision.

When a program is denied accreditation, the program will be provided a time-limited opportunity to submit a rejoinder to the denial summary. If a rejoinder is provided, it will be posted on the CACREP website with the summary statement. No information will be posted on denied programs that have entered into an appeal process until a final decision results from completion of the appeal.

Information regarding programs' accreditation statuses and end dates will remain available throughout the programs' current accreditation cycles. Applications voluntarily withdrawn as well as summary statements on accreditation decisions and any rejoinders will remain posted on the CACREP website for a minimum period of six (6) months.

The Publication of Accredited Status and Confidentiality policy was revised:

The CACREP Board of Directors regards the texts of the initial self-study documents and addenda (if applicable) review letters, team reports, institutional responses to the team report, and accreditation



decision letters to institutions' presidents/CEOs as confidential material. Upon request to CACREP from an institution, however, this information may be made available to other recognized accrediting agencies that have accredited the institution or from whom the institution is seeking accreditation. Otherwise, these documents will be disclosed only if the Board is legally required to do so.

The CACREP office publishes its Directory of Accredited Programs on the CACREP website. In addition, as per CACREP policy, all accreditation decisions will be made publicly available on the CACREP website along with a summary of the reasons for the decisions. Programs that voluntarily withdraw their accreditation after having been accredited by CACREP or programs that are denied continued accreditation by the CACREP Board will be listed as well.

Institutional documents or media outlets should follow Accreditation Maintenance Policy #1 on page 70 of the 2009 CACREP Accreditation Manual when publicizing accredited status. The following information must be included:

1. CACREP's name and that CACREP is a specialized accretitor; and
2. the program specific decisions.

The following addition was made to the Notification to the Institution policy:

As per CACREP policy, within 60 days of notification to institutions, information regarding accreditation decisions will be released to the public via the CACREP website. The publicly available information will include the following: 1) the accreditation status of the program, 2) the end date for the most recent accreditation decision made on the program, and 3) a summary of the reasons for which the Board made the decision.

The following is an example of language for publicizing a CACREP accreditation decision:

The Council for Accreditation of Counseling and Related Educational Programs (CACREP), a specialized accrediting body recognized by the Council for Higher Education Accreditation (CHEA), has conferred accreditation to the following program areas in the Department of Counselor Education at _____ University: Clinical Mental Health Counseling (M.S. degree), School Counseling (M.Ed. degree), and Counselor Education and Supervision (Ph.D. degree).

Community Counseling programs accredited under the 2001 Standards will remain accredited as Community Counseling programs throughout their entire accreditation cycle. However, these programs are permitted to make changes during this cycle to begin their preparations for application under the 2009 Standards as Clinical Mental Health Counseling Programs. Therefore, when publicizing accredited status, these programs should clearly communicate their accredited status and the set of standards under which accreditation was conferred.

The following is an example of language for communicating these decisions:

The Clinical Mental Health Counseling program at _____ University is accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). The accreditation cycle runs through _____. Note: The Clinical Mental Health Counseling program is currently accredited under the 2001 Standards for Community Counseling Programs as a Community Counseling program. The 2009 Standards combine the Standards for Community Counseling Programs and Standards for Mental Health Counseling Programs into Standards for Clinical Mental Health Counseling Programs. The counseling program intends to seek accreditation for this program when it comes up for re-accreditation, per CACREP guidelines.

CHEA Committee on Recognition Accepts CACREP's Response

In 2014, CACREP implemented several new or revised policies developed to achieve continued recognition by the Council for Higher Education (CHEA). Some of the policies required programs to document for CACREP that they routinely provide reliable information to the public on their performance, including student achievement, and that this information is easily accessible on their institutions' websites (reference CHEA Criterion 12.B.1). Other policies revised how CACREP releases accreditation decision information to the public and increased the specificity of information made available with regard to each program's accredited status (reference CHEA Criterion 12.B.5). In other words, CACREP revised its policies to provide the public with the reasons why a program either received accreditation for a two-year or an eight-year period or was denied accreditation.

