MARRIAGE AND FAMILY THERAPY FACULTY

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Section I
Program Mission and Objectives

Mission: The mission of the Marriage and Family Therapy Program is to provide clinical and academic training in marriage and family therapy to students who are committed to ethical, effective, systemic, multicultural informed practice of marriage and family therapy and to functioning at a high level of clinical competence.

Vision: To train the next generation of Marriage and Family Therapist’s to provide quality Marriage and Family Therapy.

Systemic Approach

Emphasis in teaching and training is placed on a systemic view, or focusing on the interconnectedness of elements within all living organism (i.e. interactions between family members). It is believed that in order to fully understand, it is necessary to grasp the functioning of the entire unit. The family is assumed to be larger as a whole than the sum of its parts. Therefore, cause is seen as a circular causality, meaning each part is influencing and being influenced by others. The systemic approach places the importance of “how” something is being affected instead of “why”.

Student Learning Outcomes and Curriculum Map

Marriage and Family Therapy Program Goals and Student Learning Outcomes

These Student Learning Outcomes (SLOs) describe what students will learn in the program and provide evidence of the Program Goals. Students demonstrate achievement of the SLOs through in class assessments and Clinicals. Goals and Outcomes are reviewed annually by the program Faculty and Communities of Interest.

<table>
<thead>
<tr>
<th>Program Goals</th>
<th>Related SLO #</th>
<th>SLO Data</th>
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<tr>
<td>Teach essential knowledge related to development and pathology, family life cycle development, psychotherapy research, and systemic theories and philosophy.</td>
<td>1-4, 7</td>
<td>SLO Data is reviewed annually to determine future actions</td>
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<tr>
<td>Train competent marriage and family therapists.</td>
<td>1-8</td>
<td>SLO Data is reviewed annually to determine future actions</td>
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<td>Increase awareness of issues of inclusion and Social Justice for delivery of more culturally competent family therapy.</td>
<td>1-8</td>
<td>SLO Data is reviewed annually to determine future actions</td>
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<td>Promote an understanding of ethical principles and high standards of ethical conduct consistent with the AAMFT Code of Ethics.</td>
<td>3, 5, 6, 8</td>
<td>SLO Data is reviewed annually to determine future actions</td>
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Student Learning Outcomes:

1. **Development**: Students will comprehend and apply family life cycle and individual development to diverse families.
2. **Systemic Theories**: Students will comprehend and apply systemic theories of marriage and family therapy to diverse individuals, couples, and families.
3. **Practice**: Students will develop and sustain a working therapeutic relationship and competent systemic techniques with diverse individuals, couples, and families.
4. **Research Design and Procedure:** Students will demonstrate knowledge of research designs and procedures and their application to marriage and family therapy.

5. **Ethics:** Students will comprehend and demonstrate a commitment to professional ethics and legal requirements in the practice of marriage and family therapy.

6. **Reflective Practice:** Students will evaluate their own strengths and limitations as a clinician and use this reflective process to promote personal and professional growth.

7. **Inclusion and Social Justice:** Students will understand and apply principles of inclusion and social justice.

8. **Assessment and Treatment Planning:** Students will assess diverse families and develop appropriate treatment plans based on assessment and diagnosis.

### Marriage and Family Therapy Student Learning Outcomes Curriculum Map

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We view the academic and clinical portions of our program as equally important. Clinical training must proceed from a solid understanding of child development, adult development and aging, and marriage and family processes. To be meaningful, however, we believe that academic understanding must be applied and tested by a knowledge that comes only from working directly with couples and families. Marriage and family therapy is an enterprise that includes such direct contact. Because we do not think the clinical, academic, and research enterprises should be separated, all three are integrated and emphasized throughout the student’s training.

As a faculty, we do not teach or adhere to a single theory, school, or approach to marriage and family therapy. Rather, we teach all of the major approaches and expect the student to be willing to examine each of these in her/his work with clients. We want the student to understand, compare, and evaluate the major approaches. The students task is to integrate the various approaches into a personally meaningful and effective approach for the purpose of helping families change and helping others understand families better through teaching and research.

### Accreditation

The Marriage and Family Therapy Program at Appalachian State University is accredited by the Commission on Accreditation for Marriage and Family Therapy Education. See [https://www.aamft.org/iMIS15/AAMFT/Content/coamfte/about_coamfte.aspx](https://www.aamft.org/iMIS15/AAMFT/Content/coamfte/about_coamfte.aspx) for more details.

The Marriage and Family Therapy program is also accredited by the International Accreditation Commision for Systemic Therapy Education (IACSTE). For more information, see [http://www.ifta-familytherapy.org/](http://www.ifta-familytherapy.org/)

### Legal and Ethical Standards

Students of the Marriage and Family Therapy Program are held to the same standards as members of the profession for which they are preparing. In as such, students are expected to be familiar with and adhere to
the legal and ethical codes set forth by the American Association for Marriage and Family Therapy Licensure Boards. Please see these standards at the organizational website:

Students are expected to follow the North Carolina General Statutes. Please see NC Statutes website:
https://www.ncleg.gov/Laws/GeneralStatutes

Organizational Structure and Physical Location

The MFT Program is located within the Department of Human Development and Psychological Counseling (http://hpc.appstate.edu) The Department of Human Development and Psychological Counseling is a department within the College of Education (http://rcoe.appstate.edu). Dr. Karen Caldwell is the Interim Chair of the Department of Human Development and Psychological Counseling and the Program Director of the Marriage and Family Therapy Program is Dr. Kristen Benson. The Dean of the College of Education is Dr. Melba Spooner.

All programs that offer graduate degrees at ASU are coordinated by the School of Graduate Studies. The School of Graduate Studies sets university-wide policies and procedures (http://www.graduate.appstate.edu/gradstudies/bulletin14/index.html) for graduate programs. The School of Graduate Studies is located in 232 of the John E. Thomas building.

Licensure

The MFT Program meets educational requirements for licensure as a Marriage and Family Therapist in the state of North Carolina (see appendix G). We have flexibility in our program of study and can often meet the needs of students from other states and nations. Faculty will consult with students on a case by case basis to discuss post licensure goals. Our program of study prepares our students with a COAMFTE approved curriculum which informs them where to locate information on licensure requirements in the states of geographic region they will be practicing. Please go to AAMFT.org for more information on licensure requirements in other regions so we can assist you with degree portability.
Marriage and Family Therapy Program Policies and Procedures

The Marriage and Family Therapy Program follows the policies and procedures of the Department, College, and University. Specific policies and procedures relating to mission and outcome alignment; roles within the program, including Communities of Interest, the Student Association of MFT, faculty, etc.; Student Learning Outcome collection and revision; Student/Graduate Achievement Data; Curriculum Review; Student Progression; Survey collection and utilization; Evaluation of Student Support Services, Climate of Safety and Respect, Fiscal and Physical Resources, Technological Resources, and Website and Publication Review; Academic Evaluation; and Faculty and Supervisor Sufficiency and Evaluation, including roles and responsibilities can be found in Appendix H, Quality Assurance System.

Personal and Professional Expectations of Students

The Human Development and Psychological Counseling faculty expects students to demonstrate a commitment to:

- Gaining the necessary knowledge as identified in program objective.
- Understanding and following appropriate ethical standards.
- Developing facilitative interpersonal skills.
- Developing the personal qualities necessary to integrate and apply their knowledge and skills. Using good judgment and appropriate emotional functioning prior to contact with clients in any internship. Those students who are recovering from a personal addiction to alcohol or drugs are expected to have 15 months of continuous sobriety prior to registering for the Internship in Marriage and Family Therapy.

Students in the Human Development and Psychological Counseling Department will be reviewed by the appropriate program faculty at the time a student’s program of study is under consideration, at the time an application is made for candidacy, and at any other time when there is a concern.

If there is a question as to whether or not a student is meeting the departmental expectations, the student’s advisor or program director will give feedback, both orally and in writing, regarding the concern(s) and the steps needed to rectify the situation.

After a review of progress, if improvement is not being made, the student might be given additional time, might be asked to stop taking courses for a specified period of time, might be delayed in beginning internship or be asked to take leave from internship, might have duties adjusted at internship, might be dismissed from the program/department, or may have other changes made to the student’s academic or clinical training as deemed appropriate by faculty.

Student Involvement in Program Governance and SAMFT

Student Association of Marriage and Family Therapy (SAMFT) is the student organization for Appalachian State Marriage and Family Therapy students. As an organization, we meet multiple times each semester, complete in a service project each year, sponsor and plan an annual professional development conference on campus, and have periodic social gatherings each month. Students currently enrolled in the Marriage and Family Therapy Program at Appalachian State are eligible and encouraged to join the student organization.

A representative from the association is invited to attend the MFT program meeting. At this meeting the representative is invited into all conservations unless limited by law and/or university policy. Student or group of students who want to address the faculty as a whole are invited to attend the MFT program meeting as needed.
MFT Academic Standards for Retention:

The university, graduate school, and program/departmental faculty are committed to establishing a reflective environment that promotes counselor competence, strong professional ethics and values, personal integrity and a sense of responsibility towards meeting the needs of individuals and families from diverse populations.

Maintain an overall GPA of 3.0 or higher; Earn no more than three final grades of C or lower in the program of study (including repeated courses);
Earn a Satisfactory in all applicable field courses (HPC 6900);
Complete all course prerequisites as outlined in the appropriate courses of study;
Complete all program requirements which prerequisite subsequent courses/fieldwork/graduation

The Academic Integrity Code

Appalachian State University’s Academic Integrity Code is designed to create an atmosphere of trust, respect, fairness, honesty, and responsibility. The Academic Integrity Code outlines “user-friendly” procedures and mechanisms for resolving alleged violations of academic integrity. The Academic Integrity Code is the result of cooperation among Appalachian’s faculty, students, and administrators, and promotes a campus dialogue about academic integrity. All members of the Appalachian State University community are responsible for promoting an ethical learning environment.

Students applying to or enrolled in the Marriage and Family Therapy Program at Appalachian State University agree to abide by the University’s Academic Integrity Code. http://academic integrity.appstate.edu/. Among other things, this Code requires that:

Students will not lie, cheat, or steal to gain academic advantage.
Students will oppose every instance of academic dishonesty.

NOTE: Students are dismissed from the MFT Program if they earn more than three final grades of a C, any final grade lower than a C, or if they earn an Unsatisfactory in a field course (HPC 5900, HPC 6900).

Also, in order to graduate the program, students must pass the comprehensive exam.

A grievance on the part of any student will be processed as described in the Appalachian State University Graduate Bulletin: Graduate Student Appeals Processes (www.grade.appstate.edu/gradstudies/bulletin14/policies/appeals.html). This includes but is not necessarily limited to:

Grievances pertaining to suspension and dismissal from a graduate program (as amended) http://graduate.appstate.edu/gradstudies/bulletin14/policies/suspension.html
Grievances pertaining to course grading (as amended) http://graduate.appstate.edu/gradstudies/bulletin14/policies/GPA-grades.html
Allegations of discrimination be handled according to University discrimination policies administered by the Office of Equity, Diversity, and Compliance (288-262-2144 or http://edc.appstate.edu/contact).

If the student does not agree with the faculty or advisor, the student may first appeal to the department chair. If not satisfied, the student may appeal to the Reich College of Education Dean, then to the Graduate School Dean and/or appropriate committees on campus. The student should remember that “Appalachian reserves the right to exclude at any time a graduate student whose conduct is deemed improper or prejudicial to the best interest of the University,” (Graduate Bulletin 2013-2014, Online, Appeals Process).

Recruitment of Students Representing Diverse Backgrounds

Appalachian State University is committed to equality of educational opportunity and does not discriminate against applicants, students, or employees based on race, color, national origin, religion, sex, gender identity and expression, political affiliation, veteran status, genetic information, age, disability, or sexual orientation. Appalachian actively promotes recruiting by recruiting and enrolling a diverse student body.
Applicants must hold a baccalaureate degree from a college or university of recognized standing and must submit scores from the Aptitude Section of the Graduate Record Examination.

Applicants who meet the general graduate school requirements are considered for admission into the Marriage and Family Therapy Program by an Admission Committee comprised of the Marriage and Family Therapy faculty. In reaching admissions decision, the committee considers GPA, GRE scores, response to the departmental questionnaire, letters of reference, and performance in an interview conducted by faculty and current students. In rare incidences, an applicant who fails to meet all of the entrance requirements may be considered for admission if other outstanding characteristics and experiences are documented.

**Admission Status**

Applicants may be admitted in one of the following categories:

**Regular** – Regular admission is granted to students who meet the established requirements for entrance. Conditions, such as the completion of one or more additional undergraduate courses, may be specified.

**Provisional** - A student who lacks course prerequisites for admission, or who has deficiencies, but is otherwise admissible may be admitted on a provisional basis. The department will review the student’s progress before determining enrollment beyond the first term.

**Visiting** - Graduate students enrolled in good standing at other recognized graduate schools may be permitted to register for a limited number of graduate credits upon approval by the Dean of Graduate School and the Department Chairperson.

**Applicant** - In certain instances, students whose applications are incomplete may register for a maximum of one term upon approval by the departmental admissions committee, the Department Chairperson, and the Dean of the Graduate School.

**Non-Degree Students** - Students holding a baccalaureate degree and who are not working toward a graduate degree are permitted to take graduate courses only with the written permission of the Dean of the Graduate School. Course work taken as a non-degree student is not normally counted toward a graduate degree.

**Auditors** - Regular fees are charged for auditing. A student may register as an auditor for a course with the written consent of the instructor. Classes audited shall count as part of the student's load, but he or she will receive no credit and no grade will be assigned. An auditor is expected to be regular in class attendance but may not participate in class discussions unless invited to do so. An auditor is not required to take tests and examinations. An auditor who finds it necessary to discontinue class attendance should formally drop the course.

**Undergraduate Enrollment for Graduate Level Courses** - Seniors with a grade point average of 3.00 or above may, with written permission from the course instructor, chairperson of the department offering the course, and the Dean of the Graduate School, be permitted to take one or more graduate courses for undergraduate credit. Credit earned in this manner will be used to meet baccalaureate degree requirements and may not be applied toward a graduate degree.

**Advisors/Program of Study**

Each student is assigned an academic advisor, with the Marriage and Family Therapy faculty serving as an additional advisory committee. The student is expected to meet with his/her advisor periodically and must plan a complete program of study after completing 9 hours. Program of Study changes are available through DegreeWorks online. Changes in this program can be made only with the approval of the advisor,
the Department Chairperson, and the Dean of Graduate School. Course work taken without the approval of the advisor will not automatically be applicable towards the degree.

- **DegreeWorks** [https://degreeworks.appstate.edu/](https://degreeworks.appstate.edu/)
  DegreeWorks is a comprehensive academic advising and degree audit tool that helps students and their advisors successfully navigate curriculum requirements. Use this tool to ensure you have met all the requirements for graduation. If you have questions, contact your advisor.

**MFT Program Progression and Admission to Candidacy**

Marriage and Family Therapy students progress through four distinct stages to earn degree conferral: Admission to Appalachian State University and the Cratis D. Williams School of Graduate Studies, Admission to Candidacy, Application and Admission to Internship, Comprehensive Examination.

Applicants to the Marriage and Family Therapy program must apply for admission via the Cratis D. Williams School of Graduate Studies website found here: [https://grad.appstate.edu/apply/](https://grad.appstate.edu/apply/). The Marriage and Family Therapy program admits new students during the fall semester only.

**Admission to Candidacy**

Admission to graduate study does not carry with it admission to candidacy for the master's degree. Admission to candidacy may be considered after the completion of one semester of graduate study in the appropriate university degree program and serves as an evaluation for past semester performance.

Students in the Marriage and Family Therapy Program are admitted to candidacy at the end of the second semester. The student is considered an active participant and, therefore, should take any initiative with any questions regarding specific goals, etc. The applicant's advisory committee is made up of the Marriage and Family Therapy faculty. Admission to candidacy is contingent upon the recommendation of the applicant's advisory committee. To be considered as a candidate for the degree, an applicant will be expected to have demonstrated ability to do satisfactory and creditable work at the graduate level on at least eight (8) semester hours of approved graduate courses and have a 3.0 or better GPA. In addition, students must have cleared all Incompletes in core courses prior to consideration.

The student typically must qualify for candidacy before the completion of 18 semester hours in order to continue as a degree student. The student and his/her advisor will complete the Admission to Candidacy Evaluation Form ([https://mft.appstate.edu/current-students](https://mft.appstate.edu/current-students)) and provide this to the student’s advisor for further review with the advisory committee.

Students may begin the process of applying to internship at the end of their first fall semester. Students may not contact internship sites until after they have been approved for candidacy and the internship coordinator the application. Once approved by the internship coordinator, students are directed to submit a cover letter, resume, and three references to their intended site. After interview and acceptance by the internship site, students then fill out the permission to register for internship for MFT form and submit to the internship coordinator. The internship coordinate files the paperwork and registers students for HPC 6900: Internship in MFT. This process is again outlined in the Marriage and Family Therapy Internship Handbook found here: [https://mft.appstate.edu/](https://mft.appstate.edu/).

All marriage and family therapy students must take and pass the Comprehensive Examination. Request to sit for the examination can be found here: [https://mft.appstate.edu/current-students](https://mft.appstate.edu/current-students)

**Changing Majors**

Each student is accepted into a specific program within the department (i.e. community mental health counseling, professional school counseling, student affairs administration, marriage and family therapy). A student may not switch to another program without making a formal written request and receiving the prior approval of his/her advisor, the new program admissions committee, and the Department
Chairperson. A student who wishes to change to another department must have the approval of the Dean of the Graduate School and the department into which he/she proposes to transfer. Acceptance into a particular program/department does not guarantee acceptance by another program/department.

**Internships**
Prior to contact with clients in any internship, students are expected to evidence good judgment and appropriate emotional functioning. Those students who are recovering from a personal addiction to alcohol and/or drugs are expected to have 15 months of continuous sobriety prior to registering for an internship.

A student must receive approval from his/her advisor and the department chairperson prior to registering for any internship. The appropriate departmental request form must be filed during the regular academic term preceding the start of an internship. For students to start internship, they must satisfactorily complete the candidacy process.

Additional information is available in the Internship Handbook, published on the program website (https://mft.appstate.edu/).

**Liability Insurance**
All students are required to have liability insurance during the time they are completing internship requirements. An additional fee is charged for students enrolled in HPC 6900 to cover the expense of this insurance. Low-cost liability coverage is also available to student and clinical members of AAMFT. Students must be covered by a liability insurance policy before beginning clinical work.

**Comprehensive Examination**
Although students may be required to participate in special departmental examinations at the beginning of their programs and/or at the time of candidacy, all students must perform acceptably on a comprehensive examination (multiple choice exam, case presentation, theory of therapy paper and presentation, oral defense). The comprehensive exam is scheduled during the spring semester of the student's second year. Written comprehensive exams are offered only once each semester and once in the summer. Students must provide a written confirmation that they plan to take the Comprehensive Examination to their advisor by the posted deadline. Students approved to take the comprehensive exam will be notified in writing by the Department Chairperson.

