

## Standards for Rehabilitation Counselor Education Programs

CORE is committed to adopting professional standards and an accreditation process that are developed through a valid and reliable examination of several data sources. The procedure for revision of CORE standards is outlined in the policy section of the CORE Accreditation Manual. To develop new and modify existing standards, CORE believes strongly in having empirical data as well as other objective information to justify professional standards.

Due to the diversity of employment settings graduates select, the requirements that are established in the standards of professional accrediting organizations are sometimes challenging to write. The standards that CORE has adopted are minimal standards that CORE believes all accredited rehabilitation counseling programs must address for the professional preparation of graduates and the evaluation and administration of its programs.

**PROGRAM FACULTY AND STUDENTS ENROLLED IN ACCREDITED REHABILITATION COUNSELING PROGRAMS SHOULD REMEMBER THAT THE REQUIREMENTS FOR MANY COUNSELING POSITIONS AND ELIGIBILITY FOR SOME COUNSELING CREDENTIALS MAY BE MORE SPECIFIC THAN THOSE STATED IN CORE STANDARDS. ALL STUDENTS SHOULD BE AWARE OF INDIVIDUAL STATE REQUIREMENTS FOR POSITIONS THAT MAY SPECIFY LICENSURE OR EDUCATIONAL REQUIREMENTS DIFFERENT FROM CORE.**

An extensive body of empirically based knowledge domains have been identified through various research methods resulting in specific outcomes and expectations important to the academic preparation of rehabilitation counselors and the practice of rehabilitation counseling. These domains and outcomes serve as critical components of the standards that are established for the granting of CORE accreditation.

Recognition of program accreditation is dependent upon the applicant being in compliance with all applicable accreditation standards. Standards frequently include phrases like “shall be” or “shall focus” or “shall access”, etc. This means that all examples or lists which follow these phrases must be appropriately addressed before meeting a standard can be confirmed. Failure to comply with any applicable standard may result in the denial of accreditation or probation. Accreditation may also be granted with conditions.

Failure to satisfy a condition of accreditation within the prescribed period of time may result in probation for a program or withdrawal of accreditation. In addition, accreditation decisions shall reflect recommendations to facilitate program improvement to obtain or maintain program accreditation.

Since the CORE accreditation process emphasizes outcome oriented data, the response rates from survey respondent groups are very important in assessing the compliance with standards and the appropriateness of curricular experiences. It is expected that each group’s response return rate be at least 50% for graduates and employers and be at least 90% for current second year students. There must be at least ten total graduates of the program by April 1 of the year in which a program applies for full accreditation or before the site visit of the program. If expected

response rates are not attained, programs will be notified they are not in compliance with the requirement and programs will be given a condition in the final accreditation report. Programs will be expected to provide evidence they have obtained an acceptable response rate by the time specified in the condition in the final accreditation report.

Standards include the characteristics and outcomes that, by general consent, state a level of expectation against which programs can be compared. Standards shall not limit program creativity or prevent variability. Programs may adopt innovative procedures or experiences that address standards in a different manner. If a creative approach is utilized, an explanation and rationale of how the standards are met must be included so CORE may accept or reject the appropriateness of such an approach and determine the degree of compliance with the standards.

Only the specific program accredited by CORE may be recognized as CORE-accredited in any publication or website. CORE does not accredit the method of delivery of the curriculum. Other programs similar in name or content, but not reviewed by CORE, must be publicized and/or listed in a manner that does not suggest CORE accreditation. Statements suggesting future intent of a program to apply for CORE accreditation are not allowed.

## **SECTION A: Mission and Objectives**

- A.1 There shall be written statements of the program's mission and objectives contained in institutional documents such as brochures, university and program websites, catalogues, intern manuals, graduate handbooks.
- A.2 The rehabilitation counselor education program shall address professional issues, community needs, and needs of people with disabilities consistent with the program's stated mission and objectives.
- A.3 The program's mission and objectives shall be available to program applicants, current students, and supervisors of clinical experiences, and made available to direct service personnel in public, educational, and non-governmental organizations, faculty members in related areas, and institutional administration.
- A. 4 The program faculty engages in actions that indicate respect for and understanding of cultural and individual diversity. Cultural and individual diversity refers to diversity with regard to personal and demographic characteristics and include, but are not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and social economic status. Respect for and understanding of cultural and individual diversity is reflected in the program's policies for the recruitment, retention, and development of faculty and students, and in its curriculum and field placements. The program has nondiscriminatory policies and operating conditions, and it avoids any actions that would restrict program access or completion on grounds that are irrelevant to success in graduate training or the profession.

