

TEXAS TECH UNIVERSITY

*Master's in Couple, Marriage,
& Family Therapy*

Program Manual
2025 - 2026

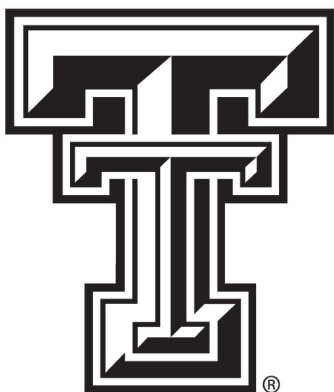


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SECTION I

MASTER'S PROGRAM MISSION AND LEARNING OUTCOMES

Couple, Marriage, and Family Therapy at

Texas Tech University

Master's Program Mission Statement and Learning Outcomes

Updated August 2025

The Couple, Marriage, and Family Therapy graduate programs at TTU provide systemic research and clinical training to prepare students for clinical licensure and scholarly achievement. TTU is known for its supportive and rigorous programs, and is one of the largest CMFT programs in the country. We embrace the plurality of the human experience as an invaluable resource to the quality and vitality of our program and profession. Our graduates have found success in a wide variety of academic, clinical and other professional settings. There are two graduate programs in CMFT at TTU: a doctoral and a master's program.

The CMFT doctoral program has a long and distinguished history of preparing students for contributions in academics, administration, and clinical work. There is a strong emphasis on training in research methodology as well as theoretical and clinical sophistication. Many of TTU's doctoral graduates can be found in academic institutions around the country. The doctoral program has been accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) since 1981.

The master's program at TTU is a clinically-focused program grounded in relational/systemic theories of practice. The CMFT faculty provide training that prepares students for licensure as an MFT, LCDC, or for future doctoral work. The TTU CMFT master's degree fulfills all course requirements of the Texas State Board of Examiners of Marriage and Family Therapists necessary to sit for the national licensure exam. The master's program was accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) in 2019.

Texas Tech University

Mission Statement

“As a public research university, Texas Tech advances knowledge through innovative and creative teaching, research and scholarship. The university is dedicated to student success by preparing learners to be ethical leaders for a diverse and globally competitive workforce. The university is committed to enhancing the cultural and economic development of the state, nation and world (Approved by the Texas Tech University Board of Regents on May 14, 2010).”

TTU CMFT Master’s Degree Program

Mission Statement

The mission of the Texas Tech Couple, Marriage, and Family Therapy Master’s Program is to provide academic and clinical training to students who will function as couple, marriage, and family therapists at the highest level of scholarly and clinical competence. The master’s degree program is conceptually grounded by the scientist-practitioner model, preparing students who are capable of making unique contributions to the field of marriage and family therapy through: a) knowledgeable consumption and application of relational/systemic **research**, b) skilled and ethical delivery of relational/systemic clinical **intervention**, and 3) advanced professional and contextual development in relational/systemic **clinical practice**. This training is done in a context that is supportive of **diversity**, student-faculty mentoring and support, and authenticity. The following outcomes are nested within this broad educational mission.

Master's Program Goals, Outcomes, and Targets

PROGRAM GOAL #1: Students will be **knowledgeable and** qualified **to practice** Couple, Marriage, and Family Therapy from a relational/systemic perspective and to apply appropriate **relational/systemic ethics** to practice.

COAMFTE DEVELOPMENTAL COMPETENCY COMPONENTS:

Knowledge of the MFT Profession.

Practice of relational/systemic therapy as a qualified behavioral/mental health provider.

Commitment to **ethical** practice through ethical codes of the MFT profession and pertinent regulatory bodies.

Student Learning Outcome #1: Students will demonstrate the **knowledge** and ability to **practice** Couple, Marriage, and Family Therapy from a relational/systemic perspective.

Targets

- 85% of students will complete the Clinical Proficiency components as part of a passing Master's Degree Portfolio within 2 years of entering the program.
- 80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Self Evaluation.
- 80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Externship Evaluation.
- 80% of students will record scores of 4 or greater on questions 3 and 6 - 7 (clinical) of the Program Exit Evaluation.
- 80% of students will record scores of 4 or greater on the clinical items in questions 19 (2 – 3 & 6) and 20 (1) of the Alumni Survey.

Student Learning Outcome #2: Students will demonstrate the ability to apply appropriate **relational/systemic ethics** to practice.

Targets

- 80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Self Evaluation.
- 80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Externship Evaluation.
- 80% of students will record scores of 4 or greater on question 5 (ethics) of the Program Exit Evaluation.
- 80% of students will record scores of 4 or greater on the ethics items in question 19 (4 & 5) of the Alumni Survey.

PROGRAM GOAL #2: Students will be prepared to operate from a science informed perspective, demonstrating competency in the application of **research** in effective CMFT practice.

COAMFTE DEVELOPMENTAL COMPETENCY COMPONENTS:

Practice of relational/systemic therapy as a qualified behavioral/mental health provider.

Development and application of **research** to further the knowledge and practice of the MFT profession.

Student Learning Outcome #3: Students will demonstrate the ability to operate from a science informed perspective, demonstrating competency in the application of **research** in effective CMFT practice.

Targets

- 85% of students will complete the Research and Scholarship Proficiency components as part of a passing Master's Degree Portfolio within 3 years of entering the program.
- 80% of students will receive scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Self Evaluation.
- 80% of students will record scores of 4 or greater on questions 8 - 11 (research) of the Program Exit Evaluation.

- 80% of students will record scores of 4 or greater on the research/empirical validation items in questions 19 (1, 6) of the Alumni Survey.

PROGRAM GOAL #3: Students will integrate advanced professional development in their **practice** of relational/systemic therapy.

COAMFTE DEVELOPMENTAL COMPETENCY COMPONENTS:

Practice of relational/systemic therapy as a qualified behavioral/mental health provider.

Awareness, knowledge, and skill to responsibly serve **diverse communities**.

Student Learning Outcome #4: Students will demonstrate their understanding of advanced professional development in their **practice** of relational/systemic therapy.

Targets

- 85% of students will complete the Advanced Professional and Contextual Development component as part of a passing Master's Degree Portfolio within 2 years of entering the program.
- 80% of students will receive scores of 4 or greater on the items included in question (advanced professional development) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 11 (advanced professional development) of the Practicum Self Evaluation.
- 80% of students will record scores of 4 or greater on questions 12 - 14 (advanced professional development) of the Program Exit Evaluation.
- 80% of students will record scores of 4 or greater on the advanced professional development item in questions 20 (2) of the Alumni Survey.

PROGRAM GOAL #4: Students will understand the intersection of contextual factors (ethnicity, gender, sexual orientation, socio-economic status, etc.) and the application of research and clinical intervention central to CMFT in working with **diverse communities**.

COAMFTE DEVELOPMENTAL COMPETENCY COMPONENTS:

Awareness, knowledge, and skill to responsibly serve **diverse communities**.

Development and application of **research** to further the knowledge and practice of the MFT profession.

Student Learning Outcome #5: Students will demonstrate understanding of the intersection of **contextual factors** (ethnicity, gender, sexual orientation, socio-economic status, etc.) and the application of **research** and clinical intervention central to CMFT.

Targets

- 85% of students will complete the Advanced Professional and Contextual Development component as part of a passing Master's Degree Portfolio within 2 years of entering the program.
- 80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Self Evaluation.
- 80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Externship Evaluation.

Faculty Outcomes

All TTU CMFT faculty are expected to contribute to the program and to the profession. It is expected that faculty will:

1. **Be active in producing and sharing high quality research.** They will:
 - a. Publish in professional journals and present research at national conferences.
 - i. Faculty vita
 - b. Participate in funded research, including grants and contracts, and submit proposals for these projects.
 - i. Faculty vita
 - c. Mentor students in research projects including class papers, qualifying exams, research teams, and the dissertation.
 - i. Co-authored publications on vita.
 - ii. Student feedback for class papers.
 - iii. Ongoing research meetings with students (e.g., small group, individual meetings).
2. **Be active contributors to the development of the profession of CMFT. This occurs through clinical practice, supervision of interns, and service in their professional spheres.** Faculty will:
 - a. Be involved in clinical activity.
 - i. Private practice, co-therapy with students, etc.
 - b. Provide clinical supervision of students and interns.
 - i. Evaluations for practicum (CMFT 6395)
 - c. Serve in departmental, university, and national roles.
 - i. Faculty vita
3. **Teach high quality graduate and undergraduate courses and socialize CMFT graduate students in teaching and instruction.** Faculty will:
 - a. Teach graduate curriculum and provide examples and mentoring for instructors.
 - i. Course instruction and student feedback.
 - ii. Accomplished student learning outcomes.

TTU CMFT Faculty

[For full vitae, see the CMFT website]

Cameron Brown, Assistant Professor

Ph.D. Kansas State University, 2017

Systemic understanding of contemporary sexual issues within couple relationships and systemic contributions to physical health within couple relationships.

Jaclyn Cravens Pickens, Associate Professor, MS Program Director

Ph.D. Texas Tech University, 2013

The role technology and the internet plays in intimate partner relationships and the profession (i.e., teletherapy).

Stephen Fife, Associate Professor, PhD Program Director

Ph.D. Brigham Young University, 2004

Common factors of therapeutic change, change process, treatment and healing of infidelity, theory and philosophy of psychotherapy, professional athletes and marriage

Natira Mullet, Assistant Professor

Ph.D. Texas Tech University, 2020

Promoting the health, well-being, and resilience of people with marginalized identities via the examination of cultural, familial, and systemic protective factors to reduce interpersonal trauma and resulting substance use and mental health outcomes.

