
Professional Impairment and Gatekeeping: A Survey of Master's Level Training Programs

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The authors of this study investigated professional impairment and gatekeeping practices in 112 master's-level clinician training programs. Results indicated that while programs generally have procedures for monitoring students to ensure skill level and quality clinical performance, the procedures, policies and timing of evaluations vary widely. An overview of existing practices is presented as well as suggestions for future research in the area of gatekeeping.

Keywords: counseling, gatekeeping, impairment, master's level training programs, evaluation procedures

Counselor educators have an ethical obligation to prepare students who will function effectively as clinicians in their professional endeavors. This requires establishing and maintaining gatekeeping standards by which students are selected for admission and evaluated throughout their training to identify and deal with any impairment issues that may arise. Such standards will help to ensure students are capable of functioning professionally in their course work, practical experiences, and most importantly, as practitioners in the counseling field. Homrich (2009) states "equally critical as academic and clinical accomplishment in determining future success as a counselor is affirmation of the interpersonal readiness of the trainee to work with clients and colleagues" (p. 2).

Effective gatekeeping requires attention to all aspects of the student's performance. In an effort to talk about those aspects of a student's performance that are not linked to grades, some researchers continue to use the term *impairment*, while others use terms such as *problematic professional competence* (Elman & Forrest, 2007) or *professional performance* (Foster & McAdams, 2009). However, there remains a lack of agreement as to which terminology to use (Falender, Collins, & Shafranske, 2009; Gizara & Forrest, 2004; Homrich, 2009).

After an extensive review of the literature, and serious consideration of the term impairment, the authors suggest the use of *professional impairment* incorporating the definition of Lamb et al. (1987):

Trainee impairment is an interference in professional functioning that is reflected in one or more of the following ways:

- (a) an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior;
- (b) an inability to acquire professional skills to reach an acceptable level of competency;
- (c) an inability to control personal stress, psychological dysfunction and/or excessive emotional reactions that interfere with professional

functioning (p. 598).

This is consistent with Wilkerson (2006) and Forrest, Elman, Gizara, and Vacha Haase (1999) who believe the definition incorporates the essential components of impairment including (a) unethical behavior, (b) trainee incompetence, and (c) impairment of any kind. While the importance of distinguishing the use of the term impairment in counselor education from the Americans with Disabilities Act (ADA) verbiage is noted, the current authors believe the term professional impairment describes students of concern in graduate counseling programs. The term is understood in the field of counseling to be separate and distinct from the ADA use of the word.

The gatekeeping role of graduate programs is addressed extensively in the literature (Baldo, Softas-Nall, & Shaw, 1997; Bhat, 2005; Frame & Stevens-Smith, 1995; Gaubatz & Vera, 2002; Homrich, 2009; Lumadue & Duffey, 1999; McAdams, Foster & Ward, 2007, Wilkerson, 2006; Ziomek-Daigle & Christensen, 2010). The ethical codes of professional associations, such as the American Counseling Association (ACA) and the Association for Counselor Education & Supervision (ACES), as well as the Council for Accreditation of Counseling and Related Educational Programs (CACREP) present clear directives for gatekeeping responsibilities for counselor educators and supervisors (Adams, Foster & Ward, 2007; Li, Trusty, Lampe, & Lin, 2008; Wilkerson, 2006). Homrich (2009) discusses gatekeeping “as a metaphor that identifies the process of monitoring progression through a series of stages via critical points of entry or passage” (p. 1). Homrich further describes the function of gatekeepers in the mental health field as one of protecting “not only the integrity of the profession; they are also responsible for preventing harm to future clientele that could result from a lack of competence on the part of their trainees” (p. 2).

Ziomek-Daigle and Christensen (2010) recommend a four phase model of gatekeeping that includes the following: (a) pre-admission screening, (b) post-admission screening, (c) remediation plan, and (d) remediation outcome. Wilkerson (2006) proposes a similar stage model aligned with the therapeutic process. His model begins with providing programmatic policies and procedures to prospective students (informed consent) at the pre-admission stage, admissions process (intake and assessment), monitoring progress through program (evaluation), remediation as needed (treatment planning), and finally graduation or dismissal if goals are not achieved (termination).

When setting up gatekeeping practices, counselor educators must also be aware of trends in the legal system around the issues of students exhibiting professional impairments. Frame and Stevens-Smith (1995) suggest that the legal precedent is established for training programs to incorporate academic and experiential components into their monitoring and evaluation processes. More recent challenges to gatekeeping practices of graduate programs likewise show support from the courts for programmatic decisions around dismissal of students for reasons of professional impairment (e.g., Keeton v. Anderson-Wiley, 2010); Ward v. Wilbanks, 2010).

