
Southern Connecticut State University's
Marriage and Family Therapy Program

Program Handbook

Department of Social Work

School of Health & Human Services

2020-2021 Academic Year



Dear MFT Program Community:

Welcome to the MFT community at Southern Connecticut State University. We are pleased to present you with this MFT Program Handbook. Whether you are a student, faculty member or offsite placement supervisor, please read this thoroughly. Inside you will find information pertaining to the MFT program that is useful, practical and important. Your rights, as well as your obligations, are defined here.

We have taken significant steps over the years to enhance the student advisement process. We urge students to meet with their designated faculty advisor at least once a semester. The advisor can be the most helpful individual for you during your student career at Southern Connecticut State University and will mentor and help you with course selection, academic and professional issues, and future career opportunities. They are a valuable resource during your time here.

As Program Director I extend a personal welcome to the Marriage and Family Therapy Program at SCSU. Our program is one of the nation's first accredited MFT programs, teaching students in the art and science of Marriage and Family Therapy since 1979. I hope you find ways to grow here—personally and professionally—and that you find your time here rewarding beyond expectations.

“Trust the process.”

Most Sincerely,

Mr. Paul Levatino

Paul Levatino, LMFT
Program Director

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MFT CORE FACULTY

NAME	PHONE	LOCATION	E-MAIL ADDRESS
Dr. Julie Liefeld	203-392-5480	Davis Hall Room 022A	liefeldj1@southernct.edu
Dr. Rebecca Harvey	203-392-7262	Davis Room 24B	harveyr7@southernct.edu
Dr. Sebastian Perumbilly	203-392-6410	Davis Hall Room 29	perumbillys1@southernct.edu
Mr. Paul Levatino	203-392-7274	Davis Hall Room 24A	levatinop1@southernct.edu

*Students are required to use their SCSU assigned e-mail addresses. We cannot send notices or communications to personal e-mail addresses.

MARRIAGE AND FAMILY THERAPY ROLES

NAME	PHONE	LOCATION	E-MAIL ADDRESS
Dr. Todd Rofuth Chairperson	203-392-6580	Lang House Room 201	rofuth1@southernct.edu
Paul Levatino, LMFT Assistant Professor, Program Director, Clinic Director	203-392-7274	Davis Hall Room 024A	levatinop1@southernct.edu
Dr. Rebecca Harvey Professor, Admissions Coordinator	203-392-7262	Davis 24B Room 207	harveyr7@southernct.edu
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Jennifer Kerr Graduate Assistant	203-392-6432	Davis Hall Room 020B	kerrj6@southernct.edu

Marriage and Family Therapy Program Southern Connecticut State University

Mission Statement

The mission of the Marriage and Family Therapy (MFT) program at Southern Connecticut State University (SCSU) is to provide training for marriage and family therapists through an experiential educational approach. Graduates of the program will be able to work systemically with individuals, couples and families from diverse populations.

American Association for Marriage and Family Therapy (AAMFT) *Core Competencies*

The MFT program at SCSU is accredited by the *Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE)*, a subdivision of the *American Association of Marriage and Family Therapy (AAMFT)*. As a COAMFTE accredited program, designed to provide the most up-to-date training, our program is designed to train therapists to be emerging professionals who go on to demonstrate AAMFT Core Competencies as licensed professionals. The AAMFT core competencies can be found here:

[https://www.coamfte.org/Documents/COAMFTE/Accreditation%20Resources/MFT%20Core%20Competencies%20\(December%202004\).pdf](https://www.coamfte.org/Documents/COAMFTE/Accreditation%20Resources/MFT%20Core%20Competencies%20(December%202004).pdf)

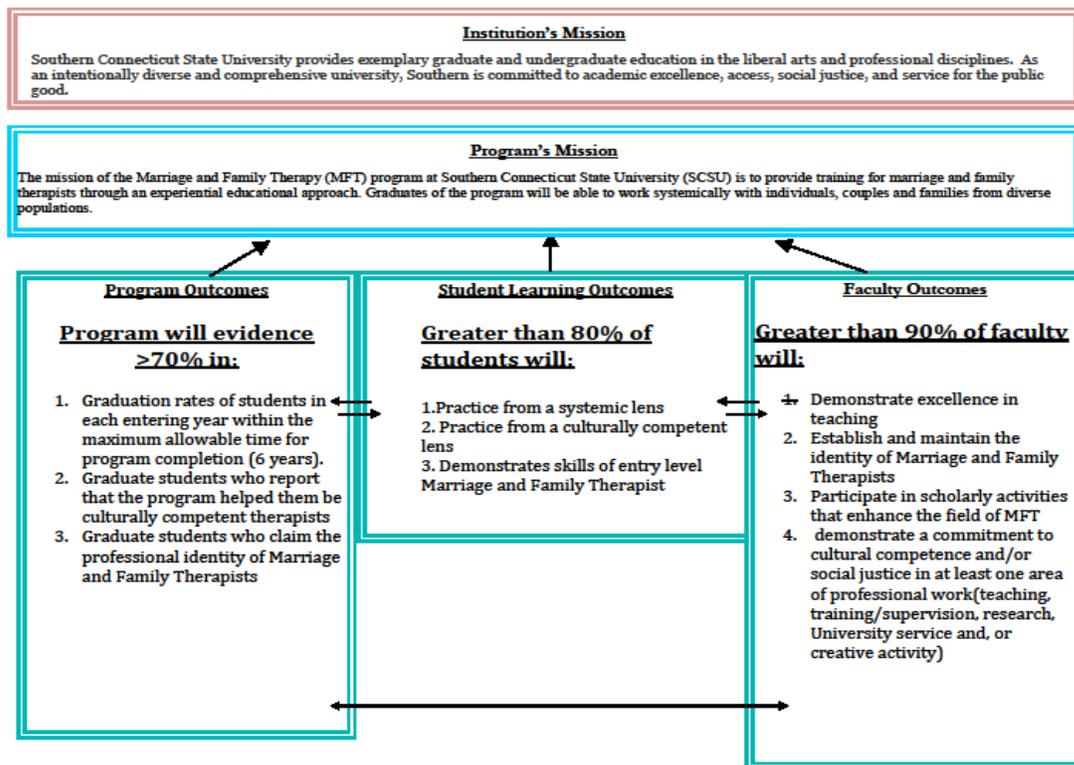
COAMFTE Student Accomplishment Standards

COAMFTE requires that all accredited programs track and post graduate achievement statistics. Our program's statistics are found on our landing page: www.southernct.edu/mft

The Marriage and Family Therapy Program at Southern Connecticut State University has defined the following Student Learning Outcomes (SLOs), Program Outcomes (POs) and Faculty Outcomes (FOs):

Program Outcomes	Student Learning Outcomes	Faculty Outcomes
Program will evidence > 70%	Greater than 80% of students will:	Greater than 90 % of faculty will:
Graduation rates in each entering year within the maximum allowable time for program completion (6 years).	Practice from a systemic lens	Demonstrate excellence in teaching
Graduate students who report that the program helped them be culturally competent therapists.	Practice from a culturally competent lens	Establish and maintain the identity of Marriage and Family Therapists
Graduate students who claim the professional identity of Marriage and Family Therapists.	Demonstrates skills of entry level Marriage and Family Therapist	Participate in scholarly activities that enhance the field of MFT
		100% of SCSU faculty will demonstrate a commitment to cultural competence and/or social justice in at least one area of professional work (teaching, training/supervision, research, University service and/or creative activity).

Student Learning Outcomes, Program Outcomes and Faculty Outcomes are carefully designed to align with and support the University & Program Mission:



ACADEMIC POLICIES

Academic Advisement

Each student is assigned a core faculty member as an advisor. These assignments are made when the student enters the program. We respect your privacy: If student does not want his/her/ze name printed in the materials such as the MFT advisor list, Dean's list, and graduation program, inform the MFT Program Director, SCSU's Registrar and the Dean of Students in writing.

Responsibilities of the Advisor:

- Confers with students during the semester to review program standing
- Works closely with advisee in the event of academic remediation
- Counsels advisee about academic, professional, and career issues
- Performs as an academic manager and coordinator for students
- Serves as a student advocate during Student Review Committee

Responsibilities of Advisee:

- Initiates contact with advisor when needed
- Informs advisor of challenges in academic and clinical standing (course and field work)
- Confers with advisor about deviations from standard program track selections
- Provides current information to program (address, phone numbers, name changes, etc.)

Advisor List			
Dr. Perumbilly	Dr. Liefeld	Prof. Levatino	Dr. Harvey
Lillian Arrington (2015 PT)	Sarah Branigan (2020)	Kim Adams (2019)	Cheyenne Ahmad (2020)
Naishay Blackwell (2020)	Alisa D'Andrea (2020)	Liam Bialobrzkeski (2020)	Zandile Benya (2020)
Mercedes Bryant (2019)	Melanie Fortin (2019)	Marisa Conlin (2020)	Lauren Daros (2019 PT)
Katie Campochiaro (2019)	Jeannine Frost (2020 PT)	Danielle Diaz (2018 PT)	Gloria De La O Serpas (2020)
Brigid Cleary (2019)	Sarah Garcia (2019 PT)	Amanda Jurgens (2020)	Elizabeth Dougherty (2019 PT)
Meghan Cuticello (2020)	Errin Gaulin (2019)	Emily Kipness (2018 PT)	Jennifer Kerr (2019)
Sarah Ferrigno (2020)	Avrey Juntilla-Smith (2020)	Miranda Love (2020)	Alexandra Kroudis (2020)
Chey Johnson (2019)	Yue Liu (2020 PT)	Liam O'Mahony (2020)	Milena Niedbala (2020 PT)
Karolina Kaczmarczyk (2020 PT)	Aminah Marshall (2017 PT)	Emily Phelan (2020)	Morgan North (2019 PT)
Nahi Kouabo (2020 PT)	Alexandra Miranda (2019)	Rabina Rahamat (2020 PT)	Erin Schopfer (2018 PT)
Rachael Medina (2019 PT)	Natalia Noll (2019)	Mataya Robertson (2019)	Anastasia Sloss (2019)
Priyal Patel (2019)	Gwen Petti (2018 PT)	Tammy Rooney (2019)	Dakota Summer (2019 PT)
Amber Ross (2020)	Bonnie Reynolds (2019)	Deborah Santangelo (2018 PT)	Jacquelyn Temelsiz (2020)
Brittany Ulrich (2019)	Margarita Rodriguez (2019)	Maya Severson-McCormick (2020 PT)	Vanessa Truglio (2018 PT)
Maria Vincent (2019 PT)	Barbara Templeton (2019 PT)	Donna Sheehan (2019 PT)	Lou-Ann Yearwood (2019)
	Marianne Tyghter (2020 PT)		

PROGRAM PLANNING

Program planning begins soon after a student's acceptance into the graduate program. The purpose is to provide a framework of courses for graduate studies.

The planned program is used as the basis for determining credits for graduation. When and if a change is needed in your overall program, you must meet with your advisor who will then secure the approval of the MFT Program Coordinator and the Chairperson of the Department of Social Work. Prior to graduation, you will meet with your advisor, and a verification of completed program plan will be submitted to the Graduate Office to demonstrate you have met academic requirements.

COMPREHENSIVE EXAMINATION

The comprehensive examination is set by the MFT program and scheduled the final term of study. The MFT Program follows the policies, procedures and requirements outlined in the Graduate Catalog.

STUDENT LEARNING OUTCOME (SLO) PROGRESS REPORT

Students are expected to meet Student Learning Outcomes as they progress through the planned program of study. A copy of the SLO Progress Report is maintained in each student's file. A blank SLO Progress Report is included within the appendices of this handbook.

TRANSFER CREDITS

A maximum of nine (9) credits of previous graduate level course work may be transferred into the planned program of study. According to the terms of the Graduate School, eligible transfer coursework must meet the following criteria:

- completed at the graduate level from a COAMFTE accredited institution authorized to grant graduate degrees
- completed with a grade of "B" (3.0) or higher; (pass/fail courses may not be transferred)
- completed within the six-year's previous to graduation
- be recorded on an official transcript from the granting institution
- not used toward awarding another degree

Students provide the course syllabus to assess the course has equivalency to the course it is replacing within the program. Your advisor, current course instructor and program director review the syllabi and determine the fit and suitability of transfer credit by vote.

DIVERSITY, INCLUSION & NON DISCRIMINATION POLICIES

As a program committed to social equity in the practice of couple and family therapy, Southern Connecticut State University and its Marriage and Family Therapy Program promotes a learning environment where diversity is welcomed, fostered and honored. We view and define diversity in a broad sense, and through an intersectional lens, including not only members of disadvantaged populations and persons of color, but also differences in ethnicity, nationality, culture, lifestyle/sexual orientation, gender identity, social class, socioeconomic status, religion, spiritual beliefs and/or affiliation, national origin, age, gender, health status and disability. We promote diversity among our student body, faculty and supervisors, and in addition to agency settings and clientele served.

Southern Connecticut State University does not discriminate on the basis of age; ancestry, color; gender identity and expression; intellectual disability; learning disability; mental disorder; physical disability; marital status, national origin; race; religious creed; sex, including pregnancy, transgender status, sexual harassment and sexual assault; sexual orientation; veteran status; or any other status protected by federal or state laws. Information on filing a discrimination or harassment complaint is here:

<https://inside.southernct.edu/diversity/complaint-procedures>

Statistics on the diversity composition of SCSU's MFT community may be found on our program's landing page <http://www.southernct.edu/mft>.

Equal Opportunity for Diverse Learners and those with Differing Ability

Southern Connecticut State University is committed to full inclusion and equal educational opportunity for all persons with disabilities. The University adheres to the requirements of Title II of the Americans with Disabilities Act of 1990, and Section 504 of the Rehabilitation Act of 1973 as amended in 1998. This law requires that no qualified individual with a disability shall, on the basis of disability, be excluded from participation in, or denied benefits of, this institution's classes, programs, services, or facilities. The University has made reasonable modifications in policies, practices, procedures, and/or facilities.

Persons with disabilities at the University have the right to:

- Equal access to courses, programs, services, jobs, activities, and facilities offered through the University;
- Equal opportunity to work, to learn, and to receive reasonable accommodations, academic adjustments, and/or auxiliary aids and services;
- Appropriate confidentiality of all information regarding their disability and a choice as to whom, outside of the University, information about their disability will be disclosed, except as disclosures are required or permitted by law;
- Information available in alternative formats.

The University maintains a Disability Resource Office to serve students with disabilities. Disability categories include, but are not limited to, the following:

- Mobility/Orthopedic disabilities
- Specific learning disabilities

- Attention deficit disorders
- Vision and hearing difficulties
- Acquired head injuries
- Psychological disabilities
- Chronic health-related and other disabilities

Eligibility for Services and Accommodations

Students who seek support services from the Disability Resource Office and accommodations by the Marriage and Family Therapy Program are required to submit documentation to verify eligibility as defined under Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. Protection under these civil rights statutes is based upon documentation of a disability that *currently substantially limits at least one major life activity*.

Eligibility for accommodations must be supported by documentation and determined reasonable by staff. Current relevant documentation is the key to identifying appropriate accommodations and auxiliary aids at the graduate level. To meet this requirement, documentation must be dated within the last three years and address a present need for accommodation. All documentation sent to the DRO is kept confidential. Students who submit documentation that is not current or does not adequately address their current level of functioning and/or need for accommodation, will be required to provide an updated evaluation report. School plans, such as Individualized Educational Plans (IEP) or 504 Plans, are insufficient documentation

SEXUAL MISCONDUCT INFORMATION & MANDATED REPORTING

Southern Connecticut State University and the Marriage and Family Program is concerned about the safety of all our community members. Sexual harassment and sexual violence (sexual assault, domestic violence, dating violence, stalking, and sexual exploitation) are not acceptable behaviors in our community and are violations of the law, University policies and Student Code of Conduct. The University is committed to providing prevention education and support services to our survivors and holding perpetrators accountable.

Mandated Reporting Requirements for sexual harassment and sexual violence applies to disclosures made by all members of the University Community: students, faculty, and staff. Due to new Title IX requirements from the CSU BOR, all disclosures of sexual assault, domestic violence, dating violence, stalking, and sexual exploitation must be reported to Title IX offices, regardless of context of disclosure and of request of students. No University member may hold onto any disclosure of sexual misconduct, stalking or harassment. Please disclose accordingly.

