

MASTER'S OF FAMILY THERAPY

Program Handbook

Department of Marriage and Family Therapy

College of Health & Human Services

2024-2025 Academic Year



Southern Connecticut
State University



Dear MFT Program Community:

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

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

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

“Trust the process.”

Most Sincerely,

Mr. Paul Levatino

Paul Levatino, LMFT
Department Chairperson & Program Director

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MFT CORE FACULTY

NAME	PHONE	LOCATION	E-MAIL ADDRESS
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Dr. Rebecca Harvey	203-392-7262	Davis 16 E	harveyr7@southernct.edu
Dr. Sebastian Perumbilly	203-392-6410	Davis 16 C	perumbillys1@southernct.edu
Mr. Paul Levatino	203-392-7274	Davis 16 A	levatinop1@southernct.edu

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

MARRIAGE AND FAMILY THERAPY ADMINSTRATIVE ROLES

NAME	PHONE	LOCATION	E-MAIL ADDRESS
Paul Levatino, LMFT Associate Professor, Department Chairperson, Clinic Director	203-392-7274	Davis 16 A	levatinop1@southernct.edu
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Dr. Rebecca Harvey Professor, Admissions Coordinator	203-392-7262	Davis 16 E	harveyr7@southernct.edu
Sujatha Herne, LMFT Clinic Manager Offsite Placement Coordinao	203-392-6413	Davis 16 B	hernes1@southernct.edu
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Marriage and Family Therapy Program Southern Connecticut State University

Mission Statement

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

Accreditation and Developmental Core Competencies

The MFT program at SCSU is accredited by the *Commission on Accreditation for Marriage and Family Therapy Education* (COAMFTE). As a COAMFTE accredited program, designed to provide the rigorous training, our program trains therapists to be emerging professionals who demonstrate COAMFTE Developmental Competency Components (CDCCs):

- Knowledge of the MFT profession
- Practice of relational/systemic therapy as a qualified behavioral/mental health provider
- Commitment to ethical practice through ethical codes of the MFT profession and pertinent regulatory bodies
- Awareness, knowledge and skill to responsibly serve diverse communities
- Development and application of research to further the knowledge and practice of the MFT profession.

COAMFTE Graduate Achievement Standards

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

MARRIAGE & FAMILY THERAPY PROGRAM

Department of Marriage & Family Therapy | College of Health & Human Services

INSTITUTION'S MISSION

Southern Connecticut State University (SCSU) provides exemplary graduate and undergraduate education in the liberal arts and professional disciplines. As an intentionally diverse and comprehensive university, Southern is committed to academic excellence, access, social justice, and service for the public good.



PROGRAM'S MISSION

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

Program Goal 1

The program prepares students to deliver services to the community from a systemic lens.

Student Learning Outcome 1

Students will provide services to the community, practicing from a systemic lens.

Student Learning Outcome Targets

80% of students will score P or M in final semester of MFT 662 on the Evaluation of Student's Clinical Skills Rubric, 4.1, 4.2, 4.3, & 4.4; and 80% of students will pass Part 1 of the comprehensive examination by their second attempt.

Program Goal 2

The Program prepares students with a knowledge of systemic models of couples and family therapy.

Student Learning Outcome 2

Students will demonstrate knowledge of systemic models of couples and family therapy.

Student Learning Outcome Targets

80% of students will score 80% average or above on the four examinations of MFT 66g.

Program Goal 3

The program prepares students to demonstrate cultural humility in MFT practice.

Student Learning Outcome 3

Students will demonstrate cultural competency (cultural knowledge, awareness, sensitivity, and action).

Student Learning Outcome Targets

80% of students will score P or M in final semester of MFT 662 on the Evaluation of Student's Clinical Skills Rubric, 6.1, 6.2, 6.3, & 6.4; and 80% of students will pass Part 2 of the comprehensive examination by their second attempt.

Program Goal 4

The program is dedicated to ethical clinical practice in the field of MFT.

Student Learning Outcome 4

Students will demonstrate the ability to practice ethically.

Student Learning Outcome Targets

80% of students will score P or M in final semester of MFT 662 on the Evaluation of Student's Clinical Skills Rubric, 7.1, 7.2, 7.3, 7.4 & 7.5; and 80% of students will pass the Part 3 of the comprehensive examination by their second attempt.

Program Goal 5

The program prepares students to evaluate research in the field of family therapy.

Student Learning Outcome 5

Students will demonstrate the ability to analyze clinical research as an informed consumer.

Student Learning Outcome Targets

80% of students will score 80% or above in the Written Research Proposal assignment in MFT 587.

Academic Advisement

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

Responsibilities of the Advisor:

- Confer with students during the semester to review clinical/academic & Attitudes and Disposition standing
- Works closely with advisee in the event of academic probation
- Counsel advisee about academic, professional, and career issues
- Initiates meetings with advisee
- Perform as an academic manager and coordinator for students
- Serve as a student advocate during Student Review Committee

Responsibilities of Advisee:

- Initiate contacts with advisor
- Inform advisor of academic progress and standing (includes course work and field work)
- Confer with advisor about program and course selection
- Provide current information (address, phone numbers, name changes, etc.)
- Consult with advisor regarding potential changes in program plan.

Advisor List

Dr. Perumbilly	Dr. Liefeld	Prof. Levatino	Dr. Harvey
Nayara Alvarado (2024)	Martha Bean (2022 3-year)	Ethan Crans (2023 3-year)	David Zandile Benya (2020 3-year)
Dajanah Bird (2024)	Carmen Canales (2023 3-year)	Cornelius Dunn (2023 3-year)	Kendra Brown (2024 3-year)
Kelsey Burns (2021 3-year)	Summer Cipriano (2023 3-year)	Kevin Elliott (2024 3-year)	Lee Cummings (2023)
Vanessa Crawford (2022 3-year)	Christina Coppola (2022 3-year)	Lidiane Fernandes (2023)	Hayley D’Amico (2024)
Jillian Divergilio (2023)	Maurice Evans (2023)	Susan Gee Matthews (2023 3-year)	Sage DeLucia (2023)
Mary Franqui (2024)	Grasiela Kadiolli (2023)	Liam Griffin (2023)	Donna Dreska (2023 3-year)
Brandon Fulton (2024)	Kaya Klos (2024)	Isael Jimenez (2024)	Aron Edmonds (2024)
Elise Gilcher (2024)	Sophie Kuchel (2024 3-year)	*	Michelle Frenkel (2023)
Chelsea Gockel (2024)	Mariella Landry (2023)	Tatiana Perez (2024 3-year)	Shavonna Jenkins (2023)
Kathleen Henneberry (2023)	Abigail Lee (2024)	Alex Rodriguez (2023)	Megan Latte (2022)
Shalyn Moran (2023)	Shana McCarthy (2024)	Emily Schwartz (2023)	Keyaira Louis-Fin (2022 3-year)
Jennie Panchy (2023)	Amy Nelson (2024)	Ben Tesbir (2024)	Rylee Massoni (2024)
Erika Parent (2024)	Jamie Pietrosimone (2022 3-year)	Rachael Tilton (2023)	Savanna Polica (2024)
Isabella Vaccaro (2024)	Hannah Rosario (2023 3-year)	Nathan Truong (2022 3-year)	Leyana Thurston (2023 3-year)
	Rosenine Saint-Val (2023 3-year)	Irene Zheng (2024)	

PROGRAM PLANNING

Students may reference [Degree Works](#) for determining credits toward graduation within the planned program. Any change in your overall program must be approved by your advisor and Program Director.

DEGREE COMPLETION REQUIREMENTS & TIMELINES

Graduation from the MFT program requires: a) completion of 60 course credits, with a “C” or higher, in the planned program b) completion of client contact & supervision hours as outlined in the program handbook, c) successfully passing a Comprehensive Examination. Students have 6 years from the start of program matriculation to complete the degree. Students may request one, one-year extension, bringing the maximum completion time to 7 years.

COMPREHENSIVE EXAMINATION

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

STUDENT LEARNING OUTCOME (SLO) PROGRESS REPORT

Students are expected to meet Student Learning Outcomes as they progress through the planned program of study.

TRANSFER CREDITS

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

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

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

ACADEMIC CALENDAR

The academic calendar for the CSU system is found at: <https://www.ct.edu/academics/calendar>

The MFT program maintains a program specific calendar [here](#).

TUITION AND FEES

Tuition and Fees are published on the [SCSU website](#). Due to expenses related to clinical training, the MFT program has a \$150 per semester (full-time) or \$15 per credit (part-time) program fee.

GRADING AND ASSESSMENT

Grading criteria are detailed on each course syllabus. Courses must be completed with a “C” or higher to meet the curriculum requirement. Courses completed with a grade lower than “C” may be repeated. Students may appeal grades in accordance with the University’s grade appeal process found here: <https://inside.southernct.edu/faculty-senate/other-documents>

DIVERSITY, INCLUSION & NON-DISCRIMINATION POLICIES

As a program committed to social equity in the practice of couple and family therapy, Southern Connecticut State University and its Marriage and Family Therapy Program promotes a learning environment where diversity is welcomed, fostered, and honored. We view and define diversity in a broad sense, and through an intersectional lens, including differences in age, race, ancestry, ethnicity, color, national origin, culture, lifestyle, sexual orientation, gender, gender identity, gender expression, socioeconomic status, relationship status, religion, veteran status, religious or spiritual beliefs and affiliation, health status and disability. We promote diversity among our student body, faculty and supervisors, and in addition to agency settings and clientele served.

Southern Connecticut State University does not discriminate based on age, race, ancestry, ethnicity, color, national origin, culture, lifestyle, sexual orientation, gender, gender identity, gender expression, socioeconomic status, relationship status, religion, veteran status, religious or spiritual beliefs and affiliation, health status and disability. Information on filing a complaint of discrimination or harassment may be found here: <https://inside.southernct.edu/diversity/complaint-procedures>

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

Equal Opportunity for Diverse Learners and those with Differing Ability

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

Persons with disabilities at the University have the right to:

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

The University maintains a Center for Academic Success to support student success. Students with differing learning styles and needs can consult their website for available supports:

<https://inside.southernct.edu/casas>

Eligibility for Services and Accommodations

Students who seek support services from the Center for Academic Success and accommodations by the Marriage and Family Therapy Program are required to submit documentation to verify eligibility as defined under Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990.

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

SEXUAL MISCONDUCT INFORMATION & MANDATED REPORTING

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

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

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

MFT PROGRAM CODE OF CONDUCT

The CSU system Student Code of Conduct should be read and followed by ALL members of the Southern Connecticut State University community. Any violation of the Code will result in a meeting with the Office of Student Conduct and Civic Responsibility and possible disciplinary action. The CSU system code of conduct may be found here: <https://www.ct.edu/files/policies/2.1%20StudentCodeofConduct.pdf>

STUDENT LEAVE OF ABSENCE

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

DIRECTED INDEPENDENT STUDY POLICIES AND GUIDELINES

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

INTERNSHIP PLACEMENT

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

THE FAMILY THERAPY CLINIC

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

PROGRAM CLINICAL SUPERVISOR versus INSTRUCTIONAL FACULTY ROLES

The department recognizes that clinical training and instructional faculty roles can be confusing as students start clinic. Clinical Supervisors (instructors assigned to MFT 562, 563, 662, 663 & 664) hold professional liability and responsibility for all student intern cases. Therefore, students should consult their clinical supervisor for input regarding all clinical case matters (case scheduling, planning, conceptualization, treatment planning, termination, et al.). Instructional faculty should not become involved in student's clinical cases and must refer any case questions to the student' clinical supervisor. If a student needs immediate assistance and their clinical supervisor is unavailable, back-up for the clinic supervisor role is done through the clinic director and or clinic manager, who remain on-call at all times.

ACCRUING CLINICAL AND SUPERVISION HOURS

While participating in clinical training, students accrue direct clinical contact and relational/systemic supervision hours in alignment with COAMFTE accreditation and State of Connecticut licensure standards.

Requirements for graduation:

Direct Client Contact hours = 300 minimum; and of these 100 must be *relational hours*.

Relational hours = 100 minimum

Supervision hours = 100 minimum; and of these 50 must be *supervision utilizing observable data*.

Supervision utilizing observable data = 50 minimum

Supervision frequency = 1 hour per week, minimum (group or individual)

Direct Clinical Contact Hours are defined as a therapeutic meeting of a therapist and client (individual, relational, or group) occurring in-person synchronously, either physically in the same location or mediated by technology. Assessments may be counted if they are in-person processes that are more than clerical in nature and focus. Also, therapy services delivered through interactive team modalities may provide direct client contact for specific team members who have in-person interaction with the client/system during the session. Therapy team members who engage the therapeutic process only behind the mirror may not count the experience as direct client contact. Activities such as telephone contact, case planning, observation of therapy, record keeping, trainings, role-playing, travel, administrative activities, consultation with community members or professionals, and/or MFT relational/systemic supervision are not considered direct client contact (COAMFTE Standards 12.5, p. 37).

Relational Hours is a category of direct clinical contact hours in which a clinician delivers therapeutic services with two or more individuals conjointly, who share an ongoing relationship beyond that which occurs in the therapeutic experience itself. Examples include family subsystems, intimate couple subsystems, enduring friendship/community support subsystems, and residential, treatment, or situationally connected subsystems.

- Relational hours also may be counted with relational subsystems that include a person whose only available means to participate in the in-person therapeutic meeting is telephonic or electronic (e.g., incarcerated, deployed or out-of-town subsystem members.)
- Group therapy can be counted as relational hours if those in the group therapy have a relationship outside of (above and beyond) the group itself. Conversely, group therapy sessions of otherwise non-related individuals are not considered as relational hours (COAMFTE Standards 12.5, p. 42).