Nicole Piland, Associate Professor of Practice, Director, Family Therapy Clinic

Ph.D. Texas Tech University, 1999

Grief and loss, Poor Pre-natal Diagnosis and Relational Coping Process, Resilience in Families Living with Down Syndrome

Douglas Smith, Associate Professor, CFAS Chairperson

Ph.D. Kansas State University, 2006

Systemic intervention for Intimate Partner Violence and systemic implications of traumatic stress

Kristy Soloski, Associate Professor, CFAS Associate Chairperson

Ph.D. Kansas State University, 2014

Research focuses on family processes related to substance use trajectories and culturally sensitive clinical and research practices.

Hitiura Anihia, Assistant Clinic Director of the Family Therapy Clinic

Ph.D. Texas Tech University, 2024

Syndney Crane, Assistant Clinic Director of the Children's Behavioral Health Clinic

Ph.D. National University, 2025

SECTION II

MAJOR STEPS IN MS PROGRAM

MAJOR STEPS IN CMFT MASTER'S PROGRAM

I. Academic Course Work

Following admission to the master's program, students are assigned a temporary CMFT faculty advisor. Students are responsible for contacting their advisors during pre-registration periods each semester. Students must conform to the rules of the graduate school at Texas Tech University as reflected in the current University catalogue.

Students should be registered for the number of credit hours that reflects the extent of their involvement in the graduate program. This applies to research courses as well as to formally structured CMFT classes. Students who are not teaching assistants or research assistants need to be enrolled full-time (6 total hours over the summer sessions and 9 hours during each long semester). **Students holding assistantships or scholarships must be enrolled for the appropriate number of hours each semester (including summer sessions). To be eligible for assistantships, the minimum is 9 hours each long semester and 3 to 6 hours for the summer.** For scholarship recipients, the required minimum is 9 hours each long semester and 3-6 hours for the summer.

Continuous Enrollment. In no case may a student be enrolled in less than 3 hours during the long terms (Fall and Spring) and one of the two Summer terms. It is a policy of the Texas Tech University Graduate School and the Couple, Marriage, and Family Therapy Program that every student must be enrolled on a continuous basis from entry into the program to graduation. The normal course load for CMFT students is 9-12 credit hours in each long semester and 3 hours in each Summer term. For third year master's students completing the thesis track, some students may elect to continue enrolling in 9-12 hours a semester (and 3 each Summer term); however, other students may elect to reduce their enrollment to reflect their limited contact with faculty and/or their off-campus status. However, every student, regardless of status, **MUST** be enrolled in a minimum of 3 hours each long term and 3 hours in one of the Summer terms. The only exception would be a leave granted by the MS Program Director in consultation with the CMFT faculty for health or family reasons.

Failure to enroll in the minimum of 3 hours in any long semester or in at least one summer term will be taken as grounds for dismissal from the CMFT program—that is, the Graduate School will be notified that you have been formally terminated from the program for lack of progress. Your readmission to the CMFT program cannot be guaranteed. If you are readmitted you will have to pay additional reapplication fees set by the Graduate School and you will be required to register for extra hours reflecting the period of non-enrollment

If a student enrolls in the optional thesis (CMFT 6000), students must continue to enroll for thesis hours each semester until graduation (every long semester and at least one summer session each year).

All students who are clinically active must be enrolled in CMFT 6395: Practicum in CMFT to be eligible to maintain clinical activity. Any student, who for any reason, does not enroll in CMFT 6395 while having clinical privileges will be clinically inactive, with all case loads being transferred to a new therapist. Decisions to pause clinical activity should be made in consultation with your faculty advisor, the clinic director, and potentially the program director.

II. Preliminary Meeting

The Preliminary meeting with CMFT faculty is held during the **second semester** of enrollment. The meeting is considered the preliminary examination for master students. The purpose of this meeting is to:

- Evaluate the student's initial progress in the program
- Determine the degree of fit
- Officially approve the students' plan of study
- Choose a permanent advisor

The meeting itself consists of a discussion and final approval of the materials submitted by the student (see Section V for specific details). Following this meeting, the CMFT faculty makes a recommendation regarding continuation in the program. The transfer of courses from another institution is rarely permitted, and exceptions are generally made only in relation to standard curriculum (master's level) courses and in the case of students who are coming from non-MFT or non-accredited MFT graduate programs. The Graduate School permits the transfer of no more than two courses (six hours) into the master's program; however, any decisions about course transfers and substitutions will be made by the program faculty.

III. Practicum

The required number of client contact and supervision hours must be completed as part of the degree plan. (See Section VIII on practicum.)

IV. Completion of Clinic Responsibilities

In addition to completing the required hours in practica, students must receive permission from the faculty to begin externship (MS) (see Final Report of Client and Supervision Hours form in Practicum section of this manual).

V. Annual Evaluations

Students will be evaluated on a regular basis in coursework, practicum, and the fulfillment of their assistantship and other responsibilities. Formal evaluations will take place at the time of their Plan-of-Study/Examination meetings in the Spring of their first year. Opportunities for informal feedback from faculty and staff will be abundant, however, an appointment with the faculty can be scheduled.

VI. Portfolio

All students will complete the master's portfolio (MS).

The portfolio allows students to aggregate work demonstrating their mastery of elements of the program goals. The elements of the portfolio are designed not only to measure student outcomes, but to provide students the opportunity to engage in experiences with practical value for their professional development and career.

- **Master's** portfolios are typically submitted after the completion of the majority of coursework, by the beginning of the first Summer session in year two of study. The student's advisor or committee chair will provide initial approval of the portfolio before it is submitted to the CMFT faculty for review.

VII. Externship (MS)

All students will complete an externship (MS) as part of the graduate program (see Section IX on Externship).

VIII. Thesis (optional MS)

Students in the master's degree program **may** choose to complete a master's thesis as part of the thesis track.

SECTION III
PROGRAM OBJECTIVES

Texas Tech University
Couple, Marriage, and Family Therapy Program

Program Objectives

The objective of the CMFT Program at Texas Tech University is to provide clinical and academic training in couple, marriage, and family therapy to students who are committed to extending the practice and knowledge-base of couple, marriage, and family therapy through clinical practice, research, supervision, and teaching. Our goal is to train students who will function as couple, marriage, and family therapists at the highest level of clinical competence, and who also are capable of making unique contributions to the field of couple, marriage, and family therapy through research, teaching, advocacy, and other activities extending beyond helping particular clients. We use the scientist-practitioner model to train excellent therapists who integrate research into their clinical practice, and if desired conduct independent research.

Texas Tech is committed to the principle that in no aspect of its programs shall there be differences in the treatment of persons because of race, ethnicity, creed, national origin, sexual orientation, relationship status, age, sex, gender, socioeconomic status, disability, or religious or spiritual belief and that equal opportunity and access to facilities shall be available to all.

Master's Degree. Students completing the master's program in CMFT will meet the educational requirements for Associate Marriage and Family Therapist licensure in Texas. Students seeking licensure in other states or provinces should check the regulatory bodies for potential differences in MFT licensure requirements. Students seeking licensure in a state or province, other than Texas, might be required to complete an additional course or meet other state or province-based clinical requirements; which could delay my eligibility for associate level licensure after graduation from the Texas Tech University Couple, Marriage, and Family Therapy Master's of Science degree program. Students graduating with a M.S. in CMFT are required to complete 500 hours of direct clinical contact (at least 200 hours with couples or families). The total hours are comprised of hours accumulated in clinical work at the TTU Family Therapy Clinic, approved community placements outside the Family Therapy Clinic, alternative hours, and internship hours. (See Practicum and External Placement sections for further explanation of hours.)

Doctoral Degree. Students graduating with a Ph.D. in CMFT are required to provide a minimum of 200 clinical therapy hours during the doctoral program (*at least 80 hours must be with relational systems) through the Children's Behavioral Health Clinic (CBHC) and Internship. The 200 hours may include a maximum of 40 alternative hours. In addition, all graduates of COAMFTE accredited doctoral programs must have completed the Foundational Practice Component. The Foundational Practice Component includes a minimum of 500 clinical contact hours with individuals, couples, families, and other systems, at least 40% of which must be with relational systems. The 500 hours must occur over a minimum of 12 months of clinical activity, may include a maximum of 100 alternative hours, and include at least 100 hours of clinical supervision from AAMFT Approved Supervisors. Graduates of COAMFTE accredited master's degree programs will have met the Foundational Practice Component as part of the requirements of their degree. Doctoral students from non-accredited programs or non-clinical programs will be required to complete the Foundational Practice Component as part of

doctoral studies.

In Texas, full licensure as an MFT requires 1500 hours of face-to-face therapy and an additional 1500 hours of therapy-related activities **BEGINNING ONLY AFTER** the granting of the Associate License. While other states' requirements differ, AAMFT requires full state licensure for Clinical Membership. In addition to meeting program requirements, it is in the student's best interest to take the examination for Associate MFT as soon as possible so that the student can begin accumulating hours toward state licensure. The TTU CMFT program is not designed to meet the requirements for licensure in other professions (e.g., licensed professional counselor [LPC]).

Upon completion of the graduate degree in Couple, Marriage, and Family therapy, we expect the student to have achieved competence as defined by the Program Goals and Student Learning Outcomes.

