

# Self-Study Training Resource

## Orientation to Contents and Use

The purpose of this Self-Study Training Resource is to support programs with completing a successful Self-Study submission. One goal of COAMFTE Standards Version 12.5 is to streamline the compliance review process through clear expectations of evidence and avoidance of redundant information. The new Self-Study Template reflects this priority by providing required report tables for each key element. These tables reduce narrative while clarifying both specific content and supporting evidence needed to demonstrate the minimum threshold of accreditation compliance: a ‘show more – say less’ framework.

The Self-Study Training Resource is built on the actual Self-Study Template used by programs to submit program information for Initial and Renewal of Accreditation Review. The full text for Version 12.5’s four standards and 18 key elements is provided, including the required report tables for each key element. This resource also incorporates two new training components:

### 1. *Examples of Supporting Evidence:*

Following the Standard’s summary overview from the Version 12.5 text, charts are presented with **Examples of Supporting Evidence** for each of the Standard’s key elements. Included in the charts are descriptions of each key element’s specific compliance areas, common sources of evidence from a program’s current resources, and examples of supporting evidence presented for compliance review.

#### *Sources of evidence to support key element compliance*

Compliance evidence comes from existing sources within institutions and programs that are used to organize, implement, and review all that makes MFT professional education happen. This myriad of details brings ongoing validity and reliability to program quality across cohorts and leadership changes. Existing compliance evidence typically comes from seven areas of program record:

1. Institutional and program information displayed to the public
2. Documents for ongoing program administrative policies and procedures such as written guidelines or protocols, or sections from manuals or handbooks
3. Documents that verify program leadership, faculty and program clinical supervisor credentials and their respective job descriptions and evaluations
4. Documents that demonstrate the program’s curriculum and practice components and their review processes
5. Program data collected and used for review of graduate achievement, student learning outcomes, environmental supports, faculty/supervisor effectiveness, and curriculum review, etc. typically for the purpose of program improvement
6. Demonstration of engagement with the program’s identified Communities of Interest as described across multiple key elements
7. Documentation of program decisions and resulting actions such as identified events in meeting minutes or summary reports

### 2. *Self-Study Template Sample Responses:*

Each of the 18 Key Element Report Tables from the actual Self-Study Template is displayed with **Self-Study Template Sample Responses**. These program responses are based on fictional information from multiple fictional institutions including all accredited program types (masters, doctoral, PDI). Please note that none of the sample responses are intended as a COAMFTE preferred program action. They are simply offered to illustrate possible compliance actions.

COAMFTE recommends that programs use the Self-Study Training Resource at three important points in the accreditation process:

1. During initial study and implementation of Standards Version 12.5,
2. Early in the process of preparing the Version 12.5 Self-Study for either initial accreditation or renewal of accreditation
3. Throughout the writing and assembly of supporting evidence for the Self-Study Template's multiple drafts.

The following areas are addressed as important program considerations across this larger timeline.

### ***Organization of information in appendices for ease of use***

The Self-Study's collection of compliance evidence is central to a successful accreditation review. The program's Self-Study appendices serve the crucial role of organizing this evidence for consideration by Accreditation Reviewers. Two program actions are worth careful attention for providing clarity and ease of access in this process:

1. Organization by topic – Evidence is commonly grouped together by relevant topic, such as Assessment Procedures; Program Surveys; Student Concerns/Complaints; Faculty and Supervisor Credentials and Evaluation; Curriculum Information; Clinical Training; Assessment Data and Review; Communities of Interest Engagement; Faculty Meeting Minutes, etc. A second way of organizing evidence is by the V12.5 Standards themselves, e.g., Appendix A: Standard I Evidence. Programs also successfully use combinations of both as well as other innovations.
2. Focus and access – Appendices should support the program's focused attention to specific compliance topics stated in key elements. Whenever possible, labeling supportive evidence with key element compliance-related language helps assure that reviewers locate and connect the program's response to specific key element requirements. Additional care to provide specific page numbers when needed and/or hotlinks to evidence also is recommended. Program use of information that is off-topic from Version 12.5 requirements may cloud compliance review and should be avoided unless offered for contextual purposes.

### ***Meeting minimum threshold of accreditation compliance***

The minimum threshold of compliance serves as a foundation for public trust and program quality upon which further program innovation and excellence may be pursued. The Self-Study Training Resource attempts to show evidence that meets COAMFTE's minimum threshold of compliance according to the following criteria:

- The specific Version 12.5 content or activity as stated in the key element is directly addressed and satisfied.
- Version 12.5 Glossary definitions of key terms included in the key element are satisfied.
- Relevant evidence in support of the program's reported activity is provided from program documents.
- The program response is consistent with other related information addressed elsewhere in the self-study.

A program's response that meets these expectations is likely to be deemed as "sufficient" during the review process. When gaps or uncertainty in any area occurs, the program's response is likely to be deemed as "insufficient" and the specific issue(s) detailed for further program attention.

## Standard I: Outcome-Based Education Framework and Environmental Support

Programs use an **outcome-based education** philosophy where the focus is on advancing program quality through ongoing assessment of **graduate achievement**, student achievement, and environmental supports. Student achievement is learning and the development of specific competencies measured against program **goals**. Programs assess the effectiveness of key environmental supports for students, including how it successfully maintains an **inclusive and diverse learning environment**, and responsiveness for all learners.

**Communities of interest**, identified by the program, provide input into review processes and **student learning outcomes** and are informed about key changes based on the review process.

Please Note: Assessment data for the key elements in Standard I are presented in Standard IV.

### Standard I: Examples of Supporting Evidence

Standard I Compliance by Key Element (KE)	Program Sources of Evidence	Examples of Supporting Evidence
Outcome-based education (OBE) framework (I-A)	<ul style="list-style-type: none"> <li>▪ Public information</li> <li>▪ Administrative docs</li> <li>▪ COI engagement</li> </ul>	<ul style="list-style-type: none"> <li>➤ Program mission, goals, student learning outcomes (SLOs) presented on program website or in program manuals or other documents used with students and communities of interest (COI)</li> </ul>
COAMFTE Developmental Competency Components (I-A)	<ul style="list-style-type: none"> <li>▪ Public information</li> <li>▪ Administrative docs</li> <li>▪ COI engagement</li> </ul>	<ul style="list-style-type: none"> <li>➤ Description presented on program website or in program manuals or other documents used with students and COIs</li> </ul>
Ongoing assessment of graduate achievement (I-A)	<ul style="list-style-type: none"> <li>▪ Public information</li> <li>▪ Administrative docs</li> <li>▪ COI engagement</li> </ul>	<ul style="list-style-type: none"> <li>➤ Public display of Graduate Achievement Data (GAD) via the required GAD Table plus other optional identified graduate data of program choice</li> </ul>
Measures of competency-based student achievement (I-A)	<ul style="list-style-type: none"> <li>▪ Administrative docs</li> <li>▪ COI engagement</li> </ul>	<ul style="list-style-type: none"> <li>➤ Description of competency-based assessment measure for each (SLO);</li> <li>➤ Identified target compliance threshold for each SLO, in program manuals, assessment policies, or other documents used with students and COIs</li> </ul>
Assessment Plan for SLOs implementing measures & targets (I-B)	<ul style="list-style-type: none"> <li>▪ Administrative docs</li> <li>▪ COI engagement</li> </ul>	<ul style="list-style-type: none"> <li>➤ Outline of required assessment plan details stated in program manuals, assessment procedures document, or other program written resources</li> </ul>
Environmental supports for students (I-C)	<ul style="list-style-type: none"> <li>▪ Public information</li> <li>▪ Administrative docs</li> <li>▪ COI engagement</li> </ul>	<ul style="list-style-type: none"> <li>➤ Published institutional and program resources for supporting student success</li> <li>➤ Outline of required plan for monitoring environmental supports identified in KE I-C stated in program manuals, assessment procedures document, or other program written resources</li> <li>➤ Assessment tools used such as surveys</li> <li>➤ Program and institutional policies and procedures regarding student concerns, complaints, grievances and use of technology in institutional resources or program manuals</li> <li>➤ Program and institutional policies outlining required technology information/security</li> </ul>
Identified Communities of Interest input (I-A; I-B)	<ul style="list-style-type: none"> <li>▪ Administrative docs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Program COIs presented on program website or in program manuals or other documents used with students and COIs</li> <li>➤ Outline of COI input processes identified in KE I-B stated in program manuals, assessment procedures document, or other program written resources</li> </ul>

**Standard I: Table Response Samples**

**Key Element I-A: Outcome-Based Education Framework**

The program has an overall outcome-based education framework that includes the following:

- A program **mission** generally consistent with the program’s larger institutional setting.
- Specific program goals that implement the program’s mission and promote the **COAMFTE Developmental Competency Components**.
- Student learning outcomes (SLOs) that set clearly defined **targets** for measuring specific student **competencies** and achievement of program goals. Note: Please refer to the glossary definition of **assessment measure**.
- Annual collection and publishing of **graduate achievement** required by type of program (masters, doctoral, post-degree).
- Selected **communities of interest** (COI’s) who are direct stakeholders in the program’s outcomes, effectiveness, and improvement.
- Availability of the program’s outcome-based education framework to communities of interest and others selected by the program.

**INTERPRETATION GUIDE**

**Rubric for Response**

- Identify program mission consistent with institutional mission.
- State program goals that implement the program mission and promote COAMFTE Developmental Competency Components.
- Identify measurable student learning outcomes and link the SLOs to the appropriate program goal (each SLO should be used for one only program goal).
- Identify assessment measures for each SLO and identify the program targets for each measure (implement glossary definition of assessment measure and target).
- Confirm that Graduate Achievement Data (GAD) are collected and published.
- Identify communities of interest and their relevance to program improvement.

**Key Element I-A: Outcome-Based Education (OBE) Framework for Student Achievement**

**Enter Institutional Mission:**

**Enter Program Mission:** Program ABC’s mission is to equip its students with the full range of competencies necessary for entry-level practice in the profession of marriage and family therapy (MFT).

**Provide narrative description of Program Mission alignment with Institutional Mission:** Institution ABC is dedicated to training an array of professional fields. It is committed to a competency-based framework that is focused on the specific expectations of stakeholders. This aligns with Program ABC’s mission to provide a competency-based educational experience for preparation to be a licensed marriage and family therapist.

**COAMFTE  
Developmental  
Competency  
Components**

Program Goals	List Student Learning Outcomes (each SLO may be used with one Goal only)	Target and Measure	Link to document used to Measure	Knowledge	Practice	Diversity	Ethics	Research
<b>Enter Program Goal #1</b>	<b>Students will demonstrate:</b>							
Assure knowledge of the MFT profession's foundational theories and models for relationship and individual functioning	SLO #1 - Knowledge of the relational/systemic approach's historical development including classic MFT theories	MFT Foundations Project (Student Portfolio) - Minimum rubric score of 7 (of 10) by 80% of cohort	Student Handbook, pp. 26-28; Project document in <a href="#">Appendix A: Standard I Evidence, pp. 2-4</a>	X				
	SLO # 2 - Knowledge of later-developed and emerging theory-based approaches to supporting individual and relationship system functioning	Survey of Current & Emerging Clinical Approaches (Student Portfolio) - Minimum rubric score of 7 (of 10) by 80% of cohort	Student Handbook, pp. 26-28; Project document in <a href="#">Appendix A: Standard I Evidence, pp. 5-6</a>	X				
<b>Enter Program Goal #2</b>								
Develop entry-level skills for the clinical practice of Marriage and Family Therapy including individual, relationship, and group therapies	SLO # 3 - Ability to facilitate therapeutic alliance and interaction with relationship systems, individuals, and groups	Therapeutic Relationship Section, Supervisor Evaluation - Minimum rubric score of 4 (of 6) by 80% of cohort in Internship Final Evaluation	Student Handbook, pp. 26-28; Supervisor Eval in <a href="#">Appendix A: Standard I Evidence, pp. 7</a>		X			
	SLO # 4 - Ability to design, engage, and complete a course of treatment informed by MFT professional model(s), system, and individual diagnoses and treatment planning	a. Clinical Practice Sections, Supervisor Evaluation - Minimum rubric score of 4 (of 6) by 80% of cohort in Internship Final Evaluation; b. Personal Theory and Practice of Therapy Project (Capstone) - Minimum rubric score of 7 (of 10) by 80% of cohort	a. Student Handbook, pp. 26-28; Supervisor Eval in <a href="#">Appendix A: Standard I Evidence, pp. 8-10</a> b. Student Handbook pp. 26-28; Project document in <a href="#">Appendix A: Standard I Evidence, pp. 11-12</a>		X			

<b>Enter Program Goal #3</b>								
Establish professional identity through ethical, cultural, and research-informed competencies	SLO # 5 - Ability to identify and apply professional standards for ethical, cultural, and research-informed competencies expected of the novice marriage and family therapist	Analysis of Professional Standards Project (Capstone) - Minimum rubric score of 7 (of 10) by 80% of cohort	Student Handbook pp. 26-28; Project document in <a href="#">Appendix A: Standard I Evidence, pp. 13-14</a>			X	X	X
	SLO #							
<b>Enter Program Goal #4</b>								
	SLO #							
NA	SLO #							

### Graduate Achievement Data (GAD)

<b>Provide the link to a completed COAMFTE required Graduate Achievement Data table</b>	<b>[Link to the GAD table – NOT the program website landing page]</b>
---	---

### Narrative Description of the Program's Communities of Interest (COI)

<b>List Communities of Interest</b>	<b>Communities of Interest Description (e.g., number, location, relevant characteristics)</b>
Current students	Our campus-based program admits a cohort of 12-15 annually
Noncore faculty & supervisors	Four instructional faculty and two program clinical supervisors
Community site supervisors	8–10 placement site supervisors (not program clinical supervisors)
Program graduates	Approximately 300 graduates as of May 2021
	<b>See COI Information Table in <a href="#">Appendix A: Standard I Evidence, pp. 15</a></b>

### Accessibility of Outcome-Based Education Framework (OBE)

<b>Provide the link to where the Outcome-based Education (OBE) framework is accessible to your Communities of Interest</b>	Mission, Goals, SLOs on website LINK Student Handbook, p.6 LINK
--	--

## Key Element I-B: Plan for Assessing Outcome-Based Educational Achievement

The program has an overall assessment plan for collecting, reviewing, and acting on the achievement data identified in Key Element I-A for the purpose of program improvement. Data-informed review actions may address improvements to program mission, goals, student learning outcomes measures and targets, communities of interest inclusion, and review processes/policies.

