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OVERVIEW OF SERVICES

Mission
The mission of the University Counseling Center (UCC) is to provide the campus community with professional services in the area of psychological counseling. The UCC recognizes the developmental nature of student life and therefore services may be educational and/or preventative in focus. We support the larger mission of Loyola University to uphold the dignity and value of each person as created by God, to foster a commitment to wholeness of mind, body and spirit, and to maintain a compassionate response to the community. The UCC also serves as a resource in its areas of responsibility and consults with all university personnel as appropriate. In addition, the UCC seeks to evaluate the needs of students and the efficiency of operation through research activities. Finally, the UCC contributes to the development of the counseling field by providing practical training opportunities to graduate students studying counseling and social work.

Hours of Operation
The UCC is open Monday through Friday, 8:30am to 4:45pm and is closed on university holidays. During regular hours of operation, the UCC can be reached at (504) 865-3835. After hours, a recorded message directs the caller to contact University Police in the event of an emergency. University Police will, in turn, contact the counselor on call to respond to emergencies.

Electronic Access
Information regarding the UCC is available at http://studentaffairs.loyno.edu/counseling. Questions and comments may be directed to counsel@loyno.edu and e-mail messages are directed to appropriate staff for response.

All staff are provided an email account through Loyola. Staff are expected to utilize the e-mail account provided for their activities associated with the UCC. Interns will need to inform their direct supervisor at Loyola of their correct university-affiliated e-mail address for inclusion on UCC-related e-mail correspondence.

Staff and interns are expected to check their email and phone messages at least twice every day that the UCC is open.

When staff and interns are away from the office for significant periods of time, voice and email messages should inform the caller. Instructions for setting the email and voicemail messages are available from the Office Manager. Information and instructions regarding how to retrieve your voice and email messages remotely are also available from Office Manager.

While email contact with clients is permissible when the client grants permission for such contact on paperwork, all staff and interns are expected to have a disclaimer to the limits of confidentiality in their signature line as indicated below:
“Electronic mail is not secure and messages may not be read every day; therefore, emails should not be used for urgent or sensitive issues. If you are experiencing a psychiatric emergency after business hours, please call LUPD at (504) 865-3434 and ask to speak to the counselor-on-call.”

**Eligibility for Services**

All full and part-time students are eligible for services free of charge. All Loyola University New Orleans alumni are eligible for limited consultations (generally no more than 3 sessions including intake) and referral services. Faculty and staff are not eligible for services at the UCC. The Department of Human Resources offers an Employee Assistance Program which allows employees to consult with a mental health provider for up to three sessions at no charge.

**CLINICAL PROCEDURES**

**Appointments**

Clients requesting personal counseling are scheduled for an initial 50-minute intake appointment with a personal counselor/psychologist. Effort is made to schedule clients as soon as possible after this initial contact. Clients are assigned to a particular counselor/psychologist based on availability, client preferences, as well as the reported urgency of the problem. The Office Manager assesses counselor/psychologist availability by considering the counselor’s/psychologist’s overall caseload as well as hours available that meet the client’s request. Every effort is made to accommodate clients’ preference for a particular counselor/psychologist and appointment date/time.

In situations where a particular counselor/psychologist is currently teaching a course at Loyola University New Orleans, the Office Manager also screens each client to ensure that clients are not assigned to a counselor/psychologist who is also their course instructor. When assigning a client to a counselor/psychologist, the Office Manager asks directly whether the client is currently taking a course with that counselor/psychologist. If so, then the Office Manager schedules the client with a different counselor/psychologist.

The initial appointment is for intake and evaluation. By the end of the intake session, the counselor/psychologist will make a recommendation for further treatment. This may include referral to other staff, intern, psychiatrist, group, and/or off-campus treatment. The primary counselor/psychologist makes all subsequent appointments with the client unless the client contacts the UCC to change appointment times, in which case the receptionist handles appointment changes. Counselors/Psychologists generally do not maintain fixed appointments for clients because of the need to maintain flexible schedules in order to accommodate the needs of new clients.

**Crisis Appointments**

A member of the UCC staff is on call 24 hours a day, 365 days per year. The staff member on call will carry the emergency phone at all times when not at home or in the office. Responsibility for on-call duty will rotate among clinical staff throughout the
year. The staff member is responsible for answering any queries from students or members of the university community responsible for students during this period. The staff member will determine the status of the emergency situation and the level of response required. There are several situations that may require the counselor to respond in person including accompanying a student-at-risk to the hospital or a victim or sexual assault to the emergency room. In all cases, the staff counselor should note the name of the person who has accessed the on-call system, the date, and the result. This material should be entered in Titanium on the next working day. When necessary or desirable, the Director will be available for consultation and assistance and can be accessed by phone.

If a client presents in crisis to the UCC during regular office hours, he or she completes a Crisis Evaluation Form (see Appendix A). If the UCC staff that is on-call is unavailable, then staff with no appointments/meetings scheduled at that time will be used as a backup. If all UCC staff are unavailable, then the primary response will be made in this order: one member of a committee meeting at that time, one co-leader of a group at that time, and then a counselor/psychologist in session with a client who is not critically in need of completing that particular counseling session.

Since the University Police department is staffed on campus at all times during the year, the Police serve as the initial method of contact for anyone wishing to reach the counselor on-call. The Police can be reached on campus by dialing 911 in an emergency or by calling (504) 865-3434. The Police will then contact the staff member on call, or should there be some difficulty in reaching the counselor (e.g. blind spots in satellite coverage), they will then try to reach the Director. The Police will have the telephone numbers of all staff in case of emergencies.

During the hours the UCC is open, a staff member is available to be contacted by an officer or his/her superior to confer and assess on all levels of mental health related emergency/crisis situations. Direct assessment or intervention with a distressed Loyola employee(s) or student(s) may occur at the UCC or by telephone or on site. Persons threatening imminent harm to self or others may be transported to a hospital facility for immediate intervention. The UCC staff are available for consultation with someone who is concerned about a distressed employee or student.

UCC staff cannot be of service to individuals who are under the influence of any drug or who are violent. They can be informed of the UCC’s services, be given a card and be encouraged to pursue counseling at a later, more appropriate time.