We believe couple, marriage, and family therapy as a profession is in a unique position to advance our understanding of the human condition. The social and behavioral sciences have turned increasingly to the study and recognition of the importance of the family in its impact on societal problems ranging from behavior problems in children to depression and alcoholism in adults. Unfortunately, much of the academic work on these problems has been undertaken by those with little direct clinical experience and understanding of families and social context. On the other hand, the field of couple, marriage, and family therapy has developed with too little attention to establishing the validity of its theoretical base and clinical wisdom by a body of competent research findings.

The faculty views 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, they believe the academic understanding must be applied and tested by a knowledge that comes only by working directly with couples and families. Couple, marriage, and family therapy is an enterprise that involves such direct contact. Because they do not think the clinical, academic, and research enterprises should be separated, all three are integrated and emphasized throughout the student's training.

The faculty does not teach or adhere to a single theory, school, or approach to couple, marriage, and family therapy. Rather, they teach all of the major approaches and expect the student to be willing to examine each of these in their work with clients. The faculty want the student to understand, compare, and evaluate the major approaches. The student's task is to integrate them into a personally meaningful and effective approach for the purpose of helping families change, and for the purpose of helping others understand families better through teaching and research. The faculty has a collective interest in helping students understand their role in the clients' change process. They believe it is vital for students to recognize how their own actions and values may facilitate or hinder clients' change.

The CMFT Faculty are actively involved in all aspects of the student's education and training and provide extensive and sustained mentoring in both research and clinical work throughout the program.

Texas Tech University
Couple, Marriage, and Family Therapy Master's Program

Program Objectives

The objective of the CMFT Program at Texas Tech University is to provide clinical and academic training in couple, marriage, and family therapy to students who are committed to extending the practice and knowledge-base of couple, marriage, and family therapy through clinical practice, research, supervision, and teaching. Our goal is to train students who will function as couple, marriage, and family therapists at the highest level of clinical competence, and who also are capable of making unique contributions to the field of couple, marriage, and family therapy through research, teaching, advocacy, and other activities extending beyond helping particular clients. We use the scientist-practitioner model to train excellent therapists who integrate research into their clinical practice, and if desired conduct independent research.

Texas Tech is committed to the principle that in no aspect of its programs shall there be differences in the treatment of persons because of race, ethnicity, creed, national origin, sexual orientation, relationship status, age, sex, gender, socioeconomic status, disability, or religious or spiritual belief and that equal opportunity and access to facilities shall be available to all.

Master's Degree. Students completing the master's program in CMFT will meet the educational requirements for Associate Marriage and Family Therapist licensure in Texas. Students seeking licensure in other states or provinces should check the regulatory bodies for potential differences in MFT licensure requirements. Students seeking licensure in a state or province, other than Texas, might be required to complete an additional course or meet other state or province-based clinical requirements; which could delay my eligibility for associate level licensure after graduation from the Texas Tech University Couple, Marriage, and Family Therapy Master's of Science degree program. Students graduating with a M.S. in CMFT are required to complete 500 hours of direct clinical contact (at least 250 hours with couples or families). The total hours are comprised of hours accumulated in clinical work at the TTU Family Therapy Clinic, approved community placements outside the Family Therapy Clinic, alternative hours, and internship hours. (See Practicum and External Placement sections for further explanation of hours.)

In Texas, full licensure as an MFT requires 1500 hours of face-to-face therapy and an additional 1500 hours of therapy-related activities **BEGINNING ONLY AFTER** the granting of the Associate License. While other states' requirements differ, AAMFT requires full state licensure for Clinical Membership. In addition to meeting program requirements, it is in the student's best interest to take the examination for Associate MFT as soon as possible so that the student can begin accumulating hours toward state licensure. The TTU CMFT program is not designed to meet the requirements for licensure in other professions (e.g., licensed professional counselor [LPC]). For all other states licensure information, please see the licensure disclosure information (section XIII licensure information) and speak with the MS program director and/or clinic director.

Upon completion of the master's degree in Couple, Marriage, and Family therapy, we expect the student to have achieved competence as defined by the Program Goals and Student Learning Outcomes.

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The faculty does not teach or adhere to a single theory, school, or approach to couple, marriage, and family therapy. Rather, they teach all of the major systemic/relational approaches and expect the student to be willing to examine each of these in their work with clients. The faculty want the student to understand, compare, and evaluate the major systemic/relational approaches. The student's task is to integrate them into a personally meaningful and effective approach for the purpose of helping families change, and for the purpose of helping others understand families better through teaching and research. The faculty has a collective interest in helping students understand their role in the clients' change process. They believe it is vital for students to recognize how their own actions and values may facilitate or hinder clients' change.

The CMFT Faculty are actively involved in all aspects of the student's education and training and provide extensive and sustained mentoring in both research and clinical work throughout the program.

SECTION IV

POLICIES

COAMFTE Standards Version 12.5

The Texas Tech University Couple, Marriage, and Family Therapy Program adheres to the COAMFTE Accreditation Standards, Version 12.5 set forth by the Commission on Accreditation for Marriage and Family Therapy Education. All accredited programs are expected to meet or exceed the standards through their particular period of accreditation. These accreditation standards can be viewed online at [COAMFTE](#) by all registered AAMFT members or through obtaining a copy in the Program Directors' office.

Texas Tech University
Couple, Marriage, and Family Therapy Program

Confidentiality in Supervision and Training

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

Section 4.7 of the AAMFT Code of Ethical Principles defines the limits of confidentiality for supervisees. The Texas Tech University Couple, Marriage, and Family Therapy Program has a clear responsibility to protect clients under the care of student therapists from unethical or incompetent practices ([Code of Ethics](#)). We have an additional responsibility to Texas Tech University to protect the integrity and well-being of the Couple, Marriage, and Family Therapy Program as well as an obligation to the profession of Couple, Marriage, and Family Therapy to prevent unethical and/or incapacitated 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 couple, marriage, and family therapist must be made in consultation with the entire CMFT clinical faculty. Comparative evaluations of students must be made among faculty members. Such information will not be shared with other students. For these reasons, the CMFT clinical faculty must operate as a confidentiality unit meaning that information defined as sensitive will be retained within *the group*. The information gathered in supervision, classes, or individual conversations between students and faculty members, which is relevant to the well-functioning and ongoing evaluation of the student, must be shared among the clinical faculty. Students retain responsibility for those things which they choose to share with faculty members.

Another confidential group consists of the mentors (advanced doctoral students) and the instructors in the supervision course and supervision practicum. These students and this instructor together supervise master's students. As Supervisors in Training, the mentors are learning about and experiencing supervision of more junior therapists. Of necessity, they must individually and collectively discuss master's students with the instructor and their colleagues in the class as part of both of these courses. As with the faculty confidentiality unit, the mentors treat all information discussed as confidential.

With these two exceptions, information related to student's clinical performance will not be shared with other non-clinical faculty or administration. Should a student be required to enter personal therapy and/or cease doing therapy for remedial reasons, other faculty members outside of the CMFT program, including administrators, will be informed only that the actions

are being taken for personal reasons. This will also be CMFT 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.

Successful MFT training and supervision is, in large part, dependent on the quality of relationships between faculty and students. These relationships are built over time. The CMFT faculty are committed to the respect and dignity of students (See Mission Statement and Program Outcomes). We feel that maintaining a faculty confidentiality unit is the most effective way of dealing with students' personal issues in a respectful manner, allowing us to fulfill our obligations to clients, Texas Tech University, and the profession of couple, marriage, and family therapy.

Texas Tech University
Couple, Marriage, and Family Therapy Program

Statement of Human Dignity

The Texas Tech Family Therapy Program is dedicated to the idea that all human beings are of worth and value simply by virtue of their humanity. We believe that all of our professional activity as family therapists and family therapy trainees should reflect this value and worth by according our clients and each other basic human dignity and respect. This is a core value of our training program.

The Texas Tech Family Therapy program respects and encourages the expression of a wide variety of personal values and behavior. As family therapists, we are aware that we will encounter clients, colleagues, and trainees with values and behaviors that are different from our own, perhaps even in opposition to our own. In our role as helping professionals, the accordance of dignity and respect to all humans requires us to help those who seek our expertise, regardless of how we might personally feel about their values, behavior, and lifestyle.

Clearly, part of our role as helping professionals involves responding appropriately to illegal behavior or behavior that endangers others who are not willful, knowledgeable participants. However, it is not our professional role to evaluate and respond to other people's behavior based on our own code of ethics and conduct. It is reflective of the devaluation and disrespect of humans when we behave in a judgmental manner toward those who conduct themselves in a manner that we might not find appropriate for our own moral or ethical code.

Refusal to provide family therapy services to those whose values and behavior are not reflective of our own devalues and denigrates those human beings. This principle also applies to lecturing or moralizing about behavior that is different from our own, but is conducted in a manner that is reflective of the participants' values.

We believe that an underlying concept in dealing with those whose values and behaviors are different from ours should be:

"If I do not respect the values and choices of others who are different,
then how can I possibly expect others to respect me and the values and
choices I have made?"

As a family therapy program, we understand that personal values are very important. We also believe that the core values of the program and profession of marriage and family therapy are important for those who wish to pursue the profession. There may be times when personal values come in conflict with program and professional values. It seems very important for each of us to evaluate personal and professional values in an ongoing manner. If maintaining the program value of basic human dignity cannot be accomplished without compromising an individual's personal values, it is the duty of that person to seriously evaluate their continued participation in the profession. It is also the duty of the program to make a similar evaluation of the wisdom of offering continued training to persons who cannot accept core professional values.