The outcome-based education assessment plan includes the following:

- A description of how and by whom assessment data for student learning outcomes and graduate achievement are collected, reviewed, and acted on as needed.
- Mechanisms for assuring that selected communities of interest input are included in the review process.
- An **assessment timeline** that identifies expected completion of assessment review cycles.
- A description of how and by whom the program's outcome-based education framework and its assessment plan are reviewed for improvement actions as needed.

Please note: Graduate achievement data are presented and discussed in Key Element IV-A. Student learning outcome data are presented and discussed in Key Element IV-B.

### INTERPRETATION GUIDE

#### Rubric for Response

- Describe the process and assessment timeline for collecting, aggregating, and preparing each program's student learning outcome and required graduate achievement data for review.
- Describe the process for incorporating identified communities of interest input into review of achievement data and communication about outcomes.
- Describe how the program reviews and revises the program's outcome-based education framework and assessment plan.

Key Element I-B: Outcomes Based Education (OBE) Framework for Assessing Program Achievement				
Program Achievement Component	Data collection and preparation for review: who and how	Data review and action: who and how	COI input into review process: who and how	Calendar for review cycle completion
Program Goal #1 <b>NOTE: The assessment plan information is the same for all goals and student learning outcomes. See Administrative Manual, Assessment Plan section (29-30) in <a href="#">Appendix A: Standard I Evidence, pp 16-17.</a></b>				
SLO #	Program support staff aggregate data from SLO measure(s) into spreadsheet	Core faculty analyze data at Spring MFT Faculty Retreat for meeting competency targets and take action as needed	Students: Fall Program Update with Program Director Noncore faculty/supervisors: Fall Faculty Meeting and PD email update Community Site Supervisors: Spring Community Advisory Group luncheon Graduates: PD Fall Newsletter	Spring semester, even numbered years

SLO #				
Program Goal #2				
SLO #				
SLO #				
Program Goal #3				
SLO #				
Program Goal #4				
SLO #				
<b>Graduate Achievement: NOTE: See Administrative Manual, Graduate Achievement Data section (31-32) in <a href="#">Appendix A: Standard I Evidence, pp. 18</a></b>				
Graduation rate	Program support staff confirm program completion data from Registrar's office	Core faculty analyze data at Spring MFT Faculty Retreat and take action as needed	Same as Goal 1	Same
Exam pass rate	Program support staff gather alumni reports from Annual Graduate Survey	Core faculty analyze benchmark data at Spring MFT Faculty Retreat and take action as needed	Same as Goal 1	Same
Job placement rate	Same as for Exam Pass Rate	Core faculty analyze data at Spring MFT Faculty Retreat and take action as needed	Same as Goal 1	Same
<b>Evaluation of OBE framework and its assessment plan NOTE: See Administrative Manual, Outcome-Based Education Framework and Assessment Review section (33) in Appendix A: Standard I Evidence, pp 17-18</b>	Program support staff compile data from two completed assessment cycles (four-year timeframe)	Program Director convenes OBE Review Committee of core-faculty and COI representatives to review data and draft recommendations for program action	COI groups informed following end of process through mechanisms identified above	Fall semester every four years
<b>If needed, provide narrative and/or contextual information to clarify the assessment plan for Student Learning Outcome data:</b>				
<b>If needed, provide narrative and/or contextual information to clarify the assessment plan for Graduate Achievement data:</b>				
<b>If needed, provide narrative and/or contextual information to clarify the review of the OBE framework and its Assessment Plan:</b>				



## Key Element I-C: Plan for Assessing Environmental Supports

Environmental supports are institutional and program resources that contribute to successful student achievement, program quality and an inclusive and diverse learning environment. The program has a plan for maintaining effective environmental supports through a process of review that includes collection of feedback from identified communities of interest, program review, focused corrective action/advocacy where needed, and input to and from institutional leaders.

The plan for reviewing environmental supports includes the following areas:

- How the program promotes an **inclusive and diverse learning environment**.
- How the program follows **published policies** for receiving, reviewing, and responding to **complaints and grievances**, and student concerns.
- How the program monitors other environmental supports including:
  - fiscal and **physical resources**
  - **technology**
  - **instructional and clinical resources**
  - **academic resources and student support services**
- How the program complies with institutional policies and procedures concerning the use of technology, including policies on disaster planning and recovery of information, and responses to illegal or inappropriate uses of technology systems and resources.
- How the program ensures the reliability of technology systems, the integrity and security of data, and safeguards student and client information in accordance with applicable regulations and guidelines.

Please note: Results of this review process are reported and discussed in Key Element IV-C.

### INTERPRETATION GUIDE

#### Rubric for Response

- Identify environmental resources and supports in the program.
- Describe the process of assessing, reviewing, and responding to feedback about the program's inclusive and diverse learning environment, to student concerns and for monitoring environmental supports.
- Describe how the program receives, reviews, and responds to formal complaints and grievances and program experiences noted within in the past 5 years.
- Include links for policies that ensure technological resources are secure and confidential, according to state, provincial and federal guidelines.

#### Key Element I-C: Identify Environmental Resources and Supports

Environmental Support	<b>Briefly identify the environmental resources and supports in the program. (Please refer to the glossary definition for each resource.)</b>
Physical Resources	Four classrooms, student lounge, campus clinic, office space for core-faculty, administrative support staff and graduate assistants

Technology Resources	Institutional allocation of computers, full-campus enterprise system, learning management system and online library access; Program software for clinic records, and student portfolio
Instructional Resources	Institutional Office of Curriculum Design and Instructional Support
Clinical Resources (including teletherapy and virtual supervision as applicable)	Campus Clinic with 6 therapy rooms (three with one-way mirrors, all with video and teletherapy access), documentation room, electronic records software, secure video software for virtual supervision
Student Academic Resources	Institutional Academic Support Center, for tutoring/mentoring with academic skills
Student Support Services	Office of Student Support Services

**Key Element I-C: Plan for Assessing Environmental Resources and Supports**

Resources	Identified COI (COIs) engaged for input	Mechanism used to collect assessment data or feedback	Data collection process	Data review and action	Program feedback/advocacy to COIs
-----------	---	---	-------------------------	------------------------	-----------------------------------

**NOTE: See Administrative Manual, Learning Environment Assessment Plan section (31-33) and End of Year Survey in [Appendix A: Standard I Evidence, pp. 19-21](#)**

Inclusive and Diverse Learning Environment	Current students, recent alumni, and noncore faculty & supervisors	Student and Graduate End of Year Survey (current students and recent alumni), questions 5, 6, 7 on inclusive learning environment	Program admin emails survey before spring break and collects and aggregates data.	Core faculty review data during final Spring Faculty Meeting and identified revision process as needed; Final Spring PD Meeting with dean with applicable suggestions for change	Students: Fall Program Update with Program Director; Noncore faculty/supervisors: Fall Faculty Meeting and PD email update; Graduates: PD Fall Newsletter
--	--	---	---	--	---

Physical Resources	Current students, recent alumni, and Noncore faculty & supervisors	End of Year Survey (current students and recent alumni), questions 1 & 2 on physical resources	same	same	same
Technology Resources	Current students, recent alumni, and noncore faculty & supervisors	End of Year Survey (current students and recent alumni), questions 3 & 4, on technology resources	same	same	same
Instructional Resources	Current students, recent alumni, and noncore faculty & supervisors	Student and Graduate End of Year Survey (current students and recent alumni), questions 8 & 9 on instructional resources	same	same	same
Clinical Resources (including teletherapy and virtual supervision as applicable)	Current students, recent alumni, and noncore faculty & supervisors	End of Year Survey (current students and recent alumni), questions 10 & 11 on clinical resources	same	same	same
Student Academic Resources	Current students, recent alumni, and noncore faculty & supervisors	End of Year Survey (current students and recent alumni), questions 12 & 13 on student academic resources	same	same	same
Student Support Services	Current students, recent alumni, and noncore faculty & supervisors	End of Year Survey (current students and recent alumni), questions 14 & 15 on student support services	same	same	same

**If needed, provide narrative and/or contextual information to clarify the assessment plan for Environmental Supports:**

**Key Element I-C: Policies and Procedures related to Environmental Supports**

Policy	Provide link to the policies/procedures related to	Evidence that ensures policies are being followed	Brief description of concern, complaint, or grievance	Program action and resolution
--------	--	---	---	-------------------------------

**NOTE: See Administrative Manual, Student Concerns, Complaint/Grievances section (34-36) in [Appendix A: Standard I Evidence, pp. 22-24](#) for details reported below**

Student Concerns	Policy of reporting student concerns in Student Handbook, p. 45	Concern log and action steps	Advisor not available and unresponsive	Advisor put on remediation plan
Formal Grievances	Institutional Policy on student formal complaints/grievance in University Catalog, p. 67	Grievance summary and dates of communications	Title IX Grievance	Legal Investigation in process
Institutional Policies and Procedures for Technology	Technology Policy on Institution website, LINK	Students complete annual technology policy agreement at orientation; Supervisors evaluate students using the End of Semester Student Feedback Form, items 4-6 on technology use		
Program Policies and Procedures on Use of Technology	HIPAA and Technology Policy and Procedures in Student Handbook, p. 7	Students complete annual technology policy agreement at orientation; Supervisors evaluate students using the End of Semester Student Feedback Form, items 4-6 on technology use		

**If needed, provide narrative and/or contextual information to clarify the policies and procedures related to Environmental Supports:**

## Standard II – Program Leadership, Program Faculty, and Program Clinical Supervisors

**Program faculty** are identified as **core faculty** and **non-core faculty**. Program faculty and **program clinical supervisors** are qualified to provide the education and **MFT relational/systemic supervision** needed for the program to meet its commitments, including those for student learning outcomes and graduate achievement data defined in Standard I. The roles of the **program director**, program faculty, program clinical supervisors and others in program leadership positions are clearly defined and align with the program's goals. The program demonstrates that it monitors and reviews program faculty and program clinical supervisor effectiveness as a means of ensuring that students are able to meet student learning outcomes and the program can meet its goals.

### Standard II: Examples of Supporting Evidence

Standard II Compliance by Key Element (KE)	Program Sources of Evidence	Examples of Supporting Evidence
Qualified program leader(s) (II-A)	<ul style="list-style-type: none"> <li>▪ Program personnel documentation</li> </ul>	<ul style="list-style-type: none"> <li>➤ Role descriptions of program director and other leaders stated in program or institutional sources, e.g., program manuals or institutional documents</li> </ul>
Program leader(s) effectiveness review (II-A)	<ul style="list-style-type: none"> <li>▪ Program personnel documentation</li> <li>▪ Administrative docs</li> <li>▪ COI Engagement</li> </ul>	<ul style="list-style-type: none"> <li>➤ Description of the review process in institutional or program resource, e.g., program manuals or institutional documents</li> <li>➤ Review tools used such as surveys</li> <li>➤ Verification of completed review process via data, minutes, or institutional report, etc.</li> </ul>
Program faculty and clinical supervisor qualifications (II-B)	<ul style="list-style-type: none"> <li>▪ Program personnel documentation</li> </ul>	<ul style="list-style-type: none"> <li>➤ Program faculty identified as core faculty and non-core faculty</li> <li>➤ Program faculty credentials demonstrating qualifications to meet specific program responsibilities, e.g., vita, license, supervisor training, specialization, etc.</li> </ul>
Distinction between instructional and supervisor roles (II-B)	<ul style="list-style-type: none"> <li>▪ Program personnel documentation</li> <li>▪ Administrative docs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Description of role definition and responsibilities that separate curriculum instruction from supervision of clinical students within the application component as stated in institutional or program position descriptions, administrative manuals or resources, etc.</li> </ul>
Program faculty position descriptions (II-B)	<ul style="list-style-type: none"> <li>▪ Program personnel documentation</li> <li>▪ Administrative docs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Position descriptions provided to core and non-core faculty with required info, demonstrated by email, faculty minutes, institutional report, etc.</li> </ul>
Core faculty as program clinical supervisors (II-B)	<ul style="list-style-type: none"> <li>▪ Program personnel documentation</li> </ul>	<ul style="list-style-type: none"> <li>➤ Core faculty credentials demonstrate that at least 50% qualify as program clinical supervisors including the program leader(s)</li> </ul>
Core faculty and clinical supervisor sufficiency (II-C)	<ul style="list-style-type: none"> <li>▪ Public information</li> <li>▪ Program personnel documentation</li> <li>▪ Administrative docs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Core faculty-to-student and clinical program supervisor-to-student ratios supported by explanation and/or institutional input, e.g., FTE info from institution's IPEDs data or program records</li> <li>➤ For alternative ratio option, description of sufficiency criteria, evaluation mechanisms (e.g., surveys), review process, and revisions as needed, with documentation from program manuals or procedures, eval data, review minutes, or institutional report</li> </ul>
Program faculty evaluation and	<ul style="list-style-type: none"> <li>▪ Program personnel documentation</li> </ul>	<ul style="list-style-type: none"> <li>➤ Description of program's core and non-core faculty evaluation process in institutional or program resource, e.g., program manuals or institutional documents</li> </ul>

effectiveness (II-D)	<ul style="list-style-type: none"> <li>▪ Administrative docs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Review tools used such as surveys, etc.</li> <li>➤ Verification of completed review process via data, minutes, or institutional report, etc.</li> </ul>
Clinical program supervisor evaluation and effectiveness (II-E)	<ul style="list-style-type: none"> <li>▪ Program personnel documentation</li> <li>▪ Administrative docs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Description of program’s clinical program supervisor evaluation process in institutional or program resource, e.g., program manuals or institutional documents</li> <li>➤ Review tools used such as surveys, etc.</li> <li>➤ Verification of completed review process via data, minutes, or institutional report, etc.</li> </ul>