## **SECTION B: Program Evaluation**

- B.1 There shall be a written program evaluation plan that assesses and reviews the major elements and overall effectiveness of the RCE program consistent with its stated mission and objectives. Program review timelines shall be consistent with university program evaluation timelines. If there are no University program evaluation timelines then the program evaluation will occur every four years.
  - B.1.1 self-evaluation (including evaluation of the effectiveness of the technology used if applicable); and
  - B.1.2 external review (e.g., advisory committee, employers, program graduates).
- B.2 The program evaluation shall include the results of the most recent assessment which evaluate the RCE program's:
  - B.2.1 mission and objectives;
  - B.2.2 content and design of the curriculum;
  - B.2.3 practicum and internship requirements and supervision;
  - B.2.4 graduate employment and professional credentialing;
  - B.2.5 efforts to recruit and retain students with an emphasis on diversity;
  - B.2.6 resources to carry out program mission such as ongoing technical support, financial and other resources) and
  - B.2.7 faculty strengths and experience.
- B.3 Results of this program evaluation shall be communicated to institution administrators and CORE as part of the Self Study Document.

**SECTION C: General Curriculum Requirements, Knowledge Domains, and Student Learning Outcomes**

- A. Graduates awarded master's degrees shall have participated in graduate study having earned a minimum of 48 semester hours or 72 quarter hours. If the required curriculum for a Rehabilitation Counseling Evaluation Program does not include all the coursework required for counseling licensure in that state, that program shall either offer the additional coursework needed for licensure, or must identify reasonable options outside the program for students to take such courses.
- B. If waiver provisions are used to meet the individual student requirements for graduation, the procedure and rationale for waiver shall be clearly documented and justified based on meeting the Section C Knowledge areas of the CORE standards. In no case may waiver provisions result in a program with less than 36 graduate semester or 54 quarter hours, or be used for Section D.2 of these Standards.
- C. Course or unit syllabi must be made available to students at the beginning of each new semester or quarter and include, at a minimum:
- course/unit objectives;
  - content areas;
  - texts or required readings;
  - how a course will be provided/delivered;
  - if an on-line/distance education course, any additional expectations or expenses;
  - student evaluation criteria; and
  - information on the reasonable accommodation process at the institution.
- D. The program shall provide evidence of opportunities throughout the course of study for interactive and collaborative experiences with individuals with disabilities in a variety of roles and settings.
- E. The program shall demonstrate that it informs program applicants, students, and faculty, about the availability of information on disability services and the reasonable accommodation process at the institution.
- F. Students participating in on-line/distance learning rehabilitation counseling programs shall meet the same admission and curriculum requirements, retention criteria, and graduation requirements as on-campus students.

## CORE CURRICULUM AREAS

The required curriculum of graduate study shall provide for obtaining essential knowledge, skills, and attitudes necessary to function effectively as a professional rehabilitation counselor. Curriculum knowledge domains and outcome expectations are frequently interrelated and not mutually exclusive. In particular, three elements integral to curricula in rehabilitation counselor education are **ethical behavior, diversity or individual differences, and critical thinking**. These three elements should be infused through all courses of the curriculum and rehabilitation counseling programs should be able to provide evidence these components are addressed appropriately.

Study units or courses shall include, but are not limited to, the following ten curriculum areas which shall include relevant knowledge domains and related student learning outcomes:

### C.1 PROFESSIONAL IDENTITY AND ETHICAL BEHAVIOR

Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: As demonstrated by the ability to:

#### **Knowledge domains:**

##### **C.1.1 Rehabilitation counseling scope of practice**

- C.1.1.a. explain professional roles, purposes, and relationships of other human service and counseling/psychological providers.
- C.1.1.b. articulate the principles of independence, inclusion, choice and self-determination, empowerment, access, and respect for individual differences.

##### **C.1.2 History, systems, and philosophy of rehabilitation**

- C.1.2.a. integrate into one's practice, the history and philosophy of rehabilitation as well as the laws affecting individuals with disabilities.
- C.1.2.b. describe, in general, the organizational structure of the rehabilitation, education, and healthcare systems, including public, private-for-profit, and not-for-profit service settings.
- C.1.2.c. explain the role and values of independent living philosophy for individuals with a disability.

##### **C.1.3 Legislation related to people with disabilities**

- C.1.3.a. apply the principles of disability-related legislation including the rights of people with disabilities to the practice of rehabilitation counseling.

##### **C.1.4 Ethics**

- C.1.4 a. practice rehabilitation counseling in a legal and ethical manner, adhering to the Code of Professional Ethics and Scope of Practice for the profession.

##### **C.1.5 Professional credentialing, certification, licensure and accreditation**

- C.1.5.a. explain differences between certification, licensure, and accreditation.

### **C.1.6 Informed consumer choice and consumer empowerment**

- C.1.6.a. integrate into practice an awareness of societal issues, trends, public policies, and developments as they relate to rehabilitation.
- C.1.6.b. articulate the value of consumer empowerment, choice, and personal responsibility in the rehabilitation process.

### **C.1.7 Public policies, attitudinal barriers, and accessibility**

- C.1.7.a. assist employers to identify, modify, or eliminate, architectural, procedural, and/or attitudinal barriers.

