Pfeiffer UNIVERSITY

Master of Arts in Clinical Mental Health Counseling

ANNUAL PROGRAM EVALUATION REPORT

2025–2026

Public Summary of Program Evaluation Results,
Academic Quality Indicators, and Continuous Improvement

Reporting period	2025–2026 Academic Year
Program status	Initial implementation / baseline evaluation cycle
Prepared by	Clinical Mental Health Counseling Program

1. Purpose of the Annual Report

This annual report summarizes the Pfeiffer University Clinical Mental Health Counseling (CMHC) Program's available program evaluation results for the 2025–2026 academic year. It is intended to communicate aggregate findings related to achievement of academic quality indicators, identify the developmental context of the new program, and document how evaluation findings inform continuous program improvement.

The CMHC Program began enrolling students in Fall 2025. Accordingly, 2025–2026 represents the program's first annual evaluation cycle and establishes baseline information for future comparison. Outcomes that depend on later program milestones—including practicum, internship, graduation, credentialing, employment, alumni, employer, and site-supervisor data—were not yet available during this reporting period.

2. Program Mission

The mission of the Clinical Mental Health Counseling Program is to prepare ethical, competent, culturally responsive, and professionally engaged clinical mental health counselors who are equipped to serve diverse individuals, families, groups, and communities. The program emphasizes counselor identity, evidence-informed practice, advocacy, wellness, prevention, social justice, and respect for human dignity.

3. Program Goals/Objectives

1. To foster the development of professional counselors who demonstrate ethical practice and professional identity.
2. To prepare counselors to work effectively with diverse populations across the lifespan.
3. To provide rigorous academic and experiential learning opportunities that integrate theory and practice.
4. To encourage active engagement in advocacy, research, and continued professional development.
5. To instill in students the values of collaboration, leadership, critical thinking, and service to others.

4. Academic Quality Indicator Results

The program has established an 80% minimum performance threshold for its designated Key Performance Indicators (KPIs). During the 2025–2026 reporting period, aggregate results were available for six KPIs, including five foundational curricular-area KPIs and the Clinical Mental Health Counseling specialized practice area. At each available assessment point, 100% of the students assessed (10 of 10) met or exceeded the established 80% minimum performance threshold.

KPI / Curricular Area	Assessment Point	Threshold	Aggregate Result	Status
KPI 1 – Professional Counseling Orientation and Ethical Practice	Summer 2026 – COUN 630 Legal and Ethical Issues in Counseling	80%	100% (10 of 10 students met or exceeded threshold)	Met
KPI 3 – Lifespan Development	Spring 2026 – PSYC 600 Lifespan Development	80%	100% (10 of 10 students met or exceeded threshold)	Met
KPI 5 – Counseling Practice and Relationships	Spring 2026 – COUN 601 Counseling Theories	80%	100% (10 of 10 students met or exceeded threshold)	Met

KPI 7 – Assessment and Diagnostic Processes	Summer 2026 – COUN 604 Diagnosis and Intervention Planning	80%	100% (10 of 10 students met or exceeded threshold)	Met
KPI 8 – Research and Program Evaluation	Fall 2025 – PSYC 625 Research Methods and Program Evaluation	80%	100% (10 of 10 students met or exceeded threshold)	Met
KPI 9 – Clinical Mental Health Counseling Specialized Practice Area	Fall 2025 – COUN 600 Mental Health Counseling	80%	100% (10 of 10 students met or exceeded threshold)	Met

Interpretation. All available KPI results for the 2025–2026 reporting period met the program's established minimum performance expectation. Because this is the first evaluation cycle, these results are treated as baseline data rather than as evidence of a multi-year trend. No curriculum change is indicated solely on the basis of these initial aggregate KPI results; the program will continue collecting comparable data and will examine patterns as additional measurement points and cohorts become available.

Indicators not yet available during this reporting period. KPI data for Social and Cultural Identities and Experiences, Career Development, and Group Counseling and Group Work were not included in the 2025–2026 annual results because the applicable assessment points had not yet occurred within this reporting period. These indicators will be incorporated into subsequent annual reports as data become available.