**Voluntary Hospitalization**

If the client is willing to go to the hospital voluntarily, an ambulance will be used. When calling LUPD, indicate that you need assistance with transporting someone to the hospital for psychiatric services. If the client is dangerous to others, LUPD should be notified to inform them and to gain assistance from NOPD.

Hospitalization procedures most often require that several phone contacts be made within a short period of time. It is always best to involve a second counselor in these cases, even if this means that a therapy session or other meeting must be ended early or cancelled. In
all circumstances the Director for Counseling and Health Services should be notified as soon as possible of the hospitalization.

Once the person is admitted to a psychiatric unit, the staff member primarily responsible for the case should call and make known to the charge nurse that he or she is available and interested, with the client’s agreement, to participate in discharge planning. Ask the charge nurse to put a note to that effect in the client’s chart.

**Involuntary Hospitalization**
Involuntary hospitalization involves the loss of civil freedom and rights by the individual involved and this procedure should be used as a last resort. Unlicensed staff members must always proceed after consultation with a licensed staff member. In all cases, the Director for Counseling and Health Services should be consulted before action is taken.

To accomplish an involuntary hospitalization the client must be observed to fall into one of three categories of behavior: imminent danger to self (e.g., lethally suicidal, psychotic/hallucinating to the point where he/she cannot differentiate reality from fantasy), imminent danger to other (with specific lethal means and victim), or a debilitating mental illness that shows no sign of abating and which has the potential to place the individual in harmful situations. If an individual is observed to be in one of these categories and cannot be persuaded to be voluntarily hospitalized then involuntary hospitalization should be considered in consultation with the Director and the individual’s parents if a currently enrolled Loyola student. To proceed with the involuntary hospitalization, contact LUPD to inform them that assistance is needed for a psychiatric emergency involving involuntary hospitalization. LUPD will contact the NOPD Crisis Unit for on-site response and eventual transport of the individual.

**Suicidal Attempts/Gestures**

Suicidal ideation is not uncommon in a clinical population. It is imperative, however, that clinicians are alert to signs of possible suicidality and probe effectively. All references to suicidal ideation and especially urges and intent should be taken seriously. Breaking confidentiality is permissible under Louisiana law when there is a risk of suicide.

Risk factors for suicide include symptoms, particularly hopelessness and intent to harm/kill oneself. Other symptoms related to risk are depression, particularly when the person is recovering and is regaining energy; and substance abuse. Diagnoses that increase risk are unipolar and bipolar affective disorders, alcohol abuse, and “good prognosis” schizophrenia. Demographically those at higher risk include adolescents; college students; single or divorced individuals; and gay, lesbian, bisexual, and transgendered persons. Among students, international students are at increased risk.

Current stressors also increase risk, including various types of loss—of a job, a loved one, or of good health (onset of a physical illness). Sudden onset stress is a risk factor as are failing health and chronic illness. Lack of a support system increases risk, as do
prior attempts at suicide, especially recently, verbalized wishes to kill oneself or die, and the presence of a plan.

Assessment of immediate risk: Three factors predominate as signs of an immediate risk: direct or indirect communication of intent, seriousness of intent, and direct access to a means of suicide. Seriousness of intent can be gauged frequency, duration, and nature of the suicidal ideation. The more detailed the plan, the more serious the intent. Individuals who attempt suicide have often been telling others of their intent directly or indirectly or have made recent gestures. Some subtle communications are saying good bye, putting affairs in order, giving things away. Seriousness of intent is also indicated by level of hopelessness about things getting better in the future. Ego strength, impulse control, the individual’s own assessment of the likelihood of suicide, reasons to live, and the effect on significant others are also parts of an assessment.

If an individual directly or indirectly refers to suicidal ideation, including a desire to die or have peace, an assessment of immediate risk should be made. Staff and interns must involve the supervisor, Director, or other senior staff either before or after the initial assessment.

Working with the Client: Clinicians can be effective in enlisting an alliance with the part of the client that does not want to kill himself. Options include arranging to see the clinician again before doing anything that is harmful; getting the client’s permission to contact someone including family, adult friends, or university ministers to provide support; making sure that guns, pills or other means of suicide are removed from the person’s home and placed with a responsible third party; increasing the frequency of sessions and focusing on crisis management, including possible reduction in course load or incompletes; or voluntary admission to a hospital. Working with a client in this way to avert a crisis can be time-intensive and require lengthier sessions as well as support from other staff.

If a client is on campus but not in the office and it is clear that there is a significant risk of suicide, efforts should be made to have the person come in. On rare occasions, if the person is unwilling to come to the Center, a decision may be made to contact the Dean of Students, Director of Residence Life, or the UMKC Police to contact the student, either with or without Counseling Center staff. These decisions should always involve the Director as they may involve breaking confidentiality and may set into motion such procedures as involuntary hospitalization. If the client is at the UCC, and there is a concern about his or her leaving while acutely suicidal, other staff should be involved for assistance and LUPD should be called.

If a student has evidenced suicidal ideation or behavior and refuses service either at the UCC or an outside resource, it is critical that it be documented that counseling was recommended, offered and refused by the student. Clinical documentation of all crisis contacts should be made in Titanium within 24 hours. Clinicians should provide detailed documentation of all aspects of the client crisis contact and make notation of the consultation made about the case with supervisors and other staff psychologists.
Intake Procedure
Clients complete a demographic form, informed consent, and Client Concerns Checklist immediately prior to their initial appointment. The demographic form provides counselors/psychologists with contact information and statistics regarding the client population. The informed consent form details clients’ rights and responsibilities and reviews the scope of and limits to confidentiality. The counselor/psychologist uses the Client Concerns Checklist to help identify the client’s presenting and other concerns and symptoms. At the completion of intake, counselors/psychologists determine if there is a need to obtain additional information in which case they can conduct psychological and/or intellectual assessments.

Wait List Procedure
A wait list will be instituted at such time when counselor schedules are more than 2 weeks out for a client to schedule an intake. Clients who choose to be placed on the waiting list will be provided with an intake appointment at the earliest available time and will be added to a list in the event that a counselor/psychologist has a cancellation prior to the scheduled intake. Clients on the waiting list will be informed of the on-call emergency services and of the availability of crisis counseling during regular office hours. If requested, clients who are on the waiting list will be provided with referral information for local mental health providers.

