

Master of Arts in Marriage and Family Therapy



Program Handbook 2023-2024

ACKNOWLEDGMENT

I,, hereby acknowledge the receipt of the
2023-2024 Master of Arts in Marriage and Family Therapy Program Handbook. I realize that I am
responsible for reading and understanding this Handbook, which contains many of the policies,
procedures, rules and regulations to which I will be subject. I further acknowledge that this
Handbook supersedes and replaces any and all prior MAMFT Program Handbooks. I also
understand that it is the intent of the MAMFT Program Handbook to give me some idea as to the
policies to which I will be subject and that it is not a complete manual. Except as provided in this
acknowledgment, I realize the policies may change from time to time and will be posted on
Pathwright under "MFT Program Information" when the policies do change.
Date:
Student's Signature
Student's Name (please print)

Please upload this form in the MFT Info Path on Pathwright. Thank you.

Student Signed Acknowledgement of MFT Profession's Licensure and Regulatory Requirements (and Portability)

The Federal government has designated marriage and family therapy as a core mental health profession along with psychiatry, psychology, social work and psychiatric nursing. Currently, all 50 states support and regulate the profession by licensing marriage and family therapists. (In Canada, only two (2) provinces (Ontario and Quebec) regulate the profession of Marriage and Family Therapy.) However, each state and province have its own laws and regulations about what is needed to become licensed as an MFT in that state/province.

Not every state will accept a degree and supervised hours earned in another state. Review license requirements in the state you intend to practice as soon as possible so that you understand what may and may not be accepted across state lines. Here is the link to each state's licensure resources: MFT State/Provincial Resources (AAMFT.org).

The practice/licensure requirements vary across state and provincial jurisdictions. Included in these licensure requirements are the educational requirements, which include:

- How many credits a master's program must have, as well as the number of credits needed for licensure
- Specific coursework needed
- The length and/or the number of credits of the internship, as well as
 - o the number of direct client hours needed, along with the number of relational hours (marital/couple/family) needed within the total number of hours
 - o the number of supervision hours needed

The coursework for Kairos University was designed to meet MFT licensure requirements in most states. Nevertheless, below is a synopsis of in what states this MFT Program meets the educational licensure requirements:

Kairos University MA MFT degree meets the educational licensure requirements in the following forty-one (41) states/districts:

Alabama, Alaska, Arizona, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Iowa, Kansas, Kentucky, Louisiana, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Oklahoma, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Vermont, Virginia, Washington, Wisconsin, Wyoming, and the District of Columbia (Washington DC).

Three (3) states have special internship hours that could possibly be achieved: Maine, Oregon, and Utah.

Six (6) States Require Specific Coursework that Kairos University's MFT Program does not offer: Arkansas, Indiana, Maryland, North Dakota, Rhode Island, and West Virginia.

One (1) State has Course Requirements that are Specific to the State and cannot be met while in a training program outside of the State: California (You may be able to add the coursework needed from a CA university to meet the additional requirements.)

Please be advised that laws, regulations, and policies may change at any time, so always check with your state/province for the most up-to-date information. You can find this information here.

If you have questions about the program's alignment with professional licensure you may contact your advisor. It is your responsibility to determine if Kairos University's MA MFT program meets the educational requirements in your state.

I acknowledge that I have been informed and understand that licensing regulations differ across states and provinces. I understand that Kairos University's MFT program is designed to meet the licensure requirements of most states and that an MFT degree from this program may not meet MFT licensing requirements in every state.

Signature (may be electronic)	Date

Please upload this form in the MFT Info Path on Pathwright. Thank you.

Choice of Internship Hours

Prior to beginning Internship, each student must choose between completing either a 300 hour or 500 hour Internship. The following is an explanation for this necessity.

The COAMFT Accreditation Standards Version 12.5 (effective 1/1/2022) states that the Internship be "a minimum of 300 direct clinical contact hours with individuals, couples, families, or other systems, at least 100 of which must be *relational hours* that occur over a minimum of twelve months of clinical practice." Nevertheless, there are states that require 500 clinical contact hours for their educational requirements in the state licensing process. It is important to understand at the beginning of the program how many hours you will need in internship to meet the educational requirements where you plan to be licensed.

Portability: Once a person is licensed in one state, it does not mean that that license will be accepted unconditionally by another state. There are "portability" issues (educational requirements differ) when it comes to getting licensed in another state. Please consider any planned relocations in your decision about how many hours of internship you will do as part of your MFT program.

Use the link provided to look at the internship hour educational requirement for licensure in that state. Go here to find each state's and province's licensure laws and regulations or talk to your advisor about finding that information

I,	(please print), declare that I choose (check your choice):
300 h	ours for Internship
500 h	ours for Internship
based on my	understanding that licensure in the state or province of
(print state(s	e) or province(s) requires that number of hours of internship experience.
I acknowledg choice.	e the explanation of the issue of licensure portability, and understand the implications of my
Signature	

Master of Arts in Marriage and Family Therapy Program

WELCOME to the Master of Arts in Marriage and Family Therapy Program at Kairos University! You will be spending the next several years with faculty who, first of all, are committed to Jesus Christ, and then to helping equip you to become competent marriage and family therapists within a caring and collaborative online educational environment. The work entrusted to mental health professionals is that of working with and caring for relationships, and we believe this work begins among ourselves. Among the greatest gifts your professors have to share with you are their collegial spirit of working together and their respect for one another. We anticipate your contact with faculty, staff and students at Kairos will be positive and respectful as well, for these relationships will become the foundation upon which you build new and ever more nurturing ways of being with others.

The faculty respects the diversity that each of you brings to the program. You will be encouraged and supported in your sharing of the journey which has brought you to this place. It will be in the intimate associations of graduate education that you will come to understand yourself more fully and the experiences which may, at this time, be foreign, not understood, or unknown to you. It is with great pleasure, responsibility and trust in God's grace through relationship that the faculty teaches, mentors, supervises and serves you, knowing that we influence one another in immeasurable ways. Respect and professionalism are expected in all interactions. It is through these relationships with faculty, your classmates, and clients that you will grow personally and professionally, and ultimately be presented to the professional community upon graduation. Welcome!

History of the Marriage and Family Therapy Program

Pastoral counseling courses have been offered as part of the MDiv curriculum since the mid 70s, due to the interest of Jim Johnson, D. Min., and Ted Johnson, Ph.D., both of whom worked at Philhaven. In fact, initially there was a contract between Evangelical and Philhaven, for them to provide pastoral counseling courses at Evangelical Seminary. In 2000, Andrew Mercurio, D.Min. joined the faculty to head up the Christian Counseling area. Due to his foresight and conviction that an MFT program would meet a vital need in education for ministry, Andy proposed that the seminary make available an MA in MFT. In 2002 the seminary approved the creation of this degree program, which officially began the Fall of 2002 under the direction of Dr. Mercurio. On July 1, 2003, Joy E. Corby, Ph.D. joined the faculty to assist in the MFT program. Together Andy and Joy made some major adjustments to the MFT program, which quickly grew to be the second largest program of the seminary.

In need of places to fulfill the internship requirements, the decision was made to begin to open our own counseling sites. After being invited to rent space in the new wing that was being built by Cornerstone Family Practice, floor plans were drafted and The Marriage & Family Center at Lititz was opened in October of 2004. The Wenger Family Counseling Center (whose name changed to The Wenger Marriage & Family Center in 2011) opened in May 2006 in the newly renovated rooms on the lower level of the seminary. Another Center was opened in Schuylkill Haven in September 2008, after having worked out of three churches in Schuylkill County for two years prior. The Schuylkill Center was then closed in August 2011 due to insufficient clientele, most probably due to several graduates whose practices are flourishing.

Gwen Scheirer was hired part time July 1, 2007 to help with the work in the MFT department, as a result of the growth it was experiencing. At the end of June 2008, Dr. Mercurio left ETS, while Janet Stauffer, Ph.D. joined the MFT faculty part time July 1, 2008. During the 2008-09 academic year a search was done to find a full time MFT faculty person. As a result, Robert Palmer, Ph.D., D.Min. was hired full time on July 1, 2009. As of July 1, 2014, Gwen switched to another position in the seminary, and Liz Brunsting joined the department as The Marriage and Family Studies Assistant. In January 2015, Dr. John Chuma became the Clinical Director of the centers, as well as an Affiliate Faculty member (through 2018). In October 2018 Liz left and in January 2019, Mariana Gomes Bausher took her place, until she left in June 2022. Together Joy,

Robb, and Janet comprised the MFT department and worked closely together to continually fine-tune the curriculum in order to make the program better. In fact, official accreditation with The Commission on Accreditation for Marriage and Family Therapy Education of the American Association for Marriage and Family Therapy was attained May 1, 2013, and was good through May 1, 2018. The program attained reaccreditation with COAMFTE, good for seven (7) years, from May 1, 2018 – May 1, 2025. The program also was accredited with the International Accreditation Commission for Systemic Therapy Education (IACSTE), from January 1, 2018 through December 31, 2021.

On July 1, 2022, the MFT program at Evangelical Seminary moved to Kairos University.

Kairos University's Mission Statement

Kaios University stewards followers of Jesus who flourish in their vocations for the sake of the world.

Kairos University Organizational Values & Practices

Kairos recognizes that faithful practices must mirror faithful values and is committed to living out our values in a dynamic way under the leading of God's Spirit in fulfilling our mission while actively balancing values that may compete at times.

Presence: People and relationships are at the core of everything we do as an organization. In order to serve people well, we must first be present with them.

Faithfulness: All programs, services, and employees must place trust in God, be rooted in prayer, participate in the kingdom mission, and remain faithful to biblical teaching, the long wisdom of orthodox Christian faith, and our rich institutional heritage.

Affordability: Curriculum and counseling services development and operational planning, processes, and structures are considered alongside their impact on the overall cost to educate a student or provide services to a client, in order to pass cost savings onto students and clients.

Accessibility: Extending programs and services to those God entrusts in our care, regardless of where God has placed them or called them to serve, enables us to meet people where they are. We value a range of offerings, including high-level academic study or long-term therapy to certificate-level education or one-time conversations that bring hope.

Partnership and Collaboration: There is much we can learn and more we can do when we learn from and collaborate with others. Partnership and collaboration take place with other kingdom-minded ministries, networks, denominations, counseling practices, and seminaries to help enhance access to theological education and integrated counseling and to better and more efficiently serve those God has placed in our care.

Outcome-Based Education: Placing our focus on outcomes and assessment at the outcome level creates more naturally-integrative and experiential learning experiences for students. This allows us to focus on curating resources, facilitating learning, and becoming experts at assessment of outcomes.

Technology: Efficient and reliable technology enables us to serve people well and be present with those we serve. Our technical infrastructure (e-learning platforms, computer-based data management systems, etc.) must be dependable, flexible, easy to use, and capable of supporting multiple modes of engagement simultaneously (e.g., live video conference, asynchronous, and in-classroom learning all at the same time).

Cross-Knowledgeability and Collaboration: Collaboration at all levels and broad knowledge of the entire institution and its various initiatives. Cross-knowledgeable staff, faculty, board members, and therapists help us best steward our mission. Staff roles are intentionally cross-functional, and faculty members are cross-disciplinary in their knowledge and mindset. Everyone possesses general knowledge of our distinctives and offerings.

Ongoing Change: Exceptional ability to encourage change and manage the process of change enhances our ability to adapt to the needs of students and clients, changes in our culture, and the ever-changing landscape of theological education.

Innovation: Innovation and the desire to experiment are encouraged. By focusing continually on innovation and experimentation, we can be nimble and more easily find new ways to serve students and clients well within our kingdom calling.

Relevance: The context of the student and/or the client is valued immensely. We recognize the impact these contexts have on how we structure pathways of development for students and clients.

Inclusion: Having diversity that matches the diversity of those we are called to serve enhances our ability to serve in a variety of ways.

MFT Program Outcomes

MFT Program Mission Statement

Congruent with the University's mission statement to stewards followers of Jesus who flourish in their vocations for the sake of the world, the MFT program provides quality education and training in a committed Christian context to develop competent professionals as beginning marriage and family therapists.

Program Purpose

The Master of Arts in Marriage and Family Therapy is designed to prepare men and women to minister in a variety of contexts as entry-level MFTs, committed to restoring lives, building marriages and relationships, and strengthening families. Based upon the relational/systemic theoretical orientation of family systems thinking, the program integrates biblical truth and Christian faith with these understandings. This program meets the academic requirements for state licensure as marriage and family therapists in at least 40 states and District of Columbia.

Program Philosophy

Our philosophy is a blended model of Christian faith and MFT principles and beliefs that reflect Kairos University's mission statement, values, and practices that reflect ATS guidelines. The

program training is guided by a philosophy that incorporates the following values, beliefs and objectives:

- a) that God's Word is applicable to the modern world, its people and its cultures;
- b) that humans are created in the image of a relational God, and therefore relationships are of utmost importance;
- c) that personal and spiritual growth come from understanding the moral-spiritual and psycho-social-cultural dimensions of their lives;
- d) that being aware of and sensitive to issues of diversity and multiculturalism are key to living and working in today's complex world;
- e) that we can offer healing and wholeness to those who are wounded and broken;
- f) that marriage and family therapy and relational/systems theoretical orientations are foundational to understanding individuals and all relationships (couples, families, groups, cultures, societies, etc);
- g) that a relational/multisystem framework that encourages mental, physical, social, relational, emotional and spiritual wholeness and growth is important/optimal;
- h) that we are preparing women and men as leaders to minister in a variety of contexts in a broken and complex multicultural world; and
- i) that we endeavor to maintain at least the county's diversity percentage in which the seminary is located.

PROGRAM GOALS/STUDENT LEARNING OUTCOMES

<u>Program Goal 1: Students will develop competent professional skills (including and related to knowledge, practice, research and ethics) as beginning marriage and family therapists</u>

SLO 1: Students will demonstrate comprehension and application of the relational/systemic marriage and family therapeutic models.

- 1.1 Students will demonstrate comprehension of the MFT models by at least 80% of students receiving a grade of 83% or higher:
 - 1.1.1 On the Theories Paper in CC527 Theories I of MFT and
 - 1.1.2 On the Personal Models Paper in CC528 Theories II of MFT.
 - 1.2 Students will demonstrate comprehension, application and competency of the MFT models by:
 - 1.2.1 at least 80% of the students attaining the program-level competency score in this area, by the end of their internship, as evidenced on the final supervisor's evaluation of intern; and
 - 1.2.2 at least 80% of the students receiving a score of 3.0 or higher for this SLO, on both mid-term evaluations.

SLO 2: Students will be able to articulate what marriage and family theory/theories inform their clinical work and its application to multicultural contexts.

- 2.1 Students will demonstrate use of theory by at least 80% of students receiving a grade of 83% or higher on the theoretical paper in CC528 Theories II of MFT.
- 2.2 Students will demonstrate use of theory and its application to multicultural contexts by at least 80% of students receiving a grade of 83% or higher on the theoretical paper in CC826 Advanced MFT Seminar.
- 2.3 At least 80% of students will demonstrate use of theory by receiving a score of 3.0 or higher for this SLO, on the mid-term 2 evaluation

SLO 3: Students will demonstrate knowledge and competency in assessment, diagnosis, treatment planning, and therapeutic interventions with individuals, couples and families seeking treatment, from a relational/systemic framework that is multiculturally-informed.

- 3.1 Students will demonstrate knowledge of assessment, diagnosis, treatment planning, and therapeutic interventions with individuals, couples and families seeking treatment, from a relational/systemic framework that is multi-culturally-informed by:
 - 3.1.1 at least 80% of students receiving a grade of 83% or higher on the Take Home Exam in CC729 Abusive & Addictive Family Systems;
 - 3.1.2 at least 80% of students pass the Oral Case Presentation (typically in CC847) demonstrating competency in assessment and treatment plan implementation.
 - 3.2 Students will demonstrate competency of assessment, diagnosis, treatment planning, and therapeutic interventions with individuals, couples and families seeking treatment
 - 3.2.1 by at least 80% of the students attaining the program level competency score in this area, by end of their internship, as evidenced on the final supervisor's evaluation of intern.

SLO 4: Students will demonstrate knowledge and basic application of research to marriage and family therapy.

4.1 At least 80% of the students will receive a grade of 83% or higher on the Task Analysis Assessment and Report in CC627 Research in MFT.

SLO 5: Students will demonstrate knowledge and competency of MFT ethical, legal and professional issues

- 5.1 Students will demonstrate knowledge of MFT ethical, legal and professional issues by at least 80% of students receiving a grade of 83% or higher on the Case Studies presentation & /paper in CC728 Ethical, Legal and Professional Issues in MFT.
- 5.2 Students will demonstrate competency of MFT ethical, legal and professional issues by:

5.2.1 at least 80% of the students attaining the program level competency score in this area, by the end of their internship, as evidenced on the final supervisor's evaluation of intern.