Complete reporting guidelines may be found here: <https://inside.southernct.edu/sexual-misconduct>

STUDENT LEAVE OF ABSENCE

Students who may require a leave of absence (LOA) should meet with their faculty advisor and discuss their need for an LOA. Written notification must be delivered to the MFT Program Coordinator at the start of the LOA. Students who wish to maintain their matriculation status while taking a leave of absence must register and pay for IDS 901 (0 credit): Continuous Enrollment. Failure to register for an academic course or IDS 901, will result in automatic withdrawal and the need to reapply for admission in order to reenter the MFT program. In extenuating circumstances, a student may petition for a waiver (available at <https://inside.southernct.edu/onestop/forms>) to the continuous enrollment policy. Note: LOA status may not extend the seven-year program completion deadline of the SCSU Graduate School.

DIRECTED INDEPENDENT STUDY POLICIES AND GUIDELINES

An independent study course provides an opportunity for students who wish to undertake a well-defined research project or clearly outlined and carefully delineated course of study. Independent study proposals must be approved by the student's advisor and the MFT Program Coordinator in accordance with University policies and procedures as outlined in the Graduate Catalog.

INTERNSHIP PLACEMENT

The off-campus placement coordinator facilitates student placement with agencies throughout the state. The Off-site Placement Appendix in this handbook provides information about the off-site internship process.

THE FAMILY THERAPY CLINIC

The department maintains the Family Therapy Clinic which serves the needs of the community. The Clinic consists of seven treatment rooms equipped with one-way viewing mirrors and recording equipment suitable for live supervision. Once approved to enter the clinic, students maintain five hours a week of availability to see clients. The Clinic is endorsed by the Board of Trustees and accepts referrals from the community. Interns perform therapy under direct supervision from an AAMFT Approved Supervisor or AAMFT supervisor in training. General requirements for the clinic include:

- professional liability coverage through AAMFT membership
- maintenance of case records
- participation in intake service
- participation in live supervision
- management of court referred cases, including but not limited to: letter writing, drafting treatment reports, and court appearances (a supervisor may also be present)
- facilitating supervised visitation cases
- maintaining professionalism in the clinic, as outlined in the program's Attitudes and Dispositions standards

ACCRUING CLINICAL HOURS

Total number of clinical hours needed for graduation = 500 client contact hours (minimum)

- relational hours = minimum 250 (students enrolled prior to Fall 2016); minimum 200 (students enrolled Fall 2017 and onward)
- alternative hours = up to 100 maximum
- individual hours = no minimum

Total number of *individual* supervision hours needed for graduation = 100

Hours in front of SCSU one-way working with families or couples = minimum of 50 hours

Individual Hours

- conducting sessions with individuals

Relational Hours

- couple and family sessions
- Parenting Education Program (PEP)
- group therapy
- family assessments
- three hours of the anger management protocol
- watching an MFT faculty member conduct therapy

Alternative Hours

Students may accrue up to 100 alternative hours to meet the requirement for 500 clinic contact hours. Alternative Hours can be obtained by:

- Court Testimony/Appearances: one hour regardless of how long you wait in court. (Dropping off records does not quality.)
- Planning and Placement Team Meetings (PPT) – one hour
- Case conferences – in person with agencies
- Teaming –accruing these hours involves observing cases and actively participating in case discussion, record keeping and treatment management. In order to count teaming hours, student must actively participate (i.e., add to the discussion in case planning, consistently observe the same cases, take notes for the therapist, provide feedback for the therapy sessions they watch, and discuss the case with the therapist following the session.) Students should team with the same therapist, for the same clients, for at least three to four sessions in a row. No therapist will be allowed to count teaming hours if they simply observe a session without actively participating in the team. Once a student has reached their 100 teaming hours, they will not be allowed to continue accruing them on their monthly AAMFT hours sheet. Relational hours are more difficult to accrue; therefore, interns are encouraged to team on relational cases whenever possible. There are two levels of teaming that are acceptable.
 - The primary way to accrue teaming hours is to observe another primary therapist weekly in their work with clients during supervision.

- The second way is to observe another therapist's session during a supervision group when you are not assigned to see clients (this option is offered the last semester of a student's enrollment).

Supervision hours: (100 hours needed for graduation minimum with 5 to 1 ratio: client/supervision ratio. In addition, interns must receive 1 hour of individual Supervision every week while seeing clients)

Supervision group: Students are assigned into a supervision group upon entering Practicum coursework. These groups directly observe cases.

CLINICAL READINESS

SCSU MFT training involves seeing clients in two environments: at the SCSU Family Therapy Center and an offsite placement. The program's clinical readiness policy and procedure for determining when students are prepared for clinical practice in each environment is outlined in the appendix of this document.

EVALUATION OF STUDENTS

The MFT program involves the student in a unique applied learning experience. Coursework focuses on developing theoretical knowledge as well as the practical and relational skills necessary to function as a systems-based psychotherapist. Integrated into the program is a rich and extensive clinical experience along with an intense focus on the developing self-of-the-therapist. Because of the nature of clinically-focused training, the MFT program requires of a level of commitment, dedication and personal responsibility beyond a non-clinical graduate degree at SCSU. A student's approach to coursework and interaction with classmates and instructors both in and out of class provides faculty with information that is used to assess student's ability to manage responsibility, integrate core concepts of clinical practice, and interact with others in a sensitive and compassionate manner. Assessment of students includes both academic and non-academic performance. *In addition, faculty members periodically meet and discuss student performance, and may share student disclosures with other SCSU faculty and professional colleagues, administrators, or off-site internship placements for the purpose of assisting in and evaluating student development as a clinician.*

Continuation in the MFT graduate program is contingent upon positive ongoing faculty evaluation of the student in four distinct yet related areas:

1. Demonstrating essential *Professional MFT Attitudes and Dispositions Assessment* consistent with becoming a human services professional and therapist
2. Grading: the student's Q.P.R.
3. Performance in practicum and internship as reflected in ongoing faculty and supervisor evaluation;
4. Ethical, professional, legal conduct as embodied in The AAMFT Code of Ethics, University Standards for Student Conduct, and the SCSU Graduate Catalog.

1. Professional Attitudes and Dispositions Assessment

Professional Attitudes and Dispositions criteria, included in the appendix of the Student Handbook, provide a framework of personal and professional expectations within the MFT program. Students must demonstrate progress and competence with personal and professional Attitudes and Dispositions as they progress through the program. Each November the faculty meet to review student performance in this area.

2. Grading: the student's Q.P.R.

The SCSU Graduate Catalog and the Students' Planned Program of study state:

Any matriculated student who attempts nine or more credits that result in a cumulative quality point ratio of less than 3.0 in an academic program is automatically on probation. If, after attempting an additional nine credits, the GPA is still below 3.0, the student will be dismissed from the School of Graduate Studies.

A student whose GPA falls below 3.0 during the last semester of course work will be placed on probation and given one semester to raise the GPA to the 3.0 level required for graduation. If, after completing an additional semester of work, the GPA is still below 3.0, the student will be dismissed. *Conditionally accepted students* must complete MFT 597, MFT 598 & MFT 505 with a “B” in each course, or will be dismissed from the graduate school by the School of Graduate Studies.

3. Performance in practicum and internship as reflected in ongoing faculty and supervisor (on & off site) evaluations

Procedures for addressing issues with Internship related problems:

When a problem or issue arises related to an off-site placement, the student or supervisor will use the following procedure. All parties involved in the internship can initiate this review process: the student, the advisor, the agency supervisor, and/or the SCSU supervisor. These matters may also be referred to the Student Review Committee (discussed below) for review.

- a) This issue is brought to the attention of the supervisors in both placements. A conference between SCSU MFT program, off site placement representative and the student and student’s supervisor or advisor is scheduled to address the specific issue and goodness of fit between the student and the placement, as well as the off site placement’s ability to support the student’s needs.
- b) A written agreement may be drawn up to address concerns and to specify behaviors (if any) that require change. A time period for subsequent review should be set which is timely and appropriate to the situation.
- c) All meetings regarding the progress of an intern and issues around placement are documented and the student is treated within the expectations and protections of the graduate student handbook, AAMFT training standards and the SCSU MFT Handbook. Issues of misconduct are treated within the same standards.

5. Guidelines and parameters defining misconduct for a SCSU students, human service professionals and MFT is guided by standards in the following documents. Any student found in violation of these expectations may be subject to progressing disciplinary action and can be asked to leave the SCSU MFT program.

a) The AAMFT Code of Ethics

https://www.aamft.org/Legal_Ethics/Code_of_Ethics.aspx?WebsiteKey=8e8c9bd6-0b71-4cd1-a5ab-013b5f855b01

b) University Standards for Student Behavior

<https://inside.southernct.edu/sites/default/files/a/sites/student-conduct/StudentCodeofConductrevised6.16.16.pdf>

c) SCSU Graduate Student Handbook

<https://catalog.southernct.edu/graduate/>

STUDENT REVIEW COMMITTEE

Role and Function

The MFT Program is committed to creating an environment in which students have appropriate access to resolution of academic or interpersonal problems. This requires honest, open, and assertive communication with all parties involved. To facilitate this process, the Student Review Committee (SRC) works with faculty and students. At minimum, the SRC is comprised of the MFT Program Director, one additional core faculty member, and the core faculty advisor of the student being reviewed. Minutes will be kept of the meetings of the SRC. The committee will maintain confidentiality of the meetings within the confines of FERPA regulations. Students posing a threat to self or others are not entitled to FERPA protections.

The SRC is responsible for:

- a) assisting faculty in the assessment of student performance concerns.
- b) tailoring and designing appropriate remediation plans.
- c) providing review and progress evaluation of ongoing remediation plans.
- d) serving as the final decision-making body in student dismissal.

a) Assisting faculty in assessment of student performance concerns

When a faculty member has an initial concern that a student is experiencing a serious academic or interpersonal difficulty, or is engaging in behavior that is potentially problematic for the class or the program, the faculty member will first communicate directly with the student about this concern. When a student performance issue continues, the faculty member may consult with the SRC.

b) Tailoring and designing appropriate remediation plans

When a student requires a remediation plan, the SRC will work with the faculty and student to design and implement an appropriate plan. The goal of such plans is to assist the student toward satisfactory progress in the program.

c) Providing review and progress evaluation of ongoing remediation plans.

Once placed on a remediation plan a student will have regular meetings with a designated staff or faculty member for support. It is the student's responsibility to follow-up on their progress and these meetings. At the completion of the remediation plan timeframe, the faculty member responsible for monitoring the remediation plan, the student's advisor, and the student will meet to discuss the student's success at meeting the plan's targets. If the evidence shows that the plan has been successful, the Program Coordinator or responsible faculty member will notify the student, SRC, and program faculty. If the evidence of successful remediation is questionable, additional remediation activities may be deemed necessary. In addition, a student who does not meet the terms of her/his remediation plan may be referred to the Student Review Committee to ascertain a decision as to whether continuing in the MFT program is advisable. All of these discussions will be documented.

When a student is in violation of University Policy and/or the Student Code of Conduct, and/or the student is unable or unwilling to complete the remediation plan outlined in this policy the

student is subject to dismissal from the program. In this case, the ultimate decision making is made by the SRC.

d) Serving as the final decision-making body in student dismissal

The SRC is not involved with dismissals due to grading and QPR. These dismissals follow the policy of the Graduate School. However, if a student does not meet the required *Evaluation of Students* criteria outlined in the MFT Student Handbook (areas 1, 2 or 4), and/or the student is unable or unwilling to complete remediation plan goals, the student may be subject to dismissal from the program and the following process takes place:

The Program Director or another core faculty member calls a meeting to discuss student progress and performance. The meeting will include the student, student's faculty advisor, and relevant staff/faculty. The student can bring an advocate support person. (The advocate may attend to support the student, but is not offered a speaking opportunity). The purpose of this meeting is to allow all parties to share information and concerns so the SRC can gather data and make an accurate assessment and decision as to whether the student shall remain in the program. If, after this meeting, the decision is made that the student shall not continue in the program, the Program Director notifies the student of the dismissal in writing. A copy of the letter shall be sent to the Registrar's Office, the Dean of the School of Health and Human Services, the student's advisor, and the Dean of Graduate Studies. Students dismissed from the MFT Program will not be considered for readmission. Decisions for dismissal may be appealed by written request. In order to request an appeal written request must be postmarked within 14 days of the original date of dismissal letter. Appeal requests are addressed to the MFT Program Director. All dismissal appeals are reviewed and conducted by the Dean of Health and Human Services. He/she will review all materials and is granted final decision-making authority.

FACULTY TEACHING EVALUATION

All full and part time contracted SCSU faculty members are evaluated each semester following every course in two ways. A summary of the data from these evaluations is compiled by the SCSU Office of Institutional Research and forwarded to the MFT Program Director within three (3) weeks of the start of the subsequent semester. The MFT Program Director schedules course observations when concerns arise along with meetings as necessary to discuss student concerns, curriculum needs, or recommended course changes (course objectives, assignments, or focus).

All full-time tenure track faculty members have yearly contractual performance evaluations around 4 areas of performance; teaching and professional competence, creative activity, service to the department and the university, and, professional affiliation. The schedule for these yearly reviews is set forth by the Collective Bargaining Agreement and includes review by any of the following: MFT Program Director; Department Evaluation Committee; Dean of the School of Health and Human Services; University Promotion and Tenure Committee; and the Provost. Tenured faculty are subject to a Performance Review every six (6) years.

STUDENT MAILBOXES

Once students begin practicum, mail and other notices will be distributed in students' mailboxes located in the Marriage and Family Therapy Clinic in Davis, 020A.

GRADUATION APPLICATION

Each year the Graduate School sends out instructions about how to apply for graduation. As students reach the end of their degree they follow these instructions and apply for graduation and participation in the school's Graduation Commencement ceremony.

CAMPUS POLICE

The Campus Police Department is located behind the Health Center in Granoff Hall. Police officers are responsible for the safety and protection of the campus and its personnel as well as for enforcing parking regulations and conducting investigations. Students should promptly report thefts or any other incidents on campus directly to the Campus Police Department, open 24 hours a day. Students may either stop by or call the emergency numbers: 392-5375, or on campus at extension 25375.

The Campus Police Department has both male and female officers assigned to the patrol units. All officers are trained and have the same authority of a municipal police department. The department also has female and male officers trained to handle cases of sexual assault. In addition, lost items may be claimed there and found items may be turned in there.

BOOKSTORE

The SCSU Bookstore, located in the Adanti Student Center, sells new and used textbooks as well as a variety of clothing items, school supplies, and dorm accessories. Computer software, peripherals, and supplies and special book sale promotions are also featured.

UNIVERSITY CLOSING

In the event of severe weather conditions that could result in the closing of the University, students are advised check the University's homepage or call 203-392-SNOW, the Weather Check Line. Online information on University closings may be found here:

<https://inside.southernct.edu/emergency-preparedness/inclement-weather-emergencies>

IDENTIFICATION CARDS

All full and part-time students must have a University picture ID card. The Hoot Loot card is not only the University picture ID, it also provides a variety of services: access to residence halls, access to food service plans, as well as access to the library. In addition, the Hoot Loot card has other advantages allowing patrons to put money on the card, and make purchases from on-campus vending machines, the University Bookstore, University Food Services, and convenience stores, as well as off-campus vendors. Furthermore, if the Hoot Loot card holder opens an account with the Southern New England Federal Credit Union, located on campus, the card will act as an ATM card, accepted world-wide. For more information, contact the University Card Office at (203)-392-7077, visit the office in Wintergreen, or simply click on the student service page of the Southern web site; <https://inside.southernct.edu/onestop/academics>.

HEALTH SERVICES

The Granoff Student Health Center is located in Granoff Hall on Wintergreen Avenue in a building that it shares with University Police. A physician is available; the number is 392-6300. Full-time graduate students must have properly completed health forms (questionnaire and physical examination) on file at Granoff Health Services to be eligible for campus medical services. Connecticut state statutes require all matriculated students (full and part-time) to show proof of adequate immunization against measles (rubeola) and German measles (rubella).

Accident insurance protection is part of the General Fee paid by the full-time students. In addition to the accident coverage, the University also requires a sickness insurance plan to cover some surgical expenses and hospitalization costs. Full-time students will be automatically enrolled in and billed for the sickness insurance plan unless they submit a signed waiver, included with the bill, indicating equivalent coverage. Details of both plans are in a brochure distributed by the university to each student. In the event of accident or sickness, students can obtain a medical claim form from Student Health Services. Students are advised to consult the health insurance brochure available from Student Health Services for additional information.