Termination or Transfer Procedure
When a client terminates counseling, a termination summary must be completed in Titanium. The summary must be signed/locked in Titanium by the counselor/psychologist. Each counselor/psychologist is responsible for making sure that all entries in Titanium are completed. This includes a note with each corresponding appointment code (cancellations, no shows, emails, phone contacts, progress notes, etc.). Once the counselor/psychologist is certain that all items in Titanium and the file are completed, the client is coded as “inactive” in Titanium.

When a client's case is transferred to a new counselor immediately following the intake, a transfer summary is not needed. Generally, when Master’s level interns leave the UCC several of their cases are transferred to new counselors. It is the responsibility of the intern’s supervisor to ensure transfer of cases and to inform the new counselor of this transfer in a timely manner.

Medical Withdrawal Procedure
The Director for Counseling and Health Services oversees all medical withdrawal requests. If a student requests a medical withdrawal for a given semester, then an appointment is scheduled with the Director for Counseling and Health Services for an evaluation. During the meeting with the student, an evaluation is conducted to determine the nature of the request and to explain the procedure and any and all available medical and/or mental health documentation to substantiate the request is gathered. A release of information is obtained for the Director for Counseling and Health Services to communicate his or her recommendation to the Vice President for Student Affairs and
Associate Provost. Once a determination is made, the Director for Counseling and Health Services calls the student with the decision. If the medical withdrawal is approved, then a medical withdrawal hold is placed on the student’s LORA account and will not be removed until the student completes a medical reinstatement evaluation with the Director for Counseling and Health Services and a recommendation to return to coursework and proof of appropriate treatment is received from the healthcare provider. A medical withdrawal is an all-or-nothing process in that a student is withdrawn from all courses for the given semester.

Confidentiality
Confidential information may not be released or discussed with anyone other than UCC staff without a signed release of information form in the file of the client involved (except as required by law). The Release of Information form must be signed and dated by the client, and signed by a witness for the form to be valid. A release must be obtained whenever confidential information is to be released to a person or agency outside the UCC, including the Residential Life staff, or other University staff and faculty.

a. Duty to Protect:
Dangerousness must meet certain criteria for confidentiality to be broken—involving the “duty to protect”. The condition for “duty to protect” is specific, credible threats of imminent harm toward a specific other person. “Duty to protect” includes, minimally, informing the intended victim and police or others in a role to protect the possible victim. It may also include other plans, such as hospitalization. Should a threat meeting these criteria be made, the Director for Counseling and Health Services should be informed immediately. A course of action will be collaboratively developed for any “duty to protect” situation, and may include campus police and other university administrators. The Director will serve as a point person for all contact in a “duty to protect” situation.

b. Mandated Reporting:
Psychologists and staff counselors working under their supervision are mandated reporters when there is reason to believe that child abuse or neglect is occurring. The law in Louisiana covers current abuse, although deciding on a time frame for what is current is an important decision. When a concern about physical or sexual child abuse or neglect arises, this should immediately be brought to the attention of the Director for Counseling and Health Services for consultation. The law applies to the abuse of any child under age 18—not just to the client. Louisiana also has a law concerning elder abuse that although is not as stringent, it allows for confidentiality to be broken. Concerns about this type of abuse should also be brought to the attention of the Director.

c. Sharing Client Information with a Third Party:
Unless a situation where there is a risk to self or others is present or disclosure is mandated under Louisiana law regarding abuse or neglect of a minor, the sharing of client information with someone outside the UCC staff, including other "interested" university staff or faculty, requires a release of information form signed by the client. This release needs to specify what information is to be shared and the direction of the information flow, i.e., two-way exchange, from the UCC staff member to the outside or from the outside to the UCC staff member. The client's signature needs to be witnessed.
A client file should never be released directly to someone who serves a subpoena demanding a copy of the client file. Consult with the Director, Vice President for Student Affairs and Associate Provost and General Counsel.

Therapists have an ethical responsibility to protect the interests of the client, and for that reason, the purpose for the exchange of information should be discussed with the client. In addition, the information released should be limited to only that which will accomplish the intended purpose. Discuss with the client the potential negative consequences, if any, of the release of information. A copy of any release of information form should be placed in the client file, and the details of the release of information (e.g., date, purpose, to whom information is being released) should be charted as a Disclosures Form note in Titanium.

The area of disclosure of client information becomes particularly tricky when a "concerned other" such as a parent, partner, or faculty member calls to express concern for a client. In general, it is important to explain to them reasons for being legally prevented from acknowledging that a client is being seen at the UCC. The staff counselor may listen to the "concerned other," but no information regarding a client can be provided without a written release from the client. Suggest that the caller express their concerns directly to the client. If the "concerned other" is worried about potential lethality of the client, it may be appropriate to break confidentiality at that point. To reduce the risk of triangulation between the "concerned other" and the client, the staff counselor should inform the client about the contact and the concerns that were conveyed. Interns should always consult with his or her supervisor in these circumstances.

d. With a Client
A client has the right to review his or her file, but it is recommended that this be discussed by the staff counselor and client in a therapeutic context. Interns should consult with his or her supervisor when a client makes this request before allowing access to the file. It is strongly recommended that the client review his or her file in the counselor’s presence. This enables the staff counselor to explain information contained in the chart that may not be understandable to a lay person. It also allows concerns to be addressed directly with the client.

e. Titanium Confidentiality
The UCC has implemented the Titanium scheduling and record-keeping system for many years. In an effort to educate and ensure understanding of the issues of privacy as it relates to electronic records, annually each intern and student worker will be asked to read and sign an agreement of confidentiality. New staff members and interns will be provided training on steps to ensure confidentiality within the system. Questions and concerns related to the system and confidentiality should be made to the Director. Continuing education will be provided by the UCC when new developments and changes in legal and ethical standards would dictate such training.

f. Administrative Support Confidentiality Agreement
All administrative personnel, including administrative support staff and work study students will receive training regarding confidentiality. All work study students are required to complete the contract of confidentiality form annually and/or when their employment commences (See Appendix B).