<u>Program Goal 2: Deepen student self-awareness, understanding and growth personally, relationally, and spiritually.</u>

- SLO 6: Students will demonstrate awareness of and address "self of the therapist" issues that impact the capacity for practice/service and ministry.
 - 6.1 At least 80% of students will receive a score of 83% or higher on the Personal Addictions Paper in CC729 Abusive & Addictive Family Systems.
 - 6.2 At least 80% of students will receive a score of Pass on the Personal Sexual Journey Narrative in CC837 Sexual Function & Systemic Sex Therapy.
 - 6.3 At least 80% of the students will receive a score of 3.0 or higher for this SLO, on the mid-term 1 & 2 evaluations.
 - 6.4 At least 80% of the students will attain the program level competency score in this area, by the end of their internship, as evidenced on the final supervisor's evaluation of intern.

Program Goal 3: Engage students with issues of diversity and multi-culturalism.

- SLO 7: Students will demonstrate awareness and comprehension of and sensitivity to issues of diversity and multiculturalism in the therapeutic process.
 - 7.1 At least 80% of the students will receive a score of 83% or higher on the Cultural Genogram Paper in CC827 Diversity & Cultural Attunement (formerly named as Gender & Ethnicity)
 - 7.2 At least 80% of the students will receive a grade of 83% or higher on the Posts of Theological positions statements on 7 issues of Diversity in CC648 History and Theology of Marriage & Family.
 - 7.3 At least 80% of the students will attain the program level competency score in this area by the end of their internship, as evidenced on the final supervisor's evaluation of intern.

Program Goal 4: Involve students in Christian faith and spiritual formation.

- SLO 8: Students will demonstrate comprehension and the ability to address faith perspectives and experiences of clients with marriage and family theory and praxis.
 - 8.1 At least 80% of students will receive a score of 83% or higher on the Theology of Sexuality Paper in CC837 Sexual Function & Systemic Sex Therapy.

8.2 At least 80% of students will receive a score of 83% or higher on the Posts of Theological positions statements on 7 issues of Diversity in CC648 History and Theology of Marriage & Family.

8.3 At least 80% of the students will attain the program level competency score in this area by the end of their internship, as evidenced on the final supervisor's evaluation of intern.

Student/Graduate Achievements: accomplishments of graduates as a result of finishing the program.

- 1. Master's programs must demonstrate 70% of graduates for each cohort that achieve *any* level of MFT licensure
- 2. Program will report graduation rates for length of time for each cohort.
- **3.** Graduates of the program will report job placement rates for each cohort.

The Program Outcomes established by the MFT faculty/personnel will be assessed, reviewed and revised as necessary, on a regular basis. A plan has been made for the Plan for the Assessment, Review and Revision of the MAMFT Program's Outcomes) that will be followed, based upon the Assessment Plan Design and Annual Assessment Timeline.

Being accredited by COAMTE, under the new Standards 12.5 (beginning January 2022), we collect data for the student/graduate achievement criteria that includes indicators such as licensure examination pass rates, graduation and retention rates, and employment or job placement. The following are what is currently required: 1) graduation rates for minimum, advertised, and maximum length of time for each cohort; 2) job placement rates for each cohort; and 3) a 70% of graduates from each cohort will achieve any level of MFT licensure.

Roles of Faculty & Students in Governance

It is important that faculty and especially students know and understand their roles in the governance of the MFT program. The roles are simple, as follows:

- The roles of the faculty are to *educate*, *train*, *advise*, *model*, *mentor*, *supervise*, *lead*, *serve* and *learn*, while
- The role of the student is primarily to *learn* (which includes questioning, observing, reading, practicing etc.), *but also to evaluate and provide feedback*. (There will be both formal and informal ways to evaluate the program and to provide feedback, including but not limited to the following: learning outcomes questionnaire, course evaluations, supervisor evaluations, exit interview [upon graduation], and ad hoc surveys).

The MFT personnel participate in regular department meetings, during which many MFT issues are discussed and decisions made.

MFT Student Advisory Committee GUIDELINES (MFT SAC)

The MFT Student Advisory Committee (MFT SAC) was to serve as a bridge between the MFT students and MFT faculty. During the fall semester, each cohort will select one (1) student, as their

representative, to attend a specified program department meeting during which the program and student learning outcomes (SLOs), etc. will be evaluated.

MFT Curriculum

Sixty-five credits are required for this degree. These are distributed in nine areas of concentration, thus meeting the educational requirements for The Commission on Accreditation for Marriage and Family Therapy Education (COAMTE), and for the Higher Learning Commission (HLC) and the Association of Theological Schools (ATS). These areas are: Faith Foundations, Spiritual Formation, Human Development, Marriage & Family Studies, Marriage & Family Therapy, Professional Studies, Research, Personal Enrichment, and a 300 or 500 hour supervised internship. The program assists students to work from a multi-systemic framework that encourages mental, physical, social, relational, emotional, and spiritual wholeness and growth for individuals of all ages, couples, and families.

Courses are typically held live online via Zoom during the afternoon and evening on Tuesday and Thursday. Part time students should expect to attend class on either Tuesday or Thursday - accelerated students attend on both days.

It is possible for students who enter part time, to change and become accelerated part-time. Likewise, those who enter as accelerated part-time students may change to part time. Those students who change their status during the program end up being referred to as "hybrid students." This means that they must work closely with their advisor, since it will not be likely for them to strictly follow the planned curriculum.

Time Limit

The Master of Arts in Marriage and Family Therapy degree may be completed in $2\frac{1}{2}$ -3 years of accelerated part-time study, or $3\frac{1}{2}$ -4 years of part-time study. When exceptional circumstances arise, a student may have up to 6 years to complete the program. Please notice that admissions for new students is limited to the fall semester **only.**

Meet the Faculty & Supervisors

Faculty:

Janet R. Stauffer, Ph.D. Union Institute & University

Professor of Marriage & Family Therapy Phone: 717-865-0496 MFT Program Director email: <u>istauffer@kairos.edu</u>

AAMFT Approved Supervisor

Robb C. Palmer, Ph.D. American Christian College & Sem.; D.Min. Palmer Theological Sem.

Professor of Marriage & Family Therapy Phone: 717-628-2127 **AAMFT Approved Supervisor** email: rpalmer@evangelical.edu

Jen Ransil, MA Evangelical Seminary, (abd) Eastern University Phone: 610-513-7895

Associate Professor of Marriage and Family Therapy email: jen.ransil@evangelical.edu

MFT Program Coordinator **AAMFT Approved Supervisor**

Phone: 717-217-9380 Susan Stewart, MA Evangelical Theological Seminary

Instructor in Marriage & Family Therapy email: susan@wholeandholy.net

Internship Coordinator **AAMFT Supervisor**

Program Internship Supervisors:

Wendy Hill, MA Evangelical Theological Seminary Phone: 404-500-6380 **AAMFT Approved Supervisor** email: WendyHillMFT@gmail.com

Shane Landherr, MA Evangelical Theological Seminary Phone: 484-516-4178 AAMFT Approved Supervisor email:shane@forwardpathcounseling.com

Morgan Richard, MA Evangelical Theological Seminary Phone: 570-765-3233

AAMFT Supervisor Candidate email: morgan@rootedrt.com

Doug Richard, MA Evangelical Theological Seminary Phone: 570-765-8450

AAMFT Supervisor Candidate email: doug@rootrt.com

MFT CURRICULUM - 65 Credits

C	MFT CURRICULUM - 65 Credits	
Su	 ested PROGRAM PREREQUISITES) Bachelor's degree in psychology, social work, sociology, human services, family studie nursing or equivalent is suggested. 	es,
== <u>A.</u>	======================================	=
	CC648 History & Theology of Marriage & Family	3 cr. Total
R.	PIRITUAL FORMATION	
<u> </u>) SF511 Spiritual Formation in Ministry (or an equivalent)	.3 cr. Total
<u>C.</u>	IUMAN DEVELOPMENT	
	CC633 Dynamics of Biopsychosocialspiritual Development and Health across the Life	Span3cr.
	CC827 Diversity & Cultural Attunement (formerly named as Gender & Ethnicity)	
	CC646 Psychological Tests, Measurements & Statistics	
	CC625 Assessment in MFT	
	CC713 Children & Adolescents in Family Therapy.	
		– 13 credits
C		– 13 Cleuits
<u>C.</u>	ARRIAGE & FAMILY STUDIES	2
	CC527 Theories of Marriage & Family Therapy I	
	CC528 Theories of Marriage & Family Therapy II	
	CC525 Foundations for Marriage and Family Therapy	
		– 9 credits
<u>D.</u>	IARRIAGE & FAMILY THERAPY	
	CC637 Family Therapy - Skills and Practice	3 cr.
	CC729 Abusive & Addictive Family Systems	3 cr.
	CC726 Marital Therapy - Theory and Practice	
	CC837 Sexual Function & Dysfunction	
	CC857 Trauma, Resilience, & Resistance	
	CC826 Advanced MFT Seminar	
	CC748 Relevant Issues in the Practice of MFT	
	TOTAI	14 credits
\boldsymbol{F}	ROFESSIONAL STUDIES	
<u></u>	CC728 Ethical, Legal & Professional Issues in Family Therapy	3 cr
	CC 546 Teletherapy Ethics & Professionalism	
		L - 4 credits
F	ESEARCH	L - 4 credits
1.	CC627 Research in Marriage & Family Therapy	3 cr
G.	ERSONAL ENRICHMENT	
	CC617 Personal Growth Plan	0 cr.
H.	NTERNSHIP (21-24 mo.: 300 or 500 client contact hrs./ 100 hrs. of supervision.)	
	C845 Counseling Internship I.	3 cr
	C846 Counseling internship II.	
	C847 Counseling internship III	
	Co4/ Counceling internship III	
	C848 Counseling internship VI.	4 CI.

PROGRAM REQUIREMENTS 65 Credits

TOTAL - 13 credits

PART TIME SCHEDULE

Fall - YEAR 1

CC527 Theories 1

CC525 Foundations for Family Therapy

Winterim - YR 1

CC 646 Tests & Measurements

Spring - YR 1

CC625 Assessment in Family Therapy CC 538 Theories 2

Summer YR 1

CC 728 Ethical & Professional Issues

Fall YR 2

CC637 Family Therapy Skills & Practice CC633 Dynamics of Biopsychosocialspiritual Development

Winterim YR 2

CC 647 Teletherapy Practice & Ethics (new course)

Spring YR 2

CC 726 Marital Therapy CC 729 Abusive & Addictive Family Systems CC 845 Internship 1

Summer YR 2

CC 713 Child & Adolescent Development

Fall YR 3

CC 837 Sexual Function & Systemic Sex Therapy CC 827 Diversity & Cultural Attunement (formerly named as Gender & Ethnicity) CC 846 Internship 2

Winterim YR 3

CC 748 Relevant Issues

Spring YR 3

CC 627 Research CC 857 Trauma, Resilience & Resistance (new course replacing CC 543 Survey of Theology) CC 847 Internship 3

Summer YR 3

CC 648 History & Theology of Marriage and Family(offered May-June)

Fall YR 4

SF 511 Spiritual Disciplines and Practices (asynchronous) CC 848 Internship 4

Winterim YR 4

CC 826 Marriage & Family Advanced Seminar Graduate when complete internship hours - as early as January 2027

ACCELERATED SCHEDULE 2023

Fall YR 1

CC527 Theories 1

CC525 Foundations for Family Therapy

CC637 Family Therapy Skills & Practice

CC633 Dynamics of Biopsychosociospiritual Development

Winterim YR 1

CC 646 Tests & Measurements

CC 647 Teletherapy Practice & Ethics (new course)

Spring YR 1

CC625 Assessment in Family Therapy

CC 538 Theories 2

CC 726 Marital Therapy

CC 729 Abusive & Addictive Family Systems

CC 845 Internship 1

Summer YR 1

CC 728 Ethical & Professional Issues

CC 713 Child & Adolescent Development

Fall YR 2

CC 837 Sexual Function & Systemic Sex Therapy

CC 827 Diversity & Cultural Attunement (formerly named as Gender & Ethnicity)

CC 846 Internship 2

SF 511 Spiritual Disciplines and Practices (asynchronous)

Winterim YR 2

CC 748 Relevant Issues

Spring YR 2

CC 627 Research

CC 857 Trauma, Resilience & Resistance (new course)

CC 847 Internship 3

Summer YR 3

CC 648 History & Theology of Marriage and Family(offered May-June)

CC 826 Marriage & Family Advanced Seminar (offered July-August)

***Graduate when complete internship hours - as early as August (2.5 years)

What to Know About the Program

When students are admitted to the program as an incoming class, they form a cohort that will progress through the program together, offering encouragement and stability to one another. This cohort-centered approach is a major strength of the program that is an intense and sustained experience, described as a transformative journey that unfolds over the length of the program. Another strength of the program is the intentionally sequenced curriculum with purposeful self of the therapist development, while bringing cultural and theological sensitivity into the practice of marriage and family therapy.

Throughout the duration of the program, there will be ongoing assessment and evaluation of individual students, collective student growth, and overall program effectiveness. The MFT Program Outcomes (Program Goals and Student Learning Outcomes) state what is used to assess each goal/outcome, and the Assessment Plan Design and Annual Assessment Timeline/Calendar provide information as to when each assessment is done. Nevertheless, the following things will be used as evaluative tools with each intern at the end of the second (2nd) and fourth (4th) supervision rotations:

- A summary of supervision experience (to include things such as: awareness of new self-of-the-therapist issues, diversity, theories/models, the supervision process itself [the dynamic with supervisor, etc], goals met, etc)
- o A summary of clinical learning
- o A description of client contact experience

Information about the above three (3) items is located on Pathwright under MFT Program Information, and will be attached to the internship evaluations.

Policies

Several policies are in place, according to Standards 12.5. They are:

- ☐ The Policy for: Transparency and Informed Acknowledgement of Information Regarding the MFT Profession, and Licensure & Regulatory Requirements
- ☐ The Policy On: Compliance of Teletherapy and Virtual/Tele-Supervision with Regulatory RequirementsSupervision Plan to Ensure Uninterrupted Supervision
- ☐ Experience/Activity with diverse, marginalized, and/or underserved communities:

 In order to make sure the program meets the requirement of Standards 12.5 Key Element III-D, (that every student has some kind of experience/activity with diverse, marginalized, and/or underserved communities), every MFT student is required to engage in either:

 1) a professional activity (such as therapy, research, MFT relational/systemic supervision, consultation, teaching, etc.) with diverse, marginalized, and/or underserved communities; and/or
 - 2) another type of activity (such as projects, service, interviews, workshops, etc.), as long as the experience is directly related to MFT activities, and the student interacts with members of these communities. This experience is a requirement for CC 827 Diversity & Cultural Attunement (formerly named as Gender & Ethnicity) class.

➤ Oral/Written Clinical Case Presentation (Oral Case)

Guidelines for the Oral/Written Clinical Case Presentation/Evaluation Completed During CC847 MAMFT Counseling internship III

Throughout the internship sequence, students develop clinical competencies. During the third (3rd) Counseling internship/supervision rotation (and into the fourth (4th) Counseling internship/supervision rotation, as needed), students will present an **Oral/Written Clinical Case Presentation**, during their group supervision time, to show evidence of their professional development as a therapist. The major focus will be to demonstrate their application and evaluation of their own theoretical perspective over the course/duration of one clinical relational (couple/family) case, as well as to show progression toward goals. Students will therefore also:

- 1) critique their clinical theory and their use of it with the selected case;
- 2) articulate how personal and professional values fit into the ethical care of their selected clinical case;
- 3) articulate and demonstrate their clinical awareness of and sensitivity to larger contextual/diversity issues within their selected case and how this impacts their ability to provide ethical, clinical care; and
- 4) briefly articulate their development of the self of the therapist in relation to the therapeutic process.

A pass/fail grade will be given, and *students must pass this evaluation in order to graduate from the MAMFT Program*. If a student fails the first time, they will be allowed to redo this presentation a second time, during the 4th internship (CC847).

Oral/Written Clinical Case Presentation: Students will complete the three (3) Gehart forms (Case Conceptualization along with the genogram, Clinical Assessment, and Treatment Plan) for the case that they choose and also write a brief summary of their theory of therapy that they are applying to the case they will present. The three forms and summary must be uploaded to their Google drive and shared with their group supervision supervisor and peers two (2) weeks prior to the presentation. Students will then formally present their Oral/Written Clinical Case Presentation during the group supervision time of the third internship (CC847). The format for this 1.5+ hour oral presentation will include (see grading rubrics for this):

- 1) a 10-minute summary of the case;
- 2) 4 to 6 video-taped clips from one relational clinical case (family or couple), with commentary/explanation and reflection on the video-taped sections (40-50 minutes);
- 3) 30 minutes of questions by faculty/supervisors and answers by the presenting student;
- 4) 15 minutes for an oral self-reflection and internship group reflection on the growth as a therapist of the presenter, over the course of the program until that point.

Persons involved:

The group supervisor will be present for the Oral Case presentation and will do the interactive discussion/question & answers portion of the presentation and write the initial evaluation. Oral case presentations will be recorded and available for other core faculty and program supervisor review. A student may request for additional evaluation from core faculty and program supervisors.