CACREP spent approximately 18 months reaching out to its programs and presenting plans for how the new policy requirements would be fulfilled prior to implementing the new policies. Throughout most of 2014, CACREP staff worked with programs on what information needed to be included on the institutions' websites with regard to program outcomes. In addition, CACREP updated its own website by populating each program's detail page with information on the current accreditation status, along with a listing of any standards that needed to be addressed by the program to move from a two-year accreditation status to the full eight-year cycle status.

Once the policies were implemented, CACREP developed a follow-up report detailing its actions that was submitted on October 31, 2014, for review by the CHEA Committee on Recognition. The Committee on Recognition held public recognition hearings the week of November 24, 2014, for accrediting organizations that submitted reports. On December 19, 2014, CACREP received a letter from CHEA indicating that the report had been accepted and that the Committee was recommending CHEA Board approval for CACREP's continued recognition. CHEA Board action was scheduled to take place in January 2015.

CACREP Grants Licensing Privileges to its corporate affiliate CORE

The affiliation agreement signed in 2013 between CACREP and the Council on Rehabilitation Education (CORE) required the development of an agreement whereby CACREP granted CORE a nonexclusive, royalty-free license to use the CACREP Clinical Rehabilitation Counseling Standards. This license was granted so that CORE and CACREP could implement a joint accreditation process for programs wishing to seek accreditation as a Clinical Rehabilitation Counseling program. The agreement was signed by the elected leaders and chief staff officers of both boards on March 26th, 2014. This signing was a significant event for the counseling profession in that it demonstrated CACREP's and CORE's intentions to solidify and implement their jointly held belief that the counseling profession deserves a unified accreditation process to assure quality pre-service preparation for all counselors.