Evaluation of Master's Student Learning Outcomes

The CMFT Master's Program is committed to a recursive process of data collection and evaluation. The process is designed to evaluate student achievement on Student Learning Outcomes (SLOs) through data collection, which in turn informs program structure, content, and curriculum. The program faculty will meet at least once each regular semester to review the relevant data and to make adjustments to the program designed to best meet program goals. The Schedule of Data Collection & Evaluation provides an overview of the timetable.

Portfolio

MS. The Master's Portfolio is designed to reflect the students' body of work and application of knowledge across three broad domains: Clinical, Research, and Advanced Professional and Contextual Development. Details of the Master's Portfolio are described in section 6 (Qualifying Examination) of the manual.

Thesis

MS. The master's thesis is an optional component of the program students may choose to complete. We recommend the thesis option for students interested in pursuing a PhD. The thesis requires students to apply research and clinical/supervision knowledge to expand the body of MFT empirical research. The Master's Thesis is discussed in greater detail in section 12 (Thesis/Dissertation) of the manual.

Practicum Evaluations

Each semester the student is enrolled in clinical practicum, the faculty instructor will complete a Practicum Evaluation. Practicum Evaluations are completed through the Qualtrics online survey service and data is aggregated every time the survey is completed. The Practicum Evaluation provides student feedback and data related to program goals specific to the understanding and application of relational/systemic ethics, understanding and application of relational/systemic theory, understanding and application of knowledge related to contextual factors, and the use of empirical research to inform practice.

Practicum Self Evaluations

Each semester the student is enrolled in clinical practicum, the student will complete a Practicum Self Evaluation. The Practicum Self Evaluation covers the same domains as the Practicum Evaluation completed by faculty.

Externship Stakeholder Survey

At the conclusion of the student's externship, the stakeholder with responsibility for direct supervision of the student will complete the Externship Stakeholder Survey. The survey is completed through the Qualtrics online survey service and data is aggregated every time the survey is completed. The Externship Stakeholder Survey provides student feedback and data related to program goals specific to the understanding and application of relational/systemic ethics, understanding and application of relational/systemic theory, understanding and application of knowledge related to contextual factors, the ability to contribute to the body of MFT knowledge through original research, the ability to provide relational/systemic supervision, and the ability to provide instruction at the undergraduate/graduate level.

Program Exit Evaluation

Each student will complete a Program Exit Evaluation at the end of their final semester of study. The survey is completed through the Qualtrics online survey service and data is aggregated every time the survey is completed. The Program Exit Evaluation is designed to allow students to provide feedback to the program about their educational experience. Specifically, students provide feedback regarding how the program prepared them to conduct high quality relational/systemic research, develop an advanced understanding of relational/systemic clinical intervention, provide relational/systemic supervision, and provide instruction at the collegiate level.

Alumni Survey

The Alumni Survey will be sent to all program alumni during the spring semester of even numbered years. The survey is completed through the Qualtrics online survey service and data is aggregated every time the survey is completed. The survey is designed to provide alumni the opportunity to reflect and give feedback on their experience of how the program prepared them to meet the research, clinical, supervision, and/or teaching requirements of their chosen profession.

MS SCHEDULE OF DATA COLLECTION & EVALUATION								
STUDENT LEARNING OUTCOMES/BENCHMARKS	DATA COLLECTION					EVALUATION		
	Fall	Spring	Sum I	Sum II	Other	Fall	Spring	
SLO #1 – :Students will demonstrate the ability to provide Couple, Marriage, and Family Therapy from a relational/systemic perspective. 90% of students will complete the Clinical Proficiency components as part of a passing Master’s Degree Portfolio within 2 years of entering the program. 80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Evaluation . 80% of students will record scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Self Evaluation . 80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Externship Evaluation . 80% of students will record scores of 4 or greater on the questions 3 and 6 - 7 (clinical) of the Program Exit Evaluation . 80% of students will record scores of 4 or greater on the clinical items in questions 19 (2 – 3 & 6) and 20 (1) of the Alumni Survey .				X		X		
	1st year practicum (2nd Fall semester) 1st year	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X	
	practicum (2nd Fall semester)	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X	
					End of Externship	X		
					Semester of Graduation	X		
					Spring of Even Years			Even Years
SLO #2 – Students will demonstrate the ability to apply appropriate relational/systemic ethics to practice. 80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Evaluation . 80% of students will record scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Self Evaluation . 80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Externship Evaluation . 80% of students will record scores of 4 or greater on question 5 (ethics) of the Program Exit Evaluation . 80% of students will record scores of 4 or greater on the ethics items in question 19 (4 & 5) of the Alumni Survey .						X	X	
	1st year practicum (2nd Fall semester) 1st year	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X	
	practicum (2nd Fall semester)	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X	
					End of Externship	X		
					Semester of Graduation	X		
					Spring of Even Years			Even Years
SLO #3 – Students will demonstrate the ability to operate from a science informed perspective. 90% of students will complete the Research and Scholarship Proficiency components as part of a passing Master’s Degree Portfolio within 3 years of entering the program. 80% of students will receive scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Evaluation . 80% of students will record scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Self Evaluation . 80% of students will record scores of 4 or greater on questions 8 - 11 (research) of the Program Exit Evaluation . 80% of students will record scores of 4 or greater on the research/empirical validation items in questions 19 (1, 6) and 20 (1) of the Alumni Survey .				X		X		
	1st year practicum (2nd Fall semester) 1st year	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X	
	practicum (2nd Fall semester)	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X	
					Semester of Graduation	X		
					Spring of Even Years			Even Years

<p>SLO #4 – Students will demonstrate their understanding of advanced professional and contextual development with relational/systemic clinical intervention.</p> <p>90% of students will complete the Advanced Professional and Contextual Development components as part of a passing Master’s Degree Portfolio within 2 years of entering the program.</p> <p>80% of students will receive scores of 4 or greater on the items included in question 11 (advanced professional development) of the Practicum Evaluation.</p> <p>80% of students will record scores of 4 or greater on the items included in question 11 (advanced professional development) of the Practicum Self Evaluation.</p> <p>80% of students will record scores of 4 or greater on questions 12 - 14 (advanced professional development) of the Program Exit Evaluation.</p> <p>80% of students will record scores of 4 or greater on the advanced professional development item in questions 20 (2) of the Alumni Survey.</p>	<p>X</p> <p>1st year practicum (2nd Fall semester) 1st year practicum 1st year practicum 1st year practicum Additional Practicum as Needed</p> <p>1st year practicum (2nd Fall semester) 1st year practicum 1st year practicum 1st year practicum Additional Practicum as Needed</p> <p>Semester of Graduation</p> <p>Spring of Even Years</p>	<p>X</p> <p>X X</p> <p>X X</p> <p>X</p> <p>Even Years</p>
<p>SLO #5 – Students will demonstrate understanding of the intersection of contextual factors (Ethnicity, Gender, Sexual Orientation, Socio-Economic Status, etc.) and the application of research and clinical intervention central to CMFT.</p> <p>80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Evaluation.</p> <p>80% of students will record scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Self Evaluation.</p> <p>80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Externship Evaluation.</p>	<p>1st year practicum (2nd Fall semester) 1st year practicum 1st year practicum 1st year practicum Additional Practicum as Needed</p> <p>1st year practicum (2nd Fall semester) 1st year practicum 1st year practicum 1st year practicum Additional Practicum as Needed</p> <p>End of Externship</p>	<p>X X</p> <p>X X</p> <p>X</p>
<p>Assessment of fiscal/physical resource sufficiency</p> <p>The department and program will have sufficient fiscal resources to maintain a minimum of six full-time CMFT faculty lines.</p> <p>80% of students will score 4 or greater on the fiscal/physical resource items included on the End of Semester Practicum Self Evaluation.</p> <p>80% of students will score 4 or greater on the fiscal/physical resource items included on the Program Exit Evaluation.</p> <p>80% of faculty will score 4 or greater on the fiscal/physical resource items included on the End of Semester Practicum Evaluation.</p> <p>80% of faculty will score 4 or greater on the fiscal/physical resource items included on the Program Director Evaluation.</p> <p>Annual Reviews with students</p> <p>SACMFT Representatives attend CMFT Faculty Meeting</p> <p>Faculty Meeting Review and Discussion of Resources</p>	<p>X X X X</p> <p>Semester of Graduation</p> <p>X X X X</p> <p>X</p> <p>1st year MS students</p> <p>X</p> <p>Concurrent with review of student learning outcomes</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>

Assessment of technological resource sufficiency					
80% of students will score 4 or greater on the technological resource items included on the End of Semester Practicum Self Evaluation.	X	X	X	X	X
80% of students will score 4 or greater on the technological resource items included on the Program Exit Evaluation.				Semester of Graduation	X
80% of faculty will score 4 or greater on the technological resource items included on the End of Semester Practicum Evaluation.	X	X	X	X	X
80% of faculty will score 4 or greater on the technological resource items included on the Program Director Evaluation.		X			X
Annual Reviews with students		1st year MS students			X
SACMFT Representatives attend CMFT Faculty Meeting	X				X
Faculty Meeting Review and Discussion of Resources				Concurrent with review of student learning outcomes	X
Assessment of instructional and clinical resources					
80% of students will score 4 or greater on the instructional/clinical resource items included on the End of Semester Practicum Self Evaluation.	X	X	X	X	X
80% of students will score 4 or greater on the instructional/clinical resource items included on the Program Exit Evaluation.				Semester of Graduation	X
80% of faculty will score 4 or greater on the instructional/clinical resource items included on the End of Semester Practicum Evaluation.	X	X	X	X	X
80% of faculty will score 4 or greater on the instructional/clinical resource items included on the Program Director Evaluation.		X			X
Annual Reviews with students		1st year MS students			X
SACMFT Representatives attend CMFT Faculty Meeting	X				X
Faculty Meeting Review and Discussion of Resources				Concurrent with review of student learning outcomes	X
Assessment of academic resources and student support services					
80% of students will score 4 or greater on the academic resources and student support services items included on the End of Semester Practicum Self Evaluation.	X	X	X	X	X
80% of students will score 4 or greater on the academic resources and student support services items included on the Program Exit Evaluation.				Semester of Graduation	X