Criteria and suggested timeline/format for this presentation:

- 1) The case must be relational a couple or family, with the expectation of a minimum of 6 sessions;
- 2) Two weeks prior to the Presentation, students will upload to their Google drive and share the completed three (3) Gehart forms (inclusive of a genogram), and a summary of their theory of therapy that is applied to the case for presentation;
- 3) Provide a hand-out for fellow interns in that group supervision, of:
 - a. the summary of the student's theory of therapy that is applied to the case,
 - b. a copy of the genogram for the case;
- 4) Provide a hand-out summarizing each of the video clips, with the following information:
 - a. session date and session number
 - b. a brief description of what you are demonstrating in this video clip; and
 - c. a brief assessment/critique of your work in this video clip;
- 5) The student presenting will give a 10-minute summary of their chosen case;
- 6) 40-50 minutes of 4-6 video clips, possibly with discussion between clips. You will not be allowed to go over the time. Clips must reflect your work over time and demonstrate at least the following competencies:
 - a. Understanding of your theoretical orientation;
 - b. Clinical understanding of the case [conceptualization, clinical assessment & diagnosis (if applicable), and systemic relationships];
 - c. Progression of therapy toward the goals, with the use of the student's theory;
 - d. Self-of-the-therapist and/or family-of-origin issues showing up during the process;
 - e. An exploration of contextual/diversity issues; and
 - f. An explanation of any ethical and professional issues involved in the case.
- 7) 30 minutes of questions and feedback from supervisors (and other students if there is time), of the presenter's overall work
- 8) Closing the presentation with expressions of confirmation, affirmation and blessing by all present.

When writing your theory of therapy, it is not just telling us what the theory is all about; you are to explain the basics of the theory *as it applies to your relational case*. Explain why you chose this theory (theories – no more than one or two supporting theories may be used), based on your case. Then explain how you used the theory/theories to help the client achieve their goals of therapy. You will need to include a written explanation of the contextual/diversity issues, as well as the ethical and professional issues, and the self-of-the-therapist issues involved in the case.

Course Description in the catalog: (covering the Oral Presentations) CC847 MAMFT COUNSELING Internship III

(See the course description for CC845.) During this internship, students will focus on preparing and presenting, during group supervision, a competent application of their theory of therapy to one of their relational clinical cases (family or couple), to show evidence of their professional development and competency, as well as to show progression toward their goals while using their theory. [A competent application of a theory of therapy will include the following aspects: contextual/diversity issues, ethical and professional issues, and self-of-the-therapist issues.] A pass/fail grade will be given, and students must pass this evaluation in order to graduate from the MAMFT Program. If a student fails the first time, they will be allowed to redo this presentation a second time, during the

4th internship (CC847)

In preparation for the Oral Presentation, Group Supervision during the first year of internship will be used to help student interns prepare for their Orals. The following are the guidelines for group supervision (year 1):

All interns are expected to present a client case during group supervision on a rotation basis. The rotation will consist of three (3) interns presenting their client cases during each monthly group supervision. This means that at each monthly supervision, volunteers/selected interns will agree to present during the next group supervision time, so that all interns will present on a rotation basis.

The presentation will include: the choice of at least one recording clip of a client case (preferably a relational case); the submission of documents (see below), as well as emailing certain documents to the other group supervision participants; a summary/explanation of the chosen case; and showing the recording clip. The supervisor will then interact with the intern, asking questions about the case and providing insight, help and suggestions. Following this, the other interns will be given an opportunity to ask questions and make comments.

For the presentation, the intern is to submit the following information/documents (Group Supervision) by noon the day before group supervision takes place, and to all intern participants (electronically via email):

- 1. A three-generation genogram of the client case
- 2. The Case Conceptualization and Treatment Plan, if they have been done
- 3. A hand-out summarizing the video clip(s), to include:
 - a. Session date and session number;
 - b. If done in-person or online
 - c. A brief description of what you are demonstrating in the video clip (what theory and its intervention are you attempting to use with the client)
 - d. A brief assessment/critique of your work in this video clip (what did you do well and not so well; suggest what you could have done differently)
- 4. Any self-of-the-therapist issues or family-of-origin issues showing up during this case.
- 5. What the intern is looking for from the supervisor/supervision time

At the beginning of the presentation, the intern is to give a brief summary/explanation of their chosen case, to include:

- 1. the theory (s)he has chosen to apply to this case, and if that hasn't been done yet, then what theory (s)he is thinking about using.
- 2. What progression of therapy toward the goals has taken place.
- 3. Any contextual/diversity issues present in the case.
- 4. Any ethical and professional issues involved in the case.

Before sharing the recording clip, the intern is to briefly state what (s)he is demonstrating in the video clip. After showing the clip, the intern is to give a brief critique of what they did. The supervisor will then ask questions and provide feedback, after which the other interns may ask questions and offer comments.

This process is intended to help prepare interns for their Oral Presentation.

Core Courses

The courses that comprise what are referred to as *core courses* include: CC525 Foundations for Family Therapy, CC527 Theories I of MFT, CC528 Theories II of MFT, CC625 Assessment in MFT, CC637 Family Therapy Skills & Practice, CC726 Marital Therapy Theory & Practice, and CC728 Ethical, Legal & Professional Issues in MFT.

Internship Admission and Process

Before any student in the MAMFT program can begin their clinical portion of the program, the internship, certain criteria must be met. (Most students are expected to be ready at the prescribed time – depending on whether they are part time, accelerated part-time or "hybrids," but some may not be ready to make this step.) The following criteria must be met in order to proceed into the clinical internship:

- 1. a minimum 3.0 grade point average in all *core* MFT courses completed, *with no grade lower than a C in any MFT course*. [For those entering *part-time*, the following courses must have been successfully completed: CC525, CC527, CC528, CC625, CC637, & CC633. For those entering *accelerated part-time*, the following courses must have been successfully completed: CC525, CC527, CC637, & CC633; and then the students *must* be enrolled in CC528, CC625, CC726 and CC729 in the Spring semester.]
- 2. a student must have submitted and received approval for his/her Personal Growth Plan proposal (inclusive of a beginning and end date), which is to be completed for *part-time* students by the end of their second year (by the end of June), and for *accelerated part-time* students by the end of their first year (by the end of June), thus giving all one year to complete it.
- 3. MFT faculty will determine student readiness to begin the internship by conducting an evaluation of each student 2-3 months prior to the anticipated beginning, which may include a personal interview.

Beginning the internship is contingent upon meeting these criteria and the evaluation as indicated.

As a result of this evaluation, the student may receive one of the following outcomes:

1) Admittance to the internship with <u>No Restrictions</u>: the student will begin the internship during the appointed semester. **These documents will be collected during CC 637 Family Therapy Skills & Practice.**

(*The signed "Choice of internship Hours" sheet - collected before enrollment.)

- a) The Proposal for Internship Site form
- b) The signed "internship Agreement"
- c) Submitted (and received approval for) a proposal for your Personal Growth Plan (PGP) in your Google Drive folder
- d) A copy of his/her Student Membership in AAMFT.
- e) The three "Clearances" needed to practice in your state or providence (to be paid by each student):

For example, in Pennsylvania you would need:

- 1) PA Child Abuse History;
- 2) PA State Police Criminal Record Check; and
- 3) FBI Criminal History Check.
- 2) Admittance to the internship with <u>Restrictions</u>: the student will develop and write a plan that addresses the identified concerns in consultation with an MFT faculty member.
- 3) Admittance withheld so that Restrictions can be dealt with first: the student will develop and write a plan that addresses the identified concerns, in consultation with an MFT faculty member, and then submit this to the Program Director. Regular reports of progress will be expected. An evaluation by the MFT faculty will take place at the end of the specified period of time. The following are the possible outcomes of this evaluation:
 - 1) Begin the internship, with No Restrictions
 - 2) Begin the internship, with Restrictions: the student will develop and write a plan that addresses the identified concerns, in consultation with his/her supervisor, and then submit this to the Program Director.
 - 3) Continue the break for an agreed upon time period: the student will continue to implement the established plan and/or make adjustments to it, with the approval of the Program Director.
 - 4) No Re-entry into the internship: the student no longer qualifies to continue in the MFT Program.
- 4) No Admittance to the internship: the student does not qualify to enter the clinical program. This means that the student no longer qualifies to continue in the MFT program.

What to Expect in the Internship Experience

Note: This outline serves as an overview for the internship experience recommended for most students through the Marriage and Family Therapy program. It should be noted that some students' plans may differ from this outline depending on the transfer of credits from another graduate degree, when the student wants to begin seeing clients, or taking classes at an accelerated pace. Please talk with your advisor about any questions you might have about your learning experience.

PRE-INTERNSHIP TIMELINE:

For both PT/Accelerated students, the preparation for internship formally begins with enrollment in the CC 637 Family Therapy Skills & Practice. While taking this course, you will obtain the required background checks and clearances for your home state, join the American Association of Marriage and Family Therapists as a student member, and confirm your state's required internship hours for licensure.

You will also need to identify a site for your internship experience. Ideal internship sites will serve individuals, couples, and families from a systems lens and provide care for a variety of concerns. To be approved, the site needs to have a licensed mental health provider (LMFT, LPC, or LSW) who will oversee your clinical experience. This includes assigning cases, assuring client and intern safety, and collaborating with the MFT program supervisors as needed.

When you have identified a site that is open to taking you on as an intern, the Proposal for Internship Site form will need to be filled out and submitted to the Site Coordinator. This form can be found on the MFT Program page under Forms Necessary to Begin Internship. We will then contact the site, answer any questions, and have them complete an Agreement Form as an internship site.

In addition to the forms and clearances needed to begin internship, students are also asked to complete <u>CC 617: Personal Growth Plan (0 credits)</u>. This is a two-fold opportunity: a chance to sit on the other side of therapy as the client and to address any issue that might come up personally as you engage with clients as the therapist intern. Your therapy experience needs to be with a licensed mental health provider, preferably a LMFT. A licensed professional counselor or social worker is also acceptable if they are addressing the presenting issues from a systems perspective. This is also an opportunity to address areas that need growth or healing in order to be a better therapist.

You will submit a Personal Growth Plan proposal to the program director or coordinator. The proposal needs to have start and end dates, the therapist that you have engaged to do therapy, and a brief description of the growth plan. You are not required to give specific details about the issues you will address, just a general description of the goal. An example might be, "I will address conflict resolution in my relationship with extended family," or "I will consider alternative ways to relate to my adult children." You will complete your planned sessions and then write a reflection on the experience, noting the growth or insight gained.

The final item that needs to be in place to begin an internship is the Pre-internship Evaluation (Midterm 1) conducted by faculty. Based on our observations of your academic performance and course interactions with peers and faculty, faculty will make a recommendation about your readiness to begin to see clients. The evaluation process is discussed further in the Internship Handbook.

BEGINNING INTERNSHIP 1 & SUPERVISION

Once you have established your internship site, you will work with the site coordinator to begin seeing clients. We recommend that clients gradually be added to your caseload over the six-month

internship rotation starting with a few clients (2-3/wk in the first months and working towards 6-7/wk at the end of the rotation)

You will also begin supervision at this time. The first (full) week of the month is group supervision. Group supervision consists of several peer interns and a core faculty member as your supervisor. You will also be assigned a program supervisor to meet weekly for the rest of the month. This will be one-on-one or in dyad (two interns) and will overview the sessions you have had with clients. Case overview highlighting conceptualization, treatment planning, assessment are important aspects of supervision. This is a great time to bring up ethical or professional concerns as well and to develop strong cultural attunement skills. You are expected to record audio/visual data from your sessions and present the information during supervision.

*Note: Students are able to count hours of supervision from your internship site there is an AAMFT Approved Supervisor, AAMFT Supervisor Candidate, or other licensed clinician who has *relational* supervision experience (as defined by COAMFTE standards 12.5) who is willing to provide weekly supervision and fill out the internship evaluation at the end of the rotation. If you are able to obtain supervision from your site supervisor that can count toward your internship requirements, you will meet 1x/month with a core faculty supervisor instead of additional weekly supervision. All students attend group supervision, regardless of where they receive their weekly supervision.

INTERNSHIP PAPERWORK

Interns are expected to fill out the clinical paperwork required by their site. Additionally, in the first internship rotation, interns should fill out MFT Program Case Conceptualization forms (based on Gehart's *Mastering Competencies in Family Therapy*), Clinical Assessment, and Treatment Plan for each client. More details are provided in the internship handbook on timing for these forms. Students also need to provide their program educational supervisor a written educational summary of the case as it progresses. As students move into internship 2 and 3, program educational supervisors will determine the need to continue with the case conceptualization and clinical assessment forms as necessary.

PAID INTERNSHIPS

If your site offers interns compensation for seeing clients, you are free to enter into contracts for pay. Interns may not see clients independently. You must be directly supervised by a licensed therapist who is overseeing your caseload, ethical/legal responsibilities associated with a therapy practice, and obligation to provide quality care for clients.

INTERNSHIP COMPLETION

Internship standards (COAMFTE 12.5) require 100 hours of supervision during internship (individual, dyad, or group). Supervision hours are in addition to the 300 client direct contact hours needed for the program requirements to complete internship. The program also stipulates 100 hours be RELATIONAL, either couple or family, in the 300 client hours. At least 50 hours of your supervision needs to include observable data from clinical work: such as visual/audio recordings of sessions or live supervision. Please count a relational hour if more than one person is in the session for at least half of the session time.

As we look for ways to accommodate the needs and interests of our students, we balance factors like convenience, efficiency, and flexibility with developing competent, well-prepared therapists. Internship experience is not only about the number of hours accrued but demonstrating increased competence in the work of therapy. Moving from one internship rotation to another will be determined by competency, not hours logged. Additionally, supervision needs to be a meaningful experience in growing the therapist. You will need to pace your supervision hours to match how many clients you are seeing in each internship rotation. The current program outlined in the handbook provides 100 hours of supervision by the end of a fourth rotation of internship.

ACCELERATED INTERNSHIP EXPERIENCE

A minimum of 3 rotations lasting six months are typically needed to meet the requirements of the program. In the first and second rotation, you will be assigned a few clients each week and you will meet in a dyad (2 interns) with your supervisor on the weeks that you do not have group supervision. The third rotation builds clinical hours and supervision needs to match the additional hours. Oral case is presented in the 3rd rotation. Supervision hours can increase in a couple of ways:

- 1) Weekly supervision can increase to 1.5 hours to match the pace of client hours if you are seeing more than 10 clients each week. This will need to be approved by your individual supervisor. (1:5 ratio of supervision hours to client hrs)
- 2) If your internship site has an AAMFT Approved Supervisor and you meet with him/her in individual, dyad, or group supervision, these hours may be counted toward your supervision hours. Please let the program director or coordinator know if you are able to utilize an onsite supervisor for additional hours.
- 3) In your second and third internship rotation, you may join an additional group supervision with one of the program supervisors. The day/time for this group will be determined by those who are interested in attending this group. This group will be offered to students with more than 10 clients in their caseload.

The following are the internship requirements for MFT intern therapists:

- 1. The internship's duration is usually for 21-24 months (customarily serving a minimum of 18 months).
- 2. During the 21-24 months, the intern therapist is to complete a total of either 300 or 500 face-to-face client contact hours, of which 100 hours *must* be "relational" hours. A relational hour is when the intern meets with a couple or family in the therapy room for at least 30 minutes. (Group therapy typically does not count toward relational hours- please talk to your advisor or supervisor about the rare occasions where this might be possible.)
- 3. Internship may consist of both in person (same physical location) and teletherapy (online) face-to-face hours. Students must have a **minimum of 150 in-person hours** in their internship experience.
- 4. The intern therapist is expected to work at least one day or partial day per week (depending upon client caseload and agency expectations) at the internship/internship site.
- 5. The intern therapist **must** participate in weekly supervision (of 1 hr), and is to be supervised by one of the MAMFT program's educational supervisors or the person who meets COAMFTE clinical supervisor credentials (as explained above), throughout the duration of her/his internship.
 - a. Supervision will be broken into four, 6-month rotations (paralleling the four semesters that students register for internship).
 - b. *Group supervision* will take place once per month for two (2) hours usually *during* the first week of every month, and interns will **not** meet for their individual supervision during that week.
 - c. Each clinical site provides the legal responsibility for the clients being seen during internship. The weekly supervision provided by the MFT program supervisors is considered secondary and educational to the supervision received at the agency, as ultimate clinical responsibility resides with the agency. The agency *must* agree to this responsibility for their clients.
- 6. Complete a minimum of 100 hours of supervision with the MAMFT program supervisors. One half (50 hours) of the total hours of supervision must be "raw data" (live and/or recorded). This means that therapy sessions need to be recorded as much as possible. Also note that if an intern were to receive no supervision during any calendar month, none of the client contact hours will be permitted to count toward his/her total clinical hours!
- 7. The intern is expected to apply what is learned in supervision to her/his client cases. There will be times when a specific directive is given by the supervisor for an intern to do or not do (most likely in cases that tend to be difficult and/or have ethical issues, thus needing more direction); the intern is expected to follow through and carry out the directive. If the intern, for whatever reason, decides to not carry out the given directive, this will be considered a breach of ethics, resulting in consequences, including possible dismissal from the program, depending upon the seriousness of the breach. The supervisor's experience and knowledge must be honored. [If the intern has a question about a given supervisor's directive, (s)he may contact the Program Director or advisor.]
- 8. The internship Evaluations will be uploaded to the students Google drive at the end of each supervisory rotation/internship.