**Professional Associations**
Students are strongly encouraged to join the American Association for Marriage and Family Therapy (AAMFT) www.aamft.org and the North Carolina Association for Marriage and Family Therapy (NCAMFT) www.ncaamft.org. Information about AAMFT and other appropriate activities for students in the program is available in the departmental office.

**Student Responsibility**
The graduate student is entrusted with the responsibility for his/her own progress. He/she keeps an up-to-date record of the courses taken in his/her program and checks periodically with his/her assigned advisor. Responsibility for errors in his/her program or in interpretation of regulations rests entirely with the student. It is the student's responsibility to initiate programs of study, candidacy, internship, and comprehensive exam requests as specified. The student is responsible for making the initial contact with his/her assigned advisor. It is also the student's responsibility to apply for graduation by the appropriate deadline.

**Counseling Services**
HPC students can receive free therapy at the Counseling for Faculty and Staff Center through Appalachian State University Human Resources.  https://cfs.appstate.edu/  
Phone: (828) 262-4951
University Policy on Drugs and Alcohol
Appalachian State University views the illegal or abusive use of alcohol and/or drugs as contrary to the high standards of professional and personal conduct and incompatible with personal health and the pursuit of academic excellence. Illegal or abusive use of alcohol and drugs can adversely affect the academic community and educational environment. Therefore, University policies and regulations address the use of alcohol and drugs (http://policy.appstate.edu/Drugs_and_Alcohol) and the Code of Student Conduct (http://studentconduct.appstate.edu/).

Graduation
You must apply for graduation and to walk in the graduation ceremony. Most students choose to walk in the May graduation (we have a ceremony for the department and the university holds one as well). Most MFT students officially graduate in August after completing internship. Details about graduation dates, times, and how to apply for graduation. Apply at the beginning of the semester you plan to graduate (for August graduation, that is the beginning of the summer term).
https://registrar.appstate.edu/commencement-graduation
MFT Diversity and Inclusion Policy

The American Association for Marriage and Family Therapy (AAMFT) Code of Ethics (2015) states the following in regards to non-discrimination:

1.1: 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.

The MFT program embraces the spirit and letter of this non-discrimination policy. Therefore, the policies of the MFT program are likewise committed to the following program policy on non-discrimination:

1. Student therapists will be trained to competently work with diverse clients, colleagues/classmates, faculty, and supervisors. Cultural and diversity competency training includes self-of-therapist engagement and use of respectful/appropriate language.

2. Students agree to recognize the diverse experiences and identities reflected in communities, which includes but is not limited to age, sexual orientation, gender identity, health/ability, racial and ethnic background, socioeconomic status, spirituality, religion, culture, family configuration, and nationality.

3. It is the student’s responsibility to seek additional supervision, diversity/accountability training, and/or personal therapy should they feel uncomfortable learning about, seeing clients, or working with colleagues/classmates on the basis of any factor of diversity listed above.

4. It is the goal of this program to provide opportunities for students to learn about and effectively work with a wide range of clients and presenting problems. Students understand they are free to continue their personal religious and spiritual practice of choice, but cannot refer clients or engage in unethical practice (i.e. reparative therapy) on the basis of religious and/or personal beliefs.

Diversion from these expectations may result in a required remediation plan.

Sources:

GRADUATE CERTIFICATES

The department offers three graduate certificate programs:

**Addiction Counseling Certificate:**

The Addictions Counseling Certificate is a 12-hour program of study. Courses are offered during regular fall and spring semesters, as well as a summer institute. Students must take four of the following Addictions Counseling courses. Courses do not have to be taken in any specific order. Students within a Master’s program may be able to complete the Certificate within the normal length of their program; however, there is no guarantee that they will be able to obtain all the classes required prior to their graduation date. It may be necessary for some students to complete their certificate after they have graduated.

Courses:

The following courses do not need to be taken in any specific order. Prerequisites for classes need to be waived by the administrator of the addictions concentration. Courses with the **** are mandatory. Students in the CMHC degree program must have a CCS or CSI as a supervisor for the internship course.

****HPC 5560 The Addictive Process
****HPC 5570 Counseling the Addicted Person
****HPC 6570 Appalachian Addictions Institute (offered every summer session and can be taken twice for credit) link

HPC 5274 Substance Abuse in Family Systems
HPC 5710 Helping the Troubled Employee (offered on demand)
HPC 6770 Current Issues and Special Populations in Addictions Counseling (offered on demand)

**Expressive Arts Therapy Certificate:**

Appalachian State University offers a Post Master's Graduate Certificate in Expressive Arts Therapy. Individuals who hold a master's degree in counseling or other mental health related area or a master's degree in an arts therapy field are eligible to apply. In addition, students pursuing a master's degree in the Human Development and Psychological Counseling Department or the Department of Social Work may pursue the Graduate Certificate in Expressive Arts Therapy in addition to and in conjunction with their master's degree. The Graduate Certificate in Expressive Arts Therapy requires 18 hours of coursework.

Required Courses for Expressive Arts Therapy Graduate Certificate (18 semester hours):

- HPC 6360: Therapy and the Expressive Arts (3)
- HPC 6370: Intermodal Expressive Arts Therapy (prerequisite HPC 6360) (3)
- HPC 6390: Current Issues in Expressive Arts (prerequisite HPC 6360) (3)
- 9 additional semester hours of coursework selected with the advice and approval of the graduate advisor

Elective Courses in Expressive Arts Therapy:

- DAN 5460: Somatics (3)
- HPC 5860: Dreamwork: Clinical Methods (3)
- HPC 5900: Practicum in Counseling (with a focus on expressive arts) (1-9)
- HPC 6160: Gestalt Therapy (3)
- HPC 6350: Body/Mind (3)
- HPC 6900: Internship (with a focus on expressive arts) (1-18)
- MUS 5006: Philosophy of Music (3)
- MUS 5060: Guided Imagery and Music, Level 1 (3)
Systemic Multicultural Counseling Certificate:

The graduate certificate in Systemic Multicultural Counseling requires 12 hours of coursework. It is designed to provide a broader perspective for working with diverse clients and provide specialized training to help effectively treat marginalized populations.

The program will provide participants with:

- A broader perspective for private practice and mental health agencies.
- Specialized training to help effectively treat marginalized and oppressed populations.

Credit Hours

- 12 semester hours
  - HPC 5110: Multicultural Counseling (3)
  - HPC 5270: Theories of Marriage and Family Therapy I (3)
  - HPC 6225: Advanced Systemic Multicultural Counseling
  - Choose one of the following courses:
    - HPC 5275: Substance Abuse in Family Systems (3)
    - HPC 5570: Counseling the Addicted Person (3)
    - HPC 5271: Theories of Marriage and Family Therapy II (3)
Section III
General Graduate Policies and Procedures

Required Courses
See the listing of required courses in the Graduate Bulletin, found on the Graduate School’s website, or under the Prospective Students tab on the Marriage and Family Therapy Program website.

Thesis Option
In the Marriage and Family Therapy Program, the thesis option requires a minimum of 45 semester hours of approved coursework plus thesis hours (4 s.h.) = 49 total hours. Students who are interested in writing a thesis should consult with their advisor and program faculty.

Course Load
The maximum course load during the regular academic year is 15 semester hours per semester for students without assistantships, and 9-12 semester hours for those holding assistantships. Graduate students may not earn more than 12 semester hours for an entire summer.

Course Numbering
Graduate students may be admitted to courses designated 4500 to 4999 if they did not take them as undergraduate students. Normally, a student may not take more than 12 semester hours (non-thesis degree) or 10 semester hours (thesis degree) below 5000. Courses designated 5000 and above are limited to graduate students only.

Out-of-Date Work
All graduate credit offered for the degree must have been earned within a limit of six calendar years, or for courses earned from Appalachian State University within a limit of ten years, validated by examination. Graduate credit hours transferred from another institution may not be validated by examination.

Grades
The following grades are given in Graduate School:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>4.0 (superior graduate accomplishment)</td>
</tr>
<tr>
<td>A-</td>
<td>3.7</td>
</tr>
<tr>
<td>B+</td>
<td>3.3</td>
</tr>
<tr>
<td>B</td>
<td>3.0 (average graduate accomplishment)</td>
</tr>
<tr>
<td>B-</td>
<td>2.7</td>
</tr>
<tr>
<td>C+</td>
<td>2.3</td>
</tr>
<tr>
<td>C</td>
<td>2.0 (below average but passing)</td>
</tr>
<tr>
<td>C-</td>
<td>1.7</td>
</tr>
<tr>
<td>F</td>
<td>0.0 (failing grade)</td>
</tr>
<tr>
<td>Incomplete</td>
<td></td>
</tr>
<tr>
<td>W</td>
<td>Withdrawal, either from a course or from the University.</td>
</tr>
<tr>
<td>AU</td>
<td>Auditing, no credit.</td>
</tr>
<tr>
<td>S</td>
<td>Satisfactory, given for an internship, a thesis and other designated courses.</td>
</tr>
<tr>
<td>U</td>
<td>Unsatisfactory, given for an internship, a thesis, or other designated courses.</td>
</tr>
</tbody>
</table>

Graduate credit accepted in fulfillment of the requirements for a graduate degree shall not average lower than a 3.00 and no credit toward the degree shall be granted for a grade below C. Course work reported "Incomplete" must be completed within a year of the official ending of the course. A graduate student is permitted to repeat not more than one course to improve his grade. A grade of F is assigned to a student who arbitrarily discontinues meeting a class or who withdraws without making proper arrangements with the Dean of the Graduate School.
**Academic Appeals Policy**
Students wishing to appeal an academic evaluation should first discuss the situation with the instructor of the course. If the situation is still not resolved, the student should contact the Department Chair and then the Dean of the Graduate School.

**Retention Policy**
Appalachian State University reserves the right to exclude, at any time through an appropriate process that affords a graduate student whose conduct is deemed improper or prejudicial to the best interest of the University. Graduate students who fail to maintain a cumulative grade average of at least 3.00, or who fail a course may not be permitted to re-register as degree candidates. However, students may petition the Dean of the Graduate School for consideration in extenuating circumstances, which may constitute justifiable exceptions to this regulation. If the Dean of the Graduate School approves, students may be permitted to register at their own risk for an additional semester.

**Credit by Examination**
Upon the recommendation of a graduate student's committee, and with the approval of the chairperson of the department in which it is listed, a course numbered 4500-4999 may be challenged by examination for graduate credit. Courses numbered 5000 and above may not be challenged by examination. Grades are not recorded for credit earned by examination. Credit by examination may not be used to repeat a course.

**Individual Study**
Since regular class attendance is absolutely essential in meeting the objectives of Human Development and Psychological Counseling Departmental courses, the department permits taking a course listed in the catalog by individual study only in extremely rare situations. If a student requests to take a course by individual study, he/she must receive approval by the advisor, Department Chair, course instructor, Dean of the Reich College of Education, and the Dean of the Graduate School. Consistent with Graduate School policy, this request can be considered only after the student is admitted to candidacy.

**Independent Study**
With the approval of the advisor, instructor, the Department Chairperson, the Dean of the Reich College of Education, and the Dean of the Graduate Studies and Research, a graduate student who has been admitted to candidacy may register for independent study in his/her major field. No more than six semester hours of independent study may be applied toward a graduate degree.

**Transfer Credit**
Students enrolled in a degree program should check with their advisor regarding the possibility of transferring appropriate graduate courses from another university. If graduate credit is approved for transfer, the grades earned must be at least a B and the credit must not be more than six years old at the time the degree is awarded. The courses must be approved by the student's advisor prior to enrollment in such transfer courses.

**Financial Aid**
Various kinds of financial assistance are available to graduate students: assistantships, scholarships, fellowships, loans, and work-study. The Graduate School Office processes applications for all assistance except loans and work-study grants, which are processed by the Office of Student Financial Aid.

**Forms**
All graduate forms (e.g. Admission to candidacy, internship, program requirements) are located under the Current Students tab on the Marriage and Family Therapy Program website. Other graduate school forms, including financial aid, are located at: [http://www.graduate.appstate.edu/forms_graduate/index.html](http://www.graduate.appstate.edu/forms_graduate/index.html)
Placement
Appalachian State University’s Career Development Center is highly recommended to assist students preparing to enter the job market.

Endorsement Policy
Departmental faculty will endorse students only for positions for which they have demonstrated the knowledge and skills needed to be successful in that position. Likewise, students will only be endorsed for professional credentials (licensure and/or certification) for areas in which they have been properly trained.

Second Masters
A student holding a master's degree may earn a second master's degree in another discipline. A minimum of 36 semester hours is typically required for a second master's degree in this department, dependent on the number and type of courses taken during the first graduate degree. In all cases, the required courses/experiences in a specific major must be completed successfully. See the Graduate Bulletin for further information.
Professional Standards and Behavior
The Marriage and Family Therapy Program has been developed to train masters-level students as professional marriage and family therapists.

Marriage and Family Therapy faculty and students enrolled in the Marriage and Family Therapy Program must adhere to American Association for Marriage and Family Therapy (AAMFT) standards of ethical professional behavior in their therapy, training, teaching, and research. A complete copy of the most current edition of the AAMFT Code of Ethics is available on the AAMFT website: https://www.aamft.org/Legal_Ethics/Code_of_Ethics.aspx The basic standards are as follows:

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.

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.

Standard III. Professional Competence and Integrity
Marriage and family therapists maintain high standards of professional competence and integrity.

Standard IV. Responsibility to Students and Supervisees
Marriage and family therapists do not exploit the trust and dependency of student and 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.

Standard VI. Technology & 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." Students are responsible for being competent in any technology they utilize. Appalachian state support a variety of platforms and more information is available at the following website https://tech4teach.appstate.edu/ In order to complete their program of study students need to be proficient in Microsoft office suite and the current University learning platform.

Standard VII. Professional Evaluations
Marriage and family therapists aspire to the highest standards in providing testimony in various contexts within the legal system.

Standard VIII. Financial Arrangements
Marriage and family therapists make financial arrangements with clients, third party payers, and
supervises that are reasonably understandable and conform to accepted professional practices.

**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.

Violations of these standards must be reported to the Marriage and Family Therapy Program Director (see Section V, Grievance and Dismissal Procedures). Any violation may also be reported, in writing, to the AAMFT Ethics Committee.

Marriage and Family Therapy students and faculty are required to carry professional liability coverage. Low-cost and/or free liability coverage is available to student and clinical members of AAMFT. A policy must be purchased before beginning clinical work.

The leading national professional organization for marriage and family therapists is AAMFT. Marriage and Family Therapy faculty and students are expected to become members of AAMFT, and to become actively involved in the work of AAMFT at the local, state, and national levels.

Professional conduct with clients, other students, Marriage and Family Therapy faculty, and other agencies is an absolute requirement of the Marriage and Family Therapy Program.

Marriage and Family Therapy faculty members are expected to demonstrate appropriate models of professional conduct, and students are expected to follow appropriate models of professional behavior.

**Internship in Marriage and Family Therapy**

Marriage and Family Therapy students must obtain at least 500 hours of direct client contact under AAMFT-approved supervision prior to graduation from the Marriage and Family Therapy Program. The 500-hour requirement is fulfilled through an approved off-campus site and through alternative hours experiences. The internship experience spans a twelve-month period.

At least half (250) of the 500 direct client contact hours must be with couples and families (relational). The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) provides the following definition of direct client contact.

Direct client contact is defined as face-to-face (therapist and client) therapy with individuals, couples, families, and/or groups from a relational perspective. Activities such as telephone contact, case planning, observation of therapy, record keeping, travel, administrative activities, consultation with community members or professionals, or supervision, are not considered direct client contact. Assessments may be counted as direct client contact if they are face-to-face processes that are more than clerical in nature and focus. Psychoeducation may be counted as direct client contact.

Observation of another therapist's work, although valuable, does not constitute direct client contact. Two therapists working together in the room with the client is considered direct client contact for both therapists. Students must meet weekly with an appropriate supervisor (AAMFT Approved Supervisor or AAMFT Supervisor-in-Training, see below) in order to have direct client contact hours counted toward the 500-hour requirement.

Up to 100 hours of your 500 hours of clinical internship may be alternative therapeutic contact hours. These hours must be approved by your internship supervisor prior to the experience. These alternative hours must be systemic, interactional, and add diversity to your internship experience. The hours must be face-to-face contact with clients. A therapeutic contract with the client(s) must exist.

Students are required to obtain a total of 100 hours of supervision, which includes at least 30 hours of
individual supervision and up to an additional 70 hours of group supervision. Individual supervision is defined as supervision of one or two individuals. Group supervision will not exceed six students per group. Of the 100 hours of required supervision, at least 50 must be conducted live (i.e., the supervisor viewing case via closed circuit video) or involve the student presenting videotaped case material. Under normal circumstances, students in the Marriage and Family Therapy Program receive more hours of supervision than required.

During the internship experience, students frequently observe clinical work from behind a one-way mirror or via a closed circuit T.V., in addition to observing others students’ videotaped clinical work. Students observing someone else’s clinical work may receive credit for group supervision provided that (1) at least one supervisor is present with the students, (2) there are no more than six students altogether, and (3) the supervisory experiences involve an interactional process between the therapist(s), the observing students, and the supervisor. If there are no more than two students altogether, the observing student may receive credit for individual supervision under the same conditions.

Supervision will be distinguishable from psychotherapy or teaching. The supervisory process, as distinguished from teaching, involves the observation and development of clinical skills in an applied setting, which, although it may have teaching components, requires more student autonomy and application of previously learned concepts and skills. The supervisory process, as distinguished from psychotherapy, requires the processing of student concerns only as they relate to the clinical competency of the student. If a student demonstrates a need for personal therapy, the Marriage and Family Therapy Program reserves the right to both recommend and/or require this as a supplement to the teaching and supervision the student is receiving.

If a student is simultaneously being supervised and having direct clinical contact, the time may be counted as both supervision time and direct clinical contact time. When a supervisor is conducting live supervision, only the therapist(s) in the room with the client (up to two therapists) may count the time as individual supervision.

Supervision hours are counted towards fulfillment of clinical requirements only when the supervisor is either an AAMFT-designated Approved Supervisor or Supervisor-in-Training. The Marriage and Family Therapy Program currently provides supervision by AAMFT approved supervisors.

According to COAMFTE standards, students must receive at least one hour of supervision each week they seek clients. Supervision will occur at least once every week in which students have direct client contact hours. Individual supervision will occur at least once every other week in which students have direct client contact hours.

In order to meet the 500-hour direct client contact requirement within a one-year period, the student will need to conduct ten hours of therapy each week under appropriate weekly supervision. It is advisable that students leave a couple of evenings each week free for clinical work, in addition to the regularly scheduled group supervision class. Good clinical practice dictates setting aside 2-3 large blocks of time for clinical work, rather than trying to fit clients into odd free hours scattered throughout the week. In reality, more than 10 client contact hours per week must be scheduled to allow for vacation periods, slow times, illness, clients who fail to attend appointments, etc. Similarly, supervision sessions should be scheduled to allow for vacation times, conferences, illnesses, etc.

Both direct client contact hours and supervision hours will be documented in records maintained by the student. The student is responsible for having their supervisor co-sign these records. At the end of each semester the student will forward these records to the Marriage and Family Therapy Program Director who will maintain these records on file.
These records will be considered the definitive record of the student's therapy and supervision hours. Students will have periodic opportunities (i.e., at least at the end of every semester) to correct errors in these records, with their supervisor's approval. Records are not subject to further change as the result of student action after this review.