80% of faculty will score 4 or greater on the academic resource items included on the End of Semester Practicum Evaluation.	X	X	X	X	X
80% of faculty will score 4 or greater on the academic resource items included on the Program Director Evaluation.		X			X
Annual Reviews with students		1st year MS students			X
SACMFT Representatives attend CMFT Faculty Meeting	X				X
Faculty Meeting Review and Discussion of Resources				Concurrent with review of student learning outcomes	X
Review of Curriculum and Teaching/Learning Practices					
Occurs at least once a semester (often more frequently) in conjunction with the review of aggregated data for SLOs during faculty meetings					X X
Review of Program Climate					
Annual Review with Students		1st year MS students			X
SACMFT Representatives attend CMFT Faculty Meeting	X	X			X X
Items on question 39 (PhD) or 52(MS) of the Program Exit Evaluation				Semester of Graduation	X
Review of Program Director Effectiveness					
Program Exit Evaluation, questions 34 - 36 (PhD) or 24-26 (MS).				Semester of Graduation	X
Program Director Evaluation (for Faculty)		X			X

Texas Tech CMFT Program Advising Policy

Each student is assigned a temporary CMFT (or ADRS) faculty advisor upon entering the program. This advisor is an intermediary until the permanent advisor, who in most cases will serve as the portfolio advisor and thesis/dissertation committee chair, is chosen. The faculty advisor has several responsibilities and roles for the student throughout the program, and is a primary point of contact for any questions or concerns. The faculty advisor is responsible for official program advising and research mentorship, including program policy, curriculum advising, licensure, internship/externship placement, portfolio, and thesis/dissertation advising. **Faculty advisors are expected to schedule advising meetings with their advisees, and shall arrange no less than two group advisee meetings a semester.** The advisor has the responsibility to communicate concerns about, or from, the student to the faculty, and will relay feedback from the faculty to the student. The advisor will evaluate progress of the student annually to determine the progress of the student in fulfilling the requirements for their degree in the pursuit of their post-graduate goals. Students considering pursuing licensure in other states are strongly encouraged to consult with their advisor and visit the licensure board for the state of interest. The student's advisor will provide guidance on the portfolio and will provide initial approval of the portfolio before it is submitted to the entire CMFT faculty for review. In most cases, the advisor shall serve as a student's chair for their thesis or dissertation committee. In this role, the advisor will be the person to approve the proposal prior to submitting it to the members of the committee and to prepare the final document to be submitted to the committee for the defense. Approval to schedule the defense must be obtained at least 4 weeks prior to the defense, and should be coordinated with the advisor. Except under extraordinary circumstances, for the main article based upon the dissertation submitted for publication, the student is first author and the advisor is second author. Authorship follows APA guidelines.

Student responsibility:

It is important to note that each student also has responsibilities related to the advisee-advisor relationship. Developmentally, it is an appropriate time in graduate school to begin the process of becoming an independent and self-sufficient professional. The student's primary responsibility is to access their resources prior to contacting their advisor. This includes reading through and accessing the program manual as needed. The student also should take the role of a self-advocate, and reach out to their faculty advisor when they have questions/concerns or when they are struggling and may be in need of accommodations. It is the student's responsibility to decide on a permanent advisor. This choice can be made at any point in time and can be changed as needed. If the student is considering changing their faculty advisor, they are encouraged to talk with their advisor about any challenges or concerns prior to switching. The order of contact should be: contact current advisor to communicate desire to switch, contact potential new advisor to determine if they're able to take the student on, and finally

notify in email all parties of the official switch including the appropriate Program Director and the Coordinator (i.e., Lori Minner, Shannon Diaz).

Setting Priorities for Graduate Assistantships

The CMFT Program and the Department of Community, Family, and Addiction Sciences have limited funding for graduate assistantships. Responsible stewardship requires that we use the available resources to support both the teaching and research functions of the department. **Every** CMFT student is required to apply for Fall and Spring, work-study funding and, separately, for Summer work-study to be eligible for an assistantship.

Assistantship assignments will be based on the following criteria.

Criterion 1. Priority for funding will be given to students who accept the total amount of the work-study funding offered. Failure to apply for work-study funding will disqualify the student for an assistantship.

In our experience, almost all CMFT graduate students qualify for some work-study funding. Work-study funds are applied directly to an assistantship, i.e., these funds do not add to the assistantship stipend, but do reduce the department's expense for the assistantship.

However, some students elect to take student loans that reduce the work-study funds available on a dollar for dollar basis. The decision to take a loan instead of work-study means that the department pays a greater share of the assistantship, reducing resources for other students.

Criterion 2. Priority for funding will be given to students in the first two years of the doctoral program who are performing satisfactorily and making steady progress toward finishing the doctorate. If the qualifying doctoral students can be supported in their first two years, assistantships will be made available to outstanding master's students in their second or first years in the program.

The Texas Tech CMFT program has been recognized for its excellence in training doctoral students who are competent in research, therapy, and teaching. Priority is given to doctoral students making steady progress toward finishing the doctoral program on time. Because funds are limited, it may not be possible to support all doctoral students. Doctoral students not performing at the expected level will not be supported. Once the needs of the doctoral program are met, available funding will be targeted to outstanding master's students who are deemed likely to continue into the doctoral program.

Criterion 3. Doctoral students (a) meeting the first two criteria, (b) who are beyond their first year, and (c) who have not taught previously will be considered as having a high priority for teaching assistantships. However, next priority for teaching assistantship funding will be given to those students meeting the first two criteria who have taught previously and who have received satisfactory student and faculty

assessments of their teaching. Teaching assistantships will generally be limited to a maximum of two years.

Supervised teaching is required of all doctoral students, with or without an assistantship. Every effort will be made to provide teaching assistantships to second and third year doctoral students meeting Criteria 1 and 2 and who have not taught previously. When possible, teaching assistantships will be continued for students who have positive faculty and student evaluations of courses they have taught previously. Normally, teaching assistantships will be limited to a maximum of two years.

Criterion 4. Other assistantships will be provided based on the first two criteria and available funding.

- a. Faculty with outside funding or start-up funds will have priority in selecting assistants.**
- b. The Program Directors normally will be provided with a 50% time graduate program assistant across the academic year, including summer.**
- c. Faculty who have had outside funding in one or both of the previous two years will have next priority after funded faculty and the Program Directors.**
- d. If additional funding is available, assistantships will be assigned by the Program Director and Department Chair to reflect the needs of the CMFT program as a whole.**

Obviously, funding from outside the department conserves the department's resources. Faculty with such resources will have priority in selecting students for assistantships (master's or doctoral-level).

Because of the nature of the duties of the Program Directors, it is a high priority that they have a 50%-time graduate assistant to help with recruitment, interviews, correspondence, publicity, record keeping and data analysis, reports, etc.

Often, when funding on a project ends, there are unfinished matters of data collection and analysis that require help from a graduate assistant to complete. Because future funding often depends on publishing and presenting data from previous studies, such assistance increases the chances of future funding.

There are other reasons to provide graduate assistants to faculty—special projects, preparing grant proposals, conducting research/data collection/data analysis, etc. Such assignments are necessarily left to the discretion of the Program Directors and Department Chair.

Texas Tech University
Couple, Marriage, and Family Therapy Program

Grievance and Dismissal Policies and Procedures
for Graduate Students

In almost all cases, it is preferable to handle a grievance informally at the level at which the grievance has arisen. Specifically with regard to students in the CMFT Program, the individual with a 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 appropriate CMFT Program Director who will attempt to help the parties reach a resolution.

If the issue still remains unresolved, the individual with the grievance should initiate a formal grievance process by writing a letter to the CFAS Department Chair outlining the grievance, summarizing previous attempts to reach resolution, and requesting the initiation of the formal grievance procedure. The appeal is on the basis of whether or not appropriate procedures were followed. The goal of the appeals process is not to resolve the issue, but rather, to ensure that the student was treated fairly following established procedures. At this point, the CFAS Department Chair may refer the grievance to the Departmental Executive Committee.