### **C.1.8 Advocacy**

- C.1.8.a. educate the public and individuals with a disability regarding the role of advocacy and rights of people with disabilities under federal and state law.

## **C.2 PSYCHOSOCIAL ASPECTS OF DISABILITY AND CULTURAL DIVERSITY**

Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: As demonstrated by the ability to:

### **Knowledge domains:**

#### **C.2.1 Sociological dynamics related to self-advocacy, environmental influences, and attitude formation**

- C.2.1.a. identify and articulate an understanding of the social, economic, and environmental forces that may present barriers to a consumer's rehabilitation.
- C.2.1.b. identify strategies to reduce attitudinal barriers affecting people with disabilities.

#### **C.2.2 Psychological dynamics related to self-identity, growth, and adjustment**

- C.2.2.a. identify strategies for self-awareness and self-development that will promote coping and adjustment to disability.
- C.2.2.b. identify and demonstrate an understanding of stereotypic views toward individuals with a disability and the negative effects of these views on successful completion of the rehabilitation outcomes.
- C.2.2.c. explain adjustment stages and developmental issues that influence adjustment to disability.

#### **C.2.3 Implications of cultural and individual diversity including cultural, disability, gender, sexual orientation, and aging issues**

- C.2.3.a. provide rehabilitation counseling services in a manner that reflects an understanding of psychosocial influences, cultural beliefs and values, and diversity issues that may affect the rehabilitation process.
- C.2.3.b. identify the influences of cultural, gender, sexual orientation, aging, and disability differences and integrate this knowledge into practice.
- C.2.3.c. articulate an understanding of the role of ethnic/racial and other diversity characteristics such as spirituality and religion, and socio-economic

status in groups, family, and society.

### **C.3 HUMAN GROWTH AND DEVELOPMENT**

Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: As demonstrated by the ability to:

#### **Knowledge domains:**

#### **C.3.1 Human growth and development across the life span**

- C.3.1.a. articulate a working knowledge of human development and the needs of individuals with disabilities across the life span.
- C.3.1.b. describe and implement approaches that enhance personal development, decision-making abilities, personal responsibility, and quality of life of individuals with a disability.

#### **C.3.2 Individual and family response to disability**

- C.3.2.a. assist the development of transition strategies to successfully complete the rehabilitation process.
- C.3.2.b. recognize the influence of family as individuals with disabilities grow and learn.
- C.3.2.c. demonstrate counselor sensitivity to stressors and the role of positive attitudes in responding to coping barriers and challenges.

#### **C.3.3 Theories of personality development**

- C.3.3.a. describe and explain established theories of personality development.
- C.3.3.b. identify developmental concepts and processes related to personality development and apply them to rehabilitation counseling practice.

#### **C.3.4 Human sexuality and disability**

- C.3.4.a. identify impact that different disabilities can have on human sexuality.
- C.3.4.b. discuss sexuality issues with individuals with a disability as part of the rehabilitation process.

#### **C.3.5 Learning styles and strategies**

- C.3.5.a. develop rehabilitation plans that address individual learning styles and strengths of individuals with a disability.

### **C.4 EMPLOYMENT AND CAREER DEVELOPMENT**

Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: As demonstrated by the ability to:

#### **Knowledge domains:**

#### **C. 4.1 Disability benefits systems including workers' compensation, long-term disability, and social security.**

- C.4.1.a. Demonstrate understanding of various public and private disability benefits systems and the influence on rehabilitation, independent living, and employment.
- C.4.1.b. explain the requirements of benefits available to people with disabilities through systems such as workers' compensation., long-term disability insurance, and social security.

**C. 4.2 Job analysis, transferable skills analysis, work site modification and restructuring**

- C.4.2.a. Utilize job and task analyses methodology to determine essential functions of jobs for employment planning and placement, worksite modifications or job restructuring.
- C.4.2.b. apply the techniques of job modification/restructuring and the use of assistive devices to facilitate placement of people with disabilities.
- C.4.2.c. apply transferable skills analysis methodology to identify alternative vocational and occupational options given the work history and residual functional capacities of individuals with a disability.

**C. 4.3 Career counseling, career exploration, and vocational planning**

- C.4.3.a. provide career counseling utilizing appropriate approaches and techniques.
- C.4.3.b. utilize career/occupational materials to assist the individual with a disability in vocational planning.
- C.4.3.c. facilitate involvement in vocational planning and career exploration.

**C. 4.4 Job readiness development**

- C.4.4.a. assess individuals with a disability' readiness for gainful employment and assist individuals with a disability in increasing this readiness.

**C. 4.5 Employer consultation and disability prevention**

- C.4.5.a. provide prospective employers with appropriate consultation information to facilitate prevention of disability in the workplace and minimize risk factors for employees and employers.
- C.4.5.b. consult with employers regarding accessibility and issues related to ADA compliance.

