



INTERNATIONAL ASSOCIATION OF COUNSELING SERVICES, INC.
The Accreditation Association For University And College Counseling Services

ACCREDITATION STANDARDS FOR UNIVERSITY AND COLLEGE COUNSELING CENTERS®

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ACCREDITATION STANDARDS FOR UNIVERSITY AND COLLEGE COUNSELING CENTERS

University and college counseling services¹ have played a vital role in higher education for many years. In the last three decades there has been a dramatic increase in the number of campus counseling services and the multiplicity of functions that are performed. Guidelines for university and college counseling services were first developed in 1970 by a task force of counseling center directors chaired by Barbara Kirk (Kirk et al., 1971). Its work originated from an earlier draft developed by a committee of the Canadian University Counselling Association chaired by Robert I. Hudson. Guidelines were extensively revised in 1981 by a committee of the University and College Counseling Centers Board of Accreditation of the International Association of Counseling Services Inc. chaired by Kenneth F. Garni (Garni et al., 1982). The 1981 revision reflected the evolving role, functions, and changes in the professional practices of university and college counseling services in the preceding decade. The revision of 1991 (Kiracofe et al., 1991) marked a change from providing accreditation guidelines to the establishment of standards for accreditation. It also updated professional practice changes that have occurred in counseling centers in recent years. This present revision of 2000 amends the Standards to include: (1) a provision on counseling services merged with other campus units such as career services and health services, etc., (2) a provision on the ethical use of more recent technology in counseling services, and (3) further specification, elaboration and clarification of the standards.

A. RELATIONSHIP OF THE COUNSELING CENTER TO THE UNIVERSITY OR COLLEGE COMMUNITY

Counseling services are an integral part of the educational mission of the institution and support the mission in a variety of ways, such as consultation, teaching, preventive and developmental interventions, and treatment. They provide clinical and counseling services to clients who are experiencing stress due to academic, career or personal problems which may interfere with their ability to take full advantage of the educational opportunities before them. Counselors are also involved in consultation with faculty and staff, student needs advocacy, program development, teaching, outreach programming, retention activities, and research and evaluation that support the efforts of faculty and staff in enhancing the university environment.

While the relationship of the counseling service to other units within the institution will vary according to organizational structure and individual campus needs, it is critically important that the service be administratively neutral. Centers may provide mandatory assessment and other consultations to campus units, but must not make admissions, disciplinary, curricular or other administrative decisions involving students.²

Typically, counseling services are administratively housed in the student affairs unit of the institution and are acknowledged as a valuable component of the overall student services effort. To achieve this recognition counselors must develop an extensive network of institutional and community relationships. Close linkages should be forged with academic units, campus student service offices, and sources of referral and consultation. Solid working relationships must be maintained with campus and community medical services and with community mental health services in order to accommodate clients who have medical problems or who require hospitalization. Counseling service professionals should work with

¹ For the purposes of this document, the terms “services” and “centers” are interchangeable.

² The Standard on Mandatory Counseling was amended on October 25, 2005.

faculty and administrators to promote the goal of psychological and emotional development in the many aspects of campus life.

Finally, it is essential that the counseling service work closely with the chief student affairs officer and other key administrators to ensure the accomplishment of institutional goals and objectives. The chief student affairs officer, as well as other senior administrative staff, should be fully aware of and appropriately supportive of the complex role of the counseling service.

While the counseling service works in a cooperative manner with members of the campus community, it is important to emphasize the unique role that it plays within the institution. Specifically, it provides services such as crisis intervention, individual and group psychotherapy, career development, and consultation with the campus community about student characteristics and development. In addition, counseling professionals often provide a needed perspective for campus administrators in maintaining an appropriate balance between an administrative and a humanistic approach in managing distressed students.

B. COUNSELING SERVICES ROLES AND FUNCTIONS

The counseling service should play three essential roles in serving the university and college community. The most prominent is providing counseling and/or therapy to students experiencing personal adjustment, vocational, developmental and/or psychological problems that require professional attention. Second is the preventive role of assisting students in identifying and learning skills which will assist them in effectively meeting their educational and life goals. The third role involves supporting and enhancing the healthy growth and development of students through consultation and outreach to the campus community.

A counseling service must include an appropriate range of activities to be eligible for accreditation. Agencies whose services are limited to the following areas are not eligible to be accredited: academic advising, placement services, tutorial programs, academic skills training, (i.e., developmental reading services, learning centers, etc.) and drug and alcohol programs. It should be noted, however, that many accredited counseling services include some or all of the above activities in their programs.