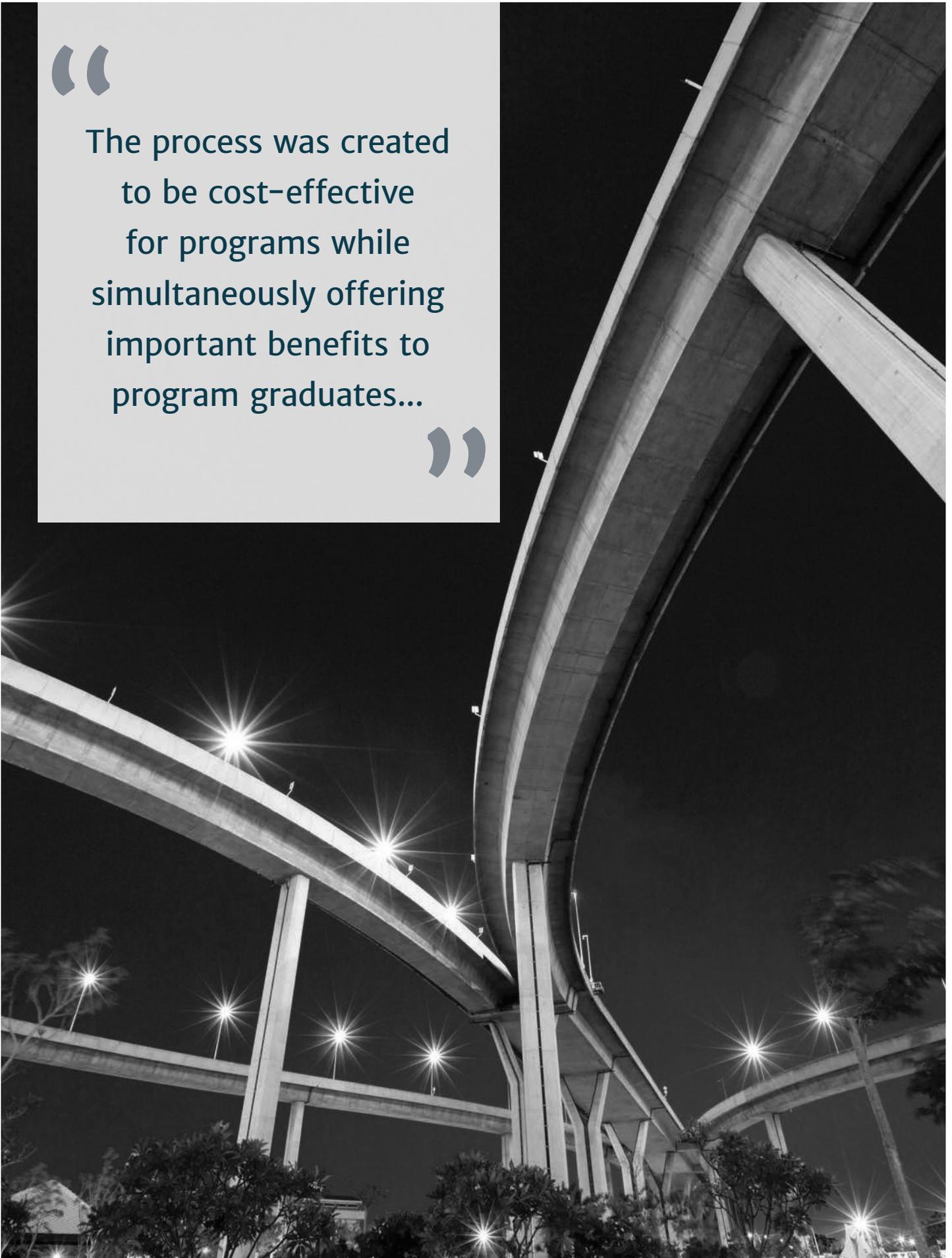
Once the licensing agreement was signed, the two organizations presented plans for Phase I of the unification process. Phase I focused solely on creating a pathway for programs that were already CORE-accredited and offered a minimum of 60 semester hours with clinical coursework to become dually accredited by both CORE and CACREP using the new Clinical Rehabilitation Counseling standards (CLRC) alongside CACREP's Clinical Mental Health Counseling standards. Phase I permitted eligible CORE programs to apply under the "Converting a CORE-accredited Rehabilitation Counseling program to a dually accredited Clinical Rehabilitation Counseling and Clinical Mental Health Counseling program" policy. Programs applying for accreditation under this policy submit modified self-studies addressing both Clinical Rehabilitation Counseling and Clinical Mental Health Counseling program standards, as well as other select CACREP required standards applicable to all program areas. These self-studies then undergo a joint review process conducted by both CACREP and its corporate affiliate CORE. The process was created to be cost-effective for programs while simultaneously offering important benefits to program graduates who may, upon graduation, seek employment in federal programs that only recognize graduates of CACREP programs for independent practice or for hiring purposes.

Two counseling programs successfully completed this conversion process by the end of 2014.

“

The process was created to be cost-effective for programs while simultaneously offering important benefits to program graduates...

”



CACREP ACTIVITIES

Training and Workshops

CACREP conducted four “How to Write a CACREP Self-Study” workshops in 2014 which were held in Virginia (2), Alabama, and Oregon. One hundred eighteen participants attended the self-study workshops, representing counseling programs at 77 institutions of higher education. Participants from 44 (57.1%) of these institutions were from counseling programs that were not accredited by CACREP; four (9.1%) of these institutions have subsequently submitted applications for accreditation of their counseling programs. Participants from the other 33 (42.9%) institutions were from CACREP-accredited programs nearing completion of their current accreditation cycle.

In addition to the self-study workshops, CACREP participated in two joint-training sessions with CORE in support of the recent affiliation agreement between the two organizations. The training sessions provided information to participants about the conversion process for Clinical Mental Health Counseling and Clinical Rehabilitation Counseling dual program accreditation and about developing self-study documents. One of the joint-training sessions was held at the National Council on Rehabilitation Education (NCRE) conference in Arlington, Virginia, and the other was a stand-alone workshop held in Chicago, Illinois.

