University-Community Clinic Needs Assessment

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Abstract

Community and university collaborations involve partnerships that are mutually beneficial for all parties included in the partnership. In order to continually strengthen these partnerships and determine if they are beneficial, assessments and evaluations need to be conducted. This article describes a needs assessment conducted of a university counseling training clinic. The clinic is housed within a local community services board (CSB). University faculty, CSB management, training clinic directors, and students were interviewed and surveyed to assess the collaborations, perceptions, and satisfaction of the clinic as a training site for counselor education graduate students. Overall, results revealed a need for increased communication and collaboration between university members and the local community services board. Results also indicated that students were satisfied, on the whole, with the clinic as a counseling training site. Recommendations and implications for counseling practice are explored and discussed.

Keywords: Needs Assessment, Program Evaluation, Counseling, Collaboration, Community Partnerships
Partnerships between community-based organizations and institutions of higher learning are mutually dependent relationships that are built on shared goals and benefits for all parties involved (Kezar, Lester, & Yang, 2010; Miller & Hafner, 2008; Rosner-Salazar, 2003). For counseling training programs, these partnerships can provide students with opportunities to help their community while developing their clinical skills (Lewis, 2004). The community agency benefits from affordable, additional personnel allowing them to serve a greater portion of the community. For example, Lewis (2004) collaborated with the local school system as a way to teach school counselors-in-training, through their practicum experiences, the importance of civic engagement, responsibility, and leadership. Through constant collaboration, community buy-in, and commitment, this partnership developed into a consistent structure as a school counseling training site and, in turn, the school district received additional services from the university.

Although these partnerships have the opportunity to provide a wealth of benefits for the university and community, barriers and challenges may develop that can hinder the partnership. Calleson and Seifer (2004) argued that barriers in community academic alliances exist, such as inadequate rewards for faculty, lack of staff to coordinate community-based activities, limited number of community sites, lack of support by academic leaders, and community reluctance. Therefore, it is imperative that there is constant collaboration regarding the partnership and regular evaluation to make sure that the agreed upon mutual goals are being met.

In order to limit the challenges of collaborative community and university partnerships, it is crucial for programs to perform evaluations not only to improve much needed services and their effectiveness with the target population, but also to demonstrate accountability to stakeholders (Dimmitt, 2010). Evaluations serve the purpose of identifying what is and is not working, thus allowing for a reallocation of resources where they are most efficacious (Patton, 2008). The process of an evaluation forces a program to self-reflect on the services being offered and identify what is perceived to be beneficial to clients, workers, trainees, and stakeholders (Patton, 2008). When community and university partnerships are in place, it is important for follow up evaluations to be conducted to assess whether goals are being met.

Context

This article outlines one such needs assessment of a university-community collaboration between a local community services board and a local university counseling program. There are over 40 community services boards in the southern state in which the partnership exists. The overall mission of these boards is to achieve a publicly funded system of quality public and private services at the state level that provide affordable services to individuals with mental illness, intellectual disability, and substance abuse disorder. In addition, the community services boards promote independence, recovery, and behavioral healthcare along with education of the public about the needs of individuals with mental illness.

The local university counseling program offers four different programs for interested students: MSEd program, which has counseling tracks in college counseling, clinical mental health counseling, and school counseling; EdS program; PhD in Counselor Education and Supervision program; and LPC track, which is a non-degree
track. The counseling program provides training opportunities for students in all tracks during practicum and/or internship at the CSB-university clinic.

The structure of this university community collaboration is as follows (See Appendix A). The local university counseling program developed a partnership with a nearby community services board (CSB) which entailed housing a university funded clinic within the local CSB (from here on referenced as CSB-university clinic). The purpose of the CSB-university clinic is to provide training opportunities for counseling graduate students and assist the CSB in increasing services provided to their clientele. The CSB-university clinic staff consists of three directors who are counseling doctoral students in the local university counseling program. These three counseling doctoral students oversaw the overall operations for the clinic and provided supervision for master’s and doctoral counseling graduate students during their practicum and/or internship experiences. The CSB-university clinic accepts roughly 10 practicum and/or internship students per semester in order to make sure there were a plethora of training opportunities for students.