**Standard II: Table Response Samples**

**Key Element II-A: Program Leadership Qualifications and Effectiveness**

Direction and oversight of the program occurs continuously throughout the year (12 months). Program leadership is qualified, assigned ultimate responsibility for the administration of the program, and meets the following criteria:

- Is a core faculty member who demonstrates **professional identity as a Marriage and Family Therapist**.
- Is responsible for oversight of the outcome-based education framework, assessment activities, curriculum, clinical training program, facilities, services, and the maintenance and enhancement of the program’s quality.
- In master’s degree programs, has or shares leadership responsibilities for the **foundational curriculum** and **foundational practice component** and is an **AAMFT Approved Supervisor or Supervisor Candidate** (Supervisor Candidate who assumes this role must become an AAMFT Approved Supervisor within three years.).
- In post-degree programs offering the foundational curriculum or any specialized clinical curriculum, is an AAMFT Approved Supervisor or Supervisor Candidate. (Supervisor Candidate who assumes this role must become an AAMFT Approved Supervisor within three years.).
- In doctoral degree programs offering the advanced curriculum, is an AAMFT Approved Supervisor unless the program has an AAMFT Approved Supervisor or Supervisor Candidate on the core faculty.
- Participates in an established effectiveness review that includes input from communities of interest and as needed, plans to support further leadership development and enhanced effectiveness.

**INTERPRETATION GUIDE**

**Rubric for Response**

- Demonstrate that the program leader is a core faculty member who demonstrates professional identity as a Marriage and Family Therapist.
- Describe the role of program leader(s) who are responsible for program administration.
- Describe oversight responsibilities for curriculum, clinical training, facilities, services, and maintenance and enhancement of program’s quality.
- Describe the evaluative process and measures used to determine the effectiveness of program leadership.
- Provide aggregated data that demonstrates the effectiveness of program leadership.

## Key Element II-A: Program Leadership Qualifications and Effectiveness

### Program Leadership Qualifications:

1. Provide evidence of required qualifications as directed in Key Element II-B
2. Indicate Status as an AAMFT Approved Supervisor or Supervisor Candidate

Name	Title	AAMFT Approved Supervisor or Candidate
Virginia Satir	Program Director	No

**In doctoral programs with a Program Director that is not an AAMFT Approved Supervisor or Candidate, please provide name of the core faculty member who has the AAMFT Approved Supervisor credential:**

Carl Rogers

**If needed, provide narrative and/or contextual information to clarify the Program Director's qualifications / credentials:**

Not applicable

### Program Oversight Responsibilities

Name	Title	OBE Framework	Assessment Activity	Curriculum	Clinical training	Facilities	Services	Program Maintenance	Program Enhancement
Virginia Satir	Program Director	x	x	x		x	x	x	x

**Job Description (provide link/location):** See [Appendix A](#): Program Director Job Description

**Year-round program direction (provide link/location to evidence):** See [Appendix A](#): Program Director Job Description

**If needed, provide contextual information:**

Carl Rogers is the Clinical Training Director and has oversight over the program's clinical training component. See [Appendix A](#): Clinical Director Job Description

### Program Director Evaluation and Effectiveness

<b>Identified COIs engaged for input</b>	Core program faculty, students, and department chair
<b>Mechanism(s) used to collect evaluation data/feedback</b>	Annual Survey See <a href="#">Appendix J</a> for example survey.

<b>Data collection process: who, how, when</b>	The Program Director sends out an anonymous Qualtrics survey link during the summer term.
<b>Evidence of review of data</b>	See <a href="#">Appendix B</a> : Quarterly data review meeting minutes
<b>Actions to enhance Program Director effectiveness</b>	Advocating to administration for increased workload release and graduate student assistant to help with workload. See <a href="#">Appendix B</a> : Quarterly data review meeting minutes
<b>If needed, provide narrative and/or contextual information to clarify the evaluation of the Program Director's effectiveness:</b>	
Not applicable.	

## Key Element II-B: Qualifications of Program Faculty and Program Clinical Supervisors

**Program faculty** and **program clinical supervisors** who contribute to the program's curriculum and application components are qualified to fulfill their specific roles. Qualifications and roles are identified in the context of the program's institution and congruent with the program's goals.

- All program faculty members and program clinical supervisors are academically, professionally, and experientially qualified to fulfill their specific program responsibilities.
- Program faculty and program clinical supervisors have expertise in their area(s) of teaching and/or supervisory responsibility and knowledge of their instructional modality (e.g., distance learning) or method of **MFT relational/systemic supervision** (e.g., teletherapy, live observation).
- Program clinical supervisor roles are distinguished from instructional faculty roles and consistent with the program's application component.
- All program faculty receive position descriptions describing their responsibilities, required qualifications and institutional and program expectations for scholarship, teaching, research, MFT relational/systemic supervision, practice, and/or service.
- Fifty percent or more of core faculty, including the program leader(s) are qualified to provide MFT relational/systemic supervision as a program clinical supervisor.

### INTERPRETATION GUIDE

#### Rubric for Response

- Credentials and experience that qualify program faculty to train MFT students.
- Program faculty contributions to the MFT Profession.
- Credentials that qualify core faculty to provide MFT relational/systemic supervision.
- Describe how the MFT program core faculty are clearly identified to communities of interest.



## Key Element II-B: Qualifications of Program Faculty

### Program Faculty Credentials, Qualifications & Experience to train MFTs

Role				Professional MFT Identity				Contributions to the MFT Profession					
Name	Core Faculty	Non-core Faculty	What percentage of their assigned role is specific to the MFT program?	LMFT	Relationally-Focused MFT Professional Membership	MFT Specific Advanced Credentials	Graduate from COAMFTE program	Research	Teaching/Training	Leadership	Scholarship	Practice	Service
Virginia Satir	X		100%	X	X	PhD in MFT	X	X	X	X	X		X
Carl Rogers	X		100%	X	X	AAMFT Approved Supervisor	X		X	X	X		X
Cloe Madanes	X		50%			Certified EFT Practitioner		X	X	X	X	X	
Salvador Minuchin		X		X		AAMFT Approved Supervisor	X		X			X	
<b>What percentage of core faculty demonstrate qualifications to provide relational/systemic supervision as a program clinical supervisor?</b>							50%						
<b>Provide location/link/page #s of evidence/documentation of core and non-core program faculty qualifications and knowledge of instructional modality:</b>													
Faculty CVs See <a href="#">Appendix C</a> : Faculty CVs		MFT Licenses See <a href="#">Appendix D</a> : Faculty licenses					Position Descriptions See <a href="#">Appendix E</a> : Faculty position descriptions						
<b>Describe how the MFT program core faculty share responsibility for the creation, evaluation, revision, and maintenance of the program's outcome-based education framework, curriculum, policies, and procedures.</b>													
Curriculum review meetings held annually for faculty to review and maintain program's outcome-based education framework, policies, and procedures. See <a href="#">Appendix F</a> : Meeting minutes													

<b>Describe how the program core faculty are clearly identified to their Communities of Interest.</b>
Program core faculty are identified in the Program Handbook, which is publicly accessible on the program website. See <a href="#">Appendix G</a> : Program Handbook.
<b>If needed, provide contextual information:</b>
Cloe Madanes splits her faculty appointment with Child and Family Development Program and the MFT program.

**Key Element II-B: Qualifications of Program Clinical Supervisors**

**Program Clinical Supervisor Credentials, Qualifications & Experience to train MFTs**

MFT Relational Supervision Training					Professional MFT Identity			Contributions to the MFT Profession					
Program Clinical Supervisor Name	Graduate Course (3 semester/ credit hrs)	Postgraduate Professional Education (30 hrs)	State Approved Supervisor with relational/systemic training	AAMFT Approved Supervisor or Candidate	Professional Membership	LMFT and/or Advanced Credentials	Graduate from COAMFTE program	Research	Teaching/Training	Leadership	Scholarship	Practice	Service
Carl Rogers	X			X	X	X	X	X	X	X	X		X
Salvador Minuchin		X		X		X	X		X			X	

**Provide location/link/page #s of evidence/documentation of program clinical supervisor training and credentials, and knowledge of their method of MFT relational/systemic supervision:**

Supervisor CVs See <a href="#">Appendix C</a> : Supervisor CVs	Supervisor Credentials See <a href="#">Appendix H</a> : AAMFT Approved Supervisor Credentials
---	--

**Describe how the program clinical supervisor roles are distinguished from instructional faculty roles.**

Program clinical supervisors have specialized credentials in relational/systemic supervision. They are responsible for providing all required clinical supervision of student therapists and oversight of required direct clinical contact hours. Faculty teaching didactic courses provide instruction to students in accordance with the objectives listed on the syllabus. See [Appendix E](#): Faculty position descriptions

**If needed, provide contextual information:**  
Not applicable.

## Key Element II-C: Core Faculty and Program Clinical Supervisor Sufficiency

The core faculty and program clinical supervisors must be sufficient to implement the program's outcome-based education framework (Standard I), curriculum instruction, and application component.

- **Core faculty** sufficiency is demonstrated by
  - a core faculty-to-student FTE ratio of 1:15, OR
  - as an alternative, the program may designate and meet a core faculty-to-student FTE ratio that the program demonstrates to be sufficient to support core faculty responsibilities and institutional and program expectations as reported in Key Element II-B. The program must define sufficiency criteria that support the alternative ratio and demonstrate how these criteria are evaluated, reviewed, and revised as needed. Non-core faculty may be included in this alternative ratio if the program demonstrates defined and ongoing non-core faculty contributions that support core faculty areas of responsibility beyond course instruction and/or clinical supervision.
- The program must have a sufficient number of **program clinical supervisors** to support the program's application component in Key Element III-C, as demonstrated by a ratio the program determines to be sufficient to meet program responsibilities and expectations for program clinical supervisors.

### INTERPRETATION GUIDE

#### Rubric for Response

- Identify core faculty-student ratio (according to IPEDS).
- If core faculty-student ratio exceeds 1:15, describe how the program defines program faculty sufficiency and how faculty sufficiency criteria are reviewed and revised.
- Describe how the program uses a supervisor-student ratio as a factor in determining a sufficient number of program clinical supervisors, as well as how these are reviewed and revised.

Key Element II-C: Core Faculty and Supervisor Sufficiency	
# of Core Faculty (listed in Key Element II-B)	2.5
# of students considered Full-time Student (IPEDS Glossary: <a href="http://nces.ed.gov/ipeds/glossary/">http://nces.ed.gov/ipeds/glossary/</a> ) Graduate—A student enrolled for 9 or more quarter credits, or 9 or more semester credits, or a student involved in thesis or dissertation preparation that is considered full time by the institution. Doctor's degree - Professional practice — As defined by the institution.	30
Does the program meet a Core Faculty: Full-time Student minimum ratio of 1:15*? (Yes/No) (If the answer is no, complete table below)	Yes

## Key Element II-C: Program Clinical Supervisor Sufficiency

### State the program clinical supervisor to student ratio: 1:8

No more than 8 students can be enrolled in a clinical course section based on Key Element III-C.

### Describe how this ratio is sufficient to meet program responsibilities and expectations:

The program is set up with a cohort model and students complete their clinical portion during the 2nd of two years. Two sections of clinical courses are needed to allow the (on average) 15 students to complete the clinical portion of their program. Therefore, the two program clinical supervisors are sufficient to run two sections of clinical courses.

### If needed, provide contextual information:

Not applicable.

## Key Element II-D: Program Faculty Evaluation and Effectiveness

Program faculty, which includes core faculty and non-core faculty members, meet the expectations of their institutional and program roles. The program reviews program faculty effectiveness and contributions to program quality.