Successful performance will be demonstrated at the end of CC845 by having a cumulative score of 2.0 or higher in each of the five "skill areas."
 In CC846, successful performance will be demonstrated by showing some progression in theoretical competency and skills development from the previous internship evaluation (ideally demonstrated in most categories).
 Successful performance will be demonstrated at the end of CC847 by showing some progression in theoretical competency and skills development from the previous internship evaluation, and/or maintaining competency once attained.
 Successful performance of the final internship, CC848, will be demonstrated by attaining the program level competency score (which is 4.0) in at least four (4) of five (5) "skill areas" of the evaluation. The student will receive a grade of "CR"

Ending the Program

upon successful completion of each internship.

Each student must undergo an exit assessment. The assessment is an exit questionnaire sent to the student near graduation. This assessment is **very** important as it helps us assess our program goals, so please participate in this!

General Policies & Definitions

Policy for: Transparency and Informed Acknowledgement of Information Regarding the MFT Profession, and Licensure & Regulatory Requirements

All prospective students in the application process will be informed whether this MFT Program meets the educational requirements for licensure for the state in which they reside or plan to be licensed. Once an applicant has been accepted as a student in the MAMFT Program, and has confirmed their acceptance, the MAMFT Program Handbook will be sent to them several weeks before the commencement of the fall semester classes.

Supervision Plan/Policy to Assure Uninterrupted Supervision (Key Element III-C)

COAMFTE regulations require that each intern gets weekly supervision, with a total of 100 hours during their internship. Supervisors are therefore expected to provide **weekly** supervision of one hour, for both dyads and for individuals, except for the week when group supervision is provided. When a supervisor goes on *vacation*, it is the responsibility of that supervisor to make arrangements with another one of the program's supervisors to meet with their interns/supervisees while they are gone. (This principle is also applicable to those who provide monthly group supervision.) An intern cannot go without their weekly supervision when a supervisor goes on vacation. (However, when an intern goes on vacation, they do not have to meet for supervision the week of their vacation.)

Disability Policy

Students with disabilities seeking reasonable accommodations must identify their needs to the Registrar Brandi Pohlmeier, Phone: 605-336-6588, Email: bpohlmeier@kairos.edu. To fully evaluate request for accommodations, the Office of Enrollment Management requests documentation to verify a student's disability (Kairos Student Handbook, p. 11).

Academic Integrity

Academic honesty in your work is expected and required. All work must be your own. Violations of academic integrity/honesty include, but are not limited to: *plagiarism* (substituting as one's own work part or all of any assignment, oral or written, that is copied, paraphrased or purchased from another source, including on-line sources, without proper acknowledgement of that source); *cheating*; and *facilitating academic dishonesty* (helping another student violate this policy). Academic dishonesty is a serious infraction and will not be tolerated. Any student found guilty of plagiarism risks failure of the assignment, and possibly the course. Located on Pathwright, under the MFT Program Information, is a document entitled *APA Guidelines and Plagiarism*. **Please** refer to this. Also please see the Kairos Student Handbook policy concerning academic integrity/honesty.

APA Format

All papers submitted during your tenure in the MFT Program will be written in APA format. Located on Pathwright, under the MFT Program Information, is a document entitled *APA Guidelines and Plagiarism*. **Please** refer to this to make sure you write your papers according to APA style.

Attendance & Assignments

Students are expected to attend all classes and to come prepared by reading what has been assigned. Unless instructed otherwise, submission of assignments should be completed before the class begins to be considered "on time". Students are also expected to be punctual to the online class! Please treat attending online classes with the same courtesy and decorum as if you were in person in a classroom. Students should be seated in a well-lit environment conducive to academic learning. Cameras should remain on video transmission mode except for extenuating circumstances. Driving during class, talking to others in your environment (even while muted), or other distracting behaviors should be avoided.

Grades

An MFT student is expected to maintain a minimum 3.0 grade point average in all *core* MFT courses, with no grade lower than a C in *any* MFT course. If a student receives a C- or lower in any marriage and family therapy course, that course **must** be repeated. MFT faculty uses grade equivalents that are established and stated in the seminary catalog.

Professional Ethics

While a student is enrolled in the MAMFT Program, you will be expected to adhere to the AAMFT Code of Ethics. Violation of the professional standards may result in disciplinary action and possible dismissal from the program.

Evaluation, Assessment & Collection of Information: Policies and Procedures

In order to improve the Program, as well as to meet the requirements for accreditation, assessment and evaluation of students will take place throughout the program, and additionally as a graduate of the program. As a new student, basic information about you will be gathered and reported to the MFT Program Director.

There are two "Mid-term Evaluations" of all MFT students that are done by the MFT faculty. The first evaluation is done 3-4 months prior to beginning the internship. This evaluation determines a student's preparedness to begin the internship. Once a student has begun the internship, the second evaluation is done 7-10 months later, by the MFT faculty. The intent of this evaluation is to make sure that interns are progressing appropriately both professionally and personally in their internship experience. Each student involved in these evaluations will receive a letter informing him/her of the results of the completed evaluation, along with an electronic copy of the evaluation.

While participating in the internship, at the end of each rotation of supervision (each rotation is 6 months, with the final rotation possibly being either shorter or longer), evaluations will be conducted and uploaded to the student's Google folder. These evaluations include an intern self-evaluation, the supervisor's evaluation of the intern, and the intern's evaluation of the supervisor.

The MFT Program has an Assessment Plan for the Program Outcomes: Program Goals, Student Learning Outcomes, and Faculty Outcomes), which uses the grades of various papers, exams, and evaluation results. According to this Assessment Plan, each Student Learning Outcome (SLO) is clearly labeled in how it applies to the program goals. This information and data collected will remain anonymous and will be used for assessment purposes for the improvement of the Program.

After graduating from the MAMFT Program, you will occasionally receive a survey that will ask different kinds of questions that will help us collect information for the purpose of submitting the COAMFTE Annual Report and for providing evidence of the program attaining its Program Outcomes in order to maintain COAMFTE accreditation. We will greatly appreciate your participation in these.

Student Safety and Protection of Private Information

Safety is the ability to express oneself without fear of reprisal. MFT program faculty and students commit to not discriminate based on students' race, ethnicity, class, gender, sexuality, religion, or worldview. Safety involves the expression of diverse opinions and disagreement through respectful, open and ongoing dialogue. Safety does not include freedom from discomfort, as students grow through challenging experiences, which may cause discomfort.

Self-awareness and personal growth are important aspects of development as a professional therapist. Courses in the program will have assignments that will invite students to share personal information in small and large groups and in written assignments. The MFT faculty wants you to know that you will never be forced to share information that you are uncomfortable sharing. We seek to protect your privacy, yet stretch you to become transparent while developing appropriate boundaries as a professional. The faculty is committed to creating a safe environment in which you

can address personal concerns. We encourage you as a therapist-in-training to stretch and to risk more with us and your student colleagues than you might normally be prepared to do. In general, self-reflection is worth the discomfort in terms of the growth it can produce for you, and what it adds to your ability to be helpful to others.

In the process of becoming a marriage and family therapist, personal issues are often brought up for students. This is normal and to be expected. When painful experiences from a student's past come up and even get in the way of the clinical work, we expect you to address clinical impairment in supervision or even with MFT faculty. We will be happy to discuss these issues as they pertain to clinical work, but will make referrals for therapy when the issue needs to be addressed more thoroughly by the student.

Faculty members share student clinical and academic information and progress with each other when evaluating student progress. Personal information directly and specifically related to academic performance and clinical practice may be discussed during these evaluation sessions. Otherwise, faculty will not share personal confidences or struggles of students with one another.

Grievances Policies

Please check the Kairos University Student Handbook for academic and other grievances policies. This is found on Pathwright under Student and mentor Resources, which can be accessed by clicking on the Menu in the top left corner and then looking for the link about halfway down the menu. You can access it here: http://kairos.edu/studenthandbook.

Serious Responsibility of the MFT Faculty

We are committed to helping you thrive in developing your gifting and calling to its fullest. That is the reason we are here. Nevertheless, because marriage and family therapists intervene in the lives of other people, their clients, it is of utmost importance that only competent beginning-level clinicians be allowed to graduate. In cases where a student is severely lacking in clinical skill and/or who is severely hindered by personal difficulties, it is the serious responsibility of the MFT faculty to identify the student and his/her difficulties and to advise that student in another, different direction, out of the program.

Advising a student out of the program is a sad and difficult situation for both student and faculty. Because of this, faculty will attempt to work with any student who exhibits such deficiencies. Advising a student out of the program is very rare and steps are taken to discern with the student in

the process. Deficiencies include, but are not limited to the following:

- 1. inability to appropriately apply theoretical material in a clinical setting. This includes being unable to engage clients in therapy, to adequately conceptualize cases, to diagnose existing problems, and to design and implement treatment plans and strategies.
- 2. consistent failure to work with supervisors, faculty and/or students.
- **3.** manifestation of either a serious enough emotional problem or personal issue that negatively impacts clients, and either make no effort to resolve these problems or, after engaging in therapy, have made insufficient gains to continue in the practice of marriage and family therapy.

The explanation and possible outcomes of the student evaluation prior to beginning internship and of the intern evaluation 7-10 months after beginning internship are in place to serve as guidelines to respond to a student who may be struggling with deficiencies.

Pathwright

Kairos University uses Pathwright to aid in course organization. Syllabi and information will be located on Pathwright under each class. Each student is responsible for the information the professor places there and is expected to be able to utilize the system to submit assignments and forms, access rubrics and course materials, register for the next courses needed in the program, and communicate with professors.

MFT Program Information can be found on Pathwright as well. You will find your cohort (year you entered the program) MFT handbook, Internship Handbook, interactive forms for internship, and much more! Occasionally, we receive invitations from students in other COAMFTE schools who are doing research projects for their degree. The Program Director will place all such invitations on Pathwright. Please look on Pathwright from time to time to check what research projects in which you are willing to participate, and thus help out another fellow MFT student somewhere else! Thanks!

Technology Training for Students/Faculty/Supervisors

New students, faculty and supervisors will receive training via emails, instructions and videos. Students are responsible for the information they receive. If you have technology questions, please contact your advisor and they will put you in touch with the assistance you need. Please make sure that you check your email frequently and/or set up email alerts to a regularly checked email.

Definition of Diversity

The program agreed to adopt COAMFTE's definition of diversity during the May 5, 2015 program meeting. The program's definition of diversity is: *Diversity includes (but is not limited to) race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religion, spiritual and/or religious beliefs, nation or origin, or other relevant social categories, immigration or language.*

PERSONAL DEVELOPMENT

Aside from the professional development that this program affords, students will be challenged to grow personally in their own relationships whether that be family, marriage, or personal ones. A therapist cannot lead others to places where they are not willing to go themselves. The focus here is not upon perfection of character and relationships, but rather upon the intentionality and integrity of marriage and family therapists to focus and deal with their own issues as an ongoing process of formation in the steps of the living Christ. Structures and formats for personal development include, but are not limited to:

PERSONAL GROWTH PLAN

Students will email a proposal to jen.ransil@evangelical.edu no later than 1 semester before beginning internship. Proposal should include the name and credentials of the therapist, the proposed date, and a general description of the topics that you will address. (No one needs to disclose therapy details. Descriptions can be something like, "Address conflict with step-children" or "Consider changing roles with aging parents." After you complete six sessions (at least), submit a one-page reflective narrative of what the process was like and what you learned from it. Upload your completed Personal Growth Plan (PGP) to your Google folder under pre-requisite documents for internship.

ADVISOR ROLE

At the start of the program, students will be assigned a faculty advisor. In keeping with the Kairos model of mentorship and mutual discernment, students are encouraged to connect with their advisors to process challenges in academic and personal challenges. While advisors do not provide therapy for their advisees, they are equipped to observe the student's circumstance and aid in the discernment process.

COHORT SUPPORT

Since this program is structured and sequential, classes of students will progress together. This allows for an increased sense of relational connection and support throughout the program. Students are encouraged to connect with their cohort outside of class to form supportive, collaborative relationships. Scheduled class times intend to facilitate mutual learning through dialog, shared experiences, and contrary perspectives. Respectful exchanges of ideas, feelings, and perspective is intended in the program.

FORMS and EVALUATION DOCUMENTS

In the following pages you will find forms you need to fill out at some point in the program as well as evaluations that either you are filling out, or the faculty of supervisor is filling out (or using as a rubric to assess capacity to continue in internship as in Midterm I and II evaluations).

Proposal for Internship Site FORM

Name of site (agency/church)
Address of site:
Name of contact at site:
Position of this contact person:
Phone number and email of contact:
Does this site provide and expect you to do supervision at the site which would meet COAMFTE described criteria to count for your degree program?
If yes, what is the name of the supervisor and what license does the supervisor hold? Please indicated if the site supervisor is
AAMFT Approved Supervisor or AAMFT Approved Supervisor Candidate
other (please have the supervisor list their credentials that allow them to provide RELATIONAL supervision)
Describe the type(s) of counseling services (individual, couple, family, premarital) that you expect to provide at this site and whether it will be primarily in person, teletherapy, or both:
How many weekly client hours do you expect to provide at this site?
When do you hope to begin to see clients at this site?
When do you plan to stop seeing clients at this site?
DIRECTIONS FOR FORM SUBMISSION:
Please fill out this form and submit it to the site coordinator for APPROVAL. If the site meets the
criteria for an internship placement, the site will complete the agreement form. BOTH forms are
placed in the student Google folder prior to the start of internship.

MIDTERM 1: M	IFT Student Pi	re-Internship	Evaluation	
Student:				Date:
Interpersonal Sk How have	ills: we seen this st	udent interact	with other stud	dents?
1 Not very well at all	2 □ Not so well	3 □ Well	4 □ Very well	5 ☐ Extremely well
Comments (streng	gths and growth	areas?):	<u>-</u>	
Teachability & L How well teachabilit	have we seen th	nis student exh	nibit an attitude	e of openness &
1 □ Not very well at all	2 □ Not so well		4 Very well	
How have Comments:	we seen this str	udent demons	trate his/her att	titude toward learning?
Do the stu	dent's grades re	eflect understa	nding of mater	rial (theories, etc.)
1 □ Not very well at all	2 □ Not so well	3 □ Well	4 □ Very well	5 Extremely well
Comments:				
Self-of-the-thera How well	•	ddressing pers	onal & self-of-	-the-therapist issues?
1 Not very well at all	2 □ Not so well	3 □ Well	4 🗌 Very well	5 ☐ Extremely well
Comments:				
Diversity: How well	does the studer	nt demonstrate	e awareness of	issues of diversity and culture
1 Not very well at all	2 □ Not so well	3 □ Well	4 Very well	5 Extremely well
Comments:				
Spirituality: How well 1 Not very well at all	does the studen 2 Not so well	t demonstrate 3 Well	his/her spiritua 4 Very well	ality? 5 Extremely well
Comments:				
How well	does the studen	t do in integra	ting faith with	theory & praxis?
1 Not very well at all	2 Not so well	3 □ Well	4 🗌	5 Fytramely well

Comments:				
Theoretical Know How well	wledge does the studen	t conceptualiz	e theory at this	s point?
1 □ Not very well at all	2 \(\subseteq \) Not so well	3 □ Well	4 □ Very well	5 ☐ Extremely well
Comments:				
Therapeutic/Clin How well		t demonstrate	therapeutic ski	ills to this point?
1 Not very well at all	2 □ Not so well	3 □ Well		
Comments:				
How well treatment planning			case conceptua	alization, assessment an
1 Not very well at all	2 □ Not so well	3 □ Well	4 Very well	5 □ Extremely well
Comments:				
Readiness & Fit: How well	do we see this s	student "fit" w	ith becoming a	nn MFT?
1 Not very well at all	2 □ Not so well		4 Very well	5 □ Extremely well
Comments:				
Areas of Concern	n: (Are there an	y areas of con	cern?)	
Do we recommen	nd that this stu	dent continue	e in the progra	nm? Yes□ No □
With Restr Hold off in	restrictions	lress restriction	Yo Yo ns Yo	es es es es es es
Suggested action	s to be taken (i	f applicable):		
Signature of Revie	ewer/Faculty M		_	Date