To be eligible for accreditation a counseling service must provide the following program functions:

1. Individual and Group Counseling /Psychotherapy

Counseling services must provide individual and group counseling and therapy services that are responsive to the diverse population of students experiencing ongoing or situational psychological or behavioral difficulties.

These direct service activities should meet the following criteria:

- a) Individual and/or group counseling and psychotherapy should be provided for educational, career, personal, developmental, and relationship issues.
- b) Psychological tests and other assessment techniques should be used as needed, to foster client self-understanding and decision-making and to determine the most effective intervention strategies possible within the limits of available resources.
- c) Staff should have the necessary training to meet the diverse needs of students.

- d) Regular evaluation of the effectiveness of the services must be conducted.
- e) All staff must adhere to the ethical principles of their disciplines.
- f) Services provided by interns, practicum students, and paraprofessionals must receive close supervision by qualified personnel and be in compliance with professional training standards and state or provincial statutes.

2. Crisis Intervention and Emergency Services

Counseling services must provide crisis intervention and emergency coverage either directly or through cooperative arrangements with other resources on campus and in the surrounding area.

Psychiatric resources must be available to the service either on campus or in the community.

Counseling services should provide emergency services for students who are experiencing acute emotional distress, are a danger to self or others, or are in need of immediate hospitalization. Such services may be provided by other agencies on campus or in the surrounding community. In such cases, counseling service staff need to work closely with other service providers to ensure that the resources are adequate and effectively used.

3. Outreach Intervention

Counseling services must provide programming focused on the developmental needs of students that maximizes their potential to benefit from an academic experience. The counseling service must offer preventive and developmental interventions for students. Programs should be developed and provided that help students acquire new knowledge, skills and behaviors, encourage positive and realistic self-appraisal, foster personal, academic and career choices, enhance the ability to relate mutually and meaningfully with others, and increase the capacity to engage in a personally satisfying and effective style of living. These programs should be designed to meet the needs of students, responsive to sexual orientation, racial, cultural, disability and ethnic diversity among students, and reach students who are less likely to make use of traditional counseling services.

4. Consultation Interventions

Counseling services must provide consultative services to members of the university community that make the environment as beneficial to the intellectual, emotional, and physical development of students as possible. The counseling service must play an active role in interpreting and, when appropriate, advocating for the needs of students to administrators, faculty, and staff of the institution. The service should also identify and address issues and problems in the environment that may impede the progress of students.

Consultation services provided by the center should meet the following guidelines:

- a) Consultation regarding individual students should be provided as needed to faculty and other appropriate campus personnel within the bounds of the confidential counseling relationship.

- b) Consultation may be provided to parents, spouses, and other agencies that are involved with students as long as confidentiality requirements are met.

A counseling service should not be solely responsible for administrative decisions about students.

5. Referral Resources

Counseling services must provide referral resources within the institution and the local community to meet the needs of students whose problems are outside the scope of services of the counseling center.

6. Research

An integral responsibility of the counseling service is to conduct ongoing evaluation and accountability research, to determine the effectiveness of its services, and to improve the quality of services.

Services must adhere to the following:

- a) Counseling services must abide by professional ethical standards as well as expectations developed by university groups responsible for overseeing research. Ultimate responsibility for the establishment and maintenance of accepted ethical practices shall reside with the individual researcher and the Director of the counseling service.
- b) The counseling service should contribute to studies of student characteristics and follow-up studies of student progress in various programs.
- c) Counseling services should be involved with students and faculty who wish to conduct individual research on student characteristics or on the influence of specific student development programs. Such activities must be in compliance with appropriate professional ethical standards as well as institutional research board requirements.
- d) The counseling service should make every effort to contribute to the fields of counseling, psychology, and other relevant professions (e.g., student personnel services, social work, etc.) through research and other scholarly endeavors.

7. Program Evaluation

There must be a regular review of the counseling service based on data from center evaluation efforts. When possible it is desirable to include comparative data from other institutions in the evaluation process.

8. Training

Counseling centers must provide training, professional development and continuing education experiences for staff and trainees. Training and supervision of others (paraprofessionals, practicum students, pre-doctoral interns, post-doctoral psychology resident/fellows, etc.) are appropriate and desirable responsibilities of counseling services. While training and supervision are legitimate functions, they should not supersede the primary service role of the agency.