Standard 12 explains this as follows: “*Short-term and long-term residential/situationally focused subsystems may also provide relational hours experience when the context includes ongoing relationship interaction beyond sessions with significant influence on the individuals involved. Typical group therapy sessions of otherwise non-related individuals are not considered as relational hours...If the individuals in the group had relationships with one another before the group began, then the group therapy hours may be counted as relational. An example of this may be in-patient groups where the individuals lived together all day in a program.*” (COAMFTE Standards 12, p. 53)

Supervision hours must be supervision provided by an AAMFT Approved Supervisor or AAMFT Approved Supervisor Candidate. Individual supervision is defined as one supervisor with 1 or 2 supervisees. Group supervision is defined as one supervisor with 8 or fewer supervisees.

Supervision utilizing Observable Data includes supervision provided by an AAMFT Approved supervisor (or Candidate) reviewing your therapy via audio or video recordings, as well as live (behind the mirror, in the room co-therapy, reflecting teams, etc.). For guidance, [see this COAMFTE resource](#).

Policy on Regular/Consistent and Supervision Interruption Policy (planned or unplanned)

Students with an active caseload at the Family Clinic receive one hour of weekly supervision (minimum) with an LMFT, who is also an AAMFT approved supervisor (or candidate). In the event of an interruption to this supervision schedule (e.g. student absence), the course instructor and student will arrange a substitute session (which may be virtual supervision scheduled via the program's HIPAA compliant telehealth portal). The Clinic Director is on-call and provides emergency intern supervision for any acute client situation. The Clinic Manager provides backup for the Clinic Director.

Telehealth Compliance & Virtual Supervision Compliance Policy

All students complete a comprehensive training in telehealth within MFT 548 and agree to abide by the SCSU MFT Telehealth Policy. The MFT program at SCSU is an on-ground program and clinical supervision takes place in person. However, in situations such as inclement weather, the program may utilize virtual supervision on a secure, HIPAA compliant WebEx portal. During Virtual Supervision, students must be in a physical location that ensures privacy and client confidentiality. Currently, the State of Connecticut treats live and virtual supervision identically and there are no restrictions on the number of hours that virtual supervision may be utilized for interns. SCSU's MFT program is working in conjunction with [Connecticut Association for Marriage and Family Therapy](#) (CTAMFT) and Department of Public Health staff to develop and pass specific legislative guidance on virtual supervision in State CT healthcare statutes. All supervision maintains compliance with [AAMFT Code of Ethics, Standard VI](#). The program tracks and monitors current/emerging guidelines to ensure compliance.

Compliance with Relevant Federal, State and Provincial Regulatory Requirements

In accordance with [CT Senate Bill No. 302](#) (approved June 12, 2018), telehealth and virtual supervision are permissible in Connecticut. Each student receives an individual HIPAA compliant WebEx account for all telehealth and virtual supervision sessions. Due to liability matters, students may use these accounts for program class and Family Clinic matters, and not offsite placement caseload. The University maintains a business affiliation agreement with WebEx and the portal meets the requirements of [CT Public Act 18-148](#) and [Chapter 383a of the CT Statutes](#).

Clinical Readiness

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

Criminal Background Check and State Licensure

Marriage and Family Therapy is a licensed profession in all 50 of the United States. Becoming licensed is contingent upon a candidate's professional, legal, and character fitness. To ensure the safety of clients, all states ask questions about the criminal background information of the therapist during the licensure process. Therefore, before applying as a candidate for the MFT program, it is the responsibility of applicants to assess they do not have a criminal background that could preclude licensure. Though the MFT program may not require a criminal background check, it is the *sole responsibility* of the applicant to have their criminal background check completed and decide if it is appropriate to apply at Southern Connecticut State University's MFT program.

EVALUATION OF STUDENTS

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

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

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

1. Professional Attitudes and Dispositions Assessment

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

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

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

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

A student whose GPA falls below 3.0 during the last semester of course work will be placed on probation and given one semester to raise the GPA to the 3.0 level required for graduation. If, after completing an additional semester of work, the GPA is still

below 3.0, the student will be dismissed. *Conditionally accepted students* must meet the terms of their acceptance letter, issued by SCSU's Graduate Office, to remain enrolled in the program.

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

Procedures for addressing issues with Internship related problems:

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

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

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

a) The AAMFT Code of Ethics

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

b) University Standards for Student Behavior

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

c) SCSU Graduate Student Handbook

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

STUDENT REVIEW COMMITTEE, REMEDIATION, AND DISMISSAL

Role and Function

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

The SRC is responsible for:

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

a) Assisting faculty in assessment of student performance concerns

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

b) Tailoring and designing appropriate remediation plans

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

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

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

When a student is in violation of University Policy and/or the Student Code of Conduct, and/or the student is unable or unwilling to complete the remediation plan outlined in this policy the student is subject to dismissal from the program. In this case, the ultimate decision making is made by the SRC.

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

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

The Program Director or another core faculty member calls a meeting to discuss student progress and performance. The meeting will include the student, student's faculty advisor, and relevant staff/faculty. The student can bring an advocate support person. (The advocate may attend to support the student but is not offered a

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

GRADE APPEAL POLICY

Students have the right to appeal grades in accordance with the University's grade appeal process found here: <https://inside.southernct.edu/faculty-senate/other-documents>

COMMUNITY MEMBER CONCERN, COMPLAINT & GRIEVANCE POLICY

The MFT program promotes an open, transparent culture and maintains this policy to resolve student complaints and grievances. If a community member has a complaint or dispute concerning a professor or supervisor, or if you have concerns with any aspect of the program, you should first attempt to resolve the problem directly with the party involved. If a satisfactory outcome cannot be worked out, please bring your concern to the student's advisor. They will explore the issue thoroughly and, if possible, work out a remedy. If, after discussing the concern with the student advisor (or if the person with whom you have the dispute is the advisor), please bring your concern to the Department Chair, who will mediate the concern and attempt to settle the matter. If further appeal is warranted, the grievance should be brought to the office of the Associate Dean of the College of Health and Human Services, who will mediate the concern and attempt to settle the matter. If the student believes the issue has not been addressed in due diligence, the matter may be brought to our external accreditation organization, [COAMFTE](#), who will ask us to explain the matter and our action.

Matters involving sexual harassment, discrimination and harassment, the Americans with Disabilities Act, and Title IX should be brought directly to the [Office of Diversity and Equity](#). Matters involving faculty and staff employment grievances should follow all [Human Resource](#) guidelines and may be brought to the corresponding [Union representative](#) for action.

STUDENT MAILBOXES

Once students begin practicum, mail and other notices will be distributed in students' mailboxes located in the department's Clinic, located in Davis Hall.

GRADUATION APPLICATION

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

CAMPUS POLICE

The Campus Police Department is located behind the Health Center in Granoff Hall.

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

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

BOOKSTORE

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

UNIVERSITY CLOSING

In the event of severe weather conditions that could result in the closing of the University, students are advised check the University's homepage or call 203-392-SNOW, the Weathercheck Line. Information on inclement weather closings may be found here: <https://inside.southernct.edu/emergency-preparedness/inclement-weather-emergencies>

IDENTIFICATION CARDS

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

HEALTH SERVICES

The Granoff Student Health Center is located in Granoff Hall on Wintergreen Avenue in a building that it

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

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

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

LIBRARY

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

An online public access catalog (OPAC) is available replacing and extending the traditional card catalog.

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

Library Cards

Your current validated Hoot Loot card is your library card.

Book Loans

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

Overdue Books and Materials

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

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

Fines and Penalties

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

Lost Books

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

Reserve Books

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

Periodicals

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

Library Instruction

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

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

Lost and Found

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

Notary Public

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

Tyco Copy Center

A full-service copy center is conveniently located in Engleman Hall. Most of your copying needs can be fulfilled while you wait. The copy center is open Monday through Friday from 8:00 a.m. to 4:30 p.m.

Video Calendar

The digital signs in the Student Center are a part of the growing network of signs across campus, the information that is displayed can reach not only the student center, but also the residential housing areas. To learn more visit:

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

Academic Computer Center

The Academic Computer Center, located in Jennings Hall, is open from 8:10a.m. to 9:45p.m. on weekdays, from 10:00a.m. until 4:45p.m. on Saturdays, and from 12:10p.m. until 4:45p.m. on Sundays.

There are over 100 personal computers as well as 40 terminals attached to the VAX 7000-630 computer.

Student Records

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

Graduation

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

Job Placement

The Marriage and Family Therapy Program aids with job placement by posting employment opportunities received by the program on our facebook alumni page, and via internal email.

Change of Course Schedule

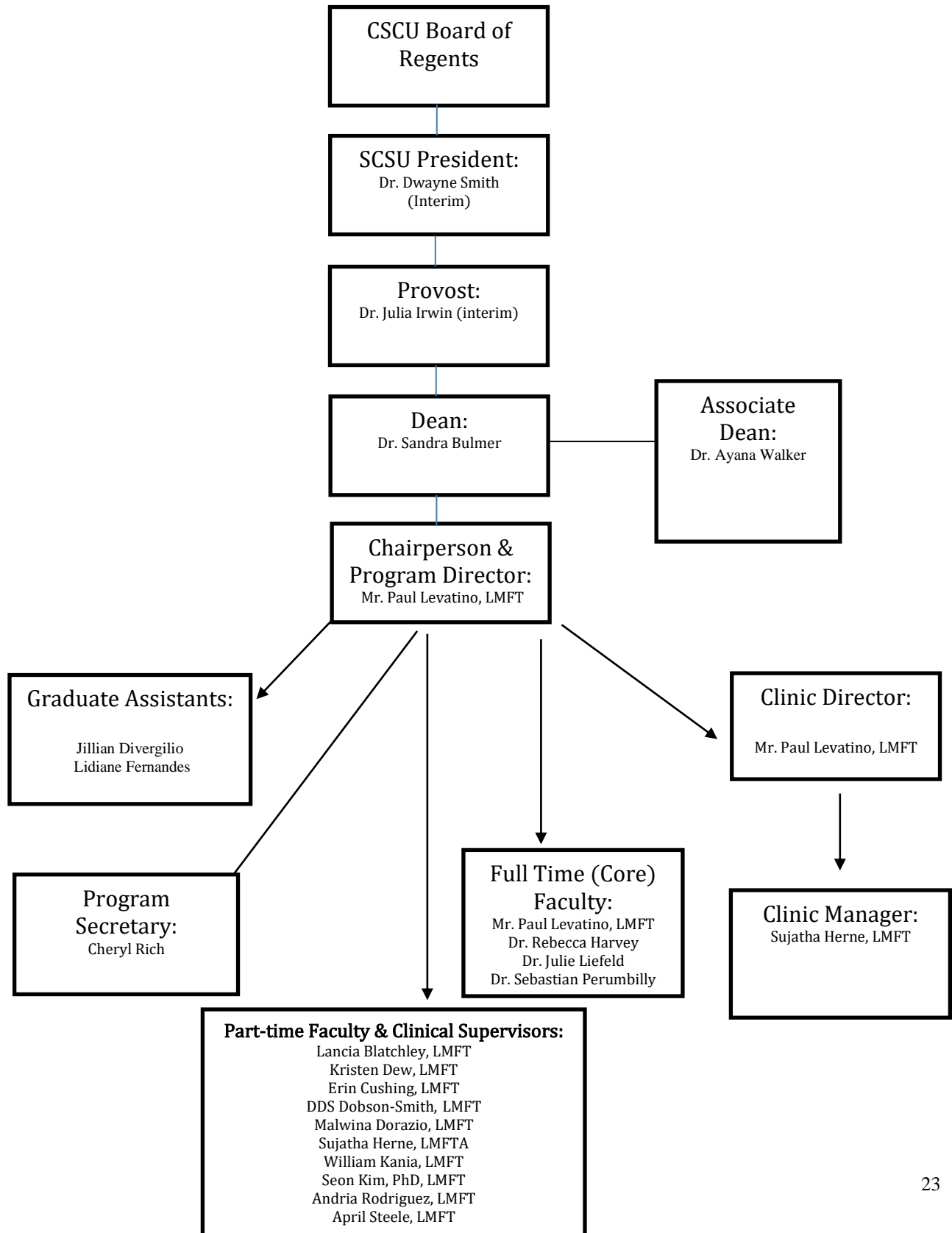
A student may drop a course by obtaining the necessary forms from the Registrar and obtaining approval of the advisor. Adding a course or changing a section must have the approval of the advisor and the Program Coordinator and be completed in the add/drop period. Please be aware that changes in course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

Graduation Marriage and Family Therapy Organization (GMFTO)

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

Appendix A:

Organizational Chart: Marriage and Family Therapy Department



MFT Program Director Job Description

The SCSU MFT Program Director is a core faculty member, AAMFT Approved Supervisor, assigned ultimate responsibility for the administration of the MFT program. Their direction and oversight of the program occurs continuously throughout the year (12 months).

The Program Director effectively:

- demonstrates professional identity as a Marriage and Family Therapist.
- oversees the outcome-based education framework, assessment activities, curriculum, clinical training program, facilities, services, and the maintenance and enhancement of the program's quality.

The Program Director 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.

Part-time Faculty Appointment

Part-time faculty play a significant role in the life of the MFT Department. Part time faculty protected and advocated for within the AAUP contract. The MFT Program Director appoints part-time faculty to serve on a per-semester appointment basis in full accordance with the terms and condition outlined in the active AAUP contract.