At the American Counseling Association (ACA) 2014 Conference, CACREP conducted an update session for site team members and chairs as well as a “Table Talk” information session. In addition, CACREP jointly hosted a panel discussion with ACES addressing counselor education in faith-based institutions of higher education. CACREP appreciates Dr. Robin Lee’s (Middle Tennessee State University; ACES) participation as a co-facilitator and the participation of Dr. James Sells and Dr. William Hathaway (Regent University), Dr. Marsha Wiggins (ACES), and Dr. Tracey Robert (Fairfield University) as panelists during the session. CACREP representatives also attended each of the ACES regional conferences and presented a session entitled, “Achieving Parity and Portability: CACREP’s Role in Advancing the Profession.” CACREP “Table Talk” information sessions were held at four of these regional conferences.

In addition to attending conferences, CACREP staff are working to expand the use of online meeting software to disseminate information and connect with program representatives and volunteer reviewers. In 2014, online meeting software was used to present an update session for site team members and chairs, to conduct three training and update sessions with initial reviewers, and to facilitate interactions among staff, board members, and program representatives throughout the year.

On a final note, following the development of a new Site Team Chair Manual in 2013, work began in 2014 on revisions to the Site Team Member Manual. The manual will be finalized in 2015.



Research Grants

Drs. Julia Chibbaro, Michael Keim, Julia Whisenhunt, Susan Boes, and Caroline Perjessy, researchers from the University of West Georgia, were awarded a CACREP Research Grant in the amount of \$1,473.70 last year for their research proposal “Clinical Supervisors Assessment of Clinical Employability and its’ Relationship to CACREP Skills, Dispositions and Knowledge.”

CRIGS Program

The CACREP Research Initiative for Graduate Students (CRIGS) program offers current CACREP students the opportunity to become a CRIGS Research Fellow for a one-year term to engage in collaborative research that mirrors and supports CACREP’s vision, mission, and values. The 2014 CRIGS Research Fellows—the second cohort of researchers for the CRIGS program—were Ian Turnage-Butterbaugh (University of Mississippi) and Amy Williams (College of William & Mary). Both doctoral students, they brought continued energy and excitement to the CRIGS program and spent the year actively engaged with their study “Defining and Exploring Interdisciplinary Research within the Context of Counselor Education.” The 2014 Fellows plan to wrap up their data collection and analysis in early 2015 and will submit their work for review and publication in a peer-reviewed counseling journal.

Additionally, a search for 2015 Research Fellows occurred in Fall 2014. CACREP is pleased to announce the 2015 CRIGS Research Fellows will be Lynn Bohecker (doctoral student, Idaho State University) and Sunhee Jang (doctoral student, Penn State University).



CACREP Advocacy Week

CACREP Advocacy Week is a new initiative that was first launched in 2014 and took place during the last week of February. Advocacy Week was created as an organized effort to get CACREP program faculty members, students, and graduates involved in advocating for CACREP, their programs, and the counseling profession. The theme of CACREP Advocacy Week 2014 was “Your Voice Matters” and included a variety of advocacy activities for each day of the week that were aimed at addressing concerns related to licensure portability, professional identity, and other current issues within the counseling profession.

During Advocacy Week, letters were sent to ACA governing council and state licensure boards advocating for the adoption of graduation from a CACREP program as the educational standard for licensure to support licensure portability and professional unification. These letters are crucial in that they provide individual perspectives regarding the importance and the need for accreditation—perspectives that carry weight beyond the perspective offered by CACREP as an organization. Additionally, Advocacy Week 2014 resulted in a significant increase in CACREP’s presence and following on social media, including the development of a CACREP YouTube channel. CACREP greatly appreciates the continued support from and collaboration with other counseling organizations during last year’s Advocacy Week, such as ACES’ release of their position statement on educational standards for licensure, which recognized CACREP as the gold standard in counselor preparation, as well as Chi Sigma Iota’s assistance in planning activities and webinars in preparation for CACREP Advocacy Week 2015.

Overall, the first CACREP Advocacy Week was a success. Based on the 2014 Vital Statistics Survey results, 155 institutions housing CACREP-accredited counseling programs reported participating in Advocacy Week, representing a majority (55%) of the institutions with CACREP-accredited programs. Participating institutions indicated the days/advocacy activity types in which they engaged, with 81 institutions engaging in Program Advocacy, 61 institutions engaging in Social Network Advocacy, 55 institutions engaging in Political Advocacy, 45 institutions engaging in Professional Advocacy, 28 institutions engaging in Student Advocacy, and 23 institutions engaging in “other” advocacy activities.

