

This is a synthesis of major themes from a meeting with the USU MRC advisory board comprising representatives from state/Federal VR and the VA VHA/VRE (n=4), current students (n=6), alumni (n=6), and employers from mental health agencies (n=6).

The meeting was held on December 12, 2025.

The summary is broken down based on the following main themes:

- 1) Program Strengths
- 2) General Areas for Improvement
- 3) Ways to Enhance Curriculum
- 4) Practicum and Internship: Perceptions of Student Readiness and Recommendations
- 5) Supervision Development and Communities of Practice
- 6) Curriculum Structure, Delivery, and Learning Environment
- 7) Ongoing Professional Development and Alumni Engagement
- 8) Ethics, Decision-Making, and Professional Judgment

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### **1. Program Strengths: Strong Clinical Foundation and Professional Preparation**

- The USU MRC program was consistently viewed as high quality, rigorous, and comparable to comparable programs. The following items were identified as specific strengths of the program's delivery.
  - Graduates demonstrate strong counseling skills, micro-skills, and therapeutic alliance-building;
  - Theory-driven training (depth over eclecticism) strengthens case conceptualization;
  - Extensive use of recorded sessions with feedback to enhance reflective practice;
  - High CRC pass rates and strong preparation for CMHC and other licensure exams;
  - Practicum and internship structure supports clinical confidence;
  - Faculty are accessible, supportive, and invested during and after graduation;
  - Flexible scheduling of coursework (evening/asynchronous) supports working professionals;
  - Emphasis on professionalism, accountability, and master's-level expectations;
  - Strong preparation for working with disability, neurodivergence, and holistic functioning.

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### **2. General Areas for Improvement:**

- Although generally regarded as a high quality academic program, advisory board members identified the following subthemes as areas for faculty to consider as they review program delivery and program quality generally.
  - Greater focus on the gap between clinical training and state VR Practice;
  - Students are clinically prepared but underprepared for the realities of state and federal VR systems;
  - Limited understanding of VR bureaucracy, caseload management, and data-driven work;
  - Gaps in knowledge related to:
    - WIOA, RSA requirements, and 911 data;

- Fiscal systems, budgeting, and Pre-ETS funding; and
  - Case management systems and performance indicators.
- It was suggested that students lack clarity on:
  - What a day-to-day VR counselor role entails in a state VR agency for VA VRE system; and
  - How counseling translates into employment outcomes.
- The desire for VR-specific electives, seminars, or modules was expressed to enhance the program curriculum and address potential areas of deficiency; and,
- Concern about students using VR placements only to meet requirements before leaving for mental health roles was expressed suggesting a need to better articulate the role/purpose of RSA Scholarships.

### 3. Ways to Enhance the Curriculum

- The following recommendations were provided by the advisory board members as ways to consider enhancing the current curriculum of the USU MRC Program.
  - A need for Expanded Applied and Specialized Skill Training was suggested. This suggests stakeholders want more applied, real-world skill development beyond foundational counseling.
  - Strong requests for enhanced training in:
    - Job development and employer engagement;
    - Motivational interviewing with practice and feedback;
    - Crisis intervention, trauma-informed care, and de-escalation;
    - Forensic rehabilitation counseling (reports, roles, settings); and,
    - How to request and advocate for ADA related accommodations (low/high tech, implementation).
  - Greater emphasis on:
    - The process for conducting an intake and other interviewing modalities (including difficult conversations);
    - Case staffing with supervisors and peers; and
    - Helping clients who feel “stuck”.
  - Desire for applied use of:
    - Labor market data (O\*Net, SOC, DOT)
    - Medical records interpretation and disability impact analysis