Because of the multiple layers within the CSB-university clinic, the specific terms utilized throughout the article will be discussed. The counseling training program, counseling students, and university provide background information as to where the university-community collaboration exists. The CSB-university clinic refers to the counseling program’s training clinic, which is contracted with an off campus community services board in order to provide opportunities for master’s and doctoral counseling graduate students to complete their practicum and/or internship experiences. The Community Services Board (CSB) clinic refers to the local community mental health agency where the CSB-university clinic is housed. Services provided at this clinic are for city residents only.

When conducting the needs assessment, key stakeholders were identified, which included: CSB-university clinic directors (doctoral students), master’s and doctoral counseling students, CSB clinic staff and administrators (those who worked at the CSB and have no affiliation with the university), and university counseling program faculty. The term entities, is used throughout the article to refer to all parties involved in the partnership (i.e., the university, CSB clinic, and CSB-university clinic). The term worried-well is utilized to describe clients who seek mental health services from the CSB and deal with mental health issues related to anxiety, depression, substance use, and stressors related to their environment. Lastly, the evaluation team refers to the members who conducted the needs assessment.

**Purpose of Study**

For the purpose of this research study, a needs assessment was conducted on the CSB-university clinic housed within the CSB clinic to determine the effectiveness of the CSB-university clinic as a site for graduate counseling students and to assess the communication and collaboration among the CSB clinic, the CSB-university clinic, and the university counseling program. The CSB-university clinic’s goals included: to serve as a training site for graduate level master’s and doctoral students; to have students provide counseling services to uninsured or underinsured residents of the local
community; to have a collaborative partnership with the CSB clinic; and, to strive to maintain a clear, healthy relationship with the CSB clinic and its various departments.

The focal point of the needs assessment was to examine the relationship and collaboration between all three entities: the university, CSB clinic, and CSB-university clinic. It was implied by each entity that the lack of a clear and concise understanding of how the three entities influenced one another caused some confusion and possibly reduced the effectiveness of the CSB-university clinic’s intended purposes.

The secondary purpose was to improve the communication between the three entities. Because the CSB-university clinic was located off-campus, confusion existed regarding who supervised CSB-university clinic directors and whether possibilities of collaborating with other CSB departments existed.

The final purpose of the needs assessment was to examine the overall master’s and doctoral counseling graduate students’ perceptions of site supervision and the CSB-university clinic as a training site for counseling graduate students. Training procedures and protocols for graduate students, as well as their satisfaction of using the CSB-university clinic for their practicum and/or internship site, were examined.

**Methodology**

**Procedures**

Participants included university counseling program students and faculty, CSB-university clinic directors, and administrators within the CSB clinic, who were identified stakeholders for the CSB-university clinic. Specifically, the three CSB-university clinic directors, who were also doctoral students in the counseling program, were interviewed. Through purposeful sampling, four specific stakeholders within the CSB clinic were identified by the CSB-university clinic directors as key informants. These individuals included an LPC therapist, a support technician, a practice manager, and a former executive director of the CSB clinic.

Selected faculty from the associated university’s counseling department were solicited for input; the former department chair of the counseling program, the practicum and internship coordinator, and one adjunct faculty member who served as the previous executive director at the CSB clinic. Fourteen previous and current master’s and doctoral students who completed their practicum and/or internship responsibilities at the CSB-university clinic were also included to assess overall satisfaction of the supervision and training received.

**Instruments**

**Interview protocol.** The interview protocol (see Appendix B) addressed perceptions of the CSB-university clinic, the impact of the partnership on policies and procedures, and methods of strengthening the relationship between the three entities. It was generated through collaboration among the CSB-university clinic directors and evaluation team members. Interviews were conducted via e-mail or face-to-face, depending on the request of stakeholders. Interviews were transcribed, member checking was completed, codebooks were created by each evaluation team member, and a final consensus codebook was created to generate an understanding of the CSB-university clinic.
clinic from the data collected (Hays & Singh, 2012). After the final codebook was developed, all transcripts were destroyed for confidentiality purposes.