- The program must have an established process for evaluation of the contributions and effectiveness of program faculty as appropriate to each individual faculty member's role.
- The evaluation process must identify who directs the process, the evaluation methods and data used, timeline, and as needed, include a plan to support further development and enhanced effectiveness.
- The program must demonstrate that it completes its program faculty evaluation and effectiveness review process and assures that the results of the evaluation are provided to each program faculty member.

### INTERPRETATION GUIDE

#### Rubric for Response

- Describe the ongoing evaluation process and measures used to determine the effectiveness of faculty contributions to the program.
- Present aggregated data of program faculty effectiveness.

### Key Element II-D: Core and Non-Core Faculty Evaluation and Effectiveness

<b>Timeline / Calendar for review of Program Faculty Effectiveness</b>	At the end of each term, faculty are evaluated for effectiveness in teaching courses, research, and service (based on their faculty position contract) utilizing standardized university benchmarks. Annually, faculty are evaluated for overall teaching effectiveness by the program utilizing a survey.
<b>Identify who directs the process</b>	The program director directs the annual survey on teaching effectiveness. The department chair directs the standardized university assessments.
<b>Methods and data used for evaluation of faculty effectiveness</b>	Survey and standardized assessments See <a href="#">Appendix I</a> for examples.

<b>Evidence of completion of review of data</b>	See the signed letter from the department chair verifying the standardized university assessments data is reviewed. See <a href="#">Appendix I</a> See Quarterly Data Review Meeting minutes specific to review of the annual survey of teaching effectiveness, 6/3/2019. See <a href="#">Appendix F</a> : Meeting minutes
<b>Evidence that results of the faculty evaluation are provided to each program core and non-core faculty member</b>	Aggregated teaching effectiveness survey results are emailed to each faculty member by the program director. See <a href="#">Appendix L</a> for example emails to faculty members. All faculty are provided direct access to the results of the standardized university assessments each term. See <a href="#">Appendix M</a> for university policy.
<b>Revisions / actions taken to enhance faculty effectiveness based on the review</b>	During the fall semester, the department chair provided an example that one faculty member's scores were lower in a specific course, which brought down their average score. Because that faculty member's other class evaluations met the 4/5 target, the department chair met with the faculty member to discuss the course. The department chair created a plan with the faculty member to have the teaching effectiveness department offer support to the faculty member via a live observation of a class session the following term. Results from the summer teaching effectiveness survey were utilized by the program director to provide suggestions regarding course assignments to the department chair the following term.
<b>If needed, provide contextual information:</b>	

## Key Element II-E: Program Clinical Supervisor Evaluation and Effectiveness

**Program clinical supervisors** meet the expectations of their program and professional roles. The program reviews clinical supervisor effectiveness and contributions to program quality.

- The program must have a stated process for evaluation of the program clinical supervisor's contribution and effectiveness appropriate to the supervisor's role.
- The evaluation process must identify who directs the process, the evaluation methods and data used, timeline, and as needed, include a plan to support further development and enhanced effectiveness.
- The program must demonstrate that it completes its program clinical supervisor evaluation and effectiveness review process and assures that the results of the evaluation are provided to each program clinical supervisor.

### INTERPRETATION GUIDE

#### Rubric for Response

- Describe the ongoing evaluative process and measures used to determine the effectiveness of program clinical supervisor's contributions to the program (See glossary for MFT relational/systemic supervision definition).
- Present aggregated data of program clinical supervisor effectiveness.

## Key Element II-E: Program Clinical Supervisor Evaluation and Effectiveness

<b>Timeline / Calendar for review of Program Clinical Supervisor Effectiveness</b>	At the end of each term, program clinical supervisors are evaluated for effectiveness in teaching clinical courses utilizing standardized university benchmarks. At the end of each term, program clinical supervisors are evaluated for effectiveness in supervision by the program utilizing a survey.
<b>Identify who directs the process</b>	The program director directs the survey on supervision effectiveness. The department chair directs the standardized university assessments.
<b>Methods and data used for evaluation of program clinical supervisor effectiveness</b>	Survey and standardized assessments See <a href="#">Appendix I</a> for examples.
<b>Evidence of completion of review of data</b>	See the signed letter from the department chair verifying the standardized university assessment data is reviewed. See Quarterly data review meeting minutes specific to review of the survey of supervisor effectiveness, 12/3/2018, 3/3/2019, 6/3/2019, 9/3/2019. See <a href="#">Appendix F</a> : Meeting minutes
<b>Evidence that results of the supervisor evaluation are provided to each program clinical supervisor</b>	Aggregated supervision effectiveness survey results are emailed to each supervisor by the program director. See <a href="#">Appendix L</a> for example emails to supervisors. All supervisors are provided direct access to the results of the standardized university assessments each term. See <a href="#">Appendix M</a> for university policy.
<b>Revisions / actions taken to enhance supervisor effectiveness based on the review</b>	During the fall semester, the department chair provided an example that one faculty member's scores were lower in a specific clinical course, which brought down their average score. Because that supervisor's other clinical course evaluations met the 4/5 target, the department chair met with the supervisor to discuss the course. The department chair created a plan with the supervisor to create an opportunity for live observation of a supervision session the following term. Results from the supervision effectiveness survey were utilized by the program director to provide suggestions regarding clinical course assignments to the department chair the following term.
<b>If needed, provide narrative and/or contextual information:</b>	

## Standard III: Curriculum

All accredited programs will have a curriculum and an **application component** consistent with the program's mission, goals, and student learning outcomes that substantially reflect the **COAMFTE Developmental Competency Components**. The purpose of the foundational curriculum with its accompanying foundational practice component is to prepare students to practice as MFTs. The advanced curriculum with its **advanced practical experience component** and emphasis on research focuses on two areas of specialization. The type of program along with the program's mission, goals, and student learning outcomes determine specific requirements regarding implementation of the curriculum and the application component.

### Standard III: Examples of Supporting Evidence

Standard III Compliance by Key Element (KE)	Program Sources of Evidence	Examples of Supporting Evidence
(III-A) Curriculum... consistent with program mission, goals, SLOs	<ul style="list-style-type: none"> <li>▪ Public information</li> <li>▪ Administrative docs (OBE Framework)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Curricular design/priorities introduced on program website, program manuals, or other documents used with students and COIs</li> <li>➤ Program SLOs mapped to course offerings as verified in program manuals, course syllabi, or other documents used with students and COIs</li> </ul>
(III-A) Curriculum... reflects Developmental Competency Components	<ul style="list-style-type: none"> <li>▪ Administrative docs</li> <li>▪ Curriculum docs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Developmental competency components introduced on program website, program manuals, or other documents used with students and COIs</li> <li>➤ Developmental competency components mapped to course offerings as verified in program manuals, course syllabi, or other documents used with students and COIs</li> </ul>
(III-A) Additional curricular processes	<ul style="list-style-type: none"> <li>▪ Administrative docs</li> <li>▪ Curriculum docs</li> <li>▪ Program review/action documentation</li> </ul>	<p>Details in program website, program manuals or other documents used with faculty, students and/or COIs regarding:</p> <ul style="list-style-type: none"> <li>➤ rationale for sequencing of curriculum and practice components</li> <li>➤ processes for monitoring student progress and degree completion</li> <li>➤ processes for curriculum oversight, from design through review and change</li> <li>➤ example(s) of curriculum review/action, e.g. faculty meeting minutes or other administrative actions</li> </ul>
(III-B) Foundational & Advanced Curriculum	<ul style="list-style-type: none"> <li>▪ Public information</li> <li>▪ Administrative docs</li> </ul>	<p>Program coursework presented in institutional catalog, program website, program manuals or other documents used with students and COIs that verify:</p> <ul style="list-style-type: none"> <li>➤ FCAs 1 through 10 (Masters &amp; PDI)</li> <li>➤ Advanced curriculum component coursework (Doctoral)</li> </ul>
(III-C) Foundational & Advanced Application Components	<ul style="list-style-type: none"> <li>▪ Public information</li> <li>▪ Administrative docs</li> </ul>	<p>Program practice/application component presented on institutional catalog, program website, in program manuals or other documents used with students and COIs that verify:</p> <ul style="list-style-type: none"> <li>➤ Practice component's placement, duration, intensity, consistent with program OBE</li> <li>➤ Direct clinical contact hours; program clinical supervision hours; optional teletherapy/virtual supervision details; practice site agreements</li> <li>➤ Selected advanced experience offerings (Doctoral)</li> <li>➤ (indent) Advanced experience mentoring</li> <li>➤ (indent) 9 months required in two specialization areas</li> </ul>

Curriculum/application components for all program types:		
(III-D) Experience with Diverse, Marginalized, and /or Underserved (DMU) Communities	<ul style="list-style-type: none"> <li>▪ Public information</li> <li>▪ Administrative docs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Information regarding curricular design, priorities, or specific student experiences on program website, program manuals, course syllabi, or other documents used with program instructors, students and/or COIs</li> <li>➤ Verification of student direct interaction with members of these communities via (a) MFT professional services as listed, or (b) other activities as listed, e.g., placement site demographics, report/count of DMU cases by clinical student or supervisor, record of course or term-based project such as service activity, interviews, workshop, etc. with DMU interaction</li> </ul>
(III-E) Program Transparency and Informed Acknowledgement	<ul style="list-style-type: none"> <li>▪ Public information</li> <li>▪ Administrative docs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Clarification of program requirements and local regulatory requirements for entry-level MFT licensure presented in institutional catalog, program website, program manuals, or other documents used with students and COIs</li> <li>➤ Program policy/process to ensure all students receive information on MFT professional licensure and are aware licensure requirements vary across jurisdictions, completed prior to beginning course of study and acknowledged by each student in writing; e.g., segment/document during student recruitment event, application process, applicant interviews, or enrollment process.</li> </ul>
(III-F) Alignment with Communities of Interest	<ul style="list-style-type: none"> <li>▪ Administrative docs</li> <li>▪ Program review/action documentation</li> </ul>	<ul style="list-style-type: none"> <li>➤ Verification of program actions that demonstrate consideration of needs and expectations of relevant COIs as identified in I-A, consistent with assessment plan in I-B, e.g. Faculty meeting minutes, minutes of COI interactional events, or COI survey data, etc.</li> </ul>

### Standard III: Table Response Samples

#### Key Element III-A: Curriculum Alignment and Monitoring

The program must provide descriptions of:

- How the curriculum and practice components support the program attainment of student learning outcomes and aligns with the **COAMFTE Developmental Competency Components**.
- Logical sequencing of the curriculum and practice components.
- Processes and procedures used to monitor and ensure student progress and completion of requirements in the curriculum and practice components.
- **Governance** processes and procedures for designing, approving, implementing, reviewing, and changing the curriculum.

#### INTERPRETATION GUIDE

##### Rubric for Response

- Provide a curriculum map that aligns required program courses with COAMFTE Developmental Competency Components and student learning outcomes.
- Explain how the curriculum and the practice component are logically sequenced.
- Describe the processes and procedures the program uses to monitor student progress across the curriculum and practice components.
- Provide documentation that outlines the process and procedure for designing, approving, implementing, reviewing, and changing the curriculum.



**Key Element III-A: Curriculum Alignment and Monitoring**

Student Learning Outcomes	Primary Attention to COAMFTE Developmental Competency Components				
	Knowledge of the Profession	Practice of Therapy	Human Diversity and Social Structures	Professional Ethics, Law, and Identity	Research and Evidence-based Practice
SLO # 1 Students will develop a theory of change that they can use consistently with a variety of clients and presentations.	CFT8874: CFT Theory I CFT8875: CFT Theory II CFT8875: Couple Therapy Theory CFT8189: Intro to CFT CFT8189.12: Practicum CFT8189.13: Internship	CFT8874: CFT Theory I CFT8875: CFT Theory II CFT8875: Couple Therapy Theory CFT8189.11: Intro to CFT CFT8189.12: Practicum CFT8189.13: Internship			
SLO #2 Students will understand the ethical and legal considerations necessary to practice CFT.				CFT 7770: Ethical and legal issues in the practice of CFT CFT8189: Intro to CFT CFT8189.12: Practicum CFT8189.13: Internship	
SLO # 3 Students will have a working knowledge of the effectiveness research in CFT.					CFT8874: CFT Theory I CFT8875: CFT Theory II CFT8875: Couple Therapy Theory CFT8881: CFT Research Methods
SLO # 4 Students will understand the implications of working with couples and families from backgrounds different from their own.			CFT8860: Diversity Issues in CFT		

SLO # 5 Students will understand the differences and commonalities between CFT, Counseling and Social Work and Psychology.	CFT 7770: Ethical and legal issues in CFT				
SLO # 6 Students will prepare manuscripts for publications.	CFT8881: Advanced Research Methods				CFT8881: Advanced Research Methods
SLO #7 Students will develop and conduct independent research projects	CFT8881: Advanced Research Methods		CFT8881: Advanced Research Methods		CFT8881: Advanced Research Methods
SLO#8 Students will develop preliminary supervisory skills.		CFT8878: Supervision in CFT	CFT8878: Supervision in CFT	CFT8878: Supervision in CFT	