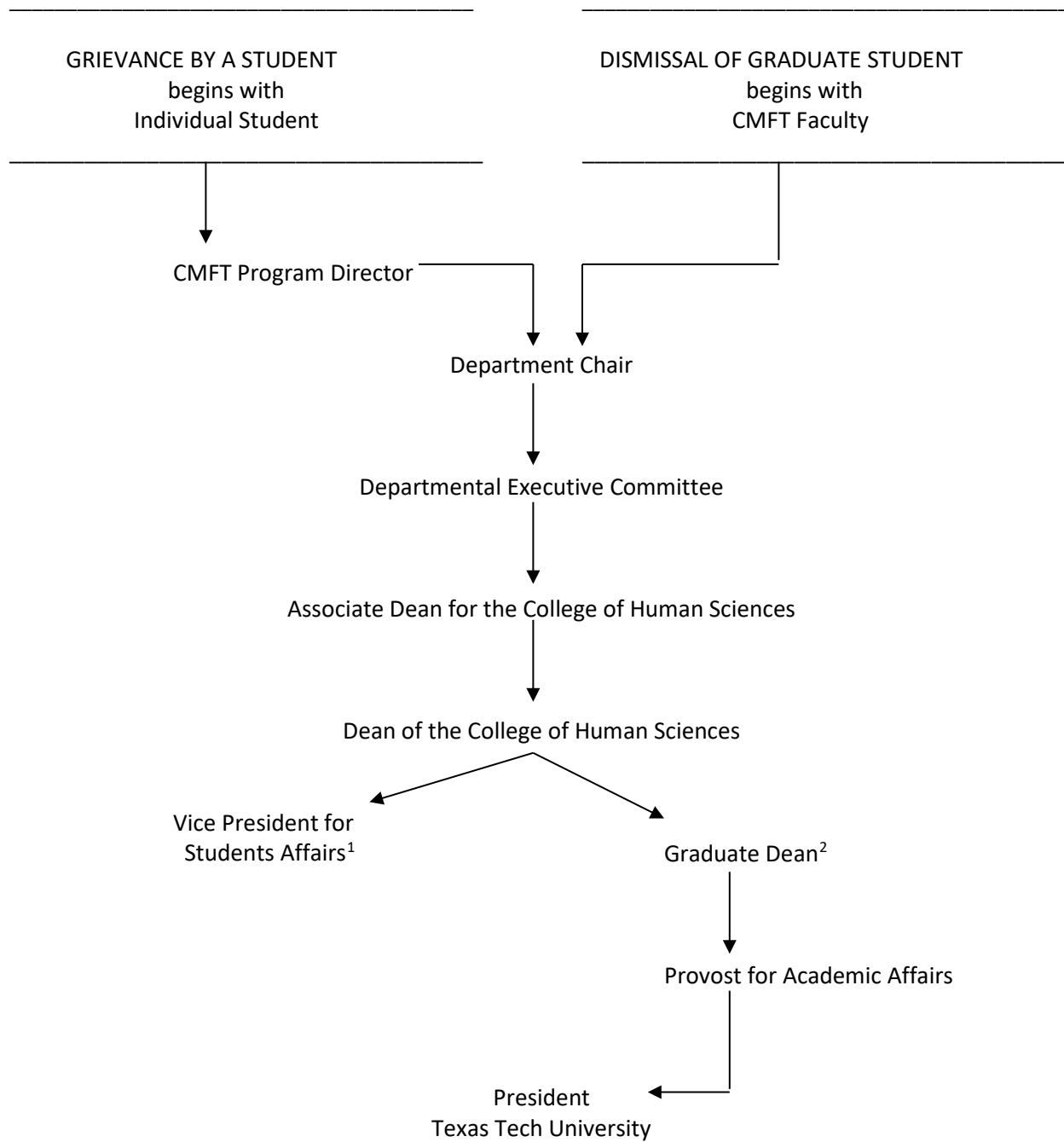
If satisfactory resolution of the grievance is not achieved with the Departmental Executive Committee the individual would next bring the issue to the Associate Dean of Academics, and, if necessary, then to the Dean of the College. The next level of appeal is the Dean of the Graduate School (see Figure 1).

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. According to graduate student handbook, grievances of discrimination must be filed within 30 days of the alleged incident. Formal written appeals of grades must be submitted within 45 days of the next long semester. An electronic copy of the student handbook can be found at <http://www.depts.ttu.edu/dos/handbook/>. At each level, every effort should be made to attempt to resolve the grievance within two weeks.

Many of the established procedures have been developed in compliance with existing legislation and the associated procedures have been articulated in major documents, including the Graduate Catalog, the Graduate School's Manual for Graduate Advisors, Code of Student Affairs, and Operating Systems and Procedures Manual. Among the legislatively-based areas of University compliance are Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972 (45 CFR 86), and Sections 503 and 504 of the Rehabilitation Act of 1973 (all requiring nondiscrimination on the basis of race, color, national origin, religion, sex or handicap) plus the Age Discrimination in Employment Act of 1957 and Section 402 of the Vietnam Era Veterans Readjustment Act of 1974 and Executive Order 11246 as amended (nondiscrimination due to age or toward disabled veterans of Vietnam era). This is not an exhaustive list but each item encompasses a particular pattern of compliance with associated procedures for assuring accountability.

FIGURE 1

APPEALS PROCESS



¹ Grievance involves access to personal records, sex discrimination, sexual harassment, discrimination based on disability.

² Grievance involves performance in the clinical role, publications and co-authorship, grade appeals, appeals for exceptions to program requirements, assignment to and performance in the assistantship role, suspensions, probation, and dismissal.

SPECIFIC AREAS OF CONCERN

I. Performance in the Clinical Role

Students and faculty in the CMFT Program must adhere to the AAMFT Code of Ethical Principles for Marriage and Family Therapists, 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 previously. It is crucial that clinical training occur in a climate that is respectful of 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 areas of needed change 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 the grievance involves unethical behavior on the part of an AAMFT member (Student, Associate, Clinical AAMFT 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.

II. Publications

In conducting research and in assigning authorship to publications, students and faculty in the CMFT Program follow the relevant regulations on conduct of research with human participants as well as the AAMFT Ethical Principles. Assigning authorship credit follows the principle of assigning credit in proportion to each individual's contribution. It is very helpful to negotiate, in advance, responsibilities and authorship issues on joint research projects. A written contract agreed to by all parties prior to beginning a joint research project is highly recommended.

Co-authorship by a faculty member and a student on work done in the course by the student is not automatic. The faculty member's contribution would have to be substantial, going beyond editing or giving comments on papers at the level ordinarily provided by the instructor of a course. Similarly, students who conduct library research or data analyses for a faculty member as part of an assistantship or independent study would not ordinarily receive co-authorship. In the event of substantial contributions, co-authorship by faculty members and students is warranted. For more details refer to the Publications Manual of the American Psychological Association, 5th. Edition, Section 1.03, pp. 6-7.

III. Access to Personal Records

Guidelines governing student access to personal records and the procedures for challenging information in these records are contained in the University records policy

which is printed in the Directory of Classes each semester. The records policy may also be viewed at <http://www.depts.ttu.edu/opmanual/OP01.04.pdf>.

IV. 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 <http://www.depts.ttu.edu/studentresolutioncenter/> or 742-SAFE.

V. Sexual Harassment

Student concerns about sexual harassment which involve faculty or staff should be directed to <http://www.depts.ttu.edu/studentresolutioncenter/> or 742-SAFE.

Harassment incidents among students should be reported to <http://www.depts.ttu.edu/studentresolutioncenter/> or 742-SAFE.

VI. Students with Disabilities

Students wanting to file a complaint based on disability discrimination should start by filing a complaint with the Campus ADA Coordinator located in West Hall 335. The phone number for the office is 806-742-2405. The student can also obtain the email address of the current Campus ADA Coordinator from the Student Disability Services office. The mailing address of the Campus ADA Coordinator is: Box 45007, Lubbock, Texas 79409. The Campus ADA Coordinator will begin an investigation of the allegation within 10 calendar days of receiving the complaint and will issue a ruling within 20 calendar days. Should the investigation require a longer period of time, the complainant will be notified within the 20 calendar days of the anticipated ruling date and the reasons for the need for extended time.

VII. Grade Appeals

Students who wish to appeal a course grade should consult the Office of the Dean of the College of Human Sciences where copies of the grade appeals policy, procedures, and forms are available. Note that grades may be appealed through this process only when there is demonstrable evidence that prejudice, or arbitrary or capricious action on the part of the instructor has influenced the grade. A student who wishes to appeal the results of a comprehensive examination, alleged excessive requirements by an advisor or committee, and other matters relating strictly to graduate education, may appeal under procedures established by the Graduate School. The relevant policy is contained in section 64.07 of the Texas Tech Operating Systems and Procedures Manual.

VIII. Appeals for Exceptions to Program Requirements

If the requirement at issue is a CMFT Program requirement, the student should present a written request to the appropriate CMFT Program Director. The Director will consult

with the CMFT faculty, and respond in writing to the student. If the matter is not resolved at the program level, the student should follow the appeals procedure already outlined, beginning with the Department Chair. Appeals for waivers of particular courses based on previous course work should be made to the program director and the faculty member primarily responsible for the course in accordance with departmental procedures. However, waiver of a required course must be formally approved. If the student is not satisfied, the above grievance procedures apply.

IX. Assignment to and Performance in Assistantship Role

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, they may ask that the matter be presented to the Executive Committee of the department for resolution. Beyond this level, the University's grievance mechanism is to be invoked. The Office of Affirmative Action and Personnel Relations located in Room 163 of the Administration Building should be contacted in such cases.