**Survey.** The purpose of the survey was to elicit feedback from graduate students in regard to site supervision, benefits of the clinic as a training site, and suggestions for additional training and site improvements. Initial items were developed by the evaluation team. Revisions were made based on input from key stakeholders in an effort to make sure items addressed what key stakeholders wanted to assess. The survey consisted of 10 items, which included Likert-type scale questions and qualitative responses (see Appendix C). The survey included open-ended questions regarding students’ overall perception of the clinic, benefits of the CSB-university clinic, areas of needed improvement, and training. Data were collected from master’s and doctoral students from the university’s counseling program who were either currently at the CSB-university clinic or who had been there the previous two semesters.

**Site evaluations.** Within the university counseling program, all practicum and internship students are to complete site evaluations on their individual sites at the end of each semester. Information from these evaluations provides data regarding the appropriateness of sites for counseling graduate students. Ex-post facto evaluation data were collected from former graduate students who completed their practicum or internship responsibilities at the CSB-university clinic. Nine previous site evaluations were collected over the prior three semesters in order to supplement the existing archival data.

**Data Collection**

Semi-structured interviews with CSB-university clinic directors and surveys of graduate students were conducted as a means to assess the level of communication among all three entities and the reported level of satisfaction of practicum and internship students during their time at the CSB-university clinic. In addition to the survey, an interview protocol was created and conducted with nine key stakeholders identified by CSB-university clinic directors (see Appendix B). The interviews included questions regarding the entities’ partnership, perceptions of the entities, policies and procedures within the respective entities, and the relationship between the three entities.

A collaboratively developed survey was disseminated via e-mail to 29 former and current practicum and internship graduate students within the counseling training program (see Appendix C). Participants were asked to complete and print the survey, then submit it to an envelope located at the CSB-university clinic. The e-mail list of former and current master’s and doctoral students who completed their practicum/internship experience at the CSB-university clinic was obtained from the practicum and internship clinical coordinator. Two reminder e-mails were sent to participants. The three survey requests yielded a return rate of 48% (14 surveys). Survey responses were also assessed by compiling themes and frequencies to supplement and inform the qualitative categories and themes from the interview transcripts. Lastly, nine former student site evaluations were collected for constant comparative analysis. The site evaluations examined satisfaction with the CSB-university clinic as a training site as well as student satisfaction with supervision.
Methods of Data Analysis and Triangulation

All interviews were conducted by evaluation team members and transcribed. In order to establish trustworthiness, the evaluation team utilized member checking which included sending interview transcripts back to individual participants to clarify and expand on their individual interviews. Participants confirmed transcripts; none elected to provide additional feedback. As interviews were transcribed, a codebook was created from each transcript. Once codebooks were created, categories and themes found within the data were identified. Codes generated provided initial questions for the survey instrument utilized in the study. Data from the survey instrument were also parsed question by question in order to identify additional themes.

Results

The focal point of the needs assessment was to examine the relationship and collaboration between all three entities (CSB clinic, CSB-university clinic, and the university counseling program). This purpose was assessed by examining themes from the qualitative interviews with nine stakeholders, the three CSB-university clinic directors, CSB support technician, CSB mental health manager, CSB former director, university counseling program director, university counseling program practicum and internship coordinator, and university counseling program adjunct faculty, across all three entities. The interviews revealed the need for increased communication among all three entities. One stakeholder reported “there is not a lot of communication between entities. There needs to be buy-in by the [CSB clinic] Board to strengthen relations between [the] board of directors and [the CSB-university clinic] directors.” Another stakeholder stated “I strongly recommend that the counseling department hire someone with strong clinical experience to coordinate the students’ clinic work.” Possible recommendations to address this desire for improved communication among all entities were a faculty placement within the CSB-university clinic, monthly staff meeting among all three entities (CSB clinic, CSB-university clinic, and university counseling program), and bi-semester meetings where CSB-university clinic directors were invited to attend university counseling program faculty meetings.