<b>Curriculum Requirements</b>	<b>Provide a Narrative Description of Each Curriculum Requirement:</b>
<b>Provide a link or attachment to the program of study.</b>	See <a href="#">Appendix Q</a> : CFT Program Handbook page 56
<b>Explain how the curriculum and the practice component are logically sequenced.</b>	Students begin the application component after completing one year of the foundation classes in the curriculum, including: 1) Introduction to CFT Practice; 2) Ethics and legal Issues in CFT; 3) CFT Theory I; 4) CFT Assessment, 5) Diversity Issues in CFT, and Human Development and Family Theory. We believe this allows students to have a firm foundation of didactic knowledge in the field related to the development of theory, an introduction to ethical practice, and common practices in the field before needing to apply that knowledge to their work with actual clients (SLO#1 & SLO#2).., then they begin the practicum experiences while also taking other theory courses and the research methods courses.
<b>Describe the processes and procedures the program uses to monitor student progress across the curriculum and practice components.</b>	See <a href="#">Appendix Q</a> : CFT Program Handbook. p. 35-36. Students receive grades (A-E) for all academic and practicum courses, student report their grades in an annual report that goes to their advisor. Using the annual report, supervisor evaluations and instructor feedback, we rate each student's progress on the SLO's at the end of each year using a rubric that outlines meeting our targets.
<b>Provide link/location to document that outlines the process and procedure for designing, approving, implementing, reviewing, and changing the curriculum (include program and institutional roles in the process).</b>	See <a href="#">Appendix Q</a> : CFT Program Handbook Page 58
<b>If needed, provide narrative and/or contextual information:</b>	

## Key Element III-B: Foundational and Advanced Curricula

### **Foundational Curriculum**

The **foundational curriculum areas** (FCAs) below cover the knowledge and skill required to practice as a **Marriage and Family Therapist (MFT)**:

- Master's degree programs must demonstrate they offer course work that covers all the foundational curriculum areas that make up the foundational curriculum.
- Post-degree programs must demonstrate they offer coursework and assess competency in all foundational curriculum areas or that students have previously completed coursework and demonstrate competence in all foundational curriculum areas.
- Programs may combine more than one of these foundational curriculum areas into a single course, as they build their curriculum in ways that are congruent with the program's mission, goals, and student learning outcomes.
- Programs may emphasize some of the areas more than others and include other areas that are consistent with their program's mission, goals and student learning outcomes. Programs may include another layer of requirements based on a specialization or emphasis (e.g., faith-based orientation, licensure laws, specialized certification, and so on) as long as there is a clear rationale and MFT relational/systemic philosophy throughout the majority of the program.
- Programs must require students to develop and/or present an integrative/capstone experience before completion of their degree program as part of the foundational curriculum below. Programs must decide how to meet this requirement in keeping with the program's mission, goals, and student learning outcomes. Examples include: requiring students to complete a theory of change/therapy theory presentation/paper, a thesis, a therapy portfolio, or a capstone course.

#### ***FCA 1: Foundations of Relational/Systemic Practice, Theories & Models (Minimum of 6 semester credits/8 quarter credits/90 clock hours)***

This area facilitates the development of competencies in the foundations and critical epistemological issues of MFT. It includes the historical development of the **MFT relational /systemic philosophy** and contemporary conceptual foundations of MFT, and early and contemporary models of MFT, including evidence-based practice and the biopsychosocial framework.

#### ***FCA 2: Clinical Treatment with Individuals, Couples and Families (Minimum of 6 Credits/8 quarter credits/90 clock hours)***

This area facilitates the development of competencies in treatment approaches specifically designed for use with a wide range of diverse individuals, couples, and families, including sex therapy, same-sex couples, working with young children, adolescents and elderly, interfaith couples, and includes a focus on evidence-based practice. Programs must include content on crisis intervention.

#### ***FCA 3: Diverse, Multicultural and/or Underserved Communities (Minimum of 3 Credits/4 quarter credits/45 clock hours)***

This area facilitates the development of competencies in understanding and applying knowledge of diversity, power, privilege, and oppression as these relate to race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religious, spiritual and/or beliefs, nation of origin or other relevant social identities throughout the curriculum. It includes practice with diverse, international, multicultural, marginalized, and/or underserved communities, including developing competencies in working with sexual and gender minorities and their families, as well as anti-racist practices.

***FCA 4: Research & Evaluation (Minimum of 3 Credits/4 quarter credits/45 clock hours)***

This area facilitates the development of competencies in MFT research and evaluation methods, and in evidence-based practice, including becoming an informed consumer of couple, marriage, and family therapy research. If the program's mission, goals, and student learning outcomes include preparing students for doctoral degree programs, the program must include an increased emphasis on research.

***FCA 5: Professional Identity, Law, Ethics & Social Responsibility (Minimum of 3 Credits/4 quarter credits/45 clock hours)***

This area addresses the development of a MFT Identity and socialization and facilitates the development of competencies in ethics in MFT practice, including understanding and applying the AAMFT Code of Ethics and understanding legal responsibilities.

***FCA 6: Biopsychosocial Health & Development Across the Life Span (Minimum of 3 Credits/4 quarter credits/45 clock hours)***

This area addresses individual and family development, human sexuality, and biopsychosocial health across the lifespan.

***FCA 7: Systemic/Relational Assessment & Mental Health Diagnosis and Treatment (Minimum of 3 Credits/4 quarter credits/45 clock hours)***

This area facilitates the development of competencies in traditional psycho-diagnostic categories, psychopharmacology, the assessment, diagnosis, and treatment of major mental health issues as well as a wide variety of common presenting problems including addiction, suicide, trauma, abuse, intra-familial violence, and therapy for individuals, couples, and families managing acute chronic medical conditions, utilizing a **MFT relational/systemic philosophy**.

The following areas must be covered in the curriculum in some way, though there are no minimum credit requirements.

***FCA 8: Contemporary Issues***

This area facilitates the development of competencies in emerging and evolving contemporary challenges, problems, and/or recent developments at the interface of Marriage and Family Therapy knowledge and practice, and the broader local, regional, and global context. This includes such issues as immigration, technology, same-sex marriage, violence in schools, etc. These issues are to reflect the context of the program and the program's mission, goals, and student learning outcomes. Programs are encouraged to innovate in this FCA.

***FCA 9: Community Intersections & Collaboration***

This area facilitates the development of competencies in practice within defined contexts (e.g., healthcare settings, schools, military settings, private practice) and/or nontraditional MFT professional practice using therapeutic competencies congruent with the program's mission, goals, and student learning outcomes (e.g., community advocacy, psycho-educational groups). It also addresses developing competency in **multidisciplinary collaboration**.

***FCA 10: Preparation for Teletherapy Practice***

This area facilitates the development of competencies in **teletherapy**. This may include such issues as emerging legal and ethical requirements, documentation, response to crises, awareness of the therapeutic space, joining, appropriate individual and systemic interventions (e.g., couples, play therapy), or other topics of importance to the context of the program and with diverse populations. Programs are encouraged to innovate in this FCA.

## **Advanced Curriculum**

The **advanced curricula areas (ACAs)** advances knowledge and skill by addressing the curricular areas below.

- Doctoral degree programs must describe how students demonstrate competence in the COAMFTE Developmental Competency Components.
- Doctoral degree programs must provide evidence of coursework in all the **advanced curricular areas (ACA)**. Programs may emphasize some of the ACAs, more than others, and include other areas that are consistent with the program's mission, goals, and student learning outcomes.
- Post-degree programs may offer components of the **advanced curriculum**.
- Programs may emphasize some of the areas more than others and include other areas that are consistent with their program's mission, goals, and student learning outcomes.

### ***ACA 1: Advanced Research***

This area facilitates the development of competencies in:

- a) **advanced research**, including demonstrated proficiency in quantitative methods and analysis techniques, qualitative methods and analysis techniques, or mixed methods and analysis techniques appropriate to carrying out relational research;
- b) methodologies and analysis techniques outside of their proficiency area (e.g., if a student decides to become proficient in quantitative methods, they will have a working knowledge of qualitative methods as well);
- c) understanding the theoretical complexity of change within relationships and how this complexity informs research;
- d) understanding and demonstrating sensitivity to and awareness of how issues of diversity in terms of culture, gender, sexual orientation, age, socio-economic status, etc. play a role in their choice of research topics and their conduct of research activities; and
- e) preparing and disseminating research through a variety of activities (e.g., grants and grant writing, program evaluation, professional publications and presentations).

### ***ACA 2: Advanced Relational/Systemic Clinical Theory***

This area facilitates the development of advanced clinical competencies including:

- a) advanced understanding and application of multiple family and couple models and empirically-supported interventions;
- b) skill in working with diverse populations across the lifespan through direct clinical work or in MFT relational/systemic supervision of the therapy of others;
- c) awareness of cultural issues, differences, and personal blind spots in their clinical and supervisory work; and
- d) development of a specialized clinical area that is grounded in research and is at an advanced level of intervention and understanding.

### ***ACA 3: Advanced Relational/Systemic Applications to Contemporary Challenges***

This area facilitates the development of leading-edge professionals who are competent in relational/systemic innovations. This includes application to controversial moral and advanced ethical dilemmas, international, cross-cultural, and multicultural issues in **Marriage and Family Therapy professional** roles, responsibilities, practices, and applications to other contemporary problems. This area also includes a focus on family policy and/or family law.

### ***ACA 4: Foundations of Relational/Systemic Teaching, MFT Relational/Systemic Supervision, Consultation, and/or Leadership***

This area facilitates the development of competencies in relational/systemic teaching, MFT relational/systemic supervision, and/or MFT consultation. This may include educational/learning theories, relevant research, multicultural content, evaluation and assessment methods, ethics and professional issues, and personal philosophy. This area also addresses administrative competencies including program

development and policy, leadership roles and evaluation of MFT educational and service-oriented institutions and agencies. Students who intend to teach at the higher education level will develop and apply a teaching philosophy, as well as demonstrate the capacity to develop and apply course evaluation methods and student learning outcomes. All students will demonstrate skills in clinical MFT relational/systemic supervision. Students who have teaching opportunities in formal or informal settings will demonstrate a sensitivity to issues of diversity in the material they teach, to the persons they are teaching, and in the ways in which information and correction is provided.

## INTERPRETATION GUIDE

### Rubric for Response

- Identify where and/or how the foundational curriculum areas or advanced curriculum areas are addressed in the curriculum.
- For post-degree programs, demonstrate that course work is offered and/or that students have completed course work in all the areas contained in the foundational curriculum or that students demonstrate competence in those areas.
- For doctoral degree programs, describe how students demonstrate competence in the COAMFTE Developmental Competency Components.
- For programs offering the foundational curriculum, provide a description of and rationale for the program's required integrative/capstone experience.

### Key Element III-B: Foundational Curriculum

Foundational Curricular Area	<ul style="list-style-type: none"> <li>• Course # / Name</li> <li>• Credits/Clock Hours, and</li> <li>• Link to Syllabus</li> </ul>	<ul style="list-style-type: none"> <li>• Course # / Name</li> <li>• Credits/Clock Hours, and</li> <li>• Link to Syllabus</li> </ul>	Add more courses as needed (full curriculum)
<p><b><i>FCA 1: Foundations of Relational/Systemic Practice, Theories &amp; Models (Minimum of 6 semester credits/8 quarter credits/90 clock hours)</i></b></p>	<ul style="list-style-type: none"> <li>• Brief strategic, structural, narrative, solution focused approaches</li> <li>• CFT8874: Family Therapy Theory I</li> <li>• 3 semester hours</li> <li>• <a href="#">Appendix R page 1</a></li> </ul>	<ul style="list-style-type: none"> <li>• Behavioral, Cognitive Behavioral, Intergenerational, Object Relations, and experiential approaches</li> <li>• CFT8875: Family Therapy Theory II</li> <li>• 3 semester hours</li> <li>• <a href="#">Appendix R page 6</a></li> </ul>	
<p><b><i>FCA 2: Clinical Treatment with Individuals, Couples and Families (Minimum of 6 Credits/8 quarter credits/90 clock hours)</i></b></p>	<ul style="list-style-type: none"> <li>• Practice of therapy, becoming a therapist, working with different client presentations, treatment planning, progress notes, etc.</li> <li>• CFT8189.11: Prepracticum</li> <li>• 3 semester hours</li> <li>• <a href="#">Appendix R page 9</a></li> </ul>	<ul style="list-style-type: none"> <li>• Couple therapy approaches, EFT, Gottman, and others</li> <li>• CFT8876: Couple Therapy Theory</li> <li>• 3 semester hours</li> <li>• <a href="#">Appendix R page 15</a></li> </ul>	
<p><b><i>FCA 3: Diverse, Multicultural and/or Underserved Communities (Minimum of 3 Credits/4 quarter credits/45 clock hours)</i></b></p>	<ul style="list-style-type: none"> <li>• Working with underrepresented/ minoritized populations, research showing effectiveness of methods, understanding self of therapist values</li> <li>• CFT8860: Diversity in CFT</li> <li>• 3 semester hours</li> <li>• <a href="#">Appendix R, page 22</a></li> </ul>		