5. Other Program Evaluation Indicators

The comprehensive evaluation process also includes professional dispositions, retention and academic progression, clinical training outcomes, graduate outcomes, stakeholder feedback, curriculum/course effectiveness, and program resources. Because the program is in its first year, the amount of aggregate data available across these categories varies.

Indicator	2025–2026 Status / Interpretation
Professional dispositions	The program has established a systematic disposition-assessment process. Aggregate disposition results are not reported in the available 2025–2026 Academic Quality Indicators worksheet and therefore are not represented as a numerical result in this report.
Retention and academic progression	Monitored through program and institutional processes. This first annual cycle establishes the baseline for future annual comparison.
Clinical competence / fieldwork	Not yet available. The first cohort had not yet entered practicum or internship during the reporting period.
Graduate outcomes	Not yet available. The program had no graduates during the reporting period; therefore degree completion, credentialing examination, employment, and doctoral admission outcomes could not yet be calculated.
Community partner outcomes	Graduate, employer, and fieldwork site-supervisor outcome data were not yet available because the corresponding stakeholder populations had not yet become available.

Multi-year trends	Not yet available. The 2025–2026 cycle is the baseline year; longitudinal analysis will begin when comparable data from multiple cycles are available.

6. Findings and Continuous Program Improvement

The available 2025–2026 student-learning results indicate that the established minimum threshold was achieved at every KPI assessment point for which aggregate data were available. Because the program is new and the available results represent only the first assessment cycle, faculty will continue to monitor these indicators before drawing conclusions about sustained trends.

The first-year evaluation cycle also identified an important program-development priority: continuing implementation of the comprehensive evaluation system as students progress through the curriculum. During 2026–2027, the program will continue scheduled KPI and professional disposition assessment, add clinical and fieldwork data when applicable, and prepare for collection of graduate and community-partner outcomes as those populations become available.

Evaluation findings will continue to be used to review curriculum alignment, course sequencing, assignments and rubrics, advising and student support, clinical preparation, supervision, policies and procedures, faculty development, and program resources. When an established threshold is not met, faculty will review the relevant evidence, determine whether the finding reflects an isolated concern or broader pattern, identify an appropriate action, assign responsibility and a timeline, and evaluate subsequent evidence for effectiveness.

7. Significant Program Changes / Developments

The principal development during the 2025–2026 reporting period was implementation of the new CMHC Program and establishment of its systematic assessment and continuous-improvement processes. The program implemented designated KPI assessment points, established an 80% minimum performance threshold, developed a systematic professional dispositions assessment process, and established procedures for annual aggregation and review of program evaluation data.

As a new program, additional components of the evaluation system will become active as students reach practicum, internship, graduation, credentialing, and employment milestones. These developments will be reflected in subsequent annual program evaluation reports.

8. Priorities for the 2026–2027 Evaluation Cycle

- Continue collection and annual aggregation of KPI data at designated curriculum points.
- Continue systematic assessment and review of student professional dispositions.
- Collect and analyze fieldwork placement and clinical performance data as students enter practicum and internship.
- Expand stakeholder and community-partner feedback processes as the relevant populations become available.
- Retain comparable annual aggregate data to support future multi-year trend analysis.
- Document any curriculum or program improvements resulting from annual faculty review and evaluate the effectiveness of those actions.

9. Public Reporting and Accountability

This report is intended as the CMHC Program's public annual summary of available program evaluation results for 2025–2026. The program will prepare an annual report following each academic-year evaluation cycle and make the report publicly accessible through the Pfeiffer University CMHC Program webpage. Future reports will incorporate additional academic quality indicators, graduate outcomes, fieldwork placement outcomes, stakeholder feedback, significant program changes, and longitudinal analysis as those data become available.

Summary conclusion	All six KPI assessment points with aggregate results available for the 2025–2026 reporting period met the program's established 80% minimum performance threshold, with 100% (10 of 10) of assessed students meeting or exceeding the threshold at each point. These results establish baseline evidence for future annual and longitudinal evaluation.