Full-time Faculty Evaluation

Full-time faculty are reviewed and evaluated per the terms of the AAUP contract and the Faculty Senate mandated process as outlined in the [Annual Data Collection and Review process](#). This involves the Promotion and Tenure, and the Sixth-year Professional Assessment processes outlined on the [Faculty Senate website](#).

Part-time Faculty and Clinical Supervisor Evaluation

The MFT program at SCSU evaluates part-time faculty and Clinical Supervisors as outlined in the [Annual Data Collection and Review process](#), including a peer mentorship/evaluation model (at minimum) every two years. This evaluation process aligns with all the terms and conditions outlined within the AAUP contract. The mentorship/evaluation process is as follows:

1. Part-time faculty member self-assesses/evaluates using the *Marriage and Family Therapy Part-time faculty initial self-evaluation form* and submits the form to core faculty mentor.
2. Core faculty arranges and completes classroom/supervision observation and their portion of the evaluation form.
3. Part-time faculty member and core faculty member share feedback from the observation.
4. Part-time faculty member completes a finalized self-assessment/evaluation, integrating information from self & core faculty member evaluation.
5. Part-time faculty member signs and return to Program Director.

Appendix B:

WEBLINK DATA:

Leave of Absence & Program Withdrawal Forms:

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

Application for Independent Study

<https://inside.southernct.edu/sites/default/files/inline-files/Independent-Study-Form-Graduate.pdf>

Southern Connecticut State University Graduate Catalog

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

Academic Calendars

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

Tuition and Fees

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

Appendix C

MFT Student Progress Report

Student Name: _____

Cohort Year: _____

1. Pass Professional Attitudes & Disposition Scale: Every student is evaluated for these skills every November.
Year 1: Developing Appropriately Needs Attention
Year 2: Developing Appropriately Needs Attention
Year 3 (optional): Developing Appropriately Needs Attention

2. Meet Satisfactory Academic Requirements (3.0 or higher GPA, per terms [of SCSU graduate school policy](#)):
Fall year 1 Spring year 1 Summer year 1
Fall year 2 Spring year 2 Summer year 2
Fall year 3 (if needed) Spring year 3 (if needed) Summer year 3 (if needed)

3. Clinical Readiness
Part A SCSU MFT Clinic Readiness
Student ready

Part B Offsite Readiness
Student ready

4. Pass Comprehensive Examination
Question #1 Pass 1 Pass 2 Pass >2 Fail
Question #2 Pass 1 Pass 2 Pass > 2 Fail
Question #3 Pass 1 Pass 2 Pass > 2 Fail

5. Successful completion of Clinical Direct Client Contact and Supervision Hours
Complete Incomplete

Appendix D:

Graduate Achievement Data (GAD) Collection Policy

COAMFTE requires GAD submission each year (currently the SCSU deadline for submission is July 31) and SCSU's MFT Program collects GAD to comply with all accreditation requirements. Aggregate GAD is available on the [Program's website](#) (lower portion of the landing page).

Graduates with outstanding GAD are surveyed yearly until outstanding data elements are collected. Once all data elements are collected, a student is no longer surveyed. The Program collects and maintains the phone number and email address of graduates. Initial surveys are conducted via email. If a survey is not returned, the GAD Coordinator sends a second email request. If the second email is unanswered, the GAD coordinator attempts to contact the graduate and obtain the information through a phone interview. If phone interview attempts are unsuccessful, the GAD Coordinator uses online resources to check if a graduate has obtained licensure through online resources, such as the State of Connecticut's Department of Public Health Online [license verification tool](#). All GAD is reported in aggregate form; all responses from graduates are confidential and graduates name are never attached to GAD reports.

Appendix E:

SCSU Clinical Readiness Policy

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

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

Part B) Readiness for Offsite Placement

(In addition to requirements above):

- Passing the Evaluation of Clinical Skills in MFT 563 - Practicum II AND course grade above 'C'

Or:

- Active enrollment and satisfactory academic progress in MFT 563, plus course instructor, and Offsite Placement Coordinator (OPC) approval to begin Placement.

Appendix F:

Marriage and Family Therapy Off- site Internship Appendix

**Marriage and Family Therapy
Southern Connecticut State University
Davis Hall Room 18
501 Crescent St.
New Haven, CT 06515**

MFT Office

Phone: 203-392-6414

Fax: 203-392-6441

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

Marriage and Family Therapy Department

Dear MFT Colleagues and Students:

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

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

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

Sincerely,

The Marriage and Family Therapy Department

Introduction

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

The MFT faculty considers internship to be an essential experience within each student's professional preparation. The experience provides an opportunity to translate theory into practice and enhance skills learned in the classroom and MFT Clinic to a community-based setting. Internship also offers an opportunity to further develop a professional identity and liaison with other mental health professionals for potential post graduate employment.

This Appendix will help to clarify what is expected and how MFT Interns are evaluated.

If you have any questions, please don't hesitate to contact the Off-Campus Placement Coordinator.

Off- Campus Internship Coordinator

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

Internship

The Internship is the culmination of the academic preparation to become a professional therapist. This supervised 6-10 hour a week experience enables students to focus on a broad range of competencies and skills. Students start placement by the fall semester of the second year in the MFT Program (fall semester year two for part-time students) and placement requires a minimum of a 12-month commitment to an off-campus internship site, accruing hours towards the 300 direct COAMFTE mandated client contact hours needed for graduation. Students stay in offsite placement *through graduation, and* 12-months minimum.

Direct Contact Hours

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

SCSU Marriage and Family Therapy Clinic

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

Clinical Off-site Placements

Clinical Off-site Internship placements are designed to provide the knowledge and skills required for therapists to work in a variety of community settings, including mental health centers, substance abuse

treatment programs, social service agencies, residential and intensive outpatient, and home-based programs. Accordingly, the off-campus Internship site will provide Internship students with experiences that may include but are not limited to:

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

Goals of the Off-Campus Internship

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

Procedure for managing difficulties with sites, supervisors, and students

The MFT Program at SCSU believes conflicts and difficulties are best addressed when they emerge, and between the individuals involved in the conflict. However, if a difficulty involving a site, supervisor and student cannot be resolved between the two parties, the following procedure should be followed:

- 1) Either or both parties should notify the off-site placement coordinator.
- 2) The offsite placement supervisor will intervene and mediate the concern(s) the parties cannot settle.
- 3) Conflicts that involve inadequate intern performance (i.e. clinical, technical standard, attitudes and disposition performance) shall be referred to the MFT program's Student Evaluation Committee.
- 4) As a last resort and if the difficulties cannot be ameliorated through the mediation efforts of the offsite placement coordinator, with approval from the offsite placement coordinator, the student intern or site placement can cease their relationship, (interns must find an alternative placement to reach the one year, offsite placement program requirement).

Placement sites are required to practice ethically and in a relationally just manner. If a site does not address recommendations put forward by the offsite-placement coordinator, interns may be removed from a placement site, and subsequent placements denied. Appeals to decision such as this may be brought to the MFT Chairperson.

OFF- CAMPUS SUPERVISORS

Off-Campus Internship Supervisors qualifications:

Site supervisors:

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

Responsibilities of Off- Campus Internship Supervisors

- Provide training that orients interns to agency mission, goals, internal operating procedures, staff, emergency procedures and available related agency and community resources.
- Follow the ethical standards of the American Association of Marriage and Family Therapy (AAMFT), applicable federal and state laws, and departmental and university procedures regarding fieldwork and evaluation of students. Supervisors should be particularly familiar with Principal IV: Responsibilities to students and supervisees.
- Provide adequate workspace and necessary supplies and equipment to interns.
- Assign clinical and site responsibilities, which consider the intern's learning needs and the ongoing development of their skills, integrated with the needs of the agency.
- Supervise intern's off-campus clinical work. Logistically this means that the off-campus supervisor is responsible for supervising the diagnosis of clients/families, the process and consequences of treatment, and all therapy-related responsibilities and outcomes.
- In their absence, ensure that back-up supervision is provided to interns. Assess intern's therapy skills. This may be done by case review, observing sessions, co-counseling, and/or reviewing video/audio tapes of the intern's work.
- Ensure intern primary responsibilities remain clinical in nature and not that of clerical assistants.
- Contact the SCSU faculty liaison immediately in the event the intern is not performing satisfactorily.
- Inform interns of the legal and ethical issues pertinent to therapy and our profession.
- Regularly review case notes & records kept by student to ensure that these are kept according to site requirements, the AAMFT ethical code, and federal and state laws.
- Schedule weekly 1 hour individual supervision with interns.
- Provide ultimate responsibility for client/family issues. As the professional who is supervising the intern, you are ultimately responsible for the actions of the intern and the well-being of clients/families.
- Provide ongoing feedback to interns regarding their skill development and thoughtfully complete the required final semester evaluation of interns (late November, April, July). Review these evaluations with the intern.
- Review and sign intern's fieldwork and supervision log.
- Be available for employment/job search/licensure related discussions.
- Ongoing performance feedback and review of intern's learning goals
- Discussions regarding linking theory to practice
- Discussions regarding personal and professional and self-of-the-therapist development.

- In addition to supervision & training, the off-site supervisor ensures the intern has time away from the site to participate in required (infrequent) departmental meetings, academic courses, and employment interviews.

MFT Interns

Preparation & Prerequisites

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

Site Selection: Interns

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

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

Securing a Site

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

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

Interviewing at a Site:

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

- Dress professionally.
- Take a copy of your resume and a list of your references.
- You may take a small professional portfolio.
- Develop your own list of ideas and questions related to how this placement might prove mutually beneficial to you and to the site.
- Begin to formulate the goals that you want to accomplish within this experience.
- Be thoroughly familiar with this handbook so that you can be clear about expectations, especially those affecting the site supervisor.

- Be thoroughly familiar with the site, the client population and why you believe that you would be a 'good fit' as an intern at this site.
- Be prepared to clarify the internship requirements and expectations.

Site Approval:

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

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

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

Site Orientation:

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

Starting your Internship:

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

Internship Requirement Summary

- Minimum of 12-month placement, and in placement through graduation.
- 1-hour weekly on-site supervision by off-site internship supervisor.
- Ongoing enrollment in group supervision with MFT faculty Clinical Supervisor (MFT 562, 563, 662, 663, 664, or 671)

Liability Insurance:

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

Grading of Internship

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

Professional Considerations

Ethical Guidelines:

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

Supervisor. If it is a non-emergency ethical question, bring the questions to your next MFT on-campus supervision meeting or individual supervision.

Confidentiality:

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

Note that confidentiality is a part of the informed consent process. Informed consent is your responsibility and should occur at the start of the therapeutic relationship. In addition, the limits of confidentiality should be addressed and defined in a developmentally appropriate manner. Other key aspects of confidentiality are located in the ethical codes listed in Appendix A.

Developing the Self-of-the-Therapist:

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

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

Supervision and Feedback:

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

To get the most effective training for your future profession, you are encouraged take an active role in your supervision sessions. The best way for you as an Intern to reap the benefits of supervision is to come to each session fully prepared. Bring specific questions that you may have for your supervisor in areas that you would like to receive feedback and guidance. Your supervisor will be reviewing and critiquing your therapy sessions and, you should be active in this process as well. After your therapy sessions, you may choose to review the session yourself, critiquing it and developing questions to discuss before you come to supervision.

Self-Care

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

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

Physical:

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

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

Social:

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

Emotional:

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

Spiritual:

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

Recreational:

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

Hints for Interns

- Consult with the Off-site Placement Coordinator as needed.
- Follow your MFT planned program. If you have any questions, contact your MFT Program Advisor.
- Mark your calendar for all deadline dates, cohort meetings, graduation and comp exam schedules.
- Complete and submit Internship forms BEFORE the beginning of your internship semester.
- Obtain liability insurance BEFORE beginning your Practicum work in the MFT Clinic and be sure it is updated for Internship.
- Make copies of all paperwork for your records before you submit them and keep a file of all your internship and practicum documents including hours.

- Do not see clients before the semester begins, before obtaining signatures on agreement forms or before checking on the update of your liability insurance and receiving written approval by the Off-site Placement Coordinator.

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

Supplements

AAMFT Code of Ethics	Supplement A
Internship Agreement	Supplement B
Internship Information Form	Supplement C
Professional Attitude and Dispositions	Supplement D

Supplement A:

All MFT Students agree to abide by the terms and conditions of AAMFT's Code of Ethics:

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

PREAMBLE

The Board of Directors of the American Association for Marriage and Family Therapy (AAMFT) hereby promulgates, pursuant to Article 2, Section 2.01.3 of the Association's Bylaws, the Revised AAMFT Code of Ethics, effective January 1, 2015.

Honoring Public Trust

The AAMFT strives to honor the public trust in marriage and family therapists by setting standards for ethical practice as described in this Code. The ethical standards define professional expectations and are enforced by the AAMFT Ethics Committee.

Commitment to Service, Advocacy and Public Participation

Marriage and family therapists are defined by an enduring dedication to professional and ethical excellence, as well as the commitment to service, advocacy, and public participation. The areas of service, advocacy, and public participation are recognized as responsibilities to the profession equal in importance to all other aspects. Marriage and family therapists embody these aspirations by participating in activities that contribute to a better community and society, including devoting a portion of their professional activity to services for which there is little or no financial return. Additionally, marriage and family therapists are concerned with developing laws and regulations pertaining to marriage and family therapy that serve the public interest, and with altering such laws and regulations that are not in the public interest. Marriage and family therapists also encourage public participation in the design and delivery of professional services and in the regulation of practitioners. Professional competence in these areas is essential to the character of the field, and to the well-being of clients and their communities.