<p><b>FCA 4: Research &amp; Evaluation</b> (Minimum of 3 Credits/4 quarter credits/45 clock hours)</p>	<ul style="list-style-type: none"> <li>Effectiveness research overview, methods and design in CFT research</li> <li>CFT6770: CFT Research Methods</li> <li>3 semester hours</li> <li><a href="#">Appendix R page 26</a></li> </ul>		
<p><b>FCA 5: Professional Identity, Law, Ethics &amp; Social Responsibility</b> (Minimum of 3 Credits/4 quarter credits/45 clock hours)</p>	<ul style="list-style-type: none"> <li>Review AAMFT code of ethics, issues of confidentiality, breaking confidentiality, licensure, professional behavior</li> <li>CFT7770: Ethical and Professional Issues in CFT</li> <li>3 semester hours</li> <li><a href="#">Appendix R page 31</a></li> </ul>		
<p><b>FCA 6: Biopsychosocial Health &amp; Development Across the Life Span</b> (Minimum of 3 Credits/4 quarter credits/45 clock hours)</p>	<ul style="list-style-type: none"> <li>Family theories, diversity of family forms, issues facing families</li> <li>CFT8820: Perspectives on the Family</li> <li>3 semester hours</li> <li><a href="#">Appendix R page 42</a></li> </ul>	<ul style="list-style-type: none"> <li>Child or adolescent development course</li> <li>CFT7764: Child Development</li> <li>Or CFT7765: Adolescence and Emerging Adulthood</li> <li>3 semester hours</li> <li><a href="#">Appendix R page 56</a> and <a href="#">72</a></li> </ul>	
<p><b>FCA 7: Systemic/Relational Assessment &amp; Mental Health Diagnosis and Treatment</b> (Minimum of 3 Credits/4 quarter credits/45 clock hours)</p>	<ul style="list-style-type: none"> <li>DSM and other assessments</li> <li>CFT8861: CFT Assessment</li> <li>3 semester hours</li> <li><a href="#">Appendix R page 81</a></li> </ul>		
<p><b>FCA 8: Contemporary Issues</b></p>	<ul style="list-style-type: none"> <li>Substance abuse treatment in the family</li> <li>CFT8882: Substance Abuse and Treatment</li> <li>3 semester hours</li> <li><a href="#">Appendix R page 91</a></li> </ul>	<ul style="list-style-type: none"> <li>Families with Adolescents at risk</li> <li>CFT8883: Families with adolescents at risk</li> <li>3 semester hours</li> <li><a href="#">Appendix R page 101</a></li> </ul>	<p>Also discussed in the theory classes See <a href="#">Appendix R pages #,#,#</a></p>
<p><b>FCA 9: Community Intersections &amp; Collaboration</b></p>	<ul style="list-style-type: none"> <li>Medical Family Therapy</li> <li>CFT8885: MedFT</li> <li>3 semester hours</li> <li><a href="#">Appendix R page 125</a></li> </ul>	<ul style="list-style-type: none"> <li>Also discussed in Ethics course, CFT7770: Ethical and Professional Issues in CFT</li> <li><a href="#">Appendix R page 31</a></li> </ul>	

<b>FCA 10: Preparation for Teletherapy Practices</b>	<ul style="list-style-type: none"> <li>Ethics of teletherapy in Ethics course CFT7770</li> <li>Preparation in Practicum CFT8189.12</li> <li><a href="#">Appendix R pages 31 and 135</a></li> </ul>		
<b>Provide a link or attachment of the Capstone/Integrative Project requirements provided to students:</b>	See <a href="#">Appendix Q</a> : CFT Program Handbook Page #82		
<b>Document how the program's Capstone/Integrative experience allows the program to evaluate student attainment of the program's Student Learning Outcomes</b>	The capstone experience involves writing a theory of change paper (SLO 1), showing video of working with clients using their theory, and discussing ethical considerations and diversity considerations in using the theory along with any evidence supporting the effectiveness of the theory (SLO's 2, 3, & 4)		
<b>If the post-degree program accepts previously completed coursework in the FCAs, document how students have completed all the FCA's AND how the students have demonstrated competence in ALL FCA's</b>			

### Key Element III-B: Advanced Curriculum

<b>Advanced Curricular Areas</b>	<ul style="list-style-type: none"> <li><b>Course # / Name</b></li> <li><b>Credits/Clock Hours, and</b></li> <li><b>Link to Syllabus</b></li> </ul>	<ul style="list-style-type: none"> <li><b>Course # / Name</b></li> <li><b>Credits/Clock Hours, and</b></li> <li><b>Link to Syllabus</b></li> </ul>	<b>Add more courses as needed (full curriculum)</b>
<b>ACA 1: Advanced Research</b>	<ul style="list-style-type: none"> <li>Overview of clinical trials research and methods, critiques of clinical trials, therapist effects, process research methods, and others.</li> <li>CFT8878: Advanced CFT Research Methods</li> <li>3 semester hours</li> <li><a href="#">Appendix R page 155</a></li> </ul>	<ul style="list-style-type: none"> <li>15 credit hours in statistics/methods</li> <li>Examples</li> <li>QREM8821: Regression Analysis (3 semester hours)</li> <li>QREM8822: Structural Equation Modeling (3 semester hours)</li> <li>QREM8823: Multilevel Modeling (5 semester hours)</li> <li>CFT8889: Dyadic Data Analysis (4 semester hours)</li> <li><a href="#">Appendix R page 161, 174, 189</a></li> </ul>	



<p><b>ACA 2: Advanced Relational/Systemic Clinical Theory</b></p>	<ul style="list-style-type: none"> <li>• Advanced System Theory discussion and critique</li> <li>• CFT8824: Systems Theory</li> <li>• 3 semester hours</li> <li>• <a href="#">Appendix R page 212, 245</a></li> </ul>		
<p><b>ACA 3: Advanced Relational/Systemic Applications to Contemporary Challenges</b></p>	<ul style="list-style-type: none"> <li>• Critical incidence in CFT, intervention for suicidality, substance abuse, violence, and others using a systems perspective.</li> <li>• CFT8860: Critical Incidents in CFT</li> <li>• 3 semester hours</li> <li>• <a href="#">Appendix R page 259</a></li> </ul>		
<p><b>ACA 4: Foundations of Relational/Systemic Teaching, Supervision, Consultation, and/or Leadership</b></p>	<ul style="list-style-type: none"> <li>• Supervision fundamentals</li> <li>• CFT8878: Supervision in CFT</li> <li>• 3 semester hours</li> <li>• <a href="#">Appendix R page 271</a></li> </ul>		
<p><b>Document how students in doctoral programs are evaluated for competence in the COAMFTE Developmental Competency Components</b></p>		<p>See <a href="#">Appendix Q</a>: CFT Program Handbook p. 312  All students have to take our clinical competence exam. If they come with an MFT master's they take it at the end of their first year in the program. If they come without an MFT master's they take the exam when they finish the FCA curriculum and are about to complete their first 500 hours of client contact. See description of clinical competence exam above.</p>	

## Key Element III-C: Foundational and Advanced Application Components

The program must demonstrate it offers an application component with appropriate placement in the curriculum, duration, focus, and intensity consistent with the program's mission, goals, and student learning outcomes.

### **Foundational Practice Component**

Master's degree programs and post-degree programs that teach the foundational curriculum must offer the **foundational practice component** (practicum and/or internship) with the following requirements:

- **Direct clinical contact hours:** Students must acquire a minimum of 300 direct clinical contact hours with individuals, couples, families, or other systems, at least 100 of which must be **relational hours** that occur over a minimum of twelve months of clinical practice.
  - Programs including **teletherapy** for required direct clinical contact hours must have policies and procedures in place to support student teletherapy practice and its MFT relational/systemic supervision by program clinical supervisors including attention to applicable legal and ethical requirements and current/emerging professional guidelines.
- **MFT relational/systemic supervision:** Students must receive at least 100 hours of MFT relational/systemic supervision from a program clinical supervisor on a regular and consistent basis while seeing clients. When the supervision schedule is interrupted for any reason, the program must have a plan to assure student access to supervisory support. MFT relational/systemic supervision can be **individual MFT relational/systemic supervision** (one supervisor with one or two supervisees) or **group MFT relational/systemic supervision** (one supervisor and eight or fewer students) and must include a minimum of 50 hours of MFT relational/systemic supervision utilizing **observable data**.
- **Published procedures and agreements with practice sites:** Programs must have formal agreements in place that outline the responsibilities of the institution, practice sites and students, and policy in place for managing any difficulties with sites, program clinical supervisors, or students.

### INTERPRETATION GUIDE

#### **Rubric for Response**

- For master's degree programs and post-degree programs that teach the foundational curriculum, demonstrate the program's requirements for meeting the foundational practice component (FPC) for direct clinical contact hours.
- Describe how the application component's placement in the curriculum, duration, focus, and intensity is consistent with their program's mission, goals, and student learning outcomes.
- For master's degree programs and post-degree programs that teach the foundational curriculum, demonstrate the program's commitment to MFT relational/systemic-oriented supervision and how the standard's minimum supervisory requirements are accomplished, including a specific description of the use of digital technology, if relevant.
- If any of the direct clinical contact hours are acquired through teletherapy, present any policies and procedures pertaining to legal and ethical requirements and current/emerging professional guidelines.
- If MFT relational/systemic supervision provided by program clinical supervisors is mediated by technology, present any policies and procedures pertaining to legal and ethical requirements and current/emerging professional guidelines.
- Provide examples of the program's agreements with practice sites that outline the responsibilities of the institution, practice sites and students, and policy in place for managing any difficulties with sites, program clinical supervisors, or students.

### Key Element III-C: Foundational Application Component

**Describe how the application component's placement in the curriculum, duration, focus, and intensity supports students in meeting their student learning outcomes.**

Students begin the application component after completing one year of the foundation classes in the curriculum, including: 1) Introduction to CFT Practice; 2) Ethics and legal Issues in CFT; 3) CFT Theory I; 4) CFT Assessment, 5) Diversity Issues in CFT, and Human Development and Family Theory. We believe this allows students to have a firm foundation of didactic knowledge in the field related to the development of theory, an introduction to ethical practice, and common practices in the field before needing to apply that knowledge to their work with actual clients (SLO#1 & SLO#2). From this point forward, students begin the application component by taking one semester of Practicum (4 months), which is held in the University clinic and during which students have close oversight of their clinical skills through live supervision behind the mirror. Students are provided in-vivo feedback which allows them a structured experience with learning how to integrate systemic theory in the moment with clients. Students then move into Internship during which they see clients at an internship site in the community, where they begin working with a more diverse group of mental health professionals in organizations aligning more closely with common practices in community mental health (SLO#5). It is within these sites that they learn how to maintain their systemic focus within systems that may have a more linear approach. Additionally, each site is selected for its focus on working with an underserved population, allowing students direct experience in working effectively with marginalized communities from a systemic approach (SLO#4). Students continue to receive supervision with observable data through recordings but experience more autonomy in their work with clients. Students continue to work with a program supervisor during two semesters of Internship (eight months), supporting them in navigating a systemic approach to working with their clients. Students continue to take more advanced clinical classes, such as couples' therapy and working with children and adolescents while completing the foundational application component. This allows students to continue to integrate more advanced clinical knowledge and research in system therapy directly into their work with a diverse group of clients (SLO#1 & SLO#3).

See [Appendix S](#): MFT Clinical Handbook p. 35

**Provide evidence of the program's written requirements for meeting the Foundational Application Component. Complete each of the following rows by providing weblinks and/or attachments to original documents where students are able to access these program requirements. Specify page numbers where information can be found in the original document(s):**

	Web Link(s)	Handbook(s)/Catalog/Syllabi and Page Numbers
<b>Total Number of direct clinical contact hours required in the program (minimum 300)</b>	MFT Program Website-Requirements <a href="https://collegexyz.org/mft">https://collegexyz.org/mft</a>	<a href="#">Appendix Q</a> : CFT Program Handbook pg. 26 <a href="#">Appendix S</a> : CFT Program Clinical Handbook p. 10 <a href="#">Appendix R</a> : CFT 8189.12 Practicum Syllabus p.3 Appendix R: CFT 8189.13 Internship Syllabus p.4
<b>Total Number of relational direct clinical contact hours required in the program (minimum 100)</b>	MFT Program Website-Requirements <a href="https://collegexyz.org/mft">https://collegexyz.org/mft</a>	Appendix Q: CFT Program Handbook pg. 26 Appendix S: CFT Program Clinical Handbook p. 10 Appendix R: CFT 8189.12 Practicum Syllabus p.3