While gatekeeping practices are addressed at length in the literature, no uniform model for handling this responsibility has emerged. As Homrich (2009) suggests, the support of professional associations and/or accrediting bodies in setting forth a uniform model for gatekeeping would give professional sanction to programs and provide legal backing to decisions regarding student retention. Homrich further states that such a model would “set a professional standard that would prevent gateslipping in counselor education programs” (p. 16). This would

mean that programs would be less likely to allow students with professional impairment to graduate and enter the profession. The present study was designed to gather information on the incidence of professional impairment as well as gatekeeping practices and challenges in programs training master's level clinicians.

Method

Participants

The subjects in this study were 112 program coordinators/department chairs in programs training master's-level clinicians. Of those programs that self-identified by title, 78% were counseling programs, and 22% were psychology programs. Thirty-two of the fifty states were represented in the sample.

Sampling and Procedure

The programs sampled were identified by the first author using graduateguide.com with the focus being on master's-level practitioner training programs. Utilizing Survey Monkey, 558 program coordinators/department chairs of identified graduate programs received via email a cover letter with informed consent and a link to the survey designed by both authors. Prior to distribution, the survey was piloted with nine counselor education faculty and practitioners familiar with the topic of professional impairment. Feedback was incorporated into the final draft of the survey. Participants completed the surveys on-line and submitted them anonymously through Survey Monkey. A total of 112 usable surveys were collected for a response rate of 22%.

Measures

The survey consisted of 34 multiple response questions, one open-ended question, and eight demographic items. Questions were developed from issues and focal points identified in the literature. Examples of survey questions included: (a) "What options are available in your setting to assist students with professional impairment?"; (b) "In your program, what are the barriers to dismissing a student who is identified as having a professional impairment?"; and (c) "In your program, what are the grounds for dismissal?". Examples of demographic questions included: "What is the title of your program?" and "In what state is your college/university located?" Respondents also had the option to check "other" and share pertinent information. The open-ended question was the final question in the survey and asked participants "Is there anything else you would like to tell us about students with impairment and your program?". Responses were collected in the aggregate and anonymity was assured.

Results

Incidence of impairment

Professional impairment is clearly an issue for the graduate programs surveyed in this study. Ninety-two percent of the respondents reported having at least one student with a professional impairment. Of the total of 414 students identified as having a professional impairment in this study, 384 (93%) were offered remediation options. Of that number, 72

(19%) students refused the remediation options. Of the 312 students who accepted remediation options, 220 (71%) were successful. One respondent indicated that success might mean a student choosing to discontinue the program. Of those 414 students identified as having a professional impairment, 83 were dismissed over the past five years. Of the 83 dismissed students, 28 (33%) appealed the dismissal decision. Of the 28 students who appealed, 3 (11%) were readmitted.

Survey responses indicate that graduate programs address their gatekeeping responsibilities in four general ways: through pre-admission screening, with post-admission evaluation processes, with curricular components for continued gatekeeping, and with procedures that address identification of professional impairment and due process.

Pre-admission Screening

Programs use a variety of written materials and other procedures in considering applicants including both objective and subjective data, most often undergraduate GPA, reference letters and personal statements (see Table 1). When programs considered personal characteristics in pre-admission screening, the following criteria emerge: interpersonal skills, interpersonal maturity, self-awareness, the ability to perceive one’s areas for growth, the ability to perceive one’s strengths, openness to feedback, and potential for growth. Respondents wrote in characteristics such as humility and teach-ability, career goals and ambitions, and ability to work in a group. Seven respondents named appreciation of and openness to diversity as important characteristics.

Sixty-five percent of programs surveyed offer both full and provisional admission. Of those offering provisional admission, 68% cite the undergraduate GPA below the minimum as the major criterion for such admission followed by a lack of prerequisite coursework, substandard GRE scores, and concerns noted by references. Respondents wrote in criteria such as “telephone interview had to suffice”, “concerns at group interview,” and “writing sample somewhat weak or lacking in depth”.

Criterion	Percentage
Undergraduate GPA	100
Reference letters	96
Personal statement	95
Relevant experience	73
GRE scores	70
Individual interview	51
Group interview	32

N=109

Post-admission Evaluation Process

Once a student has been admitted, there are various checkpoints and curricular components in place to ensure that students are aware of the timing of evaluations and the criteria which are used to evaluate their progress. Students are informed of evaluation procedures prior to applying for admission, at the time of admission, and during program

orientation. Seventy-seven percent of respondents indicated their programs communicate this information both verbally and in writing. Other delivery points include pre-practicum, pre-internship, midway during practicum and internship, and post-internship. This implies the majority of programs have some type of scheduled checkpoints for evaluating and communicating performance to students.