The following guidelines pertain to training:

- a) Graduate student trainees and paraprofessionals should be selected carefully and supervised closely by experienced, qualified personnel in a manner consistent with professional training standards and state and provincial statutes.
- b) Cases assigned to trainees must be related to their present level of training and competency to ensure quality services to students.
- c) All staff members are to be afforded regular opportunities to upgrade their skills. Such training may occur through case conferences, workshops sponsored by the center, and/or the provision of time and/or resources for staff members to attend workshops and conferences.

C. ETHICAL STANDARDS

Professional ethical practice forms the cornerstone of the counseling service. Maintaining ethical standards and abiding by related laws in the administration of a counseling center is a very complex and important task. Clear definitions of ethical and legal questions are not universally applicable, so an understanding of ethical codes and relevant case and statute law is essential. Counseling center staff should have access to legal counsel when necessary and should be well informed regarding legal issues. Staff members must maintain strict adherence to the ethical principles, standards, and guidelines of the American Psychological Association, the American College Personnel Association, the American Counseling Association, the Canadian Psychological Association, the National Association of Social Workers, etc. Agency operating procedures should be congruent with these standards and in no way abridge or contravene an individual staff member's ethical obligations and privileges. [See reference section on ethical statements and professional guidelines.]

1. Support and other staff must be selected carefully and trained thoroughly regarding appropriate agency policies and procedures.
2. The confidential nature of the counseling relationship must be consistent with professional ethical standards and with local, state, provincial and federal guidelines and state statutes. Information should be released only at the request or concurrence of a client who has full and informed knowledge of the nature of the information that is being released. Appropriate information is then to be released selectively and only to qualified recipients. Instances of statutory limits to confidentiality and other appropriate restrictions (e.g. policies related to observation, audio and video taping) need to be clearly articulated and implemented only after careful professional consideration.
3. When the condition of the client is indicative of clear and imminent danger to self or others, counseling service professionals must take reasonable personal action that may involve informing responsible authorities and, when possible and appropriate, consulting with other professionals. In such cases, counseling service professionals must be cognizant of existing ethical principles, relevant statutes, and local mental health guidelines that may stipulate the limits of confidentiality, ordinarily including but not limited to the following: statutes that require the reporting of child abuse and other forms of abuse; statutes and/or case law that stipulate making appropriate notification when clients and/or others are at risk.

4. Procedures regarding the preparation, use, and distribution of psychological tests must be consistent with professional standards. [See reference section on ethical statements and professional guidelines.]
5. Standards regarding research with human subjects must be maintained. Review procedures for proposed research should be established to insure that research efforts do not interfere with service delivery responsibilities of the counseling service. [See reference section on ethical statements and professional guidelines.]
6. Systematic case records must be maintained as required by professional standards and applicable statutes. The record must include all pertinent clinical documentation such as intake and assessment information, case notes, a termination summary, results of any tests or inventories, etc. If records are computerized, or if computerized billing is used in the center, confidentiality of data files must be insured. Confidentiality and appropriate handling of information and records must be reflected in the collection, classification and maintenance of the data, administrative security, and in dissemination of information regarding clients. Records must be secure and should be kept in a central area. Hard copy records must be stored in a secure area, typically in locked file cabinets. In the case of computerized records, password protection and other physical safeguards must be in place to ensure the confidentiality of stored material. Regardless of the case record form used by the center, all case records are the property of the counseling service.
7. Procedures for the disposition of client and agency records should be consistent with professional standards, college and university guidelines, and relevant statutes. The complete record should be maintained for a minimum of 7 years from the last date of service.
8. Access to counseling records must be limited to counseling center personnel. An informed, signed release of information must be obtained from the client before records or other counseling information can be shared with any other individual, office or department.
9. Staff members must be knowledgeable about and function in a manner consistent with relevant civil and criminal laws. They should be aware of the obligations and limitations imposed on the institution by national, regional, and local constitutional, statutory, regulatory, and institutional policy.

10. Technology

Counseling centers must demonstrate a basic understanding of technology prior to adopting any new technology for use. It is recognized that counseling centers may need to rely upon non-psychologists to provide technical assistance. Professionals providing technical assistance should be given training concerning issues regarding confidentiality.

- a) Computerized client data and case records must be secured in such a way to prevent unauthorized access. Clients must be informed that confidential information about their treatment is stored on the Center's computer.
- b) Electronic mail (e-mail) is not a safe means to transmit confidential information. If e-mail is used to communicate with a client or transmit information, an informed consent must be used which explains the inherent technology risks to confidentiality.