**C 4. 6 Workplace culture and environment**

- C.4.6.a. describe employer practices that affect the employment or return to work of individuals with disabilities and utilize that understanding to facilitate successful employment.

**C. 4. 7 Work conditioning/work hardening**

- C.4.7.a. identify work conditioning or work hardening strategies and resources as part of the rehabilitation process.

**C. 4. 8 Vocational consultation and job placement strategies**

- C.4.8.a. conduct and utilize labor market analyses and apply labor market information to

the needs of individuals with a disability.

C.4.8.b. identify transferable skills by analyzing the consumer's work history and functional assets and limitations and utilize these skills to achieve successful job placement.

C.4.8.c. utilize appropriate job placement strategies (client-centered, place then train, etc.) to facilitate employment of people with disabilities.

#### **C. 4.9 Career development theories**

C.4.9.a. apply career development theories as they relate to individuals with a disability with disabilities.

#### **C 4.10 Supported employment, job coaching, and natural supports**

C.4.10.a. effectively use employment supports to enhance successful employment.

C.4.10.b. assist individuals with a disability with developing skills and strategies on the job.

#### **C. 4. 11 Assistive technology**

C.4.11.a. identify and describe assistive technology resources available to individuals with a disability for independent living and employment.

### **C.5 COUNSELING APPROACHES AND PRINCIPLES**

Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: As demonstrated by the ability to:

#### **Knowledge domains:**

##### **C.5.1 Individual counseling and personality theory**

C.5.1.a. communicate a basic understanding of established counseling theories and their relationship to personality theory.

C.5.1.b. articulate a personal philosophy of rehabilitation counseling based on an established counseling theory.

##### **C.5.2 Mental health counseling**

C.5.2.a. recognize individuals with a disability who demonstrate psychological or mental health

related problems and make appropriate referrals when appropriate.

C.5.2.b. analyze diagnostic and assessment information (e.g., vocational and educational tests, records and psychological and medical data) and communicate this information to the consumer.

C.5.2.c. explain and utilize standard diagnostic classification systems for mental health conditions within the limits of the role and responsibilities of the rehabilitation counselor.

##### **C.5.3 Counseling skills and techniques development**

C.5.3.a. develop and maintain confidential counseling relationships with individuals with a disability using established skills and techniques.

C.5.3.b. establish, in collaboration with the consumer, individual counseling goals and

objectives.

C.5.3.c. apply basic counseling and interviewing skills.

C.5.3.d. employ consultation skills with and on behalf of the consumer.

#### **C.5.4 Gender issues in counseling**

C.5.4.a. counsel individuals with a disability who face lifestyle choices that may involve gender or multicultural issues.

C.5.4.b. identify gender differences that can affect the rehabilitation counseling and planning processes.

#### **C.5.5 Conflict resolution and negotiation strategies**

C.5.5.a. assist individuals with a disability in developing skills needed to effectively respond to conflict and negotiation in support of their interests.

#### **C.5.6 Individual, group, and family crisis response**

C.5.6.a. recognize and communicate a basic understanding of how to assess individuals, groups, and families who exhibit suicide ideation, psychological and emotional crisis.

#### **C.5.7. Termination of counseling relationships**

C.5.7.a. facilitate counseling relationships with individuals with a disability in a manner that is constructive to their independence.

C.5.7.b. develop a plan of action in collaboration with the consumer for strategies and actions anticipating the termination of the counseling process.

#### **C.5.8 Individual empowerment and rights**

C.5.8.a. promote ethical decision-making and personal responsibility that is consistent with an individual's culture, values and beliefs.

#### **C.5.9 Boundaries of confidentiality**

C.5.9.a. explain the legal limits of confidentiality for rehabilitation counselors for the state in which they practice counseling.

C.5.9.b. identify established rehabilitation counseling ethical standards for confidentiality and apply them to actual case situations.

#### **C.5.10 Ethics in the counseling relationship**

C.5.10.a. explain the practical implications of the CRCC Code of ethics as part of the rehabilitation counseling process.

C.5.10.b. confirm competency in applying an established ethical decision-making process to rehabilitation counseling case situations.

#### **C.5.11 Counselor Supervision**

C.5.11.a. explain the purpose, roles, and need for counselor supervision in order to enhance the professional development, clinical accountability and gate-keeping functions for the welfare of individuals with a disability.

## C.6 GROUP WORK AND FAMILY DYNAMICS

Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: As demonstrated by the ability to:

### Knowledge domains:

#### C.6.1 Group Dynamics and Counseling Theory

- C.6.1.a. apply theories and principles of group counseling when working with persons with disabilities.

#### C.6.3. Group leadership styles and techniques

- C.6.3.a. demonstrate effective group leadership skills.

#### C.6.4. Family dynamics and counseling theory

- C.6.4.a. apply an understanding of family systems and the impact of the family on the rehabilitation process.

