

University of Utah
Counseling Psychology (Ph.D.)
Department of Educational Psychology
Guidelines for the Development of Remediation Plans

GENERAL OVERVIEW

The remediation plan serves as a formal contract between the student and the Counseling & Counseling Psychology Program (CCP) within the Department of Educational Psychology. It must be focused on the issues (“competencies”) identified as in need of remediation, with specific action plans and measurable outcome criteria (“benchmarks”) so that students and faculty can assess the success of the student in completing the plan.

SPECIFIC STRUCTURE OF THE PLAN

The plan should contain two major components: (1) a narrative portion in the form of a contractual letter written from the student to the CCP program and (2) a Competency Table listing remediation areas, objectives, and benchmarks. The narrative portion provides a general overview of the remediation plan and the Competency Table includes specific benchmarks representing successful performance in each competency area.

LETTER TO THE DEPARTMENT

This narrative portion of the remediation plan serves as a formal contract between the student and the CCP program. It specifies the reasons for the plan, the areas of remediation and activities to address each area, the timeframe for expected completion, and the consequences of successful or unsuccessful completion of the plan. The narrative is structured using business letter format, and is addressed to the CCP Faculty.

First paragraph: The introductory paragraph describes the reasons for the remediation plan and the areas to be addressed in the plan. The statement of the remediation areas (“competencies”) should be as specific as possible. These areas should be narrowly and concretely defined (i.e., “timely attention to professional obligations”, “writing competence”, or “advisory relationship” rather than “professional development” or “professional demeanor”). These should match the competencies listed in the accompanying Competency Table.

Body of letter: In a separate paragraph for each of the competency areas identified in the introductory paragraph, the student should identify aspirations and goals related to the successful completion of the plan in various areas of professional functioning (e.g., academics, practicum, research team, participation in departmental community). This paragraph provides a narrative context for the corresponding section of the Competency Table (see below for a description). If relevant, describe outcome measures that are not self-explanatory in the Competency Table. For example, the student may include a statement that the faculty supervisor of a clinical experience will provide a written summary of the supervision experience each semester, as well as written documentation of any problems or concerns as these occur, and that these documents will be included as part of the documentation of the remediation plan in the student’s file.

The letter should state the timeline for evaluation (usually including one or more intermediate evaluation occasions where the student can get formative feedback, as well as a concluding summative evaluation occasion). This may be stated separately for different competency areas, or in a summary paragraph if the same timeline applies to all areas.

Students may wish to note any supportive experiences (e.g., personal therapy, mentoring relationships) that will be undertaken to assist with successfully completing the plan. In general, such experiences are mentioned for information purposes in the letter, but do not appear in the Competency Table as they do not involve any measurable outcomes.

Students are encouraged to specify that it is not necessary to meet 100% of the benchmarks at all evaluation intervals in order for the plan to be successful. The benchmarks that the student sets should communicate her or his perception of optimal professional functioning in each area. This provision acknowledges the fact that professionals do not function optimally at all times.

Final paragraph: The plan should also conclude with a statement regarding potential outcomes. For example,

On [date], I will submit documentation of outcomes relevant to each benchmark listed in the Competency Table (and other evidence, as relevant) to my advisor. Soon after this date, my advisor will present these materials to the CCP Program (DTC), which will evaluate progress toward remediation in the identified areas. Based on the outcome of this evaluation, the DTC will determine: 1) that the I have adequately addressed areas of concern, and that I will be returned to regular (non-probationary) student status; or 2) that there are areas that continue to need attention and require modifications and extension of this plan; or 3) that insufficient progress has been demonstrated, resulting in a recommendation of dismissal from the CCP Program as outlined in the Doctoral Handbook.

Signatures: The letter should conclude with a statement: “We have read and agree with the Remediation plan as stated above and included in the attached Competency Table.” Signature lines are to be included for: student, faculty advisor, Doctoral Training Director, and an additional faculty member in charge of overseeing the plan .