Left to right:
CACREP Chair Dr. M. Sylvia
Fernandez, Dr. Martin Ritchie,
and CACREP President and CEO
Dr. Carol Bobby. NCACES 2014
Conference, St. Louis, MO.



NEW! Martin Ritchie Award for Excellence in Advocacy

Since 1981, the driving force behind CACREP has been professional volunteers. Counselor educators, practitioners, and other professional leaders have dedicated countless hours to strengthen the counseling profession by way of developing high standards, contributing to the quality assurance of counseling programs, and engaging in advocacy on behalf of the profession. Some of these leaders have gone, and continue to go, above and beyond what is commonplace for CACREP volunteers and advocates, acting as catalysts for change and assisting the counseling profession in achieving many milestones such as state licensure and federal recognition of counselors. The CACREP Award for Excellence in Advocacy was created in 2014 to formally honor these professional leaders and is named after its inaugural recipient, Dr. Martin Ritchie, who was presented with the award at the 2014 NCACES Conference in St. Louis, Missouri.

CACREP's Martin Ritchie Award for Excellence in Advocacy recognizes individuals who engage in superlative advocacy efforts on behalf of CACREP and its vision, mission, and values, which ultimately serve to advance the counseling profession through quality and excellence in counselor education. The award will be presented on an annual basis to a recipient chosen by the CACREP Board from a pool of nominations. Nominees may include, but are not limited to, counselor educators, students, practitioners, organization leaders, counseling licensure board members, state or federal government officials, and other relevant stakeholders that embody the spirit of the Martin Ritchie Award for Excellence in Advocacy.

2016 STANDARDS REVISION COMMITTEE

Amy Milsom, Chair
Clemson University

Sylvia Nassar-McMillan
North Carolina State University

Verl Pope
Northern Kentucky University

Derick Williams
University of Virginia

2016 Standards Revision

The 2016 CACREP Standards Revision Committee (SRC) spent 2014 in activities connected to their work on the final draft of the 2016 Standards. The motto “Clarify, Simplify, Unify” continued to guide the committee’s work. Final feedback on Draft 2 was gathered through a session at the AASCB Conference, a meeting with the CACREP Board, and an online feedback survey for the public commenting period that ended in January. The SRC held a three-day meeting in February to review the feedback and start writing the final draft of the 2016 Standards.

The SRC held one final feedback session at the ACA 2014 Conference in March and sought feedback from the CACREP Board for the final time in June. With that information, the SRC conducted their remaining work on the final draft through two in-person meetings (a total of 5 days) and conference calls. During those meetings, the SRC also made final revisions to the Glossary and prepared supporting materials (e.g., revisions to the application, Introduction to the 2016 Standards). The SRC submitted the final draft of the 2016 Standards to CACREP in December.

“ Clarify,
Simplify,
Unify ”





IRCEP: A Growing Subsidiary

It has been an exciting and busy year for the International Registry of Counsellor Education Programs (IRCEP). With the approval of Veer Bahadur Singh Purvanchal University in India, TCA College in Singapore, and the South African College of Applied Psychology in South Africa, IRCEP now has a presence in seven countries on four continents. In addition to the growth of the Registry, IRCEP has been increasing its efforts to engage counselors worldwide to promote excellence in education and training within the counseling profession. IRCEP hosted its first Ambassador Training at the 2014 SACES Conference in Birmingham, Alabama. The Ambassador Program is designed to offer opportunities for counselor educators to be involved in promoting the internationalization of the counseling profession. IRCEP also announced a new Fellowship Program that will be launched in Spring 2015. The program is designed to offer opportunities for current international doctoral students in CACREP programs to become an IRCEP Fellow for a one-year term. The fellowship will provide in-depth training and exposure to quality assurance in higher education specifically related to counselor education.