### 4. Practicum and Internship: Perceptions of Student Readiness and Recommendations

- The USU MRC Practicum and Internship experience was praised by advisory board members for its perceived Quality, Consistency, and Readiness of students to engage in the practicum/internship cycle. The following are suggestions for consideration:
  - Practicum/internship experiences are valuable but inconsistent and could be strengthened.
  - Students are clinically ready but less prepared for:
    - Agency-specific procedures
    - Case notes, documentation, and productivity expectations
  - There were calls from advisory board members for:
    - Longer and/or multi-site internships;
    - More shadowing opportunities; and,

- Better sequencing of courses prior to the Practicum/Internship Experience (e.g., DSM and MH assessment before practicum).
- Concerns about the following were expressed:
  - Variable supervision quality;
  - Limited vetting and training of site supervisors;
  - Desire for clearer expectations around:
    - Supervisor feedback;
    - Student learning objectives;
    - Skill development vs. paperwork focus

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## 5. Supervision Development and Communities of Practice

- Advisory board members, particularly those in supervisory roles (Mental Health employers and State VR agency representatives) suggested site supervisors need clearer guidance and support to effectively mentor students and new professionals. A collective strong interest in the following items emerged:
  - Supervisor training and CEUs
  - Training and clarification on the distinction between clinical vs. administrative supervision
  - Providing tools for structuring supervision sessions (agendas, goal-setting)
  - Need to support:
    - Supervisor mentoring skills;
    - Supervisee wellness and burnout prevention;
    - Calls for Communities of Practice connecting faculty, supervisors, and agencies.
  - Recognition that partnerships with USU Faculty for in-service presentations and supervision training are “game changers”.

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## 6. Curriculum Structure, Delivery, and Learning Environment

- Advisory board members stated they valued the rigor and relevance of the curriculum but desire improvements in delivery and engagement.
  - Appreciation for the following items was expressed:
    - Applied learning over grades;
    - Faculty passion, respect, and flexibility; and,
    - Reduced “busy work”/limited busy work and emphasis on assignments applicable to their work settings.
- Requested improvements:
  - Better facilitation of discussions to prevent domination of discussion by a student or drifting from the actual topic of the course;
  - More balance between student/peer interaction and faculty-led instruction;
  - Opportunities for on-campus connection and cohort bonding (as appropriate); and,
  - Improved assessment design (varied exams, applied papers, pre/post testing).
- There was mixed feedback on testing accommodations and exam proctoring:
  - Students acknowledged the need to maintain rigor and prestige while balancing this with disability related accommodations but stated there are times where faculty may be too lenient; and,

- All groups supported the need for a challenge program, with some stating a preference for proctored exams as it brings a perceived “relevance” and “rigor” to the program.
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### **7. Ongoing Professional Development and Alumni Engagement**

- Stakeholders want continued connection beyond graduation and expressed an interest in:
    - Short, modular continuing education offerings;
    - Alumni consultation groups and retreats;
    - Newsletters highlighting CEUs, conferences, and program updates;
    - Disability-focused conferences hosted by USU; and,
    - The following items were suggested to better enhance knowledge of the USU MRC program within the state of Utah:
      - Better program marketing and advocacy; and,
      - Clear articulation of program credentials to employers and what program graduates are eligible for in terms of licensure.
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### **8. Ethics, Decision-Making, and Professional Judgment**

- Students expressed a need for clearer frameworks for navigating complex, high-stakes decisions (the “recommendation” of a specific ethical decision-making model). Specific emphasis on identifying ethical gray areas and reporting obligations was suggested, with additional training and clarification on:
    - Subpoenas and records release;
    - Crisis decision-making models or decision trees;
    - Integration of ethics into real-world scenarios; and,
    - Reinforcing that uncertainty and silence within client sessions are part of competent practice.
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### **Summary**

The USU MRC advisory board recognized the program as a highly respected for its clinical rigor, faculty expertise, and exam preparation. Stakeholders consistently recommend preserving the strong counseling foundation while adding VR-specific, applied and specialized training, improving practicum consistency and supervision support, and expanding continuing education and partnerships to better align graduates with real-world practice demands across VR, mental health, and forensic settings.