**Responding to Requests for Information**

**a. Parents**
Counselors/Psychologists are ready at all times to speak with parents regarding their concerns about their students. Consultation is provided to parents on issues such as whether to refer the student to counseling and how to generally approach clinical issues or situations. Information is not released to parents or anyone other than the client regarding specific treatment issues or even the fact that the student may be in treatment without specific, written permission of the client.

**b. Faculty**
As with parents, counselors/psychologists are ready at all times to speak with faculty regarding their concerns about students. Consultation is provided in areas such as how a faculty member can help students deal with issues and whether a student should be referred to counseling. Sometimes faculty may request a follow-up to determine how a student is progressing. Students’ express written consent is needed to discuss anything regarding treatment and the fact that they may be in treatment.

**c. Courts**
If a counselor/psychologist receives a subpoena, he or she will first bring the subpoena to the attention of the Director for Counseling and Health Services. The subpoena will be reviewed by the Director, the Vice President for Student Affairs and Associate Provost, and then by the university General Counsel. The Director and General Counsel will determine the appropriate response to the subpoena.

**Record Maintenance**

**a. Intake Summary**
Following the intake, an intake summary must be completed in Titanium within seven (7) days of the initial meeting (except for crisis intakes that need to be recorded in 24 hours).

**b. Progress Notes**
All progress notes should be entered into Titanium within seven (7) days of that appointment or other contact (except for crisis notes that should be entered within 24 hours). Because client records are legal documents, all documentation outside of Titanium (e.g. release of information forms, etc.) should be typed or written in black ink. Errors should be indicated with a single cross-out line and initialed by the counselor/psychologist. Anyone receiving supervision at any level at the UCC is REQUIRED to obtain all appropriate supervision signatures whether in Titanium or in situations where hard copies are generated (e.g. letters). Notes MUST be written for all appointments, including no shows and cancellations, and all contacts including but not limited to phone calls, emails, consultations with parents/faculty and other means of communication.
**Policy on Limits of Service**

Although currently enrolled Loyola students are eligible for services at the UCC, the staff reserve the right to make clinical judgments based upon whether the UCC is the appropriate treatment facility and can meet the potential client’s needs. If the resources of the UCC are not sufficient, an appropriate referral will be made. Examples of cases requiring an outside referral may include persons requesting or needing a specialized psychological battery or those exhibiting symptoms of a serious psychiatric illness. In other cases such as graduation, no enrollment in summer courses or withdrawing from Loyola, on-going clients may need to be referred out due to ineligibility for continued services. A list of local referral options is updated annually for staff use.

At times, clients are referred to other settings or mental health practitioners. Reasons may include need for a specialized service or program or a person’s graduating or withdrawing and therefore becoming ineligible for services. In the current mental health environment, much referral is driven by managed care, HMO’s, and insurance companies. This is especially the case for residential programs but applies to outpatient services as well. It is usually in clients’ financial interest to check with their insurance company about preferred providers, etc. Referral resources can be provided to clients. It is important to give the referral information without an endorsement or recommendation and to record this statement in the notes. Legally, professionals making a referral that is construed as a recommendation have been successfully sued for problems that later occur with the new provider.

**Case Review**

Clinical staff meetings are held every Tuesday morning beginning at 10:30 a.m. and last until 12:00 p.m. During staff meetings, administrative updates are provided and critical cases are reviewed. During case review, the staff can provide recommendations for diagnosis and treatment.

**Psychiatric Services**

The psychiatrist employed by the UCC is a consulting psychiatrist. Services are provided by the psychiatrist to the UCC on a contract basis. The UCC’s contract with the psychiatrist is to provide services only to current clients of the UCC who are engaged in on-going therapy with this agency, up to the limits of the services that can be provided.

During the fall and spring semesters, the psychiatrist visits the UCC for approximately 3 hours per week on a bi-weekly schedule. During the summer, the psychiatrist visits once per month. The following services are provided by the psychiatrist: consultation with UCC staff, psychiatric evaluation for psychotropic medication, and medication management of the use of medications prescribed. The psychiatrist does not generally provide emergency psychiatric evaluations or emergency prescription services. Prior to meeting with clients and during each of the psychiatrist’s visits to the UCC, clinical staffing occurs for 45 minutes with the psychiatrist and all clinical staff. All clients on the psychiatrist’s schedule are reviewed by the assigned counselor and the psychiatrist. Diagnosis and treatment recommendations are discussed.
In the event that a student requests a refill of medication on a day that the psychiatrist is not scheduled to visit the UCC, then the student is encouraged to call the psychiatrist at his private office for consultation. If requested by the psychiatrist, a copy of the client’s notes are faxed from the UCC to the psychiatrist’s private office for review and handling.

Group Counseling
The UCC supports group counseling as a useful treatment modality. Groups may be formed by diagnosis, common presenting concerns or be geared for psycho-education or interpersonal process. The UCC has offered groups in conjunction with Tulane ERC for sexual assault survivors and emotional processing.

Groups will typically be co-led with another counselor for Tulane’s ERC or led by only one counselor if held only at Loyola. Supervision is provided by a licensed psychologist. Points of entry to group include a referral from counselors’ current clients or a referral immediately after the intake session. Counselors are encouraged to consider referral to the UCC's groups when they have worked long enough with a client on an individual basis that the client would be able to participate in and benefit from a group. Clients may participate in group and individual counseling concurrently, or they may choose to participate only in group depending on the nature of their concern and the treatment recommended by the counselor. There is no charge for group counseling. There is no limit to the number of group therapy sessions offered to clients as long as they are appropriate for group. Group is only offered to students. Group is not available at the UCC for faculty or staff. All potential members for a group will be screened by the group leaders for appropriateness following the referral.

All potential group members will be informed of the nature of the group, confidentiality limits, and expectations of group members. Potential members should be scheduled to meet with one or both of the group leaders for a group screening prior to the first group meeting.

To gain feedback about group members’ experiences a group evaluation will be conducted at the end of each group. This will provide valuable input for facilitators and recommendations regarding the formulation of future groups.