The IRCEP Steering Committee has been very active in promoting and advancing the role that quality assurance plays in the globalization of the counseling profession. During 2014, IRCEP published two newsletters and one *Counseling Today* article (authored by Dr. Sachin Jain and Dr. Rick Gressard), as well as presented at a number of conferences, including the International Association for Counseling (IAC) Conference in Victoria, British Columbia, Canada; ACA Conference in Honolulu, Hawaii; SACES Regional Conference in Birmingham, Alabama; Association of Psychological and Educational Counsellors of Asia-Pacific (APECA) Conference in Singapore; and the NCACES Regional Conference where IRCEP hosted its 3rd Annual Luncheon last fall. Additionally, representatives from the Steering Committee were invited to India where they met with the President of the National Assessment and Accreditation Council (NAAC). Drs. Gressard, Jain, and Bobby are scheduled to meet with NAAC in April 2015 to continue discussions about ways to promote and strengthen the counseling profession in India.

IRCEP STEERING COMMITTEE

Charles F. (Rick) Gressard, Chair
Region of the Americas

Sachin Jain
South-East Asia Region

Uchenna Nwachuku
African Region

Syntia Santos
Region of the Americas

FINANCIAL SUMMARY

CACREP’s fiscal year runs from July 1 to June 30 of each year. At the end of each fiscal year (FY), CACREP’s financial records undergo an independent audit to determine if appropriate accounting practices are being used and if financial disclosures are clear, neutral, and free of material misstatement. CACREP’s FY 2014 audit was clean, which is consistent with all previous audits. CACREP’s most recent audit was conducted by Halt, Buzas, & Powell, Ltd., a firm located in the Washington, D.C., metropolitan area.

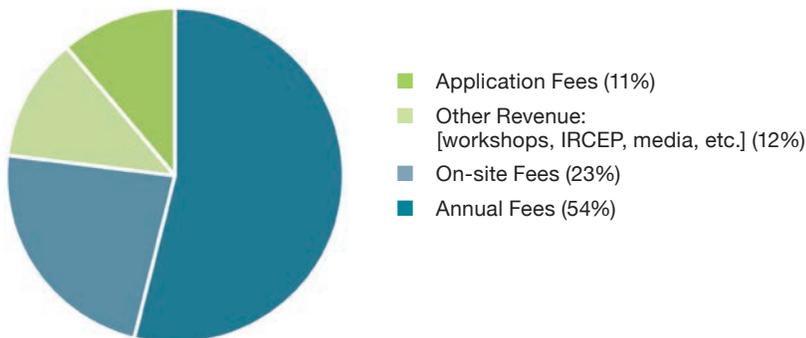
The audited financial statements for FY 2014, ending on June 30, 2014, represent significant organizational growth for CACREP. Revenue increased by 8.9% from the previous year. This is largely due to increasing numbers of applicant programs, with associated maintenance and on-site visit fees. In similar fashion, expenses increased by 7.2%. This is largely due to an increased number of on-site visits with a moderate increase in office expenses. As with the previous year, CACREP’s FY 2015 budget reflects a planned increase to net assets to ensure continued growth in staff and program offerings.

The pie charts developed for FY 2014 provide an overview of where CACREP derives its financial support and how money is expended.

Jeffrey Parsons

Jeff Parsons
CACREP Treasurer

CACREP REVENUE STREAMS FY 2014



CACREP EXPENSES FY 2014





CLOSING REMARKS FROM THE PRESIDENT/CEO



Think Fun! Think CACREP!

The CACREP offices are located in Alexandria, Virginia. It is a good place to work and live.

Alexandria is a relatively old city in the United States, dating back to the 1600s. Although a few hundred years of age is not really very old when compared to cities founded thousands of years ago—especially those referenced as “ancient” in travel guides—Alexandria is nevertheless considered historic in the US and it has a rich and colorful history. For example, there are many places in Alexandria where George Washington ate and slept. There is also a statue of Robert E. Lee on one of the main streets of town. His statue quite rightly faces his beloved South.