Seeking Consultation

The absence of an explicit reference to a specific behavior or situation in the Code does not mean that the behavior is ethical or unethical. The standards are not exhaustive. Marriage and family therapists who are uncertain about the ethics of a particular course of action are encouraged to seek counsel from consultants, attorneys, supervisors, colleagues, or other appropriate authorities.

Ethical Decision-Making

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

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

Binding Expectations

The AAMFT Code of Ethics is binding on members of AAMFT in all membership categories, all AAMFT Approved Supervisors and all applicants for membership or the Approved Supervisor designation. AAMFT members have

an obligation to be familiar with the AAMFT Code of Ethics and its application to their professional services. Lack of awareness or misunderstanding of an ethical standard is not a defense to a charge of unethical conduct.

Resolving Complaints

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

Aspirational Core Values

The following core values speak generally to the membership of AAMFT as a professional association, yet they also inform all the varieties of practice and service in which marriage and family therapists engage. These core values are aspirational in nature, and are distinct from ethical standards. These values are intended to provide an aspirational framework within which marriage and family therapists may pursue the highest goals of practice. The core values of AAMFT embody:

1. Acceptance, appreciation, and inclusion of a diverse membership.
2. Distinctiveness and excellence in training of marriage and family therapists and those desiring to advance their skills, knowledge and expertise in systemic and relational therapies.
3. Responsiveness and excellence in service to members.
4. Diversity, equity and excellence in clinical practice, research, education and administration.
5. Integrity evidenced by a high threshold of ethical and honest behavior within Association governance and by members.
6. Innovation and the advancement of knowledge of systemic and relational therapies.

Ethical Standards

Ethical standards, by contrast, are rules of practice upon which the marriage and family therapist is obliged and judged. The introductory paragraph to each standard in the AAMFT Code of Ethics is an aspirational/explanatory orientation to the enforceable standards that follow.

STANDARD I

RESPONSIBILITY TO CLIENTS

Marriage and family therapists advance the welfare of families and individuals and make reasonable efforts to find the appropriate balance between conflicting goals within the family system.

1.1 Non-Discrimination.

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

1.2 Informed Consent.

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

1.3 Multiple Relationships.

Marriage and family therapists are aware of their influential positions with respect to clients, and they avoid exploiting the trust and dependency of such persons. Therapists, therefore, make every effort to avoid conditions and multiple relationships with clients that could impair professional judgment or increase the risk of exploitation. Such relationships include, but are not limited to, business or close personal relationships with a client or the client's immediate family. When the risk of impairment or exploitation exists due to conditions or multiple roles, therapists document the appropriate precautions taken.

1.4 Sexual Intimacy with Current Clients and Others.

Sexual intimacy with current clients or with known members of the client's family system is prohibited.

1.5 Sexual Intimacy with Former Clients and Others.

Sexual intimacy with former clients or with known members of the client's family system is prohibited.

1.6 Reports of Unethical Conduct.

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

1.7 Abuse of the Therapeutic Relationship.

Marriage and family therapists do not abuse their power in therapeutic relationships.

1.8 Client Autonomy in Decision Making.

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

1.9 Relationship Beneficial to Client.

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

1.10 Referrals.

Marriage and family therapists respectfully assist persons in obtaining appropriate therapeutic services if the therapist is unable or unwilling to provide professional help.

1.11 Non-Abandonment.

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

1.12 Written Consent to Record.

Marriage and family therapists obtain written informed consent from clients before recording any images or audio or permitting third-party observation.

1.13 Relationships with Third Parties.

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

STANDARD II

CONFIDENTIALITY

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

2.1 Disclosing Limits of Confidentiality.

Marriage and family therapists disclose to clients and other interested parties at the outset of services the nature of confidentiality and possible limitations of the clients' right to confidentiality. Therapists review with clients the circumstances where confidential information may be requested and where disclosure of confidential information may be legally required. Circumstances may necessitate repeated disclosures.

2.2 Written Authorization to Release Client Information.

Marriage and family therapists do not disclose client confidences except by written authorization or waiver, or where mandated or permitted by law. Verbal authorization will not be sufficient except in emergency situations, unless prohibited by law. When providing couple, family or group treatment, the therapist does not disclose information outside the treatment context without a written authorization from each individual competent to execute a waiver. In the context of couple, family or group treatment, the therapist may not reveal any individual's confidences to others in the client unit without the prior written permission of that individual.

2.3 Client Access to Records.

Marriage and family therapists provide clients with reasonable access to records concerning the clients. When providing couple, family, or group treatment, the therapist does not provide access to records without a written authorization from each individual competent to execute a waiver. Marriage and family therapists limit client's access to their records only in exceptional circumstances when they are concerned, based on compelling evidence, that such access could cause serious harm to the client. The client's request and the rationale for withholding some or all of the record should be documented in the client's file. Marriage and family therapists take steps to protect the confidentiality of other individuals identified in client records.

2.4 Confidentiality in Non-Clinical Activities.

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

2.5 Protection of Records.

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

2.6 Preparation for Practice Changes.

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

2.7 Confidentiality in Consultations.

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

STANDARD III

PROFESSIONAL COMPETENCE AND INTEGRITY

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

3.1 Maintenance of Competency.

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

3.2 Knowledge of Regulatory Standards.

Marriage and family therapists pursue appropriate consultation and training to ensure adequate knowledge of and adherence to applicable laws, ethics, and professional standards.

3.3 Seek Assistance.

Marriage and family therapists seek appropriate professional assistance for issues that may impair work performance or clinical judgment.

3.4 Conflicts of Interest.

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

3.5 Maintenance of Records.

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

3.6 Development of New Skills.

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

3.7 Harassment.

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

3.8 Exploitation.

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

3.9 Gifts.

Marriage and family therapists attend to cultural norms when considering whether to accept gifts from or give gifts to clients. Marriage and family therapists consider the potential effects that receiving or giving gifts may have on clients and on the integrity and efficacy of the therapeutic relationship.

3.10 Scope of Competence.

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

3.11 Public Statements.

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

3.12 Professional Misconduct.

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

at any point from the inception of an ethical complaint through the completion of all proceedings regarding that complaint.

STANDARD IV

RESPONSIBILITY TO STUDENTS AND SUPERVISEES

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

4.1 Exploitation.

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

4.2 Therapy with Students or Supervisees.

Marriage and family therapists do not provide therapy to current students or supervisees.

4.3 Sexual Intimacy with Students or Supervisees.

Marriage and family therapists do not engage in sexual intimacy with students or supervisees during the evaluative or training relationship between the therapist and student or supervisee.

4.4 Oversight of Supervisee Competence.

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

4.5 Oversight of Supervisee Professionalism.

Marriage and family therapists take reasonable measures to ensure that services provided by supervisees are professional.

4.6 Existing Relationship with Students or Supervisees

Marriage and family therapists are aware of their influential positions with respect to supervisees, and they avoid exploiting the trust and dependency of such persons. Supervisors, therefore, make every effort to avoid conditions and multiple relationships with supervisees that could impair professional judgment or increase the risk of exploitation. Examples of such relationships include, but are not limited to, business or close personal relationships with supervisees or the supervisee's immediate family. When the risk of impairment or exploitation exists due to conditions or multiple roles, supervisors document the appropriate precautions taken.

4.7 Confidentiality with Supervisees.

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

4.8 Payment for Supervision.

Marriage and family therapists providing clinical supervision shall not enter into financial arrangements with supervisees through deceptive or exploitative practices, nor shall marriage and family therapists providing clinical supervision exert undue influence over supervisees when establishing supervision fees. Marriage and family therapists shall also not engage in other exploitative practices of supervisees.

STANDARD V

RESEARCH AND PUBLICATION

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

5.1 Institutional Approval.

When institutional approval is required, marriage and family therapists submit accurate information about their research proposals and obtain appropriate approval prior to conducting the research.

5.2 Protection of Research Participants.

Marriage and family therapists are responsible for making careful examinations of ethical acceptability in planning research. To the extent that services to research participants may be compromised by participation in research, marriage and family therapists seek the ethical advice of qualified professionals not directly involved in the investigation and observe safeguards to protect the rights of research participants.

5.3 Informed Consent to Research.

Marriage and family therapists inform participants about the purpose of the research, expected length, and research procedures. They also inform participants of the aspects of the research that might reasonably be expected to influence willingness to participate such as potential risks, discomforts, or adverse effects. Marriage and family therapists are especially sensitive to the possibility of diminished consent when participants are also receiving clinical services, or have impairments which limit understanding and/or communication, or when participants are children. Marriage and family therapists inform participants about any potential research benefits, the limits of confidentiality, and whom to contact concerning questions about the research and their rights as research participants.

5.4 Right to Decline or Withdraw Participation.

Marriage and family therapists respect each participant's freedom to decline participation in or to withdraw from a research study at any time. This obligation requires special thought and consideration when investigators or other members of the research team are in positions of authority or influence over participants. Marriage and family therapists, therefore, make every effort to avoid multiple relationships with research participants that could impair professional judgment or increase the risk of exploitation. When offering inducements for research participation, marriage and family therapists make reasonable efforts to avoid offering inappropriate or excessive inducements when such inducements are likely to coerce participation.

5.5 Confidentiality of Research Data.

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

5.6 Publication.

Marriage and family therapists do not fabricate research results. Marriage and family therapists disclose potential conflicts of interest and take authorship credit only for work they have performed or to which they have contributed. Publication credits accurately reflect the relative contributions of the individual involved.

5.7 Authorship of Student Work.

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

5.8 Plagiarism.

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

5.9 Accuracy in Publication.

Marriage and family therapists who are authors of books or other materials published or distributed by an organization take reasonable precautions to ensure that the published materials are accurate and factual.

STANDARD VI

TECHNOLOGY-ASSISTED PROFESSIONAL SERVICES

Therapy, supervision, and other professional services engaged in by marriage and family therapists take place over an increasing number of technological platforms. There are great benefits and responsibilities inherent in both the traditional therapeutic and supervision contexts, as well as in the utilization of technologically-assisted professional services. This standard addresses basic ethical requirements of offering therapy, supervision, and related professional services using electronic means.

6.1 Technology Assisted Services.

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

6.2 Consent to Treat or Supervise.

Clients and supervisees, whether contracting for services as individuals, dyads, families, or groups, must be made aware of the risks and responsibilities associated with technology-assisted services. Therapists are to advise clients and supervisees in writing of these risks, and of both the therapist's and clients'/supervisees' responsibilities for minimizing such risks.

6.3 Confidentiality and Professional Responsibilities.

It is the therapist's or supervisor's responsibility to choose technological platforms that adhere to standards of best practices related to confidentiality and quality of services, and that meet applicable laws. Clients and supervisees are to be made aware in writing of the limitations and protections offered by the therapist's or supervisor's technology.

6.4 Technology and Documentation.

Therapists and supervisors are to ensure that all documentation containing identifying or otherwise sensitive information which is electronically stored and/or transferred is done using technology that adhere to standards of best practices related to confidentiality and quality of services, and that meet applicable laws. Clients and supervisees are to be made aware in writing of the limitations and protections offered by the therapist's or supervisor's technology.

6.5 Location of Services and Practice.

Therapists and supervisors follow all applicable laws regarding location of practice and services, and do not use technologically-assisted means for practicing outside of their allowed jurisdictions.

6.6 Training and Use of Current Technology.

Marriage and family therapists ensure that they are well trained and competent in the use of all chosen technology-assisted professional services. Careful choices of audio, video, and other options are made in order to optimize quality and security of services, and to adhere to standards of best practices for technology-assisted

services. Furthermore, such choices of technology are to be suitably advanced and current so as to best serve the professional needs of clients and supervisees.

STANDARD VII

PROFESSIONAL EVALUATIONS

Marriage and family therapists aspire to the highest of standards in providing testimony in various contexts within the legal system.

7.1 Performance of Forensic Services.

Marriage and family therapists may perform forensic services which may include interviews, consultations, evaluations, reports, and assessments both formal and informal, in keeping with applicable laws and competencies.

7.2 Testimony in Legal Proceedings

Marriage and family therapists who provide expert or fact witness testimony in legal proceedings avoid misleading judgments, base conclusions and opinions on appropriate data, and avoid inaccuracies insofar as possible. When offering testimony, as marriage and family therapy experts, they shall strive to be accurate, objective, fair, and independent.

7.3 Competence.

Marriage and family therapists demonstrate competence via education and experience in providing testimony in legal systems.

7.4 Informed Consent.

Marriage and family therapists provide written notice and make reasonable efforts to obtain written consents of persons who are the subject(s) of evaluations and inform clients about the evaluation process, use of information and recommendations, financial arrangements, and the role of the therapist within the legal system.

7.5 Avoiding Conflicts.

Clear distinctions are made between therapy and evaluations. Marriage and family therapists avoid conflict in roles in legal proceedings wherever possible and disclose potential conflicts. As therapy begins, marriage and family therapists clarify roles and the extent of confidentiality when legal systems are involved.

7.6 Avoiding Dual Roles.

Marriage and family therapists avoid providing therapy to clients for whom the therapist has provided a forensic evaluation and avoid providing evaluations for those who are clients, unless otherwise mandated by legal systems.