In order to obtain the Master of Arts in Marriage and Family Therapy, students must continue to accumulate direct client contact and supervision hours until all requirements are met. If requirements are not completed within one year, the student must develop his/her own plan for completing the requirement and submit the plan to the Marriage and Family Therapy faculty for approval. Students are encouraged to complete their internships in the given year, since space constraints limit the number of students who can be enrolled in HPC 6900 (Internship in Marriage and Family Therapy). Students should keep in mind that extending supervision beyond the one year may mean paying an AAMFT Supervisor outside the Marriage and Family Therapy Program to provide supervision. Under no circumstances may a Marriage and Family Therapy faculty member receive payment for supervision of a current Marriage and Family Therapy graduate student.

An Evaluation of internship Performance is prior to the end of the semester, at which time the student therapist and the internship supervisor meet to review the student’s performance. The student must be allowed to review this document, and must sign the last page to certify the review. The student's signature does not imply agreement with the supervisor's comments or evaluation. The student may add his/her own comments regarding the evaluation; however, these comments do not constitute an appeal of the grade for internship (See “Grievance and Dismissal Policies and Procedures” for grade appeal procedures). Each student will also be asked to evaluate the internship experience in writing. Copies of the student evaluations are circulated to all Marriage and Family Therapy faculty members, including the internship supervisor. Students are encouraged to type their responses to provide anonymity for the student.

**Off-Campus Internship Sites**

Client contact hours will be obtained at off-campus internship sites. Off-campus sites must meet the following criteria:

1. Completion of a Marriage and Family Therapy Program contract or affiliation agreement.
2. Legal and financial responsibility must be accepted and acknowledged by the internship site. While the Marriage and Family Therapy program provides clinical supervision, it must be clear that the internship site is responsible for case assignment, protecting client welfare, and similar issues;
3. Administrative supervision is the right and responsibility of the internship site. Supervision of therapy may be provided (1) by the staff of the internship site and/or (2) by members of the Marriage and Family Therapy Program faculty who are AAMFT Approved Supervisors or Supervisors-in-Training. A specific person must be named as the on-site supervisor. The person must hold a current appropriate Mental Health license. The Marriage and Family Therapy faculty member assigned as supervisor will maintain regular contact with the on-site supervisor, consulting with the on-site supervisor before assigning a grade for internship; and
4. The internship site and the on-site supervisor must agree to assist in completing an evaluation of the student's performance at the end of each semester. This document will be the major basis for grade assignment for the student. The observations of and information provided by the on-site supervisor are crucial in this process. However, the responsibility for final grade assignment rests with the supervising Marriage and Family Therapy faculty member. When the student is providing services through the Marriage and Family Therapy Program’s on-campus Marriage and Family Clinic and an off-campus site, an evaluation will be completed for each placement. The student will also complete a written evaluation of the internship experience.
Guidelines for Internships in Private Practice Settings

The Marriage and Family Therapy Program recognizes that students can benefit greatly from opportunities to have an internship in a private practice setting; however, we also recognize that there is a potential for exploitation in such setting. To avoid exploitation, we have adopted the following guidelines:

1. You are not allowed to practice in a private setting with the instructor for your section of the course HPC 6900.
2. You shall make full disclosure of your status as a student intern and obtain written consent from all clients that you are involved in treating.
3. Students are not allowed to receive payment for their services.
4. Students cannot be required to contribute to the overhead costs of the practice (internship site).
5. Students are not allowed to be employed by their site or to receive payment related to direct client contact hours completed.
6. If there is a conflict or a problem with any site, the Marriage and Family Therapy Program’s normal policies, as spelled out in this Handbook, apply.
7. Each site must be approved by the Marriage and Family Therapy faculty.
8. The student should make a formal proposal to the Marriage and Family Therapy faculty requesting the site be considered and approved. The proposal shall address each requirement stated here and how it will be met by the additional site location.

Course Requirements for HPC 6900

Students shall do the following to receive a passing grade for this course:

1. Attend all supervision classes and individual sessions.
2. Complete all assigned readings.
3. Keep a list (which is signed off weekly) of all clients and the type of therapy provided.
4. Videotape therapy sessions, when approval for such videotaping is provided by the client.
5. Bring a minimum of one videotape to each internship session.
6. Abide by the code of ethics of the AAMFT at all times.
7. Work 15-20 hours a week at the internship site.
8. Other requirements as stated by your supervisor.

- Abide by the code of ethics of the AAMFT.
- Work 15-20 hours a week at the internship site with an average of 10-12 direct client contact hours per week though some sites may require more hours.
- Students are expected to have some awareness of their interpersonal functioning in their intimate relationships and in their family of origin. While the supervision is not a therapy group, the student is expected to be willing to explore these relationships because parallel issues will occur in the group and with the clients the student is seeing in therapy. Some part of the group experience may be devoted to working on these issues.
- A student whose behavior is disruptive to the supervision group and/or who appears unprepared for supervision may be asked to suspend his/her supervision until such a time that the Marriage and Family Therapy faculty feel the student has met criteria to continue.
- A student may be referred to the counseling center for counseling when his/her issues appear beyond the scope of the supervision group.
- Students are encouraged to communicate directly with other students or the supervisor about issues that arise in the group. Triangulating with others outside the group will be viewed as disruptive to the group process.
- Other requirements as stated by your supervisor.
Section V
Confidentiality in Supervision and Training

Marriage and family therapists are under an ethical obligation to avoid exploiting the trust and dependency of students and supervisees (AAMFT Code of Ethics, Section IV). Students are expected to share personal information about themselves and their family of origin in marriage and family therapy classes and in supervision. We believe that dealing with such material is essential to the process of marriage and family therapy training. Such information will be treated sensitively and will not be shared with anyone outside of fellow class members and the Marriage and Family Therapy faculty.

Section 4.7 of the AAMFT Code of Ethics the limits of confidentiality for 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.”

The Marriage and Family Therapy Program has a clear responsibility to protect clients under the care of student therapists from unethical or incompetent practices. We have an additional responsibility to protect the integrity and well-being of the Marriage and Family Therapy Program as well as an obligation to the profession of marriage and family therapy to prevent unethical and/or impaired individuals from entering the profession.

In response to our ethical obligations to avoid exploiting students, any decision regarding the fitness of any student to continue training as a marriage and family therapist must be made in consultation with the entire clinical faculty. Additionally, students’ clinical skills grow over time. Comparative evaluations of students must be made among faculty members. Such information will not be shared with other students. For these reasons, the clinical faculty must operate as a confidentiality unit. A confidentiality unit means that information defined as sensitive will be retained within the group. The information gathered in supervision or classes, which is relevant to the well-functioning and ongoing evaluation of the student, must be shared among the clinical faculty. That is, the faculty will share information about students among themselves as a group, but they will not share that information with other students.

Regarding the transportation, storage and transmission of confidential media, supervisees must keep tapes under lock and key and under their direct control at all times. Trainees are responsible for maintaining the confidentiality of tapes.

Information related to students’ clinical performance will not be shared with other non-Marriage and Family Therapy faculty or administration. Should a student be required to enter personal therapy and/or cease doing therapy for remedial reasons, faculty members and administrators outside of the Marriage and Family Therapy Program will be informed only that the actions are being taken for personal reasons. No details of personal problems will be presented. This will also be Marriage and Family Therapy Program policy should personal information concerning a student be related to the dismissal of a student from the program. If a student appeals any decision regarding standing in the program, then confidentiality cannot be maintained in the appeal process. It is imperative that supervisee confidentiality be maintained within these outlined parameters.

This confidentiality statement is provided to help students understand the limits of confidentiality. Successful Marriage and Family Therapy training and supervision is, in a large part, dependent on the quality of relationships between faculty and students. These relationships are built over time. The Marriage and Family Therapy faculty is committed to the respect and dignity of students. We feel that maintaining a faculty confidentiality unit is the most effective way of dealing with students’ personal issues in a respectful manner, which allows us to fulfill our obligations to clients and the profession of marriage and family therapy.
Section VI
Grievance and Dismissal Policies and Procedures for Graduate Students

Suspension and Dismissal

Appalachian State University reserves the right to exclude, at any time, a graduate student whose performance is unsatisfactory or whose conduct is deemed improper or prejudicial to the best interest of the University. Graduate students who do not maintain a cumulative grade-point average of at least 3.00 cannot register for classes without the written recommendation of the advisor and the approval of the Dean of the Graduate School (see “Probationary Status”). Degree candidacy is discontinued for the student who has received four grades of “C,” or below and if a graduate student receives a grade of “F” or “U,” the student may not continue in Graduate School unless the advisor submits, in writing, an acceptable recommendation to the Dean of the Graduate School. In no case may a graduate student be permitted to repeat more than one course to improve the grade, and the student who receives a second grade of “F”, “U”, “WF” or “WU” may not continue toward the graduate degree under any circumstances. Graduate credit accepted in fulfillment of the requirements for a graduate degree shall average not lower than 3.00, and no credit toward the degree shall be granted for a grade of “F”, “U”, “WF” or “WU.” A grade of “F” or “U” is assigned to a student who arbitrarily discontinues meeting a class or who withdraws without making proper arrangements with the Registrar’s Office. Course work reported as “Incomplete” must be completed within the following semester of the official ending of the course. Any extension of this period must be approved by the appropriate dean and the Registrar.

Appeals

Any appeal process begins at the level of the students immediately involved: with the associated instructor if an individual course is at issue, with the Director of the Marriage and Family Therapy Program if program policy is involved, or with the Department Chair if a departmental policy is involved.

Where satisfactory resolution has not been achieved at one level, the appeal is taken to the next appropriate level of administrative authority. Thus, certain matters proceed from the Marriage and Family Therapy Program Director to the Department Chair and then to the Dean of the Reich College of Education. If not satisfactorily resolved with the Reich College of Education, the matter would be referred to the Graduate Dean, the Provost for Academic Affairs, or the Associate Vice Chancellor for Equity, Diversity and Compliance (dependent upon the nature of the matters at issue; this office is not necessarily part of the appeals process). Final authority is vested in the Chancellor of the University.

In almost all cases, it is preferable to handle a complaint informally at the level at which the grievance has arisen. Specifically with regard to students in the Marriage and Family Therapy Program, the individual with the grievance should attempt to resolve it directly with the other person or persons involved. If satisfactory resolution is not reached, the individual should bring the grievance to the Director of the Marriage and Family Therapy Program who will attempt to help the parties involved reach a satisfactory resolution.

If the issue is still not resolved, the individual should bring the matter to the Department Chair. If the issue still remains unresolved, the individual with the grievance should initiate a formal grievance process by writing a letter to the Department Chair outlining the grievance, summarizing previous attempts to reach resolution, and requesting the initiation of a formal grievance procedure. At this point, the Department Chair will appoint an ad hoc committee of disinterested persons, preferably including at least one Marriage and Family Therapy faculty member and at least one Marriage and Family Therapy graduate student.

If, in the opinion of the Department Chair, there are no disinterested Marriage and Family Therapy
faculty and/or graduate students to serve on the committee, the selection will be made from non-
Marriage and Family Therapy faculty and/or graduate students in the Department of Human
Development and Psychological Counseling. If satisfactory resolution of the grievance is not achieved
with the ad hoc committee (i.e., at the level of the department), the individual would next bring the issue
to the Dean of the Reich College of Education. The next level of appeal is the Dean of the Graduate
School.

With both the informal and formal grievance process it is crucial to proceed in a timely manner.
Normally, the individual with a grievance would initiate the resolution process as soon as possible after
the incident or incidents in question occurred, within 60 days at the latest. At each level, every effort
should be made to attempt to resolve the grievance within two weeks. Deadlines may be extended in
the sole discretion of the decision-maker if justified by compelling circumstances.

In any grievance procedure, it is imperative that the individual bringing the grievance be protected
from any negative consequences arising from the act of bringing a grievance. Fear of negative
consequences is one of the reasons it is difficult to begin the grievance procedure at the level at
which it must necessarily begin--with the persons directly involved. This is especially difficult
when the person with the grievance has less power than the other individual (e. g., a student with a
grievance against a clinical supervisor or a faculty member). By its very nature, however, a fair
grievance procedure requires that difficult issues must be raised and all parties involved must be
informed that the grievance exists. Retaliation against a person who brings a grievance, or against
any person who participates in a grievance proceeding at any level, is unacceptable; and the
person engaging in retaliation will be subject to disciplinary action. The Marriage and Family
Therapy Program faculty is committed to ensuring that the grievance procedure is a fair one and
that mechanisms are in place for protection and appeal.

SPECIFIC AREAS OF CONCERN

Performance in the Clinical Role

Students and faculty in the Marriage and Family Therapy Program must adhere to the AAMFT Code of
Ethics, even if the individual is not a member of AAMFT. Complaints and grievances related to clinical
supervision or the student's clinical role should first be discussed with the clinical supervisor. If the issue
is not resolved, the grievance procedure should follow the steps outlined above. It is crucial that clinical
training occur in a climate that is respectful of the clients, therapists, and supervisors. Feedback on an
individual's work should be made specifically and directly to the individual involved. It is important to
state positive aspects of the individual's performance as well as possible areas of needed change.
Feedback should be given in a respectful manner, using specific examples. Comments made in the
observation room during a case should be respectful and shared with the therapist who is being observed.
If a grievance involves unethical behavior on the part of an AAMFT member (Student, Associate,
Clinical Member, or Fellow), the individual bringing the grievance is also encouraged to report the
alleged unethical behavior to the AAMFT Ethics Committee in the national office in Washington, D. C.

Sex Discrimination

Title IX of the Higher Education Amendments of 1972 prohibits discrimination on the basis of sex in
student programs and activities. Complaints concerning any violation of Title IX should be directed to
the Office of Equity, Diversity and Compliance (262-2144). https://titleix.appstate.edu/

Sexual Misconduct and Harassment

Appalachian State complies with Title IX reporting and complaints, as reflected by Policy 110:
Discrimination, Harassment, and Retaliation and the Code of Student Conduct.
Sexual Harassment is defined as the unwelcome conduct of a sexual nature that is sufficiently severe, persistent, or pervasive that it interferes with, denies, or limits an individual's ability to participate in or benefit from Appalachian's educational programs or activities, involves a quid-pro-quo expectation or exchange, fosters a hostile environment, or involves retaliation.

The University of North Carolina system does not condone amorous relationships between students and employees. Members of the University community should avoid such liaisons, which can harm affected students and damage the integrity of the academic enterprise.

Student concerns about sexual harassment which involve faculty or staff should be directed to the office of the Office of Equity, Diversity and Compliance (262-2144). [https://titleix.appstate.edu/](https://titleix.appstate.edu/)

**Grade Appeals**

Students who wish to appeal a course grade or the results of the comprehensive exam should consult the Department Chair.

**Appeals for Exceptions to Program Requirements**

If the requirement at issue is a Marriage and Family Therapy Program requirement, the student should present a written request to the Marriage and Family Therapy Program Director, who will consult with the Marriage and Family Therapy faculty. If the requirement at issue is a general departmental requirement for all master students, the student should present a request to the Department Chair. If the student is still not satisfied, he/she should address the issue to the Dean of the Graduate School.

**Assignment to and Performance in Assistantship Roles**

Complaints and grievances related to employment within the department should first be discussed with the supervisor in charge of the position. If the issue is not resolved, the student should present the matter in writing to the Department Chair. If the student is still not satisfied, he/she may ask that the matter be presented to the Departmental Personnel Committee (DPC) for resolution.

**Suspension, Probation, and Dismissal**

The Graduate Bulletin specifies the circumstances under which students may be put on probation, suspended, or dismissed for academic reasons. In addition, the graduate faculty in the department may probate, suspend, or dismiss from the program any student who does not fulfill the academic requirements specified in the graduate student handbook or any student whose work over the period of time shows a demonstrable lack of progress toward their degree. In the case of a Marriage and Family Therapy student, usually such action would be initiated by the Marriage and Family Therapy Faculty and communicated in writing to the student, the student's advisory committee, and Departmental Chair. The student may request a meeting with the Marriage and Family Therapy faculty to discuss the matter and/or may appeal to the Department Chair. The levels of appeal follow those already stated.

Because it is a clinical program, it may be necessary to dismiss a student from the Marriage and Family Therapy Program for other than academic reasons. One of the most difficult tasks facing the faculty occurs when a student's behavior is deemed to be so inappropriate as to warrant major concern as to whether the person is emotionally, interpersonally, or ethically suited for entry into the profession of marriage and family therapy.

The professional role is a decidedly sensitive one. Responsibility must be assumed by the Marriage and Family Therapy faculty to assure that those who might pose serious risks to clients and the standards of the profession (due to emotional instability, questionable ethical standards, or similar deficiencies in professional disposition), are not allowed to enter the profession. Although such measures are most unpleasant, such decisions occasionally are necessary in considering the welfare of everyone involved.
Such issues may transcend effective adjustment via feedback provided in day-to-day supervision and instruction. Accordingly, when such problems occur, the Marriage and Family Therapy core faculty convenes to specify its concerns in writing to the student and the student's advisor. Where possible, this statement specifies the particular behaviors in question, the desired changes and means of addressing them, and a time for reevaluation of the concern where appropriate. If remedial action on the part of the student is not deemed feasible, the student should be informed about the reasons why he/she is regarded as unsuitable for the profession of marriage and family therapy.

A written statement will accompany full verbal feedback to the student, particularly from faculty or others with information from direct observations of the student. If the student feels the matter has been misrepresented, she/he will reply to these concerns and present his/her perspectives on the matter. The matter may be addressed at the level of the Marriage and Family Therapy Program or the recommended measures invoked (e.g., suspension from the program pending a student's attempts to resolve the problem via therapy). At the end of the stated time or process the matter will be reviewed and, in the absence of sufficient change in the desired direction, measures may be taken, up to and including dismissal of the student from the program.

At any point in this process the student has a right to appeal. Because these cases are unusually sensitive, students are reminded that they are not required to appeal and that the matter may be resolved without bringing it to the attention of the full graduate faculty. If the student does wish to appeal a decision of this type, he/she may do so, in writing, to the Department Chair. From that point, the appeal procedure follows that already stated.

NOTE: Any criminal conviction or substantiated violation of the Code of Student Conduct or Academic Integrity Code may result in initiation of dismissal procedures as an academic matter from the Marriage and Family Therapy program. Marriage and Family Therapy students are required to notify the MFT Program Director or Department Chair of criminal charges, convictions, or substantiated Code violations. Failure to do so may result in dismissal from the Marriage and Family Therapy program. Engaging in conduct that results in dismissal from the family therapy field may also result in immediate dismissal from the MFT program.

Although every effort is made to identify student concerns as early as possible, the Department may initiate dismissal procedures at any time to address concerns, even if the relevant issues arise late in the student’s final semester.
Appendix A

Diversity Statements

Appalachian State Diversity Statement

Appalachian State University is committed to developing and allocating resources to the fundamental task of creating a diverse campus culture. We value diversity as the expression of human similarities and differences, as well as the importance of a living and learning environment conducive to knowledge, respect, acceptance, understanding and global awareness.