X. Suspension, Probation, and Dismissal

The University Catalogue specifies the circumstances under which students may be put on probation, suspended, or dismissed for academic reasons. In addition, the CMFT graduate faculty may probate, suspend, or dismiss from the program any student who does not fulfill the academic requirements specified in the graduate student manual handbook or any student whose work over a period of time shows a demonstrable lack of progress toward their degree. Usually such action would be initiated by the CMFT Faculty and communicated in writing to the student, the student's advisory committee, and the Department Chair. The student may request a meeting with the CMFT 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 CMFT Program for other than academic reasons. One of the most difficult tasks facing a 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. With regard to ethical matters, students are required to be familiar with and abide by the AAMFT Code of Ethical Principles for Marriage and Family Therapists, as well as the Texas Tech Code of Student Conduct. Web addresses containing these codes are:

https://www.aamft.org/Legal_Ethics/Code_of_Ethics.aspx and

https://www.depts.ttu.edu/dos/docs/2021_2022_Handbook/PartISectionA2021.pdf

The professional role is a decidedly sensitive one. Responsibility must be assumed by the CMFT faculty to assure that those who might pose serious risks to clients and the standards of the profession (due to emotional instability or questionable ethical

standards) 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 adjustments via feedback provided in day-to-day supervision and instruction. Accordingly, when such problems occur, the CMFT faculty convenes to specify its concern 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 re-evaluation 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 they are regarded as unsuitable for this particular MFT training program.

The 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, they will reply to these concerns and present their perspectives on the matter. The matter may be arbitrated at the level of the CMFT 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 would be reviewed and, in the absence of sufficient change in the desired direction, measures would be taken to dismiss 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, they may do so, in writing, to the Department Chair. From that point, the appeal procedure follows that already stated.

Usually students who would be dismissed under these circumstances would be dismissed from the graduate program of the department. However, under some circumstances, a dismissal decision may specify that the student retains the right to apply for admission to other graduate programs within the department.

XI. Academic Conduct

Students are expected to hold themselves to high standards of ethical conduct in all phases of their academic work. Students should understand that such actions as plagiarism or cheating, or attempts to do so, are unethical and will not be condoned.

PAPERS CANNOT BE SUBMITTED TO FULFILL REQUIREMENTS FOR MORE THAN ONE COURSE. To do so constitutes academic misconduct. This is not meant to deter students from further development of a research or topical area through extension of previous work. Students should consult with the course instructor to be clear on the acceptability of papers that are based on prior coursework or other projects.

Academic misconduct may result in a course grade of F for coursework or, in some circumstances,

dismissal from the program and suspension or dismissal from the University.

Texas Tech University
Couple, Marriage, and Family Therapy Program

Moving from the Master's Program to the Ph.D. Program.

Admission to the CMFT doctoral program following completion of the master's program is not automatic. The CMFT master's program is an opportunity for students and faculty to examine the match between the student's skills, knowledge, and interests and the Texas Tech CMFT program. Master's-level CMFT students who are interested in entering the TTU CMFT doctoral-level program must reapply for the Ph.D. in CMFT.

Students who successfully complete the master's program and are interested in entering the CMFT doctoral program are required to submit a complete application to the program. They do not have to pay another fee, submit transcripts, or take the GRE. If they are admitted, they send a change of level of study form (attached) to the Graduate School. The Graduate School sends the Program Director a form asking for program approval. Following reclassification as a doctoral student, students must complete a plan of study form for the doctoral degree and have it approved by the Program Director.

NOTE: For any communication or correspondence with the Graduate School, the Program Director is the Graduate Advisor for CMFT. That is, any form requiring the signature of the "Graduate Advisor" must be signed by the Program Director, not your advisor.

RESIDENCY STATEMENT

A graduate student attending Texas Tech must pay tuition and fees every semester until the degree is completed. There is a big differential between in-state and out-of-state tuition. Texas residents pay in-state tuition. Graduate students who are not Texas residents when they apply for graduate school pay tuition at the in-state rate if they have at least a \$1000 scholarship or fellowship from the University for that academic year. A scholarship or fellowship allows students to pay in-state tuition for every semester that year they are enrolled, including summer. A half-time graduate assistantship also allows students to pay at the in-state rate for the semester they are actually an assistant. For each term (Fall, Spring, Summer I, Summer II), students with no scholarship must pay out-of-state tuition if they do not have a half-time assistantship for that term.

Most out-of-state graduate students in the CFAS Department have paid tuition at the in-state rate because they have had scholarships and/or assistantships.

Some students pay in-state tuition because they decide to become permanent residents of Texas. If a student has moved to Texas for the purpose of attending school, the student can apply to be re-classified to in-state for tuition purposes if (a) the student is employed full-time for at least 12 months and in school no more than part-time during this period, (b) the student has other evidence of full-time residence status such as car license plates, driver's license, buying a home, and local bank account, and (c) the student intends to remain in Texas to work after the degree is completed. A spouse's residence status does not affect the student's status. Thus, a student could be out-of-state for tuition purposes even though the spouse has worked full-time for 12 months and is considered a Texas resident.

There is an Admissions Evaluator in the Graduate School who can discuss the residency status of an individual student and determines whether or not a graduate student may be re-classified from out-of-state to in-state based on a Residence Questionnaire.

Texas Tech University
Graduate Programs in Couple, Marriage, and Family Therapy

Retention and Completion of Your Degree

Couple, Marriage, and Family Therapists, in their roles as clinicians, supervisors, researchers, and academics have a great deal of influence in the lives of clients, supervisees, and students. As a student in the program, you are expected to be mindful of your influence, hold yourself to a high standards of conduct, and maintain a high level of performance in areas including, but not limited to, academics, ethics, clinical performance, professionalism, and collegiality.

Academics

Students are expected to be invested in their academic coursework and to be active participants in the learning process. The TTU CMFT Program requires that all graduate students earn a final letter grade of A or B in all **required** master's and doctoral coursework in order to satisfy the CMFT program graduate degree plan requirements. Final course grades of C or lower will not be accepted or applied to your degree plan. Any course in which a final grade of C or lower is earned must be repeated until a grade of A or B is achieved. An alternative course may be substituted if the required course will not be offered within a reasonable timeframe. Any substitutions must be pre-approved by the appropriate CMFT Program Director; certain specialized courses may not have any acceptable substitutions. In such instances, the student must wait until the required course is offered again within the program or department. Students that demonstrate a pattern of difficulty meeting the grade standard will meet with the appropriate program director and program faculty to develop a remediation plan. If the implementation of the remediation plan is insufficient to correct the problem, the student may be placed on academic probation or dismissed from the program.

Ethics

Students are expected to conduct themselves in their clinical work and in their general conduct according to ethical and legal guidelines as outlined in Texas law and the AAMFT code of ethics. Due to the sensitivity of the professional role of a marriage and family therapist, supervisor, researcher or instructor, ethical conduct is taken very seriously. As determined by the faculty, students found to have engaged in or to be engaging in ethical misconduct in their clinical work or in other areas such as cheating in coursework, misrepresenting facts in clinical paperwork or in communication with faculty, or engaging in other ethically questionable conduct may be subject to corrective measures. Examples of corrective measures include, but are not limited to, implementation of a remediation plan, receiving a failing grade, removal from cases and all activity in the clinic, removal from external placements, and dismissal from the program.

Clinical Performance

As a program, we endeavor to train high quality relational systemic clinicians. Sometimes, even academically capable students will face challenges with the clinical application of knowledge. Students are expected to be able to appropriately apply theoretical material in the clinic

setting. This relates to being able to engage clients in therapy, assess existing problems, and design and implement intervention strategies. Students are expected to be familiar with a variety of family therapy theories. A deficiency may exist when a student appears to not be able to apply general tenets of systems theory, apply specific tenets of family therapy theory, or struggles to join effectively with clients as guided by the practicum supervisor. When an area of concern is identified with regard to a student's clinical performance, specific goals and strategies will be implemented in supervision to help the student develop the necessary skills. This is a normal part of the supervision experience. However, if the faculty or site supervisor believes that the problem fits within the category of a severe deficiency and it is not alleviated through initial goal setting, the faculty member will discuss the concern with the entire CMFT faculty.

The faculty will make the determination of when a problem warrants the implementation of a remediation plan. If it is determined that a remediation plan is required, the student will meet with the program director and program faculty as appropriate. The student and faculty member(s) will strategize and contract for specific steps the student can take to resolve this deficiency and decide on a time schedule for accomplishing this. The remediation plan will be finalized in writing with a copy given to the student and a copy to remain in the student's file. If the student satisfactorily resolves the severe deficiency, they will receive a letter notifying them of such with a copy placed in their file and copies for all members of the CMFT faculty.

If the student still does not follow the remediation plan or the problem is not resolved, the student may be dismissed from the program. They will meet with the CMFT faculty to discuss the situation, and if dismissed from the program will receive a letter from the Program Coordinator notifying them of dismissal. Copies of the letter will also be placed in the student's file. Counseling a student out of the program is a difficult situation for both faculty and students. Where possible, faculty will work with those students who exhibit severe deficiencies in an effort to assist them in correcting the problems. Where remedial action on the part of the student is not deemed feasible such as in cases, including, but not limited to, ethical misconduct or emotional instability, the student may be dismissed from the program. In such cases the student will be given specific feedback about the reasons for their dismissal. The members of the CMFT faculty remain committed to students' growth and are invested in the success of all students in the program. As such we will make every effort to help students address any deficiencies in a way that will allow students to benefit fully from the training and to reach their potential as therapists.

Professionalism

Students are expected to consistently interact in their work with faculty, site supervisors, and other students in appropriate ways. Students are expected to behave in professional fashion, taking care to discuss cases in confidential and sensitive ways, approaching colleagues with respect, and responding appropriately to feedback given by faculty and site supervisors. When a student disagrees with the feedback of a faculty or site supervisor, the student is expected to discuss this with that person and not passively dismiss it or discuss it as a problem with other

students and faculty. Similarly, students are expected to be sensitive when giving feedback to colleagues, recognizing when their advice may be ill timed or inappropriate to the situation.