#### C.6.5. Family support interventions

- C.6.5.a. use counseling techniques to support the individual's family/significant others, including advocates.
- C.6.5.b. facilitate the group process with individual's family/significant others, including advocates to support the rehabilitation goals.

#### C.6.6. Ethical and legal issues impacting individuals and families

- C.6.6.a. apply ethical and legal issues to the group counseling process and work with families.
- C.6.6.b. know the ethical implications of work in group settings with racial/ethnic, cultural, and other diversity characteristics/issues when working with people with disabilities.

## C.7 ASSESSMENT

Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: As demonstrated by the ability to:

### Knowledge domains:

#### C. 7. 1 Role of assessment

- C.7.1.a. explain purpose of assessment in rehabilitation process.
- C.7.1.b. use assessment information to determine eligibility and to develop plans for Services.

#### C. 7.2 Assessment resources and methods

- C.7.2.a. identify assessment resources and methods appropriate to meet the needs of individuals with a disability.
- C.7.2.b. describe resources to assist rehabilitation counselors in identifying appropriate

test instruments and other assessment methods.

C.7.2.c. describe computer-based assessments for rehabilitation and employment planning.

### **C 7.3 Individual involvement in assessment planning**

C.7.3.a. facilitate individual involvement in evaluating the feasibility of rehabilitation or independent living objectives and planning.

C.7.3.b. utilize assessment as an ongoing process in establishing individual rapport, rehabilitation service planning, objectives and goals.

C.7.3.c. evaluate the individual's capabilities to engage in informed choice and to make decisions.

### **C .7.4 Measurement and statistical concepts**

C.7.4.a. describe basic measurement concepts and associated statistical terms.

C.7.4.b. comprehend the validity, reliability, and appropriateness of assessment instruments.

### **C. 7.5 Selecting and administering the appropriate assessment methods**

C.7.5.a. explain differences in assessment methods and testing instruments (i.e. aptitude, intelligence, interest, achievement, vocational evaluation, situational assessment).

C.7.5.b. apply assessment methods to evaluate a consumer's vocational, independent living and transferable skills.

### **C. 7. 6 Ethical, legal, and cultural implications in assessment**

C.7.6.a. know the legal, ethical, and cultural implications of assessment for rehabilitation services.

C.7.6.b .consider cultural influences when planning assessment.

C.7.6.c. analyze implications of testing norms related to the culture of an individual.

## **C.8 RESEARCH AND PROGRAM EVALUATION**

Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: As demonstrated by the ability to:

### **Knowledge domains:**

#### **C.8.1. Basic statistics and psychometric concepts**

C.8.1.a. understand research methodology and relevant statistics.

#### **C.8.2. Basic research methods**

C.8.2.a. interpret quantitative and qualitative research articles in rehabilitation and related fields.

C.8.2.b. apply research literature to practice (e.g., to choose appropriate interventions, to plan assessments).

**C.8.3. Effectiveness of rehabilitation counseling services.**

C.8.3.a. develop and implement meaningful program evaluation.

C.8.3.b. provide a rationale for the importance of research activities and the improvement of rehabilitation services.

**C.8.4. Ethical, legal, and cultural issues related to research and program evaluation.**

C.8.4.a. apply knowledge of ethical, legal, and cultural issues in research and evaluation to rehabilitation counseling practice.

<p style="text-align: center;"><b>C.9 MEDICAL, FUNCTIONAL, AND ENVIRONMENTAL ASPECTS OF DISABILITY</b></p>
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Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: As demonstrated by the ability to:

**Knowledge domains:**

**C.9.1. The human body system**

C.9.1.a. explain basic medical aspects related to human body system and disabilities.

**C.9.2. Medical terminology and diagnosis**

C.9.2.a. demonstrate an understanding of fundamental medical terminology.

C.9.2.b. demonstrate an understanding of the diagnostic process used by medical and other health professions.

**C.9.3. Physical, psychiatric, cognitive, sensory and developmental disabilities**

C.9.3.a. utilize existing or acquired information about the existence, onset, severity, progression, and expected duration of an individual's disability.

C.9.3.b. articulate the functional limitations of disabilities.

C.9.3.c. apply working knowledge of the impact of disability on the individual, the family, and the environment.

C.9.3.d. explain the implications of co-occurring disabilities.

**C.9.4. Assistive technology**

C.9.4.a. determine the need for assistive technology and the appropriate intervention resources.

C.9.4.b. support the evaluation of assistive technology needs as they relate to rehabilitation services.

**C.9.5. Environmental implications for disability**

C.9.5.a. evaluate the influences and implications of the environment on disability.

**C.9.6 Classification and evaluation of function**

C.9.6.a. demonstrate familiarity with the use of functional classification such as the International Classification of Function.