MID-TERM EVALUATION 2 INTERN SKILLS EVALUATION 7-10 Months into Internship

ntern Date						
Please mark your score for the two (2) are	as belo)W. 1	2	3	4	5
STUDENT LEARNING OUTCOMES		1	2 Below	Meets	Exceeds	S Exceptional
	NEI	Deficient	Expectation	Expectation	Expectation	Skills
Demonstrates comprehension and application of the relational/systemic marriage and family therapeutic models.						
Able to articulate what marriage and family theory/theories inform their clinical work and its application to multicultural contexts.						
Demonstrates knowledge and competency in assessment, diagnosis, treatment planning, and therapeutic interventions with individuals, couples and families seeking treatment, from a relational/systemic framework that is multi-culturally-informed.						
Demonstrates knowledge and basic application of research to marriage and family therapy.						
Demonstrates knowledge and competency of MFT ethical, legal and professional issues.						
Demonstrates awareness of and addresses "self of the therapist" issues that impact the capacity for practice/service and ministry.						
Demonstrates awareness and comprehension of and sensitivity to issues of diversity and multiculturalism in the therapeutic process.						
Demonstrates comprehension and the ability to integrate Christian faith and Biblical principles with marriage and family theory and praxis.						
Demonstrates competency as a person of faith to address other faith communities and client's perspectives.						
ОТНЕБ	R ARE	AS OF E	VALUATI	ON		
Interpersonal Skills:						
How well have we seen this student is	nteract	with other	er students'?			
1 2 3 Not very well at all Not so well Well		4 ry well	5 Extremely we	ell		
Comments (strengths and growth areas?):						
Teachability & Learning: How well have we seen this student e	xhibit	an attitud	e of openne	ess & teacha	ability?	
1 2 3 Not very well at all Not so well Well	Ve	4 ry well	5 Extremely w	ell		
Comments:						

How wel	l do the studen	t's grades ref	lect understandi	ng of material (the	ories, etc.)
1 Not very well at all	2 Not so well	3 Well	4 Very well	5 Extremely well	
Comments:					
Spirituality: How wel	l does the stude	ent demonstra	nte his/her spirit	uality?	
1 Not very well at all	2 Not so well	3 Well	4 Very well	5 Extremely well	
Have we seen gr	owth? In this p	erson person	ally and profess	ionally? Yes No	
How? Comment	s:				
Please describe	the intern's st	rengths (bot	h personally ar	nd professionally):	3 <u></u>
Please describe areas of concern	_	owth areas (any areas of sl	kill development t	hat ought to be a focus, or
Do we recomme	nd that this stud	dent continue	in the program	?	
With NC) restrictions			Yes	
With res	trictions			Yes	
Take a 6	month break	to work on s	pecific issues	Yes	
A	ctions to be ta	ken:			
Signature of Rev	riewer/Faculty	Member		Date	

Intern Self-Evaluation of Clinical Experience

	intern Sen-	Lvaiuation o	i Chinicai E	xperience		
In	tern Therapist:	Supervisor:				
Da	ites of Supervision:		Rotation:	1	2 3	4
	sed on the rating scale, rate the level of competency iod. Provide comments that highlight key issues fo		has attained in	n each skill a	rea listed below du	ring this rotation
	I. CONCEPTUAL & PERCEPTUAL SKILL	S Deficient /	2 Beginning	3 Advancing	4 Meets Program-	5 Exceptional

I. CONCEPTUAL & PERCEPTUAL SKILLS (Theoretical Competency)	1 Deficient / Limited	2 Beginning	3 Advancing	4 Meets Program- Level Competencies (PLCs) (expectations)	5 Exceptional Skills
Definitions & PLCs	Student has difficulty engaging this area, which may jeopardize future skill development	Student displays beginning recognition of PLCs, with early skill development	Student displays progression in advancing skills in multiple areas of PLCs	Student displays program level competency skills in these areas	Student displays exceptional skills in these areas.
1. Knowledge Base: The intern: understands family & basic systems concepts; is able to articulate principles of human development & FLC issues pertaining to the case; communicates an understanding of human interaction & normal family processes; can articulate how gender roles & sexuality impact the client and therapeutic process; & links hypotheses, goals, plans and interventions to an articulated therapeutic model(s). Comments:					
2. Familiarity with Therapy Models: Intern has basic knowledge & accurate grasp of family therapy theories/ models & their techniques, and the integration of the models; and is able to think systemically. Comments:					
3. Awareness of Diversity Issues: Intern: can articulate how gender, race, ethnicity, culture, class, religion/spirituality, faith, & sexual orientation impact the client and therapeutic process; recognizes contextual factors/issues of client difference from self; responds with sensitivity & positive professional regard to client diversity; & is able to work with the client's world view. Comments:					
4. Recognition of Relational Patterns: Intern: recognizes & engages client hierarchies, triangles, boundaries, intergenerational patterns & legacies, attachment styles, interaction patterns (described in terms of cognitive, behavioral & affective sequences), clients' coping skills & strengths; assesses impact of stressors; differentiates content from process; & is able to articulate his/her impact on the therapy process, all to help facilitate client change. Comments:					

Overall Rating					
II. EXECUTIVE SKILLS (Clinical Competency)	1 Deficient / Limited	2 Beginning	3 Advancing	4 Meets PLCs	5 Exceptional Skills
Definitions & PLCs	Student has difficulty engaging this area, which may jeopardize future skill development	Student displays beginning recognition of PLCs, with early skill development	Student displays progression in advancing skills in multiple areas of PLCs	Student displays program level competency skills in these areas	Student displays exceptional skills in these areas.
1. Joining: Intern: engages clients; establishes & maintains therapeutic relationship by establishing & maintaining rapport through clear communication that conveys a sense of competency, authority & trustworthiness, while simultaneously demonstrating empathy, warmth, care and respect; gathers information without making client feel interrogated; inspires hope & trust; conveys confidence; paces therapy appropriately; adjusts language to that of clients; observes & manages self in interaction with client; and notes & addresses relationship breeches with effective repair. Comments:					
2. Basic Therapeutic Skills: Intern: actively listens & empathically attunes; elicits client sharing; reflects accurately; asks open ended questions; guides the communication process; explores clients' expectations, frame of reference, point of view & preparedness to make changes; clarifies goals; establishes boundaries; uses influence to promote client strengths; explores history of PP; provides focus; identifies core themes; balances effective listening & leading by talking; uses humor appropriately; & promotes a therapeutic process responsive to client need. Comments:					
3. Case Conceptualization: Intern understands the PP by: eliciting important/relevant background information and Hx of the PP; assessing the family structure & interaction patterns as well as the intergenerational patterns; identifying client strengths/resources and obstacles; completing a genogram; assessing significance of diversity issues: gender roles, ethnicity, culture, SES, etc; assessing significance of: biological basis of behavior, employment, school & developmental issues, all through using the lenses of the theories; exploring previous solutions & prior Tx; and choosing a theory/theories that will best explain what is going on & effectively treat the PP. Intern can appropriately conceptualize					

the PP and complete the Case Conceptualization Form for each client case in a timely manner Comments:					
II. EXECUTIVE SKILLS (cont'd) (Clinical Competency)	1 Deficient / Limited	2 Beginning	3 Advancing	4 Meets PLCs	5 Exceptional Skills
Definitions & PLCs	Student has difficulty engaging this area, which may jeopardize future skill development	Student displays beginning recognition of PLCs, with early skill development	Student displays progression in advancing skills in multiple areas of PLCs	Student displays program level competency skills in these areas	Student displays exceptional skills in these areas.
4. Clinical Assessment & Diagnosis: Intern: uses Mental Status Exam (MSE) and DSM for appropriate assessment & Dx; assesses family Hx & dynamics using genogram & other assessment instruments appropriate to the case; clarifies the PP by gathering its history & context; & explores previous solutions & prior Tx; assesses strengths; uses assessment strategies sensitive to diversity issues; notes medications used by client; does a risk assessment; develops safety plans as needed; acknowledges contextual factors relevant to the case; makes appropriate referrals (psychiatric, medical, etc.); explores resources; consults other professionals associated with the case with appropriate releases signed; indicate client's sense of hope, prognosis, modalities to be used, and expected length of Tx; & competently completes Clinical Assessment Form for each client case in a timely manner. Comments:					
5. Hypothesizing: Intern can: conceptualize & formulate a systemic hypothesis of the PP; form hypotheses based on clients' frame of reference & assessment info; frame PP in systemic terms; form hypotheses based on theories of change. Comments:					
6. Treatment Planning: Intern: develops treatment plans based upon case conceptualization, assessment & hypotheses that are theory-specific; collaboratively determines clear, measured, reachable Tx goals with clients; establishes short and long term goals; modifies Tx plan as needed; plans for termination; transfers cases when appropriate; seeks to coordinate Tx when necessary; & competently completes the Treatment Plan Form for each client case in a timely manner. Comments:					

Γ=					1
7. Intervention Strategies: Intern: uses interventions that are: based on case conceptualization, assessment, hypotheses & Tx plan, & are theory-specific; invites other family members into Tx; guides dynamics; interrupts negative communication cycles; deflects blaming & scapegoating; facilitates expression of emotions & behavior change; reframes; facilitates enactments; promotes engagement & experiential shifts; challenges clients appropriately; assigns homework; uses appropriate techniques; & guides interventions with clinical skills promoting change. Comments:					
II. EXECUTIVE SKILLS (cont'd)	1 Deficient /	2 Beginning	3 Advancing	4 Meets PLCs	5 Exceptional
(Clinical Competency)	Limited	Бединия	Advancing	Meets FLCs	Skills
	Student has	Student	Student	Student displays	Student
Definitions	difficulty engaging	displays beginning	displays progression	program level competency skills	displays exceptional
& PLCs	this area,	recognition	in advancing	in these areas	skills in these
	which may	of PLCs,	skills in		areas.
	jeopardize future skill	with early skill	multiple areas of		
	development	development	PLCs		
8. Integration of Models/Concepts: Intern: is able to					
operationalize theories; incorporates appropriates models for PPs; integrates concepts/ models into a clear working model of therapy; articulates theory as it's applied in practice, utilizing concepts appropriately, & describing interventions that fit with the theory & hypothesis. Comments:					
Overall Rating					
III. PROFESSIONAL SKILLS					
1. Session Management: Intern: effectively introduces clients to therapy; explains policies & procedures of the center, especially consent for video taping; effectively engages clients in therapeutic conversation, yet controls the flow of communication; manages intense interactions appropriately, demonstrating skill at both escalating and de-escalating intensity at appropriate times; manages time & finishes sessions within the time limits; manages scheduling smoothly; is flexible & links what the client brings to a session to the plan for the session; & follows policies regarding collection of fees. Comments:					
2. Supervision Responsibilities: Intern: attends supervision regularly and is punctual; comes prepared; brings videos for review; is respectful of other supervisees; accepts & uses supervisory feedback effectively.					

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Comments:					
3. Ethical Issues: Intern: knows & observes the AAMFT					
Code of Ethics; knows state laws concerning privileged					
communication, mandatory reporting & duty-to-warn issues;					
seeks supervisory input & backup for emergency situations and adequately documents the events; follows supervisor's					
directives in specific cases; avoids potentially exploitive and/or					
dual role relationships with clients; deals appropriately with					
his/her own issues as they affect therapy, & is willing to take responsibility for her/his own actions in therapy.					
Comments:					
III. PROFESSIONAL SKILLS (cont'd)	1 Deficient /	2 Paginning	3	4 Meets PLCs	5 Evantional
	Limited	Beginning	Advancing	wieets PLCs	Exceptional Skills
	Student has	Student	Student	Student displays	Student
Definitions	difficulty engaging	displays beginning	displays progression	program level competency skills	displays exceptional
& PLCs	this area,	recognition	in advancing	in these areas	skills in these
	which may	of PLCs,	skills in		areas.
	jeopardize future skill	with early skill	multiple areas of		
	development	development	PLCs		
4. Paperwork: Intern: maintains case files appropriately;					
keeps up-to-date with paperwork; completes session summaries					
in a timely manner; & follows center procedures. Comments:					
Comments.					
5. Professional Behaviors: Intern: presents as					
confident, yet without arrogance; acts in a professional manner;					
dresses professionally; treats staff & clients with respect; can					
handle unexpected & crisis situations with poise & skill, using consultation when appropriate; is punctual for sessions &					
supervision; appropriately consults with other professionals					
involved with cases; & uses signed releases when necessary.					
Comments:					
Overall Rating					
IV. EVALUATION SKILLS					
1.Evaluation of Therapeutic Progress: Intern is					
able to evaluate: the link between theory, assessment,					
hypotheses, Tx plans & interventions; the effectiveness of					
interventions; how well the objectives of therapy have been met in terms of client goals & the intern's perspective &					
analysis; and uses client feedback.					
Comments:					
	_	_	_		

	1	1		i	ı
2. Evaluation of Self-as-Therapist: Intern: articulates awareness of personal issues and how they impact therapy; realistically evaluates self in terms of skill areas & effectiveness; recognizes how use of self contributes to an enhanced understanding of the case; works with supervisor to improve therapeutic effectiveness & to expand skills; & articulates strengths & growth areas as a therapist. Comments:					
3. Evaluate Progress & Terminate Treatment: Intern: evaluates the progress of sessions toward goals by conducting periodic evaluations with clients (every 6/7 sessions); recognize when Tx goal(s) and plan require modification; effectively plans & carries out termination; & completes the Evaluation of Treatment Forms for both client & intern. Comments:					
O II D					
Overall Rating	1	2	3	4	5
V. PERSONAL SKILLS	Deficient / Limited	Beginning	Advancing	Meets PLCs	Exceptional Skills
Definitions & PLCs	Student has difficulty engaging this area, which may jeopardize future skill development	2 Student displays beginning recognition of PLCs, with early skill development	3 Student displays progression in advancing skills in multiple areas of PLCs	4 Student displays program level competency skills in these areas	5 Student displays exceptional skills in these areas.
1. Personal Qualities of the Therapist: Intern: shares personal info appropriately; is authentic, patient, caring, empathic, sensitive, flexible, accepting of others, warm, introspective, curious; has a non-defensive attitude; takes responsibility for mistakes; manages anxiety; uses humor appropriately; thinks critically & analytically; demonstrates emotional maturity & ability to be self-reflective; accepts feedback; uses boundaries. Comments:	development	development	1105		
2. Integration of Faith Principles: Intern demonstrates comprehension and the ability to address faith perspectives and experiences of clients with marriage and family theory and praxis. Comments:					
Overall Rating					
- · · · · · · · · · · · · · · · · · · ·		!	Total Owen		

Total Overall Rating:

Please describe intern's strengths.	
Please describe "growth areas" that you suggest this intern focus on i	mproving/strengthening.
Please describe areas of skill development that you believe should be	a focus in the next supervision.
Comments:	
Date of Review/Evaluation	
Signature of Supervisee/Intern	Date
Signature of Supervisor	Date

At the end of the 2^{nd} and 4^{th} rotations of supervision, the intern is to also include the following items in his/her self-evaluation.

his/her self-evaluation.						
Intern Therapist:		Supe	rvisor			
Dates of Supervision:		-	1 🗆	2 □	3 □	4 □
 Reflect upon how you have experience to date, including has influenced you in the 2) your growth in understandynamics with supervisors 	ing the dynamics you'v following areas: 1) awa anding theories/models:	e experienced reness of new (3) the superv	in superv self-of-th	rision. Ind e-therapi	clude how st and div	v supervision versity issues;
Reflect upon your clinical this point.	growth, then write a su	ımmary of you	ır clinical	learning	and deve	elopment up to
3. Reflect upon and then wri joining; the progression of account; and how you hav	f therapy; personality d					

Superv	visor:		_	ervisor by Interi itern Therapist:	n Therapi	st		
-	of Supervision:			Rotation:	1	2	3	4
Base the	following question 1 = Poor, 2= Fair,			Excellent				
1.	Overall, how wo	ould you rate t	he quality of s	supervision given	to you by	your s	upervis	or?
	1 Poor	2 Fair	3 Good	4 Very Good	5 Excelle	nt		
2.				very Good visory relationsh		III t		
2.	1	•	•	A	•			
	1 Poor	2 Fair	3 Good	4 Very Good	5 Excelle	nt		
3.	How would you	rate your sup	ervisor's knov	vledge of family t	herapy?			
	1	2	3	4	5			
	Poor	Fair	Good	Very Good	Excelle			
4.	How would you	rate your sup	ervisor's abili	ty to express that	knowledg	e with	you?	
	1	2	3	4	5	4		
_	Poor	Fair	Good	Very Good	Excelle			
5.	How would you process?	rate your sup	ervisor's abili	ty to relate to whe	ere you are	e in the	learnin	g
	1 Page 1	2 Fair	3 Good	4 Vory Cood	5 Excelle	4		
6.	Poor How would you			Very Good ent created by you				
0.	110w would you		_			501 !		
	I Poor	2 Fair	3 Good	4 Very Good	5 Excelle	nt		
7.	How would you			ty to encourage y			rofessic	nal
	growth?	2	3	4	5			
	Poor	Fair	Good	Very Good	Excelle	nt		
8.	How would you	rate your sup	ervisor's abili	ty to respect your	therapeut	ic style	?	
	1 Poor	2 Fair	3 Good	4 Very Good	5 Excelle	nt		
9.	How would you style?			ty to expand your			rapeutio	e
	1	2	3	4	5			
	Poor	Fair	Good	Very Good	Excelle	nt		
10.	How would you challenge yours		ervisor's abili	ty to excite and m	otivate yo	ou to co	ntinual	ly
	1	2	3	4	5			
	Poor	Fair	Good	Very Good	Excelle	nt		