- c) Counseling centers that use fax machines to transmit confidential information must develop a system to secure the faxed material from unauthorized access. If a fax machine is used to transmit confidential information, an informed consent must be used.
- d) Cordless and cellular telephones should not be used to communicate confidential information.

D. COUNSELING SERVICE PERSONNEL

Counseling and psychotherapy functions are performed by professionals with at least a master's degree from disciplines such as counseling psychology, clinical psychology, counselor education, psychiatry, and social work.

Both professional staff members and trainees should have access to necessary consultation resources. Assistance should be available in areas such as psychopharmacology, psychological assessment, case management, and program development. Specialists in psychiatry, learning disabilities, law, occupational information, and substance abuse are important resource professionals for the counseling staff as well.

It is expected that professional staff members be accorded rights and privileges consistent with university or college faculty. This may include tenure (or its equivalent) and the opportunity for representation on university governing bodies. Sabbatical, educational, or professional leaves should also be available wherever possible.

1. Director

- a) Qualifications and Competencies
 - 1) The Director should have an earned doctorate from a regionally accredited university in counseling psychology, clinical psychology, counselor education, or other closely related discipline.
 - 2) The Director must have had an internship or equivalent in which she/he received supervision for counseling and psychotherapy activities, preferably with a diverse college student population.
 - 3) Before being named Director, a person should have a minimum of 3 years experience as a staff member in a clinical and/or counseling setting, at least one of which should be in a clinical and/or administrative supervisory capacity.
 - 4) The Director should have abilities and attributes that enable effective representation of mental health issues in the university or college community; the Director should have personal qualities and skills that enable effective interaction with, and the ability to gain the respect of, counseling staff, colleagues, administrators, faculty, staff, and students.
 - 5) The Director should hold appropriate state or provincial licensure, registration, or certification within a two-year period of her/his appointment.

b) Equivalency Criteria: Non doctorate Directors

For a doctoral equivalency waiver to be considered by the IACS University and College Counseling Centers' Board of Accreditation, nondoctoral directors must meet the following criteria.

- 1) Hold a master's degree in an appropriate field.
- 2) Have completed a supervised field placement as part of the requirement for the master's degree that provided ongoing counseling and psychotherapy experiences, preferably with a college population.
- 3) Have had graduate level academic training in clinical and professional functioning such as diagnosis and assessment, psychotherapy and counseling practice, ethical and professional issues, supervision, diversity, and research.
- 4) Have had a minimum of 5 years experience as a staff member in a clinical and/or counseling setting, at least two of which should be in a clinical and/or administrative supervisory capacity.
- 5) Be able to provide evidence of involvement and commitment to educational and professional development.
- 6) Have a licensed, registered or certified professional in the counseling service who has a doctorate in counseling psychology, clinical psychology, counselor education, or related discipline and who is directly involved in the delivery of counseling services and responsible for the supervision of the clinical activities of the agency.

c) Duties

- 1) Overall administration and coordination of the resources and activities of the center including strategic planning and goal setting, identification and attainment of service objectives, resource allocation, program and/or services evaluation and research, counseling, psychotherapy, outreach, consultation, and preventive mental health activities. With the staff the director develops and implements philosophy, policies, and procedures for counseling service operations.
- 2) Coordination, recruitment, training, supervision, development, and evaluation of professional, nonprofessional, and support staff.
- 3) Preparation and administration of counseling center budget, the development of annual reports, and other reports and documents representing and advocating for the needs of the counseling center and the psychological and developmental needs of the university community.
- 4) Responsibility for providing crisis intervention, counseling and/or therapy, clinical supervision, outreach, and consultation services to the university community, as defined by administrative policies and procedures.

- 5) Participation in university or college policy formation and program development; providing consultation and education to the university community regarding psychological and developmental issues.
- 6) Serve on college or university committees.
- 7) Administration of procedures that monitor the quality of counseling and/or clinical services rendered by the center.
- 8) Takes leadership in representing the center to other campus units.