7.7 Separation of Custody Evaluation from Therapy.

Marriage and family therapists avoid conflicts of interest in treating minors or adults involved in custody or visitation actions by not performing evaluations for custody, residence, or visitation of the minor. Marriage and family therapists who treat minors may provide the court or mental health professional performing the evaluation with information about the minor from the marriage and family therapist's perspective as a treating marriage and family therapist, so long as the marriage and family therapist obtains appropriate consents to release information.

7.8 Professional Opinions.

Marriage and family therapists who provide forensic evaluations avoid offering professional opinions about persons they have not directly interviewed. Marriage and family therapists declare the limits of their competencies and information.

7.9 Changes in Service.

Clients are informed if changes in the role of provision of services of marriage and family therapy occur and/or are mandated by a legal system.

7.10 Familiarity with Rules.

Marriage and family therapists who provide forensic evaluations are familiar with judicial and/or administrative rules prescribing their roles.

STANDARD VIII

FINANCIAL ARRANGEMENTS

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

8.1 Financial Integrity.

Marriage and family therapists do not offer or accept kickbacks, rebates, bonuses, or other remuneration for referrals. Fee-for-service arrangements are not prohibited.

8.2 Disclosure of Financial Policies.

Prior to entering into the therapeutic or supervisory relationship, marriage and family therapists clearly disclose and explain to clients and supervisees: (a) all financial arrangements and fees related to professional services, including charges for canceled or missed appointments; (b) the use of collection agencies or legal measures for nonpayment; and (c) the procedure for obtaining payment from the client, to the extent allowed by law, if payment is denied by the third-party payor. Once services have begun, therapists provide reasonable notice of any changes in fees or other charges.

8.3 Notice of Payment Recovery Procedures.

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

8.4 Truthful Representation of Services.

Marriage and family therapists represent facts truthfully to clients, third-party payors, and supervisees regarding services rendered.

8.5 Bartering.

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

8.6 Withholding Records for Non-Payment.

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

STANDARD IX

ADVERTISING

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

9.1 Accurate Professional Representation.

Marriage and family therapists accurately represent their competencies, education, training, and experience relevant to their practice of marriage and family therapy in accordance with applicable law.

9.2 Promotional Materials.

Marriage and family therapists ensure that advertisements and publications in any media are true, accurate, and in accordance with applicable law.

9.3 Professional Affiliations.

Marriage and family therapists do not hold themselves out as being partners or associates of a firm if they are not.

9.4 Professional Identification.

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

9.5 Educational Credentials.

Marriage and family therapists claim degrees for their clinical services only if those degrees demonstrate training and education in marriage and family therapy or related fields.

9.6 Employee or Supervisee Qualifications.

Marriage and family therapists make certain that the qualifications of their employees and supervisees are represented in a manner that is true, accurate, and in accordance with applicable law.

9.7 Specialization.

Marriage and family therapists represent themselves as providing specialized services only after taking reasonable steps to ensure the competence of their work and to protect clients, supervisees, and others from harm.

9.8 Correction of Misinformation.

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

Supplement B:



MARRIAGE AND FAMILY THERAPY DEPARTMENT INTERNSHIP AGREEMENT Responsibilities of the SCSU MFT Program, the practice site, and the student

Between _____ and _____
(Intern) (Facility)

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

The agency must:

- have a published non-discriminatory policy.
- provide the intern with a variety of presenting problems and offer client experience with [diverse, marginalized, and/or underserved](#) populations as defined by COAMFTE Standards 12.5.
- provide therapy to couples and/or families (relational hours).
- return a written intern evaluation and schedule a brief SCSU / Agency supervisor check-in each semester via phone or Zoom.
- The supervisor must be a *fully licensed* Master's level clinician or above (LMFT, LCSW, LPC, PsyD, etc).

Policies and Procedures: Students, practice sites, the MFT program must be expected to adhere to all SCSU MFT program expectations (i.e. Program Handbook) and offsite placement agency policies and procedures.

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

Schedule: The internship supervisor and intern agree to negotiate scheduling prior to the start of placement. This may be modified over time if both parties agree to the revision. Sites agree they will provide the intern with a caseload of between 6 (minimal) and 10 (maximum) client sessions a week. The internship schedule should not exceed more than 3 days a week unless both parties agree. Interns are allotted vacation and self-care days as needed in consultation with their off-site supervisor.

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

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

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

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

Agreement: The MFT Program, Student, and Placement site agree to the above standards and to abide by the MFT Department's *Procedure for managing difficulties with sites, supervisors, and students* contained in the SCSU MFT Program Handbook.

Site Supervisor _____
(Print name) (Signature) (Date)

AAMFT Member Number (if applicable) : _____
(Date)

Signature of School Liaison: _____
(Date)

Signature of Intern: _____
(Date)

Supplement C:

Internship Agreement Form

Complete this form with the contact information of your proposed placement supervisor with start/end date. A copy of your supervisor’s license to practice and resume/cv is required for site approval.

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

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

The portion below must be completed by SCSU MFT Offsite Placement Coordinator prior to starting placement:

Offsite Clinical Readiness met according to the terms of [Offsite Placement Clinical Readiness Policy](#):

Completion of MFT 563 with ‘C’ or above **OR:** Active enrollment and satisfactory academic progress in MFT 563, plus course instructor and Offsite Placement Coordinator (OPC) approval to begin Placement.

Signature & Date (OPC)

Appendix G:

Evaluation of Student’s Clinical Skills Rubric

Supervisee Name	Supervisor Name
Semester	

Rating:

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

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

1. Admission to Therapy: Students will demonstrate competence in initiating the treatment process.				
	D	B	P	M
1.1 Utilizes a systemic lens, determine who should attend therapy and in what configuration (e.g. individual, couple, family, extra-familial resources)				
1.2 Obtains consent to treat from all responsible persons				
1.3 Explains practice setting policies and procedures to client or legal guardian including: attendance, record keeping, fees, rights and responsibilities of each party, privacy and confidentiality policies, and duty to report				

2. Management of Therapy: Students will build and maintain a functional structure of therapy.				
	D	B	P	M
2.1 Forms and maintains an appropriate therapeutic relationship				
2.2 Maintains and modifies the therapeutic contract as needed				
2.3 Appropriately balances client directed and therapist directed initiative in treatment				
2.4 Matches treatment modalities & techniques to clients’ needs goals and values				
2.5 Engages each family member in the treatment process as appropriate				
2.6 Continues or modifies therapeutic approach and goals in response to client feedback and therapist assessment of progress				
2.7 Concludes treatment in an appropriate manner				

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

Student learning outcome # 1	4. Systemic Clinical Skills and Interventions: Students will practice through a systemic lens.				
		D	B	P	M
	4.1 Demonstrates and applies systemically informed theory in case conceptualizations, treatment plans, and clinical interventions				
	4.2 Provides systemically informed psychoeducation to clients as needed to achieve treatment goals				
	4.3 Evaluates clients' responses to systemic interventions and modifies them accordingly to better fit clients' needs and personal styles				
	4.4 Distinguishes between content and process issues, their role in systemic therapy, and their potential impact on therapeutic outcomes				

5. Crisis & Case Management: Students will assess and manage client safety & risk, and follow agency policies and procedures.				
	D	B	P	M
5.1 Routinely observes and assesses for indications of abuse, danger to self, or others				
5.2 Develops and implements plans to reduce the potential for danger to self and others				
5.3 Recognizes the need for, and make, appropriate referrals for adjunct services				
5.4 Completes any needed documentation in a timely, accurate, and complete manner				
5.5 With proper consent, regularly communicates with other professionals and stakeholders to inform treatment				

Student learning outcome # 3	6. Cultural and Contextual Issues: Students will demonstrate sensitivity with cultural and contextual issues.				
		D	B	P	M
	6.1 Demonstrates awareness and understanding of major characteristics of various contexts as defined by race, age, gender, ethnicity, sexual orientation, gender identity, SES, disability, health status, religion or spiritual affiliation, nation of origin, and any other relevant group of belongingness				
	6.2 Maintains a curious, non-judgmental stance regarding client's cultural and contextual background				
	6.3 Manages therapy in a culturally sensitive way				
	6.4 Evaluates strengths, limitations, and contraindications of specific therapy models, in their application across various diverse contexts				

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

8. Use of Supervision: Students will make appropriate use of supervision.				
	D	B	P	M
8.1 Presents cases for supervision in a clear and organized manner				
8.2 Takes appropriate action to obtain and use supervisory input				
8.3 Demonstrates openness to incorporating supervisory feedback into therapy process				
8.4 Pro-actively consults with supervisor if personal issues, attitudes, beliefs, or emotional reactions threaten to adversely impact clinical judgment and work				

9. Research: Students will demonstrate competence in understanding and using research to enhance their clinical work.				
	D	B	P	M
9.1 Uses current MFT and other research to inform clinical practice				

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

Overall Comments:

Suggested Goals for Next Semester:

Signature of Supervisor

Date

Signature of Supervisee

Date

Appendix H:

MFT Academic Training Policy & Expectations

Program Culture and Approach

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

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

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

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

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

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

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

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

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

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

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

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

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

Approach to Coursework:

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

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

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

Appendix I:

Policy and Acknowledgement of Curriculum Regulatory Alignment and Portability of Degree

Starting an advanced professional degree in an informed manner is critical to long-term success. Therefore, we require this form returned during the admissions process and prior to students making enrollment decisions and financial commitments. This ensures SCSU MFT students are informed and aware of the portability of an MFT degree acquired from SCSU before committing to the program. Licensure for Marriage and Family Therapy is state specific. SCSU's MFT curriculum is in regulatory alignment with State of CT statutes ([chapter 383a](#)) and meets the education and clinical training requirements of the State of CT for potential Associate MFT licensure, and potential licensure as a Marital and Family Therapist. To gain full MFT licensure in CT, graduates of the program are required to complete post graduate client contact, receive supervision from a licensed MFT, and successfully pass the American Marriage and Family Therapy Regulatory Board (AMFTRB) examination after graduation. If you are interested in practicing in a state other than Connecticut, please consult that state's requirements for MFT licensure. The AAMFT & AMFTRB maintain contact and reference information of individual state licensure requirements. The most up-to-date reference for this material is the licensing body of the state.

https://www.aamft.org/AAMFT/BUILD_Your_Career/MFT_State_Provincial_Resources/Advocacy/State_Resources/MFT_State_Resources.aspx?hkey=261d7879-9d5b-4aa0-b60c-c15e82b8b095

<https://amftrb.org/state-requirements/>

Information on obtaining an Associate Designation in CT may be found here:

<https://portal.ct.gov/DPH/Practitioner-Licensing--Investigations/MFT/Marital-and-Family-Therapy-Associate>

Information on obtaining a license as a MFT in CT may be found here:

<https://portal.ct.gov/DPH/Practitioner-Licensing--Investigations/MFT/Marital-and-Family-Therapist-Licensure-Requirements>

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

Please initial from your option below:

____ Following graduation, I plan to practice in Connecticut.

____ Following graduation, I intend to practice outside Connecticut, in the following state: _____

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

Acknowledgement of Understanding of Portability of Degree & SCSU MFT Program Handbook

My name and signature indicate that I read and agree to all policies and procedures outlined in this MFT Program Handbook:

printed name

signature

date

Appendix J:

Title IX and General Reporting Procedures of Misconduct

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

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

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

Appendix K:

Annual Data Collection and Programmatic Review Process

In accordance with COAMFTE accreditation guidelines, the program maintains and adheres to the following assessment timeline.

Data:	Information collected from:	Collected when and by whom:	Review & Feedback by populations and timeline:
Evaluation of: <ul style="list-style-type: none"> • inclusive and diverse learning environment • fiscal and physical resources • technology • instructional and clinical resources • academic resources and student support services • Program director effectiveness 	Students Core Faculty Part-time Faculty Program clinical supervisors	Annually late May: <i>Program Director and secretary distributes confidential online survey annually</i>	Late Summer - SCSU MFT Advisory Council Fall - Core faculty retreat <i>Feedback (closing the loop): Email is sent to COI members in mid to late Fall.</i>
Outcome based education & SLO data review against target(s) SLO 1 SLO 2 SLO 3 SLO 4 SLO 5	Students Review and feedback from this data is collected from the SCSU MFT Advisory Council	<i>Department Secretary and Program Director Collect:</i> Annually May: <ul style="list-style-type: none"> • SLO 5: MFT 587 – Research project assignment grades Annually August: <ul style="list-style-type: none"> • SLO 1, SLO 3, and SLO 4: Comprehensive Examination results • Summer MFT 662 Student Rubric evaluation SLO 1, SLO 3, SLO 4 Annually August: <ul style="list-style-type: none"> • SLO 2: MFT 669 four examination results 	Late Summer - SCSU MFT Advisory Council Fall - Core faculty retreat <i>Feedback (closing the loop): Email is sent to COI members in mid to late Fall.</i>
Graduate achievement data	Alumni	Annually May – June <i>Program Director and Secretary distributes confidential online survey annually</i>	Late Summer - SCSU MFT Advisory Council Fall - Core faculty retreat <i>Feedback (closing the loop): Email is sent to COI members in mid to late Fall.</i>
Program diversity demographics	Students Core Faculty Part-time Faculty Program Clinical Supervisors	Annually July <i>The Program Director and Department Secretary Survey Community members via confidential survey</i>	Late Summer - SCSU MFT Advisory Council Fall - Core faculty retreat <i>Feedback (closing the loops): Email is sent to COI members in mid to late Fall.</i>
SCSU MFT advisory council bidirectional communication and feedback:	SCSU MFT advisory council	Annually August Program Director initiates via email with collected data to pre-review	Fall - Core faculty retreat
Core Faculty evaluation:	Core faculty members: Evaluated via the job description and requirements outlined in Position Descriptions describing Responsibilities, Required Qualifications and Institutional and Program Expectations. Upcoming Graduates: Annual Summer Survey <i>Faculty effectiveness evaluation</i> Students: Student Course Feedback forms	Program Director & Department Secretary – Annually Program Director & Department Secretary – Annually each August Office of Assessment initiates feedback survey sending confidential link to course participants at the end of each semester	Annually by Department Chairperson / Program Director in alignment of and collaboration with all Faculty Senate, Human Resources, and AAUP contract criteria. Late Summer - SCSU MFT Advisory Council Fall - Core faculty retreat Feedback sent to COI members in mid to late Fall. Each semester: Faculty member and Program Director receive and review Course feedback at start of subsequent semester. PD provides support and feedback as needed.
Part-time Faculty:	Part-time faculty: Evaluated via the job description and requirements outlined in the Position Descriptions describing Responsibilities, Required Qualifications and Institutional	Program Director & Department Secretary – Annually	Annually by Department Chairperson/Program Director in alignment of and collaboration with all Faculty Senate, Human Resources, and AAUP contract mandates.