COMPETENCY TABLE

For each identified remediation area, please prepare a table such as the one at the end of this memo. This table should include the following columns:

- the nature of the competency,
- the domains in which evidence of this competency will be sought,
- the goals of the remediation plan in each domain,
- the evidence that will be offered for attainment of these goals,
- the benchmarks by which success in this goal will be evaluated, and
- the formal dates for evaluation of progress.

Please note that the Sample Competency Table contains suggestions that may be of assistance to students in identifying meaningful goals and outcomes, but it is expected that the student will work with their advisor to create a personalized list of competencies, goals, and evidence suited to the identified remediation areas.

Competency: These should correspond to the areas for remediation identified in paragraph 1 of the narrative portion of the plan as identified by the faculty in the determination of probationary status.

Domain: The domains included for each competency should include all areas in which the student will be working to demonstrate the identified area(s) of concern. Depending on the competency area, these might include classes, research team, assistantship, practicum, manuscript writing,

writing center visits, and/or departmental community involvement. In general, for each competency area the table will list multiple domains in which performance will be evaluated.

Goals: Specific goals should correspond with each domain. You are encouraged to identify aspirational goals relevant to your professional development.

Evidence: For each goal, identify how your performance toward the goal will be evaluated.

Benchmarks: The benchmarks should be as specific as possible (i.e., “no more than 1 grammatical error per page” rather than “improved writing” and “supervisor ratings of at least 3 on specific items from the “Evaluation of PhD Student by Clinical Supervisor” form rather than “satisfactory supervisor ratings”). There should be at least one benchmark for each of the goals listed in the table, and these should be developed in consultation with your advisor to ensure that they are realistic and represent genuine progress/demonstration of competence in the specific area. When developing these benchmarks, it may be useful to ask yourself “how will I/we know that I have succeeded in meeting my goals in this domain?”

Dates for Evaluation of Progress: For each benchmark, please include the date by which the benchmark will be evaluated. If some of the planned activities have evaluation endpoints prior to the endpoint for the plan, state this in the table (i.e., “an evaluation meeting with my XXX instructor will occur by November 1 and again by December 15”). It is advisable for each benchmark to have at least one intermediate evaluation point, not just a final evaluation point, so that you are able to receive feedback relative to your progress along the way. If the benchmarks are different at intermediate and final evaluation points, state this clearly.

ADDITIONAL COMPONENT TO CONSIDER

Remediation plans are complex and necessitate conscientious documentation of evidence, including multiple logs of professional behavior in various domains (attendance/lateness, appointments with Writing Center, manuscript deadlines, etc.) that draw on necessary professional skills. Thus, satisfactory documentation of successful remediation should include demonstrating the organizational skills to create record-keeping procedures that will document pertinent evidence, and conscientiously keeping these records up to date. It may be useful to include this as a component of the Competency Table and describe evidence (e.g., periodic audits of logs by advisor) that will demonstrate timely documentation of key outcomes.

EXAMPLE 1: Identified Areas of Concern - Professional Judgment

- A. Problems of professional competence as evidenced by struggles in coursework, research team, and clinical work. Evidence of personal mental and mental health difficulties has been brought to the attention of the faculty.

Remediation Plan and Schedule:

Specific Behavioral Objectives and Target Dates	Method of Remediation	Met? Y/N
<p>A. Student will demonstrate active engagement in the training program. (target date: daily; reviewed again at midterm MM/DD/YY and at the end of the semester MM/DD/YY)</p>	<ol style="list-style-type: none"> 1. Active participation in group and individual practicum supervision to include: <ol style="list-style-type: none"> a. Preparation for weekly supervision b. Meet or exceed timelines for professional paperwork. c. Seek out supervision as needed. 2. Approach difficult situations rather than engaging in avoidance behaviors to include an awareness of when personal concerns interfere with professional roles/development. 3. Maintain professional boundaries with clients, faculty, peers and students. 4. Achieve positive evaluations from course instructors and assistantship supervisors. 	
<p>B. Demonstrate insight into problems of professional competence. (due date: MM/DD/YY)</p>	<ol style="list-style-type: none"> 1. Develop a research/ reflection paper which: <ol style="list-style-type: none"> a. Reviews the literature related to training students with problems of professional competence b. Provides a reflection about how her own problems of professional competence have impacted her training c. Demonstrates that she can is aware of the importance of addressing her own mental health concerns as they impact her ability to perform 	
<p>C. Student will engage in counseling provided by a licensed mental health care professional (to begin before the start of classes and continue through the Spring semester)</p>	<ol style="list-style-type: none"> 1. Student will begin counseling prior to the start of the Spring semester and provide evidence of such in order to begin classes. 2. Student will comply with all treatment recommendations and provide evidence of routine engagement in this process. 3. Student will demonstrate good self-awareness as it pertains to her own self-care and ability to seek help when necessary. 	