Eight counselors and an APRN are available in Counseling Services located in Engleman Hall, room B219 (phone 203-392-5475). No matter what problem or difficulty they are facing, students may refer themselves to Counseling Services. Late hours are available. All conversations are confidential within the confines of the law.

LIBRARY

An open-stack system gives students easy access to library materials, while large collections of rare books, newspapers, and journals are available in microform. In addition, patrons can generally photocopy the library's bound, unbound, and microfilmed materials to facilitate the collecting of resource information for study and research. End user database information retrieval is available from a total of 34 different automated databases located in the Periodicals and Reference Department.

An online public access catalog (OPAC) is available replacing and extending the traditional card catalog. In addition to the customary author-title-subject capability of the old card file, patrons may now search using multiple approaches and combinations, such as several subjects at once, dates, call numbers, keyword, Boolean searches, etc. From the same terminal one may also search the catalogs of sister CSU university libraries and other selected libraries within the vicinity of the Southern campus.

Library Cards

Your current validated Hoot Loot card is your library card.

Book Loans

Regular Loan: 28 days; all books are subject to recall.

Overdue Books and Materials

Students must read and be aware of the return date in each book to know when the book is due. Overdue notices are sent out regularly. All library obligations (fines for overdue and/or lost books) must be paid as they occur or collection procedures will be started.

Students are asked not to loan library cards or check out books for other students as they will be monetarily liable for any materials signed out in their name. Any library material which is lost should be reported to the Circulation Department as soon as possible in order to avoid additional fines.

Fines and Penalties

Overdue books on a 28 days loan - 10 cents a day. Overdue closed research books - 25 cents an hour or any fraction thereof; \$2 a day.

Lost Books

Borrowers who lose a book should report its loss immediately and are responsible for its replacement including cost of processing.

Reserve Books

Reserve books on hourly circulation during the day are located at the reserve desk and may be taken overnight from the library after 4 p.m. Overnight books are due at 9 a.m. the following day.

Periodicals

Periodicals are reference material and do not circulate. Copying machines are available in the hall outside the Periodical Room and on each floor.

Library Instruction

A Guide to the Hilton C. Buley Library is available to students at the Circulation Desk on the main floor. The library staff will provide information about library services and policies.

Formal class presentations are available upon request through the Bibliographic Instruction Coordinator.

Lost and Found

The University is not responsible for personal property loss. The Lost and Found Service is located in the Campus Police Department. Such articles should be turned in or claimed at this office.

Notary Public

Notary service is available to students in the Adanti Student Center, during posted hours.

Tyco Copy Center

A full-service copy center is conveniently located in Engleman Hall. Most of your copying needs can be fulfilled while you wait. The copy center is open Monday through Friday from

8:00 a.m. to 4:30 p.m

Video Calendar

The digital signs in the Student Center are a part of the growing network of signs across campus, the information that is displayed can reach not only the student center, but also the residential

housing areas. To learn more visit:

<https://inside.southernct.edu/student-center/digital-signs>

Academic Computer Center

The Academic Computer Center, located in Jennings Hall, is open from 8:10a.m. to 9:45p.m. on weekdays, from 10:00a.m. until 4:45p.m. on Saturdays, and from 12:10p.m. until 4:45p.m. on Sundays. There are over 100 personal computers as well as 40 terminals attached to the VAX 7000-630 computer.

Student Records

Each student has an academic file in which evaluations, pertinent information and correspondence are placed.

Graduation

Graduating students are entitled to participate in the University's commencement exercises. In addition to this official ceremony, the graduate Marriage and Family Therapy Program sponsors a pre-commencement brunch in honor of graduates.

Job Placement

The Marriage and Family Therapy Program provides assistance for job placement by posting offerings received by the program on our facebook alumni page.

Change of Course Schedule

A student may drop a course by obtaining the necessary forms from the Registrar and obtaining approval of the advisor. Adding a course or changing a section must have the approval of the advisor and the Program Coordinator and be completed in the add/drop period. Please be aware that changes in course schedules may alter your planned program.

Graduation Marriage and Family Therapy Organization (GMFTO)

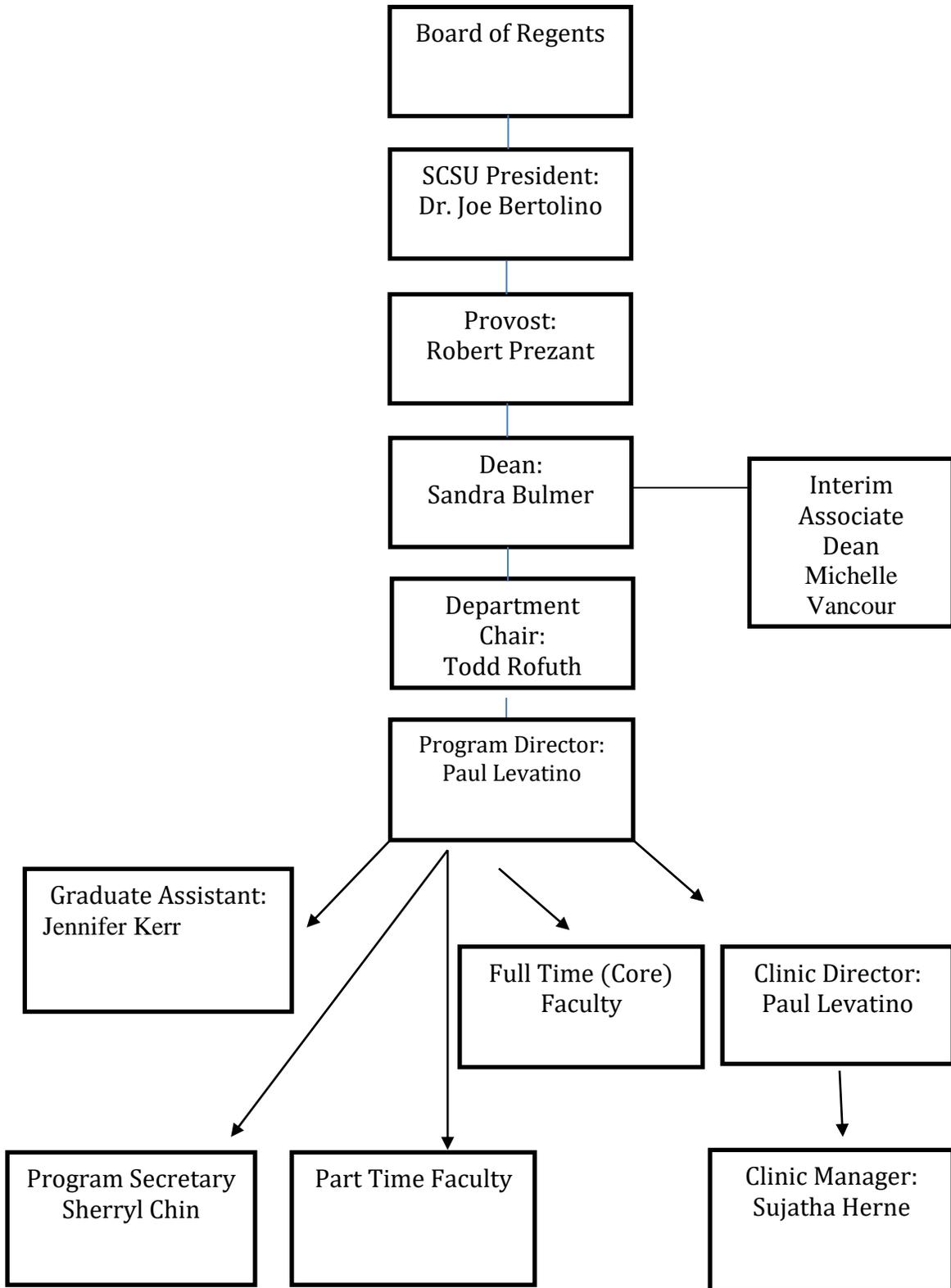
The GMFTO is a student-led organization and association open to all MFT graduate students. Its purpose is to respond to the academic and collegial needs of students as defined by the students. Issues related to student-faculty relations, curriculum, and student participation in department decision-making, are addressed. This organization is involved in the orientation of new students and the planning of the graduation ceremony.

APPENDICES

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Appendix A:

Organizational Chart: Marriage and Family Therapy Department



Appendix B:

WEBLINK DATA:

Leave of Absence & Program Withdrawal Forms:

<https://inside.southernct.edu/onestop/forms>

Application for Independent Study

<https://www.southernct.edu/academics/graduate/currentstudents/Graduate%20IndStudy%20Final.pdf>

Southern Connecticut State University Graduate Catalog

<http://catalog.southernct.edu/graduate/>

Academic Calendars

<https://www.ct.edu/academics/calendar>

Tuition and Fees *

<https://inside.southernct.edu/onestop/bill-payment/tuition-fees>

*The MFT program has a \$150 per semester (full-time) or \$15 per credit (part-time) lab fee to support clinical training costs.

Appendix D:

Student Achievement Criteria (SAC) Data Collection Policy

COAMFTE requires SAC data submission each year (currently SCSU deadline is July 31). Required SAC data currently includes the following elements:

- Graduate in Minimum Advertised Time (2 years full-time, 3 years part-time):
- Graduate in Maximum Advertised Time (6 years for full & part-time)
- Sat for National Exam, Passed national Exam: COAMFTE expectation: 70% who take and receive scores will pass per cohort year.
- Employment as CMFT defined as “graduates working in the mental health field doing systemic therapy with individuals, couples, families and larger systems”.
- Member of AAMFT or other professional agency

Graduates with outstanding SAC data are surveyed yearly until outstanding data elements are collected. Once all data elements are collected, a student is no longer surveyed.

The Program Director collects and maintains the phone number and email address of graduates. Initial surveys are conducted via email. If a survey is not returned, the SAC Data Coordinator sends a second email request. If the second email is unanswered, the SAC data coordinator attempts to contact the graduate and obtain the information through a phone interview. If a phone interview attempts are unsuccessful, the SAC Data Coordinator uses online resources to check if a graduate has obtained licensure through online resources, such as the State of Connecticut’s Department of Public Health Online license verification tool.

All SAC data is reported in aggregate form; all responses from graduates are confidential and graduates name are never attached to SAC data reports.

A link to SCSU SAC data may be found on the MFT Program’s homepage: www.southernct.edu

Appendix E:

SCSU Clinical Readiness Policy

Part A) Readiness to see clients in the SCSU MFT clinic

- Prerequisites: MFT 597 Family of Origin, MFT 598 Theory 1, & MFT 620 Ethics
- Additional requirements:
- Successful progress through the program *with 3.0 GPA or above*
- Successful evaluation of MFT Professional Attitudes and Dispositions Scale

Part B) Readiness for Offsite Placement

(In addition to requirements above):

- Passing the Evaluation of Clinical Skills in MFT 562, Spring Practicum

Or:

- Active enrollment in MFT 562 and advisor, 562 instructor & offsite placement coordinator approval

Appendix F:

Marriage and Family Therapy Off- site Internship Appendix

**Marriage and Family Therapy Program
Southern Connecticut State University
Davis Hall Room 020 B
501 Crescent St.
New Haven, CT 06515**

MFT Office

Phone: 203-392-6414

Fax: 203-392-6441

<http://www.southernct.edu/academics/schools/health/academic-programs/marriagefamilytherapy/>

**Marriage and Family Therapy Program
Department of Social Work**

Dear MFT Colleagues and Students:

The Southern Connecticut State University Marriage and Family Therapy Program is pleased to offer this Off-Campus Internship Appendix. This Appendix is intended to serve as a guide for students participating in an off-campus internship through the MFT Department. This Appendix describes requirements of Off-site Internships as well as policies, procedures and responsibilities of the Off-site Internship Supervisors and student interns. It is intended to supplement the MFT Program Handbook. Students in the MFT graduate program are responsible for being familiar with the information set forth here. Here, student interns and internship supervisors will find forms, which can be copied for use throughout the year.

Please feel free to call the Off-site Internship Coordinator if anything appears unclear, or if you should have any questions. In addition to hardcopy, the MFT Program Off-Campus Internship Manual is accessible on the SCSU website.

The MFT faculty wishes you the best during your academic studies and congratulates you on your continued hard work and commitment to our MFT Program.

Sincerely,

Paul Levatino, LMFT-AS
Assistant Professor
Coordinator, Off-Site Placement
Tel: (203) 392-7274
Fax: (203) 392-6441
Email: levatinop1@southernct.edu

Introduction

The purpose of this appendix is to provide MFT Graduate Interns, MFT Clinical Supervisors and MFT Off-Campus Supervisors with relevant information about the off-site internship experience for the Marriage and Family Therapy (MFT) program at Southern Connecticut State University. This material applies to all MFT Interns within the Master of Family Therapy Program.

The MFT faculty considers internship to be an essential experience within each student's professional preparation. The experience provides an opportunity to translate theory into practice and enhance skills learned in the classroom and MFT Clinic to a community-based setting. Internship also offers an opportunity to further develop a professional identity and liaison with other mental health professionals for potential post graduate employment. This Appendix will help to clarify what is expected and how MFT Interns are evaluated. If you have any questions, please don't hesitate to contact the Off-Campus Placement Coordinator at 203-392-7274 or levatinop1@southernct.edu.

Off- Campus Internship Coordinator

The purpose of Internship is to provide students with supervised therapy experiences designed to consolidate, integrate, and link theory to practice. Internship is intended to provide students with opportunities to develop, refine, and evaluate their therapeutic skills. The purpose of this manual is to provide information, procedures, timelines, guidelines, objectives, necessary forms, and information that should be helpful to MFT Off-site Internship supervisors. Ideally, this manual will be read by Off-Campus Internship Supervisors so that they will be familiar with the procedures, policies and updates that are followed by the Marriage and Family Therapy Program. If you are an Off-site Internship Supervisor and have any question or concern about what is in the manual, please contact the Off-site Placement Coordinator. All Off-site Internship placements are initially approved by this Coordinator. The coordinator communicates directly with each internship site to review the requirements of our MFT interns in their internship to ensure that each site is able to accommodate MFT program requirements.

Internship

The Internship is the culmination of the academic preparation to become a professional therapist. This supervised 10-15 hour a week experience enables students to focus on a broad range of competencies and skills. Students start placement by the fall semester of the second year in the MFT Program (fall semester year two for part-time students) and placement requires a minimum of a 12-month commitment to an off-campus internship site, accruing hours towards the 500 direct COAMFTE mandated client contact hours needed for graduation. Students stay in offsite placement *through graduation, and* 12-months minimum.

Direct Contact Hours

The American Association of Marriage and Family Therapy (AAMFT) defines direct contact as face to face experience in individual therapy, couples' therapy, family therapy and group therapy. Assessments and Psychoeducation may also be counted.

SCSU Marriage and Family Therapy Clinic

The Marriage and Family Clinic is on campus at Southern Connecticut State University. Each MFT Graduate Student at an Off-Campus internship site is required to simultaneously be enrolled in an on campus clinical supervision class. This class is supervised by an AAMFT approved Faculty Supervisor and meets once a week to provide interns with an opportunity to discuss their internship experience and to have live supervision of couples and families in front of the one-way mirror. Interns also accrue a minimum of fifty direct contact hours in front of the one-way mirror prior to graduation.

Clinical Off-site Placements

Clinical Off-site Internship placements are designed to provide the knowledge and skills required for therapists to work in a variety of community settings, including mental health centers, substance abuse treatment programs, social service agencies, residential and intensive outpatient, and home-based programs. Accordingly, the off-campus Internship site will provide Internship students with experiences that may include but are not limited to:

- Diagnosis and assessment
- Intake and treatment/discharge planning/outcome assessment
- Crisis response
- Psychoeducation
- Short- and long-term individual therapy
- Substance use disorders related treatment
- Individual therapy
- Family and couple's therapy
- Long term supportive therapy for those with chronic emotional problems
- Group therapy with individuals and/or couples and families

Goals of the Off-Campus Internship

- To acquaint and provide students with opportunities to engage in the roles, duties, and responsibilities of a professional Marriage and Family Therapist.
- To enable students to develop techniques and interventions which are best acquired and developed in actual therapeutic relationships.
- To help students learn to integrate systems theories acquired through course work to actual client/family/intern issues and concerns.
- To help students develop the skills of a therapist so that they can begin to feel confident in their ability to function as professionals in the field.
- To help students work and function as team members with other professionals in the therapeutic process.
- To provide students with experiences which enables them to comprehend and respond to feedback from supervisors.