Ethical Guidelines
The UCC adheres to the ethical standards of the American Psychological Association, and the Louisiana State Board of Examiners of Psychologists. Given that we employee masters level counselors and social workers, we adhere to the American Counseling Association Code of Ethics and the National Association of Social Workers Code of Ethics, except as superseded by APA.

ADHD Testing
ADHD testing by a licensed or license-eligible psychologist is available free of charge to all enrolled students at Loyola. Three sessions are used to conduct the interview, provide a self and other questionnaire, and to administer a computerized test. Once all testing is
complete, a feedback session is scheduled and the student receives a detailed interpretation of the assessment results along with recommendations.

Students who have been tested and diagnosed with ADHD within the last 3-4 years can be scheduled at any time. They should be advised to have documentation of their testing and diagnosis forwarded to UCC (either by fax or dropped off in person) prior to their appointment for review. Assistance with a referral for medication management is available if needed.

Students who have been tested and diagnosed more than 4 years ago or who have never been tested will require comprehensive testing at UCC. These students are advised to have any available results from previous testing forwarded to UCC prior to their appointment.

**Police Evaluations**
Prior to hiring, LUPD officer candidates are requested by the LUPD Chief to complete an MMPI-2. The Director for Counseling and Health Services reviews the MMPI-2 results and shares the interpretation with the LUPD Chief. There is no charge to the candidate.

**Professional Development**
Funds are provided in the UCC operating budget to support staff in seeking professional development that is related to work in the UCC. Funds may be available to support such attendance at conferences upon request and to the extent that funds are available. Registration forms and travel arrangements should be submitted to the Office Manager well in advance of the event to be attended in order to arrange for reimbursement.

**INTERNSHIP TRAINING FOR GRADUATE STUDENTS**

**Description of Training Program**
The UCC offers a year-long training experience for graduate students of social work and/or counseling. Interns are trained to provide individual counseling and assessment to clients with personal concerns. Each intern receives a minimum of one hour of individual supervision per week. Group supervision is provided through weekly training seminars and biweekly case conferences. The UCC staff is committed to providing excellent supervisory and training experiences to help interns improve their counseling skills and develop their professional identities.

Interns are encouraged to participate in all activities of the UCC, including reception desk duties, information tables, group counseling, outreach/workshops, research, and administrative projects. Requirements for participation (and related training) in these activities depend on each intern’s availability and interest, as well as the needs of the UCC in a given semester.

The selection of interns is based on the students’ ability to demonstrate basic individual counseling skills in addition to openness to the learning and supervision process. The selection decision rests with the Director for Counseling and Health Services.
All applicants must submit (a) a completed application for the internship program, (b) a copy of their vita including three references, and (c) their academic program’s confirmation of the student’s readiness for the internship placement. An interview is required of applicants. Applicants should contact the UCC to set up the interview. Applicants who are selected for the internship must provide evidence of current professional liability insurance before they can see clients at the UCC.

**Expectations for Professional Behavior**
Interns are expected to exhibit ethical and professional behavior with regard to attire, interpersonal demeanor, professional relationships and case management.

Should conflicts emerge within a professional relationship, efforts should be made to resolve the conflict with the other party in a constructive manner. It is appropriate to consult with the supervisor, or in the case of a conflict with the supervisor, with the Director.

**Hours**
The number of hours per week spent at the UCC is established according to individual graduate program requirements, thus schedules will vary from intern to intern. All interns, however, are expected to commit a minimum of 16 hours a week. Because it can be difficult to obtain the number of direct client contact hours most programs need, interns are encouraged to schedule as many as 20 hours per week. All interns are expected to establish a regular schedule of work days and times, and to commit to working at the UCC from the beginning to the end of the academic year.

All interns are also required to attend the weekly Intern Seminar. Individual supervisors must be informed in advance of planned absences (doctor’s appointments, vacations, school holidays, etc.) so that any necessary client or seminar arrangements may be made. In the event of an unexpected absence such as an illness or a crisis, interns are expected to phone the UCC immediately to inform the receptionist (so that client appointments may be cancelled) and the individual supervisor.

**Caseload**
An intern’s readiness to begin seeing clients is determined by the intern’s individual supervisor in collaboration with the Director. The individual supervisor, in collaboration with each intern, determines the number of clients seen per week.

**Supervision**
Each intern receives a minimum of one hour per week of individual supervision. The individual supervisor meets with the intern to review tapes, discuss clients, and assist the intern in his or her professional growth. Supervisors and interns may also establish additional training goals. Supervision of additional experiences (e.g. group therapy, workshops) is provided separately from individual supervision.

**Evaluation**
Although evaluation is an ongoing process, formal evaluations occur at minimum once per academic semester. The individual supervisor, in conjunction with the intern’s graduate program director, determines the specific method and frequency of evaluation.

Upon evaluation at the conclusion of the semester, if the intern’s progress/competency does not meet the expectations of the supervisor and/or agency, his or her supervisor will work with the Director of the Center and the individual supervisor to develop a remediation plan. This plan could include, for example, a reduced client load, further training experiences, and additional supervision. If necessary, an evaluation of unsatisfactory performance will be submitted to the intern’s academic program.

**Training Seminars**
An initial orientation meeting will be held two days during the week before classes begin. All interns who are new to the UCC are required to attend.

Interns are required to attend an hour-long weekly Intern Training Seminar. The seminars balance didactic training with opportunities for case discussion. Topical seminars have included Diagnostic Interviewing, Psychodiagnostic Assessment, Psychopharmacology, Case Presentations, Eating Disorders, Ethics, College Student Development, Crisis Intervention, and Ethnic and Sexual Identity Issues.

**Case Conferences**
Interns who are providing personal counseling are strongly encouraged to attend a biweekly case conference with our consulting psychiatrist. This allows interns to observe and participate in client consultations and to learn about psychopharmacology.

**Record Management**
All interns will follow the policies and procedures for electronic and physical record keeping as outlined in this manual. All interns must submit all records to his or her supervisor for the supervisor’s review and signature.

**Record of Intern’s Personnel File**
A folder will be developed and maintained which will contain a copy of the intern’s application materials, formal evaluations, supervisor’s notes, record of hours completed at agency, and copy of proof of malpractice insurance. This folder will be kept by the intern’s individual supervisor until completion on the internship and then will be kept in a designated place maintained by the office manager. During the internship, a copy of the intern’s emergency contact information will be kept in this designated place.

