

National Counselor Examination™ (NCE®) Content Outline Summer 2027

NBCC Announces Completion of the 2024—2025 Work Analysis Validation Survey for Professional Counselors

The National Board for Certified Counselors (NBCC) is pleased to announce the successful completion of the 2024–2025 Work Analysis Validation Survey for Professional Counselors. More than 14,000 counselors from all U.S. states and territories contributed to this comprehensive study, providing valuable insights into the current state of the counseling profession. Through their participation, NBCC gathered critical information on the knowledge, skills, and tasks essential to competent counseling practice.

With guidance from the Work Analysis Task Force, these findings have been analyzed and organized into an updated content outline. This outline will serve as the foundation for the next versions of the National Counselor Examination (NCE) and the National Clinical Mental Health Counseling Examination (NCMHCE), **scheduled for release in summer 2027**.

We invite you to review the new content outline below.

If you plan to take the NCE prior to summer 2027, please refer to the current content outline at https://nbcc.org/assets/exam/nce content outline.pdf.

NCE Content Outline — Summer 2027

1A: Professional Development

- 1. Seek consultation from a colleague for assistance with a specific skill or modality
- 2. Seek supervision from a counseling supervisor
- 3. Complete continuing education
- 4. Develop knowledge of empirically supported counseling interventions or approaches
- 5. Engage in advocacy for the client and the counseling profession
- 6. Engage in training related to counseling ethics
- 7. Engage in training related to ethical and legal use of artificial intelligence (AI)
- 8. Engage in training related to working with different cultures or populations

Including, but not limited to, knowledge of:

- · Cross-cultural fairness
- Continuing education requirements
- Levels of advocacy and social justice

Including, but not limited to, skill in:

- Engaging in clinical consultation
- Engaging in clinical supervision
- Selecting appropriate continuing education resources

1B: Counselor Self-Awareness

- 1. Address your compassion fatigue (e.g., burnout) potential
- 2. Assess your exposure to vicarious trauma
- 3. Assess your need for specialized training and/or certification
- 4. Assess your strengths and limitations as a counselor
- 5. Assess your suitability to work with a specific client based on their needs and sociocultural considerations
- 6. Utilize self-regulation techniques
- 7. Determine the client-counselor suitability (e.g., counselor has the skills and experience needed, availability, no conflict of interest)
- 8. Determine your competency for administering assessments
- 9. Maintain appropriate boundaries
- 10. Practice self-care
- 11. Practice self-reflection

Including, but not limited to, knowledge of:

- Transference and countertransference within the therapeutic relationship
- The importance of self-care
- Professional scope and limitations
- Power dynamics in the counseling relationship

Including, but not limited to, skill in:

- Reflexivity/bracketing (e.g., emotional regulation)
- Recognizing vicarious trauma and burnout
- Awareness of your own body language as the counselor
- Self-care strategies
- Recognizing the need for professional boundaries
- Managing client caseload

2A: Intake

- 1. Discuss and obtain informed consent/assent from client or guardian
- 2. Initially evaluate barriers to service
- 3. Obtain client self-reports
- 4. Obtain collateral information from other relevant parties (e.g., child and family services, clergy, legal services)
- 5. Review policies and procedures with client
- 6. Obtain informed consent appropriate to clientele (e.g., group, family)
- 7. Obtain informed consent for telemental health services

Including, but not limited to, knowledge of:

- Barriers to service
- Components of informed consent
- Client suitability for telemental health services

- Discussing informed consent
- Explaining policies and procedures
- Conducting a clinical/diagnostic interview

2B: Assessment

- 1. Assess for trauma
- 2. Assess risk to self and others
- Assess substance use
- 4. Conduct biopsychosocial assessments
- 5. Conduct mental status examination
- 6. Determine co-occurring diagnoses, differential diagnoses, and other comorbidities
- 7. Determine the appropriate level of care
- 8. Use formal (e.g., assessment results) and informal (e.g., body language) observations
- 9. Use screening instruments
- 10. Discuss the results of assessments/instruments with the client
- 11. Select, administer, and/or interpret appropriate instruments/assessments that align with contextual, cultural, and developmental considerations
- 12. Use all available data to select the appropriate diagnosis from the most recent DSM/ICD code