2. Professional Staff

- a) Qualifications and Competencies
 - 1) Professional staff members should have a terminal degree. The minimum qualification for a staff member is a master's degree in a relevant discipline from a regionally accredited institution of higher education.
 - 2) Documentation of supervised experience at the graduate level in the counseling of college-aged students must be provided.
 - 3) Professional staff must have had appropriate course work at the graduate level and demonstrate knowledge, skills, and abilities in psychological assessment, theories of personality, abnormal psychology or psychopathology, human development, learning theory, counseling theory, and/or other appropriate subjects.
 - 4) Professional staff must have had a supervised internship, clinical field placement or practicum experience with diverse populations as part of the degree requirement.
 - 5) Doctoral level staff must have a degree in counseling psychology, clinical psychology, counselor education or other closely related discipline and should be licensed/certified to practice within their specialty. Nondoctoral staff should be appropriately licensed/certified or registered according to their level of education, training, and professional experience as determined by state regulations.
 - 6) Professional staff must demonstrate knowledge of principles of program development, consultation, outreach, developmental theories of the adolescent and adult, and be able to understand the person in the context of a diverse social and cultural milieu.
 - 7) Professional staff should have personal attributes that enable them to facilitate effective interpersonal relationships and to communicate with a wide range of students, faculty, staff, and administrators.
 - 8) When a staff member has the responsibility for the clinical supervision of other professional staff members or of graduate student trainees, the staff member

must hold the doctorate or have an appropriate master's degree and experience in the training of other professionals.

- 9) In those instances where a staff member does not meet the above minimum qualifications, the Board of Accreditation will examine, on a case by case basis, any appeal to justify this individual's commensurate qualifications.

b) Duties

- 1) Provide individual and group counseling and/or psychotherapy, assessment, and crisis intervention services.
- 2) Design and conduct developmental and outreach program activities.
- 3) Provide consultation services, as requested, to student groups, faculty, and staff within the university.
- 4) Participate in research and service evaluation activities.
- 5) Provide necessary training and supervision to paraprofessionals, graduate trainees and post-doctoral fellows/residents.
- 6) Perform other assigned functions that contribute to the service offerings of the center and the academic mission of the institution (e.g., teaching, committee work, liaison with academic or administrative units, participation in university program development, etc.).

3. Other Center Administrative Staff

Centers develop administrative structures based on size and need. Individuals appointed to fill positions such as Associate or Assistant Director, or Training Director, should have relevant experience and expertise to fulfill the duties assigned to these roles.

4. Trainees

When graduate level trainees (pre-doctoral interns, externs, practicum students, field placements) are used in the delivery of counseling center services and programs, their work must be closely supervised in accordance with the trainee's professional specialty and state, regional, provincial and/or national standards and statutes. Responsibility for the placement, the supervision of the trainee's work, assignment of clinical and/or counseling responsibilities, and quality assurance of the program lies with the trainee's supervisor(s), the Training Director of the counseling center (if available), and ultimately the Director of the counseling center.

a) Types of Trainees

- 1) Pre-Doctoral Interns:

The term Intern is reserved for those individuals completing either a full- time (40 hours per week for one year) or half-time (20 hours per week for two years) Pre-Doctoral Internship that is an established and integral part of the agency mission,

that is sequential and cumulative in nature and builds on the experience obtained at the agency, and is both an intensive and extensive learning experience. Supervision of Pre-Doctoral Interns should be regularly scheduled; at a minimum, a full-time Intern should receive 4 hours of supervision per week, at least 2 of which should be face-to-face individual supervision (half-time Interns pro-rated accordingly).

2) Practicum Students, Externs, Supervised Field Placements, etc:

These terms apply to those trainees who are obtaining training and supervision, either as part of an academic practicum, or on a voluntary basis to obtain additional clinical/counseling experience. The center should provide an appropriate range of training, supervision, and learning experiences. These may be at the Masters, Specialists or Doctoral level and occur prior to the Pre-Doctoral Internship.

3) Post-Doctoral Residents/Fellows:

Post-doctoral Residents/Fellows need to have an opportunity to obtain advanced training and education beyond the doctoral degree in preparation for practice in counseling, therapy, or specialization in a practice area. Their training needs to be integrally connected to the counseling center and consistent with the mission of the center and institution. Residencies are typically one full year or two half-years and build upon prior learning. As a result of this training, Residents should demonstrate advanced proficiency and skill in such areas as assessment/diagnosis, treatment, outreach and consultation, program development and implementation and evaluation, supervision, teaching, research, and administration. Regularly scheduled supervision should be integral to the training experience.

b) Duties: Trainees and Paraprofessionals

Professional trainees, such as interns and practicum students, as well as professional personnel, perform various functions in the counseling service appropriate to their training and experience.