Respondents were asked to identify formal evaluation checkpoints for continued enrollment in the program. Seventy-one percent of programs deliver feedback to students at the end of each semester. However, 13% of participants stated they deliver feedback only as needed rather than on a scheduled basis. Fifty-nine percent of programs communicate feedback verbally through an advisor as well as in writing.

Ninety-two percent of programs provide feedback on both academic and personal/interpersonal performance. Personal/interpersonal feedback most often includes the criteria of interpersonal skills, openness to supervision and feedback, awareness of one's impact on others, ability to respect individual differences, interpersonal maturity and judgment. In addition, 89% of program respondents said they evaluate student performance based on adherence to professional and ethical standards. One respondent reported the following regarding his/her program's retention policy: "Our retention policy refers to both academic criteria and adherence to ACA's ethical codes and psychological functioning." Others indicated, "Ethics is a way for me to justify a higher level of non-academic performance with my students (i.e., self-care, interpersonal skills, team work, role and boundary adherence)" and "All rubrics specify that if students do not adhere to the professional and ethical standards they will receive a failing grade for the course. Students are given feedback on the degree to which they adhere to such standards in presentations, etc."

Degree candidacy is a procedure which requires students to satisfactorily complete a specific number of academic credits as well as demonstrate professional ethical and interpersonal behavior. This affords programs another point at which to evaluate students. Less than half of participants indicated they have a formal procedure to advance students to degree candidacy. Programs that did report such a procedure utilize satisfactory progress in course work, professional growth, evaluation by all faculty, and personal growth as criteria for candidacy decisions.

Curricular Components for Continued Gatekeeping

Another area addressed with this survey is the way in which program curricula address professional behavior issues related to impairment. Seventy percent of programs report they offer a stand-alone ethics course. Those programs that do not offer an ethics course address ethics as part of other courses including practicum and internship.

Students are introduced to the impact of clinical work on the practitioner and practitioner self-care in a variety of courses. Most participants reported these topics are addressed in an introductory skills course. However, the topics are also covered in ethics, practicum, and internship courses. It is interesting to note that 2% of programs indicate that the personal impact of clinical work is not a focus in their programs. Likewise, 5% of respondents indicate they do not introduce the concept of practitioner self-care anywhere in their programs.

Only 35% of participants said they require a personal growth experience in their programs. Of these programs, experiential courses, group experience led by program faculty,

group experience led by outside professionals, and individual counseling/therapy both on and off campus are the examples most often endorsed.

Identification of Professional Impairment and Due Process

As previously indicated, our sample shows a total of 414 students over the past five years were identified as having a professional impairment. The means by which a student with a professional impairment comes to the attention of program faculty included interactions with program faculty and site supervisors as well as interactions with peers. Options available to assist students with professional impairments include: (a) withdrawal from the program, (b) leave of absence from the program, (c) individual therapy on-campus, (d) repeat recommended course/s, (e) increased advising and mentoring, and (f) reduction in course load. Due process procedures range from meeting with the program coordinator to informal hearings (see Table 2).

While due process procedures are important to program integrity, there are barriers to faculty identifying and taking action with students of concern (see Table 3). Respondents identified additional barriers to those listed in the survey including “a lack of formal guidelines,” “the university legal department,” and “finances.” In addition to academic deficits, grounds for dismissal decisions include a number of problematic behaviors (see Table 4). Respondents also noted “failing out” and “the inability to remediate” as reasons for dismissing students.

Due Process Procedure	Percentage
Meeting with program coordinator or department chair	88
Meeting with advisor	85
Written mandates for remediation specifying expected behavioral changes, time line, and consequences of no action	82
Verbal and written listing of concerns	79
Notification of appeal process	65
Notification of process for dismissal	60
Meeting with faculty committee	52
Informal hearing	38
N=96	

Barrier	% Initiate	% Dismiss
Fear of insufficient evidence to support dismissal	58	46
Discrepancy between grades and low evaluation of clinical work	50	34
Desire to protect student's privacy	34	22
Desire to avoid long-term career consequences for student	30	43
Fear of lawsuit against department or university	29	46
Desire to avoid long-term consequences for student well-being	28	34
Discomfort with "bad guy" role vs. nurturing role	23	15
Belief problem will correct itself	21	9
Fear of lack of administrative support for dismissal decision	2	24
Fear of grievance against faculty member	15	18
May reflect poorly on faculty teaching/training skills	4	2
Fear of poor student evaluation of faculty member	2	2
	N=83	N=82