OFF- CAMPUS SUPERVISORS

Off-Campus Internship Supervisors qualifications:

Site supervisors:

- a. earned Master's or Doctoral Degree in Master's level mental health field.
- b. are state licensed mental health practitioners with significant work experience.
- c. Are licensed marriage and family therapists OR have ability to supervise in accordance to MFT principles and practices.

Responsibilities of Off- Campus Internship Supervisors

- Provide training that orients interns to agency mission, goals, internal operating procedures, staff, emergency procedures and available related agency and community resources.
- Follow the ethical standards of the American Association of Marriage and Family Therapy (AAMFT), applicable federal and state laws, and departmental and university procedures regarding fieldwork and evaluation of students. Supervisors should be particularly familiar with Principal IV: Responsibilities to students and supervisees.
- Provide adequate workspace and necessary supplies and equipment to interns.
- Assign clinical and site responsibilities, which consider the intern's learning needs and the ongoing development of their skills, integrated with the needs of the agency.
- Supervise intern's off-campus clinical work. Logistically this means that the off-campus supervisor is responsible for supervising the diagnosis of clients/families, the process and consequences of treatment, and all therapy-related responsibilities and outcomes.
- In their absence, ensure that back-up supervision is provided to interns. Assess intern's therapy skills. This may be done by case review, observing sessions, co-counseling, and/or reviewing video/audio tapes of the intern's work.
- Ensure intern primary responsibilities remain clinical in nature and not that of clerical assistants.
- Contact the SCSU faculty liaison immediately in the event the intern is not performing satisfactorily.
- Inform interns of the legal and ethical issues pertinent to therapy and our profession.
- Regularly review case notes & records kept by student to ensure that these are kept according to site requirements, the AAMFT ethical code, and federal and state laws.
- Schedule weekly 1 hour individual supervision with interns.

- Provide ultimate responsibility for client/family issues. As the professional who is supervising the intern, you are ultimately responsible for the actions of the intern and the well-being of clients/families.
- Provide ongoing feedback to interns regarding their skill development and thoughtfully complete the required final semester evaluation of interns (late November, April, July). Review these evaluations with the intern.
- Review and sign intern's fieldwork and supervision log.
- Be available for employment/job search/licensure related discussions.
- Ongoing performance feedback and review of intern's learning goals
- Discussions regarding linking theory to practice
- Discussions regarding personal and professional and self-of-the-therapist development.
- In addition to supervision & training, the off-site supervisor ensures the intern has time away from the site to participate in required (infrequent) departmental meetings, academic courses, and employment interviews.

MFT Interns

Preparation & Prerequisites

The MFT program maintains a two-tier *Readiness To See Clients* policy outlined in the MFT Program Handbook appendix.

Site Selection: Interns

Selecting an Internship site is an important part of the clinical experience. Interns collaborate with the Off-Site Placement Coordinator and refer to the following guidelines when choosing an appropriate site. You can find a list of currently approved sites in The Internship Binder in the MFT Family Clinic Office.

- Determine your specific professional goals and needs, which will help you to focus your choice of sites.
- Aim for a site placement that represents a good fit with your personal and professional needs, interests, program requirements and licensure requirements.
- Refer to the Internship Placement information binder in the MFT Family Clinic office.
- Speak to your student colleagues and the Off-Site Placement Coordinator about possible sites.
- Complete the following three forms with all the required information and signatures and give them to the Off-Site Placement Coordinator: (see appendices): 1) Internship Information Form, 2) Internship Agreement Form

Securing a Site

You may use the following suggestions for securing an internship site:

- Contact sites to identify open positions.
- Attempt to speak directly to the site's internship coordinator or director.
- If you do not immediately reach the internship coordinator or director, compose a personal cover letter, attach your resume and references and send the packet to the site internship coordinator or site director
- Follow up the mailing with a telephone call approximately one week afterward to request an interview.
- Always be courteous and professional.

Interviewing at a Site:

Approach this internship site interview as you would a job interview by preparing as follows:

- Dress professionally.
- Take a copy of your resume and a list of your references.
- You may take a small professional portfolio.
- Develop your own list of ideas and questions related to how this placement might prove mutually beneficial to you and to the site.
- Begin to formulate the goals that you want to accomplish within this experience.
- Be thoroughly familiar with this handbook so that you can be clear about expectations, especially those affecting the site supervisor.
- Be thoroughly familiar with the site, the client population and why you believe that you would be a 'good fit' as an intern at this site.
- Be prepared to clarify the internship requirements and expectations.

Site Approval:

Once you have found a site that you believe is the best fit, contact the MFT Off-site Placement Coordinator and submit the completed following completed forms:

- The Internship Information Form (See appendix)
- The Student Contract (See appendix)

You may not begin working at an Internship site until you received signed written notification that the internship placement is approved by the Off-Campus Internship Coordinator and both signed forms are in the MFT Office.

Site Orientation:

You are expected to attend your specific site's regular orientation. Request that your site supervisor completes all relevant MFT paperwork (submitting their credentials, reviewing and signing the supervision contract, etc.) before the Internship semester begins.

Starting your Internship:

All students should begin their internship experience once all proper paperwork is on file. Special permission must be received by the Off-Campus Internship Coordinator and the MFT Program Coordinator for anyone beginning an internship experience prior to the August or September start time.

Internship Requirement Summary

- Minimum of 12-month placement, and in placement through graduation.
- 1-hour weekly on-site supervision by off-site internship supervisor.
- Ongoing enrollment in group supervision with MFT faculty Clinical Supervisor (MFT 562, 662 or 665)

Liability Insurance:

As part of the application process for each internship experience, students must show proof of appropriate liability insurance. As a matriculated student it is a requirement that a current proof of insurance through AAMFT is filed in your student file when you begin your Practicum experience.

Grading of Internship

A grading rubric is used to evaluate an intern's progress, performance and skill level. Student are expected to maintain academic progress and obtain a "P" in all domains. Evaluations that include a grade below "P" must be communicated to the Off-site Placement Coordinator immediately.

Professional Considerations

Ethical Guidelines:

As an Intern in Marriage and Family Therapy, you are required to follow the AAMFT's most recent Code of Ethics. You must familiarize yourself with these ethical guidelines and refer to them whenever necessary (see appendix A). Additionally, you must adhere to state and federal laws and the regulations of your agency. However, because the resolution of many ethical dilemmas is not always clear, consult your off-campus supervisor about any ethically unclear situations that arise at your site. If the situation is urgent or an emergency, you should immediately contact your Off-site Clinical Supervisor and MFT Clinical Supervisor. If it is a non-emergency ethical question, bring the questions to your next MFT on-campus supervision meeting or individual supervision.

Confidentiality:

In accordance with the ethical principles of AAMFT (see appendix A), state and federal law and your agency sites, you must maintain confidentiality requirements in your work as an MFT Intern. When writing about your client for coursework, you should use initials or a pseudonym only. Additionally, you should not discuss your clients in any identifying way with unauthorized personnel.

Note that confidentiality is a part of the informed consent process. Informed consent is your responsibility and should occur at the start of the therapeutic relationship. In addition, the limits of confidentiality should be addressed and defined in a developmentally appropriate

manner. Other key aspects of confidentiality are located in the ethical codes listed in Appendix A.

Developing the Self-of-the-Therapist:

A focus on the self-of-the-therapist is a key component of the training you receive in the MFT Program at SCSU. It is a unique and defining aspect of our MFT program. This focus begins in the first semester of coursework and continues throughout all academic and clinical course work. During your Internship experiences, you will likely encounter many challenges from clients as well as from supervisors. This is expected and desirable as it promotes your continued growth and helps you to recognize obstacles that block your effectiveness as a therapist. Although this process may be uncomfortable, it is a necessary and expected part of your development as a therapist. Please continue to be open to this process as you develop the self-of-the-therapist and appropriately discuss any challenges you may be having with your MFT clinical supervisors.

It is equally important to understand your own biases, stereotypes and prejudices. These attitudes impact your therapeutic techniques and hinder your development as a therapist. Many therapists in training choose to invest in their professional development by entering therapy themselves. As a graduate student at SCSU, you are eligible for therapeutic services through the SCSU Student Counseling Center. The center can be contacted at (203) 392-5475, Monday through Friday, 8:30 to 4:30 during regular business days. You may also use the SCSU Student Counseling Center and your MFT faculty for a referral to other local practitioners.

Supervision and Feedback:

A crucial component of the internship process is supervision and feedback about your developing skills and competencies. Personal qualities, including openness and flexibility, impact your therapeutic effectiveness. You will be receiving extensive feedback from your peers, off-campus supervisors and MFT clinical supervisors. There will be many times when you receive feedback on your personal as well as professional skills.

To get the most effective training for your future profession, you are encouraged take an active role in your supervision sessions. The best way for you as an Intern to reap the benefits of supervision is to come to each session fully prepared. Bring specific questions that you may have for your supervisor in areas that you would like to receive feedback and guidance. Your supervisor will be reviewing and critiquing your therapy sessions and, you should be active in this process as well. After your therapy sessions, you may choose to review the session yourself, critiquing it and developing questions to discuss before you come to supervision. The MFT program at SCSU is committed to helping you to develop the Core Competencies (see appendix E) as defined by the COAMFTE--our accrediting bod--to ensure you will become an active contributing member of the MFT profession.

Self-Care

As an MFT Intern, you will find yourself in several roles: graduate student, emerging professional, therapist -in-training, spouse/significant other, parent, family member, employee and leader. With these many roles, it is easy to forget to take care of yourself. It is

important to take care of yourself, physically, socially, emotionally, spiritually and recreationally so that you will be able to help others in a significant way. To be an effective therapist, you must understand your individual needs in all of these areas and continually attend to those needs. Success in your internship (as well as in your future profession) depends on your ability to balance your many roles. Consider the following areas and tailor this information to best aid you in caring for yourself.

Physical:

Although every individual is different, good nutrition, adequate rest and moderate exercise are important for your physical and mental health. With a busy schedule, you may find yourself forgetting to eat, eating on the run and generally not paying attention to your body's needs. Remind yourself to pay attention to your body's needs, including when and what you need to eat.

You are likely to experience high levels of stress in your current role as an MFT graduate student, as well as in your role as therapist -in-training. These levels of stress will impact you physically. Stress can cause a variety of physical responses, including headaches, stomachaches, difficulty sleeping and increased blood pressure. In order to manage the stress that you face, it is important to find healthy coping skills. The best way to manage your stress level is to be proactive by learning relaxation skills, cognitive self-talk and other strategies such as yoga, meditation, and exercise that meet your needs.

Social:

Social support, including friends and family, are crucial to your success. It is important to create a wide social support system, which includes peers from the MFT program and your internship sites. This not only creates a future network, it allows you to have positive peer relationships which may directly aid in managing your stress. Remind yourself that your social life is as important as your academic life. Balancing your social needs with the rest of your life is an important life skill.

Emotional:

High levels of stress impact you physically and emotionally. Stress management techniques and self-care will help to improve your emotional functioning. In addition, using humor and laughter have been shown to yield positive outcomes for individual physical and mental health. Remember to see the lighter side of things and try not to take yourself too seriously.

Spiritual:

Nurturing your spirit is a positive way to care for your needs. This can be done in a variety of ways, including using your faith, religious beliefs, or spirituality. Regardless of your specific belief system, research supports the role of the spirit in physical and emotional wellness.

Recreational:

Playing and having fun is not just for children. It is an important aspect of a balanced life for individuals at any developmental stage. Remember to allow yourself the time to relax, play and enjoy life's simple pleasures.

Hints for Interns

- Consult with the Off-site Placement Coordinator as needed.

- Follow your MFT planned program. If you have any questions, contact your MFT Program Advisor.
- Mark your calendar for all deadline dates, cohort meetings, graduation and comp exam schedules.
- Complete and submit Internship forms BEFORE the beginning of your internship semester.
- Obtain liability insurance BEFORE beginning your Practicum work in the MFT Clinic and be sure it is updated for Internship.
- Make copies of all paperwork for your records before you submit them and keep a file of all your internship and practicum documents including hours.
- Do not see clients before the semester begins, before obtaining signatures on agreement forms or before checking on the update of your liability insurance and receiving written approval by the Off-site Placement Coordinator.

Have a wonderful internship experience and enjoy this time in your professional training!

Supplements

AAMFT Code of Ethics
Internship Agreement
Internship Information Form
Professional Attitude and Dispositions

Supplement A
Supplement B
Supplement C
Supplement D

Supplement A:

AAMFT Code of Ethics:

http://aamft.org/imis15/Content/Legal_Ethics/Code_of_Ethics.aspx

CODE OF ETHICS

Effective July 1, 2012

Preamble

The Board of Directors of the American Association for Marriage and Family Therapy (AAMFT) hereby promulgates, pursuant to Article 2, Section 2.01.3 of the Association's Bylaws, the Revised AAMFT Code of Ethics, effective July 1, 2012.

The AAMFT strives to honor the public trust in marriage and family therapists by setting standards for ethical practice as described in this Code. The ethical standards define professional expectations and are enforced by the AAMFT Ethics Committee. The absence of an explicit reference to a specific behavior or situation in the Code does not mean that the behavior is ethical or unethical. The standards are not exhaustive. Marriage and family therapists who are uncertain about the ethics of a particular course of action are encouraged to seek counsel from consultants, attorneys, supervisors, colleagues, or other appropriate authorities.

Both law and ethics govern the practice of marriage and family therapy. When making decisions regarding professional behavior, marriage and family therapists must consider the AAMFT Code of Ethics and applicable laws and regulations. If the AAMFT Code of Ethics prescribes a standard higher than that required by law, marriage and family therapists must meet the higher standard of the AAMFT Code of Ethics. Marriage and family therapists comply with the mandates of law, but make known their commitment to the AAMFT Code of Ethics and take steps to resolve the conflict in a responsible manner. The AAMFT supports legal mandates for reporting of alleged unethical conduct.

The AAMFT Code of Ethics is binding on members of AAMFT in all membership categories, all AAMFT Approved Supervisors and all applicants for membership or the Approved Supervisor designation. AAMFT members have an obligation to be familiar with the AAMFT Code of Ethics and its application to their professional services. Lack of awareness or misunderstanding of an ethical standard is not a defense to a charge of unethical conduct.

The process for filing, investigating, and resolving complaints of unethical conduct is described in the current AAMFT Procedures for Handling Ethical Matters. Persons accused are considered innocent by the Ethics Committee until proven guilty, except as otherwise provided, and are entitled to due process. If an AAMFT member resigns in anticipation of, or during the course of, an ethics investigation, the Ethics Committee will complete its investigation. Any publication of action taken by the Association will include the fact that the member attempted to resign during the investigation.

Principle I

Responsibility to Clients

Marriage and family therapists advance the welfare of families and individuals. They respect the rights of those persons seeking their assistance, and make reasonable efforts to ensure that their services are used appropriately.

1.1 Non-Discrimination. Marriage and family therapists provide professional assistance to persons without discrimination on the basis of race, age, ethnicity, socioeconomic status, disability, gender, health status, religion, national origin, sexual orientation, gender identity or relationship status.

1.2 Informed Consent. Marriage and family therapists obtain appropriate informed consent to therapy or related procedures and use language that is reasonably understandable to clients. The content of informed consent may vary depending upon the client and treatment plan; however, informed consent generally necessitates that the client: (a) has the capacity to consent; (b) has been adequately informed of significant information concerning treatment processes and procedures; (c) has been adequately informed of potential risks and benefits of treatments for which generally recognized standards do not yet exist; (d) has freely and without undue influence expressed consent; and (e) has provided consent that is appropriately documented. When persons, due to age or mental status, are legally incapable of giving informed consent, marriage and family therapists obtain informed permission from a legally authorized person, if such substitute consent is legally permissible.

1.3 Multiple Relationships. Marriage and family therapists are aware of their influential positions with respect to clients, and they avoid exploiting the trust and dependency of such persons. Therapists, therefore, make every effort to avoid conditions and multiple relationships with clients that could impair professional judgment or increase the risk of exploitation. Such relationships include, but are not limited to, business or

close personal relationships with a client or the client's immediate family. When the risk of impairment or exploitation exists due to conditions or multiple roles, therapists document the appropriate precautions taken.

1.4 Sexual Intimacy with Current Clients and Others. Sexual intimacy with current clients, or their spouses or partners is prohibited. Engaging in sexual intimacy with individuals who are known to be close relatives, guardians or significant others of current clients is prohibited.