	<p>and Program Expectations.</p> <p>Upcoming Graduates: Annual Summer Survey <i>Faculty effectiveness evaluation</i></p> <p>Part-time faculty member: & core faculty mentor/evaluator outlined in the Part-time Faculty and Clinical Supervisor Evaluation</p> <p>Students: Student Course Feedback forms</p>	<p>Program Director & Department Secretary – Annually each August</p> <p>Biennial self-evaluation and in-class observation /evaluation by core faculty.</p> <p>Office of Assessment initiates feedback survey sending confidential link to course participants at the end of each semester</p>	<p>Late Summer - SCSU MFT Advisory Council Feedback sent to COI members in mid to late Fall.</p> <p>Biennially - Written feedback, mentorship, and evaluation provided to part-time faculty member and Program Director.</p> <p>Each semester: Faculty member and Program Director receive and review Course feedback at start of subsequent semester. PD provides support and feedback as needed.</p>
Core Faculty Clinical Supervisors	<p>Core Faculty Clinical Supervisor member: Evaluated via the job description and requirements outlined in the Position Descriptions describing Responsibilities, Required Qualifications and Institutional and Program Expectations.</p> <p>Upcoming Graduates: Annual Spring Survey <i>Clinical Supervisor effectiveness survey</i></p> <p>Students: Student Course Feedback forms</p>	<p>Program Director & Department Secretary – Annually</p> <p>Program Director & Department Secretary – Annually each August</p> <p>Office of Assessment initiates feedback survey sending confidential link to clinical supervisor participants at the end of each semester</p>	<p>Annually by Department Chairperson/Program Director in alignment of and collaboration with Faculty Senate, Human Resources, and in accordance with all AAUP contract mandates.</p> <p>Late Summer - SCSU MFT Advisory Council Fall - Core faculty retreat Feedback sent to COI members in mid to late Fall.</p> <p>Each semester: Clinical supervisor and Program Director receive and review Course feedback at start of subsequent semester. PD provides support and feedback as needed.</p>
Part-time Clinical Supervisors	<p>Part-time clinical supervisor: Evaluated via the job description and requirements outlined in the Position Descriptions describing Responsibilities, Required Qualifications and Institutional and Program Expectations.</p> <p>Upcoming Graduates: Annual Summer Survey <i>Clinical Supervisor effectiveness evaluation</i></p> <p>Part-time faculty member: & core faculty mentor/evaluator outlined in the Part-time Faculty and Clinical Supervisor Evaluation</p> <p>Students: Student Course Feedback forms</p>	<p>Program Director & Department Secretary – Annually</p> <p>Program Director & Department Secretary – Annually each August</p> <p>Biennial self-evaluation and in-class observation /evaluation by core faculty.</p> <p>Office of Assessment initiates feedback survey sending confidential link to course participants at the end of each semester</p>	<p>Annually by Department Chairperson/Program Director in alignment of and collaboration with Faculty Senate, Human Resources, and AAUP contract criteria.</p> <p>Late Summer - SCSU MFT Advisory Council Feedback sent to COI members in mid to late Fall.</p> <p>Biennially - Written feedback, mentorship, and evaluation provided to part-time faculty member and Program Director.</p> <p>Each semester: Clinical Supervisor and Program Director receive and review Course feedback at start of subsequent semester. PD provides support and feedback as needed.</p>
Program Director	<p>Students Part-time and Full-time faculty Clinical Supervisors</p>	<p>Annually May: Program Director and Department Secretary distributes confidential online survey annually</p>	<p>Late Summer - SCSU MFT Advisory Council Fall - Core faculty retreat</p> <p>As appropriate, feedback: sent to COI members in mid to late Fall.</p>

Appendix L:

SCSU Marriage and Family Therapy Confidentiality Agreement

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

There are two sets of exceptions:

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

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

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

Printed Name of Student

Signature and date

Signature of Clinic Manager

Appendix M:

Marriage and Family Therapy Program Technical Standards

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

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

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

I. Attitudinal, Behavioral, Interpersonal, and Emotional Attributes

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

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

MFT students must be able to analyze and synthesize information from a wide variety of sources and must demonstrate critical thinking skills. They must be able to learn effectively through a variety of modalities including, but not limited to: classroom instruction, clinical supervision, small group discussion, individual study of materials, independent literature review, preparation and presentation of written and oral reports, and use of computer-based technology.

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

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

II. Intellectual Skills

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

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

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

III. Communication Skills

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

Commitment to Non-Discrimination

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

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

V. References

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

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

Student's Printed name

Student Signature and date

Appendix N:

SCSU & MFT Program Policy Regarding Authenticity of Student Work

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

Procedures for handling cases of alleged academic misconduct have been approved by the SCSU Faculty Senate and can be found [here](#).

Policy for Designing, Approving, Implementing, Reviewing, and Changing the Curriculum

Annual policy and curriculum review is conducted each Fall during the *Annual Data Collection and Programmatic Review Process*. During this process, faculty discuss potential policy and curriculum revisions after reviewing SLO target attainment, graduate achievement data, and program demographics alongside survey data evaluating program resources, environmental supports, and Program Director effectiveness. The process is data-driven. Policy and curriculum revision of the MFT program requires a majority Core Faculty vote in favor of the change. In the event of a tie vote, the program director casts the tie-breaking vote. In event of urgent need, Core faculty may propose and pass a policy or curriculum revision at a Core faculty meeting.

Policy regarding use of Machine Learning and Artificial Intelligence

The MFT Department recognizes that machine learning and artificial intelligence (AI) has significant implications to higher education. AI offers means to support student learning when used in a manner that is congruent with academic integrity, or to be used as a mechanism that circumvents student responsibility, like traditional academic misconduct/plagiarism. The MFT program at SCSU has designed its academic AI policy to support the ethical use and integration of AI resources, and to mitigate misuse that would negatively impact long-term student outcomes. To address these concerns and meet these goals the department has developed the following policy:

AI can it be used in classroom assignments provided:

- the instructor does not limit or prohibit the use of AI in their syllabus and/or assignment guidelines.
- the beginning of the assignment/paper includes an explanation of the extent and implementation of AI use. It is students' responsibility to ensure information provided by AI is accurate.
- appropriate citations are used. (e.g. [APA](#), [Chicago Manual of Style](#), [MLA](#));
- the use of AI cannot be construed as unethical. Cases of academic dishonesty will be handled in alignment with SCSU's Faculty Senate approved [academic misconduct policy](#);

To ensure client confidentiality, AI tools are prohibited in all clinical work such as notes, treatment plans, case summaries/paperwork, etc.

Appendix 0:

Marriage and Family Therapy Course Sequence: 2-Year

<u>Class Number</u>	<u>Class Name</u>	<u>Number of Credits</u>
<u>Year One Fall:</u>		
MFT 597:	Family of Origin	3.0
MFT 598:	Family Systems Theory I	3.0
MFT 505:	Therapeutic Use of Self - Introduction	3.0
MFT 620:	Professional, Legal and Ethical Issues in MFT	3.0
<u>Year One Spring:</u>		
MFT 668:	Family Systems Theory II	3.0
MFT 609:	Diversity and Multicultural Competency in MFT Practice	3.0
MFT 506:	Therapeutic Use of Self – Intermediate	3.0
MFT 562:	MFT Practicum I	3.0
MFT 548:	Introduction to Family Clinic Policies and Procedures	1.5
<u>Year One Summer:</u>		
MFT 669:	Family Systems Theory III: Evidence Based In-home Treatment	3.0
MFT 563:	MFT Practicum II	3.0
MFT 672:	Understanding the Treatment of Substance Addictions in Couples and Families	3.0
<u>Year Two Fall:</u>		
MFT 610:	Couples Therapy	3.0
MFT 586:	Family and Individual Development over the Life Cycle	3.0
MFT 662:	MFT Internship I	3.0
MFT 605:	Therapeutic Use of Self in Groups I (optional)	3.0
<u>Year Two Spring:</u>		
MFT 607:	Systemic Perspectives on Mental Health & Psychopathology	3.0
MFT 663:	MFT Internship II	3.0
MFT 587:	Family Therapy Outcome Research	3.0
MFT 606:	Therapeutic Use of Self in Groups II (optional)	3.0
<u>Year Two Summer:</u>		
MFT 674:	MFT Concepts and Clinical Methods in Human Sexuality	3.0
MFT 664:	MFT Internship III	3.0
MFT 673:	Treatment Issues in MFT: Integrating Spirituality and Religion	1.5

Marriage and Family Therapy Course Sequence: 3-year

Class Number	Class Name	Number of Credits
<u>Year One Fall:</u>		
MFT 597:	Family of Origin	3.0
MFT 598:	Family Systems Theory I	3.0
<u>Year One Spring:</u>		
MFT 668:	Family Systems Theory II	3.0
MFT 609:	Diversity and Multicultural Competency in MFT Practice	3.0
<u>Year One Summer:</u>		
MFT 669:	Systems Theory III: Evidence Based In-home Treatment	3.0
MFT 672:	Understanding the Treatment of Substance Addictions in Couples and Families	3.0
<u>Year Two Fall:</u>		
MFT 505:	Therapeutic Use of Self - Introduction	3.0
MFT 620:	Professional, Legal and Ethical Issues in MFT	3.0
MFT 610:	Couples Therapy	3.0
<u>Year Two Spring:</u>		
MFT 506:	Therapeutic Use of Self – Intermediate	3.0
MFT 562:	MFT Practicum I	3.0
MFT 548:	Introduction to Clinic Policies, Procedures, Practices	1.5
<u>Year Two Summer:</u>		
MFT 563:	MFT Practicum II	3.0
MFT 673:	Treatment Issues in MFT: Integrating Spirituality and Religion	1.5
<u>Year Three Fall:</u>		
MFT 586:	Family and Individual Development over the Life Cycle	3.0
MFT 662:	MFT Internship I	3.0
MFT 605:	Therapeutic Use of Self in Groups I (optional)	3.0
<u>Year Three Spring:</u>		
MFT 663:	MFT Internship II	3.0
MFT 607:	Systemic Perspectives on Mental Health & Psychopathology	3.0
MFT 587:	Family Therapy Outcome Research	3.0
MFT 606:	Therapeutic Use of Self in Groups II (optional)	3.0
<u>Year Three Summer:</u>		
MFT 664:	MFT Internship III	3.0
MFT 674:	MFT Concepts and Clinical Methods in Human Sexuality	3.0

Appendix P:

STUDENT TECHNOLOGY REQUIREMENT POLICY

Students within the MFT program require technology resources to successfully complete program work. At times, on-campus University resources may supplement these technology requirements. However, students must have access to the following minimum technology resources to complete academic and clinical work. Tablets and smart phones will work for some (though not all) tasks, and as a result may not be the student's sole technology resource.

A computer, laptop or Chromebook with the following minimal specifications is required:

- 2GB of random-access memory (RAM)
- 2 GHz, dual-core processor.
- Network card and reliable high-speed internet connection: 1 Gbps download, 512 Kbps upload minimum speed. A higher speed connection is recommended to accommodate future upgradability.
- Sound card and speakers
- Camera/microphone and headphones
- Minimum resources to run MFT programmatic software including the latest versions of Zoom, WebEx and Microsoft Teams.

POLICIES CONCERNING USE OF TECHNOLOGY & DISASTER RECOVERY

The MFT Program complies with the Southern Connecticut State University's 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:

<https://inside.southernct.edu/information-technology/policy-procedure>

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

<https://www.ct.edu/it>

https://www.ct.edu/files/it/BOR_IT-001.pdf

The MFT Program also ensures the reliability of technology systems, the integrity and security of data, and safeguards student and client information in accordance with all regulations and guidelines:

https://www.ct.edu/files/it/BOR_IT-004.pdf

<https://www.therapynotes.com/features/security/>

Students are responsible for client data security as outlined in the AAMFT Code of Ethics, placement site policies, and state/national guidelines. Failure to abide by these policies will result in remediation as outlined in this Program Handbook. MFT Family Clinic case notation software (Therapy Notes) supplies multiple layers of security protection, including FIPS 140-2 compliant encryption, firewalls, and SSAE 16 SOC 1 Type II, SOC 2 Type II, PCI-DSS, GLBA and HIPAA audited data center. Data is backed up to onsite and offsite servers in preparedness for disaster recovery:

<https://www.therapynotes.com/features/security/>

Program members agree to abide by these policies.