1) Trainees

Materials describing professional (graduate student) trainees should include: (1) number of trainees at various levels of training; (2) amount and content of training; (3) supervisor(s) and amount of supervision: (a) number of hours per week in direct supervision, (b) type of supervision (e.g., individual, group), and (c) qualifications of the supervisors; (4) scope of service functions performed, and (5) criteria used for selection of trainees.

2) Paraprofessional Staff

A description of any paraprofessional program shall include the following: (1) number of paraprofessionals; (2) amount and content of their training; (3) supervisor(s) and amount of supervision; (4) service functions performed, and (5) criteria used for selection.

5. Support Staff

- a) Clerical employees who deal directly with students should be selected carefully since they play an important role in the students' impressions of the counseling service and often must follow decision-making protocols about student disposition.
- b) Graduate assistants working at the center should have controlled access to clinical files or records. For example, trainees and graduate assistants should have access only to client records of students they see as clients and are appropriate to their duties. Graduate research assistants may have access to files if identifiable information is coded.
- c) Students employed in the center should be selected carefully and trained sufficiently in confidentiality and privacy issues. They should be assigned tasks limited to their training that do not compromise the confidentiality of clients. Student-workers must not have access to client files, confidential office records, and should not do client scheduling.
- d) There should be an adequate number of trained support staff and effective use of technology to meet the center's service load. Work tasks include receptionist duties, scheduling, data analysis, word processing, handling of any psychological tests or inventories, and billing. The use of student workers as office support workers should be minimized.
- e) All support staff, including student workers, should be given training concerning: (1) the operation and function of the counseling service; (2) the limits of their functioning within the counseling service; and (3) issues regarding confidentiality.

E. RELATED GUIDELINES

1. Professional Development

- a) On-going professional development activities are an essential aspect of an effective counseling program. Both release time and budget resources should be made available to assist staff in these endeavors.
- b) Staff members should hold membership in and participate in appropriate professional organizations.

- c) Staff members should attend relevant campus colloquia and seminars and local, regional, provincial and national professional meetings.
- d) Staff members should be encouraged and supported in accepting leadership responsibilities within their respective local and national organizations.
- e) The counseling service should maintain a continuous in-service training program, the chief feature of which is supervision and consultation. Junior staff members should have the opportunity for continuing supervision and consultation from more highly trained and experienced staff members. It is highly desirable that additional in-service training be provided for all staff members, including activities such as case presentations, research reports, discussion of issues, etc.
- f) It is important that staff members be encouraged to participate in community activities related to their profession.

2. Staffing Practices

Staff members should be free of prejudice with respect to race, religion, age, gender, sexual orientation or physical challenge. The counseling service should demonstrate hiring practices that are consistent with the goals of equal opportunity/affirmative action.

3. Size of Staff

The human resources necessary for the effective operation of a counseling service depend, to a large degree, on the size and nature of the institution and the extent to which other mental health and student support resources are available in the area. The complexity of the service offerings and training programs also influences staffing needs. It is recommended that staff levels be continually monitored with regard to student enrollment, service demands, and staff diversity to insure that program objectives are being met.

- a) Every effort should be made to maintain minimum staffing ratios in the range of one F.T.E. professional staff member (excluding trainees) to every 1,000 to 1,500 students, depending on services offered and other campus mental health agencies.
- b) Support staff must be adequate to assume responsibility for all receptionist and secretarial duties necessary for the effective functioning of the counseling service.
- c) Application from counseling services with fewer than two full-time equivalent professional staff members shall not be approved as this would essentially place the Board of Accreditation in the position of granting individual certification rather than agency accreditation.

4. Workload

Staff members should have a balanced workload that affords time for all aspects of their professional functioning. Direct service responsibilities such as intake, individual and group counseling, and crisis intervention should not exceed 65% of the workload on a continuing basis.

5. Compensation - Salary

Salaries should be established in relation to credentials, experience, responsibilities, and quality of performance of duties. Salaries, benefits, and career advancement opportunities should be commensurate with those of others in the institution with similar qualifications and responsibilities and comparable professionals in other institutions of higher education in the region.

6. Physical Facilities

It is desirable that counseling centers be centrally located and readily accessible to all students, including those who are physically challenged. Counseling centers should be physically separate from administrative offices, campus police, and judicial offices.