11.	How would you r	ate your sup	_	ability to you?	5
	Poor	2 Fair	3 Good	4 Very Good	5 Excellent
12.	How would you r faith issues?	ate your sup	ervisor's sensi	tivity and ability	to appropriately address
	1 Poor	2 Fair	3 Good	4 Very Good	5 Excellent
13.	How would you r	ate your sup	ervisor's abilit	y to appropriately	y address issues of diversity?
	1 Poor	2 Fair	3 Good	4 Very Good	5 Excellent
14.	How would you r theory and practic		ervisor's effec	tiveness in discus	ssing the integration of
	1 Poor	2 Fair	3 Good	4 Very Good	5 Excellent
15.	How would you r of your therapy se	•	ervisor's effec	tiveness in helpin	ng you by reviewing videos
	1 Poor	2 Fair	3 Good	4 Very Good	5 Excellent
16.	How would you r giving feedback to		ervisor's helpf	ulness in reading	session summaries and in
	1	2	3	4	5
	Poor	Fair	Good	Very Good	Excellent
17.	How effective do	you think yo	our supervisor	is as a clinician?	
	1 Very Ineffective	2	3	4 V	5 Yery Effective
18.	How effective do (Based on your ex	-	-	thinks of you as a	a clinician?
	1 Very Ineffective	2	3	4 V	5 Yery Effective
19.	(For group super process?	rvision ONI	Y) How effec	tive is your super	visor in encouraging group
	1 Poor	2 Fair	3 Good	4 Very Good	5 Excellent
					nd/or advanced (while

Signature of Supervisee/Intern Signature of Supervisor	Date Date	
Additional comments:		
Please give us a sense of what you see as any weakness.	es and/or recommendations for change:	
Please give us a sense of what you see as the <i>strengths</i> of	f your supervisor:	
Please provide the key issues that your supervisor discu	ssed with you during this rotation	

Supervisor's Evaluation of Intern's Clinical Experience

tern Therapist:						
tes of Supervision:		Dotation: 1 2 2				
ed on the rating scale, rate the level of competency the od. Provide comments that highlight key issues for the	at this intern	has attained in	each skill ar	ea listed below dur	ring this rotati	
od. I fovide comments that nightight key issues for th	iis iiiteiii.					
I. CONCEPTUAL & PERCEPTUAL SKILLS (Theoretical Competency)	1 Deficient / Limited	2 Beginning	3 Advancing	4 Meets Program- Level Competencies (PLCs) (expectations)	5 Exceptional Skills	
Definitions & PLCs	Student has difficulty engaging this area, which may jeopardize future skill development	Student displays beginning recognition of PLCs, with early skill development	Student displays progression in advancing skills in multiple areas of PLCs	Student displays program level competency skills in these areas	Student displays exceptional skills in these areas.	
1. Knowledge Base: The intern: understands family & basic systems concepts; is able to articulate principles of human development & FLC issues pertaining to the case; communicates an understanding of human interaction & normal family processes; can articulate how gender roles & sexuality impact the client and therapeutic process; & links hypotheses, goals, plans and interventions to an articulated therapeutic model(s). Comments:						
2. Familiarity with Therapy Models: Intern has basic knowledge & accurate grasp of family therapy theories/ models & their techniques, and the integration of the models; and is able to think systemically. Comments:						
3. Awareness of Diversity Issues: Intern: can articulate how gender, race, ethnicity, culture, class, religion/spirituality, faith, & sexual orientation impact the client and therapeutic process; recognizes contextual factors/issues of client difference from self; responds with sensitivity & positive professional regard to client diversity; & is able to work with the client's world view. Comments:						
4. Recognition of Relational Patterns: Intern: recognizes & engages client hierarchies, triangles, boundaries, intergenerational patterns & legacies, attachment styles, interaction patterns (described in terms of cognitive, behavioral & affective sequences), clients' coping skills & strengths; assesses impact of stressors; differentiates content from						

process; & is able to articulate his/her impact on the therapy

process, all to help facilitate client change.

Comments:

Overall Rating					
II. EXECUTIVE SKILLS (Clinical Competency)	1 Deficient / Limited	2 Beginning	3 Advancing	4 Meets PLCs	5 Exceptional Skills
Definitions & PLCs	Student has difficulty engaging this area, which may jeopardize future skill development	Student displays beginning recognition of PLCs, with early skill development	Student displays progression in advancing skills in multiple areas of PLCs	Student displays program level competency skills in these areas	Student displays exceptional skills in these areas.
1. Joining: Intern: engages clients; establishes & maintains therapeutic relationship by establishing & maintaining rapport through clear communication that conveys a sense of competency, authority & trustworthiness, while simultaneously demonstrating empathy, warmth, care and respect; gathers information without making client feel interrogated; inspires hope & trust; conveys confidence; paces therapy appropriately; adjusts language to that of clients; observes & manages self in interaction with client; and notes & addresses relationship breeches with effective repair. Comments:					
2. Basic Therapeutic Skills: Intern: actively listens & empathically attunes; elicits client sharing; reflects accurately; asks open ended questions; guides the communication process; explores clients' expectations, frame of reference, point of view & preparedness to make changes; clarifies goals; establishes boundaries; uses influence to promote client strengths; explores history of PP; provides focus; identifies core themes; balances effective listening & leading by talking; uses humor appropriately; & promotes a therapeutic process responsive to client need. Comments:					
3. Case Conceptualization: Intern understands the PP by: eliciting important/relevant background information and Hx of the PP; assessing the family structure & interaction patterns as well as the intergenerational patterns; identifying client strengths/resources and obstacles; completing a genogram; assessing significance of diversity issues: gender roles, ethnicity, culture, SES, etc; assessing significance of: biological basis of behavior, employment, school & developmental issues, all through using the lenses of the theories; exploring previous solutions & prior Tx; and choosing a theory/theories that will best explain what is going on & effectively treat the PP. Intern can appropriately conceptualize					

the PP and complete the Case Conceptualization Form for each client case in a timely manner Comments:					
II. EXECUTIVE SKILLS (cont'd)	1	2	3	4	5
(Clinical Competency)	Deficient /	Beginning	Advancing	Meets PLCs	Exceptional
(Cimical Competency)	Limited Student has	Ctudont	Student	Student diaplays	Skills Student
Definitions & PLCs	Student has difficulty engaging this area, which may jeopardize future skill development	Student displays beginning recognition of PLCs, with early skill development	Student displays progression in advancing skills in multiple areas of PLCs	Student displays program level competency skills in these areas	Student displays exceptional skills in these areas.
4. Clinical Assessment & Diagnosis: Intern: uses Mental Status Exam (MSE) and DSM for appropriate assessment & Dx; assesses family Hx & dynamics using genogram & other assessment instruments appropriate to the case; clarifies the PP by gathering its history & context, & explores previous solutions & prior Tx; assesses strengths; uses assessment strategies sensitive to diversity issues; notes medications used by client; does a risk assessment; develops safety plans as needed; acknowledges contextual factors relevant to the case; makes appropriate referrals (psychiatric, medical, etc.); explores resources; consults other professionals associated with the case with appropriate releases signed; indicate client's sense of hope, prognosis, modalities to be used, and expected length of Tx; & competently completes Clinical Assessment Form for each client case in a timely manner. Comments:					
5. Hypothesizing: Intern can: conceptualize & formulate a systemic hypothesis of the PP; form hypotheses based on clients' frame of reference & assessment info; frame PP in systemic terms; form hypotheses based on theories of change. Comments:					
6. Treatment Planning: Intern: develops treatment plans based upon case conceptualization, assessment & hypotheses that are theory-specific; collaboratively determines clear, measured, reachable Tx goals with clients; establishes short and long term goals; modifies Tx plan as needed; plans for termination; transfers cases when appropriate; seeks to coordinate Tx when necessary; & competently completes the Treatment Plan Form for each client case in a timely manner. Comments:					

7. Intervention Strategies: Intern: uses interventions that are: based on case conceptualization, assessment, hypotheses & Tx plan, & are theory-specific; invites other family members into Tx; guides dynamics; interrupts negative communication cycles; deflects blaming & scapegoating; facilitates expression of emotions & behavior change; reframes; facilitates enactments; promotes engagement & experiential shifts; challenges clients appropriately; assigns homework; uses appropriate techniques; & guides interventions with clinical skills promoting change. Comments:					
H EVECUTIVE SKILLS (contrd)	1	2	3	4	5
II. EXECUTIVE SKILLS (cont'd) (Clinical Competency)	Deficient / Limited	Beginning	Advancing	Meets PLCs	Exceptional Skills
Definitions & PLCs	Student has difficulty engaging this area, which may jeopardize future skill development	Student displays beginning recognition of PLCs, with early skill development	Student displays progression in advancing skills in multiple areas of PLCs	Student displays program level competency skills in these areas	Student displays exceptional skills in these areas.
8. Integration of Models/Concepts: Intern: is able to operationalize theories; incorporates appropriates models for PPs; integrates concepts/ models into a clear working model of therapy; articulates theory as it's applied in practice, utilizing concepts appropriately, & describing interventions that fit with the theory & hypothesis. Comments:					
Overall Rating					
III. PROFESSIONAL SKILLS					
1. Session Management: Intern: effectively introduces clients to therapy; explains policies & procedures of the center, especially consent for video taping; effectively engages clients in therapeutic conversation, yet controls the flow of communication; manages intense interactions appropriately, demonstrating skill at both escalating and de-escalating intensity at appropriate times; manages time & finishes sessions within the time limits; manages scheduling smoothly; is flexible & links what the client brings to a session to the plan for the session; & follows policies regarding collection of fees. Comments:					
2. Supervision Responsibilities: Intern: attends supervision regularly and is punctual; comes prepared; brings videos for review; is respectful of other supervisees; accepts & uses supervisory feedback effectively.					

Comments:					
3. Ethical Issues: Intern: knows & observes the AAMFT					
Code of Ethics; knows state laws concerning privileged					
communication, mandatory reporting & duty-to-warn issues;					
seeks supervisory input & backup for emergency situations and adequately documents the events; follows supervisor's					
directives in specific cases; avoids potentially exploitive and/or					
dual role relationships with clients; deals appropriately with					
his/her own issues as they affect therapy, & is willing to take responsibility for her/his own actions in therapy.					
Comments:					
III. PROFESSIONAL SKILLS (cont'd)	1 Deficient /	2 Paginning	3	4 Meets PLCs	5 Eventional
	Limited	Beginning	Advancing	wieets PLCs	Exceptional Skills
	Student has	Student	Student	Student displays	Student
Definitions	difficulty engaging	displays beginning	displays progression	program level competency skills	displays exceptional
& PLCs	this area,	recognition	in advancing	in these areas	skills in these
	which may	of PLCs,	skills in		areas.
	jeopardize future skill	with early skill	multiple areas of		
	development	development	PLCs		
4. Paperwork: Intern: maintains case files appropriately;					
keeps up-to-date with paperwork; completes session summaries					
in a timely manner; & follows center procedures. Comments:					
Comments.					
5. Professional Behaviors: Intern: presents as					
confident, yet without arrogance; acts in a professional manner;					
dresses professionally; treats staff & clients with respect; can					
handle unexpected & crisis situations with poise & skill, using consultation when appropriate; is punctual for sessions &					
supervision; appropriately consults with other professionals					
involved with cases; & uses signed releases when necessary.					
Comments:					
Overall Rating					
IV. EVALUATION SKILLS					
1.Evaluation of Therapeutic Progress: Intern is					
able to evaluate: the link between theory, assessment,					
hypotheses, Tx plans & interventions; the effectiveness of					
interventions; how well the objectives of therapy have been met in terms of client goals & the intern's perspective &					
analysis; and uses client feedback.					
Comments:					

	1	1		i	ı
2. Evaluation of Self-as-Therapist: Intern: articulates awareness of personal issues and how they impact therapy; realistically evaluates self in terms of skill areas & effectiveness; recognizes how use of self contributes to an enhanced understanding of the case; works with supervisor to improve therapeutic effectiveness & to expand skills; & articulates strengths & growth areas as a therapist. Comments:					
3. Evaluate Progress & Terminate Treatment: Intern: evaluates the progress of sessions toward goals by conducting periodic evaluations with clients (every 6/7 sessions); recognize when Tx goal(s) and plan require modification; effectively plans & carries out termination; & completes the Evaluation of Treatment Forms for both client & intern. Comments:					
O II D					
Overall Rating	1	2	3	4	5
V. PERSONAL SKILLS	Deficient / Limited	Beginning	Advancing	Meets PLCs	Exceptional Skills
Definitions & PLCs	Student has difficulty engaging this area, which may jeopardize future skill development	2 Student displays beginning recognition of PLCs, with early skill development	3 Student displays progression in advancing skills in multiple areas of PLCs	4 Student displays program level competency skills in these areas	5 Student displays exceptional skills in these areas.
1. Personal Qualities of the Therapist: Intern: shares personal info appropriately; is authentic, patient, caring, empathic, sensitive, flexible, accepting of others, warm, introspective, curious; has a non-defensive attitude; takes responsibility for mistakes; manages anxiety; uses humor appropriately; thinks critically & analytically; demonstrates emotional maturity & ability to be self-reflective; accepts feedback; uses boundaries. Comments:	development	development	1105		
2. Integration of Faith Principles: Intern demonstrates comprehension and the ability to address faith perspectives and experiences of clients with marriage and family theory and praxis. Comments:					
Overall Rating					
- · · · · · · · · · · · · · · · · · · ·		!	Total Owen		

Total Overall Rating:

Please describe intern's strengths.	
Please describe "growth areas" that you suggest this intern focus on	improving/strengthening.
Please describe areas of skill development that you believe should be	a focus in the next supervision.
Comments:	
Date of Review/Evaluation	
Signature of Supervisee/Intern	Date
Signature of Supervisor	Date

POLICY DOCUMENTS

Policy for: Transparency and Informed Acknowledgement of Information Regarding the MFT Profession, and Licensure & Regulatory Requirements

All prospective students in the application process **need to determine** if the MFT Program meets the educational requirements for licensure for the state in which they reside or plan to be licensed. During the applicant's interview, the interviewer will discuss with the applicant the likelihood of them being able to find a place to do their internship where they live.

Once an applicant has been accepted as a student in the MAMFT Program, and has confirmed their acceptance, the MAMFT Program Handbook will be sent to them several weeks before the commencement of the fall semester classes.

States where MFT student interns are engaged in their clinical practice experience (internship/internship), and their regulations.

- 1. The **Pennsylvania** Board of Social Workers, Marriage & Family Therapist, and Professional Counselors has defined certain terms within its regulations specific to these areas.
 - (a) According to regulation § 48.2(6), applicants for licensure are to obtain internship experience for a minimum of 1 year and accumulate 300 hours of supervised *direct* client contact with individuals, couples and families.
 - (b) According to § 48.102. Interpretation of § 48.2(6) (relating to Educational Requirements) statement of policy: the Board considers "direct" client contact to be met if a HIPAA-compliant electronic/virtual platform is used that allows for synchronous audio and video communication between the supervisor, supervisee, and client. This would not include supervision/client contact by telephone, email, instant messaging, online chat or other non-secure electronic communications that do not include real-time (synchronous) video and audio communications. The setting in which the supervisor, supervisee, and client is located when using electronic supervision must be professional and secure.
 - (c) The MAMFT Program uses a HIPAA compliant virtual platform for its students to meet with clients to conduct therapy, and to meet with its program clinical supervisors for supervision. Therefore, the program is compliant with the Commonwealth of Pennsylvania's regulations.
- 2. The **South Dakota** Department of Health's Administrative rules, Article 20:71 Marriage and Family Therapists, has no specifications for supervision during internship. Therefore, it is permissible for students who reside in South Dakota to meet with the program's supervisors for supervision via a HIPAA compliant virtual platform.
- 3. The **Nevada** Board of Examiners for Marriage and Family Therapists and Clinical Professional Counselors' regulations, LCB File Number R051-19, has no specifications for supervision during internship. Therefore, it is permissible for students who reside in Nevada to meet with the program's supervisors for supervision via a HIPAA compliant virtual platform.