The second purpose was to improve the communication between the three entities. To that end, the interviews with the nine stakeholders also revealed that additional exposure to all CSB clinic areas, which involved mentorship from licensed therapists, rotation through other areas of the CSB clinic, and training tours of the CSB clinic, would provide a richer clinical experience for practicum and internship students.

The third and final purpose of the needs assessment was to examine master’s and doctoral counseling graduate students’ overall perception of site supervision and the CSB-university clinic as a training site. Student perception and satisfaction was assessed by collecting survey data from current and past graduate students who completed their practicum and/or internship at the CSB-university clinic, as well as reviewing the ex-post facto evaluations from past counseling graduate students. Data collected from the survey regarding supervision revealed respondents reported being either completely satisfied (54%) or somewhat satisfied (38%) with their supervision at the student training clinic based on a 5-point Likert scale. Respondents’ perceptions of the CSB-university clinic as an effective and efficient site suggests most participants were either completely satisfied
(36%) or somewhat satisfied (36%). One respondent reported “I never felt like I wasn’t learning or growing” when probed about the supervision experience at the CSB-university clinic.

When asked about their supervision experience at the CSB-university clinic, one participant reported that “a supportive supervisor who knows the growth process of new counselors is essential for a new counselor.” Survey responses elicit a more favorable response than past site evaluations, which provided insight into students’ perceptions regarding the CSB-university clinic.

**Discussion**

The multiple purposes of this needs assessment were to examine the relationship and collaboration between the three entities, examine the communication among entities, and assess the CSB-university clinic as a training site for practicum and internship students. Initially, the CSB clinic and CSB-university clinic were originally seen by stakeholders as one entity; however, all entities are aware that the CSB-university clinic is actually seen by counseling graduate students as independent of the CSB clinic and the university. This becomes an issue in regard to types of clients seen by the students at the CSB-university clinic. Students are expected to see the “worried-well” population; however, most of the current clients within the CSB clinic fall outside the realm for practicum students. Despite the lack of the “worried-well” population that students are expected to work with, students reported being appreciative of the opportunity to work with the worried-well population and expressed desire to experience different settings from within the CSB clinic. Some of the suggestions students identified were the possibility for students to rotate through areas of the CSB clinic or shadow licensed therapists at the additional sites within the CSB clinic. In accordance with supervision and training, students reported satisfaction or complete satisfaction with supervision, the CSB-university clinic as a training site, and found the directors and supervisors supportive and knowledgeable.

An overall desire for improved communication was found across all levels of participant input. Most participant responses revolved around the idea of having a faculty member assisting with CSB-university clinic operations. The CSB-university directors, who noted the incongruence between their hours and responsibilities, also supported this finding. This highlights the need for feedback mechanisms to be in place in order to support the communication between the three entities. Additionally, the students expressed a desire for further training opportunities potentially provided by faculty within university’s counseling training program.

**Limitations**

When conducting this needs assessment, there were personal and professional connections to and with the CSB-university clinic which could have impacted the objectivity of certain evaluation team members and their findings. Since CSB-university clinic directors were PhD students in a university program, evaluation team members had professional and personal relationships with CSB-university clinic directors, and one evaluation team member worked at the CSB-university clinic during the evaluation process. Social desirability could have been a factor as respondents were completing
survey items. While every effort was made to allow for participant anonymity, the small population from whom the data were drawn may have led participants to feel it could not be guaranteed. Due to the nature of the findings as measures of self-report, social desirability cannot be eliminated as a confounding variable.

Implications for Practice

When providing training opportunities for practicum and internship counseling graduate students, it is important to examine the collaboration among all parties involved and the stakeholder satisfaction with the partnership. Although results cannot be generalized to settings, this needs assessment provides a framework for effectively conducting a needs assessment of training clinics where students are completing their practicum and internship experiences. It may be beneficial for counselor training programs to conduct assessments on various counseling training sites in order to determine if sites are effective, efficient, and align with the mission of the counselor training program.