Progress Since Last Review (if applicable): __ Sufficient __ Insufficient

Recommendation of the Faculty:

____ Remediation Plan completed

____ Sufficient progress made on Remediation Plan

____ Insufficient progress made on Remediation Plan

Comments and Recommendations:

Date of Next Review (if applicable): _____

Student Signature: _____ Date: _____

Student Name (Print): _____ Date: _____

Advisor Signature: _____ Date: _____

Advisor Name (Print): _____ Date: _____

Training Director Signature: _____ Date: _____

Training Director Name (Print): _____ Date: _____

EXAMPLE 2: Identified Areas of Concern- Clinical Case Formulation and Treatment Planning

- A. Competent demonstration of an understanding of core clinical concepts and struggles to integrate theoretical perspective in their conceptualization. Written and oral communication lack the depth and sophistication expected at this level of training, particularly in areas requiring complex case formulations and treatment planning.

Specific Behavioral Objectives and Target Dates	Method of Remediation	Met? Y/N
Complete a comprehensive case conceptualization that aligns with theoretical orientation active engagement in the training program. (target date: MM/DD/YY) reviewed again at midterm MM/DD/YY and at the end of the semester MM/DD/YY)	<ol style="list-style-type: none"> 1. Revise case conceptualization with expanded sections on conceptualization goals, client transference, countertransference, termination, and intervention strategies 2. Add detailed analysis of multicultural and ethical issues, including how your identities and client’s identities interacted and influenced the clinical relationship 3. Review Core Practicum text and additional readings on integrating theory into case conceptualization 	
Demonstrate an understanding key intervention strategies, interpersonal dynamics, and clinical processes	<ol style="list-style-type: none"> 1. Meet with clinical supervisor or mentor outside of CCP to discuss on clinical decision making and internal dialogue within transcript and case conceptualization 2. Revise transcript to include a comprehensive annotation alongside each talk turn to indicate clinical process, intervention, internal dialogue, and/or post-session reflections 	
Demonstrate Clinical Theory and Practice Integration	<ol style="list-style-type: none"> 1. Revise outcomes section of case conceptualization to include CCAPS data analysis as well as other methods of outcome-based assessment (e.g., how do you assess client outcome, specifically?) 2. Discuss theoretical orientation applications with clinical supervisor, including the process of termination, referral 	
Oral Exam Response Skills	<ol style="list-style-type: none"> 1. Practice mock oral exam with peers and/or clinical supervisor focused on comprehensive responses 2. Record and review practice sessions to identify areas for improvement 3. Generate questions you may be asked and practice responses with peer or clinical supervisor 	

Additional Components:	Met (Y/N)
Weekly meetings with academic advisor to review progress on all areas.	
Written self-reflection on growth and challenges in each area.	
Mid-point review (after 1 month) to assess progress and adjust plan if needed.	
Final evaluation meeting with advisor at the end of the remediation period.	

Progress Since Last Review (if applicable): __ Sufficient __ Insufficient

Recommendation of the Faculty:

- _ Remediation Plan completed
- _ Sufficient progress made on Remediation Plan
- _ Insufficient progress made on Remediation Plan

Comments and Recommendations:

Date of Next Review (if applicable): _____

Student Signature: _____ Date: _____

Student Name (Print): _____ Date: _____

Advisor Signature: _____ Date: _____

Advisor Name (Print): _____ Date: _____

Training Director Signature: _____ Date: _____

Training Director Name (Print): _____ Date: _____