- 4. The **New York** State Education Department, Office of the Professions, Division of Professional Licensing Services' regulations §52.33 Marriage and Family Therapy states: 1) a program must include a supervised internship in marriage and family therapy of at least 300 client contact hours; and 2) "To meet the professional education requirement for licensure as a marriage and family therapist, you must present evidence of A, B or C below."
 - ☐ A master's or doctoral degree from a program in marriage and family therapy that is:
 - o (A) registered by the Department as <u>licensure qualifying</u>; or
 - o (B) accredited by the Commission on Accreditation of Marriage and Family Therapy Education (COAMFTE) or another acceptable accrediting agency; or
 - o (C) determined by the Department to be the substantial equivalent of such a registered or accredited program.
 - According to NY's regulations, regardless of the qualifying degree, all experience, including supervised experience as part of the degree program, must be verified by a qualified supervisor, acceptable to the Department.
 - A school that is outside of New York and seeks to place student interns in New York must be accredited by an organization acceptable to the Department for that profession, (COAMFTE accredited or the equivalent). The school is responsible for identifying and approving a placement and supervisor, consistent with New York law. The supervisor and the setting must meet the same qualifications as set forth in the Commissioner's Regulations for the post-degree, supervised experience in the profession.
 - ☐ The student intern must engage in the practice of the profession as defined in the statute and be under the supervision of a qualified supervisor who is appropriately licensed in the jurisdiction (NY).
 - Since New York requires that a program approve both the placement and on-site supervisor (a qualified supervisor who is licensed in NY), the intern from our program must have a qualified supervisor on-site who meets 1 hour per week with the intern.

In order to meet COAMFTE requirements that an intern receive supervision from an AAMFT-approved supervisor, the intern will also meet weekly with an assigned Program Supervisor via a HIPAA compliant virtual platform. In the agreement between the program and the internship site, this supervision will be addressed as secondary and educational to the on-site supervision.

- **5. Alberta, Canada:** no formal requirement could be found regulating specifications of supervision during internship. Therefore, it is permissible for students who reside in Alberta, Canada to meet with the program's supervisors for supervision via a HIPAA compliant virtual platform.
- **6. Arizona** Board of Behavioral Health Examiners requires 300 hours of internship that are under the supervision of a licensed MFT. Those who graduate from a COAMFTE accredited program do not have to answer specific questions about curriculum on the application. Arizona has no requirement that regulates specifications for supervision during internship. Therefore, it is permissible for students who

reside in Arizona to meet with the program's supervisors for supervision via a HIPAA compliant virtual platform.

- 7. Georgia requires 500 hours of direct clinical experience during the internship of at least one year in length, and shall include 100 hours of supervision by a licensed MFT who is an AAMFT Approved supervisor or supervisor in training or a Georgia Board Approved MFT Supervisor. Georgia has no requirement that regulates specifications for supervision during internship. Therefore, it is permissible for students who reside in Georgia to meet with the program's supervisors for supervision via a HIPAA compliant virtual platform.
- 8. **North Dakota** requires 9 semester hours in clinical internship, or at least 500 hours or twelve months of clinical contact. At least half of the hours (250 hrs) must be relational. "The clinical experience must be supervised onsite or at the academic institution by a licensed MFT who is an AAMFT-Approved supervisor. North Dakota's requirements of being supervised at the academic institution may need to be discussed with this Board, to make sure that it is permissible for students who reside in the state to meet with the program's AAMFT-Approved supervisors for supervision via a HIPAA compliant virtual platform.
- **9. Florida:** As of 9/2/21, a minimum of 400 hours of supervised clinical internship completed within a minimum of 12 months, of which at least 300 hours shall be direct client contact, of which 200 hours must be relational, all of which shall be supervised by a licensed MFT. No formal requirement could be found regulating specifications of supervision during internship in Florida. Therefore, it is permissible for students who reside in Florida to meet with the program's supervisors for supervision via a HIPAA compliant virtual platform.
- **10. Massachusetts:** as of 5/6/21 there needs to be 300 hrs of direct/face-to-face contact under the direction of an approved supervisor. Supervision shall consist of 100 face-to-face hours, 50 of which must be individual supervision; 25 hrs must be with raw data. As of 5/25/21, the Board will accept hours for clinical service and supervision through videoconferencing. Therefore, it is permissible for students who reside in Massachussetts to meet with the program's supervisors for supervision via a HIPAA compliant virtual platform.
- 11. Minnesota: On 9/17/21 the Board agreed to accept a internship experience as meeting educational requirements for licensure without regard for whether clinical contact was in-person or electronic, and without regard for method of supervision. Supervision must be with a licensed MFT or AAMFT-approved supervisor. Therefore, it is permissible for students who reside in Minnesota to meet with the program's supervisors for supervision via a HIPAA compliant virtual platform.
- **12. Ohio** requires 500 hours during internship, 250 of which must be relational, along with 100 hours of supervision with an AAMFT approved supervisor. It appears that the Board may be moving toward allowing videoconferencing with clients and for supervision. According to email correspondence with the Board, they allow interns to videoconference with clients and to count these hours, and they also allow tele-supervision. Therefore, it is permissible for students who reside in Ohio to meet with the program's supervisors for supervision via a HIPAA compliant virtual platform.

13. **British Columbia, Canada:** currently British Columbia does not regulate the profession of Marriage & Family Therapy. To become a member of the Canadian Association for Marriage & Family Therapy, you need 150 hours during the internship, with no supervision stipulations. Therefore, it seems permissible for students who reside in British Columbia to meet with the program's supervisors for supervision via a HIPAA compliant virtual platform.

Policy On: Compliance of Teletherapy and Virtual/Tele-Supervision with Regulatory Requirements

- Programs that include **teletherapy** and/or **virtual supervision** as part of the clinical practice experience must have a policy on how the program ensures that such practices are compliant with relevant federal, state, or provincial **regulatory requirements**. (COAMFTE 12.5 Standards)
- I. The MAMFT Program allows the use of virtual supervision with student intern therapists who are engaged in their clinical practice experience (internship/internship). The Program also allows these student intern therapists to engage in teletherapy during their clinical practice experience (internship/internship).
- II. Program **definitions** of teletherapy and tele-supervision:
 - **Teletherapy** is the process of delivering synchronous (real-time) therapeutic services using a secure (HIPAA compliant) video platform.
 - **Virtual or Tele-Supervision** *is the process of delivering synchronous (real-time) MFT relational/systemic supervision using a secure (HIPAA compliant) video platform.*
- III. **Compliance**: the MAMFT Program uses a HIPAA compliant video platform when virtual supervision and teletherapy are used. The program uses Google Meet as the video platform provider for supervision of interns. The intern should use their Google Meet provided by the university or the HIPAA compliant teletherapy platform provided by the internship agency for recording sessions.
- IV. **Teletherapy Skills & Ethics Training:** Beginning January 2024, students will take a 1 credit training course on utilizing video systems to deliver therapy to clients before starting internship or within the first rotation of internship. Training will include HIPAA compliance, teletherapy best practices, ethical considerations, and risk management.
- V. Policy for In-Person vs Virtual (online) Client Hours: Students must have a minimum of <u>150</u> face-to-face (in the same location) to meet the internship requirements. This means that if the intern needs 300 hours of clinical experience, no more than 150 hours of teletherapy is permitted. For students needing 500 hours of clinical experience, no more than 350 hours of teletherapy is permitted. Exemptions to this policy may be granted for unavoidable or unforeseen circumstances at the discretion of the MFT department. Choosing an agency that only offers online appointments will not meet the criteria for an exemption to this policy.

It is the student's responsibility to find a placement that meets the requirements for the program including audio/video recording of client sessions, both individual and relational hours, and at least 150 hours of direct in-person (same physical location) clinical experience.

Each faculty (Core or Adjunct) teaching a KU MFT online course must document at minimum 2 CEU's on Telehealth training in the last 5 years. Once a year at an MFT program meeting, an hour will be spent on reviewing literature and best practices regarding online pedagogy in conversation with new ideas to share and discuss current challenges or needs. The hour training will be recorded for those who cannot attend who will then watch and write a response that includes their practices and challenges, and list of ideas they want to apply.

PLAN for the ASSESSMENT, REVIEW AND REVISION of the MAMFT PROGRAM OUTCOMES (PGs, SLOs and FOs)

1. Identify / Review and/or Revise the Program Mission Statement:

- The MAMFT faculty/personnel will define the Program Mission, making sure it is aligned with the seminary's mission.
- The Program Mission will be informed by and revised as necessary, based upon the assessment of Program Goals, Student Learning Outcomes, and Faculty Outcomes (FOs).

2. Develop, Review and/or Revise Program Outcomes [Program Goals (PGs) and Student Learning Outcomes (SLOs)]

- MAMFT faculty/personnel will first develop the Program Goals, Student Learning Outcomes, and Faculty Outcomes, making sure that they are measurable.
- These will be informed by AAMFT Core Competencies and Kairos University's Communities of Interest (to possibly include Kairos MFT faculty, supervisors, students, administrators, and graduates.
- These PGs and SLOs will be reviewed annually, based on the data collected, and/or revised as necessary, according to the assessment plan.

3. Check, Review, Evaluate and/or Revise Curriculum and Organizational Alignment

- With the use of the Curriculum Map Matrix for SLOs, PMFTPs & Courses, MFT faculty/personnel will identify and indicate where Student Learning Outcomes fit within the curriculum.
- With the use of the MFT Competencies Course Matrix, MFT faculty/personnel will identify how the curriculum addresses the Student Learning Outcomes and supports the achievement of the program outcomes (PGs and SLOs).
- The MFT Program will evaluate and review the data from student feedback concerning teaching /learning practices, the physical, technological, instructional and clinical resources, supervisor resources and sufficiency, as well as student support services, and /or revise these areas as needed, on a yearly basis
- The MFT Program will evaluate and review the data from faculty, MFT personnel and supervisor surveys (done according to the design in [4] below).
- The MFT Program Director, along with university administrators, will evaluate, review and/or revise (*every 3 years*) the policies and procedures in place to determine that faculty, fiscal, physical, technological and instructional resources are sufficient to meet the program outcomes.
- MFT faculty/personnel, along with academic administrators, will evaluate (*every 3 years*) how the seminary environment encourages faculty teaching, scholarship, service and practice, and how the environment allows the program to achieve the program outcomes.

• The MFT Program Director, along with academic administrators, will evaluate and/or revise (*every 3 years*) how student support services sufficiently meet the needs of students and the program.

4. Design and Develop an Assessment Plan

- MFT faculty/personnel will design an assessment plan that addresses all of the program outcomes, stating what data for what targets and their benchmarks will be collected for each SLO and FO, for assessment purposes.
- Admissions personnel of the seminary will gather information about new students from both application and registration materials, and report this to the MFT Program Director each fall.
- MFT faculty/personnel will develop and give/send (a) relevant survey(s) (based on the program's POs, SLOs and current Standards requirements) to the following communities of interest, for the purpose of collecting information/data that will help in assessing the POs, SLOs and current Standards requirements of the program and needs of the communities:
 - o Graduating students of the MAMFT Program, annually upon graduation
 - o Graduates of the MAMFT Program since the previous survey, every year.
 - o All graduates of the MAMFT Program at least every three years.
 - o Supervisors, every two or three years
 - o MFT faculty, at least every two years

5. Collect, Analyze, and Review data

- MFT faculty/personnel will gather the information/data, following the assessment plan, for the purpose of providing evidence of achieving the program's PGs, SLOs, FOs, and current Standard's requirements.
- MFT faculty will review and analyze the data and its results to determine how well the program is meeting its stated program outcomes (PGs, SLOs, etc.).

6. Take Action: Revision of Program

- Based upon the results of the data and its analysis, MFT faculty/personnel will determine what about the program is effective and sufficient, as well as what about the program needs to be revised.
- MFT faculty/personnel will then revise those aspects of the program indicated by the data review, in order to better achieve its program outcomes (PGs, SLOs, etc.).

7. Report to Stakeholders

- Report data to COAMFTE, as well as to other accreditation bodies (i.e., Middle States and ATS) as needed.
- Report to the university faculty, as well as to certain communities of interest (i.e., posting key results on the seminary's web site and on the counseling centers' website, and informing supervisors).

COURSE DESCRIPTIONS

CC525 FOUNDATIONS FOR MARRIAGE AND FAMILY THERAPY

Presents an evaluation of the personal life of the minister or counselor with a focus on self-understanding, self-care, differentiation, integrity, and enrichment. Looks at Bowenian theory and the Inter-System Model of exploring individual, interactional and intergenerational dynamics. Helps students evaluate their self-image, relational skills, and family of origin dynamics through the "Family Voyage" class project. 3 credits (Fall Semester)

CC527 THEORIES OF MARRIAGE AND FAMILY THERAPY I

This course is designed to provide a basic theoretical foundation for the "classic" modern marriage and family therapy theories. The following sub-schools are examined: Psycho-dynamic, Structural, Strategic, Contextual, Experiential, IFS, and Cognitive-Behavioral. It will include conceptualization of family and couple dynamics, and the theory and application of interventions according to various therapeutic modalities. Contrast between theories will be explored as well as integration with a Christian worldview. Each student will begin to conceptualize his or her own therapeutic framework out of a deepening self awareness. Quizzes and an exam will facilitate preparation for the MFT licensure exam. 3 credits (Fall Semester)

CC528 THEORIES OF MARRIAGE AND FAMILY THERAPY II

Presents a basic theoretical foundation for postmodern marriage and family therapy theories. The following sub-schools are examined: Solution Focused, Narrative, Constructionism and Feminist-informed, Constructivism, Integrative, and Comparative. The Gottman Couples Training Level I is included in this course and students will receive a certificate of completing this training. Students continue to develop treatment plans and to conceptualize a systemic therapeutic approach, integrated with biblical constructs. Includes conceptualization of family and couple dynamics, and the theory and application of interventions according to various therapeutic modalities. Contrast between theories will be explored as well as integration with the Christian world view. Each student will begin to conceptualize his or her own therapeutic framework. Quizzes, assignments and exams will facilitate preparation for the MFT licensure exam. Prerequisites: CC525 and CC527. 3 credits (Spring semester)

CC 647 TELETHERAPY SKILLS & ETHICS

1 credit (January) Presents therapeutic skills necessary for completing client paperwork, storing/accessing HIPAA related data on online platforms, assessing HIPAA compliance, teletherapy etiquette, and discussion on the suitability of a client to participate in online therapy. Ideally students will take this course before starting internship or within the first rotation of internship. The course will cover teletherapy best practices, ethical considerations, and risk management.

CC617 PERSONAL GROWTH PLAN (PGP)

Students must participate in a program for personal or relational growth during their second year of study, for part-time students, and during their first year for accelerated students. Both married and single students are expected to participate in a minimum of six therapy sessions for individual, marital, or family concerns. Students must submit a written proposal of the PGP to the Marriage and Family Therapy Assistant for what they expect to do, when they plan to begin and end, what issue(s) they hope to address, and with whom they hope to do therapy. Proposals will be approved and monitored by the Marriage and Family Therapy Assistant and upon completion of the PGP, students must submit a written summary of their PGP and what they learned to the Marriage and Family Therapy Assistant. A grade of S will be given when the PGP is completed. Enrollment is limited to MFT students only. 0 credit

CC625 ASSESSMENT IN MARRIAGE AND FAMILY THERAPY

Provides an overview of the Diagnostic and Statistical Manual (DSM-5) with a family systems perspective, regarding both etiology and treatment of various clinical disorders. Case conceptualization, assessment, diagnostic, and treatment planning skills will be developed in both individual and relational arenas. Various assessment measures will be reviewed and Crisis Intervention will be addressed. Enrollment limited to MAMFT students only. Prerequisites: CC525 and CC527.