This needs assessment was conducted as part of a class assignment for a doctoral level program evaluation course. This could provide an inexpensive opportunity for counseling training programs to collect data regarding training clinics and determine if changes should be implemented in training sites where students are completing their practicum and internship experiences.

Conclusion

Understanding the role of the CSB-university clinic as an interdependent entity, its connection between the university counseling training program and the CSB clinic, along with students’ perceptions of the CSB-university clinic as an effective training site were the main issues stakeholders wanted to grasp. Participant responses indicated additional communication was needed among all three entities in order for the CSB-university clinic to continue to be an effective and efficient training site for practicum and internship counseling students. Despite the need for additional communication between all three entities, students reported that the site was an effective training site and CSB-university clinic directors were doing a good job managing the clinic, supervising students, and reaching out to CSB clinic personnel for needed assistance.

References


*Note: This paper is part of the annual VISTAS project sponsored by the American Counseling Association. Find more information on the project at: http://counselingoutfitters.com/vistas/VISTAS_Home.htm*
Appendix A

CSB-university Organizational Chart
Appendix B

Interview Protocol

1. In regard to the parameters surrounding the partnership with the CSB-university clinic and CSB clinic, what makes the CSB-university clinic similar and/or different from the CSB clinic?

2. What are your perceptions of the CSB-university clinic?

3. How, if at all, do you think the partnership effects policies and/or procedures in the CSB-university clinic?

4. How would you describe the relationship between the CSB-university clinic and the CSB clinic?

5. How, if at all, do the policies and procedures differ between the CSB-university clinic and the CSB clinic?
Appendix C

CSB-University Clinic Survey Evaluation

Thank you for taking the time to complete this survey. The results from this survey will be used to inform a program evaluation for the Community Services Board-University Clinic. No identifying information will be used in the dissemination of the results.

Check all that apply: Which of the following describes your current connection with the CSB-University clinic?

☐ I am a MS practicum student at the CSB-U Clinic
☐ I am a MS internship student at the CSB-U Clinic
☐ I am a PhD practicum student at the CSB-U Clinic
☐ I am a MS or PhD student who saw clients at the CSB-U clinic in a prior semester

In what semester(s) were you at the CSB-U clinic (e.g., Fall 2009 and Spring 2010)?

_____________________

Prior to training, what were your initial expectations for site supervision at the CSB-U clinic?

________________________________________________________________________
________________________________________________________________________

What are your current perceptions of your site supervision at the CSB-U clinic?

________________________________________________________________________

Overall, how would you rate your satisfaction of your site supervision at the CSB-U clinic in preparation towards working in the field of mental health counseling?

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<th>Not satisfied at all</th>
<th>Somewhat Satisfied</th>
<th>Completely Satisfied</th>
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<tr>
<td>Satisfied 1</td>
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<td>3</td>
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Currently, the CSB-U clinic provides the following trainings for every practicum and internship student:

- CSB/U Counseling Center Orientation
- Documentation and Treatment Planning
- Transtheoretical Model/Stages of Change
- Morning Screening Protocol
- Intake Assessments
- Clinical Suicide Assessment/Intervention
- Computer 101

Additional Training/resources in the following area(s) would have been very beneficial and why:

________________________________________________________________________
________________________________________________________________________

What is your opinion of the current level of safety training offered by the CSB-U clinic?

________________________________________________________________________

Overall, how would you rate your satisfaction with the CSB-U clinic as a training site for preparing you to work in the field of mental health counseling?

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What is one thing that could have improved your experience at the clinic?

________________________________________________________________________

What was the most beneficial part of your experience at the clinic?

________________________________________________________________________

Please add any other comments/suggestions that were not covered in this survey.

________________________________________________________________________

THANK YOU FOR YOUR PARTICIPATION!