1.5 Sexual Intimacy with Former Clients and Others. Sexual intimacy with former clients, their spouses or partners, or individuals who are known to be close relatives, guardians or significant others of clients is likely to be harmful and is therefore prohibited for two years following the termination of therapy or last professional contact. After the two years following the last professional contact or termination, in an effort to avoid exploiting the trust and dependency of clients, marriage and family therapists should not engage in sexual intimacy with former clients, or their spouses or partners. If therapists engage in sexual intimacy with former clients, or their spouses or partners, more than two years after termination or last professional contact, the burden shifts to the therapist to demonstrate that there has been no exploitation or injury to the former client, or their spouse or partner.

1.6 Reports of Unethical Conduct. Marriage and family therapists comply with applicable laws regarding the reporting of alleged unethical conduct.

1.7 No Furthering of Own Interests. Marriage and family therapists do not use their professional relationships with clients to further their own interests.

1.8 Client Autonomy in Decision Making. Marriage and family therapists respect the rights of clients to make decisions and help them to understand the consequences of these decisions. Therapists clearly advise clients that clients have the responsibility to make decisions regarding relationships such as cohabitation, marriage, divorce, separation, reconciliation, custody, and visitation.

1.9 Relationship Beneficial to Client. Marriage and family therapists continue therapeutic relationships only so long as it is reasonably clear that clients are benefiting from the relationship.

1.10 Referrals. Marriage and family therapists assist persons in obtaining other therapeutic services if the therapist is unable or unwilling, for appropriate reasons, to provide professional help.

1.11 Non-Abandonment. Marriage and family therapists do not abandon or neglect clients in treatment without making reasonable arrangements for the continuation of treatment.

1.12 Written Consent to Record. Marriage and family therapists obtain written informed consent from clients before videotaping, audio recording, or permitting third-party observation.

1.13 Relationships with Third Parties. Marriage and family therapists, upon agreeing to provide services to a person or entity at the request of a third party, clarify, to the extent feasible and at the outset of the service, the nature of the relationship with each party and the limits of confidentiality.

1.14 Electronic Therapy. Prior to commencing therapy services through electronic means (including but not limited to phone and Internet), marriage and family therapists ensure that they are compliant with all relevant laws for the delivery of such services. Additionally, marriage and family therapists must: (a) determine that electronic therapy is appropriate for clients, taking into account the clients' intellectual, emotional, and physical needs; (b) inform clients of the potential risks and benefits associated with electronic therapy; (c) ensure the security of their communication medium; and (d) only commence electronic therapy after appropriate education, training, or supervised experience using the relevant technology.

Principle II

Confidentiality

Marriage and family therapists have unique confidentiality concerns because the client in a therapeutic relationship may be more than one person. Therapists respect and guard the confidences of each individual client.

2.1 Disclosing Limits of Confidentiality. Marriage and family therapists disclose to clients and other interested parties, as early as feasible in their professional contacts, the nature of confidentiality and possible limitations of the clients' right to confidentiality. Therapists review with clients the circumstances where confidential information may be requested and where disclosure of confidential information may be legally required. Circumstances may necessitate repeated disclosures.

2.2 Written Authorization to Release Client Information. Marriage and family therapists do not disclose client confidences except by written authorization or waiver, or where mandated or permitted by law. Verbal authorization will not be sufficient except in emergency situations, unless prohibited by law. When providing couple, family or group treatment, the therapist does not disclose information outside the treatment context

without a written authorization from each individual competent to execute a waiver. In the context of couple, family or group treatment, the therapist may not reveal any individual's confidences to others in the client unit without the prior written permission of that individual.

2.3 Confidentiality in Non-Clinical Activities. Marriage and family therapists use client and/or clinical materials in teaching, writing, consulting, research, and public presentations only if a written waiver has been obtained in accordance with Subprinciple 2.2, or when appropriate steps have been taken to protect client identity and confidentiality.

2.4 Protection of Records. Marriage and family therapists store, safeguard, and dispose of client records in ways that maintain confidentiality and in accord with applicable laws and professional standards.

2.5 Preparation for Practice Changes. In preparation for moving from the area, closing a practice, or death, marriage and family therapists arrange for the storage, transfer, or disposal of client records in conformance with applicable laws and in ways that maintain confidentiality and safeguard the welfare of clients.

2.6 Confidentiality in Consultations. Marriage and family therapists, when consulting with colleagues or referral sources, do not share confidential information that could reasonably lead to the identification of a client, research participant, supervisee, or other person with whom they have a confidential relationship unless they have obtained the prior written consent of the client, research participant, supervisee, or other person with whom they have a confidential relationship. Information may be shared only to the extent necessary to achieve the purposes of the consultation.

2.7 Protection of Electronic Information. When using electronic methods for communication, billing, recordkeeping, or other elements of client care, marriage and family therapists ensure that their electronic data storage and communications are privacy protected consistent with all applicable law.

Principle III

Professional Competence and Integrity

Marriage and family therapists maintain high standards of professional competence and integrity.

3.1 Maintenance of Competency. Marriage and family therapists pursue knowledge of new developments and maintain their competence in marriage and family therapy through education, training, or supervised experience.

3.2 Knowledge of Regulatory Standards. Marriage and family therapists maintain adequate knowledge of and adhere to applicable laws, ethics, and professional standards.

3.3 Seek Assistance. Marriage and family therapists seek appropriate professional assistance for their personal problems or conflicts that may impair work performance or clinical judgment.

3.4 Conflicts of Interest. Marriage and family therapists do not provide services that create a conflict of interest that may impair work performance or clinical judgment.

3.5 Veracity of Scholarship. Marriage and family therapists, as presenters, teachers, supervisors, consultants and researchers, are dedicated to high standards of scholarship, present accurate information, and disclose potential conflicts of interest.

3.6 Maintenance of Records. Marriage and family therapists maintain accurate and adequate clinical and financial records in accordance with applicable law.

3.7 Development of New Skills. While developing new skills in specialty areas, marriage and family therapists take steps to ensure the competence of their work and to protect clients from possible harm. Marriage and family therapists practice in specialty areas new to them only after appropriate education, training, or supervised experience.

3.8 Harassment. Marriage and family therapists do not engage in sexual or other forms of harassment of clients, students, trainees, supervisees, employees, colleagues, or research subjects.

3.9 Exploitation. Marriage and family therapists do not engage in the exploitation of clients, students, trainees, supervisees, employees, colleagues, or research subjects.

3.10 Gifts. Marriage and family therapists do not give to or receive from clients (a) gifts of substantial value or (b) gifts that impair the integrity or efficacy of the therapeutic relationship.

3.11 Scope of Competence. Marriage and family therapists do not diagnose, treat, or advise on problems outside the recognized boundaries of their competencies.

3.12 Accurate Presentation of Findings. Marriage and family therapists make efforts to prevent the distortion or misuse of their clinical and research findings.

3.13 Public Statements. Marriage and family therapists, because of their ability to influence and alter the lives of others, exercise special care when making public their professional recommendations and opinions through testimony or other public statements.

3.14 Separation of Custody Evaluation from Therapy. To avoid a conflict of interest, marriage and family therapists who treat minors or adults involved in custody or visitation actions may not also perform forensic evaluations for custody, residence, or visitation of the minor. Marriage and family therapists who treat minors may provide the court or mental health professional performing the evaluation with information about the minor from the marriage and family therapist's perspective as a treating marriage and family therapist, so long as the marriage and family therapist does not violate confidentiality.

3.15 Professional Misconduct. Marriage and family therapists are in violation of this Code and subject to termination of membership or other appropriate action if they: (a) are convicted of any felony; (b) are convicted of a misdemeanor related to their qualifications or functions; (c) engage in conduct which could lead to conviction of a felony, or a misdemeanor related to their qualifications or functions; (d) are expelled from or disciplined by other professional organizations; (e) have their licenses or certificates suspended or revoked or are otherwise disciplined by regulatory bodies; (f) continue to practice marriage and family therapy while no longer competent to do so because they are impaired by physical or mental causes or the abuse of alcohol or other substances; or (g) fail to cooperate with the Association at any point from the inception of an ethical complaint through the completion of all proceedings regarding that complaint.

Principle IV

Responsibility to Students and Supervisees

Marriage and family therapists do not exploit the trust and dependency of students and supervisees.

4.1 Exploitation. Marriage and family therapists who are in a supervisory role are aware of their influential positions with respect to students and supervisees, and they avoid exploiting the trust and dependency of such persons. Therapists, therefore, make every effort to avoid conditions and multiple relationships that could impair professional objectivity or increase the risk of exploitation. When the risk of impairment or exploitation exists due to conditions or multiple roles, therapists take appropriate precautions.

4.2 Therapy with Students or Supervisees. Marriage and family therapists do not provide therapy to current students or supervisees.

4.3 Sexual Intimacy with Students or Supervisees. Marriage and family therapists do not engage in sexual intimacy with students or supervisees during the evaluative or training relationship between the therapist and student or supervisee. If a supervisor engages in sexual activity with a former supervisee, the burden of proof shifts to the supervisor to demonstrate that there has been no exploitation or injury to the supervisee.

4.4 Oversight of Supervisee Competence. Marriage and family therapists do not permit students or supervisees to perform or to hold themselves out as competent to perform professional services beyond their training, level of experience, and competence.

4.5 Oversight of Supervisee Professionalism. Marriage and family therapists take reasonable measures to ensure that services provided by supervisees are professional.

4.6 Existing Relationship with Students or Supervisees. Marriage and family therapists avoid accepting as supervisees or students those individuals with whom a prior or existing relationship could compromise the therapist's objectivity. When such situations cannot be avoided, therapists take appropriate precautions to maintain objectivity. Examples of such relationships include, but are not limited to, those individuals with whom the therapist has a current or prior sexual, close personal, immediate familial, or therapeutic relationship.

4.7 Confidentiality with Supervisees. Marriage and family therapists do not disclose supervisee confidences except by written authorization or waiver, or when mandated or permitted by law. In educational or training settings where there are multiple supervisors, disclosures are permitted only to other professional colleagues, administrators, or employers who share responsibility for training of the supervisee. Verbal authorization will not be sufficient except in emergency situations, unless prohibited by law.

Principle V

Responsibility to Research Participants

Investigators respect the dignity and protect the welfare of research participants, and are aware of applicable laws, regulations, and professional standards governing the conduct of research.

5.1 Protection of Research Participants. Investigators are responsible for making careful examinations of ethical acceptability in planning studies. To the extent that services to research participants may be compromised by participation in research, investigators seek the ethical advice of qualified professionals not directly involved in the investigation and observe safeguards to protect the rights of research participants.

5.2 Informed Consent. Investigators requesting participant involvement in research inform participants of the aspects of the research that might reasonably be expected to influence willingness to participate. Investigators are especially sensitive to the possibility of diminished consent when participants are also receiving clinical services, or have impairments which limit understanding and/or communication, or when participants are children.

5.3 Right to Decline or Withdraw Participation. Investigators respect each participant's freedom to decline participation in or to withdraw from a research study at any time. This obligation requires special thought and consideration when investigators or other members of the research team are in positions of authority or influence over participants. Marriage and family therapists, therefore, make every effort to avoid multiple relationships with research participants that could impair professional judgment or increase the risk of exploitation.

5.4 Confidentiality of Research Data. Information obtained about a research participant during the course of an investigation is confidential unless there is a waiver previously obtained in writing. When the possibility exists that others, including family members, may obtain access to such information, this possibility, together with the plan for protecting confidentiality, is explained as part of the procedure for obtaining informed consent.

Principle VI

Responsibility to the Profession

Marriage and family therapists respect the rights and responsibilities of professional colleagues and participate in activities that advance the goals of the profession.

6.1 Conflicts Between Code and Organizational Policies. Marriage and family therapists remain accountable to the AAMFT Code of Ethics when acting as members or employees of organizations. If the mandates of an organization with which a marriage and family therapist is affiliated, through employment, contract or otherwise, conflict with the AAMFT Code of Ethics, marriage and family therapists make known to the organization their commitment to the AAMFT Code of Ethics and attempt to resolve the conflict in a way that allows the fullest adherence to the Code of Ethics.

6.2 Publication Authorship. Marriage and family therapists assign publication credit to those who have contributed to a publication in proportion to their contributions and in accordance with customary professional publication practices.

6.3 Authorship of Student Work. Marriage and family therapists do not accept or require authorship credit for a publication based on research from a student's program, unless the therapist made a substantial contribution beyond being a faculty advisor or research committee member. Co-authorship on a student thesis, dissertation, or project should be determined in accordance with principles of fairness and justice.

6.4 Plagiarism. Marriage and family therapists who are the authors of books or other materials that are published or distributed do not plagiarize or fail to cite persons to whom credit for original ideas or work is due.

6.5 Accuracy in Publication and Advertising. Marriage and family therapists who are the authors of books or other materials published or distributed by an organization take reasonable precautions to ensure that the organization promotes and advertises the materials accurately and factually.

6.6 Pro Bono. Marriage and family therapists participate in activities that contribute to a better community and society, including devoting a portion of their professional activity to services for which there is little or no financial return.

6.7 Advocacy. Marriage and family therapists are concerned with developing laws and regulations pertaining to marriage and family therapy that serve the public interest, and with altering such laws and regulations that are not in the public interest.

6.8 Public Participation. Marriage and family therapists encourage public participation in the design and delivery of professional services and in the regulation of practitioners.

Principle VII

Financial Arrangements

Marriage and family therapists make financial arrangements with clients, third-party payors, and supervisees that are reasonably understandable and conform to accepted professional practices.

7.1 Financial Integrity. Marriage and family therapists do not offer or accept kickbacks, rebates, bonuses, or other remuneration for referrals; fee-for-service arrangements are not prohibited.

7.2 Disclosure of Financial Policies. Prior to entering into the therapeutic or supervisory relationship, marriage and family therapists clearly disclose and explain to clients and supervisees: (a) all financial

arrangements and fees related to professional services, including charges for canceled or missed appointments; (b) the use of collection agencies or legal measures for nonpayment; and (c) the procedure for obtaining payment from the client, to the extent allowed by law, if payment is denied by the third-party payor. Once services have begun, therapists provide reasonable notice of any changes in fees or other charges.

7.3 Notice of Payment Recovery Procedures. Marriage and family therapists give reasonable notice to clients with unpaid balances of their intent to seek collection by agency or legal recourse. When such action is taken, therapists will not disclose clinical information.

7.4 Truthful Representation of Services. Marriage and family therapists represent facts truthfully to clients, third-party payors, and supervisees regarding services rendered.

7.5 Bartering. Marriage and family therapists ordinarily refrain from accepting goods and services from clients in return for services rendered. Bartering for professional services may be conducted only if: (a) the supervisee or client requests it; (b) the relationship is not exploitative; (c) the professional relationship is not distorted; and (d) a clear written contract is established.

7.6 Withholding Records for Non-Payment. Marriage and family therapists may not withhold records under their immediate control that are requested and needed for a client's treatment solely because payment has not been received for past services, except as otherwise provided by law.

Principle VIII

Advertising

Marriage and family therapists engage in appropriate informational activities, including those that enable the public, referral sources, or others to choose professional services on an informed basis.

8.1 Accurate Professional Representation. Marriage and family therapists accurately represent their competencies, education, training, and experience relevant to their practice of marriage and family therapy.

8.2 Promotional Materials. Marriage and family therapists ensure that advertisements and publications in any media (such as directories, announcements, business cards, newspapers, radio, television, Internet, and facsimiles) convey information that is necessary for the public to make an appropriate selection of professional services and consistent with applicable law.

8.3 Professional Affiliations. Marriage and family therapists do not use names that could mislead the public concerning the identity, responsibility, source, and status of those practicing under that name, and do not hold themselves out as being partners or associates of a firm if they are not.

8.4 Professional Identification. Marriage and family therapists do not use any professional identification (such as a business card, office sign, letterhead, Internet, or telephone or association directory listing) if it includes a statement or claim that is false, fraudulent, misleading, or deceptive.

8.5 Educational Credentials. In representing their educational qualifications, marriage and family therapists list and claim as evidence only those earned degrees: (a) from institutions accredited by regional accreditation sources; (b) from institutions recognized by states or provinces that license or certify marriage and family therapists; or (c) from equivalent foreign institutions.

8.6 Correction of Misinformation. Marriage and family therapists correct, wherever possible, false, misleading, or inaccurate information and representations made by others concerning the therapist's qualifications, services, or products.