		Appendix R: CFT 8189.13 Internship Syllabus p.4
<b>Evidence of program's definition of a required direct clinical contact hour accessible to students</b>	N/A	Appendix Q: CFT Program Handbook pg. 38 Appendix S: CFT Program Clinical Handbook p. 26
<b>Evidence of program's definition of a required relational hour accessible to students</b>	N/A	Appendix Q: CFT Program Handbook pg. 42 Appendix S: CFT Program Clinical Handbook p. 29
<b>Evidence that the foundational practice component requirements include at least 12 months of clinical practice.</b>	MFT Program Website-Requirements <a href="https://au.org/cft">https://au.org/cft</a>	Appendix Q: CFT Program Handbook pg. 26 Appendix S: CFT Program Clinical Handbook p. 10
<b>Total number of supervision hours provided by a program clinical supervisor required in the program (minimum 100)</b>	MFT Program Website-Requirements <a href="https://au.org/cft">https://au.org/cft</a>	Appendix Q: CFT Program Handbook pg. 26 Appendix S: CFT Program Clinical Handbook p. 10 Appendix R: CFT 8189.12 Practicum Syllabus p.3 Appendix R: CFT 8189.13 Internship Syllabus p.4
<b>Total number of supervision hours in program that must include observable data (minimum 50)</b>	MFT Program Website-Requirements <a href="https://au.org/cft">https://au.org/cft</a>	Appendix Q: CFT Program Handbook pg. 28 Appendix S: CFT Program Clinical Handbook p. 12 Appendix R: CFT 8189.12 Practicum Syllabus p.4 Appendix R: CFT 8189.13 Internship Syllabus p.5
<b>Program requirements for regular and consistent supervision delivery throughout the student's clinical practice.</b>	N/A	Appendix Q: CFT Program Handbook pg. 26 Appendix S: CFT Program Clinical Handbook p. 10
<b>Program plan for student access to supervisory support during interruptions in the supervision schedule (planned and unplanned).</b>	N/A	Appendix Q: CFT Program Handbook pg. 28 Appendix S: CFT Program Clinical Handbook p. 12 Appendix R: CFT 8189.12 Practicum Syllabus p.4 Appendix R: CFT 8189.13 Internship Syllabus p.5
<b>Program requirements presenting the required configuration/context for supervision (group or individual). Program requirements for maximum supervisor: student ratios in individual and group supervision formats.</b>	N/A	Appendix Q: CFT Program Handbook pg. 30 Appendix S: CFT Program Clinical Handbook p. 15
<b>Evidence of a formal program agreement with practice sites that outlines the responsibilities of the institution, the practice sites, and the students.</b>	N/A	<a href="#">Appendix T</a> : CFT Internship Site Agreement <a href="#">Appendix U</a> : CFT Program Site Supervisor Handbook p. 4-8

<b>Published procedure for managing any difficulties with sites, supervisors, and students.</b>	N/A	Appendix T: CFT Internship Site Agreement Appendix S: CFT Program Clinical Handbook p. 14 Appendix U: CFT Program Site Supervisor Handbook p. 4-8
<b>If relevant, any policies and procedures in place to support student teletherapy practice including applicable legal and ethical requirements and current/emerging professional guidelines.</b>	University Sponsored HIPAA Training University Sponsored HIPAA Practices, Procedures, & Violations Required telehealth training module	Appendix S: CFT Program Clinical Handbook, Telehealth Policies and Procedures p. 18, 29, 34-38; Preparing for Practicum, p. 9 Appendix U: CFT Program Site Supervisor Handbook p. 12-15
<b>If relevant, any policies and procedures in place to support virtual supervision provided by program clinical supervisors including applicable legal and ethical requirements and current/emerging professional guidelines.</b>	University Sponsored HIPAA Training N/A	<a href="#">Appendix V</a> : University Faculty Handbook p. 21 Appendix S: CFT Program Clinical Handbook p. 18 Appendix U: CFT Program Site Supervisor Handbook p. 16-17

### **The Advanced Practical Experience Component**

Programs that teach the advanced curriculum must offer the **advanced practical experience component** that includes:

- Selected experiences consistent with the program’s mission, goals, and student learning outcomes in any of the following areas: advanced research, grant-writing, teaching, MFT relational/systemic supervision, consultation, advanced clinical theory, clinical practice/innovation, program development, leadership, or policy. In addition, programs may offer experiences in presenting and professional writing.
- Appropriate and adequate **mentoring** of students during the experience.
- For doctoral programs, a minimum of two of the areas noted above can be combined over a minimum of 9 months.
- For post-degree programs, a minimum of one area over a minimum of 6 months is required.

### **INTERPRETATION GUIDE**

#### **Rubric for Response**

- For programs that teach the advanced curriculum, map the advanced practice experience component (APEC) areas utilized by the program. to the student learning outcomes
- Provide evidence that students must complete an advanced practice experience that includes:
  - for doctoral programs: at least two required areas for a duration of at least nine months.
  - for post-degree programs: at least one required area for a duration of at least six months.
- For programs that teach the advanced curriculum, demonstrate how students receive mentoring during the APEC.

### Key Element III-C: The Advanced Practical Experience Component

Map the advanced practical experience areas offered by the program to the Student Learning Outcomes:	
Advanced Practical Experience Areas:	Student Learning Outcome#(s)
Advanced Research	SLO 6 & 7
Grant-writing	SLO 6 & 7
Teaching	
Supervision	SLO 8
Consultation	
Advanced Clinical Theory	
Clinical Practice/Innovation	
Program Development	
Leadership	
Policy	
Presenting	
Professional Writing	
Provide Narrative Description below:	
<p><b>Provide evidence that students must complete an advanced practice experience that includes:</b>  <b>&gt;&gt;Doctoral programs: at least two required areas for a duration of at least nine months.</b>  <b>&gt;&gt;Post-degree programs: at least one required area for a duration of at least six months.</b></p>	<p>See <a href="#">Appendix N</a>: MFT Doctoral Internship Contract            Students begin their advanced practical component after completing their candidacy exam, this component is flexible to meet the needs of the student. Some students have completed their 2<sup>nd</sup> 500 hours of client contact and focus exclusively on research and publication for their advanced practical component along with providing supervision. While other students combine clinical work, supervision, research and publication. Some students have focused on teaching by participating in teaching workshops at the university in addition to providing supervision and completing their dissertation (research).</p>
<p><b>Demonstrate how students receive mentoring during the advanced practical experience components.</b></p>	<p><a href="#">Appendix Q</a>: CFT Program Handbook p. 52; Students develop their advanced practice experience with their academic advisor or CFT advisor, who serves as their mentor during the experience.</p>

## Key Element III-D: Experience with Diverse, Marginalized, and/or Underserved Communities

The program demonstrates student experience in Marriage and Family Therapy practice with diverse, marginalized, and/or underserved communities. Experiences may include:

- Professional activities (such as therapy, research, MFT relational/systemic supervision, consultation, teaching, etc.) with diverse, marginalized, and/or underserved communities; and/or
- Other types of activities (such as projects, service, interviews, workshops, etc.), as long as the program can demonstrate that the experience is directly related to MFT activities, and students are in interaction with members of these communities.

### INTERPRETATION GUIDE

#### Rubric for Response

- Describe how the program facilitates student experience with diverse, marginalized, and/or underserved communities.

Key Element III-D: Experience with Diverse, Marginalized, and/or Underserved Communities			
Provide narrative description for each column:	Identified Diverse/Marginalized/Underserved Communities	Description of Experience (including manner in which students directly interact with members of the community)	Link to Evidence of Requirement in Program
<b>Required Experience:</b>	<p>Individuals who identify as transgender, gender non-confirming, and/or gender-queer.</p> <p>Individuals experiencing homelessness</p>	<p>Provide pro-bono therapeutic services for a minimum of one semester through the LGBTQI Community Center.</p> <p>Service Learning Opportunity in which students are matched with an organization in town that serves individual experiencing homelessness. Students provide parenting classes, assessments for depression and anxiety, and coordinated care activities.</p>	<p>See <a href="#">Appendix Q</a>: CFT Program Handbook p 15</p> <p>See <a href="#">Appendix Q</a>: CFT Program Handbook p. 15</p> <p>See <a href="#">Appendix Q</a>: CFT Diversity Class Syllabus-Assignment #3- p 7</p>
<b>OPTIONAL: Provide any additional opportunities / experience(s)</b>	<p>e.g., innovative activities with diverse, marginalized, and/or underserved communities</p> <p>e.g., experiences that you are trying out within the program</p>		

## Key Element III-E: Program Transparency and Informed Acknowledgement

The program demonstrates that the curriculum aligns with the educational and clinical practice requirements (e.g., coursework, clinical experience, and supervision) that satisfy the regulatory requirements for entry-level practice either in the state/province/location in which the program physically resides or in which the student intends to practice.

Programs must provide prospective and entering students information regarding the MFT profession's licensure and regulatory requirements as follows:

- The program demonstrates use of a policy and process to ensure that all students are informed of the MFT profession's general regulatory structure and that practice/licensure requirements, including qualifying degree requirements, may vary across state/provincial jurisdictions.
- This information, along with resources for contacting state/provincial regulatory bodies, must be provided to students and acknowledged in writing, prior to beginning the program's course of study.
- Programs that include **teletherapy** and/or **virtual supervision** as part of the clinical practice experience must have a policy on how the program ensures that such practices are compliant with relevant federal, state, or provincial **regulatory requirements**.

### INTERPRETATION GUIDE

#### Rubric for Response

- Provide the student acknowledgment policy of regulatory variance.
- Provide program policies of regulatory compliance.
- Describe how students are informed of the regulatory requirements in the state, province or location they plan to practice.
- If applicable, provide policies that ensure teletherapy and/or virtual supervision are practices are compliant with relevant federal, state, or provincial regulatory requirements.

Key Element III-E: Program Transparency and Informed Consent		
Evidence / Documentation	Web Link(s)	Handbook/Catalog(s) and Page Number(s)
<b>Curriculum regulatory alignment</b>	Department of Regulatory Agency Website- outlining Educational Requirements for PA [LINK]. Program statement that Ackerman University is located in PA and advertises alignment between program and state licensure as LMFT. <a href="https://au.org/cft">https://au.org/cft</a>	See <a href="#">Appendix Q</a> : CFT Program Handbook p. 25 (table demonstrating alignment of educational requirements with program requirements); PA MFT Board Rules and Policies p. 45 (Board statement indicating students who graduate from a COAMFTE accredited program have met the educational requirements for licensure as an LMFT in PA)
<b>Policies informing students of regulatory alignment</b>	CFT Program Website- Q & A regarding licensure <a href="https://au.org/cft">https://au.org/cft</a>	See <a href="#">Appendix Q</a> : CFT Program Handbook p. 25



<b>Student Notice of MFT regulation, variance, and resources</b>	CFT Program Website- Q & A regarding licensure <a href="https://au.org/cft">https://au.org/cft</a>	See Appendix Q: CFT Program Handbook p. 25; See <a href="#">Appendix X</a> : CFT Program Orientation Power Point
<b>Student Acknowledgment policy, process, and form</b>	N/A	See Appendix Q: CFT Program Handbook p. 26-28; See <a href="#">Appendix D</a> : CFT Program Acknowledgement Form
<b>Teletherapy Compliance Policy (if used)</b>	N/A	See Appendix Q: CFT Program Handbook pg. 45; <a href="#">Appendix S</a> : CFT Program Clinical Handbook p. 22
<b>Virtual Supervision Compliance Policy (if used)</b>	N/A	See Appendix Q: CFT Program Handbook pg. 45; Appendix S: CFT Program Clinical Handbook p. 22; <a href="#">Appendix U</a> : CFT Program Site Supervisor Handbook p. 16-17
<b>If needed, provide narrative and/or contextual information:</b>		

## Key Element III-F: Curriculum/Practice Alignment with Communities of Interest

The program demonstrates that it considers the needs and expectations of identified communities of interest in developing and revising its curriculum and application component.

### INTERPRETATION GUIDE

#### Rubric for Response

- Identify communities of interest (COI) relevant to curriculum and practice.
- Demonstrate how the needs and expectations of the identified COI's are considered in the curriculum/practice development and revision.
- Provide examples of how this process has led to curriculum/practice improvement.

<b>Key Element III-F: Curriculum/Practice Alignment with Communities of Interest</b>			
<b>Identify COIs who are considered in curriculum/practice development or revision</b>	<b>Indicate how COI needs &amp; expectations are identified for consideration</b>	<b>Provide evidence that COI consideration is included in curriculum/practice component development or revisions</b>	<b>Provide evidence of communications informing COIs of decisions related to the curriculum/practice components</b>
Students	We have student representatives who participate in faculty meetings: they bring concerns	When concerns are presented to faculty about curriculum needs, these are discussed (see meeting	Any feedback received and decisions made about changes to the curriculum (if applicable) are emailed

	<p>and needs from the students to the faculty. Students complete course evaluations (<a href="#">Appendix E: Template Course Evaluation</a>) after each class to provide feedback on content and teaching/learning practices within individual classes. We also survey students annually about the program and ask for feedback in the surveys, <a href="#">Appendix F: Annual Student Survey questions 4-7</a>).</p>	<p>minutes in <a href="#">Appendix H</a> page 4). Using the data from the annual surveys, we also discuss ways to refine the curriculum to better meet students' needs (see meeting minutes for the annual program evaluation meetings, <a href="#">Appendix H</a> page 18)</p> <p>For example, students asked about getting more training in evidence-based practices. We included more "hands-on" training with several evidence based models in the Critical Incidents course (HDFS 8860: Critical Incidents, <a href="#">Appendix R</a>, page 259)</p>	<p>to students at the conclusion of the annual program evaluation meeting (see <a href="#">Appendix I</a> page 3 for one email sent to students)</p>
Faculty	<p>Faculty include our core faculty and adjunct faculty. All faculty are invited to monthly faculty meetings, a once per year faculty day, and a once per year 360-degree evaluation of the MFT program. Faculty are invited to bring forth any items related to curriculum at each of these meetings. In addition, each class has a course committee (<a href="#">Appendix M: Course Committee Document</a>) who is responsible for revising the course according to a schedule (<a href="#">Appendix B: Program Assessment Schedule</a>). Course committees are made up of all faculty teaching that course.</p>	<p>Evidence of this is process is provided in the following example: During two 360-degree evaluation days (see <a href="#">Appendix H: minutes 4-25-2019 &amp; 4-13-2020</a>) and one all faculty day (see <a href="#">Appendix H: minutes 10-12-2019</a>) faculty indicated that students were consistently reporting the Diversity course had too much content and therefore faculty believed it was too difficult to adequately address all course outcomes. Based on this feedback, in conjunction with students' feedback (see <a href="#">Appendix E: program evaluation 2019 p. 32</a>) the decision was made to create two diversity courses (see <a href="#">Appendix H: faculty meeting minutes 9-1-2020</a>).</p>	<p>Evidence of communication back to the COIs is included:</p> <p><a href="#">Appendix J: Student Representative Newsletter 10-1-2021 p.2</a></p> <p><a href="#">Appendix H: meeting minutes available to all faculty through shared drive 10-1-2021 p. 2</a></p>
Supervisors	<p>Program clinical supervisors are all core and adjunct faculty</p>	<p>During two clinical faculty meetings, program supervisors</p>	<p><a href="#">Appendix H: meeting minutes available to all program supervisors</a></p>