Appendix Q:

SCSU MFT ADVISORY COUNCIL

The goal of the SCSU MFT Program Advisory Council is to support the MFT program by providing feedback to better inform decision-making regarding Student Learning Outcomes, program resources, curriculum, and program management. Members are an integral part of the *Annual Data Collection and Programmatic Review Process*. The individuals represented at the advisory council include: current students, recent alumni, internship supervisors, and potential employers. Recent alumni are defined as within the past 5 years. An effort will be made to have a diverse group of people who represent different domains of professional practice. MFT faculty will nominate representatives to the program director, and the program director will organize and attend meetings. The advisory council will meet once a year (August), and will receive an update of actions taken as a result of their feedback. Members agree to participate for one year and may be invited for an additional term.

2022-2023 SCSU MFT Advisory Council	
Current students	Alumni
<i>Krysti Tam</i>	<i>Matthew Fields, LMFT</i>
<i>Mia Salgado</i>	<i>Allison Golfis, LMFT</i>
<i>Megan Latte</i>	<i>Lou-Ann Yearwood, LMFT</i>
<i>Lindsey McKeon</i>	<i>Sujatha Herne, LMFT</i>
<i>Alexandra Simmons</i>	<i>Jennifer Kerr, LMFT</i>
	<i>Donna Sheehan, LMFTA</i>
Internship (offsite) placement supervisors	Potential employers
<i>Samantha Birtwell, LMFT</i>	<i>Samantha Birtwell, LMFT</i>
<i>Sandy Gossart-Walker, MSW</i>	<i>Sandy Gossart-Walker, MSW</i>
<i>Dave Borzellino, LMFT</i>	<i>Dave Borzellino, LMFT</i>
<i>William Kania, LMFT</i>	<i>William Kania, LMFT</i>
<i>Kara Donovan, LMFT</i>	<i>Kara Donovan, LMFT</i>
<i>Eric Rice, LMFT</i>	<i>Eric Rice, LMFT</i>

Appendix R:

Dual Relationships and the MFT Program

The purpose of this policy is to detail how certain student relationships have potential to impact MFT program delivery and explain the actions faculty may take if any relationship within the student body negatively impacts faculty teaching, student learning and/or clinical delivery within the program.

Therapists, mentors, and supervisors are expected to be familiar with and adhere to the [AAMFT Code of Ethics](#) to guide ethical decision making in clinical practice training and [SCSU Board of Regents policy](#) as it relates to consensual amorous relationships among students, mentors, and faculty. Certain relationships are clearly forbidden. Other relationships, while not disallowed, should be entered with an awareness that should they deteriorate and become conflictual (e.g. previous dating individuals), this conflict could impact the learning and/or clinical delivery within the program. Therapists, clinic administrative staff, and supervisors must be aware of their position of influence as a mentor in the SCSU MFT Program and avoid to the degree possible mutual relationships that can potentially exploit the trust and dependency of supervisees or student interns, as discussed in Standard IV of the AAMFT Code of Ethics.

Specifically, the following relationships (which include hierarchical imbalances) are not allowed to exist:

1. Consensual amorous relationships between offsite supervisors and their supervisees, including student interns.
2. Consensual amorous relationships between clinic mentors, including AAMFT Approved Supervisors in Training and all SCSU MFT students.
3. Consensual amorous relationships between SCSU MFT students and Family Therapy Clinic undergraduate interns.

Should a consensual relationship exist as defined above (items 1 through 3) **prior** to the assignments made for supervision or mentoring, the supervisor, student supervisor, or mentor **must** disclose the relationship to the Program Director and/or student's advisor immediately so they can be reassigned. Should consensual relationships develop throughout the course of the defined supervisory or mentored relationship, these should be disclosed immediately to the Program Director so that reassignment options can be evaluated. Failure to disclose relationships in such a way that an ongoing mentoring or supervisory relationship is allowed to continue while in a consensual amorous relationship could result in probationary status with the program, termination, or other actions in accordance with policy.

Consensual amorous relationships between students sometimes occur in are a reality of most MFT clinical training programs. As a systemic-minded program, we remain mindful clear of the potential impact of successful and unsuccessful relationships on the community. Therefore, should students enrolled in the MFT program begin an amorous relationship, they may choose to bring this relationship to the attention of their advisors and/or program director. Upon request, MFT program faculty can support and separate the dating individuals to avoid a dual relationship in academic classes and clinical casework.

MFT faculty are committed to providing an environment conducive to faculty teaching, student learning and quality clinical practice. Should **any** intra-student relationship (currently or in the past a consensual amorous relationship, or strictly platonic) become disruptive to teaching, learning, and/or client care, MFT Core Faculty may require those individuals to participate in separate course sections, or in a manner faculty deems most appropriate to promote boundaries that support the program goals.

Appendix S:

Comprehensive Exam MFT Program, Southern Connecticut State University

Welcome to your comprehensive examination!

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

- 1) Students will provide services to the community practicing from a systemic lens.
- 2) Graduates will complete requirements to become an Associate licensed MFT in the state of Connecticut.
- 3) Students will demonstrate cultural competency (cultural knowledge, awareness, sensitivity, and action).
- 4) Students will demonstrate the ability to practice ethically.
- 5) Students will demonstrate the ability to critically analyze clinical research as informed consumers.

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

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

When answering the exam questions please: demonstrate your clinical application of MFT models and systems theory. Use graduate-level formal writing and APA 7 formatting, including citations.

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

Question 1:

Theoretical Orientation & Application:

Describe your systemic approach to facilitate therapeutic change in your clinical work with clients. Use MFT literature (including but not limited to foundational textbooks, audio visual references, and current articles) to support your position and theoretical orientation. Using actual case examples explain how you applied systemic skills and interventions based on your chosen theoretical orientation. Include examples of:

- Joining
- Systemic practice skills and interventions
- Case transfer, ending, and/or termination
- Therapeutic use of self

Question 2:

Cultural Competency & Applications:

Using a case example describe your theoretical orientation and application of culturally inclusive practice. In your answer, focus on the following four dimensions of diversity: *Cultural knowledge*, *cultural awareness*, *cultural sensitivity*, and *cultural action*. Use citations of MFT literature (including but not limited to foundational textbooks, audio-visual references, and current research articles) to support your answer.

Question 3:

Ethical Practice:

Describe an ethical dilemma(s) you encountered during your training as an MFT. The situation can be actual or to which you were a witness. Please describe the situation. What factors make/made this situation an ethical dilemma for you as a therapist? What factors, concepts, or elements would you or did include to resolve this dilemma? Please support your resolution using and citing elements from the AAMFT Code of Ethics.

- I. Include your professional resume or CV
- II. Write a cover letter to a clinic director/recruiter highlighting and applying for a potential position and describing your clinical competence as an MFT.

SOUTHERN CONNECTICUT STATE UNIVERSITY

COMPREHENSIVE EXAMINATION REPORT

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

First name: Last name:

SCSU student ID #:

Address:

City: State: Zip:

Cell phone # 1: Backup phone #2:

Personal email:

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

Student passed Part 1 on: first second third or greater attempt

Student passed Part 2 on: first second third or greater attempt

Student passed Part 3 on: first second third or greater attempt

MFT Faculty member: Date:

Cc: Registrar's office (to certify graduation)

COMPREHENSIVE EXAMINATION RUBRIC

<p>Question 1: Describe your systemic approach to facilitate therapeutic change in your clinical work with clients. Use MFT literature (including but not limited to foundational textbooks, audio visual references, and current articles) to support your position and theoretical orientation. Using actual case examples explain how you applied systemic skills and interventions based on your chosen theoretical orientation. Include examples of:</p> <ul style="list-style-type: none"> • joining • systemic practice skills and interventions • case termination, ending, and/or transfer • therapeutic use of self. 	Systemic Issues Recognition	<p>From a systemic perspective the student will identify and describe:</p> <ul style="list-style-type: none"> • Relational patterns, processes, and communication systems; • Problematic relational interactions; • Theoretical approaches to problem solution and/or intervention.
	Pass	Revisions required
	Understanding Content vs. Process	<p>From a systemic perspective the student demonstrates the ability to describe and identify:</p> <ul style="list-style-type: none"> • Differences between content and process as evidenced in case study breakdown; • Systemically informed interventions to address therapeutic processes; • Multi-partiality and non-linearity.
	Pass	Revisions required
	Systemic Application	<p>From a systemic perspective the student will demonstrate ability to:</p> <ul style="list-style-type: none"> • Identify and address presenting problem; • Select and apply appropriate MFT theory-based intervention(s); • Address relational process; generate relational questions/comments, develops systemic hypothesis and interventions based on all of the above.
	Pass	Revisions required
	Systemic Awareness and Context	<p>The student will demonstrate the ability to assess and intervene with thoughtful consideration of contextual/intersectional variables through providing evidence of:</p> <ul style="list-style-type: none"> • Awareness of systemic power differentials (cultural, community, family, therapeutic) and how these impact the family system and the therapeutic relationship; • Creation of interventions that address these considerations.
	Pass	Revisions required
	Systemic Therapeutic Presence	<p>The student will demonstrate how they maintained effective therapeutic presence through describing their ability to:</p> <ul style="list-style-type: none"> • Monitor systemic process within the case scenario; • Adjust their therapeutic presence to join with all members of the system; • Demonstrate multi-partiality by being non-judgmental, empathic and understanding of multiple viewpoints.
	Pass	Revisions required

<p>Question 2: Using a case example, please describe your theoretical orientation and application of culturally inclusive MFT practice. Your answer will focus on the following four dimensions of diversity: <i>Cultural knowledge, cultural awareness, cultural sensitivity, and cultural action</i>. Use citations of MFT literature (including but not limited to foundational textbooks, audio-visual references, and current research articles) to support your answer.</p>	Diversity:	<p>From a systemic perspective, the student will describe respecting, valuing, appreciating and discussing clients' diversity in:</p> <ul style="list-style-type: none"> • Race, ethnicity, culture, country of origin, values, worldviews and their impact on the presenting problem and relevant clinical issues addressed in therapy; • Religious practices and spiritual orientation and their impact on the presenting problem and relevant clinical issues addressed in therapy; • Disability, ability, resources, challenges and their impact on the presenting problem and relevant clinical issues addressed in therapy; and, • Sexual orientation, gender and gender identity and their impact on the presenting problem and relevant clinical issues addressed in therapy. 	
		Pass	Revisions required
	Cultural Knowledge	<p>From a systemic perspective, the student will:</p> <ul style="list-style-type: none"> • Identify and interpret the complexity of intersectional elements/factors important to clients' identity and culture (including race, ethnicity, country of origin, immigration status, religious and spiritual practices, disability, ability challenges, gender, gender identity and/or sexual orientation); • Describe the importance of these elements and how they may relate to history, values, communication styles, economics, beliefs/expectations in the clients' life; their impact on the presenting problem and other relevant clinical issues. 	
		Pass	Revisions required
	Cultural Awareness	<p>From a systemic perspective, the student will identify, discuss and demonstrate:</p> <ul style="list-style-type: none"> • Evidence of adjustment in own attitudes and beliefs developed as a result of working with diverse client, communities and varying couple and family forms; • Ability to assess the impact of assumptions, judgments, and/or biases related to own and clients' culture and differences. 	
		Pass	Revisions required
	Cultural Sensitivity	<p>From a <i>systemic perspective</i>, the student will identify, discuss, and demonstrate respect for clients' worldviews and perspectives and then respond empathically and caringly based on that respectful understanding.</p>	
		Pass	Revisions required
	Cultural Action	<p>From a <i>systemic perspective</i>, the student will discuss and illustrate clinical decisions and actions (taken collaboratively with clients) to develop and implement a culturally inclusive treatment plan to foster clients' well-being.</p>	
		Pass	Revisions required

<p>Question 3: Describe an ethical dilemma(s) you encountered during training as an MFT. The situation can be actual or to which you were a witness. Please describe the situation. What factors make/made this situation an ethical dilemma for you as a therapist? What factors, concepts, or elements would you or did include to resolve this dilemma? Please support your resolution using and citing elements from the AAMFT Code of Ethics.</p>	Ethical Issue Recognition	The student will identify the nuances of the ethical issue(s) involved in this case/scenario and discuss the applicable ethically pertinent principles used in the field of psychotherapy (e.g., autonomy, beneficence, fidelity, veracity, etc.)
		Pass
		The student will identify and apply relevant AAMFT codes of ethics (by specific standard and number) and will discuss applicable state laws, regulations, statutes and federal laws affecting professional practice.
		Pass
	Understanding Different Ethical Perspectives	The student will discuss the ethical perspectives, roles, and responsibilities of all professionals working with the client (e.g., supervisor, colleagues, other practitioners)
		Pass
	Ethical Awareness Self and Context	The student will discuss how they maintained and monitored the influence of personal values, biases, assumptions, and reactions; and how those affected his/her ethical decision-making, which includes factors related to the person-of-the-therapist; awareness of the family-of-origin; gender, culture, personal, religious belief, health, and wellness) to ensure that these did not adversely impact the therapy processes or created vulnerability for misconduct.
		Pass
	Application	The student will describe their process for making an ethical decision and what action they took to resolve the ethical dilemma (through incorporating recognition of ethical dilemmas, relevant codes, various perspectives, and self-awareness). This description should include how the student adhered to the AAMFT code of ethics and the required treatment consents/agreements with clients.
		Pass
	Evaluation	The student will evaluate and fine-tune their ethical decision-making process and include how they handled/discussed the issue with the supervisor, clients, and what they learned in the process that would inform future ethical decision making.
		Pass

Appendix T:

MFT Professional Attitudes and Dispositions Assessment

Attitudes and Disposition skills include academic and relational Marriage and Family Therapy skills essential for effective client care. These skills are correlated with COAMFTE’s Developmental Competency Components (DCC) and the Program’s Student Learning Outcomes (SLOs). Students enrolled in the MFT program are expected to consistently demonstrate competency in these skill areas. Students are provided annual feedback on these skills during the Fall semester via this rubric. Core and part-time faculty who have taught the student in the previous year of study provide input to the annual evaluation. Core and part-time faculty scores are collected and averaged. An average score of three in each domain is the minimum ‘passing’ score. Any student who receives an average score below three in any domain will meet with the MFT program director and the student’s faculty advisor and may be placed on a remediation plan. Instructors may also elect to use this rubric as part of their individual class grading criteria. In addition to Attitudes and Dispositions standards students are required to meet Technical Standards outlined in the MFT Program Handbook.