MFT Program Diversity Statement

The Marriage and Family Therapy program faculty and students abide by and support the Appalachian State diversity statement. The MFT program faculty is committed to preparing students who value diversity, inclusion, and social justice in clinical practice and research and are able to work competently with clients, colleagues, faculty and supervisors from diverse populations. We acknowledge contextual, historical, and current injustices. We strive to be responsive, reduce our role in perpetuating injustice, and work towards prevention. We are committed to creating a cultural climate where all people feel welcome, valued, and included. The MFT Program is committed to recruiting and supporting students from underrepresented backgrounds.
DEFINITION OF PROFESSIONAL IMPAIRMENT

For purposes of this document an impairment is defined broadly as an interference in professional functioning which is reflected in one or more of the following ways: 1) an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior, 2) an inability to acquire professional skills in order to reach an acceptable level of competency, and/or 3) an inability to control personal stress, psychological dysfunction, and/or excessive emotional reactions which interfere with professional functioning. Evaluative criteria which link this definition of impairment to particular professional behaviors are incorporated in the specific evaluation forms for clinical work which are completed by supervisors at several intervals during the internship (evaluation forms are included in this document).

While it is a professional judgment as to when an intern's behavior becomes more serious (i.e., impaired) rather than just problematic, for purposes of this document a problem refers to a trainees' behaviors, attitudes, or characteristics which, while of concern and requiring remediation, are perceived to be not unexpected or excessive for professionals in training.

Problems typically become identified as impairments when they include one or more of the following characteristics:

- The intern does not acknowledge, understand, or address the problem when it is identified.
- The problem is not merely a reflection of a skill deficit, which can be rectified by academic or didactic training.
- The quality of services delivered by the intern is sufficiently negatively affected.
- The problem is not restricted to one area of professional functioning.
- A disproportionate amount of attention by training personnel is required and/or the trainee's behavior does not change as a function of feedback, remediation efforts, and/or time.
- The problematic behavior has potential for ethical or legal ramifications if not addressed.
- The intern's behavior negatively impacts the public view of the program, Department, or University.

Source:
Appendix C
Marriage and Family Therapy Program Requirements

The objective of the Marriage and Family Therapy Program in the Department of Human Development and Psychological Counseling is to provide clinical and academic training in marriage and family therapy to master’s degree level students who are committed to extending the practice and knowledge-base of marriage and family therapy. The goal is to train students who will function at the highest level of clinical competence. The Marriage and Family Therapy Program at Appalachian State University is accredited by the Commission on Accreditation for Marriage and Family Therapy Education of the American Association for Marriage and Family Therapy, 112 South Alfred Street, Alexandria, VA 22314-3061.

ADMISSIONS: Limited enrollment is available. Decision date: February 1.
Admissions Criteria:
- Graduate School requirements
- Departmental Questionnaire completed
- Interview
- Departmental Marriage and Family Therapy Admissions Committee approval

Students who meet the general graduate school requirements are considered for admission into the Marriage and Family Therapy Program by the Admissions Committee. The committee is comprised of the Marriage and Family Therapy faculty. In reaching admissions decisions, the committee considers GPA, GPA in major, GPA in related courses, GRE scores, response to the departmental questionnaire, letters of reference and performance in an interview conducted by faculty and current students. There are circumstances in which exceptions may be made.

Marriage and Family Therapy Program

Students majoring in the Marriage and Family Therapy Program leading to a Master of Arts degree will take courses listed below. This program is designed to meet the need for advanced preparation of counselors who work with families in a wide variety of work settings.
Hours: 52 semester hours with thesis; 48 semester hours without a thesis.

Required Courses:

Theoretical Foundation of Marital and Family Therapy:
- HPC 5270: Theories of Marriage and Family Therapy I 3

Assessment and Treatment in Marital and Family Therapy:
- HPC 5271: theories of Marriage and Family Therapy II 3
- HPC 6270: Marriage and Family Counseling: Clinical Issues 3
- HPC 6271: Theories of Marriage and Family Therapy III 3
- HPC 6280: Assessment and Diagnosis in Marriage and Family Therapy 3

And choose one of the following 8 courses:
- HPC 5273: Meditation and Divorce Therapy 3
- HPC 5274: Substance Abuse in Family Systems 3
- HPC 5275: Systemic Family Therapy Institute 3
- HPC 6162: Systemic Gestalt Therapy 3
- HPC 6272: Marital and Couples Therapy 3
- HPC 6340: Ecotherapy 3
- HPC 6350: Body/Mind 3
- HPC 6730: Sexual Abuse Counseling 3

SUBTOTAL HOURS 24
Human Development and Family Studies:
  HPC 5110: Multicultural Counseling  3
  HPC 5272: Individual and Family Development  3
  HPC 6710: Human Sexuality  3
  SUBTOTAL HOURS  9

Ethics and Professional Studies:
  HPC 5753: Legal and Ethical Issues in Marriage and Family Therapy  3
  SUBTOTAL HOURS  3

Research:
  RES 5000: Research Methods  3
  SUBTOTAL HOURS  3

VI. Supervised Clinical Practice
  HPC 6900 Internship in Marriage and Family Therapy  (3+3+6)
  SUBTOTAL HOURS  12

VII. Electives (1 course from the following or others approved by the student’s advisor):
  FSC 5100: Application of Theories of Child Development  3
  HPC 5130: Women’s Issues in Counseling  3
  HPC 5210: Life and Career Planning  3
  HPC 5220: Counseling Theory and Techniques  3
  HPC 5680: Counseling the Aging  3
  HPC 5850: Theory and Practice of Reality Therapy  3
  HPC 6160: Gestalt Therapy  3
  HPC 6290: Child and Adolescent Therapy  3
  HPC 6570: The Appalachian Addiction Institute  3
  HPC 6720: Group Counseling/Therapy  3
  HPC 6730: Sexual Abuse Counseling  3
  PSY 5552: Diagnosis and Psychopathology  3
  SOC 5560: Race and Minority Relations  3
  SOC 5800: Sociology of the Family  3
  TOTAL HOURS  3

It is expected that students will attend two summer sessions to accrue 9 credits of coursework including a summer internship.

Supervisors for HPC 6900 are certified AAMFT Clinical Supervisors. The 3 internship semesters will cover a calendar year. Students will receive 2 hours of group and 1 hour of individual supervision each week. Students will complete 500 hours of direct client contact. Students will engage in live and video supervision.

Before the completion of nine semester hours, it is the student’s responsibility to develop with his/her advisor a written plan of study.

Prior to enrolling in HPC 6900, students are expected to fill out the appropriate form, countersigned by the advisor and department chair. Also prior to the taking of the departmental comprehensive examinations, a request form is required and can be obtained in the departmental office.

A thesis option is available with faculty approval.

Appalachian State University is committed to equality of educational opportunity and does not discriminate against applicants, students or employees based on race, color, national origin, religion, sex, gender identity and expression, political affiliation, veteran status, genetic information, age, disability, or sexual orientation.
Appendix D

SUGGESTED PROGRAM OF STUDY

<table>
<thead>
<tr>
<th>Suggested Program of Study:</th>
<th>Fall First Year</th>
<th>Spring First Year</th>
<th>Summer First Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>HPC 5270: Theories of Marriage and Family Therapy I</td>
<td>HPC 5753: Legal and Ethical Issues in Marriage and Family Therapy</td>
<td>HPC 6271: Theories of Marriage and Family Therapy III</td>
<td></td>
</tr>
<tr>
<td>HPC 5110: Multicultural Counseling</td>
<td>HPC 5272: Individual and Family Development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RES 5000: Research Methods*</td>
<td>Elective</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Fall Second Year</th>
<th>Spring Second Year</th>
<th>Summer Second Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>HPC 6900: Internship in Marriage and Family Therapy</td>
<td>HPC 6900: Internship in Marriage and Family Therapy</td>
<td>HPC 6900: Internship in Marriage and Family Therapy</td>
</tr>
<tr>
<td>HPC 6270: Marriage and Family Counseling: Clinical Issues</td>
<td>HPC 6710: Human Sexuality</td>
<td>Elective</td>
</tr>
<tr>
<td>Elective</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*RES 5000 (Research) is offered in the fall of odd numbered years.

Students must be granted approval from the MFT Program Director or their advisor to request changes from the suggested program of study.
Appendix E
Appalachian State University Marriage and Family Therapy Exit Survey

1. What was the best part of the program?

2. What could be improved about the program?

3. What suggestions might you have for implementing positive to the curriculum of the MFT program?

**Please respond to the following statements:**

1. I was satisfied with the support services of the university such as the library, counseling services, and writing center at Appalachian State University.
   - Strongly disagree
   - Disagree with reservations
   - Agree with reservations
   - Agree strongly
   - Not Applicable

2. My graduate program provided me with good preparation for my professional work.
   - Strongly disagree
   - Disagree with reservations
   - Agree with reservations
   - Agree strongly
   - Not Applicable

3. My program offered an appropriate balance between theory and practice.
   - Strongly disagree
   - Disagree with reservations
   - Agree with reservations
   - Agree strongly
   - Not Applicable

4. Faculty members generally were well prepared for their courses.
   - Strongly disagree
   - Disagree with reservations
   - Agree with reservations
   - Agree strongly
   - Not Applicable

5. My program provided an appropriate balance between experiential and academic learning.
   - Strongly disagree
   - Disagree with reservations
   - Agree with reservations
   - Agree strongly
   - Not Applicable

6. Faculty availability to students outside of class was adequate.
   - Strongly disagree
   - Disagree with reservations
   - Agree with reservations
   - Agree strongly
   - Not Applicable

7. This program has helped me comprehend and apply knowledge of development and pathology from a multicultural perspective.
   - Strongly disagree
   - Disagree with reservations
   - Agree with reservations
   - Agree strongly
Not Applicable
8. This program has helped me comprehend and apply family life cycle development to families from a multicultural perspective.
   Strongly disagree
   Disagree with reservations
   Agree with reservations
   Agree strongly
   Not Applicable
9. This program has helped me comprehend, articulate, and apply various systemic theories of marriage and family therapy to individuals, couples, and families from a multicultural perspective
   Strongly disagree
   Disagree with reservations
   Agree with reservations
   Agree strongly
   Not Applicable
10. This program has helped me to develop and sustain a working therapeutic relationship with individuals, couples, and families from multicultural perspective.
    Strongly disagree
    Disagree with reservations
    Agree with reservations
    Agree strongly
    Not Applicable
11. This program has helped me demonstrate competent skills in interviewing techniques and techniques of marriage and family therapy theory.
    Strongly disagree
    Disagree with reservations
    Agree with reservations
    Agree strongly
    Not Applicable
12. This program has helped me learn to assess individual and family from a multicultural perspective and develop treatment procedures based on such assessments.
    Strongly disagree
    Disagree with reservations
    Agree with reservations
    Agree strongly
    Not Applicable
13. This program helped me demonstrate knowledge of research designs and procedures and their application to marriage and family therapy in a multicultural, international context.
    Strongly disagree
    Disagree with reservations
    Agree with reservations
    Agree strongly
    Not Applicable
14. This program helped me to comprehend and demonstrate a commitment to professional ethics and legal requirements in the practice of marriage and family therapy.
    Strongly disagree
    Disagree with reservations
    Agree with reservations
    Agree strongly
    Not Applicable
15. This program helped me develop the ability to evaluate my own strengths and limitations as a clinician and use this reflective process to promote personal and professional growth and development.
    Strongly disagree
    Disagree with reservations
    Agree with reservations
Agree strongly
Not Applicable

16. The MFT Program Director did an adequate job administering the program.
   Strongly disagree
   Disagree with reservations
   Agree with reservations
   Agree strongly
   Not Applicable

17. This program provided me with the knowledge and experience necessary to meet my professional goals.
   Strongly disagree
   Disagree with reservations
   Agree with reservations
   Agree strongly
   Not Applicable

18. Are you graduating this August? Yes No

19. Have you taken the MFT National Licensing Exam? Yes No

20. Have you passed the MFT National Licensing Exam? Yes No
   Have taken the exam, waiting on scores I have not taken the exam

21. Have you secured employment as an LMFTA or in a therapeutic setting? Yes No

22. The physical and technological resources of the MFT program and university are sufficient to meet all learning objectives and student learning outcomes
   Strongly disagree
   Disagree with reservations
   Agree with reservations
   Agree strongly
   Not Applicable

23. Academic courses in the MFT program highlighted and paid close attention to issues of inclusion and social justice.
   Strongly disagree
   Disagree with reservations
   Agree with reservations
   Agree strongly
   Not Applicable

24. Internship and supervision courses in the MFT program paid close attention to issues of inclusion and social justice.
   Strongly disagree
   Disagree with reservations
   Agree with reservations
   Agree strongly
   Not Applicable

25. The MFT program respects inclusion and social justice.
   Strongly disagree
   Disagree with reservations
   Agree with reservations
   Agree strongly
   Not Applicable
27. The MFT program provides a safe learning environment for all of its students and faculty
   - Strongly disagree
   - Disagree with reservations
   - Agree with reservations
   - Agree strongly
   - Not Applicable

28. I received adequate AAMFT Approved Supervision (individual and group) during my time in the marriage and family therapy program.
   - Strongly disagree
   - Disagree with reservations
   - Agree with reservations
   - Agree strongly
   - Not Applicable

29. The MFT instructional and clinical resources were adequate for my needs during my time in the marriage and family therapy program.
   - Strongly disagree
   - Disagree with reservations
   - Agree with reservations
   - Agree strongly
   - Not Applicable
### Comprehensive Exam Rubrics
#### Statement of Orientation to Therapy

**Evaluation Rubric - Written Portion**

<table>
<thead>
<tr>
<th>Assessment Criteria</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethical understanding</td>
<td>Dangerous misunderstanding of ethical issues</td>
<td>Misunderstanding of ethical principles</td>
<td>Shallow view of ethical principles</td>
<td>Rigid or limited view of ethical principles</td>
<td>Operating from a professional level of virtue ethics</td>
</tr>
<tr>
<td>Clarity of theoretical model</td>
<td>The theory is poorly stated and has major errors in reasoning</td>
<td>The theory is poorly stated and with flawed reasoning</td>
<td>The theory underdeveloped and with flawed reasoning</td>
<td>The theory is well articulated with some minor flaws</td>
<td>The theory is well articulated and provide good insight</td>
</tr>
<tr>
<td>Depth of application</td>
<td>Superficial application of theory in clinical setting</td>
<td>Shallow seriously flawed application of theory in clinical setting</td>
<td>Several flaws in application of theory in clinical setting</td>
<td>Well articulated with one or two flaws in application of theory in clinical setting</td>
<td>Robust application of theory in clinical setting</td>
</tr>
<tr>
<td>Evidence of systemic thinking</td>
<td>Serious and consistent problems are evident in understanding of systemic thinking</td>
<td>Flawed knowledge in systemic thinking</td>
<td>Limited knowledge of systemic thinking</td>
<td>Systemic understanding and thinking</td>
<td>Deep understanding of systemic thinking.</td>
</tr>
<tr>
<td>Writing quality</td>
<td>Unreadable</td>
<td>Serious and consistent problems</td>
<td>The paper exhibits typographical errors</td>
<td>Occasional uncorrected</td>
<td>Writing is elegant and cogent, using proper</td>
</tr>
</tbody>
</table>
The ability to express ideas is compromised by the poor writing quality and in basic elements of writing; The student has not expressed ideas with clarity and precision; Transition between paragraphs are awkward; wording of sentences tends to be simplistic in style and content; typographical errors, or a very few minor errors in spelling, grammar, syntax, or punctuation; however, errors do not detract from the overall ability to convey meaning; the paper is not as elegant as in 4. 

grammar, syntax, punctuation, spelling; the paper is neat in appearance and free of typographical errors; wording is appropriate to the context; paragraphs are well-constructed; paper exhibits a logical “flow” from section to section; student used proper voice for the paper.

You must score greater than 2 in any category and have an overall score greater than 18 to pass.

Evaluator _______________________________ Student _______________________________
## Evaluation of Rubric Formal Case Presentation

<table>
<thead>
<tr>
<th>Assessment Criteria</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethical understanding</td>
<td>Dangerous misunderstanding of ethical issues</td>
<td>Misunderstanding of ethical principles</td>
<td>Shallow view of ethical principles</td>
<td>Rigid or limited view of ethical principles</td>
<td>Operating from a professional level of virtue ethics</td>
</tr>
<tr>
<td>Consistency with theoretical model of change</td>
<td>Completely inconsistent theoretical model of change</td>
<td>Major flaws in the consistency with the theoretical model of change</td>
<td>Flaws in the consistency with the theoretical model of change</td>
<td>Well-articulated with one or two flaws in the consistency with the theoretical model of change</td>
<td>Fully consistent with the theoretical model of change</td>
</tr>
<tr>
<td>Intervention</td>
<td>Intervention is not understood by client</td>
<td>Shallow and seriously flawed delivery</td>
<td>Several flaws in delivery</td>
<td>Well-articulated with one or two flaws in delivery</td>
<td>Smooth and flawless delivery</td>
</tr>
<tr>
<td>Evidence of systemic thinking</td>
<td>Serious and consistent problems are evident in understanding of systemic thinking</td>
<td>Flawed knowledge in systemic thinking</td>
<td>Limited knowledge of systemic thinking</td>
<td>Systemic understanding and thinking</td>
<td>Deep understanding of systemic thinking</td>
</tr>
<tr>
<td>Written portion</td>
<td>Unreadable</td>
<td>Serious and consistent problems in basic writing skills. The ability to express ideas is compromised</td>
<td>The paper exhibits typographical errors and in basic elements of writing; The student has not</td>
<td>Occasional uncorrected typographical errors, or a very few minor errors in spelling, Writing is elegant and cogent, using proper grammar, syntax, punctuation, spelling; the paper is neat in</td>
<td></td>
</tr>
</tbody>
</table>
by the poor writing quality
expressed ideas with clarity and precision; Transition between paragraphs are awkward; wording of sentences tends to be simplistic in style and content
grammar, syntax, or punctuation; however, errors do not detract from the overall ability to convey meaning; the paper is not as elegant as in 4.
appearance and free of typographical errors; wording is appropriate to the context; paragraphs are well-constructed; paper exhibits a logical “flow” from section to section; student used proper voice for the paper.

Evaluator _____________________________

Student ______________________________

Score ________________________________ Must be greater than 17
North Carolina Regulatory Statutes for Marriage and Family Therapists

North Carolina MFT Licensure Board information can be found here: https://www.nclmft.org/
For additional state licensure information, visit: https://www.aamft.org/ 

Article 18C.
Marriage and Family Therapy Licensure.
§ 90-270.45. Title of Article.
This Article shall be known as the "Marriage and Family Therapy Licensure Act." (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2.)

§ 90-270.46. Policy and purpose.
Marriage and family therapy in North Carolina is a professional practice that affects the public safety and welfare and requires appropriate licensure and control in the public interest. It is the purpose of this Article to establish a licensure agency, a structure, and procedures that will (i) ensure that the public has a means of protecting itself from the practice of marriage and family therapy by unprofessional, unauthorized, and unqualified individuals, and (ii) protect the public from unprofessional, improper, unauthorized and unqualified use of certain titles by persons who practice marriage and family therapy. This Article shall be liberally construed to carry out these policies and purposes. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2.)