But a little known fact about Alexandria—something most modern day citizens don’t even know—is that this small city of only 15.03 square miles is also home to a very unique company known as Think Fun. Originally formed and incorporated in 1985 with the name Binary Arts, Think Fun is a company that develops games whereby people of all ages can have fun while exercising their minds. Many of the games (such as Rush Hour, Brick by Brick, and Swish) created by the company have won game of the year awards. Over the years, I have purchased many of their games for myself and to give as gifts. I guess that makes me an old-fashioned gamer. I can’t help it...I find problem-solving to be very addicting and solution-finding to be very satisfying.

I like to think that I approach my work with CACREP in the same fashion. I like to think that no matter what issue may arise, there are pathways that will lead to a solution if I keep my eyes on the big picture and consider possible solutions in an appropriate and fairly logical way. In some ways, serving as CACREP’s CEO for the last 27 years has been like working on an incredibly complex Think Fun puzzle. I have had to keep my eye on CACREP’s mission through every complex turn of events or new set of obstacles. Sometimes I have had to move slowly; other times, more quickly. I have had to retrace my steps when I made mistakes, while simultaneously trying to think logically two to three steps ahead. I have had to “think fun.” Each year has brought new puzzles; this is why CACREP offers an email choice through its website called “Stump the Staff.”

What “think fun” games have been played at CACREP in 2014? Where have we been stumped, but moved forward with new ideas? Let me highlight areas where we, CACREP, get to think fun!

- ✓ CACREP and its corporate affiliate CORE moved two applications through the conversion process. These programs represented the first fruits of Phase I of the affiliation agreement and became the first programs to hold dual accreditation under CACREP's Clinical Mental Health and Clinical Rehabilitation Counseling standards. Getting to this point required the negotiation of a licensing agreement, the creation of a joint process for review, and the development of a joint process for how decisions are released.
- ✓ IRCEP experienced its first real surge of international applications in 2014. This uptick in applications has created a need for more training opportunities and will require the development of new workshops. More applications also means that more staff time will be required to manage the review process. Because CACREP has such a small staff and because only a small percentage of current staff time is allotted to IRCEP, the IRCEP Steering Committee has created a volunteer pool of IRCEP Ambassadors to help spread the word about IRCEP and offer training.
- ✓ CHEA required a follow-up report from CACREP addressing its plans to more fully implement criteria related to how accredited programs post student outcome data on their websites and how CACREP informs the public of the basis for its accreditation decisions. To address these criteria, CACREP completed an audit of all of its policies related to the confidentiality of documents included as part of the self-study application and review process. Revisions were then proposed and our programs were notified of the proposed changes.
- ✓ Standards Revisions is a process conducted every seven years. In 2014, the revision process, which will culminate in the publication of the 2016 CACREP Standards, was completed. Word-smithing is a tedious but important part of the process, since the meaning of any particular standard can hinge on one word or one comma. Questions that the Standards Revision Committee, the CACREP Board, and the staff asked themselves this past year include the following: (a) Should the cycle of standards revision be altered from seven to possibly 10 years?; (b) Should the comment period for each draft of the proposed standards be shortened?; (c) What research should be conducted before the next standards revision process begins?; and (d) How will the adopted revisions affect our training workshops for programs and team members?
- ✓ School Counseling has been in the spotlight in 2014! From the First Lady's appearance at the 2014 ASCA Annual Conference to the two White House Convenings that focused on the career and college readiness needs of all students, School Counselors have been identified as key stakeholders who can play a pivotal role in increasing the numbers of students seeking postsecondary education. This is a part of a national agenda and, as such, CACREP's Standards for School Counseling programs have



“ take a
ThinkFun
approach ”

also been looked at carefully by some federal policy makers. CACREP’s participation in the White House meetings has solidified our belief in the power and importance of our standards revision process, which has been able to incorporate the call for a greater focus on training in these areas. In the next year, we need to find out what our programs are doing already to train students in these areas and what changes they will need to make in order to meet the 2016 Standards.