3 credits (Spring semester)

CC627 RESEARCH IN MARRIAGE AND FAMILY THERAPY

This course will provide an overview of the purpose, methodology, and process of marital and family therapy research. Specific attention will be given to the scholarly writing of a literature review, to various methods of research design both quantitative and qualitative, to a process for evaluation and critique of research articles, and to becoming meaningful consumers of research through an application of effectiveness-based research and progress research. Ethical issues will be addressed as well as what it means to view research through a theological lens. Prerequisites: CC525, CC527 and CC528. 3 credits (Spring semester)

CC633 DYNAMICS OF BIOPSYCHOSOCIALSPIRITUAL DEVELOPMENT AND HEALTH ACROSS THE LIFE SPAN

This course addresses individual and family development, human sexuality, and the interconnectedness of biopsychosocialspiritual health across the life span. Practices of "Integrated Care Providers" will also be explored, such as: prevention and engaging the consumer in taking initiative for wellness through motivational interviewing; using screening tools for assessment (protective, as well as risk factors); participating in interdisciplinary health teams; and resilience and recovery models. Health psychology, digital literacy, and telehealth, as well as the impact of technology in a person's life and relationships will be reviewed. The voice of the consumer concerning healthcare will be integrated in various ways throughout the course. Prerequisite: CC525/PM515. 3 credits (Fall semester)

CC637 FAMILY THERAPY SKILLS AND PRACTICE

Focuses on learning the basic skills of communication that are essential to conducting therapy. Special focus is placed on the skills in the initial therapy session. Students will use case conceptualization, learn some basic intervention techniques, and begin to implement theoretical concepts with the practice of therapeutic skills. Prerequisites: Part-time MFTs: CC525, CC527 and CC528; accelerated part time MFTs: enrolled in CC525 and CC527; MDivMFCs: CC525 and CC527. 3 credits (Fall semester)

CC646 PSYCHOLOGICAL TESTS AND MEASUREMENTS

Provides an overview of the procedures and validity of psychological testing. A conceptual understanding of major statistical procedures is noted with practical application to the Myers-Briggs Type Indicator. This course meets the statistical requirements for students to become an MBTI practitioner. This is provided as a hybrid online course: one week in the online classroom and two weeks asynchronously on Pathwright. Prerequisite: CC525/PM515. 1 credit (January)

CC648 HISTORY AND THEOLOGY OF MARRIAGE AND FAMILY

Addresses the historical treatment (both secular and ecclesiastical) and theological perspectives of gender, singleness, marital covenant and marital responsibilities, divorce and remarriage, sexuality and homosexuality, and children and parenting. This is provided with asynchronous online elements. 3 credits (Summer)

CC713 CHILDREN AND ADOLESCENTS IN FAMILY THERAPY

Focuses on child and adolescent difficulties that are experienced within the family, from a family systems perspective. Child and adolescent development will be covered. How the child and adolescent influence the family, and vice versa, will be discussed. Assessment and treatment skills will be explored and developed for working with children and adolescents alone and within the context of the family therapy. Special focus will be given to play therapy. Prerequisites: CC525, CC527, CC528, CC625 and CC637. 3 credits (Summer)

CC726 MARRIAGE THERAPY - THEORY AND PRACTICE

Evaluates theoretical models of marital therapy along with the skills of marital assessment. Students learn basic approaches to marital therapy along with systemic intervention techniques. Presents a variety of marital issues that focus on sharpening skills in formulating theoretical assessment, therapeutic goals, joining techniques and systemic strategies

for change. Prerequisites for part time MFTs: CC525, CC527, CC528 and CC637; for accelerated part time MFTS: CC525, CC527, CC637 and enrolled in CC528; for MDIV students: CC525, CC527 and CC637. 3 credits (Spring semester)

CC728 ETHICAL, LEGAL AND PROFESSIONAL ISSUES IN FAMILY THERAPY

Explores the development of professional attitudes, integrity, and identity of the marriage and family therapist. Issues including professional socialization, professional organizations, licensure, family law, and confidentiality are noted. The American Association for Marriage and Family Therapy (AAMFT) code of ethics is highlighted along with various legal issues and liabilities related to marriage and family therapy. For part time MFTs, must be taken prior to beginning CC845. Enrollment limited to MAMFT students only. This is provided as a hybrid online course: a few weeks in the online classroom with asynchronous elements on Pathwright. (Summer)

CC729 ABUSIVE AND ADDICTIVE FAMILY SYSTEMS

This course will address the assessment and treatment of physical, emotional, and sexual abuse, including an emphasis on child abuse and domestic violence. Emphasis will also include treatment for adult survivors of childhood abuse. The course will also explore various addictions, including behavioral and chemical addictions. Therapy for abuse and addictions will be embedded within a family systemic perspective. Systemic theories and treatment models for abuse and addiction will be explored. Students will further evaluate their personal and family of origin history and legacies of abuse and addiction that may help or hinder their clinical work in these areas. Prerequisites for part time MFTs: CC525, CC527, CC528, and CC637; for accelerated part time MFTs: CC525, CC527, CC637 and enrolled in CC528; and for non-MAMFT students: CC525, CC527, CC612, and CC637. 3 credits (Spring semester)

CC748 RELEVANT ISSUES IN THE PRACTICE OF MARRIAGE AND FAMILY THERAPY

This course will facilitate student's developing competencies in current and emerging contemporary clinical theories/applications, challenges, problems, and/or recent developments at the interface of Marriage and Family Therapy knowledge and practice. Topics may change from year to year in order to address relevant issues. 1 credit. (January)

CC826 ADVANCED MARRIAGE AND FAMILY THERAPY SEMINAR

This course will serve as a capstone to the MFT program through a learner centered format. Participants will practice dialogical engagement with one another as well as other persons within their context. This will entail implementation of the principles of self delineation, due consideration, and multilateral ethical imagination as articulated in the integrative model of Contextual Therapy. Each student will also develop his or her advanced personal theory of therapy which will include attention to common factors, diversity, self of the therapist, integration of Christian faith, illustrated with examples from internship experience, and supported with at least one applicable evidence based research article. In addition, each student will develop a plan of ongoing professional development. Enrollment limited to MAMFT students only. 1 credit (January with Summer option for early graduation request)

CC827 DIVERSITY & CULTURAL ATTUNEMENT (formerly named as GENDER & ETHNICITY)

This course explores the dynamics of diversity, power, and privilege across multiple dimensions (ie. gender, ethnicity, race, class, sexuality, religion, and intersectionality). It facilitates the development of culturally competent therapeutic skills in attentive address, in assessment (including Cultural Formulation Interview), and in treatment modalities. The work begins with a study of relational theological anthropology seeing the heart of God as steadfast love for every person. Skills for dialogical engagement of both self and other will be practiced. Each student will research their own ethnic and cultural heritage, identifying biases and prejudices along with strengths and resources. Students will engage a diverse, multicultural, marginalized, and/or underserved community, and practice trauma informed ways of being with self and others. Enrollment limited to upper level MAMFT students only (meaning all 1st and 2nd year courses have been taken). 3 credits (Fall semester)

CC837 SEXUAL FUNCTION AND SYSTEMIC SEX THERAPY

Presents an analysis of human sexuality in view of biblical theology, historical and cultural attitudes. Healthy and pathological sexual functioning are noted along with a study of a systemic approach to sex therapy in the context of marriage counseling. Enrollment limited to upper level MAMFT students only (meaning all 1st and 2nd year courses have been taken). 3 credits (Fall semester)

CC857 TRAUMA, RESILIENCE, & RESISTANCE

This course presents neurobiology, trauma protocols, introduction to trauma treatment modalities within the context of clinical work as a marriage and family therapist. The objective of this course is to provide the foundational understanding of trauma-informed care when conducting assessments and treatment plans in clinical practice. Additionally, this class will expose students to the variety of trauma training options post-graduation and to begin the formational journey to embody safety well. 3 credits (Spring semester)

CC845 MAMFT COUNSELING Internship I

Provides direct counseling experience with individuals, couples, and families for MAMFT students. Students will be given the choice of doing either a 300-hour or a 500-hour internship, and must accrue these contact hours, over the four internships, spanning 21-24 months, in order to complete their degree requirements. These hours for on-campus students are usually, but not necessarily completed in Seminary provided clinical settings. Students need to secure a placement for their internship. Additionally, students register for and receive regular weekly supervision of their cases through review of recorded sessions. Group supervision will occur during the first week of each month, and dyadic/individual supervision will occur each week following the first week. internship also assists students in the development of their professional skills as marriage and family therapists, including self-of-the therapist issues, as well as the integration of marriage and family theory and praxis with Christian faith and biblical principles when possible. More specifically, this 21-24 months sequence is designed to progressively build toward each student's development of a competent clinical presentation of the application of his/her stated theoretical orientation/theory during the third internship (CC847), and a written personal theoretical orientation of treatment (completed during the final capstone course CC826).

internship. Evaluations will be completed at the end of each supervisory rotation/internship. This internship spans 6 months, usually February through July.

Successful performance will be demonstrated at the end of this internship by having a cumulative score of 2.0 or higher in each of the five "skill areas." The student will receive a grade of "CR" upon completion. Prerequisites: Part-time students - CC525, CC527, CC528, CC545, CC625, CC637, CC633 and CC646, and registered for CC726 and CC729; Accelerated part time students - CC525, CC527, CC545, CC637, CC633, and CC646 and registered for CC528, CC625, CC726, and CC729 3 credits

CC846 MAMFT COUNSELING internship II

See the course description for CC845. During this internship, dates for student's Oral/Written Clinical Case Presentations during CC847 will be determined during group supervision, and given to the Program Director, who will make a list available to all to be included. Successful performance will be demonstrated at the end of this internship by showing some progression in theoretical competency and skills development from the previous internship evaluation (ideally demonstrated in most categories), with scores in the 2 to 3 range. The student will receive a grade of "CR" upon successful completion. This internship spans 6 months, usually August through January. Prerequisite: CC845 3 credits

CC847 MAMFT COUNSELING internship III

See the course description for CC845. During this internship, students will focus on preparing and presenting, during group supervision, a competent application of their theory of therapy to one of their relational clinical cases (family or couple), to show evidence of their professional development and competency, as well as to show progression toward their goals while using their theory. [A competent application of a theory of therapy will include the following aspects: contextual/diversity issues, ethical and professional issues, and self-of-the-therapist issues.] A pass/fail grade will be

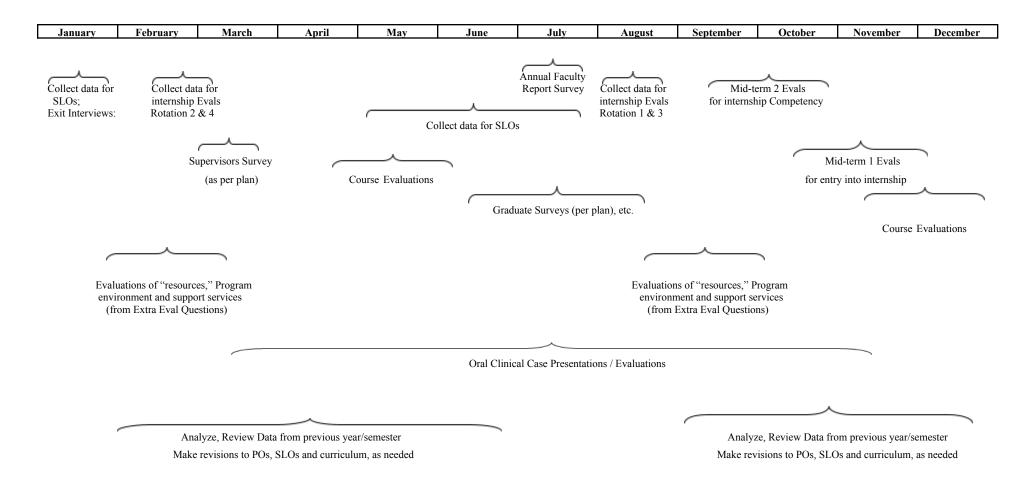
given, and students must pass this evaluation in order to graduate from the MAMFT Program. If a student fails the first time, they will be allowed to redo this presentation a second time, during the 4th internship (CC847).

Successful performance of this internship will be demonstrated at the end of this internship by showing some progression in theoretical competency and skills development from the previous internship evaluation (with scores in the 3 range), and/or maintaining competency once attained. The student will receive a grade of "CR" upon successful completion. This internship spans 6 months, usually February through July. Prerequisite: CC846 3 credits

CC848 COUNSELING internship FOR MAMFT STUDENTS IV

See the course description for CC845. Successful performance of this final internship will be demonstrated by attaining the program level competency score in at least 4 of five "skill areas" of the evaluation. The student will receive a grade of "CR" upon completion of acquiring all of the chosen 300 or 500 hours required for the whole internship, and upon successful performance of the evaluation. This internship spans 6 months, usually August through January. Prerequisite: CC847. 4 credits

Annual Assessment Timeline/Calendar



Annual Assessment Timeline/Calendar

July - December

- Collect data for SLOs
- Report outcome data from Self-Study (when applicable)
- Analyze & Review results/outcomes of data, then Revise SLOs & Curriculum, etc., as needed
- Identify & Check curriculum alignment with SLOs (every other year)
- Report outcome data from previous year, as needed

July: internship Evaluations 1st & 3rd Rotations **September-October:** Mid-term 2 Evaluations **October-December:** Mid-term 1 Evaluations

September-December:

Analyze & Review results of data (past semester/year)

Revise SLOs & Curriculum, as needed



January - June

- COAMFTE Annual Report
- Collect data for SLOs
- Review, & analyze previous semester/year's data & revise program outcomes, as needed
- Evaluate/Review/Revise policies/procedures of resources
- Evaluate program environment, etc. re: EOs
- Evaluate/Revise student support services
- Report outcome data from previous year, as needed
- Report outcome data from Self-Study (when applicable)

January: internship Evaluations 2nd & 4th Rotations

January: Collect data for SLOs February – June: (as needed)

Analyze & Review results of data (past semester/yr)

Revise SLOs & Curriculum, etc. as needed

April-May: Evaluations of resources, Program environment,

student support services (as per plan)

May-June: Graduate assessments **June-Aug:** Collect data for SLOs

Annual Assessment Plan Design

Student Learning Outcomes (SLO)	SLO 1 Students will demonstrate comprehension and application of the relational/systemic marriage and family therapeutic models	SLO 2 Students will be able to articulate what marriage and family theory/theories inform their clinical work and its application to multicultural contexts	SLO 3 Students will demonstrate knowledge and competency in assessment, diagnosis, treatment planning, and therapeutic interventions with individuals, couples and families seeking treatment, from a relational/systemic framework that is multi-culturally-informed.	SLO 4 Students will demonstrate knowledge and basic application of research to marriage and family therapy	SLO 5 Students will demonstrate knowledge and competency of MFT ethical, legal and professional issues
	At least 80% of students receive grade of 83% or higher on: 1) Theories Paper in CC527 & 2) Personal Models Paper in CC528	CC528 Theoretical Paper At least 80% of students receive grade of 83%or higher CC826 Advanced Seminar Paper At least 80% of students receive grade of 83% or higher	At least 80% of students receive grade of 83% or higher on: 1) Role-play CC.CA & TP in CC625 2) Final Exam's CC, CA & TP in CC729 At least 80% of students receive grade of 83% or higher CC729 Final Exam Oral Clinical Case Presentation Pass	CC627 Task Analysis Assessment & Paper At least 80% of students receive grade of 83%or higher	CC728 Case Studies presentation/paper At least 80% of students receive grade of 83% or higher
	Mid-Term Student Evals # 1 & 2 At least 80% of students receive a 3.0 or higher on this SLO	Mid-Term Student Eval # 2 At least 80% of students receive a 3.0 or higher for this SLO	Client Evaluations Interns collectively receive 2.0 or lower		
	internship Evals At least 80% of students attaining program-level competency by end of internship Sup eval of Intern: in Familiarity of Therapy Models and in Integration of Models		internship Evals At least 80% of students attaining program-level competency by end of internship Sup eval of Intern: CC, CA & Dx, Hypoth, TP, Interventions		internship Evals At least 80% of students attaining program-level competency by end of internship Knowledge and competency of MFT ethics

Student Learning Outcome s (SLO) Data to Use /	SLO 6 Students will demonstrate awareness of and address "self of the therapist" issues that impact the capacity for practice/service and ministry.	SLO 7 Students will demonstrate awareness and comprehension of and sensitivity to issues of diversity and multiculturalism in the therapeutic process	SLO 8 Students will demonstrate comprehension and the ability to address faith perspectives and experiences of clients with marriage and family theory and praxis (revised 3/2/23)	
	CC729 Personal Addictions Paper At least 80% of students receive grade of 83% or higher	CC827 Cultural Genogram Paper At least 80% of students receive grade of 83% or higher	CC837 Theology of Sexuality Paper At least 80% of students receive grade of 83% or higher	
	CC837 Personal Sexual History Narrative At least 80% of students receive grade of 83% or higher	CC648 Posts of Theological Positions Statements At least 80% of students receive grade of 83% or higher	CC648 Posts of Theological Positions Statements At least 80% of students receive grade of 83% or higher	
	Mid-Term Student Eval # 1 & 2 At least 80% of students receive a 3.0 or higher for this SLO			
	internship Evals At least 80% of students attaining program-level competency by end of internship Self of therapist	internship Evals At least 80% of students attaining program-level competency by end of internship Diversity & multiculturalism	internship Evals At least 80% of students attaining program-level competency by end of internship Integration of theory and Bible	

EOs	<u>Used for Assessment</u>
SLO 1:	CC527 Theories Paper Grade & CC528 Personal Models Paper Grade; internship Evaluation; Mid-term 1 & 2
	Evaluations
SLO 2:	CC528 Theoretical Paper Grade & CC826 Advanced Seminar Paper Grade; Mid-term 2 Evaluation
SLO 3:	CC625 Role-play CC, CA & TP grades & CC729 Final's CC, CA & TP Grade; Oral Clinical Case Presentation CC,
	CA & TP; Client Evaluation Results ; internship Evaluations Results
SLO 4:	CC627 Task Analysis Assessment and Report Grade
SLO 5:	CC728 Case Studies (presentation/paper) Grade; internship Evaluation Results
SLO 6:	CC729 Personal Addictions Paper Grade & CC837 Personal Sexual History Narrative Grade; internship Evaluations
	Results ; Mid-term 1 & 2 Evaluations
SLO 7:	CC827 Cultural Genogram Paper Grade & CC648 Posts of Theological positions statements Grades; internship
	Evaluations Results
SLO 8:	CC837 Theology of Sexuality Paper Grade; CC648 Posts of Theological positions statements Grade; internship
	Evaluation Results