§ 90-270.47. Definitions.
As used in this Article, unless the context clearly requires a different meaning:
Renumbered.
"Board" means the North Carolina Marriage and Family Therapy Licensure Board.
(2a) "Clinical experience" means face-to-face therapy between a therapist and a client, whether individuals, couples, families, or groups, conducted from a larger systems perspective that relates to client treatment plans, is goal-directed, and assists the client in affecting change in cognition and behavior and effect.
(2b) "Larger systems" means any individual or group that is a part of the client's environment and that potentially impacts the client's functioning or well-being and potentially can assist in the development and implementation of a treatment plan.

"Licensed marriage and family therapist" means a person to whom a license has been issued pursuant to this Article, if the license is in force and not suspended or revoked.
(3a) "Licensed marriage and family therapy associate" means an individual to whom a license has been issued pursuant to this Article whose license is in force and not suspended or revoked and whose license permits the individual to engage in the practice of marriage and family therapy under the supervision of an American Association for Marriage and Family Therapy (AAMFT) approved supervisor in accordance with rules adopted by the Board.
(3b) "Marriage and family therapy" is the clinical practice, within the context of individual, couple, and marriage and family systems, of the diagnosis and treatment of psychosocial aspects of mental and emotional disorders. Marriage and family therapy involves the professional application of psychotherapeutic and family systems theories and techniques in the delivery of services to families, couples, and individuals for the purpose of treating these diagnosed mental and emotional disorders. Marriage and family therapy includes referrals to and collaboration with healthcare and other professionals when appropriate.
"Practice of marriage and family therapy" means the rendering of professional marriage and family therapy services to individuals, couples, or families, singly or in groups, whether the services are offered directly to the general public or through organizations, either public or private, for a fee, monetary or otherwise.
"Recognized educational institution" means any university, college, professional school, or other institution of higher learning that:
In the United States, is regionally accredited by bodies approved by the Commission on Recognition of Postsecondary Accreditation or its successor.
In Canada, holds a membership in the Association of Universities and Colleges of Canada.
In another country, is accredited by the comparable official organization having this authority and is recognized by the Board.

"Related degree" means:
- Master's or doctoral degree in clinical social work;
- Master's or doctoral degree in psychiatric nursing;
- Master's or doctoral degree in counseling or clinical or counseling psychology;
- Doctor of medicine or doctor of osteopathy degree with an appropriate residency training in psychiatry; or
- Master's or doctoral degree in any mental health field the course of study of which is equivalent to the master's degree in marriage and family therapy.

§ 90-270.48. Prohibited acts.
Except as specifically provided elsewhere in this Article, it is unlawful for a person not licensed as a marriage and family therapist or as a licensed marriage and family therapy associate under this Article to practice marriage or family therapy or hold himself or herself out to the public as a person practicing marriage and family therapy.

§ 90-270.48A. Exemptions.
This Article does not prevent members of the clergy or licensed, certified, or registered members of professional groups recognized by the Board from advertising or performing services consistent with their own profession. Members of the clergy include, but are not limited to, persons who are ordained, consecrated, commissioned, or endorsed by a recognized denomination, church, faith group, or synagogue. Professional groups the Board shall recognize include, but are not limited to, licensed or certified social workers, licensed professional counselors, fee-based pastoral counselors, licensed practicing psychologists, psychological associates, physicians, and attorneys-at-law. However, in no event may a person use the title "Licensed Marriage and Family Therapist" or "Licensed Marriage and Family Therapy Associate," use the letters "LMFT" or "LMFTA," or in any way imply that the person is a licensed marriage and family therapist or a licensed marriage and family therapy associate unless the person is licensed as such under this Article.

A person is exempt from the requirements of this Article if any of the following conditions are met:
- The person is (i) enrolled in a master's level program or higher in a recognized educational institution, (ii) under supervision as approved by the Board in a training institution approved by the Board, and (iii) designated by a title such as "marriage and family therapy intern."
- The person is practicing marriage and family therapy as an employee of a recognized educational institution, or a governmental institution or agency and the practice is included in the duties for which the person was employed by the institution or agency.

No such person practicing marriage and family therapy under the exemptions provided by this section shall hold himself or herself out as a licensed marriage and family therapist.

§ 90-270.48B: Repealed by Session Laws 2003-117, s. 2, effective October 1, 2003, and applicable to claims for payment or reimbursement for services rendered on or after that date.

§ 90-270.49. North Carolina Marriage and Family Therapy Licensure Board.
Establishment. – There is established as an agency of the State of North Carolina the North Carolina Marriage and Family Therapy Licensure Board, which shall be composed of seven Board members to be appointed as provided in G.S. 90-270.50. Board members shall be appointed for terms of four years each, except that any person chosen to fill a vacancy shall be appointed only for the unexpired term of the Board member whom the appointee shall succeed. Upon the expiration of a Board member's term of office, the Board member shall continue to serve until a successor has
qualified. No person may be appointed more than once to fill an unexpired term or for more than two consecutive full terms. The Board shall elect a chair and vice-chair from its membership to serve a term of four years. No person may serve as chairperson for more than four years.

The Governor may remove any member from the Board or remove the chairperson from the position of chairperson only for neglect of duty, malfeasance, or conviction of a felony or crime of moral turpitude while in office.

No Board member shall participate in any matter before the Board in which the member has a pecuniary interest, personal bias, or other similar conflict of interest.

Quorum and Principal Office. – Four of the members of the Board shall constitute a quorum of the Board. The Board shall specify the principal office of the Board within this State.

(c) Repealed by Session Laws 1993 (Reg. Sess., 1994), c. 564, s. 2. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, s. 4.)

§ 90-270.50. Appointment and qualification of Board members.
Nominations for Appointment. – The Governor shall appoint members of the Board only from among the candidates who meet the following qualifications:

Four members shall be practicing marriage and family therapists who are licensed marriage and family therapists in the State at the time of their appointment, each of whom has been for at least five years immediately preceding appointment actively engaged as a marriage and family therapist in rendering professional services in marriage and family therapy, or in the education and training of graduate or postgraduate students of marriage and family therapy, and has spent the majority of the time devoted to this activity in this State during the two years preceding appointment.

Three members shall be representatives of the general public who have no direct affiliation with the practice of marriage and family therapy.

The appointment of any member of the Board shall automatically terminate 30 days after the date the member is no longer a resident of the State of North Carolina.

The Governor shall fill any vacancy by appointment for the unexpired term.

Each member of the Board must be a citizen of this State and must reside in a different congressional district in this State. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2.)

§ 90-270.51. Powers and duties.
The Board shall administer and enforce this Article.

Subject to the provisions of Chapter 150B of the General Statutes, the Board may adopt, amend, or repeal rules to administer and enforce this Article, including rules of professional ethics for the practice of marriage and family therapy.

The Board shall examine and pass on the qualifications of all applicants for licensure under this Article, and shall issue a license to each successful applicant.

The Board may adopt a seal which may be affixed to all licenses issued by the Board.

The Board may authorize expenditures to carry out the provisions of this Article from the fees that it collects, but expenditures may not exceed the revenues or reserves of the Board during any fiscal year.

The Board may employ, subject to the provisions of Chapter 126 of the General Statutes, attorneys, experts, and other employees as necessary to perform its duties.

Reserved for future codification purposes.

The Board may order that any records concerning the practice of marriage and family therapy and relevant to a complaint received by the Board, or an inquiry or investigation conducted by or on behalf of the Board, shall be produced by the custodian of the records to the Board or for inspection and copying by employees, representatives of or counsel to the Board. These records shall not become public records as defined by G.S. 132-1. A licensee or an agency employing a licensee shall maintain records for a minimum of five years from the date the licensee terminates services to the adult client and the client services record is closed. For minor clients the licensee or agency employing the licensee shall maintain records until the client is 22 or five years after the termination of services, whichever occurs later. A licensee shall cooperate fully and in a timely manner with the Board and its designated employees, representatives, or
investigators in an inquiry or investigation conducted by or on behalf of the Board. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1987, c. 827, s. 78; 1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, ss. 5.1, 5.2.)

§ 90-270.52. License application.
Each person desiring to obtain a license under this Article shall apply to the Board upon the form and in the manner prescribed by the Board. Each applicant shall furnish evidence satisfactory to the Board that the applicant:
Is of good moral character;
Has not engaged or is not engaged in any practice or conduct that would be a ground for denial, revocation, or suspension of a license under G.S. 90-270.60;
Is qualified for licensure pursuant to the requirements of this Article.
A license obtained through fraud or by any false representation is void. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2.)

§ 90-270.53: Repealed by Session Laws 1993 (Reg. Sess., 1994), c. 564, s. 2.

§ 90-270.54. Requirements for licensure as a marriage and family therapist.
Each applicant shall be issued a license by the Board to engage in the practice of marriage and family therapy as a licensed marriage and family therapist if the applicant meets the qualifications set forth in G.S. 90-270.52(a) and provides satisfactory evidence to the Board that the applicant:
Meets educational and experience qualifications as follows:
Educational requirements: Possesses a minimum of a master's degree from a recognized educational institution in the field of marriage and family therapy, or a related degree, which degree is evidenced by the applicant's official transcripts. An applicant with a related degree may meet the educational requirements if the applicant presents satisfactory evidence of post-master's or post-doctoral training taken in the field of marriage and family therapy from a program recognized by the Board regardless whether the training was taken at a non degree granting institution or in a non degree program, as long as the training, by itself or in combination with any other training, is the equivalent in content and quality, as defined in the rules of the Board, of a master's or doctoral degree in marriage and family therapy;
Experience requirements: Has at least 1,500 hours of supervised clinical experience in the practice of marriage and family therapy, not more than 500 hours of which were obtained while the candidate was a student in a master's degree program and at least 1,000 of which were obtained after the applicant was granted a degree in the field of marriage and family therapy or a related degree (with ongoing supervision consistent with standards approved by the Board); and
Passes an examination approved by the Board.
Any person who is a certified marriage and family therapist on January 1, 1995, shall be deemed to be a licensed marriage and family therapist as of that date. Valid and unexpired certificates operate as licenses for the purposes of this Article until the date set for renewal of the certificate, at which time the Board shall issue the certificate holder a license in accordance with G.S. 90-270.58. (1979, c. 697, s. 1; 1981, c. 611, s. 2; 1985, c. 223, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, s. 6.)

§ 90-270.54A. Requirements for licensure as a marriage and family therapy associate.
Each applicant shall be issued a license by the Board to engage in practice as a marriage and family therapy associate if the applicant meets the qualifications set forth in G.S. 90-270.52(a) and provides satisfactory evidence to the Board that the applicant:
Has completed a marriage and therapy degree or related degree in accordance with G.S. 90-270.54(a)(1)a.
Has shown evidence of intent to accrue the required supervised clinical experience for licensure under G.S. 90-270.54(a)(1)b.
Has filed with the Board an application for licensure as a marriage and family therapy associate, which application includes evidence of the appropriate coursework and an agreement by at least one supervisor approved by the American Association of Marriage and Family Therapy to provide supervision to the applicant.
Has passed the examination approved by the Board pursuant to G.S. 90-270.54(a)(2).

Upon approval by the Board, a license designating the applicant as a licensed marriage and family therapy associate shall be issued. Notwithstanding G.S. 90-270.58, a license issued under this section shall be valid for three years from the date of issuance.
A marriage and family therapy associate license shall not be renewed. However, if upon written petition to the Board a person licensed pursuant to this section demonstrates special circumstances and steady progress towards licensure as a marriage and family therapist, the Board may grant a one-year extension of the marriage and family therapy associate license upon receipt and approval of an application for extension and payment of the fee authorized by G.S. 90-270.57(a)(9).

Nothing in this Article shall be construed to require direct third-party reimbursement under private insurance policies to a person licensed as a marriage and family therapy associate under this Article. (2009-393, s. 7.)

§ 90-270.55. Examinations.
Each applicant for licensure as a licensed marriage and family therapist shall pass an examination as determined by the Board. The Board shall set the passing score for examinations. Any request by an applicant for reasonable accommodations in taking the examination shall be submitted in writing to the Board and shall be supported by documentation as may be required by the Board in assessing the request. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, s. 8.)

§ 90-270.55A: Repealed by Session Laws 2009-393, s. 9, effective October 1, 2009.

§ 90-270.56. Reciprocal licenses.
The Board may issue a license as a marriage and family therapist or a marriage and family therapy associate by reciprocity to any person who applies for the license as prescribed by the Board and who at all times during the application process:
Has been licensed for five continuous years and is currently licensed as a marriage and family therapist or marriage and family therapy associate in another state.
Has an unrestricted license in good standing in the other state.
Has no unresolved complaints in any jurisdiction.
Has passed the National Marriage and Family Therapy examination. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, s. 10.)

§ 90-270.57. Fees.
In order to fund the Board's activities under this Article, the Board may charge and collect fees not exceeding the following:
Each license examination $50.00
(2) Each license application as a marriage and family therapy associate 200.00
(2a) Each license application as a marriage and family therapist 200.00
(3) Each renewal of license 200.00
(4) Each reciprocal license application 200.00
(5) Each reinstatement of an expired license 200.00
(6) Each application to return to active status 200.00
(7) Each duplicate license 25.00
(8) Each annual maintenance of inactive status 50.00
(9) Each application to extend associate license 50.00

In addition to the examination fee provided in subdivision (1) of this subsection, the Board may charge and collect from each applicant for licensure examination the cost of processing test results and the cost of test materials.
The Board may establish fees for the actual cost of (i) document duplication services, (ii) materials, and (iii) returned bank items as allowed by law. All fees listed in subsection (a) of this section shall be nonrefundable. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1989, c. 581, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, s. 11.)

§ 90-270.58. Renewal of license.
All licenses for marriage and family therapists issued under this Article shall expire automatically on the first day of July of each year. The Board shall renew a license upon (i) completion of the continuing education requirements of G.S.
§ 90-270.58C and (ii) payment of the renewal fee. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1989, c. 581, s. 2; 1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, s. 12.)

§ 90-270.58A. Reinstatement after expiration.
A person whose license has expired may have the license reinstated as prescribed by the Board. The Board shall charge and collect a fee for reinstatement of the license. (1993 (Reg. Sess., 1994), c. 564, s. 2.)

§ 90-270.58B. Inactive status.
A person who holds a valid and unexpired license and who is not actively engaged in the practice of marriage and family therapy may apply to the Board to be placed on inactive status. A person on inactive status shall not be required to pay annual renewal fees, but shall be required to pay an annual inactive status maintenance fee. A person who is on inactive status shall not have to meet continuing education requirements.
A person on inactive status shall not practice or hold himself out as practicing marriage and family therapy or perform any other activities prohibited by this Article.
A person desiring to return to active status shall submit written application to the Board. The Board shall return the person to active status upon payment of the fee specified in G.S. 90-270.57 and upon such showing of competency to resume practice as the Board may require. (1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, s. 13.)

§ 90-270.58C. Continuing education requirements.
The Board shall prescribe continuing education requirements for licensees. These requirements shall be designed to maintain and improve the quality of professional services in marriage and family therapy provided to the public, to keep the licensee knowledgeable of current research, techniques, and practice, and to provide other resources that will improve skill and competence in marriage and family therapy. The number of hours of continuing education shall not exceed the number of hours available that year in Board-approved courses within the State. The Board may waive these continuing education requirements for not more than 12 months, but only upon the licensee's satisfactory showing to the Board of undue hardship. The Board may waive, upon request, continuing education requirements for licensees who are on active military duty and serving overseas. (1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, s. 14.)

§ 90-270.59. Disposition of funds.
All monies received by the Board shall be used to implement this Article. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, s. 15.)

§ 90-270.60. Denial, revocation, or suspension of license; other disciplinary or remedial actions.
The Board may deny, revoke, or suspend licensure, discipline, place on probation, limit practice, or require examination, remediation, or rehabilitation, or any combination of the disciplinary actions described in this subsection, of any applicant or person licensed under this Article on one or more of the following grounds:

Has been convicted of a felony or entered a plea of guilty or nolo contendere to any felony charge under the laws of the United States or of any state of the United States.

Has been convicted of or entered a plea of guilty or nolo contendere to any misdemeanor involving moral turpitude, misrepresentation, or fraud in dealing with the public, or conduct otherwise relevant to fitness to practice marriage and family therapy, or a misdemeanor charge reflecting the inability to practice marriage and family therapy with due regard to the health and safety of clients.

Has engaged in fraud or deceit in securing or attempting to secure or renew a license under this Article or has willfully concealed from the Board material information in connection with application for a license or renewal of a license under this Article.

Has practiced any fraud, deceit, or misrepresentation upon the public, the Board, or any individual in connection with the practice of marriage and family therapy, the offer of professional marriage and family therapy services, the filing of Medicare, Medicaid, or other claims to any third-party payor, or in any manner otherwise relevant to fitness for the practice of marriage and family therapy.
Has made fraudulent, misleading, or intentionally or materially false statements pertaining to education, licensure, license renewal, supervision, continuing education, any disciplinary actions or sanctions pending or occurring in any other jurisdiction, professional credentials, or qualifications or fitness for the practice of marriage and family therapy to the public, any individual, the Board, or any other organization.

Has had a license or certification for the practice of marriage and family therapy in any other jurisdiction suspended or revoked, or has been disciplined by the licensing or certification board in any other jurisdiction for conduct which would subject the licensee to discipline under this Article.

Has violated any provision of this Article or any rules adopted by the Board.

Has aided or abetted the unlawful practice of marriage and family therapy by any person not licensed by the Board.

Has been guilty of immoral, dishonorable, unprofessional, or unethical conduct as defined in this subsection or in the current code of ethics of the American Association for Marriage and Family Therapy. However, if any provision of the code of ethics is inconsistent and in conflict with the provisions of this Article, the provisions of this Article shall control.

Has practiced marriage and family therapy in such a manner as to endanger the welfare of clients.

Has demonstrated an inability to practice marriage and family therapy with reasonable skill and safety by reason of illness, inebriation, misuse of drugs, narcotics, alcohol, chemicals, or any other substance affecting mental or physical functioning, or as a result of any mental or physical condition.

Has practiced marriage and family therapy outside the boundaries of demonstrated competence or the limitations of education, training, or supervised experience.

Has exercised undue influence in such a manner as to exploit the client, student, supervisee, or trainee for the financial or other personal advantage or gratification of the marriage and family therapist or a third party.

Has harassed or abused, sexually or otherwise, a client, student, supervisee, or trainee.

Has failed to cooperate with or to respond promptly, completely, and honestly to the Board, to credentials committees, or to ethics committees of professional associations, hospitals, or other health care organizations or educational institutions, when those organizations or entities have jurisdiction.

Has refused to appear before the Board after having been ordered to do so in writing by the chair.

The Board may, in lieu of denial, suspension, or revocation, take any of the following disciplinary actions:
Issue a formal reprimand or formally censure the applicant or licensee.

Place the applicant or licensee on probation with the appropriate conditions on the continued practice of marriage and family therapy deemed advisable by the Board.

Require examination, remediation, or rehabilitation for the applicant or licensee, including care, counseling, or treatment by a professional or professionals designated or approved by the Board, the expense to be borne by the applicant or licensee.