8.7 Employee or Supervisee Qualifications. Marriage and family therapists make certain that the qualifications of their employees or supervisees are represented in a manner that is not false, misleading, or deceptive.

8.8 Specialization. Marriage and family therapists do not represent themselves as providing specialized services unless they have the appropriate education, training, or supervised experience

Supplement B:



MARRIAGE AND FAMILY THERAPY TRAINING PROGRAM
SOUTHERN CONNECTICUT STATE UNIVERSITY
INTERNSHIP AGREEMENT

Between _____ and _____
(Intern) (Facility)

Introduction: The MFT Program at SCSU seeks to prepare students for professional level work. The off-campus site is a vital part of this training process, giving the intern exposure to systemic psychotherapy in a community setting. In these settings, the intern is expected to be involved in all aspects of the agency functioning and to work in concert with other professionals of varying disciplines.

The program has the following expectations of the agency:

- The agency must have a published non-discriminatory policy.
-The agency must provide the intern with a variety of presenting problems.
-The agency must have the ability to provide therapy to couples and/or families.
-The agency must complete an evaluation at the end of each semester the intern is in the agency.
-The supervisor must be a licensed Master's level clinician. LMFT approved supervisors and LMFT supervisor preferred.

Policies and Procedures: Students are expected to adhere to agency policies and procedures as outlined in the agency's Policies and Procedures Manual.

Attendance: Students and internships must set the minimum standards regarding hours of work. The internship encompasses 12 months minimum and interns stay in placement through graduation. Attendance must be consistent, with no more than three absences allowed per semester. Excessive absences will be reflected in off-site placement supervisor's evaluation of the intern.

Schedule: Each student's schedule is individually negotiated prior to the beginning of the semester. The schedule can be negotiated at the beginning of each semester. Interns are expected to have a minimum of 10 clients and a maximum of 14 clients over a maximum of 3 days each week. Interns are allotted vacation and self-care days as needed in consultation with the off-site supervisor.

Ethics: Marriage and family therapy students must maintain the professional and ethical standards set forth by AAMFT. It is the intern's responsibility to understand and follow these standards.

Supervision: Formal individual supervision must be provided for a minimum of one hour per week. Group supervision should also be provided with graduate students from other disciplines in attendance, if possible. The supervision schedule is as follows:

- Individual supervision will include the supervision of the student's experience in individual, group, and family therapy.
-Supervision of the student's work in case management shall include the treatment planning, aftercare planning, and collaboration with outside agencies when deemed appropriate.
-Supervision of the student's role and functioning as a member of the interdisciplinary treatment team.
-Supervision of the student's documentation. All documentation must be co-signed by the supervisor. It is the responsibility of the student to inform the supervisor of any documentation that he/she has completed that needs to be co-signed.
-The supervisor will attend relevant meetings with the student's faculty and complete any required documentation/assessment evaluations in order to address the progress of the student.

Education: Students should complete a General Orientation through the appropriate agency resource. The supervisor will provide training in the first month of the internship. Educational opportunities (and departmental in-service workshops) should be available to and required of the intern.

Agreement: The parties agree to the above standards:

Site Supervisor _____ (Print name) _____ (Signature) _____ (Date)
AAMFT Member Number (if applicable) : _____ (Date)
Signature of School Liaison: _____ (Date)
Signature of Intern: _____ (Date)

Supplement C:

INTERNSHIP INFORMATION FORM

Complete this form with the contact information of your proposed placement supervisor with start/end date.

A copy of your supervisor's license to practice and resume/cv is required once the site is approved.

You may **NOT START OFFSITE PLACEMENT** until the offsite placement coordinator returns a signed Internship agreement to you.

NAME OF STUDENT	
INTERNSHIP SITE	
ADDRESS OF SITE	
LICENSED SITE SUPERVISOR: NAME TITLE PHONE NUMBER E-MAIL ADDRESS	
START DATE	
END DATE (and anticipated graduation date)	

Appendix G:

Practicum / Internship Evaluation

Supervisee Name: _____ Date: _____

Supervisor Name: _____ Semester: _____

Rating:

- D: Did not observe**
- B: Below expected level of understanding for level of experience and education**
- P: Progressing appropriately for level of experience and education**
- M: Meets the standard consistently and over time**

Students are expected to obtain a “P” or above in all categories.

1. Admission to Therapy: Graduates will demonstrate competence in initiating The treatment process up to the point where a therapeutic contract is established.				
	D	B	P	M
1.1 Determine who should attend therapy and in what configuration (e.g. individual, couple, family, extra-familial resources)				
1.2 Obtain consent to treat from all responsible persons				
1.3 Determine a clear and mutual contract with clients which includes practice setting rules, record keeping, fees, rights and responsibilities of each party, including privacy and confidentiality policies, and duty to care to client or legal guardian				

2. Management of Therapy: Graduates will build and maintain a functional structure of therapy.				
	D	B	P	M
2.1 Form and maintain an appropriate therapeutic relationship				
2.2 Maintain and modify the therapeutic contract as needed				
2.3 Appropriately balance client directed and therapist directed initiative in treatment				
2.4 Match treatment modalities and techniques to clients’ needs goals and values				
2.5 Distinguish between content and process issues, their role in therapy, and their potential impact on therapeutic outcomes				

2.6 Engage each family member in the treatment process as appropriate				
2.7 Continue or modify therapeutic approach and goals in response to client feedback and therapist assessment of progress				
2.8 Conclude treatment in an appropriate manner				
2.9 Maintain appropriate boundaries, manage issues of triangulation, and develop collaborative working relationships with clients, other professionals, classmates, supervisors and staff				

3. Assessment, Diagnosis, and Treatment Planning: Graduates will systematically assess and diagnose clients to develop treatment plans.				
	D	B	P	M
3.1 Identifies presenting problems from the perspective of each member of the therapeutic system				
3.2 Demonstrates ability to apply DSM V criteria to determine diagnoses and inform treatment planning				
3.3 Integrates clients' needs and strengths with knowledge about the following components into assessment and treatment planning: human development, cultural diversity, human sexuality, psychopathology, psychopharmacology, and couple and family development				
3.4 Systematically integrates client reports, observations of client behaviors, client relationship patterns, reports from other professionals, results from testing procedures, interactions with client to guide the assessment process, and treatment planning				
3.5 Demonstrates ability to determine whether clients issues are within the scope of MFT practice				
3.6 Develops hypotheses and treatment plan consistent with assessment, diagnosis, and MFT theory				

4. Clinical Intervention: Graduates will base their clinical interventions on an articulated theoretical foundation.				
	D	B	P	M
4.1 Demonstrates ability to integrate theoretically driven conceptualization and interventions to treatment goals and plan, assessment information, and systemic understanding of clients' context and dynamics				
4.2 Provides education and information to clients as needed to achieve treatment goals				
4.3 Evaluate clients' responses to interventions and modifies them accordingly to better fit clients' needs and personal styles				

5. Crisis & Case Management: Graduates will assess for and manage risk issues and appropriately manage administrative structure of therapy.				
	D	B	P	M
5.1 Routinely observe and assess for indications of abuse, danger to self, or others				
5.2 Develop and implement plans to reduce the potential for danger				
5.3 Recognize the need for, and make, appropriate referrals for adjunct services				
5.4 Complete needed documentation in a timely, accurate, and complete manner				
5.5 With proper consent, regularly communicate with other professionals and stakeholders to inform treatment				

6. Contextual Issues: Graduates are able to understand clients in context and work respectfully with them.				
	D	B	P	M
6.1 Demonstrates awareness and understanding of major characteristics of various contexts as defined by gender, race, ethnicity, SES, religion, age, disability, sexual orientation, and any other relevant group of belongingness				
6.2 Maintains a curious, non-judgmental stance regarding client's cultural and contextual background				
6.3 Manages therapy in a culturally sensitive way				
6.4 Evaluates strengths, limitations, and contraindications of specific therapy models, in their application across various diverse contexts				

7. Legal Issues / Ethics & Standards: Graduates will recognize and adhere to all the legal and ethical obligations of therapy.				
	D	B	P	M
7.1 Demonstrate awareness of legal, regulatory, and ethical context in which therapy occurs				
7.2 Inform clients of the therapist's legal, regulatory, and ethical obligations				
7.3 Manage mandatory reporting responsibilities appropriately				
7.4 Protect client confidentiality				
7.5 Comply with work settings policies and procedures				

8. Use of Supervision: Graduates will make appropriate use of supervision.				
	D	B	P	M

8.1 Present cases for supervision in a clear and organized manner				
8.2 Take initiative to obtain and use supervisory input				
8.3 Demonstrate openness to incorporating supervisory feedback into therapy process				
8.4 Pro-actively consult with supervisor if personal issues, attitudes, beliefs, or emotional reactions threaten to adversely impact clinical judgment and work				

9. Research: Graduates will demonstrate competence in understanding and using research to enhance their clinical work.				
	D	B	P	M
9.1 Use of current MFT and other research to inform clinical practice				
9.2 Demonstrates ability to administer assessment instruments for clinical and research purposes				

10. Use of Self: Graduates will recognize and manage their personal impact on the therapeutic process and the impact of the therapeutic process on them.				
	D	B	P	M
10.1 Monitor attitudes, biases, personal wellbeing, and personal issues to ensure they do not impact the therapeutic relationship adversely				
10.2 Evaluate reactions to the treatment process (e.g. transference, family of origin, current stress level, current life situation, cultural context) and their impact on effective intervention and clinical outcome.				
10.3 Makes use of appropriate resources to deal with reactions to the therapy process and to support therapist well-being				

Overall Comments:

Suggested Goals for Next Semester:

Signature of Supervisor

Date

Signature of Supervisee

Date

Appendix H:

MFT Academic Training Policy & Expectations

Program Culture and Approach

The Marriage and Family Therapy program at SCSU involves the student in a unique applied learning and personal development experience. The culture of the program is devoted to developing students into skilled clinicians. More specifically we work to promote healing, lessen domination, honor relational processes and nurture cultural sensitivity, competence and justice. We aspire to cultivate sensitivity, healthy dialogue and leadership in these arenas and to respectfully apply these aptitudes to ourselves, each other and our clients.

To support these goals, the program strives to support the inherent dignity and well-being of all members students, staff, faculty and clients no matter their race, gender, religion, sexual orientation, socioeconomic status, regional affiliation, national origin, religious beliefs, or physical, emotional and cognitive ability among other things. We commit to embrace and be respectfully curious about differences as valuable living teaching/learning tools. We commit to open minded listening and as we strive to respect and accept that each person is unique and important. To the extent possible and appropriate coursework will experientially explore these differences in a healthy positive and supportive environment.

Coursework focuses on developing theoretical knowledge as well as the practical and relational skills necessary to function as a systems-based psychotherapist. Integrated into the program is a rich and extensive clinical experience along with an intense focus on the developing selfhood of the therapist. Because of the nature of this clinically-focused training, the MFT program requires of students a level of commitment, dedication, and personal responsibility beyond that of non-clinical graduate programs.

A student's approach to coursework and interaction with classmates and instructors both in and out of class provides faculty with information that is used to assess ability to manage responsibility, integrate core concepts of clinical practice, and interact with others in a sensitive and compassionate manner. Assessment of students includes both academic and non-academic performance. Therefore a student may be slowed down, counseled out or dismissed from the program for either academic and/or non-academic reasons.

This document describes these unique training expectations and policies. It should be read and used in conjunction with other documentation concerning the MFT degree, such as the Graduate Catalog, The Program Handbook and The Clinic Manual.

In order to qualify to participate in the program, pursue a degree in Marriage and Family Therapy, and successfully progress through the program students must have the requisite academic and interpersonal abilities necessary to perform the essential functions required by the program. Students must indicate with their signature that that they have read, understood and agree to abide by the following expectations and policies:

Communication Skills: Students must have the ability to process information expeditiously and communicate effectively with other students, faculty members, staff, clients and other professionals. This includes the ability to hear constructive feedback as opportunities for growth

Interpersonal Skill: Sound interpersonal skills must be present and observable in all interactions within the program. These include ability to monitor personal reactions; curiosity and openness to multiple perspectives as well as the ability to avoid doing anything for another person that they are capable of doing for themselves; being able to be truthful without any element of judgment entering into this honesty; the ability to tolerate emotional intensity without shutting down, shutting off, avoiding or collapsing/dissolving into emotions; and the ability to accept ownership and accountability for your words, actions, and emotions.

Ethical Standards: Students are ethically and professionally bound to adhere to the AAMFT Code of Ethics and conduct themselves pursuant to pertinent Connecticut State Statutes and applicable administrative codes. In addition, it is essential that students demonstrate appreciation for empathy, diversity in society, and a non-judgmental attitude in their interaction with others.

Confidential material. The value of confidentiality is foundational to the profession of Marriage and Family Therapy. As part of many classes, clinical materials in the form of videotapes of therapy either from public sources or from clients at the SCSU Family Therapy Clinic are viewed. All students in MFT classes are required to subscribe to the standards of the AAMFT Code of Ethics in regard to confidential material. Thus all clinical materials discussed or viewed in class must remain confidential. Whatever one sees and hears must remain within the strictest confidence in order to protect the privacy, rights, sensitivities and feelings of all those involved including clients and fellow students.

Professionalism: Students are expected to demonstrate a commitment to professional conduct, including adhering to the limit of their knowledge and skills in the delivery of services to clients, respecting others, being punctual and dependable, completing assignments and reports on time, and prioritizing responsibilities. Appearance and personal demeanor should reflect an appropriate understanding of the professional context. Conflict resolution should reflect respect for proper channels of authority, and feedback dealt with in a professional manner. Respect should be shown to fellow students, faculty, staff, clients, and colleagues in the classroom and in the clinic. Disrespect for others or any form of harassment (physical, verbal, sexual) will not be tolerated.

Self disclosure in class. As part of some classes, students may offer self-disclosures. If a student chooses to self-disclose in class, faculty request other students treat those disclosures as confidential; however, faculty cannot guarantee that other students will maintain that confidentiality. In addition, faculty members may share student disclosures with other MFT faculty and professional colleagues, administrators, or employers expressly for the purpose of assisting in the student's development as a clinician. **Please note in order to comply with new federal and state guidelines, disclosures that involve sexual assault, sexual abuse, stalking, and/or harassment must be reported under Title IX guidelines to the SCSU Deputy of Diversity and Equity.** See Title IX guidelines included in this Handbook for additional information.

Self-care: Students need to develop their ability to tolerate anxiety, recognize the signs of their stress and emotional distress, and develop appropriate means of self-care. This includes seeking supportive services when necessary to minimize any adverse impact on scholastic and professional performance. Student must be willing to seek the advice of their faculty advisor and follow recommendations made by their advisor and/or faculty decisions regarding the appropriate maintenance of their academic, physical, or psychological health, which may include assessment and/or therapeutic services at the student's expense.

Approach to Coursework:

Your approach to coursework provides faculty with an assessment of your ability to manage responsibility, integrate core concepts of clinical practice, and interact with others in a sensitive and compassionate manner. Successful progress through the MFT program requires not only academic progress but also successful development of interpersonal skills necessary for clinical work. The faculty utilizes interactions in and out of class to assess your progress through the program and most importantly your readiness for the demands of clinical internship.

Students must demonstrate professionally appropriate behavior and may be slowed down, dismissed from the MFT program or barred from participation in internships for non-academic reasons. These reasons may include but are not limited to, failure to develop necessary clinical skills, demonstrated inability to manage peer and student-faculty interactions and/or disruptive behavior in any university associated activity.

By signing the Handbook Acknowledgment document, I certify that I have read, understand and agree to the above statements.

Appendix I:

Acknowledgement of Understanding of SCSU MFT Program Handbook

My signature indicates that I read and agree to the policies outlined in this MFT Program Handbook and the [SCSU Student Handbook](#):

_____ signature _____ date
printed name

Acknowledgement of Degree Portability

The Master’s of Family Therapy degree awarded from Southern Connecticut State University meets the academic education and clinical training requirements of the State of Connecticut for *potential* Associate Designation and licensure as a Marital and Family Therapist. In Connecticut, graduates typically enter the field with an Associate Designation, practicing under the supervision of a designated licensed Marital and Family Therapist. To obtain full licensure, graduates of the program must complete post-graduate client contact, receive supervision under a licensed MFT, and successfully pass the American Marriage and Family Therapy Regulatory Board (AMFTRB) examination.