- a) Individual sound-proofed offices should be provided for each professional staff member and intern. Each office should have a telephone, access to audio and/or video recording equipment, files, bookcase, furniture that creates a relaxing environment for students, and computer access.
- b) Counseling service staff (including interns) should have access to computers and technology support for scheduling, record keeping, data storage/file management, research, and publication activities.
- c) There should be a reception area that provides a comfortable and private waiting area for students.
- d) There should be a central area where all client records are kept in secure, locked files.
- e) The counseling service should have library resources that include professional journals, books and other technical materials.
- f) A resource center of occupational and career information should be made available by centers that provide career counseling services.
- g) An area suitable for individual and group testing should be available.
- h) The counseling service should maintain (or have ready access to) space suitable for group counseling sessions and staff meetings.
- i) For counseling services with training components, it is strongly recommended that they have adequate audio-visual recording facilities and, where possible, direct observation facilities.

7. Multiple Counseling Centers

The accreditation requirement for multiple counseling services is based upon the organizational structure of the agency. A multiple counseling agency is operationally defined as consisting of one or more subagencies, each with a separate director and staff having no daily physical interaction (e.g., a state college system consisting of branch campuses each with a separate counseling service). In such a case each unit would be accredited separately. Counseling

services which have subunits at different locations, supervised by a single Director, would be accredited as a single unit (e.g., a large university with satellite counseling centers). All subunits must meet requirements for the agency to be accredited.

F. SPECIAL CONCERNS

Issues Affecting Counseling Center Mergers

When mergers occur that bring together counseling centers and other campus agencies (i.e., health center, career planning units, advising offices, etc.), the newly formed entity must meet the standards for accreditation established by the International Association of Counseling Services, Inc. (IACS) in order to maintain accreditation. In as much as merged entities may also be accredited by other professional bodies (e.g., Council for the Advancement of Standards, Joint Commission on Accreditation of Hospitals, Accreditation Association for Ambulatory Health Care, etc.) counseling services are not the focus of such accreditations. Merged centers or centers anticipating mergers must maintain IACS standards.

While not all of the standards have been reviewed here, the following interpretations of the standards are offered. You will notice that the specific standards referred to below are numbered consistent with the accreditation standards for easy reference.

A. Relationship to University or College Community

Center Independence/Neutrality (Para. 2)

When a counseling center is merged with some other campus agency, the center's ability to continue to maintain functional independence and neutrality must not be compromised. For example, if the counseling center and health center were merged, the newly formed entity will need to permit the counseling center's efforts to continue to be an integral part of the institution's educational mission; rather than be seen as primarily an ancillary clinical operation housed in a hospital or clinical environment.

Relationship with Supervisor/Chief Student Affairs Officer (Para. 4)

Following a merger, the Director of the counseling center should continue to have a direct line of communication to a Vice Chancellor or a Vice President of Student Affairs, Academic Affairs, or some other related college or university division. This is necessary both to ensure that counseling centers are intimately involved in accomplishing institutional goals and objectives and to inform these key administrators of the unique role that counseling centers play on campus.

B. Counseling Services Roles and Functions

3. Outreach Interventions & 4. Consultation Interventions

Mergers should not eliminate or de-emphasize the preventative, developmental, outreach, consultative, and psychoeducational activities of counseling centers. Additionally, to be accredited, merged centers must ensure that the staff delivering these preventative and developmental services are appropriately trained and competent to provide them. Such services are integral to the mission of counseling centers, a part of the historical roots of centers, and essential for IACS accreditation.

C. Ethical Standards

6. Case Records

Counseling center records must be kept separate from records of any other merged entity (e.g., medical records, advisement notes, placement credentials, etc.). Access to counseling records must be limited to counseling center personnel only. Informed permission to release records must be obtained from clients before any records can be viewed or released to anyone outside the center.

D. Counseling Services Personnel

Duties: Director (see D. 1.c)

Mergers must not substantially alter or diminish the autonomy of the Director in managing the center. This includes the following: (1) overall administration and coordination of the resources and activities of the center including counseling, psychotherapy, outreach, consultation, research, and preventive mental health activities; (2) coordination, recruitment, retention, training, supervision, development, and evaluation of professional, nonprofessional, and support staff; (3) preparation and management of the budget; and (4) involvement in university policy formation and program development.

Summary

Although mergers involving structural changes do not necessarily prevent centers from qualifying for or maintaining accreditation, care must be taken to ensure that counseling centers in merged entities are in compliance with all IACS accreditation standards.

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