Require supervision of the marriage and family therapy services provided by the applicant or licensee by a licensee designated or approved by the Board, the expense to be borne by the applicant or licensee.
Limit or circumscribe the practice of marriage and family therapy provided by the applicant or licensee with respect to the extent, nature, or location of the marriage and family therapy services provided, as deemed advisable by the Board.

Discipline and impose any appropriate combination of the types of disciplinary action listed in this subsection. In addition, the Board may impose conditions of probation or restrictions on the continued practice of marriage and family therapy at the conclusion of a period of suspension or as a requirement for the restoration of a revoked or suspended license. In lieu of or in connection with any disciplinary proceedings or investigation, the Board may enter into a consent order relative to discipline, supervision, probation, remediation, rehabilitation, or practice limitation of a licensee or applicant for a license.

The Board may assess costs of disciplinary action against an applicant or licensee found to be in violation of this Article. When considering the issue of whether an applicant or licensee is physically or mentally capable of practicing marriage and family therapy with reasonable skill and safety with patients or clients, upon a showing of probable cause to the Board that the applicant or licensee is not capable of practicing professional counseling with reasonable skill and safety with patients or clients, the Board may petition a court of competent jurisdiction to order the applicant or licensee in question to submit to a psychological evaluation by a psychologist to determine psychological status or a physical evaluation by a physician to determine physical condition, or both. The psychologist or physician shall be designated by the court. The expenses of the evaluations shall be borne by the Board. Where the applicant or licensee raises the issue of mental or physical competence or appeals a decision regarding mental or physical competence, the applicant or licensee shall be permitted to obtain an evaluation at the applicant's or licensee's expense. If the Board suspects the objectivity or adequacy of the evaluation, the Board may compel an evaluation by its designated practitioners at its own expense.

Except as provided otherwise in this Article, the procedure for revocation, suspension, denial, limitations of the license, or other disciplinary, remedial, or rehabilitative actions, shall be in accordance with the provisions of Chapter 150B of the General Statutes. The Board is required to provide the opportunity for a hearing under Chapter 150B of the General Statutes to any applicant whose license or health services provider certification is denied or to whom licensure or health services provider certification is offered subject to any restrictions, probation, disciplinary action, remediation, or other conditions or limitations, or to any licensee before revoking, suspending, or restricting a license or health services provider certificate or imposing any other disciplinary action or remediation. If the applicant or licensee waives the opportunity for a hearing, the Board's denial, revocation, suspension, or other proposed action becomes final without a hearing having been conducted. Notwithstanding the provisions of this subsection, no applicant or licensee is entitled to a hearing for failure to pass an examination. In any proceeding before the Board, in any record of any hearing before the Board, in any complaint or notice of charges against any licensee or applicant for licensure, and in any decision rendered by the Board, the Board may withhold from public disclosure the identity of any clients who have not consented to the public disclosure of services provided by the licensee or applicant. The Board may close a hearing to the public and receive in closed session evidence involving or concerning the treatment of or delivery of services to a client who has not consented to the public disclosure of the treatment or services as may be necessary for the protection and rights of the client of the accused applicant or licensee and the full presentation of relevant evidence.

All records, papers, and other documents containing information collected and compiled by or on behalf of the Board, as a result of investigations, inquiries, or interviews conducted in connection with licensing or disciplinary matters, shall not be considered public records within the meaning of Chapter 132 of the General Statutes. However, any notice or statement of charges against any licensee or applicant, or any notice to any licensee or applicant of a hearing in any proceeding, or any decision rendered in connection with a hearing in any proceeding, shall be a public record within the meaning of Chapter 132 of the General Statutes, though the record may contain information collected and compiled as a result of the investigation, inquiry, or hearing. Any identifying information concerning the treatment of or delivery of services to a client who has not consented to the public disclosure of the treatment or services may be redacted. If any record, paper, or other document containing information collected and compiled by or on behalf of the Board, as provided in this section, is received and admitted in evidence in any hearing before the Board, it shall be a public record within the meaning of Chapter 132 of the General Statutes, subject to any deletions of identifying information concerning the treatment of or delivery of marriage and family therapy services to a client who has not consented to the public disclosure of treatment or services.
A person whose license has been denied or revoked may reapply to the Board for licensure after one calendar year from the date of the denial or revocation.

A licensee may voluntarily relinquish his or her license at anytime. Notwithstanding any provision to the contrary, the Board retains full jurisdiction to investigate alleged violations of this Article by any person whose license is relinquished under this subsection and, upon proof of any violation of this Article by the person, the Board may take disciplinary action as authorized by this section.

The Board may adopt rules deemed necessary to interpret and implement this section. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1987, c. 827, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2; 2009-393, s. 16.)

§ 90-270.61. Penalties.
Any person not licensed as a marriage and family therapist under this Article who engages in the practice of marriage and family therapy, or holds himself or herself out to be a marriage or family therapist or engaged in marriage and family therapy in violation of this Article is guilty of a Class 2 misdemeanor. (1979, c. 697, s. 1; 1985, c. 223, ss. 1, 1.1; 1993 (Reg. Sess., 1994), c. 564, s. 2.)

§ 90-270.62. Injunction.
As an additional remedy, the Board may proceed in a superior court to enjoin and restrain any person without a valid license from violating the prohibitions of this Article. The Board shall not be required to post bond to such proceeding. (1979, c. 697, s. 1; 1985, c. 223, s. 1; 1993 (Reg. Sess., 1994), c. 564, s. 2.)

§ 90-270.63. Criminal history record checks of applicants for licensure as a marriage and family therapist and a marriage and family therapy associate.

Definitions. – The following definitions shall apply in this section:

Applicant. – A person applying for licensure as a licensed marriage and family therapy associate pursuant to G.S. 90-270.54A or licensed marriage and family therapist pursuant to G.S. 90-270.54.

Criminal history. – A history of conviction of a State or federal crime, whether a misdemeanor or felony, that bears on an applicant's fitness for licensure to practice marriage and family therapy. The crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. The crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act in Article 5 of Chapter 90 of the General Statutes and alcohol-related offenses, including sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5. In addition to the North Carolina crimes listed in this subdivision, such crimes also include similar crimes under federal law or under the laws of other states. The Board may request that an applicant for licensure, an applicant seeking reinstatement of a license, or a licensee under investigation by the Board for alleged criminal offenses in violation of this Article consent to a criminal history record check. Refusal to consent to a criminal history record check may constitute grounds for the Board to deny licensure to an applicant, deny reinstatement of a license to an applicant, or revoke the license of a licensee. The Board shall ensure that the State and national criminal history of an applicant is checked. The Board shall be responsible for providing to the North Carolina Department of Justice the fingerprints of the applicant or
licensee to be checked, a form signed by the applicant or licensee consenting to the criminal history record check and the
use of fingerprints and other identifying information required by the State or National Repositories of Criminal Histories,
and any additional information required by the Department of Justice in accordance with G.S. 114-19.27. The Board
shall keep all information obtained pursuant to this section confidential. The Board shall collect any fees required by the
Department of Justice and shall remit the fees to the Department of Justice for expenses associated with conducting the
criminal history record check.

If an applicant's or licensee's criminal history record check reveals one or more convictions listed under subdivision
(a)(2) of this section, the conviction shall not automatically bar licensure. The Board shall consider all of the following
factors regarding the conviction:

The level of seriousness of the crime.

The date of the crime.

The age of the person at the time of the conviction.

The circumstances surrounding the commission of the crime, if known.

The nexus between the criminal conduct of the person and the duties and responsibilities of a licensee.

The person's prison, jail, probation, parole, rehabilitation, and employment records since the date the crime was
committed.

The subsequent commission by the person of a crime listed in subdivision (a)(2) of this section.

If, after reviewing these factors, the Board determines that the applicant's or licensee's criminal history disqualifies the
applicant or licensee for licensure, the Board may deny licensure or reinstatement of the license of the applicant or
revoke the license of the licensee. The Board may disclose to the applicant or licensee information contained in the
criminal history record check that is relevant to the denial. The Board shall not provide a copy of the criminal history
record check to the applicant or licensee. The applicant or licensee shall have the right to appear before the Board to
appeal the Board's decision. However, an appearance before the full Board shall constitute an exhaustion of
administrative remedies in accordance with Chapter 150B of the General Statutes.

The Board, its officers, and employees, acting in good faith and in compliance with this section, shall be immune from
civil liability for denying licensure or reinstatement of a license to an applicant or revoking a licensee's license based on
information provided in the applicant's or licensee's criminal history record check. (2009-393, s. 17.)

§ 90-270.64. Reserved for future codification purposes.
Appendix H

Quality Assurance System

Marriage and Family Therapy Program
Quality Assurance System

I. Program Mission, Vision, Goals, and Student Learning Outcomes

The Marriage and Family Therapy Program’s Mission, Vision, Goals, and Student Learning Outcomes (SLOs) are reviewed and revised during the Periodic Comprehensive Review (PCR) process and as changes are made to COAMFTE. When revisions are necessary, faculty discuss future growth and philosophical/conceptual framework to follow in making changes. Data from existing SLOs, student feedback, and Programmatic information are reviewed and revisions made based on those results. The MFT Program participates in the PCR process every five years, and the review and revisions take place during that time.

a. Alignment
   i. Mission, Vision, Program Goals, and SLOs are found in the Student Handbook and on the website (https://mft.appstate.edu/).

b. Roles of Dean, Department Chair, Program Director, Faculty, Students, COI, etc. in governance/ongoing program development, delivery, and evaluation to achieve mission, vision, goals, and SLOs
   i. Communities of Interest (COI): Local COI review Program Mission, Vision, Goals, Survey data, SAC data, and SLOs at fall and spring meetings. They offer feedback to Program in an Advisory capacity. Because they serve in this Advisory capacity, the COI within this Program is referred to as the Program Advisory Committee (PAC). In addition to the biannual meetings, meetings are held on an ad hoc basis if need arises. Regional and National COI provide professional development opportunities and standards of care. COI consist of:
      1. Local:
         a. Alumni
         b. North Carolina Association of Marriage and Family Therapy (NCAMFT), Local chapter
         c. Watauga Co. Schools
         d. Parent to Parent
         e. Watauga Co Department of Social Services
         f. Oasis (domestic violence shelter)
         g. Daymark Recovery
         h. Crossnore School
      2. State/Regional/National/International:
         a. American Association of Marriage and Family Therapy Regulatory Boards (AAMFTRB)
         b. North Carolina Association of Marriage and Family Therapy (NCAMFT)
         c. American Family Therapy Association (AFTA)
         d. National Council on Family Relations (NCFR)
         e. International Family Therapy Association (FTA)
         f. NC License Professional Counselor Board
         g. NC Substance Board
         h. NC Division on Mental Health
         i. NC Department of Justice
   ii. Students: Student Association of Marriage Family Therapy (SAMFT) reviews Program Mission, Vision, Goals, Survey data, SAC data, and SLOs annually. They offer feedback to Program. One
member of SAMFT sits as ex officio member of COI. Students also offer informal feedback through community meetings, and “Brown Bag” meetings.

iii. Faculty: (see section IIIa)

iv. Program Director: Oversee the Program. Lead Faculty, Students, and COI in furthering the Program Mission, Vision, Goals, and SLOs. Gather feedback and implement changes/enhancements to the Program based on data. Work with all constituency groups (COI, Students, Faculty, Alumni, Clinical Partners, College and University colleagues) for the betterment of the Program. The Program Director works with the Director of Assessment and Accreditation to aggregate, disaggregate, analyze, and share Program data for spring and fall Data meetings, for the Periodic Comprehensive Review (PCR) program review, and for the COAMFTE Annual Report.

v. Internship Coordinator: Oversees Clinical Internships. Establishes and maintains relationships with internship sites and staff. Monitors students’ progress. Collects formal and informal feedback from internship staff.

vi. Department Chair: Oversee the Program, along with the Program Director. Provide administrative assistance through the Department to the Program. Work with the Program Director to further the Program Mission, Vision, Goals, and SLOs; and provide adequate funding for those purposes. Serve as the supervisor for Faculty. Communicate the needs of the Program to the administration. Serve as an advocate for the Program. Participate in faculty recruitment, hiring, promotion, and tenure decisions. Resolve conflicts within the Program. Organize and coordinate faculty in goal-setting. Manage departmental resources, including the budget. Secure and maintain adequate supplies, materials, and equipment for the Program. Serves as the role for Appeals after the Program Director.

vii. Dean: Oversee the Program, along with the Department Chair and Program Director, to further the Program Mission, Vision, Goals, and SLOs. Serve as the supervisor for Department Chair.

c. SLO Collection, Review, Revision, and Sharing

SLOs are collected through course-embedded assessment and comprehensive exams (both written and oral, with a video component and feedback/discussion), internships, national exam scores, and survey results. This provides both formative and summative assessment. SLOs are collected each semester and then compiled for an annual review by COI, SAMFT, and Faculty in the spring. Faculty review benchmarks and revise as needed based on data. SLO data and any revisions are shared with COI, Students, Department Chair, and Dean; and are published on the website and the Student Handbook for implementation the subsequent fall.

i. Student/Graduate Achievement (SAC)

1. SAC data is collected each spring semester and reported on the COAMFTE Annual Report in July, and published on the website. As with SLO data, if changes need to made to policy, or student support services based on SAC data, it is reviewed by Faculty in the fall and revisions are made and shared for the subsequent spring.

ii. Input from COI

1. Data is shared and feedback collected from COI twice a year, at fall and spring meetings. This feedback is taken into account for revisions, and implemented for the subsequent fall from the annual data presented in the spring.

II. Academics

a. Curriculum Review, Revision, and Sharing

i. The majority of the Curriculum is set by COAMFTE, and the rest is determined by the Program Mission, Vision, and Goals, including the focus on Multiculturalism. The Program offers a Certificate in Multicultural Counseling for this reason. Any changes or revisions in the
The curriculum are based on data from SLOs, feedback from COI, Students, Faculty, Internship Sites, or other constituency groups (such as Alumni). When trends are seen in feedback, or data suggests needed changes, Faculty (including the Program Director) discuss at the annual spring data review and implement changes and/or revisions for the subsequent fall. The changes and/or revisions are then published on the website and in the Student Handbook.

ii. Input from COI/PAC
   1. COI/PAC meet twice per year, in the spring and the fall. At both meetings, data is shared, feedback given, and the Program discussed in terms of Mission, Vision, Goals, SLOs, and future direction. The feedback from the COI is taken seriously by the Program and implemented into Faculty meetings that determine changes and/or revisions to the Program.

b. Student Progression (see p. 10-11 of MFT Student Handbook)
   i. Admission to Program
      1. Graduate school website and Catalog (https://graduate.appstate.edu/)
      2. Interview
   ii. Admission to Candidacy Form
      1. Internship
   iii. Comprehensive Exams

c. Alumni Survey Collection, Review, and Sharing
   i. Alumni surveys are distributed, and data collected and analyzed, following spring semester, and the data used for the COAMFTE Annual Report, SAC information, and feedback on the Program as a whole. This feedback is shared with COI/PAC, Students, Faculty, and included as part of the data set that Faculty review in the fall for changes in the subsequent spring.
   ii. Informal feedback is collected from Alumni on a continual basis.

d. Services Evaluation
   i. Student Support Services
      1. Student Support Services include, but are not limited to: Advising; Belk Library; University Writing Center; Office of Student Financial Aid; Counseling Center; Office of Disability Services; and the Office of Equity, Diversity, and Compliance.
      2. Student Support Services are evaluated through informal means, as well as an annual exit survey of students, and results are shared at the fall faculty meeting. Any needed changes and/or revisions to Student Support Services are discussed and implemented for the subsequent spring.
   ii. Climate of Safety, Respect, and Appreciation
      1. The MFT Program abides by their Diversity Statement, found on the website (https://mft.appstate.edu/diversity-information) and in the Handbook, page 28 and the Inclusion and Diversity Policy, page 12: The Marriage and Family Therapy program is housed in the Department of Human Development and Psychological Counseling. The department has a history of supporting a multicultural perspective. Program faculty members make a strong effort to recruit a diverse student population and teach from a multicultural viewpoint.
      2. The MFT Program follows the University statement on Recruitment of Students Representing Diverse Backgrounds: Appalachian State University is committed to equality of educational opportunity and does not discriminate against applicants, students, or employees based on race, color, national origin, religion, sex, gender identity and expression, political affiliation, veteran status, genetic information, age, disability, or sexual orientation. Appalachian actively promotes recruiting by recruiting and enrolling a diverse student body.
3. The MFT Program adheres to the Appalachian State University policies for safety, respect, and appreciation. The Code of Student Conduct (http://studentconduct.appstate.edu/pagesmith/15) addresses these issues and each student is responsible for knowing these policies. Appalachian State University has an Office of Equity, Diversity, and Compliance that enforces the policy on Harassment and Discrimination for students, faculty, and staff; found in their Policy Manual online (http://policy.appstate.edu/Policy_Manual).

4. Students who need to file a complaint can do so through the Program Director, with appeals processes through the Department Chair and Dean; or they can file a complaint with one of the offices on campus (Office of Equity, Diversity and Compliance; etc.).

5. A climate of safety, respect, and appreciation is determined through a year-end review of course evaluations, obtained through CoursEval data; and through Exit Survey data. The CoursEval data is reviewed during a spring faculty meeting. The Exit Survey data is reviewed in the fall. Any changes that need to be made are implemented in the subsequent semester.

iii. Fiscal and Physical Resources

1. Fiscal resources are allotted through the Department of Human Development and Psychological Counseling in the Reich College of Education, Appalachian State University. The Faculty and Program Director determine fiscal needs for Graduate Assistants, accreditation requirements, clinic needs, etc., and submit a request to the Department Chair. The Department Chair then determines funds annually, and these are distributed to the Program for use. If additional, unexpected funds are needed, the Funding Request for Dean’s Office Funding form can be submitted to the Dean for approval.

2. Physical resources are determined by the Program based on student, faculty, and clinic need. Class size, number of classes, student to faculty ratio, and average number of clients seen in the clinic determine the needs. The resources are then requested by the Program Director and approved by the Department Chair.

3. Fiscal and Physical resources are reviewed at fall and spring meetings and on an ongoing basis. Changes are requested as needed and major changes are requested after the spring meeting for subsequent fall implementation.

iv. Technological Resources

1. Technological Resources include, but are not limited to: ASULearn online Moodle learning platform, Microsoft Office Suite for assignments, and closed-system software at off-campus internship sites.

2. Technological resources are deemed sufficient by Faculty, with input from Students. They are evaluated through an annual exit survey of students, and results are shared at the fall faculty meeting. Any needed changes and/or revisions to Technological Resources are discussed and implemented for the subsequent spring.

v. Website and Publications Review

1. The website and publications (such as the Student Handbook and Internship Handbook) are revised as needed based on Programmatic changes and/or revisions. These annual revisions take place in the spring, with website and publication review and revision occurring late spring/early summer for implementation the subsequent fall.

e. Academic Evaluation

i. Curriculum and Teaching/Learning Practices
1. Based on SLO data/benchmarks, CoursEval data, exit survey data, and informal feedback from Students and Alumni, teaching and learning practices are reviewed and revised as part of the spring Data Meeting and implemented for the subsequent fall.

ii. Instructional and Clinical Resources

1. Instructional and Clinical Resources are reviewed by core faculty, with COI input from COI/PAC Meetings and student input from SAMFT, Community, and “Brown Bag” Meetings, and revised as part of the spring Data Meeting and implemented for the subsequent fall. The Program Director advocates for Instructional and Clinical Resources on behalf of the Program to the Department Chair and to the Dean.