Information on obtaining an Associate Designation in CT may be found here:
<https://portal.ct.gov/DPH/Practitioner-Licensing--Investigations/MFT/Marital-and-Family-Therapy-Associate>

Information on obtaining a license as a MFT in CT may be found here:
<https://portal.ct.gov/DPH/Practitioner-Licensing--Investigations/MFT/Marital-and-Family-Therapist-Licensure-Requirements>

Information about the AMFTRB examination may be found here: www.amftrb.org

Please initial from your options below:

____ Following my graduation, I plan to practice in Connecticut.

____ Following graduation, I intend to practice outside Connecticut, in the following state(s):

I understand my education eligibility to become licensed in the state(s) above.

_____ signature _____ date
printed name

Appendix J:

Title IX and General Reporting Procedures of Misconduct

Sadly, the frequency of sexual assault on college campuses has been identified as an epidemic. As colleges and universities find their way through to best practices, many policy applications and revisions will occur. Currently, the CCSU system has developed one of the most aggressive reporting procedures in the country. While this policy is aggressive, it is something we must follow. Please know that your faculty continues to participate in the analysis and discussion of the following policy. We also continue to partner with Student Affairs and Victims services by running groups, programs and fundraising. The SCSU MFT program employs a systemic understanding to this difficult issue and we continue to bring our knowledge and talents to the ongoing discourse related to this policy.

The Board of Regents for the CCSU system has mandated faculty to report any disclosure of sexual assault, harassment, stalking or domestic violence. There is NO statute of limitation on age and stage. Administrators, faculty and staff must report instances that involve students and/or employees. The University will assist you with resources to address the disclosure--legally (university police), support and advocacy (VPAS Survivor Support Office), physically (medical services) and emotionally (counseling services). Please know that any disclosures must be reported by the faculty to the Director of Diversity Services and Title IX. The Director of Diversity Services will investigate (talk to you) to make sure you are connected to supports, if you would like them. If you do not want services, she will close your case.

Complete instructions on Sexual Misconduct information is updated regularly and located at:
<https://inside.southernct.edu/sexual-misconduct/reporting-staff>

Appendix K:

CYCLE OF ASSESSMENT NOTIFICATION

Students are assessed for the purposes of assessment and for purposes of reporting to our accreditation agency-COAMFTE. The cycle and format for assessments are as follows. Please check your SCSU email on a regular basis and comply with requests for feedback. All survey data except that collected for the COAMFTE required annual report is anonymous and is reported without names or ID numbers. Any concerns or questions about process, treatment or handling of survey data should be addressed to the Program Director. Review your MFT Handbook for rubrics and details about our assessments.

Type	Cycle	Benchmark
Course Grades	Each semester,	Maintain a GPA above a 3.0 and no course below a C can be credited toward required courses
Attitudes and Dispositions	Annually (November)	Students must be scored as sufficiently progressing in each category earning > 3/5
Technical Standards Assessment	Annually to begin November 2017	All students score >3/5 for each area
TK-20 Clinical Skills Assessment	Each semester of clinical work	Students must earn a passing score for the overall assessment, > 3.0
SCSU Course Evaluations	Each semester, every course	Professors scores are assessed by Chair of Department, Dean and Provost. Program Director assesses as requested
EO/SLO/course content assessment	Annually (March)	Data are reviewed in faculty retreat and with Program Director as needed
Annual Report Data Collection	Annually (March-May)	Data required by COAMFTE for accreditation maintenance
Program Assessment Data SLO Assessment	Annually (August) (graduates only)	Data to evaluate effectiveness of SLO learning
University Support Programs Assessment	Annually(March)	Bench mark > than 65% of MFT students will rank services 3 or higher
Faculty Assessment of University Support	Annually (March)	Greater than 75% of Faculty will rank University budgetary and other supports >3/5
Faculty Attention to Diversity and Cultural Competence	Annually (August 2017)	Greater than 75% of core faculty will address cultural diversity in their research, presentation and/or professional development

Appendix L:

SCSU Marriage and Family Therapy Confidentiality Agreement

The value of confidentiality is foundational to the profession of Marriage and Family Therapy. All attendees in MFT classes and in the MFT Family Clinic are required to subscribe to the standards of the AAMFT Code of Ethics in regard to maintaining confidentiality of cases and client information. Thus all clinical materials discussed or viewed must remain confidential. Whatever one sees and hears must remain within the strictest confidence in order to protect the privacy, rights, sensitivities and feelings of all those involved including clients and fellow students. Posting sensitive information related to the clinic, our clients, your fellow students, staff and faculty may result in the student responsible being removed from the program.

There are two sets of exceptions:

- 1) In the cases where students feel they have witnessed or experienced harassment, or abuse of any kind, they are to report it to the Program Director. If it involves the Program Director, they are to report it to Cathy Christy in the VPAS Center.
- 2) The following are cases where you are obligated to break confidentiality
 - a) suspected active or imminent child abuse, neglect or endangerment
 - b) imminent threat of harming another person
 - c) suspected active or imminent abuse, neglect, or endangerment of the elderly

All reports of suspect abuse are to be discussed with a supervisor.

I have read, understand and agree to the terms above:

Printed Name of Student

Signature and date

Signature of Clinic Manager

Appendix M:

Marriage and Family Therapy Program Technical Standards

Earning a degree from the SCSU MFT Program requires mastery of a coherent body of knowledge and skills. MFT students must acquire substantial competence in the discipline standards as specified by American Association of Marriage and Family Therapy Accreditation and CT Licensure guidelines. As such must be able to relate and communicate appropriately and effectively with clients/patients, fellow students, faculty and staff members, and other health care professionals. Combinations of cognitive, behavioral, emotional, intellectual, and communication abilities are required to perform these functions satisfactorily. These skills and functions are not only essential to the successful completion of the MFT Program, but they are also necessary to ensure the health and safety of clients/patients, fellow students, faculty and staff members, and other health care providers.

The following technical skills **are required** for admission to the program. After admission, if there is evidence of compromise to these standards the student may not be able to continue in the program such as in the case of deterioration of mental health, ability to communicate or to function safely in the class or clinic room, in onsite or offsite placements. The program reserves the right to hold and evaluate a candidate for admission and graduation to these technical standards.

In addition to required academic achievement and proficiency, the Technical Standards described below set forth non-academic qualifications for the MFT degree. Therefore, in order to be admitted to, to successfully progress through, to be approved for internship, and subsequent graduation from the Program, applicants for admission and current students must satisfy these Technical Standards and are so evaluated throughout the program. Students who are unable to meet these standards may be recommended for remediation or may be terminated from the program, consistent with policies articulated in the MFT Program Handbook.

I. Attitudinal, Behavioral, Interpersonal, and Emotional Attributes

MFT students must be able to relate to clients/patients, fellow students, faculty and staff members, and other health care providers with honesty, integrity, and dedication and in a non-discriminatory manner. They must be able to understand and use the power, special privileges, and trust in the therapist-client/patient relationship for the client/patient's benefit and to know and avoid the behaviors that constitute misuse of this power. MFT students must demonstrate the capacity to examine and deliberate effectively about the social and ethical questions that define MFT roles and to reason critically about these questions. They must be able to identify personal reactions and responses, recognize multiple points of view, and integrate these appropriately into clinical decision making. Student trainees must demonstrate thoughtful and logical responses to supervision and to the work of the self of the therapist throughout the program. MFT students must be able to collaborate well with others on joint projects and meet deadlines. They must receive sufficient reviews on the MFT Attitudes and Dispositions Measure as well as their clinical competency rubric. At all times standards of confidentiality must be maintained.

A MFT student must also be of sufficient emotional health to utilize fully their intellectual ability, to exercise good judgment, to complete client/patient care responsibilities promptly, and to relate to clients/patients, families, fellow students, faculty and staff members.

MFT students must be able to analyze and synthesize information from a wide variety of sources and must demonstrate critical thinking skills. They must be able to learn effectively through a variety of modalities including, but not limited to: classroom instruction, clinical supervision, small group

discussion, individual study of materials, independent literature review, preparation and presentation of written and oral reports, and use of computer-based technology.

Because the practice of AAMFT is governed by the ethical principles set forth in the current APA Ethics Code and by current state and federal laws, MFT student must have the capacity to learn and understand these ethical standards and legal requirements and to perform consistent with those principles and mandates as a student in the MFT Program. Therapists must have a mastery of the language in which their agency practices, they must have the ability to deliver speech clearly and in a timely manner to maintain the process of therapy. As such, MFT students must be able to ask effective questions, to receive answers perceptively, to record information about client/patients, and to provide effective psychoeducation to clients/patients. They must be able to communicate clearly and effectively and efficiently with clients/patients, their families, fellow students, faculty and staff members, clinical supervisors in varied practicum settings, and other health care providers with courtesy, compassion, maturity, safety, and respect for dignity. The ability to participate collaboratively and flexibly as a member of an inter-professional team is essential. MFT student must maintain and display stable health in spite of multiple and varied academic, and training responsibilities, in addition to clinical training expectations. MFT students must be able to modify behavior in response to constructive criticism. They must be open to examining personal attitudes, perceptions, and stereotypes (especially those that may negatively impact client/patient care and professional relationships). MFT students must be able to take responsibility for their behavior, which includes being open to feedback from their supervisors, academic instructors, and advisors. MFT students must be open and empathic with others and show respect for different viewpoints, perspectives, and opinions. They must strive to work collaboratively with others in the classroom, laboratory, clinic, and in all other academic or professional settings. They must convey genuine interest in other people and demonstrate affect tolerance (i.e., appropriately manage and contain emotions in academic and professional settings). As an essential part of clinical practice, MFT students effectively tolerate uncertainty and ambiguity. They must be emotionally mature (e.g., intellectually and emotionally open to and appropriate when receiving feedback). MFT students must be able to advocate for their own needs without being inappropriately aggressive. Any formal discipline at the University or outside of it is subject to violation of this technical standard. Students with assistants under Title 2 accommodations, whether those accommodations are technical, animal or human, are responsible for the actions of that assistant, at no time can an assistant interject or interfere with the therapy or educational process.

The study and ongoing practice of clinical work often involves taxing workloads and appropriate management of stressful situations. A MFT student must have the physical and emotional stamina to maintain a high level of functioning and communication the face of multiple demands on their time and energy and to be clear headed in cases of emergency.

II. Intellectual Skills

MFT students must possess a range of intellectual skills that allow them to master the broad and complex body of knowledge that comprises MFT training and education.

MFT students must be able to use theory to inform the conceptualization, design, and interpretation of theory, clinical assessment, note writing, make case conceptualizations, write at the level of a Master's level student and to under analyze and understand research. They must be able to critically analyze professor and supervisor feedback and demonstrate its application to their professional growth. Clinical supervision, small group discussion, individual study of materials, independent literature review, preparation and presentation of written and oral reports, and use of computer-based technology in order to gain knowledge and take on line classes.

Because the practice of AAMFT is governed by the ethical principles set forth in the current MFT Ethics Code and by current state and federal laws, MFT student must have the capacity to learn and understand these ethical standards and legal requirements and to perform consistent with those principles and mandates as a student in the MFT Program. MFT students must carry clinical liability insurance.

III. Communication Skills

Therapists must have a mastery of the language in which their agency practices, they must have the ability to deliver speech clearly and in a timely manner to maintain the process of therapy. As such, MFT students must be able to ask effective questions, to receive answers perceptively, to record information about client/patients, and to provide effective psychoeducation to clients/patients. Effective includes, accuracy, timely and coherent. They must be able to communicate clearly and effectively and efficiently with clients/patients, their families, fellow students, faculty and staff members, clinical supervisors in varied internship sites, agencies and Universities. This includes verbal and non-verbal communication (e.g., interpretation of facial expressions, affects, and body language). Mastery of both written and spoken English is required, although applications from students with hearing and speech disabilities will be given consideration. In such cases, use of a MFT *trained* intermediary or other communications aide may be appropriate if this intermediary functions *only as an information conduit and does not serve integrative or interpretive functions*. Students who are English as a second language must pass the TOEFL exam.

Commitment to Non-Discrimination

The University is committed to equality of educational opportunity. The University does not discriminate in offering access to its educational programs and activities on the basis of age, color, creed, disability, gender, gender expression, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, or veteran status.

A MFT student with a diagnosed psychiatric disorder or other physical, mental, or emotional disability may participate in the MFT Program so long as the condition is managed sufficiently with or without reasonable accommodation to permit the student to satisfy the requirements of the MFT Program, including these Technical Standards. Students who seek reasonable accommodations for disabilities must contact the University's Disability Resource Center (DRC). The Office will determine a student's eligibility for and recommend appropriate accommodations and services under Title II. This applies to students with learning disabilities as well. In the event of deteriorating function, it is essential that a MFT student be willing and able to acknowledge the need for and to accept professional help before the condition poses a danger to the student, client/patients, other students, faculty and staff members, or research participants.

V. References

AAMFT Code of Ethics
SCSU Graduate Student Handbook
SCSU MFT Program Handbook
Technical Standards of the UNC Clinical Psychology Program

I read and understand the MFT Program Technical Standards in the MFT Program Handbook:

Student's Printed name

Student Signature and date

Appendix N:

SCSU & MFT Program Academic Misconduct Policy

Academic misconduct includes all forms of cheating and plagiarism. Academic misconduct includes but is not limited to, providing or receiving assistance from another, in a manner not authorized by the instructor, in the creation of work to be submitted for academic evaluation (including papers, projects and examinations). Plagiarism is defined as presenting, as one's own, the ideas or words of another person, for academic evaluation, without proper acknowledgment. Plagiarism includes, but is not limited to: (i) copying sentences, phrases, paragraphs, tables, figures, or data directly or in slightly modified form from a book, article, or other academic source without using quotation marks or giving proper acknowledgment to the original author or source; (ii) copying information from Internet Web sites and submitting it as one's own work; (iii) buying papers for the purpose of turning them in as one's own work; and (iv) selling or lending papers to another person for submission by that other person, for academic evaluation, as his or her own work.

Procedures for handling cases of alleged academic misconduct have been put forward and approved by the University's Faculty Senate and can be found by clicking [here](#).

Appendix 0:

Marriage and Family Therapy Course Sequence: Two-year track

Class Number	Class Name	Number of Credits
<u>Year One Fall:</u>		
MFT 597:	Family of Origin	3.0
MFT 598:	Family Systems Theory I	3.0
MFT 505:	Therapeutic Use of Self - Introduction	3.0
MFT 620:	Professional, Legal and Ethical Issues in MFT	3.0
<u>Year One Spring:</u>		
MFT 668:	Family Systems Theory II	3.0
MFT 609:	Diversity and Multicultural Competency in MFT Practice	3.0
MFT 506:	Therapeutic Use of Self – Intermediate	3.0
MFT 562:	MFT Practicum in Case Management and Clinical Skill Development	3.0
MFT 548:	Intro to Family Clinic Policies and Procedures	1.5
<u>Year One Summer:</u>		
MFT 669:	Family Systems Theory III: Current Trends in Family Interventions: Evidence Based Practice Models	3.0
MFT 562:	MFT Practicum in Case Management and Clinical Skill Development	3.0
MFT 672:	Understanding the Treatment of Substance Addictions in Couples and Families	3.0
<u>Year Two Fall:</u>		
MFT 610:	Couples Therapy	3.0
MFT 586:	Family and Individual Development over the Life Cycle	3.0
MFT 662:	MFT Internship in Case Management and Clinical Skill Development	3.0
MFT 605:	Therapeutic Use of Self in Groups I (optional)	3.0
<u>Year Two Spring:</u>		
MFT 607:	Systemic Perspectives on Mental Health & Psychopathology	3.0
MFT 662:	MFT Internship in Case Management and Clinical Skill Development	3.0
MFT 587:	Family Therapy Outcome Research	3.0
MFT 606:	Therapeutic Use of Self in Groups II (optional)	3.0
<u>Year Two Summer:</u>		
MFT 674:	MFT Concepts and Clinical Methods in Human Sexuality	3.0
MFT 662:	MFT Internship in Case Management and Clinical Skill Development	3.0
MFT 673:	Treatment Issues in MFT: Integrating Spirituality and Religion in Marriage, Couples, and Family Therapy	1.5

Marriage and Family Therapy Course Sequence: Three-year track

Class Number	Class Name	Number of Credit
<u>Year One Fall:</u>		
MFT 597:	Family of Origin	3.0
MFT 598:	Family Systems Theory I	3.0
<u>Year One Spring:</u>		
MFT 668:	Family Systems Theory II	3.0
MFT 609:	Diversity and Multicultural Competency in MFT Practice	3.0
<u>Year One Summer:</u>		
MFT 669:	Systems Theory III: Current Trends in Family Interventions: Evidence Based Practice Models	3.0
MFT 672:	Understanding the Treatment of Substance Addictions in Couples and Families	3.0
<u>Year Two Fall:</u>		
MFT 505:	Therapeutic Use of Self - Introduction	3.0
MFT 620:	Professional, Legal and Ethical Issues in MFT	3.0
MFT 610:	Couples Therapy	3.0
<u>Year Two Spring:</u>		
MFT 506:	Therapeutic Use of Self – Intermediate	3.0
MFT 562:	MFT Practicum in Case Management and Clinical Skill Development	3.0
MFT 548:	Intro to Clinic Policies, Procedures, Practices	1.5
<u>Year Two Summer:</u>		
MFT 562:	MFT Practicum in Case Management and Clinical Skill Development	3.0
MFT 673:	Treatment Issues in MFT: Integrating Spirituality and Religion in Marriage, Couples, and Family Therapy	1.5
<u>Year Three Fall:</u>		
MFT 586:	Family and Individual Development over the Life Cycle	3.0
MFT 662:	MFT Internship in Case Management and Clinical Skill Development	3.0
MFT 605:	Therapeutic Use of Self in Groups I (optional elective)	3.0
<u>Year Three Spring:</u>		
MFT 662:	MFT Internship in Case Management and Clinical Skill Development	3.0
MFT 607:	Systemic Perspectives on Mental Health & Psychopathology	3.0
MFT 587:	Family Therapy Outcome Research	3.0
MFT 606:	Therapeutic Use of Self in Groups II (optional elective)	3.0
<u>Year Three Summer:</u>		
MFT 662:	MFT Internship in Case Management and Clinical Skill Development	3.0
MFT 674:	MFT Concepts and Clinical Methods in Human Sexuality	3.0

Appendix P:

Comprehensive Exam MFT Program, Southern Connecticut State University

Welcome to your comprehensive examination!