Name of Student:

Date:

Skill 1	DCC(s) & SLO(s)	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Views issues and therapeutic processes systemically including classroom and interpersonal processes.	DCC: knowledge of the profession; practice of therapy SLO 1, 3	Displays sophisticated and original systemic understanding in interpersonal interactions in the classroom including recognizing and articulating relational process & patterns and ability to view problematic interactions through multiple perspectives.	Displays strong systemic understanding in interpersonal interactions. Often able to recognize and articulate relational process & patterns; and to view problematic interactions through multiple perspectives.	Displays competent systemic understanding in interpersonal interactions, including minor problems recognizing and articulating relational process & patterns; sometimes inconsistently able to view problematic interactions through multiple perspectives. For example, is more able to do this in theory than in practice.	Vague, unclear systemic understanding, in interpersonal interactions, including major problems articulating relational process & patterns; sometimes inconsistently able to view problematic interactions through multiple perspectives. Rarely able to do this in practice; often unable to do it in theory either.	Significant deficiency in systemic understanding, unable to consistently articulate relational process & patterns; unable to view problematic interactions through multiple perspectives. Has major deficiencies both theoretically and in practice.

Skill 2	DCC(s) & SLO(s)	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Recognize contextual and systemic dynamics (including gender, sexual orientation, race, religion, immigrant status, etc.).	DCC: human diversity and social structures SLO 1, 3	Displays original, detailed, and insightful understanding of and interest in contextual variables and their effect on mental health. Sophisticated ability to articulate and teach others about their personal unique contextual variables, able to learn and apply information about the contextual variables that are less familiar for them.	Displays strong understanding of, and interest in contextual variables and their effect on mental health.; can articulate how their own contextual variables affect mental health; generally open to others' contextual experiences.	Displays competent understanding of contextual variables. Still learning how to articulate how their own contextual variables affect mental health; and/or learning to be open to others' contextual experiences. May lack clarity and/or interest about the connection to mental health.	Vague, unclear, primarily inconsistent understanding of contextual variables and the connection to mental health needs to make concerted effort to understand their own and others' contextual variables.	Significant deficiency in understanding contextual variables and their connection to mental health. Minimal or no attempt to understand their own variables or those of others.

Skill 3	DCC(s) & SLO(s)	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Utilize consultation and supervision effectively.	DCC: knowledge of the profession; practice of therapy SLO 1	Student has proven track record of enthusiastically seeking guidance and help when necessary; open to feedback, fully engaged with faculty and peers, sophisticated incorporation of feedback	Student has sought guidance, or we trust that the student would seek help when necessary; student is open to feedback and has or could incorporate feedback into classroom interactions.	Student competent and likely to seek guidance; may be inconsistently open to feedback or inconsistently able to incorporate feedback	Believe this student is not likely to seek guidance until absolutely necessary; may struggle with openness to feedback or ability to incorporate feedback	Significant inability to seek or incorporate guidance and feedback

Skill 4	DCC(s) & SLO(s)	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Monitor personal reactions to clients and treatment process as well as reactions to classmates, faculty, and staff.	DCC: knowledge of the profession; practice of therapy; human diversity and social structures SLO 1, 3, 4	Sophisticated, original and self-driven ability to be aware of and accountable for personal reactions. Able to attempt interpersonal shifts and have discussions to better handle these reactions in relationships.	Skilled and insightful ability to be aware of personal reactions. Desire to be accountable and to shift interpersonal dynamics to better handle these reactions	Developing and competent awareness of personal reactions, inconsistently able to be accountable, some confusion about what changes to make interpersonally to be more accountable or to better handle these reactions.	Limited awareness of personal reactions, limited accountability; significant confusion and /or desire to make this different.	No awareness of personal reactions and /or no ability to be accountable for them or to make changes to better handle them.

Skill 5	DCC(s) & SLO(s)	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Distinguish differences between process and content issues.	DCC: knowledge of the profession; practice of therapy; human diversity and social structures SLO 1, 3	Student displays insightful, sophisticated, and original understanding of the differences between process and content issues; is consistently able to distinguish patterns, hold complexity, see own part in a process.	Student displays a generally clear understanding of the differences between process and content issues; usually able to distinguish patterns, hold complexity and see own part in a process.	Student displays a competent and developing understanding of the difference between process and content issues; at times focuses more on content than process; gets stuck in the concrete details rather than able to distinguish patterns, hold complexity, and/or see own part in a process.	Student displays a vague, unclear understanding of the difference between process and content issues; is consistently stuck in content and has difficulty distinguishing patterns, holding complexity, and/or seeing own part in a process.	Student has significant deficiency understanding the differences between process and content; Is focused solely on content and has little or no ability to distinguish patterns, hold complexity and/or see own part in a process

Skill 6	DCC(s) & SLO(s)	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Generate relational questions and reflective comments in class settings.	DCC: knowledge of the profession; practice of therapy; human diversity and social structures SLO 1, 3	Student has a sophisticated, insightful original ability to generate questions that stimulate systemic thinking	Student has a clear ability to generate relational questions that stimulate systemic thinking	Student has a competent ability to generate relational questions; however, questions lack coherence, consistency & sometimes does not stimulate systemic thinking	Student has difficulty in generating relational questions; lacks coherence & consistency when doing so.	Student has extreme difficulty in generating relational questions

Skill 7	DCC(s) & SLO(s)	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Respect multiple perspectives (e.g., clients, team, supervisor, practitioners from other disciplines involved in the case).	DCC: knowledge of the profession; practice of therapy; human diversity and social structures SLO 1, 3, 4	Student is open and extremely receptive to multiple perspectives; consistently accountable for reactive triggers	Student is often respectful of multiple perspectives, and continually aware of his/her own judgmental and defensive triggers	Student has a developing ability to be consistently respectful, accountable, and open. Shows progress and is developing appropriately. Work on consistency.	Student has difficulty holding multiple perspectives, in moments is judgmental and defensive, lacks insight into their own accountability.	Student is consistently disrespectful and not open to multiple perspectives; pervasively judgmental and defensive

Skill 8	DCC(s) & SLO(s)	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Set appropriate boundaries, manage issues of triangulation, and develop collaborative working relationships.	DCC: knowledge of the profession; practice of therapy; human diversity and social structures SLO 1, 3, 4	Student displays clear and healthy boundaries, manages issues of triangulation, and exhibits an outstanding collaborative working relationship with both professors and other students	Student displays mostly clear boundaries, manages issues of triangulation, and exhibits a strong, collaborative working relationship with both professors and other students.	Students displays competent boundaries with others, able to manage most issues of triangulation, and collaborative with professors and other student most of the time. Struggles with being consistent.	Student struggles with setting clear boundaries, at times is triangulated into relationship, and/or has difficulty being collaborative with professors and students	Student does not set clear boundaries, frequently is triangulated into relationships, and does not work collaboratively with professors or students

Skill 9	DCC(s) & SLO(s)	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Monitor attitudes, personal well-being, personal issues, and personal problems to ensure they do not impact the therapy process adversely or create vulnerability for misconduct.	DCC: knowledge of the profession; practice of therapy; human diversity and social structures SLO 1, 3, 4	Student displays a sophisticated and original intrapersonal perspective and continuously monitors attitudes, personal well-being, personal issues, and personal problems to ensure they do not impact the learning environment	Student displays a clear intrapersonal perspective and monitors attitude, personal well-being, personal issues, and personal problems to ensure they do not impact the learning environment	Student displays competent, intrapersonal perspective with developing ability to monitor attitude, personal well-being, personal issues, and personal problems.	Student has difficulty articulating their intrapersonal perspective and/or has limited ability to monitor attitude, personal well-being, personal issues, and personal problems, which at times lead to them impacting the learning environment in a negative way.	Student is unaware of their intrapersonal perspective and has little to no ability to monitor attitude, personal well-being, personal issues, and personal problems, which lead to them impacting the learning environment in an unproductive way.

Average across nine skill domains (For information purposes only. A score of three or higher in each domain is the passing requirement).	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
	Excellent	Above Average	Average	Below Average	Poor

: Satisfactory. Three or higher in all skill domains.

: Needs Attention. One or more skill domain score is below three.

STRENGTHS

AREAS FOR GROWTH

Advisor Signature

Student Signature

Program Director Signature

Appendix U:

SCSU MFT Telehealth & Virtual Supervision Compliance Policy:

To begin utilizing teletherapy services within the SCSU MFT Family Clinic each student must comply with the following criteria. Initial each box and sign at the bottom to certify your readiness to see clients via telehealth. If you have any questions, please contact the Clinic Manager.

I have:

- read and understand “[AAMFT’s Best Practices in the Online Practice of Couple and Family Therapy](#)”.
- read and understand the “[AAMFT Code of Ethics](#)” related to Teletherapy & Virtual supervision (e.g. Standard VI).
- read and understand [CT Senate Bill 302 regarding Section 1. Section 19a-90](#) of the CGS.
- read and understand the “Orientation to Teletherapy for Interns” PowerPoint.
- read and understand “Teletherapy Consent Form” available in the “Library” tab of therapy notes and can explain this document to clients.
- read instructions on “Utilizing Therapy Notes Client Portal” and are confident in utilizing this technology to disperse information to clients.
- read and understand “Teletherapy In-Case of Emergency” form available in the “Library” tab of therapy notes and can explain the document to clients.
- read and understand “Telehealth FAQs” for Students and Clients document.
- all the necessary equipment (i.e. computer, tablet, internet, phone, etc.) to engage in teletherapeutic work and/or has contacted clinic manager/program director to assist in getting this equipment.
- a private, quiet, and well-lit location to conduct sessions.

My signature below signifies my understanding of and agreement to these criteria as I provide teletherapeutic services to clients under the discretion and support of my direct supervisor.

MFT Student Signature (Print & Sign)

Date

Direct Supervisor (Print & Sign)

Date

Appendix V:

Each full-time core faculty member/clinical supervisor, Part-time Academic Instructor, and/or Part-time Clinical Supervisor must meet and maintain the following ongoing expectations:

Position Descriptions describing Responsibilities, Required Qualifications and Institutional and Program Expectations			
	Full-time Core Faculty / Clinical Supervisors	Part-time Academic Instructors	Part-time Clinical Supervisors
responsibilities	* teach 12/12 teaching load * satisfy and operate within all AAUP contract guidelines * meet University's Renewal requirements outlined here , here , and here OR meet Promotion and Tenure requirements outlined here , here , and here OR * meet University's Professional Assessment (6 year) review requirements outlined here and here	* teach per semester credit appointment * satisfy and operate within all AAUP contract guidelines * participate in MFT part-time faculty mentorship/evaluation process	*Supervise per semester credit appointment *satisfy and operate within all AAUP contract guidelines * participate in MFT part-time supervisor mentorship/evaluation process
required qualifications	*Master's level training (or above) in Marriage and Family Therapy * must be LMFT or LMFTA eligible	* earned master's level degree in Marriage and Family Therapy, or Master's level mental health degree with experience in systemic/relational practice * must be LMFT, LMFTA, or other Master's level mental health degree with experience in systemic/relational practice	* earned master's level degree in Marriage and Family Therapy (or equivalent) * must be LMFT or LMFTA licensed
institutional & program expectations for scholarship	Yes – as outlined in the University's renewal, promotion and tenure, and professional assessment (6 th year) requirements	No - Scholarship is encouraged though not required	No - Scholarship is encouraged though not required
institutional & program expectations for teaching / supervision	Yes – as outlined in the University's renewal, promotion and tenure, and professional assessment (6 th year) requirements	No - Previous teaching experience is encouraged though not required	No - Previous supervision experience is encouraged though not required
institutional & program expectations for research	Yes – as outlined in the University's renewal, promotion and tenure, and professional assessment (6 th year) requirements	No - Research is encouraged though not required	Research is encouraged though not required
institutional & program expectations for MFT relational/systemic supervision	Yes – must be active AAMFT approved Supervisor or Supervisor-in-training (SIT). If SIT, must complete training in 2 years of initial appointment.	No – Relational/systemic supervision experience is encouraged though not required	Yes – must be active AAMFT approved Supervisor or Supervisor in training (SIT). If SIT, must complete training in 2 years of initial appointment.
institutional & program expectations for practice	Yes – must maintain active professional and/or clinical supervision practice (3 hours a week minimum)	No – ongoing practice work is encouraged though not required	Yes – must maintain professional and/or clinical supervision practice (3 hours a week minimum)
institutional & program expectations for service	Yes – as outlined in the University's renewal, promotion and tenure, and professional assessment (6 th year) requirements	No - Professional Service is encouraged though not required	No - Professional Service is encouraged though not required