III. Faculty and Supervisors

a. Role/responsibilities of Faculty

i. Teaching

1. Faculty participate in curriculum development, mentoring and advising of students, supervision of interns, and effective evaluation of students

ii. Scholarship

1. Faculty are expected to research and publish at least once per year, maintaining an active scholarship agenda.

iii. Service

1. Faculty are expected to serve on University committees, participate in regional and national professional organizations, maintain AAMFTE membership and approved Supervisor status.

iv. Practice

1. Faculty are expected to initiate and maintain relationships with local and regional mental health services. Faculty maintain appropriate licensure.

b. Alignment of Faculty effectiveness to program mission, goals, and outcomes

i. Faculty maintain licensure in the area of Marriage and Family Therapy; provide clinical and academic training in the field; teach according to a philosophy of ethical, effective, systemic, and multicultural informed practice in order to train the next generation of Marriage and Family Therapists.

b. Evaluation of Faculty

i. Student evaluation

1. Faculty are evaluated by students through CoursEval software or paper evaluations following each course. Reports are shared with the Department Chair each semester and aggregated results are shared with the Program Director and faculty at the spring meeting.

2. (Faculty as Supervisors are evaluated by Students, as described in section III.d, below)

ii. Departmental evaluation

1. The MFT Program follows the policies in the Appalachian State University Faculty Handbook, 4.3: Evaluation of Faculty (p. 52-53). The policy is as follows:

4.3 Evaluation of Faculty

4.3.1. Administrative Memorandum Number 338 regarding “Tenure and Teaching in the University of North Carolina” requires that Appalachian establish “review procedures for the evaluation of faculty performance to ensure (1) that student evaluations and formal methods of peer review are included in teaching evaluation procedures, (2) that student evaluations are conducted at regular intervals (at least one semester each year) and on an ongoing basis, (3) that peer review of faculty includes direct observation of the classroom teaching of new and non-tenured faculty and of graduate assistants, and (4) that appropriate and timely feedback from evaluations of performance is provided to those persons being reviewed.”
4.3.1.1 Evaluation of Faculty: In addition to the formal components of a faculty evaluation specified in section 4.3.1, faculty must be aware of other factors, which may influence the annual review or other personnel actions pertaining to section 4.3.2.1 such as section 4.4 (Reappointment, Promotion and Tenure) or section 4.7 (Post-Tenure Review). Therefore, no items that will be considered or relied upon in an annual review or other personnel action may be placed in the faculty member’s personnel file within five working days prior to the annual review or personnel action, except under exigent circumstances. The circumstances justifying an exception to this rule should be confined to criminal or other serious misconduct of such a nature that requires the University to act promptly to mitigate physical risk to the University community, or circumstances in which the Chancellor, pursuant to section 4.10.2.6, suspends a faculty member with pay until a decision concerning discharge has been made.

4.3.2 Annual Review of Faculty

4.3.2.1 Provision is made for the individual faculty member’s participation in formulating plans and goals for that faculty member. During the spring term, departmental chairs are required to hold a conference with every member of the department who is to continue as a member of the faculty for the subsequent year. The purposes of this conference are to plan the work of the faculty member for the subsequent year and to evaluate work of the previous year. During this conference, the faculty member has the opportunity to express preferences concerning assignments. These preferences should include statements concerning teaching assignments and an indication of the faculty member’s commitment to professional and/or scholarly activities. In this conference, the faculty member and the chair will jointly establish goals for the faculty member that are to be attained during the subsequent academic year. Specific plans should be made and realistic goals set. For faculty members who are initial appointees, an additional planning conference in the late summer or immediately after the beginning of their first semester of service must also be held.

At the annual conference, on three working days’ written notice to the department chair, the faculty member may be accompanied by an observer of their choosing. If the faculty member chooses an observer, the chair may be accompanied by an administrator observer. Unless otherwise agreed, observers may not take part in the discussion between the faculty member and the chair. Observers may not be present as attorney for either party. Because confidential personnel file information will be discussed at the annual conference, the faculty member and any observers must sign an Observer Waiver. This document includes the faculty member’s authorization of the observer(s) to hear such confidential information, and commits the observer(s) to maintain the confidentiality of such information unless the faculty member subsequently authorizes disclosure.

4.3.2.2 At this or subsequent spring conferences, there shall be an evaluation of the faculty member’s work in which there will be a frank discussion of the faculty member’s achievements with specific reference to the goals set in the previous conference. Also, at this conference, the results of any formal evaluation procedures that have been used up to the time of the conference should be discussed. The chair will give the faculty member an honest opinion concerning the faculty member’s performance to date. This includes not only praise for work well done, but also suggestions for improvement or negative criticism. This conference will include a summary evaluation of the faculty member’s performance for the year just completed. Following this conference, and in a timely manner, the chair will provide to the faculty member a written statement of evaluation, to which the faculty member will have an opportunity to respond in writing.

4.3.2.3 As part of the faculty member’s annual evaluation, the departmental chair will provide the faculty member with a written assessment of her or his progress toward tenure and promotion.

The Faculty Annual Performance Evaluation outlined in 4.3.2 of the Faculty Handbook is further delineated by Academic Affairs into a three-point rating system. The ratings are:

1. Exceeds Expectations: This is reserved for faculty who have truly outstanding contributions in the evaluation year.

2. Meets Expectations: This is considered the normal rating and describes a faculty member who performs the dimension of his or her job with skill, producing the results expected of a highly education professional. It also describes a faculty member whose performance on a dimension is essentially comparable to the performance of a broad range of faculty members within the unit.
3. Fails to Meet Expectations: There is no descriptor for this indicator.

d. Sufficiency of Faculty
   i. Core faculty determine, at annual spring Data Meeting, that faculty are sufficient for the Program, using the following information:
      1. Student to faculty ratio
      2. Faculty annual evaluation demonstrating teaching, scholarship, service, and practice to the Program
      3. Faculty involvement in ongoing Program development, improvement, delivery, and evaluation in relation to Program mission, vision, goals, and SLOs
      4. Faculty meet regularly
      5. Faculty evaluate Program data biannually at fall and spring Data Meetings

e. Roles/responsibilities of Supervisors
   i. There are up to three Supervisors per student, at a minimum:
      1. Faculty Supervisor during internship
      2. On-site Supervisor during internship
   ii. Supervisors must hold an active mental health license.
   iii. Supervisors must meet with students individually for one hour/week. Supervisors must be AAMFT approved, or in training. This is either a faculty member or a Supervisor in training under the supervision of a faculty member.
   iv. Faculty Supervisors must meet with student groups for two hours/week. Must be AAMFT approved, or in training.
   v. Supervisors will evaluate students during their internship, both through the course and through observations and meetings with the student.
   vi. Supervisors will provide a safe, secure, and non-discriminatory workplace environment
   vii. Site Supervisor/internship site holds legal and financial responsibility; responsibility for case assignment, protecting client welfare, and similar issues.

f. Evaluation of Supervisors
   i. Students evaluate Supervisors through feedback form provided by the Program. Feedback is formally collected each semester and shared with Faculty and COI. Data is used to make changes if needed with internship sites.
   ii. Supervisors in training are evaluated by their Supervisors of Supervision (Faculty members) on an ongoing basis. Meetings are held to discuss evaluations and a formal endorsement is made to AAMFT upon completion of approved Supervisor training.

g. Sufficiency of Supervisors
   i. Core faculty determine, at annual spring Data Meeting, that supervisors are sufficient for the Program, using the following information:
      1. Student to supervisor ratio
      2. Supervisor evaluation demonstrating effectiveness through internship feedback forms (reviewed at fall and spring Data Meetings)
      3. Supervisor involvement in communication with Program faculty
      4. Supervisor involvement in ongoing Program development of SLOs
Appendix I
Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) Guiding Principles and Core Competencies


COAMFTE Guiding Principles are taken from the Accreditation Standards, Version 12.0, pages 5-7:

COAMFTE accredited education programs aspire to the following guiding principles:

• A comprehensive and significant focus on and content in relational/systemic philosophy and ethical practice, as well as MFT knowledge, theories and research.

• Incorporation of a relational foundation, as reflected in the application of the Professional Marriage and Family Therapy Principles (PMFTPs) within the curriculum, program organization/structure, and educational process as appropriate to the mission of the program. The PMFTPs include: the AAMFT Code of Ethics, the MFT Core Competencies, the AMFTRB Examination Domains, Task Statements, and Knowledge Statements and relevant state licensing regulations.

• A commitment to multiculturally-informed education that includes an understanding of how larger social processes lead to systemic inequality and disadvantage for diverse, marginalized, and/or underserved communities; and the responsibility of MFTs in addressing and intervening in these systems when working with systemically disadvantaged diverse, marginalized, and/or underserved communities. A commitment to an inclusive and diverse learning environment that considers student input, includes transparent processes and policies, and provides educational opportunities for a broad spectrum of students. This includes a commitment to treating all students with respect, equity, and appreciation regardless of their race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religious and spiritual practices, nation of origin or other relevant social categories, immigration status, and language.

• A focus on providing educational experiences congruent with the program’s mission, goals, and outcomes (for example, doctoral degree programs might include specific training in research and teaching rather than focusing on advance clinical training or licensure, while post-degree programs might focus on the development of advanced relational clinical skills and master’s degree program might promote a specific clinical model or practice context).

• Adequate and appropriate access to learning resources so that students can acquire the requisite relational/systemic philosophy, skills, knowledge, and ethical awareness, and be multiculturally-informed in preparation for professional practice as MFTs.

• A commitment to upholding contemporary standards in outcome-based education that emphasizes the assessment of competencies and ongoing self-evaluation and program improvement.

• A commitment to clinical training, if part of a program’s mission, that includes clinical contact hours with individuals, couples, families, and other systems, with relationally-oriented clinical supervision, that includes significant use of observable data (e.g., audio and video recordings, as well as observation of therapy during live supervision [behind the mirror, in the room co-therapy, reflecting teams, etc.]).

• A commitment to relational research congruent with the program’s mission, goals, and outcomes (for example, doctoral degree programs might focus on doing specialized research in a particular area while post-degree programs and master’s degree programs might focus on being informed consumers of research to improve services).
**MFT educational programs** aspire to adopt and demonstrate achievement of the following qualities and values inherent in the standards:

- Graduates demonstrate competence as MFTs through measured outcomes with a distinct MFT perspective; a perspective that includes a relational/systemic philosophy that is multiculturally-informed, and uses relational/systemic ethics in their professional endeavors.

- Graduates demonstrate the ability to provide MFT services to clients, supervisees, groups, agencies/institutions, communities, and others who have diverse perspectives and social identities.

- Graduates have a **Marriage and Family Therapy professional identity**. This identity includes adopting the AAMFT Code of Ethics as a guide for professional conduct, and may include, for example, utilizing the Professional Marriage, and Family Therapy Principles (PMFTPs), membership in **relationally-focused organizations**, relational licenses/certification, and/or demonstrating relational identities in their work and/or other environments.

- Graduates, if applicable to the context and mission of their training and professional position, seek to be **Licensed/Provisionally Licensed/Registered as MFTs** and recognized as **AAMFT Pre-Clinical Fellows** (and eventually **AAMFT Clinical Fellows**).

- Graduates contribute to the profession of Marriage and Family Therapy (MFT) through such activities as disseminating MFT scholarship in the community, developing innovative practices, and/or participating in or conducting research.

- Graduates are employed in many contexts (e.g., community agencies, private practices, healthcare settings, universities, various educational and governmental institutions, schools, military/veterans settings, etc.) and in many capacities (e.g., clinicians, administrators, researchers, teachers, supervisors, etc.). Graduates creatively apply MFT education to these contexts.

- Faculty in MFT educational programs share the following characteristics:
  - Faculty members share a commitment to being knowledgeable and are competent to work with a broad spectrum of students and develop an inclusive teaching/learning environment.

  - The **core faculty** (identifiable faculty members with primary instructional responsibility of the MFT curriculum) demonstrate competence as MFTs and identify professionally primarily as MFTs. This identity includes adopting the AAMFT Code of Ethics as a guide for professional conduct, and may additionally include, for example, utilizing the PMFTPs, membership in relationally-focused organizations, relational licenses/certifications and/or demonstrating relational identities in their work and/or other environments.

  - Core Faculty members possess the appropriate educational, clinical, and supervisory credentials congruent with the mission of the program and as defined in the subsequent standards.

  - Core faculty members contribute to the profession through various ways: scholarship, research, teaching, supervision, practice, and/or service.

  - Programs utilize additional faculty whose training and/or expertise is appropriate for courses/material taught and who demonstrate understanding of the relational orientation of the profession, as needed. Additional faculty members teach effectively and support the program’s mission, goals, and outcomes.
The marriage and family therapy (MFT) core competencies were developed through a collaborative effort of the American Association for Marriage and Family Therapy (AAMFT) and interested stakeholders. In addition to defining the domains of knowledge and requisite skills in each domain that comprise the practice of marriage and family therapy, the ultimate goal of the core competencies is to improve the quality of services delivered by marriage and family therapists (MFTs). Consequently, the competencies described herein represent the minimum that MFTs licensed to practice independently must possess.

Creating competencies for MFTs and improving the quality of mental health services was considered in the context of the broader behavioral health system. The AAMFT relied on three important reports to provide the framework within which the competencies would be developed: Mental Health: A Report of the Surgeon General; the President’s New Freedom Commission on Mental Health’s Achieving the Promise: Transforming Mental Health Care in America; and the Institute of Medicine’s Crossing the Quality Chasm. The AAMFT mapped the competencies to critical elements of these reports, including IOM’s 6 Core Values that are seen as the foundation for a better health care system: 1) Safe, 2) Person-Centered, 3) Efficient, 4) Effective, 5) Timely, and 6) Equitable. The committee also considered how social, political, historical, and economic forces affect individual and relational problems and decisions about seeking and obtaining treatment.

The core competencies were developed for educators, trainers, regulators, researchers, policymakers, and the public. The current version has 128 competencies; however, these are likely to be modified as the field of family therapy develops and as the needs of clients change. The competencies will be reviewed and modified at regular intervals to ensure the competencies are reflective of the current and best practice of MFT.

The core competencies are organized around 6 primary domains and 5 secondary domains. The primary domains are:

1) Admission to Treatment – All interactions between clients and therapist up to the point when a therapeutic contract is established.
2) Clinical Assessment and Diagnosis – Activities focused on the identification of the issues to be addressed in therapy.
3) Treatment Planning and Case Management – All activities focused on directing the course of therapy and extra-therapeutic activities.
4) Therapeutic Interventions – All activities designed to ameliorate the clinical issues identified.
5) Legal Issues, Ethics, and Standards – All aspects of therapy that involve statutes, regulations, principles, values, and mores of MFTs.
6) Research and Program Evaluation – All aspects of therapy that involve the systematic analysis of therapy and how it is conducted effectively.

The subsidiary domains are focused on the types of skills or knowledge that MFTs must develop. These are: a) Conceptual, b) Perceptual, c) Executive, d) Evaluative, and e) Professional.

Although not expressly written for each competency, the stem “Marriage and family therapists…” should begin each. Additionally, the term “client” is used broadly and refers to the therapeutic system of the client/s served, which includes, but is not limited to individuals, couples, families, and others with a vested interest in helping clients change. Similarly, the term “family” is used generically to refer to all people identified by clients as part of their “family system,” this would include fictive kin and relationships of choice. Finally, the core competencies encompass behaviors, skills, attitudes, and policies that promote awareness, acceptance, and respect for differences, enhance services that meet the needs of diverse populations, and promote resiliency and recovery.
### Domain 1: Admission to Treatment