**OUTREACH**

UCC staff also provide outreach and consultation to members of the university and outside community. Staff often participate in structured workshops and training presentations for student organizations and other university departments.
Requests for outreach activities are generally directed to the Director. However, individual staff members may be contacted based on their association with the person who calls or the topic matter requested. The individual staff member may either record the pertinent information themselves or direct the request to the Director. In either case, the requests are presented at the next staff meeting and staff members can volunteer for the activities that fit their interests and/or schedules. The Director or staff counselor who will present at the event then confirms the dates with the contact person. The staff member(s) doing the activity is/are expected to have evaluation forms (Appendix Q) completed after the event to provide feedback for the presenters, the UCC, and the Office of Student Affairs.

It is important to record each outreach activity in Titanium, including “Confirmation”, so it can be accurately accounted for in the end of year statistics (e.g. number of attendees, type of outreach, etc.).

**ADMINISTRATIVE POLICIES PROCEDURES**

First thing in the morning

**Phone**

Take phone off call forwarding (Speaker, FDA, Speaker)

Retrieve messages

You have messages when the red light in the right hand corner is on steady; messages should be kept confidential

To check: pick up receiver, dial 2222. Follow Prompts.

Password: 8888

**Computer**

Turn on computers & monitors

Password: (subject to change)

Start Titanium

**Check Email**

Double-click on Mozilla Firefox. This brings you to our website

At top of web page, click once on wolfmail

Login: counsel, Password: Rm263

If there are email messages, forward to appropriate person. If in doubt, ask first. You can look up a person’s email address on the website using the email search option or in the directory.

**Unlock doors**

Unlock file closet w/key you are provided. It is also the key to the front door and the rest of the office doors.

Unlock conference room and printer/fax room

End of the Day

**Forward Phones**

Press Speaker

Press FDA

Dial 2222 and wait for special dial tone

Press Speaker
Closing up
Shut down your computer and the student worker computers
Turn off lights in the printer/fax room, file room, kitchen, and main area
Close and lock doors to the printer fax room, file room, conference room, and front doors, including the two locks in the middle of the door.

File Maintenance
Main Filing Room
File labeled files in the 2 top left hand filing cabinets.
Place any files missing labels in the appropriate bin.
Make sure files get the appropriately colored label.
Enter demographic sheet statistics into Titanium for NEW clients or clients who are being updated.
  Click on Open tab
  Click on clients
  Type in client’s first and last name
  Choose client from list by double clicking on client’s name
  Enter appropriate information
  Click on ‘Find’ to search for a new client

Scheduling
When a client calls/walks in
Ask if they have been here before. If not, they will have to fill out forms before they can be seen. This can be done in the 20-30 minutes before the session or at any other time/day BEFORE the session. If they have been here before, you can just add them to the schedule. NOTE: A person can be scheduled without filling out the paperwork.
In Titanium find a time slot that is acceptable for both the student and counselor. Never ask a student to miss class so they can come to an appointment. Right click on the slot, choose individual appointment or Intake and enter the student’s name and phone number. If the person is in the office, write appointment day and time on the back of the counselor’s business card. If you are scheduling the appointment over the phone, repeat the time and date, and with whom the person is meeting.

Scantron Tests
Tests need to be scored within the week that they are administered
MicroTest Q 5.04 (MMPI-II)
Be sure the Identification, Birth Date, Test Date, and Gender fields on back of the test form are complete. The test will not score if these items are blank.
  Turn on and set up scanner. See scanner instructions
  Place test to be scored in scanner hopper
  Open MicroTest Q 5.0 software
  On top toolbar click Scanner Entry
  Two windows will appear. In the Information window click OK
  The test should automatically pass through the scanner. Two windows will appear. In the Scanning window under Documents Processed it should read **1 Document Accepted (100%)**
highlighted in blue; this indicates that the test scanned correctly. In the Scanner Error window, click Stop. Both windows will disappear.

**WAIT** – the test is being imported

The Administrator View window will appear. The test will be listed in the window that lists all of the previous tests. Find the test by looking for the date. (Click on Admin Date twice and the test should appear at the top of the list. Match the social security number from the test to the one on the computer screen for accuracy).

Look at the status column. It will read either “Ready for Reporting” or “Needs Editing.” If the test status is “Ready for Reporting”, the name must be added to the MicroTest Q database. If the test status is “Needs Editing”, (items that did not scan because the dot was not properly filled in) corrections must be made to the test before it can be printed. To do either or both of the above:

Click on the test to highlight it. Click Edit on the top toolbar. The Editing Option screen will appear. Click View Errors Only. The Edit Manual Entry screen will appear. Make corrections in this screen.

If the test status is “Ready for Reporting” the client name must be added. Enter the Last and First Name. If there are additional corrections to be made, the question numbers will be listed in the Edit Manual Entry screen with a blank box next the each one. Click View Items on the bottom toolbar. The Item View screen will appear. This screen displays the question and answer choices for each question. Use the client’s answer sheet to transfer the answers to the database. Click the cursor in a blank box next to a numbered item, look on the client’s answer sheet for the correct answer to that numbered item, and click either True or False in the Item View box according to the client’s answer sheet. A number 1 or 2 will appear in the box. The number 1 is for True and the number 2 is for False. You can also type a 1 or 2 on the keyboard to put the correct answer in each box. If the client left items blank, do not put an answer in the box. If too many answers were left blank, the test will not score and the client will need to be called in to complete the test.

When finished correcting errors, click Save on the bottom toolbar. The Exit Manual Entry Editor screen will appear. Click Save.

The Verify screen will appear and ask if you want to verify the test. Click Skip Verify.

The Administration View screen will appear and the test status should read “Ready for Reporting.” Highlight test and click Print Report on the top toolbar.

The Print Report screen will appear. The drop down menu should read MMPI-2 Extended Score Report. Click OK.
The **Score/Report** screen will appear. Click **OK**.
The test will print. Print 2 copies.
Close the MicroTest Q software.