- ✓ The 2014 Growth Rate for CACREP has many meanings. As this Annual Report points out, CACREP has increased the number of programs it accredits. This has simultaneously led to an increase in our revenue, which has then led to a greater need for more staff and longer board meetings, also leading to greater expenses. Growth in programs also means, however, greater numbers of graduates from CACREP programs each year and more individuals willing to advocate for recognition of their CACREP degrees. Some of this recognition is already occurring. Two states have included graduation from a CACREP program in new licensure regulations. ACES developed a position statement advocating that other licensing boards develop rules requiring graduation from one of CACREP’s clinical program areas. NBCC announced its decision to transition to a new requirement of a CACREP degree for NCC applicants beginning in 2022. CACREP is grateful for this recognition, but recognizes that with it come new responsibilities for greater accountability to the public we serve. We also recognize that these changes move CACREP accreditation from a voluntary activity focused on development and improvement of programs to a more regulatory role. CACREP will work toward the best balance possible for the good of our programs, students, graduates, and the public. Discussions are to be continued.

In closing, 2014 was an exciting year full of new opportunities and new challenges. As CACREP continues to wend its way through the myriad of issues, we promise to keep our eyes on the big picture, to be solution-focused when dealing with problems, and to, above all, keep fairness a priority. In other words, we will take a Think Fun approach—we will assess the situation, consider logical solutions, and then interact with our constituents and backtrack if necessary until we find the right way through the CACREP Rush Hour traffic jam.



Carol L. Bobby
CACREP President and CEO

A HEARTFELT THANK YOU TO OUR 2014 SITE VISIT TEAM CHAIRS AND TEAM MEMBERS

Team Chairs who served on site visits in 2014

Don Basse	Donna Henderson	Summer Reiner
Rhonda Bryant	Richard Henriksen	Martin Ritchie
Karla Carmichael	J. Scott Hinkle	Leila Roach
Craig Cashwell	Glenda Isenhour	Carolyn Rollins
Yvonne Castillo	Marty Jencius	Tina Sacin
Kan Chandras	Thomas Keller	Carl Sheperis
Elysia Clemens	David Kleist	Jacqueline Smith
Debra Cobia	Kenyon Knapp	Sue Stickel
Kelly Coker	Nadene L'Amoreaux	LoriAnn Stretch
Shannon Dermer	William Lawrence	Jerry Trusty
Kim Desmond	Don Locke	Susan Varhely
Judith Durham	Joe Maola	Janice Ward
Steve Feit	Nancy Nishimura	Geoffrey Yager
Brenda Freeman	Nick Piazza	
Richard Hazler	Verl Pope	

Team Members who served on site visits in 2014

Ellie Addleman	Juliane Field	Kenneth Oliver
Mary Adekson	Linda Foster	Marvarene Oliver
Shamshad Ahmed	Nancy Fox	Sejal Parikh
Quentin Alexander	Melissa Freeburg	Quinn Pearson
Heather Ambrose	Todd Frye	Rebecca Pender
Mary Jane Anderson- Wiley	Troyann Gentile	John Porter
George Beals	Kristi Gibbs	Patrick Powell
Nancy Bodenhorn	Mark Gillen	Ron Priest
Jennifer Boswell	Tim Grothaus	Stephanie Puleo
Loretta Bradley	Lynn Hall	Don Redmond
J. David Bragg	Stephanie Hall	Brock Reiman
S. Kent Butler	Philicia Jefferson	Jane Rheineck
Julia Chibbaro	SaDohl Jones	Solange Ribeiro
Teresa Christensen	Shannon Karl	Carolyn Rollins
Angela Coker	Rebecca Koltz	Christina Sacco-Bene
Anita Neuer Colburn	Leslie Kooyman	Susan Seem
Katrina Cook	Katie Kostohryz	Donna Sheperis
Tom Coppock	Victoria Kress	Michelle Shuler
Jane Cox	Justin Lauka	LeAnn Solmonson
Charles Crews	Susan Maniss	Shawn Spurgeon
Daniel Cruikshanks	Aretha Marbley	Sam Steen
Tom Davis	Mary Mayorga	Elizabeth Suarez
Camille DeBell	Ann McCaughan	Heather Trepal
Kristin Douglas	Michelle Mitcham	Mary Drake Wallace
Neil Duchac	Christine Moll	Cynthia Walley
David Farrugia	Teah Moore	Paul West
	Mark Munyon	Brandon Wilde



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