<table>
<thead>
<tr>
<th>Number</th>
<th>Subdomain</th>
<th>Competence</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1.1</td>
<td>Conceptual</td>
<td>Understand systems concepts, theories, and techniques that are foundational to the practice of marriage and family therapy.</td>
</tr>
<tr>
<td>1.1.2</td>
<td>Conceptual</td>
<td>Understand theories and techniques of individual, marital, couple, family, and group psychotherapy.</td>
</tr>
<tr>
<td>1.1.3</td>
<td>Conceptual</td>
<td>Understand the behavioral health care delivery system, its impact on the services provided, and the barriers and disparities in the system.</td>
</tr>
<tr>
<td>1.1.4</td>
<td>Conceptual</td>
<td>Understand the risks and benefits of individual, marital, couple, family, and group psychotherapy.</td>
</tr>
<tr>
<td>1.2.1</td>
<td>Perceptual</td>
<td>Recognize contextual and systemic dynamics (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, spirituality, religion, larger systems, social context).</td>
</tr>
<tr>
<td>1.2.2</td>
<td>Perceptual</td>
<td>Consider health status, mental status, other therapy, and other systems involved in the clients’ lives (e.g., courts, social services).</td>
</tr>
<tr>
<td>1.2.3</td>
<td>Perceptual</td>
<td>Recognize issues that might suggest referral for specialized evaluation, assessment, or care.</td>
</tr>
<tr>
<td>1.3.1</td>
<td>Executive</td>
<td>Gather and review intake information, giving balanced attention to individual, family, community, cultural, and contextual factors.</td>
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<tr>
<td>1.3.2</td>
<td>Executive</td>
<td>Determine who should attend therapy and in what configuration (e.g., individual, couple, family, extrafamilial resources).</td>
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<tr>
<td>1.3.3</td>
<td>Executive</td>
<td>Facilitate therapeutic involvement of all necessary participants in treatment.</td>
</tr>
<tr>
<td>1.3.4</td>
<td>Executive</td>
<td>Explain practice setting rules, fees, rights, and responsibilities of each party, including privacy, confidentiality policies, and duty to care to client or legal guardian.</td>
</tr>
<tr>
<td>1.3.5</td>
<td>Executive</td>
<td>Obtain consent to treatment from all responsible persons.</td>
</tr>
<tr>
<td>1.3.6</td>
<td>Executive</td>
<td>Establish and maintain appropriate and productive therapeutic alliances with the clients.</td>
</tr>
<tr>
<td>1.3.7</td>
<td>Executive</td>
<td>Solicit and use client feedback throughout the therapeutic process.</td>
</tr>
<tr>
<td>1.3.8</td>
<td>Executive</td>
<td>Develop and maintain collaborative working relationships with referral resources, other practitioners involved in the clients’ care, and payers.</td>
</tr>
<tr>
<td>1.3.9</td>
<td>Executive</td>
<td>Manage session interactions with individuals, couples, families, and groups.</td>
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<tr>
<td>1.4.1</td>
<td>Evaluative</td>
<td>Evaluate case for appropriateness for treatment within professional scope of practice and competence.</td>
</tr>
<tr>
<td>1.5.1</td>
<td>Professional</td>
<td>Understand the legal requirements and limitations for working with vulnerable populations (e.g., minors).</td>
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<tr>
<td>1.5.2</td>
<td>Professional</td>
<td>Complete case documentation in a timely manner and in accordance with relevant laws and policies.</td>
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<tr>
<td>1.5.3</td>
<td>Professional</td>
<td>Develop, establish, and maintain policies for fees, payment, record keeping, and confidentiality.</td>
</tr>
<tr>
<td>Number</td>
<td>Subdomain</td>
<td>Competence</td>
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<tr>
<td>2.1.1</td>
<td>Conceptual</td>
<td>Understand principles of human development; human sexuality; gender development; psychopathology; psychopharmacology; couple processes; and family development and processes (e.g., family, relational, and system dynamics).</td>
</tr>
<tr>
<td>2.1.2</td>
<td>Conceptual</td>
<td>Understand the major behavioral health disorders, including the epidemiology, etiology, phenomenology, effective treatments, course, and prognosis.</td>
</tr>
<tr>
<td>2.1.3</td>
<td>Conceptual</td>
<td>Understand the clinical needs and implications of persons with comorbid disorders (e.g., substance abuse and mental health; heart disease and depression).</td>
</tr>
<tr>
<td>2.1.4</td>
<td>Conceptual</td>
<td>Comprehend individual, marital, couple and family assessment instruments appropriate to presenting problem, practice setting, and cultural context.</td>
</tr>
<tr>
<td>2.1.5</td>
<td>Conceptual</td>
<td>Understand the current models for assessment and diagnosis of mental health disorders, substance use disorders, and relational functioning.</td>
</tr>
<tr>
<td>2.1.6</td>
<td>Conceptual</td>
<td>Understand the strengths and limitations of the models of assessment and diagnosis, especially as they relate to different cultural, economic, and ethnic groups.</td>
</tr>
<tr>
<td>2.1.7</td>
<td>Conceptual</td>
<td>Understand the concepts of reliability and validity, their relationship to assessment instruments, and how they influence therapeutic decision making.</td>
</tr>
<tr>
<td>2.2.1</td>
<td>Perceptual</td>
<td>Assess each client’s engagement in the change process.</td>
</tr>
<tr>
<td>2.2.2</td>
<td>Perceptual</td>
<td>Systematically integrate 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.</td>
</tr>
<tr>
<td>2.2.3</td>
<td>Perceptual</td>
<td>Develop hypotheses regarding relationship patterns, their bearing on the presenting problem, and the influence of extra-therapeutic factors on client systems.</td>
</tr>
<tr>
<td>2.2.4</td>
<td>Perceptual</td>
<td>Consider the influence of treatment on extra-therapeutic relationships.</td>
</tr>
<tr>
<td>2.2.5</td>
<td>Perceptual</td>
<td>Consider physical/organic problems that can cause or exacerbate emotional/interpersonal symptoms.</td>
</tr>
<tr>
<td>2.3.1</td>
<td>Executive</td>
<td>Diagnose and assess client behavioral and relational health problems systemically and contextually.</td>
</tr>
<tr>
<td>2.3.2</td>
<td>Executive</td>
<td>Provide assessments and deliver developmentally appropriate services to clients, such as children, adolescents, elders, and persons with special needs.</td>
</tr>
<tr>
<td>2.3.3</td>
<td>Executive</td>
<td>Apply effective and systemic interviewing techniques and strategies.</td>
</tr>
<tr>
<td>2.3.4</td>
<td>Executive</td>
<td>Administer and interpret results of assessment instruments.</td>
</tr>
<tr>
<td>2.3.5</td>
<td>Executive</td>
<td>Screen and develop adequate safety plans for substance abuse, child and elder maltreatment, domestic violence, physical violence, suicide potential, and dangerousness to self and others.</td>
</tr>
<tr>
<td>2.3.6</td>
<td>Executive</td>
<td>Assess family history and dynamics using a genogram or other assessment instruments.</td>
</tr>
<tr>
<td>2.3.7</td>
<td>Executive</td>
<td>Elicit a relevant and accurate biopsychosocial history to understand the context of the clients’ problems.</td>
</tr>
<tr>
<td>2.3.8</td>
<td>Executive</td>
<td>Identify clients’ strengths, resilience, and resources.</td>
</tr>
</tbody>
</table>
### 2.3.9 Executive
Elucidate presenting problem from the perspective of each member of the therapeutic system.

### 2.4.1 Evaluative
Evaluate assessment methods for relevance to clients’ needs.

### 2.4.2 Evaluative
Assess ability to view issues and therapeutic processes systemically.

### 2.4.3 Evaluative
Evaluate the accuracy and cultural relevance of behavioral health and relational diagnoses.

### 2.4.4 Evaluative
Assess the therapist-client agreement of therapeutic goals and diagnosis.

### 2.5.1 Professional
Utilize consultation and supervision effectively.

### Domain 3: Treatment Planning and Case Management

<table>
<thead>
<tr>
<th>Number</th>
<th>Subdomain</th>
<th>Competence</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1.1</td>
<td>Conceptual</td>
<td>Know which models, modalities, and/or techniques are most effective for presenting problems.</td>
</tr>
<tr>
<td>3.1.2</td>
<td>Conceptual</td>
<td>Understand the liabilities incurred when billing third parties, the codes necessary for reimbursement, and how to use them correctly.</td>
</tr>
<tr>
<td>3.1.3</td>
<td>Conceptual</td>
<td>Understand the effects that psychotropic and other medications have on clients and the treatment process.</td>
</tr>
<tr>
<td>3.1.4</td>
<td>Conceptual</td>
<td>Understand recovery-oriented behavioral health services (e.g., self-help groups, 12-step programs, peer-to-peer services, supported employment).</td>
</tr>
<tr>
<td>3.2.1</td>
<td>Perceptual</td>
<td>Integrate client feedback, assessment, contextual information, and diagnosis with treatment goals and plan.</td>
</tr>
<tr>
<td>3.3.1</td>
<td>Executive</td>
<td>Develop, with client input, measurable outcomes, treatment goals, treatment plans, and after-care plans with clients utilizing a systemic perspective.</td>
</tr>
<tr>
<td>3.3.2</td>
<td>Executive</td>
<td>Prioritize treatment goals.</td>
</tr>
<tr>
<td>3.3.3</td>
<td>Executive</td>
<td>Develop a clear plan of how sessions will be conducted.</td>
</tr>
<tr>
<td>3.3.4</td>
<td>Executive</td>
<td>Structure treatment to meet clients’ needs and to facilitate systemic change.</td>
</tr>
<tr>
<td>3.3.5</td>
<td>Executive</td>
<td>Manage progression of therapy toward treatment goals.</td>
</tr>
<tr>
<td>3.3.6</td>
<td>Executive</td>
<td>Manage risks, crises, and emergencies.</td>
</tr>
<tr>
<td>3.3.7</td>
<td>Executive</td>
<td>Work collaboratively with other stakeholders, including family members, other significant persons, and professionals not present.</td>
</tr>
<tr>
<td>3.3.8</td>
<td>Executive</td>
<td>Assist clients in obtaining needed care while navigating complex systems of care.</td>
</tr>
<tr>
<td>3.3.9</td>
<td>Executive</td>
<td>Develop termination and aftercare plans.</td>
</tr>
<tr>
<td>3.4.1</td>
<td>Evaluative</td>
<td>Evaluate progress of sessions toward treatment goals.</td>
</tr>
<tr>
<td>3.4.2</td>
<td>Evaluative</td>
<td>Recognize when treatment goals and plan require modification.</td>
</tr>
<tr>
<td>3.4.3</td>
<td>Evaluative</td>
<td>Evaluate level of risks, management of risks, crises, and emergencies.</td>
</tr>
<tr>
<td>3.4.4</td>
<td>Evaluative</td>
<td>Assess session process for compliance with policies and procedures of practice setting.</td>
</tr>
<tr>
<td>Number</td>
<td>Subdomain</td>
<td>Competence</td>
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<tr>
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</tr>
<tr>
<td>3.4.5</td>
<td>Professional</td>
<td>Monitor personal reactions to clients and treatment process, especially in terms of therapeutic behavior, relationship with clients, process for explaining procedures, and outcomes.</td>
</tr>
<tr>
<td>3.5.1</td>
<td>Professional</td>
<td>Advocate with clients in obtaining quality care, appropriate resources, and services in their community.</td>
</tr>
<tr>
<td>3.5.2</td>
<td>Professional</td>
<td>Participate in case-related forensic and legal processes.</td>
</tr>
<tr>
<td>3.5.3</td>
<td>Professional</td>
<td>Write plans and complete other case documentation in accordance with practice setting policies, professional standards, and state/provincial laws.</td>
</tr>
<tr>
<td>3.5.4</td>
<td>Professional</td>
<td>Utilize time management skills in therapy sessions and other professional meetings.</td>
</tr>
</tbody>
</table>

### Domain 4: Therapeutic Interventions

<table>
<thead>
<tr>
<th>Number</th>
<th>Subdomain</th>
<th>Competence</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1.1</td>
<td>Conceptual</td>
<td>Comprehend a variety of individual and systemic therapeutic models and their application, including evidence-based therapies and culturally sensitive approaches.</td>
</tr>
<tr>
<td>4.1.2</td>
<td>Conceptual</td>
<td>Recognize strengths, limitations, and contraindications of specific therapy models, including the risk of harm associated with models that incorporate assumptions of family dysfunction, pathogenesis, or cultural deficit.</td>
</tr>
<tr>
<td>4.2.1</td>
<td>Perceptual</td>
<td>Recognize how different techniques may impact the treatment process.</td>
</tr>
<tr>
<td>4.2.2</td>
<td>Perceptual</td>
<td>Distinguish differences between content and process issues, their role in therapy, and their potential impact on therapeutic outcomes.</td>
</tr>
<tr>
<td>4.3.1</td>
<td>Executive</td>
<td>Match treatment modalities and techniques to clients' needs, goals, and values.</td>
</tr>
<tr>
<td>4.3.2</td>
<td>Executive</td>
<td>Deliver interventions in a way that is sensitive to special needs of clients (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, disability, personal history, larger systems issues of the client).</td>
</tr>
<tr>
<td>4.3.3</td>
<td>Executive</td>
<td>Reframe problems and recursive interaction patterns.</td>
</tr>
<tr>
<td>4.3.4</td>
<td>Executive</td>
<td>Generate relational questions and reflexive comments in the therapy room.</td>
</tr>
<tr>
<td>4.3.5</td>
<td>Executive</td>
<td>Engage each family member in the treatment process as appropriate.</td>
</tr>
<tr>
<td>4.3.6</td>
<td>Executive</td>
<td>Facilitate clients developing and integrating solutions to problems.</td>
</tr>
<tr>
<td>4.3.7</td>
<td>Executive</td>
<td>Defuse intense and chaotic situations to enhance the safety of all participants.</td>
</tr>
<tr>
<td>4.3.8</td>
<td>Executive</td>
<td>Empower clients and their relational systems to establish effective relationships with each other and larger systems.</td>
</tr>
<tr>
<td>4.3.9</td>
<td>Executive</td>
<td>Provide psychoeducation to families whose members have serious mental illness or other disorders.</td>
</tr>
<tr>
<td>4.3.10</td>
<td>Executive</td>
<td>Modify interventions that are not working to better fit treatment goals.</td>
</tr>
<tr>
<td>4.3.11</td>
<td>Executive</td>
<td>Move to constructive termination when treatment goals have been accomplished.</td>
</tr>
<tr>
<td>4.3.12</td>
<td>Executive</td>
<td>Integrate supervisor/team communications into treatment.</td>
</tr>
<tr>
<td>4.4.1</td>
<td>Evaluative</td>
<td>Evaluate interventions for consistency, congruency with model of therapy and theory of change, cultural and contextual relevance, and goals of the treatment plan.</td>
</tr>
<tr>
<td>4.4.2</td>
<td>Evaluative</td>
<td>Evaluate ability to deliver interventions effectively.</td>
</tr>
<tr>
<td>4.4.3</td>
<td>Evaluative</td>
<td>Evaluate treatment outcomes as treatment progresses.</td>
</tr>
<tr>
<td>4.4.4</td>
<td>Evaluative</td>
<td>Evaluate clients’ reactions or responses to interventions.</td>
</tr>
<tr>
<td>Number</td>
<td>Subdomain</td>
<td>Competence</td>
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<tr>
<td>--------</td>
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</tr>
<tr>
<td>4.4.5</td>
<td>Evaluative</td>
<td>Evaluate clients’ outcomes for the need to continue, refer, or terminate therapy.</td>
</tr>
<tr>
<td>4.4.6</td>
<td>Evaluative</td>
<td>Evaluate reactions to the treatment process (e.g., transference, family of origin, current stress level, current life situation, cultural context) and their impact on effective intervention and clinical outcomes.</td>
</tr>
<tr>
<td>4.5.1</td>
<td>Professional</td>
<td>Respect multiple perspectives (e.g., clients, team, supervisor, practitioners from other disciplines who are involved in the case).</td>
</tr>
<tr>
<td>4.5.2</td>
<td>Professional</td>
<td>Set appropriate boundaries, manage issues of triangulation, and develop collaborative working relationships.</td>
</tr>
<tr>
<td>4.5.3</td>
<td>Professional</td>
<td>Articulate rationales for interventions related to treatment goals and plan, assessment information, and systemic understanding of clients’ context and dynamics.</td>
</tr>
</tbody>
</table>

### Domain 5: Legal Issues, Ethics, and Standards

<table>
<thead>
<tr>
<th>Number</th>
<th>Subdomain</th>
<th>Competence</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1.1</td>
<td>Conceptual</td>
<td>Know state, federal, and provincial laws and regulations that apply to the practice of marriage and family therapy.</td>
</tr>
<tr>
<td>5.1.2</td>
<td>Conceptual</td>
<td>Know professional ethics and standards of practice that apply to the practice of marriage and family therapy.</td>
</tr>
<tr>
<td>5.1.3</td>
<td>Conceptual</td>
<td>Know policies and procedures of the practice setting.</td>
</tr>
<tr>
<td>5.1.4</td>
<td>Conceptual</td>
<td>Understand the process of making an ethical decision.</td>
</tr>
<tr>
<td>5.2.1</td>
<td>Perceptual</td>
<td>Recognize situations in which ethics, laws, professional liability, and standards of practice apply.</td>
</tr>
<tr>
<td>5.2.2</td>
<td>Perceptual</td>
<td>Recognize ethical dilemmas in practice setting.</td>
</tr>
<tr>
<td>5.2.3</td>
<td>Perceptual</td>
<td>Recognize when a legal consultation is necessary.</td>
</tr>
<tr>
<td>5.2.4</td>
<td>Perceptual</td>
<td>Recognize when clinical supervision or consultation is necessary.</td>
</tr>
<tr>
<td>5.3.1</td>
<td>Executive</td>
<td>Monitor issues related to ethics, laws, regulations, and professional standards.</td>
</tr>
<tr>
<td>5.3.2</td>
<td>Executive</td>
<td>Develop and assess policies, procedures, and forms for consistency with standards of practice to protect client confidentiality and to comply with relevant laws and regulations.</td>
</tr>
<tr>
<td>5.3.3</td>
<td>Executive</td>
<td>Inform clients and legal guardian of limitations to confidentiality and parameters of mandatory reporting.</td>
</tr>
<tr>
<td>5.3.4</td>
<td>Executive</td>
<td>Develop safety plans for clients who present with potential self-harm, suicide, abuse, or violence.</td>
</tr>
<tr>
<td>5.3.5</td>
<td>Executive</td>
<td>Take appropriate action when ethical and legal dilemmas emerge.</td>
</tr>
<tr>
<td>5.3.6</td>
<td>Executive</td>
<td>Report information to appropriate authorities as required by law.</td>
</tr>
<tr>
<td>5.3.7</td>
<td>Executive</td>
<td>Practice within defined scope of practice and competence.</td>
</tr>
<tr>
<td>5.3.8</td>
<td>Executive</td>
<td>Obtain knowledge of advances and theory regarding effective clinical practice.</td>
</tr>
<tr>
<td>5.3.9</td>
<td>Executive</td>
<td>Obtain license(s) and specialty credentials.</td>
</tr>
<tr>
<td>5.3.10</td>
<td>Executive</td>
<td>Implement a personal program to maintain professional competence.</td>
</tr>
<tr>
<td>5.4.1</td>
<td>Evaluative</td>
<td>Evaluate activities related to ethics, legal issues, and practice standards.</td>
</tr>
<tr>
<td>5.4.2</td>
<td>Evaluative</td>
<td>Monitor attitudes, personal well-being, personal issues, and personal problems to insure they do not impact the therapy process adversely or create vulnerability for misconduct.</td>
</tr>
<tr>
<td>Number</td>
<td>Subdomain</td>
<td>Competence</td>
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</tr>
<tr>
<td>5.5.1</td>
<td>Professional</td>
<td>Maintain client records with timely and accurate notes.</td>
</tr>
<tr>
<td>5.5.2</td>
<td>Professional</td>
<td>Consult with peers and/or supervisors if personal issues, attitudes, or beliefs threaten to adversely impact clinical work.</td>
</tr>
<tr>
<td>5.5.3</td>
<td>Professional</td>
<td>Pursue professional development through self-supervision, collegial consultation, professional reading, and continuing educational activities.</td>
</tr>
<tr>
<td>5.5.4</td>
<td>Professional</td>
<td>Bill clients and third-party payers in accordance with professional ethics, relevant laws and polices, and seek reimbursement only for covered services.</td>
</tr>
</tbody>
</table>

**Domain 6: Research and Program Evaluation**

<table>
<thead>
<tr>
<th>Number</th>
<th>Subdomain</th>
<th>Competence</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1.1</td>
<td>Conceptual</td>
<td>Know the extant MFT literature, research, and evidence-based practice.</td>
</tr>
<tr>
<td>6.1.2</td>
<td>Conceptual</td>
<td>Understand research and program evaluation methodologies, both quantitative and qualitative, relevant to MFT and mental health services.</td>
</tr>
<tr>
<td>6.1.3</td>
<td>Conceptual</td>
<td>Understand the legal, ethical, and contextual issues involved in the conduct of clinical research and program evaluation.</td>
</tr>
<tr>
<td>6.2.1</td>
<td>Perceptual</td>
<td>Recognize opportunities for therapists and clients to participate in clinical research.</td>
</tr>
<tr>
<td>6.3.1</td>
<td>Executive</td>
<td>Read current MFT and other professional literature.</td>
</tr>
<tr>
<td>6.3.2</td>
<td>Executive</td>
<td>Use current MFT and other research to inform clinical practice.</td>
</tr>
<tr>
<td>6.3.3</td>
<td>Executive</td>
<td>Critique professional research and assess the quality of research studies and program evaluation in the literature.</td>
</tr>
<tr>
<td>6.3.4</td>
<td>Executive</td>
<td>Determine the effectiveness of clinical practice and techniques.</td>
</tr>
<tr>
<td>6.4.1</td>
<td>Evaluative</td>
<td>Evaluate knowledge of current clinical literature and its application.</td>
</tr>
<tr>
<td>6.5.1</td>
<td>Professional</td>
<td>Contribute to the development of new knowledge.</td>
</tr>
</tbody>
</table>

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