**Test Inventory**
Once a month, check to see how many tests are remaining.

**Fax Machine**
Our Fax Number: (504) 865-2382
We do not normally fax anything for students.
We may fax resumes or job applications for students. For general information, usually refer the students to Kinko’s.
ALL Documents must be faxed on WHITE paper. If the item to be faxed is not on white paper, make a photocopy of it. Fax machines do not like colored paper.
Dial the fax number before inserting the document into the fax machine to make sure that you entered the correct number. On campus calls = dial just the extension. Off Campus = dial 8 before the number.
Place the document face down and guide it into the machine. The machine will then take it automatically.
Press the green start button. The fax may take a while to transmit, so you can work on other projects while you wait. Once the document has been transmitted, the original will end up on the opposite side of the fax machine.
If something goes wrong, do not try to fix it, ask for assistance from the Office Manager and Director.

**Phone System**
**Front Desk Phone**
Model NEC Dterm Series
Answering the phones: University Counseling, this is _____.
Placing a call on hold: hold button, then put receiver back on the hook
Transferring a call:
Press Transfer button (between speaker and hold button)
Press or enter the extension number
Wait until person picks up & announce caller
If person wants the caller, hang up. If not, when they hang up the call is transferred back to you. At that point, you can tell them that the person they wanted is busy/away from desk/etc and either direct them to voicemail or take a message.
Intercepting a call:
Pick up receiver
Press flashing red button
Answer as you normally would

**Voice Mail:** Checking messages is on Page 1. Messages you may need:
Hello, you have reached the University Counseling Center. Our hours of operation are 8:30a.m. until 4:45p.m., Monday through Friday. If this is a mental health emergency, please call LUPD at 504-865-3434 and they will notify the counselor on call. Otherwise, please leave a message and someone will return your call as soon as possible. Thank you and have a great day.
Holiday Message: Hello, due to the (insert holiday/break) the University Counseling Center will be closed from (insert break days from-to). We will be re-open (insert date, and day of week) at 8:30 a.m. If you are having a mental health emergency, please call LUPD at 504-865-3434 and they will notify the counselor on call. Otherwise, please leave a message and someone will return your call as soon as possible. Thank you and happy holidays.

To change a message:
- Dial 222
- enter password
- 4 for personal options
- 3 for greetings
- 1 for change greeting
- 2 for personal greeting
- 1 to record greeting, then # when finished
- 1 to replay greeting

Transferring a call to Voicemail
- Press Transfer button, wait for stutter tone
- Press Message or enter 2222
- Press person’s extension or enter their extension
- Wait to hear numbers dialed and then hang up.

To Map a Computer to the Network
- Go to My Computer
- If not connected, go to tools.
- Map Network
- Choose T:\Zippy\Titanium OR P:\Winapps
- Finish
- If there is a red “X” on either the T:\ or the P:\
- Right Click
- Click on Disconnect
- Start over

PERSONNEL POLICIES AND PROCEDURES

Expected and Unexpected Leave
Staff and intern schedules are kept on Titanium. Standard working hours are from 8:30 a.m. until 4:45 p.m., Monday through Friday. Staff and interns are responsible for monitoring and updating their schedules. Planned absences (e.g. vacation, appointments, conferences, etc.) should be identified on Titanium as well in advance as possible and the Director should be notified in writing via email of the request for time off. Staff counselors/psychologists are responsible for finding someone to cover their on-call crisis times when they knowingly will be out of the office.

When staff or interns are ill, the Office Manager is responsible for contacting his/her clients to cancel scheduled appointments. Staff or interns who are ill should contact the Director, or direct supervisor in the case of an intern, by phone before 8:30 a.m. to inform
that they will be out of the office. The Director will notify the Office Manager to cancel scheduled appointments. If the staff member or trainee who is ill was scheduled to be the on-call crisis counselor, then other staff counselors/psychologists will cover.

Staff and interns are expected to be at the UCC when they are scheduled to be working even if they have no appointments on their schedules. Requests for exceptions to this policy are made through Director. Interns do not conduct sessions or groups after 4:45 p.m. unless arrangements have been made for another counselor or the direct supervisor to be present in the UCC.

Any non-exempt staff (e.g., Office Manager) who elect to take time off should pre-arrange this time with the Director before arrangements are made. All requests should be submitted in an email message to the Director. The earlier a request is made, the better the chance that schedules can be arranged to accommodate requested absences. The objective is to work as collaboratively as possible to accommodate individual requests within the context of workplace demands.

Any exempt staff (e.g., staff counselors, Assistant Director) who elect to take time off should pre-arrange this time with the Director before they make arrangements. All requests should be submitted in an email message to the Director. Staff may sign up for leave times on a first come, first served basis providing that there are ample clinical staff available to provide coverage for the UCC during the period of desired leave time. Requests for leave time will be granted or denied through an email response from the Director once it is determined that sufficient coverage for the UCC exists. Our objective is to work as collaboratively as possible to accommodate individual requests within the context of workplace demands.

In the case of sudden illness or other unexpected circumstances, all staff members should notify the Director by 8:30 a.m. so that appointments or other duties may be cancelled for the day and coverage arrangements can be made. If the staff person is unable to call him/herself, then a family member should alert the Director as soon as possible to explain the situation and indicate the expected date and time of return.

**Time sheets**

Accurately recording time worked is the responsibility of every staff employee. Federal and state laws require Loyola University New Orleans to keep an accurate record of time worked in order to calculate employee pay and benefits. Time worked is all the time actually spent on the job performing assigned duties.

Non-exempt employees should accurately record the total hours worked per day. They should also record the beginning and ending time of any split shift or departure from work for personal reasons. Non-exempt employees who use a scannable Time Sheet should report all hours worked each day under the appropriate earnings code. All hours should be totaled by the earnings code in order for the employee to be paid. Hours worked should be rounded to the nearest quarter hour (example: an employee works
seven hours and 3 minutes, the recorded time is 7 hours; an employee works 7 hours and 25 minutes, the time recorded is 7.50 hours).

1/4 hour or 15 minutes = .25
1/2 hour or 30 minutes = .50
3/4 hour or 45 minutes = .75
1 hour or 60 minutes = 1.00

Exempt employees should record only those hours that are exceptions to their regular hours such as sick leave, vacation, etc. These exceptions should selected from the proper earnings code on the online form. If there are no exceptions, then select “No Exceptions” on the online form. Partial day absences should not be recorded.