C.9.6.b. consult with medical/health professionals regarding prognosis, prevention and

wellness strategies for individuals with a disability

## **C.10 REHABILITATION SERVICES, CASE MANAGEMENT, AND RELATED SERVICES**

Each knowledge domain is followed by Student Learning Outcomes (SLOs). Each SLO is prefaced by the phrase: As demonstrated by the ability to:

### **Knowledge domains:**

#### **C.10.1 Vocational rehabilitation**

- C.10.1.a. describe the systems used to provide vocational rehabilitation services to people with disabilities including the state/federal vocational rehabilitation program in the United States, private rehabilitation, and community-based rehabilitation programs.
- C.10.1.b. identify and plan for the provision of vocational rehabilitation services with individuals with a disability.
- C.10.1.c. provide information to prospective employers about the benefits of hiring people with disabilities.

#### **C.10.2 Case and caseload management**

- C.10.2.a. evaluate the need for and utilize case and caseload management services.
- C.10.2.b. apply principles of caseload management, including case recording and documentation.
- C.10.2.c. identify rehabilitation case management strategies that are evidence-based
- C.10.2.d. establish follow-up and/or follow-along procedures to maximize an individual's independent functioning through the provision of post-employment services

#### **C.10.3 Independent living**

- C.10.3.a. identify and plan for the provision of independent living service alternatives with individuals with a disability.

#### **C.10.4 School to work transition services**

- C.10.4.a. develop knowledge of transition services that facilitate an individual's movement from school to work.

#### **C.10.5 Disability management**

- C.10.5.a. describe employer-based disability management concepts, programs, and practices.

#### **C.10.6 Forensic rehabilitation and vocational expert practices**

- C.10.6.a. describe the purpose of forensic rehabilitation, vocational expert practice, and the reasons for referral of individuals for services.

#### **C.10.7 Substance abuse treatment and rehabilitation**

- C.10.7.a. describe different recovery models that apply to substance abuse treatment and rehabilitation.

C.10.7.b. identify and recommend treatment options that facilitate recovery and successful rehabilitation outcomes.

**C.10.8 Psychiatric rehabilitation**

C.10.8.a. identify and recommend treatment options that facilitate recovery and successful rehabilitation outcomes.

**C.10.9 Wellness and illness prevention concepts**

C.10.9.a. promote constructive lifestyle choices that supports positive health and prevents illness or disability.

**C.10.10 Community Resources**

C.10.10. a. work with community agencies to advocate for the integration and inclusion of individuals with disabilities within the community.

C.10.10.b . identify the benefits of rehabilitation services to potential individuals with a disability, employers, and the general public.

**C.10.11 Community-based rehabilitation and service coordination**

C.10.11.a. assist individuals with a disability to access and utilize services available in the community.

C.10.11.b. collaborate with advocate's and other service providers involved with the individual and/or the family.

**C.10.12 Life care planning**

C.10.12.a. describe the purposes of life-care planning and utilize life-care planning services as appropriate.

**C.10.13 Insurance programs and social security**

C.10.13.a. demonstrate knowledge of disability insurance options and social security programs.

C.10.13.b. explain the functions of workers' compensation, disability benefits systems, and disability management systems.

**C.10.14 Programs for specialty populations**

C.10.14.a describe programs of services for specialty populations including but not limited to: spinal cord injury, traumatic brain injury intellectual disabilities sensory disability, correctional and veterans.

**C.10.15 Current technology and rehabilitation counseling**

C.10.15.a. explain and plan for the appropriate use of assistive technology including computer-related resources.

C.10.15.b. utilize internet and other technology to assist in the effective delivery of services.

C.10.15c. assist individuals with a disability in developing strategies to request appropriate accommodations.

C.10.15 d. assess individual needs for rehabilitation engineering services.

## SECTION D: Clinical Experience

- D.1 Students shall have a minimum of 100 hours of supervised rehabilitation counseling Practicum experience with at least 40 hours of direct service to people with disabilities (not role-playing clients). Practicum students shall have experiences that increase their awareness and understanding of the differences in values, beliefs, and behaviors of individuals who are different from themselves.
- D.1.1 The practicum shall include instructional experiences (audio-video tapes and individual and group interaction) dealing with rehabilitation counseling concerns, and clinical experiences (on or off-campus) that facilitate the development of basic rehabilitation counseling skills. During the practicum, students will conduct interviews that will be reviewed by a supervisor. If practicum experiences are provided off-campus, there will be direct and periodic communication throughout the semester between the site supervisor and the faculty (e.g., site visits, conference calls, video-conferencing, electronic communication). Practicum activities shall be documented in logs, progress reviews, and summaries. The program faculty member responsible for practicum supervision must be a CRC.
- D.1.2 Written expectations, procedures, and policies for practicum will be distributed to students and supervisors. This will include the policy that the practicum is a prerequisite to the supervised rehabilitation counseling clinical internship experience.
- D.1.3 Practicum experiences shall include an average of one (1) hour per week of individual **and** 1½ hours per week of group (with no more than **ten** students/group) supervision by a program faculty member or qualified individual working in cooperation with a program faculty member.
- D.1.4 When using distance education modalities, practicum supervision may be provided using a variety of methods such as video conferencing, teleconferencing, real time video contact, or others as appropriate.
- D.1.5 In states that have specific practicum supervision requirements for counselor licensure, the program shall make the required supervision experiences consistent with the licensure requirements available to those students desiring to qualify for licensure.
- D.1.6 There shall be a written progress review of the performance/counseling skills of all students enrolled in a practicum.
- D.1.7 There shall be a written procedure for responding to students who do not demonstrate satisfactory practicum knowledge or clinical skills.
- D.1.8 The individual supervision of **five** students shall be considered to be equivalent to the teaching of one course.