Successful passing of this examination will demonstrate how you, as an advanced MFT candidate, will meet the following three *Student Learning Outcomes* (SLO) of the SCSU MFT Program:

- 1) Practice from a systemic lens;
- 2) Practice from a culturally competent lens; and,
- 3) Demonstrate skills of an entry level Marriage and Family Therapist.

As part of your MFT degree completion, you are required to:

1. Successfully pass a three-part *Comprehensive Examination*;
2. Submit a professional resume or CV; and,
3. Write a sample cover letter to a clinical agency director/recruiter highlighting and describing your clinical competence as an MFT.

When answering the exam questions please: demonstrate your clinical application of MFT models based on Systems Theory; use graduate level formal writing and APA 6 formatting, including citations.

Submit your comprehensive examination (with the completed top half of the comprehensive exam report) per the instructions of your advisor/reader for grading. It is your responsibility to coordinate with your adviser to submit your examination paper by the due date: _____.

Part 1

Theoretical Orientation:

Describe your MFT approach to facilitate “therapeutic-change” in your clinical work with clients. Use MFT literature (including but not limited to foundational textbooks, audio visual references, and current articles) to support your position and theoretical orientation.

Part 2:

Theoretical Applications:

Using actual case examples explain how you apply skills and interventions based on your chosen theoretical orientation. We are looking for successes, and also challenges here. Not everything goes right the first time and part of an advanced clinician’s skillset is accurately assessing when it is not going well and initiating recovery. Include and explore examples of the following skills (successes, challenges, and recovery) in:

- Joining

- Therapeutic skills and interventions
- Case transfer, ending, or termination
- Therapeutic use of self, or POTT

Part 3:

Cultural Competence & Application:

a) Describe your theoretical orientation and application of cultural competency as an MFT clinician. In your answer please focus on the following four dimensions: *cultural knowledge*, *cultural awareness*, *cultural sensitivity*, and *cultural action*. Use MFT literature on cultural competence (including but not limited to foundational textbooks, audio-visual references, and current articles) to support your answer.

b) Using case examples explain how you apply cultural competency skills and interventions. As above, think outside the simple box of your “best case”. Include and explore examples of cultural competency skills in the therapy room (successes, challenges, and recovery):

I. Include your professional resume or CV

II. Write a cover letter to a clinic director/recruiter highlighting and applying for a potential position and describing your clinical competence as an MFT.

SOUTHERN CONNECTICUT STATE UNIVERSITY
COMPREHENSIVE EXAMINATION REPORT

Each year the MFT program surveys our graduates to complete a brief survey as a requirement for our program's COAMFTE accreditation. We will contact you using the information you provide here. Complete top portion only.

Name: _____ Student ID #: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone# 1: _____ Phone #2: _____

Personal email: _____

The portion (below) is completed by MFT faculty and submitted to the Registrar's office.

Number of credits completed: _____

Department: *Marriage and Family Therapy* Area of concentration: *MFT*

1. Date of examination _____ Passed ____ Failed ____

2. Date of examination _____ Passed ____ Failed ____

Hours forms completed & submitted

Date: _____

Date: _____

cc: Registrar's office (to certify graduation)

Scoring Rubric for COMPREHENSIVE EXAM

Modified from Carnegie Mellon University, Eberly Center for Excellence in Teaching.
Eberly Center for Teaching Excellence, Carnegie Mellon University

Dimension	Sophisticated	Competent	Weak
Case content relevant to question	Clear connection between question target and content/process transcribed or answer 4-5 pts	Moderate connection between question and content/process transcribed and/or answer. 2-3 pts	Connection between question target and content/process transcribed or answer is vague .0-1 pts
Therapists use of rationale/theory	Intervention(s) selected are highly relevant to content and process, is presented completely – the method, and implications strong or advanced insight, competence and/or complete understanding; Theory/rationale are relevant, accurately described and all relevant components are included; relationship between research and theory is clearly articulated and accurate. 8– 10 pts	Interventions selected are relevant to the argument and is mostly accurate and complete – there are some components are unclear or some minor errors, the method, and/or implications demonstrate solid or responsible insight, competence and/or understanding of results or implications. Theory is relevant and accurately described; some components may not be present or are unclear. Connection to theory is mostly clear and complete, or has some minor errors. 5 – 7 pts	Intervention selected is not relevant to the content/process are vague and incomplete – components are missing or inaccurate or unclear. The method, and/or implications demonstrate weak insight, competence and/or understanding results or implications. Theory is not or is tangentially relevant to intervention or point; theory is not clearly articulated and/or has incorrect or incomplete components. Relationship between theory/rational and intervention or points are unclear or inaccurate, major errors in the logic are present concern about therapist's competence 0 – 4 pts
Student Learning Outcome Achieved	Answer demonstrates more than strong evidence of meeting student learning outcome 1, 2 or 3 via accurate analysis content, process, and application theoretical/rationale. 4-5 pts	Answer demonstrates more adequate evidence of meeting student learning outcome 1, 2 or 3 via accurate presentation and analysis of content, process, and application theoretical/rationale. 2-3 pts	Answer does not demonstrate competence in meeting student learning outcome 1, 2, or 3. Underlying logic has major flaws; connection to position is not clear. 0-4
Writing	Paper is coherently organized and the logic is easy to follow. There are no spelling or grammatical errors and terminology is clearly defined. Writing is clear and concise and persuasive. 4-5 pts	Paper is generally well organized and most of the argument is easy to follow. There are only a few minor spelling or grammatical errors, or terms are not clearly defined. Writing is mostly clear but may lack conciseness. 2-3 pts	Paper is poorly organized and difficult to read – does not flow logically from one part to another. There are several spelling and/or grammatical errors; technical terms may not be defined or are poorly defined. Writing lacks clarity and conciseness. 0-1 pts
References to MFT Literature	Paper used relevant MFT literature from multiple, research-based sources. 4-5 pts	Paper used MFT literature from multiple sources. 2-3 pts	Paper gathered information from less than two sources. 0-1 pts

Appendix Q:

MFT Professional Attitudes and Dispositions Assessment

MFT Student Learning Outcomes

SCSU's University's Marriage and Family Therapy Master's Program is accredited by the American Association of Marriage and Family Therapists' Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE). Based on COAMFTE's Standards the program has identified 3 Student Learning Outcomes (SLO): **SLO1.** Practice from a systemic lens; **SLO2.** Practice from a culturally competent lens; **SLO3** Demonstrates skills of an entry level Marriage and Family Therapist. During the fall semester all MFT students are evaluated for Interpersonal Skills which were developed to correspond with some of COAMFTE's Core Competencies (CC) as well as the SLO's the program has identified. Below is a list of each skill and evaluation rubric. Also listed are the corresponding core competencies and SLO's.

Note: Students are also subject to meeting all technical standards as outlined in the MFT Student Handbook. An average of 3 = developing appropriately; any student who receives an average score below 3 will meet with the MFT program director and their faculty advisor and may be placed on a remediation plan. Individual item scores of below 3 can result in further intervention and meeting with PD and Advisor. In all cases, this is based on the general assessment of the core faculty on the student's progress.

Name of Student: _____

Date: _____

		Skill	5	4	3	2	1
#1	CC 2.4.2	Views issues and therapeutic processes systemically including classroom and interpersonal processes	Displays sophisticated and original systemic understanding in interpersonal interactions in the classroom including: Recognizing and articulating relational process & patterns; and ability to view problematic interactions through multiple perspectives	Displays strong systemic understanding in interpersonal interactions. Often able to recognize and articulate relational process & patterns; and to view problematic interactions through multiple	Displays competent systemic understanding in interpersonal interactions, including minor problems recognizing and articulating relational process & patterns; sometimes inconsistently able to view problematic interactions through multiple perspectives. For example is more able to do this in theory than in practice	Vague, unclear systemic understanding, in interpersonal interactions, including major problems articulating relational process & patterns; sometimes inconsistently able to view problematic interactions through multiple perspectives. Rarely able to do this in practice; often unable to do it in theory either.	Significant deficiency in systemic understanding, unable to consistently articulate relational process & patterns; unable to view problematic interactions through multiple perspectives. Has major problem both theoretically and in practice

			5	4	3	2	1
#2	CC 1.2.1 Perceptual SLO 2	Recognize contextual and systemic dynamics (gender, race, etc)	Displays original, detailed and insightful understanding of, and interest in contextual variables and their effect on mental health. Sophisticated ability to articulate and teach others about their personal unique contextual variables, able to learn and apply information about the contextual variables that are less familiar for them.	Displays strong understanding of, and interest in contextual variables and their effect on mental health.; can articulate how their own contextual variables affect mental health; generally open to others' contextual experiences.	Displays competent understanding of contextual variables. Still learning how to articulate how their own contextual variables affect mental health; and/or learning to be open to others' contextual experiences. May lacks clarity and/or interest about the connection to mental health.	Vague, unclear, primarily inconsistent understanding of contextual variables and the connection to mental health needs to make concerted effort to understand their own and others' contextual variables.	Significant deficiency in understanding contextual variables and their connection to mental health. Minimal or no attempt to understand their own variables or those of others.
#3	CC 2.5.1 SLO 3	Utilize consultation and supervision effectively	Student has proven track record of enthusiastically seeking guidance and help when necessary; open to feedback, fully engaged with faculty and peers, sophisticated incorporation of feedback	Student has sought guidance or we trust that the student would seek help when necessary; student is open to feedback and has or could incorporate feedback into classroom interactions	Student competent and likely to seek guidance; may be inconsistently open to feedback or inconsistently able to incorporate feedback	Believe this student is not likely to seek guidance until absolutely necessary; may struggle with openness to feedback or ability to incorporate feedback	Significant inability to seek or incorporate guidance and feedback
#4		Monitor personal	Sophisticated, original and self-	Skilled and insightful ability	Developing and competent awareness of personal	Limited awareness of personal reactions,	No awareness of personal

	CC 3.4.5 SLO 1,2 &3	reactions to clients and treatment process as well as reactions to classmates, faculty, staff	driven ability to be aware of and accountable for personal reactions. Able to attempt interpersonal shifts and have discussions to better handle these reactions in relationships.	to be aware of personal reactions. Desire to be accountable and to shift interpersonal dynamics to better handle these reactions	reactions, inconsistently able to be accountable, some confusion about what changes to make interpersonally to be more accountable or to better handle these reactions.	limited accountability; significant confusion and /or desire to make this different.	reactions and /or no ability to be accountable for them or to make changes to better handle them.
			5	4	3	2	1
#5	CC 4.2.2 SLO 1 & 3	Distinguish differences between process and content issues	Student displays insightful, sophisticated and original understanding of the differences between process and content issues; is consistently able to distinguish patterns, hold complexity, see own part in a process.	Student displays a generally clear understanding of the differences between process and content issues; usually able to distinguish patterns, hold complexity and see own part in a process	Student displays a competent and developing understanding of the difference between process and content issues; at times focuses more on content than process; gets stuck in the concrete details rather than able to distinguish patterns, hold complexity, and/or see own part in a process.	Student displays a vague, unclear understanding of the difference between process and content issues; is consistently stuck in content and has difficulty distinguishing patterns, holding complexity, and/or seeing own part in a process.	Student has significant deficiency understanding the differences between process and content; Is focused solely on content and has little or no ability to distinguish patterns, hold complexity and/or see own part in a process
			5	4	3	2	1
#6	CC 4.3.4 SLO 1 & 3	Generate relational questions and reflective comments in class settings	Student has a sophisticated, insightful original ability to generate questions that stimulate systemic thinking	Student has a clear ability to generate relational questions that stimulate systemic thinking	Student has a competent ability to generate relational questions; however, questions lack coherence, consistency & sometimes does not stimulate systemic thinking	Student has difficulty in generating relational questions; lacks coherence & consistency when doing so.	Student has extreme difficulty in generating relational questions
			5	4	3	2	1

#7	CC 4.5.1 Professional SLO 2 & 3	Respect multiple perspectives (e.g., clients, team, supervisor, practitioners from other disciplines involved in the case).	Student is open and extremely receptive to multiple perspectives; consistently accountable for reactive triggers	Student is often respectful of multiple perspectives, and continually aware of his/her own judgmental and defensive triggers	Student has a developing ability to be consistently respectful, accountable, and open. Shows progress and is developing appropriately. Work on consistency.	Student has difficulty holding multiple perspectives, in moments is judgmental and defensive, lacks insight in to their own accountability.	Student is consistently disrespectful and not open to multiple perspectives; pervasively judgmental and defensive
			5	4	3	2	1
#8	CC 4.5.2 SLO 1 & 3	Set appropriate boundaries, manage issues of triangulation, and develop collaborative working relationships.	Student displays clear and healthy boundaries, manages issues of triangulation, and exhibits an outstanding collaborative working relationship with both professors and other students	Student displays mostly clear boundaries, manages issues of triangulation, and exhibits an strong, collaborative working relationship with both professors and other students	Students displays competent boundaries with others, able to manage most issues of triangulation, and collaborative with professors and other student most of the time, however struggles with being consistent.	Student struggles with setting clear boundaries, at times is triangulated into relationship, and/or has difficulty being collaborative with professors and students	Student does not set clear boundaries, frequently is triangulated into relationships, and does not work collaboratively with professors or students
			5	4	3	2	1
#9	CC 5.4.2 SLO 1, 2 & 3	Monitor attitudes, personal well-being, personal issues, and personal problems to ensure they do not impact the therapy process adversely or	Student displays a sophisticated and original intrapersonal perspective and is able to continuously monitor her/his attitudes, personal well-being, personal issues, and personal problems to ensure they do not impact the learning	Student displays a clear intrapersonal perspective and is able to monitor her/his attitude, personal well-being, personal issues, and personal problems to ensure they do	Student displays competent, intrapersonal perspective with developing ability to monitor her/his attitude, personal well-being, personal issues, and personal problems.	Student has difficulty articulating their intrapersonal perspective and/or has limited ability to monitor her/his attitude, personal well-being, personal issues, and personal problems, which at times lead to them impacting the learning environment in a negative way.	Student is unaware of their intrapersonal perspective and has little to no ability to monitor her/his attitude, personal well-being, personal issues, and personal problems, which

		create vulnerability for misconduct	environment	not impact the learning environment			lead to them impacting the learning environment in an unproductive way.
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			5	4	3	2	1
#10		Overall Student Progress	Excellent	Above Average	Average	Below Average	Poor

Score: _____ Performing Well or _____ Needs Attention

STRENGTHS

WEAKNESSES

Signature of Program Director

Signature of Student

Signature of Advisor