Including, but not limited to, knowledge of:

- Foundational knowledge of statistics
- Diagnostic criteria DSM-5-TR
- Diagnostic Criteria ICD-11
- Symptoms of trauma
- Medical diagnoses and symptoms that can contribute to mental health symptoms
- Differential diagnoses, co-occurring diagnoses, and comorbidities
- Risk assessment and risk factors or symptoms
- Cultural idioms of distress
- Cultural implications of diagnosis

- Conducting a diagnostic assessment and evaluation
- Conducting and interpreting assessments
- Conducting formal assessments
- Conducting informal assessments
- Conducting lethal means restriction

3A: Treatment Planning

- 1. Help client prioritize presenting problems
- 2. Develop SMART (Specific, Measurable, Attainable, Realistic, and Timely) counseling goals and objectives
- 3. Develop an initial treatment plan
- 4. Identify strengths and barriers affecting client goal attainment
- 5. Integrate assessment results into treatment plans
- 6. Integrate client's contextual and cultural considerations into treatment plans
- 7. Review diagnosis with client
- 8. Assess for contraindications of treatment approaches
- 9. Collaborate with client to establish treatment goals and objectives
- 10. Collaborate with client to revise treatment plan as needed
- 11. Develop behavioral management plans

Including, but not limited to, knowledge of:

- SMART goals
- Biopsychosocial model
- Short- vs. long-term goals
- Goals vs. objectives
- Counseling theories and interventions
- DSM/ICD
- Behavioral strategies across settings

Including, but not limited to, skill in:

- Aligning appropriate intervention with client need/identity
- Developing initial treatment plan
- Reviewing and revising treatment plan
- Case conceptualization
- Goal-setting
- Differential diagnosis

3B: Continuity of Care

- 1. Refer clients and/or family members to community resources or to specialists
- 2. Develop an aftercare plan
- 3. Discuss with clients how they will maintain progress
- 4. Develop a discharge plan

- 5. Develop a relapse prevention plan
- 6. Develop a plan for disruption of service
- 7. Engage with client in review of progress toward treatment goals at planned intervals
- 8. Evaluate treatment effectiveness and client response
- 9. Collaborate with client to determine counseling termination criteria

Including, but not limited to, knowledge of:

- Levels of care
- Professional wills
- Community partner/resources
- Release of information (ROI) protocols and requirements
- Wraparound services
- Stages of change
- Discharge practices
- Proper termination protocols

Including, but not limited to, skill in:

- Establishing contact with community resources
- Applying relapse prevention strategies
- Evaluating readiness for discharge

4: Provision of Counseling Interventions

- 1. Engage in couples/family dynamic counseling
- 2. Explore the impact of the client's culture, context, values, and worldview
- 3. Facilitate client's skill development
- 4. Facilitate clients' ability to navigate interpersonal relationships
- 5. Foster the group therapeutic process
- 6. Implement empirically supported interventions
- 7. Implement interventions aligned with service modality
- 8. Integrate contextual and cultural influences into counselor—client relationship
- 9. Orient client to the counseling process
- 10. Provide crisis intervention and de-escalation
- 11. Provide psychoeducation
- 12. Solicit client feedback regarding the counseling process
- 13. Support client in advocating for their needs

- 14. Use core counseling skills to facilitate treatment
- 15. Monitor and resolve therapeutic ruptures

Including, but not limited to, knowledge of:

- Substance use disorder interventions
- Core conditions
- Client suitability
- Multicultural and Social Justice Counseling Competencies
- Core counselor/counseling attributes
- Formative and summative feedback
- Counseling theories and strategies
- Counseling modalities