- D.2 Students shall have supervised rehabilitation counseling internship activities that include a minimum of 600 hours of applied experience in an agency/program, with at least 240 hours of direct service to individuals with disabilities.
- D.2.1 The internship activities shall include the following:
- D.2.1.a orientation to program components, policies and procedures, introduction to staff and their role and function, identification of the expectations for interns, confidentiality and due process procedures, risk assessment, and the Code of Professional Ethics for Rehabilitation Counselors;
  - D.2.1.b. observation of all aspects of the delivery of rehabilitation counseling services, as practiced by the agency or organization, including diverse populations;
  - D.2.1.c. work assignments, performing the tasks required of an employed rehabilitation counselor at the agency or organization; and
  - D.2.1.d. reporting, including all required academic reports as well as logs, weekly progress reviews, and summaries of activities.
- D.2.2 Written expectations, procedures, and policies for the internship activities shall be contained in a manual or other appropriate document(s) and distributed to students and supervisors.
- D.2.3 For the internship, an on-site supervisor must be assigned to provide weekly supervision throughout the internship experience.
- D.2.4 The internship shall include an evaluation of student performance, including self-evaluation by the student, the field site supervisor, and the faculty supervisor.
- D.2.5 The RCE Program shall use internship experience sites that provide rehabilitation counseling services to individuals with disabilities appropriate to the mission of the program.
- D.2.6 Internship students shall have experiences that increase their awareness and understanding of differences in values, beliefs and behaviors of persons who are different from themselves. Internship shall promote cultural competence, foster personal growth and assist students in recognizing the myriad of counseling approaches and rehabilitation issues that affect service delivery.
- D.3 Internship experiences shall include an average of one (1) hour per week of individual **or** 1½ hours per week of group (with no more than **ten** students/group) supervision by a program faculty member who is a CRC or qualified individual working in cooperation with a program faculty member who is a CRC.

- D.3.1 When using distance education modalities, supervision may be provided using a variety of methods such as video conferencing, teleconferencing, real time video contact, or others as appropriate.
- D.3.2 In states that have specific supervision requirements for counselor licensure, the program shall make the required supervision experiences consistent with the state licensure requirements and available to those students desiring to qualify for licensure.
- D.3.3 There shall be a progress review of all students enrolled in an internship.
- D.3.4 There shall be a written procedure for responding to students who do not demonstrate satisfactory internship knowledge or clinical skills.
- D.3.5 The individual supervision of **five** students shall be considered equivalent to the teaching of one course due to the intensive, one-on-one instruction and the ongoing evaluation necessary in internship.

## **SECTION E: Administration and Faculty**

- E.1 Program faculty shall recruit, admit, assist, and retain students consistent with its mission and the general needs of the rehabilitation field. The program shall have:
  - E.1.1 written recruitment and retention policies, procedures, and materials;
  - E.1.2 admission requirements are consistent with the general standards in other master's level programs in the institution. Admission criteria for the RCE Program shall include but not be limited to:
    - E.1.2.a. academic performance and potential;
    - E.1.2.b. career goals;
  - E.1.3 information for students about financial assistance options available within the university, including options for financially disadvantaged students;
  - E.1.4 diversity of student body to include students with disabilities and students of different ethnic/racial background—or evidence of efforts to recruit students with disabilities and students from different racial/ethnic background; and
  - E.1.5 written transfer policy regarding graduate credit from other programs exists.
- E.2 The program shall have procedures for communication between students and faculty. Such procedures and communication shall include:
  - E.2.1 program requirements for students;
  - E. 2.2 information on availability of accessible technologies used in the program, expected technical competence of students, the program's curriculum design and timeframe in which courses are offered, the array of student services available from the institution, the learning expectations in the technology-based environment, and estimated time for program completion;
  - E 2.3 Assessment of academic progress including personal development, attitudes, writing/communication skills and the importance of and expectations for ethical behavior occurs. Students demonstrating difficulty or behavior inconsistent with success shall be provided appropriate options for transition from the RCE program; and
  - E.2.4 student feedback about the program occurs.
- E.3 The program shall provide ongoing learning opportunities to introduce the RCE student to the rehabilitation counseling profession. Introduction to the rehabilitation counseling profession is provided by:

- E.3.1 encouraging and supporting involvement with student chapters, conference attendance, and access to publications from rehabilitation counseling organizations and other relevant professional associations; and
- E.3.2 there are opportunities for students to have exposure and interaction with leaders and workers in the profession, consumer and advocacy groups, and other helping professionals.
- E.4. The RCE Program Coordinator shall have the qualifications necessary to carry out the responsibilities of the position. Such qualifications shall include:
  - E.4.1 full-time faculty appointment with an earned doctorate in rehabilitation counseling or related area and in a tenure-earning line where tenure is applicable;
  - E.4.2 an earned doctorate in rehabilitation counseling or related field and experience in rehabilitation counseling;
  - E.4.3 professional commitment to rehabilitation counseling and education; and
  - E.4.4 certification by the Commission on Rehabilitation Counselor Certification.
- E.5 The qualifications of the full-time and part-time RCE Program faculty shall be appropriate to the program's objectives and to rehabilitation counseling in general. Qualifications of full-time program faculty shall include:
  - E.5.1 doctoral degree in rehabilitation counseling or related fields. Master's degree can be acceptable if the skill set is unique or if the person is engaged in doctoral education;
  - E.5.2 experience in rehabilitation counseling;
  - E.5.3 professional and scholarly activities; and
  - E.5.4 current certification as a Certified Rehabilitation Counselor (CRC) or evidence of a timetable to obtain the CRC.
- E.6 The faculty composition and responsibilities shall support the needs and objectives of the RCE Program including:
  - E.6.1 academic rank and tenure; and
  - E.6.2 qualified faculty or resource persons who are strong advocates representing individuals with disabilities, minority groups, and/or women.
- E. 7 The ratio of full-time equivalent (FTE) students to (FTE) faculty should be no greater than 10:1. Programs shall provide evidence of the institution's criteria/definition that is used for the calculation of FTE for students and faculty in the Self Study Document. For those programs not meeting this ratio, documentation shall be presented assuring that

there is quality of educational outcomes and that student needs are met.

- E.8 The student headcount-to-advisor ratio should be no greater than 20:1 for advising related to rehabilitation counseling as a career, course content, etc. Programs may use other appropriate personnel for advising related to course sequence and availability. For those programs not meeting this ratio, documentation shall be presented assuring appropriate student advising.
- E.9 The institution has policies pertaining to workload, compensation, and ownership of intellectual property, such as distance education materials.
- E.10 All program faculty members are expected to demonstrate respect and practice integrity in their professional relationships with students similar to that which they require of their students who pursue certification as rehabilitation counselors. Programs shall communicate to students a mechanism for providing confidential feedback about faculty conduct.

## **SECTION F: Program Support and Resources**

- F.1 The RCE Program shall be recognized and supported as an identified and functioning entity in the institution. This is accomplished by supporting the following:
  - F.1.1 representation on appropriate university committees;
  - F.1.2 financial support adequate to accomplish the RCE Program's objectives and ensure its stability and continuity; and
  - F.1.3 assignment of proper fiscal and program authority, within university policy and procedures, to the RCE Program Coordinator and faculty in the:
    - F.1.4.a. discretionary use of funds;
    - F.1.4.b. administration of grant and/or extramural funds if applicable;
    - F.1.4.c. recommendations for utilization of adjunct and part-time faculty; and
    - F.1.4.d. curriculum content.
- F.2 The program shall have reasonable access to resources, accessible facilities, and technology necessary for effective implementation of the program, including the following:
  - F.2.1 adequate support staff, office space for support staff, office equipment, and records/data processing;
  - F.2.2 accessible instructional classrooms, student and research facilities, faculty office space with sufficient privacy for confidentiality;
  - F.2.3 access to accessible individual counseling rooms with assured privacy and provisions for audio and videotape recording and feedback;
  - F.2.4 resources for faculty to participate in activities, (e.g., attend professional meetings, participate in professional development and continuing education activities, and visit student internship sites);
  - F.2.5 adequate funding, support, space, equipment, and resources to deliver and maintain a distance learning program, if applicable;
  - F.2.6 facilities to house and make available, in alternate format, RCE materials, instructional media, occupational information materials, testing materials, microcomputer equipment, and other appropriate equipment, including audiotape, videotape, and instructional resources; and
  - F.2.7 equitable access to resources, accessible facilities, graduate assistants, and technology necessary for effective implementation of the program.
- F.3 The program shall be in compliance with state and federal laws, and meet national website accessibility standards. Where barriers are present, the institution shall have a

plan and timeline for their remediation.

- F.4 The program assures that university services are routinely available and are adequate from the standpoint of the student. These services may include: library, bookstore, technical, administrative, orientation, advising, counseling, or tutoring.