It is the employees’ responsibility to sign (either on the scannable time sheet or on the online form) their time records to certify the accuracy of all time recorded. The supervisor will review and then either initial or electronically approve the time record before submitting it for payroll processing. In addition, if corrections or modifications are made to the time record, both the non-exempt employee and the supervisor must verify the accuracy of the changes by initialing the time record. In the absence of the employee, the supervisor may approve the time record to expedite processing. In order to ensure that payroll records are legally correct, NO TIME SHEET WILL BE PROCESSED FOR PAYMENT UNTIL IT IS PROPERLY AUTHORIZED.

Time sheets are legal records of the University. Altering, falsifying, tampering with time records, or recording time on another employee’s time record is a serious matter that may result in disciplinary action, up to and including termination of employment.

**Staff supervision**
All staff (exempt and non-exempt) will meet with the Director for a 1-hour supervision meeting on a weekly or bi-weekly basis. These meetings will be scheduled at the beginning of the academic year and will be ongoing for the duration of the academic year. Staff employees are expected to bring a detailed agenda to each meeting for review and discussion. All supervision meeting notes will be kept by the Director in the staff employees’ UCC files.

**Staff evaluations**
The performance of all employees is generally evaluated according to an ongoing 12-month cycle, based on the fiscal year. The evaluation period is August 1 through July 31. New employees receive evaluations to determine progress in learning jobs and meeting performance expectations after 90 days if non-exempt staff and after 180 days if exempt staff.

**Professional Liability Coverage**
Although employees are not required to carry professional liability insurance, it is highly recommended that it is purchased. Interns must provide proof of liability insurance before seeing clients at the UCC.

**Outside Employment**
An employee’s primary work commitment is to his/her full-time position at Loyola. Outside activities that are unrelated to an employee’s full-time position should not be undertaken if they would interfere with that commitment.

A staff employee at Loyola must not perform non-Loyola work or generate income not derived from his/her position during the normal working hours that he/she is compensated by Loyola for that position. Staff employees may not teach classes for additional pay during normal working hours or receive stipends or grant income for work performed during the normal working hours for which he/she is already compensated by Loyola.

In all non-employment activities outside of Loyola University New Orleans, the employee functions without the sponsorship of the University, and the University assumes no responsibility for the activity. If a staff employee chooses to seek outside employment, the details of the above stated information will be outlined in a memorandum and will be signed by the staff employee and the Director and kept in the staff employee’s UCC file.

For more detailed information regarding personnel policies please visit the Human Resources policy and procedures manual at http://finance.loyno.edu/human-resources/policies-procedures-benefits-manual.
Appendix A

Crisis Evaluation Form

Have you recently experienced a traumatic event?  Yes ____  No ____
If comfortable, please indicate the event ____________________________
On a scale of 0 to 4, with 4 being highest, please rate your current level of distress associated with the traumatic event.

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Not at all</th>
<th>Extremely</th>
</tr>
</thead>
</table>

Are you currently experiencing suicidal thoughts and feelings?  Yes ____  No ____
On a scale of 0 to 4, with 4 being highest, please rate your current level of distress associated with suicidal thoughts and feelings.

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Not at all</th>
<th>Extremely</th>
</tr>
</thead>
</table>

Are you currently experiencing homicidal thoughts and feelings?  Yes ____  No ____
On a scale of 0 to 4, with 4 being highest, please rate your current level of distress associated with homicidal thoughts and feelings.

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Not at all</th>
<th>Extremely</th>
</tr>
</thead>
</table>

Have you recently experienced the loss of a loved one?  Yes ____  No ____
On a scale of 0 to 4, with 4 being highest, please rate your current level of distress associated with the loss.

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Not at all</th>
<th>Extremely</th>
</tr>
</thead>
</table>

On a scale of 0 to 4, with 4 being highest, how would you rate your level of distress at this moment?

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Not at all</th>
<th>Extremely</th>
</tr>
</thead>
</table>
Appendix B

Confidentiality

Confidentiality means that the information a student shares in the counseling process is not released to anyone outside the Center without the student’s permission. The fact that a student has made a counseling appointment is also confidential. The Center records are maintained independently of all other University records and cannot be accessed by others without permission of the student. In some cases, counselors may need to discuss students’ concerns among themselves in supervision or in consultation with the University Consultant Psychiatrist. Interns who are practicing in the Center as part of their professional training will discuss student concerns with the supervising staff.

Exceptions to Confidentiality:
Under almost all circumstances, a client’s information will not be disclosed without written permission. Under special circumstances, however, professional ethics and legal requirements may force the release of some information. These situations are very specific and exceptions to confidentiality include the following:

- When one represents an imminent danger to oneself or others
- Where there is ongoing abuse of a child or an adult who cannot physically or mentally protect themselves
- In a lawsuit where mental health may be an issue before the court
- When subpoenaed or court ordered to release your records as can occur in lawsuits involving your medical history
- Under a mandatory referral by a University official or the courts

Summary:
The Center staff members will do everything legally and ethically possible to ensure confidential treatment of student concerns or records. If you have any questions about confidentiality or the exceptions to confidentiality that may be relevant to you, please discuss your concerns with a counselor as soon as possible.

Sitting at the Front Desk
If a student comes in and needs to speak with a counselor right away, please alert an available counselor. If the individual is visibly upset, you may seat him or her in the conference room for more privacy. Check with Diana to see which counselor is available for crisis intervention. If Diana is not available, explain the situation to a counselor who is not in session.

If the counselors’ door is closed, she may be in an appointment. Please do not disturb a counselor while she is in an appointment unless a dire emergency arises.

Answering the Phones and Assisting Students
All client information is confidential. Please remember not to share information about a client with anyone who calls. For example, if a parent calls requesting whether or not his or her son or daughter has been at the center, let the person know that you will transfer/take a message for a counselor to get back to him or her. By law, we cannot confirm or deny that a person has sought counseling services here.
Please sign and date once you have read and agreed to the terms and conditions of this document.

_______________________________  ________________

Signature  Date