- Addressing inappropriate client behavior during the session
- Reading nonverbal cues
- Active listening
- Open-ended questioning
- Reflecting skills
- Summarizing
- Reframing
- Paraphrasing
- Closed-ended questioning
- Establishing therapeutic alliance/rapport
- Broaching
- Tailoring culturally responsive interventions
- Self-disclosure
- Immediacy
- Applying theories appropriately
- Providing psychoeducation
- Perspective taking
- Use of confrontation
- Use of silence
- Giving feedback
- Crisis intervention
- Repairing and resolving client rupture
- Establish and maintain professional boundaries

- Session management (time management0
- Communicating with clients
- Maintaining confidentiality
- Linking
- Blocking
- Facilitating here and now awareness
- Modeling
- Core counselor attributes
 - o Empathy
 - o Unconditional positive regard
 - o Authenticity
 - o Genuineness
 - o Congruence

5: Indirect Client Care

- 1. Collaborate with client's relevant support systems (e.g., advocate, family, wraparound services, legal services) with goals and objectives
- 2. Collaborate with non-clinical stakeholders (e.g., legal counselor, community resources)
- 3. Collaborate with other treatment providers (e.g., care coordination, interdisciplinary treatment team)
- 4. Document the self-reported effects of client's medication
- 5. Maintain an updated list of referral resources
- 6. Review clinical documentation before client sessions.
- 7. Secure appropriate translation services for clients' preferred language
- 8. Write clinical documentation during or after client sessions

Including, but not limited to, knowledge of:

- Documentation practices and models
- Release of information and confidentiality
- Basic psychopharmacological information
- Professional roles
- Record retention and management

- Completing case notes
- Case conceptualization
- Advocating for client

6: Legal & Ethical Compliance:

- 1. Activate (i.e., follow) an emergency preparedness plan for your counseling practice in response to a relevant incident
- 2. Adhere to internal policies or standard operating procedures (SOPs) relevant to your clinical practice (e.g., informed consent, record retention, release of information, mandated reporting protocols)
- 3. Adhere to relevant state and federal laws and regulations that apply to your clinical practice
- 4. Adhere to telemental health best practice guidelines
- 5. Adhere to the counseling codes of ethics
- 6. Engage in activities to maintain licensure status
- 7. Engage in billing, third-party reimbursement and other insurance panel processes
- 8. Engage in compliance-related training (e.g., insurance, credentialing, billing, payment)
- 9. Ensure telemental health platforms are utilized in compliance with state and federal laws
- 10. Ensure that reimbursement requests are supported by proper clinical documentation
- 11. Implement technology-assisted clinical tools (e.g., online therapy platform, AI note takers, virtual reality tools, calming apps, wearable devices to monitor heart rate and breathing)
- 12. Maintain professional liability insurance
- 13. Practice in accordance with license portability (e.g., Counseling Compact)
- 14. Provide adequate accommodations for clients with disabilities
- 15. Review and update an emergency preparedness plan for your counseling practice
- 16. Securely maintain case notes, records, and files
- 17. Solicit best practices for understanding and adhering to obligations of court proceedings
- 18. Use an electronic health record (EHR) or electronic medical record (EMR) system
- 19. Use artificial intelligence (AI) within counseling practice
- 20. Market your counseling business appropriately (e.g., proper utilization of social media, proper protection of client information)

Including, but not limited to, knowledge of:

- State laws (state licensure law, supervision requirements, abuse reporting, license renewal, CAQH)
- Federal laws (e.g., HIPAA, FERPA, immigration policy, HI-TECH, ADA, NPI)
- Codes of ethics
- Third-party reimbursement, insurance and billing (e.g., CPT codes)
- Counseling Compact
- Emerging technologies in counseling
- Crisis policies and procedures
- Recording keeping and reporting requirements and procedures

- Appropriate logistics for telemental health services
- Scope of practice (e.g., letters of support, working with special populations)
- Alternative medical-assisted/pharmacological interventions

- Maintaining confidentiality
- Discerning reputable training providers and programs
- Troubleshooting technological difficulties during telemental health session (e.g., session disconnects, video not working)
- Billing and third-party reimbursement
- · Accessing state licensure board
- Executing voluntary and involuntary commitments