Grounds for Dismissal	Percentage
Ethical misconduct	93
Academic deficits	92
Emotional problems which impact professional behavior and/or functioning	81
Clinical skills deficits	78
Interpersonal skills deficits	62
N=90	

Discussion and Implications for Counselor Education

The results of this study indicate that gatekeeping is occurring across the programs surveyed to address issues of professional impairment with students. Due to the disparity in measures programs use and the timing of application of these measures, consistency in effectively handling the gatekeeping obligations in the field of counseling appears to be absent. It is difficult to compare effectiveness of gatekeeping in a program which does not interview students as part of the admissions process and gives feedback only when a concern arises, with a program which conducts pre-admission screening interviews and evaluates students each semester as they progress through the program.

Existing models of gatekeeping suggest a comprehensive approach beginning at pre-admission and continuing through to graduation or dismissal from the program (Bemak, Epp, & Keys, 1999; Wilkerson, 2006; Ziomek-Daigle & Christensen, 2010). The current study affirms these models, taking a holistic approach which would be applied to all students, not just students of concern, from pre-admission to graduation or dismissal from the program. For example, at the pre-admission point, in addition to providing clear information on the evaluation procedures and policies used in the program (consistent with Foster & McAdams (2009) proposing transparency in the process) utilization of a screening interview (individual, group, or both) with prospective students allows program faculty to interact face-to-face with applicants rather than just on paper. Assessing both previous academic performance and personal characteristics essential to the work of the counselor would enhance the picture of prospective applicants.

Once students are admitted to the program, regular evaluation points are suggested for all students to insure that development along academic and professional behavior tracks is occurring. Personal characteristics set forth by Frame & Stevens-Smith (1995) include openness to new ideas, flexibility, willingness to accept and use feedback, awareness of own impact on others, and ability to accept personal responsibility. Incorporating such characteristics into the evaluation process together with grades and clinical skills allows program faculty to have a more complete picture of each student's performance.

In addition, having curricular components in place which provide the opportunity to learn about the impact of the professional work on the practitioner, as well as effective means of self-care would enhance the student's understanding of the work they are preparing to do. McAdams & Foster (2007) suggest a developmental sequence of coursework which focuses not only on counseling knowledge, but also on self-awareness. This is consistent with the curricular components of self-care and understanding the impact of the profession on the counselor suggested in the current study. Also, in terms of curriculum, a clear focus on the ethics of the

profession, through either a stand-alone ethics course, or infusion of ethical material across the curriculum is an essential part of the training program. These curricular components may also serve as preventive measures against professional impairment.

Due process procedures which have been articulated to students at pre-admission are also an essential component to effective gatekeeping. When applied consistently, these procedures ensure that students are given the opportunity to remediate any deficiencies and remain in the program. Transparency of these procedures (Foster & McAdams, 2009) once again allows for all parties to understand the process and lessens the chance that a student can claim unfair treatment. McAdams & Foster (2007) delineate due process considerations for programs, such as clarity of expectations, providing clear supervision and support, providing ongoing progress evaluation, and thorough documentation of all actions.

Because there are clear challenges and “barriers” to program faculty identifying and initiating action with a student of concern, all faculty must understand due process procedures, actively endorse them, and learn to apply them consistently with students. Programs have an additional responsibility to educate their respective institutions about the obligation to gatekeeping and due process for their graduate programs. The push for “bodies in the chairs” must not overshadow the need for effective evaluation and intervention when students of concern are identified.

Our responsibilities as counselor educators are to serve our students, their future clients, the profession and the larger communities in which we live and work. In order to best carry out these interwoven duties, we must strive for excellence and objectivity in selection, training, evaluation and mentoring of our students.

Limitations and Directions for Future Research

The major limitation of the current study is the sample size. Due to the current authors’ efforts to survey programs rather than individuals, the survey was sent to program chairs and directors identified through the graduateguide.com website. It was the intention of this study to address only master’s level programs that train clinicians. If a particular program chair or director was out of the office during the time of the survey, there was no opportunity to collect a response.

However, the authors were able to gather essential information which may enhance the development of a working model of gatekeeping for master’s level training programs. Future research should focus on evaluating components identified in the current study and in previous research to establish the structure of a working model of gatekeeping. In addition, it would be valuable to understand the attitudes of counselor educators toward gatekeeping as well as the barriers to their being able to effectively carry out the gatekeeping responsibilities. In addition, collaboration with professional associations (ACA, ACES, and CACREP) to create a framework for best practices which can be adapted to meet the needs of individual programs would be appropriate.

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