	<p>members in the CFT program. All supervision takes place within a practicum or internship class, so the process by which supervisors give feedback is almost identical to that of faculty. Faculty who are participating as program clinical supervisors in a given semester attend one additional clinical faculty meeting per month in which discussion specific to clinical matters are addressed.</p>	<p>indicated that students were struggling to really understanding how to assess for intimate partner terrorism in couple's sessions (see Appendix H: minutes 3-22-2018 &amp; 4-24-2018). Based on this feedback, the course curriculum for CFT8876: Couple Therapy Theory was asked to create a training module. The Couple Domestic Violence Training Module (<a href="#">Appendix AA</a>) was integrated into the course in Fall of 2019 (<a href="#">Appendix AB</a>- revised syllabus).</p>	<p>through shared drive 10-25-2018</p>
--	---	--	--

**Provide example(s) and/or contextual information as needed:**

e.g., example how the program incorporated teletherapy into the curriculum

## Standard IV: Program Achievement and Improvement

Programs report the results of their outcome-based education framework based on their assessment plan activities as detailed in Standard I. Programs present and discuss assessment data and review actions for program improvement as needed in the key elements below. Each key element should demonstrate completion of the assessment process, review decisions, and program action. Finally, the program should demonstrate how results from assessment data and program responses are communicated to relevant communities of interest.

### Standard IV: Examples of Supporting Evidence

Standard IV Compliance by Key Element (KE)	Program Sources of Evidence	Examples of Supporting Evidence
Programs report results from Standard I assessment mechanisms, demonstrate completed review activities, and describe program improvement actions as needed:		
(IV-A) Demonstrate Graduate Achievement and Improvement	<ul style="list-style-type: none"> <li>▪ Current GAD Table (I-A and I-B)</li> <li>▪ Documentation of program review/action (I-B)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Present current required COAMFTE Graduate Achievement Data (GAD) table</li> <li>➤ Demonstration of data review for meeting established benchmarks or program improvement action as specified in Key Element I-B, e.g. faculty meeting minutes, Program Assessment report, or other program documents</li> </ul>
(IV-B) Demonstrate Program Goals (SLOs) Achievement and Improvement (I-A and B)	<ul style="list-style-type: none"> <li>▪ Current data for SLO target achievement (I-A)</li> <li>▪ Documentation of program review/action (I-B)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Display of aggregated data from V12.5 Student Learning Outcomes target measures</li> <li>➤ Demonstration of data review for meeting V12.5 SLO targets or program improvement action as specified in Key Element I-B, e.g. faculty meeting minutes, Program Assessment report, or other program documents</li> </ul>
(IV-C) Demonstrate Review and Improvement of Environmental Supports	<ul style="list-style-type: none"> <li>▪ Current data for Environmental Resources (I-C)</li> <li>▪ Documentation of program review/action (I-C Report Table)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Display of aggregated data from program mechanisms used to review Environmental Supports required in I-C</li> <li>➤ Demonstration of data review for maintenance of environmental supports and program improvement when needed as specified in Key Element I-C Report Table, e.g. faculty meeting minutes, Program Assessment report, or other program documents</li> </ul>
(IV-D) COI Communication regarding assessment results & actions	<ul style="list-style-type: none"> <li>▪ Documentation of program review/action (I-C Report Table)</li> </ul>	Verification of completed communication with relevant COI, consistent with feedback plan in I-C Report Table, e.g. Faculty meeting minutes, minutes of COI interactional events, program newsletters, email announcements, etc.

**Standard IV: Table Response Samples**

**Key Element IV-A: Demonstrated Graduate Achievement and Improvement**

The program demonstrates that aggregated data on graduate achievement is collected and reviewed as specified in Key Element I-B. Graduate achievement data and analysis demonstrate that the program is meeting established **benchmarks** or is using the data to make improvements.

**INTERPRETATION GUIDE**

**Rubric for Response**

- Identify the areas of graduate achievement, as defined in the glossary of COAMFTE Standards, and selected by the program for data collection.
- Analyze and present aggregated data for graduate achievement collected in Key Element I-B.
- Provide examples to demonstrate how the aggregated data is used to meet graduate achievement and/or for program improvement.

**Key Element IV-A: Demonstrated Graduate Achievement and Improvement**

**For programs RENEWING accreditation, complete the Graduate Achievement Data (GAD) Table below:**

Graduate Achievement Data	Evidence of Review of GAD	Action Taken/Program Improvement/Changes
Provide a link to the GAD Table displayed on the program website	Provide location/link/supporting appendices/page# of evidence (such as meeting minutes) showing that GAD data was reviewed	Provide examples of any actions taken or program improvements made in response to the review of GAD
[Link to actual GAD Table, not program landing page] <a href="https://institutionabc.org/mft/GAD">https://institutionabc.org/mft/GAD</a>	See Summary Table of GAD Review and Action in <a href="#">Appendix IV: Standard IV Evidence, pp. 1</a> ; See GAD Review Evidence with minutes of Core Faculty action in Spring MFT Faculty Retreat, 4.18.20, in <a href="#">Appendix IV: Standard IV Evidence, pp. 2</a> .	Changed alumni outreach effort to improve number of respondents

**For programs seeking INITIAL accreditation, complete Graduate Achievement Data (GAD) Table below:**

*(Refer to updated GAD table on COAMFTE forms page)*

<b>In master’s programs, please indicate if the COAMFTE established benchmark (70% pass rate on the MFT licensure exam for each cohort) was achieved:</b>	<b>YES</b>
---	------------

**If needed, provide narrative and/or contextual information to clarify the graduate achievement data:**

## Key Element IV-B: Demonstrated Achievement of Program Goals and Improvement

The program demonstrates that aggregated data on student achievement is collected and reviewed as specified in Key Element I-B. Student learning outcome data and analysis demonstrate that the program is meeting program goals or is using the data to make improvements.

### INTERPRETATION GUIDE

#### Rubric for Response

- Present aggregated data produced by the outcome-based education framework and assessment measures described in Standard I with clear targets for each student learning outcome.
- Provide evidence that data related to SLOs is used to inform program improvements when necessary.
- Describe program improvements implemented as needed, based on results from the review of data from SLOs.

Key Element IV-B: Demonstrated Achievement of Program Goals and Improvement				
Student Learning Outcome	Data	Evidence of Review of Data	Target Met	Action Taken/Program Improvement/Changes
	Provide location/link/supporting appendices/page #s where aggregated data for each Student Learning Outcome is located	Provide location/link/supporting appendices/page# of evidence (such as meeting minutes) showing that SLO data was reviewed	Was the target met? Provide overall findings of aggregated data	Provide examples of any actions taken or program improvements made in response to the review of student learning outcome data
SLO #1	Summary Table of SLO Review and Response in <a href="#">Appendix D: Standard IV Evidence, pp. 3 &amp; 4</a>	SLO Review Evidence with minutes of Core Faculty action in Spring MFT Faculty Retreat, 4.18.20 in <a href="#">Appendix D: Standard IV Evidence, pp. 5</a>	YES	
SLO #2	Same	Same	YES	
SLO #3	Same	Same	YES	
SLO #4	Same	Same	YES – with comment	Target met but diagnostic section of Supervisor Eval showed lowest scores. Program action taken to expand supervisory focus on application of diagnostic course content
SLO #5	Same	Same	YES – with comment	Target met but review discussion kept referencing

				ethical and cultural competency sections of Supervisor Eval. Faculty will review possible ways to explicitly breakout these sections of Supervisor Eval for scoring into this SLO
SLO #				
<b>If needed, provide narrative and/or contextual information to clarify the data used to demonstrate program goal achievement or to inform program improvement:</b>				

## Key Element IV-C: Review and Improvement of Environmental Supports

The program demonstrates that aggregated data on environmental supports are collected and reviewed as specified in Key Element I-C. Data and analysis from program review demonstrate that the program is maintaining its environmental supports or making improvements where needed.

### INTERPRETATION GUIDE

#### Rubric for Response

- Present aggregated data collected as specified in Key Element I-C.
- Provide evidence that data related to environmental supports/resources, including technology and teletherapy (if relevant) is used to inform program improvements when necessary.
- Describe program improvements implemented as needed, based on review of the environmental supports/resource data.

Key Element IV-C: Review and Improvement of Environmental Supports			
Resources	Data	Evidence of Review of Data	Action Taken/Program Improvement/Changes
(Must align with resources described in KE I-C)	Provide location/link/ supporting appendices/page# where aggregated data for each resource/support is located	Provide location/link/supporting appendices/page# of evidence (such as meeting minutes) showing that resource/support data was reviewed	Provide examples of any actions taken or program improvements made in response to the review of resource data
Diverse and Inclusive Learning Environment	See Summary Table of Environmental Supports Review and Response in <a href="#">Appendix D: Standard IV Evidence, pp. 6</a>	See Environmental Supports Review Evidence with minutes of Core Faculty action in Spring MFT Faculty Retreat, 4.18.20 in <a href="#">Appendix D:</a>	Most recent End of Year Survey data showed only modest satisfaction scores for questions 3, 9, 10. Additional comments noted

		<a href="#">Standard IV Evidence, pp. 7 &amp; 8</a>	specific need for program attention to implicit bias felt by queer and trans students. Program Director and Student Advisory Council will bring recommendations for action to core-faculty for consideration
Physical Resources	Same	Same	No action needed
Technology Resources	Same	Same	No action needed
Instructional Resources	Same		No action needed
Clinical Resources (including teletherapy and virtual supervision as applicable)	Same	Same	No action needed
Student Academic Resources	Same	Same	No action needed
Student Support Services	Same	Same	Review of student support service data showed students were experiencing long wait times to be seen at the institution's counseling center. Program director advocated for increased mental health options for MFT students through the Dean's Office
<b>If needed, provide narrative and/or contextual information to clarify the data used to demonstrate adequacy of environmental resources or to inform program improvement:</b>			



## Key Element IV-D: Communication with Communities of Interest

The program demonstrates that it communicates results of assessment data compiled according to the program's assessment plan (outlined in Standard I) and any resulting program changes to relevant communities of interest.

### INTERPRETATION GUIDE

#### Rubric for Response

- Provide evidence of communications provided to communities of interest regarding changes made to the program or its resources based on assessment data provided in Standard IV.

Key Element IV-D: Communication with Communities of Interest	
Communities of Interest	Provide location/link/supporting appendices/page# of evidence of communications with Communities of Interest
Students	See Summary Table of COI Engagement in Assessment Review in <a href="#">Appendix D, Standard IV Evidence: p. 9.</a> See COI Engagement Evidence with minutes from Fall Program Update with Program Director 9.18.20, in <a href="#">Appendix D: Standard IV Evidence: pp. 10 &amp; 11</a>
Noncore faculty & supervisors	See Summary Table of COI Engagement in Assessment Review in Appendix D, Standard IV Evidence: p. 9. See COI Engagement Evidence with minutes from Fall Faculty Meeting 10.2.20 plus copy of PD email update from 9.19.20, in <a href="#">Appendix D: Standard IV Evidence: pp. 12 &amp; 13</a>
Community Site Supervisors	See Summary Table of COI Engagement in Assessment Review in Appendix D, Standard IV Evidence: p. 9. See COI Engagement Evidence with agenda and minutes from Spring Community Advisory Group luncheon, 5.4.20, in <a href="#">Appendix D: Standard IV Evidence: pp. 14 &amp; 15.</a>
Program Graduates	See Summary Table of COI Engagement in Assessment Review in Appendix D, Standard IV Evidence: p. 9. See COI Engagement Evidence with Graduates Program Director Fall Newsletter 9.15.20, in <a href="#">Appendix D: Standard IV Evidence: pp. 16 &amp; 17.</a>

## Accreditation Standards Disclosure from Program Director

**Place an X in the box below to indicate your agreement with each of the following statements:**

- I have thoroughly reviewed all of the COAMFTE Version 12.5 Standards.
- I understand that submission of Self-Study does not guarantee nor imply a successful accreditation outcome.

I have read the accreditation standards and understand my role and responsibilities in the COAMFTE accreditation process.

---

*Type your name above or insert an electronic signature*