We encourage the free expression and discussion of ideas in an environment that is supportive of diversity of experience and perspectives. While we would never want to encourage an environment where any point of view is suppressed, we expect students and faculty to be able to engage in discussion, debate, or disagreement while maintaining respect for all involved.

Students who are disruptive to the mission and goals of the program due to unprofessional behavior will be asked to meet with the program director and program faculty as appropriate. The student and faculty member(s) will strategize and contract for specific steps the student can take to resolve this deficiency and decide on a time schedule for accomplishing this. The remediation plan will be finalized in writing with a copy given to the student and a copy to remain in the student's file. If the student satisfactorily resolves the problem, they will receive a letter notifying them of such with a copy placed in their file and copies for all members of the CMFT faculty.

If the student still does not follow the remediation plan or the problem is not resolved, the student may be dismissed from the program. They will meet with the CMFT faculty to discuss the situation, and if dismissed from the program will receive a letter from the Program Coordinator notifying them of dismissal. Copies of the letter will also be placed in the student's file. Counseling a student out of the program is a difficult situation for both faculty and students. Where possible, faculty will work with those students who exhibit severe deficiencies in an effort to assist them in correcting the problems. Where remedial action on the part of the student is not deemed feasible such as in cases, including, but not limited to, ethical misconduct or emotional instability, the student may be dismissed from the program. In such cases the student will be given specific feedback about the reasons for their dismissal. The members of the CMFT faculty remain committed to students' growth and are invested in the success of all students in the program. As such we will make every effort to help students address any deficiencies in a way that will allow students to benefit fully from the training and to reach their potential as therapists, supervisors, researchers, and instructors.

What should I do if I am struggling?

In our experience, one of the most frequent mistakes made by graduate students is to assume they have to do it all, on their own. The CMFT program faculty are fully invested in your success and want to see you achieve your goals. We will work with you and make any reasonable accommodations we can to ensure your success. Don't wait until it is too late. If you find yourself struggling academically, clinically, professionally, or personally:

- 1) Talk with your advisor to identify steps you may take to address the concerns.
- 2) Talk with the CMFT Program Director to make changes to your plan of study where possible. There is no rule that says you have to finish the program in 3 years, or that you have to take six stats classes in a semester.

- 3) Talk to a therapist. It is surprising how many therapists are resistant to engaging in therapy for themselves. If you need help identifying a therapist, we can provide referrals.
- 4) **DON'T WAIT UNTIL ANY PROBLEM HAS COMPROMISED YOUR ACADEMIC, CLINICAL, OR PROFESSIONAL PERFORMANCE!**

TTU CMFT Graduate Program(s)

Technology Policy

Neither the TTU Graduate School nor the TTU CMFT Graduate Programs have specific technology requirements for students in the program. However, we recommend that students have easy access to:

- A modern computer with internet access
- Word processing software
- Presentation software
- E-mail software
- Calendar software
- Web browsing software

Texas Tech IT Help Central offers guidance for students considering the purchase of computer hardware at <https://www.depts.ttu.edu/ithelpcentral/recommend/>.

Texas Tech University has site license software agreements with a large number of vendors, many of which provide free software to students. We strongly encourage students to take advantage of the site license for Microsoft Office 365. The software is free to students, provides the recommended software, and 1TB of cloud storage. A list of site licensed software and instructions for downloading the software is available at <http://www.depts.ttu.edu/itts/software/>.

All students have access to Advanced Technology Learning Centers (ATLC) or computing labs. The ATLCs provide access to computers with a wide range of productivity and statistical software. Information on the ATLCs can be found at <http://www.depts.ttu.edu/itts/labs/>. Students in the CMFT Graduate Programs also have access to the Human Sciences computer lab and technology services (<http://www.depts.ttu.edu/hs/technologyservices/index.php>) and to computers in the TTU Family Therapy Clinic student room.

Training

The TTU CMFT Graduate Programs do not require specific software or hardware training. However, basic familiarity with word processing, presentation, web browsing, and e-mail software is strongly recommended and will be necessary for successful completion of your degree. Individual courses will require creating written manuscripts and class presentations. Also, the vast majority of official University and CMFT Program communication will take place using e-mail. All TTU students are provided with an individual e-mail account. IT Technology

Support offers a wide variety of technology training to faculty and students at no cost (see <http://www.depts.ttu.edu/itts/training/shortcourses/index.php>)

Students will receive training in the use of the electronic client file management system used by the TTU Family Therapy Clinic and UMC Children's Behavioral Health Clinic during new student orientation and/or during clinical practicum. Training in the use of research/statistical software will take place as part of your required courses.

TTU CMFT Graduate Programs Program Governance

The faculty of the CMFT Graduate Programs are dedicated to a model of program governance that is collaborative where possible and honors the voices of all the program faculty and students. In almost all cases, decisions about program governance are made through program faculty consensus, with input from students and Communities of Interest.

Program Director: The CMFT Program Directors (MS, PhD) are the facilitative lead for the CMFT graduate programs and point of contact for the respective programs, clinical, or faculty related concerns. If you have a concern or suggestion, you can always bring it to the program director directly. The responsibilities of the program directors include:

Academic Program Directors

- The CMFT Program Directors serve in 12-month administrative roles, providing year-round program oversight and direction.
- Coordinate weekly faculty meetings (fall, spring semesters) addressing issues relative to the CMFT programs.
- Coordinate admissions process for doctoral and master's applicants to the graduate programs.
- Receive and distribute messages to students and faculty related to position openings, internships, training opportunities, Program Bulletins, and other pressing matters.
- Meet with students from both Master's and Doctoral programs to address and resolve issues related to program of study, cohort concerns, qualifying exams, and so forth.
- Coordinate the grading of qualifying examinations/portfolios.
- Field regular inquiries from prospective graduate students and position applicants (national and international).
- Coordinate management transition issues related to faculty and staff turnover.
- Support all CMFT graduate students and their faculty advisors in coordinating their programs of study, committee formation, internships, and graduation plans.
- Coordinate regular review of program data, resources, and teaching/learning practices.

Department, College, and University Interaction

- Liaison with the CFAS Department Chair
 - Assist with Annual Faculty Reviews
 - Meet as member of the Executive Committee (2x monthly)
- Serve as CMFT liaison with College and Graduate School
- Respond to immediate needs from Department, College, or University
- Works with department chair and CFAS coordinator to manage degree

National and State Interaction

- Participate in AAMFT program director's listserve

- Attend the MFT Doctoral Educator's Summit, or other similar professional conferences within the MFT discipline.
- Lead national and state representation at conferences (including research meetings for Texas association of MFT, program director's meetings at AAMFT, etc.)

Accreditation

- Coordinate continual accreditation of CMFT doctoral and master's programs.
- Correspond with Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) to address ongoing issues related to changes and concerns.
- Coordinate submission of annual reports and reaccreditation site visits.
- Coordinate the response to accreditation concerns with program functioning.
- Coordinate the preparation and submission of annual reports and the Self Study.

Business Management

- Supervise and work with the Lead Processor – CMFT Staff for the following:
 - Coordinate all course content and sequencing.
 - Coordinate recruitment, admissions, and retention efforts.
 - Maintain the program web page.
 - Coordinate the tracking of accreditation related data.

Family Therapy Clinic (FTC) and Children's Behavioral Health Clinic (CBHC)

- Coordinate with the Clinic Director in the following responsibilities:
 - Coordinate Clinic data base and research projects (including IRB renewal)
 - Manage clinic finances
 - Coordinate supervision of graduate and undergraduate students in the clinic
 - Maintain Clinic data base and address issues related to service delivery
 - Update and enforce FTC and CBHC policies and procedures manual
 - Coordinate community initiatives, (e.g., education groups, aftercare programs, internship placements) outreach, and networking
 - Assists with clinic emergencies and client concerns
 - Maintain compliance with ethical and professional standards of care regarding client confidentiality, record keeping, and professional conduct of student therapists
- Serve as co-director of the Center for Family Systems Research and Intervention.

Clinic Director: The CMFT Clinic director is the primary point of contact for issues related to clinic operation, clinical issues, and internship/externship issues. The Clinic Director works closely with the Program Directors and all Program Faculty to ensure the TTU Family Therapy Clinic and Children's Behavioral Health Clinics function to support the Program Goals and SLOs. Responsibilities of the CMFT Clinic Director include:

Clinical Director of the Family Therapy Clinic and Children's Behavioral Health Clinic

General Operations:

- Maintain FTC and CBHC recording equipment and clinic facilities
- Update and maintain the FTC/CBHC Policies & Procedures Manual
- Train incoming students on clinic policies and recording equipment
- Address student concerns when primary faculty supervisor is unavailable
- Maintain compliance with ethical and professional standards of care regarding client confidentiality, record keeping, and professional conduct of student therapists.

Clinic Finances:

- Submit annual budget revisions (advertising, insurance, student travel, etc.)
- Track clinic income and expenditures
- Deposit clinic fees/process account transfers
- Manage billing for outside contracts (i.e., Aftercare)

Staff Management:

Clinic Coordinator position

- Case assignment/intake scheduling
- Maintain MCSR database and syntax to track student hours
- Organize program special events
- Maintain client records/scanned files

Undergraduate HDFS/CFAS practicum students (~250hrs/semester)

- Monitor therapy rooms/supplies and forms
- Room usage/scheduling documentation
- File scanning and storage
- Special projects as assigned

Database Management:

- Maintain the Titanium software for client file management
- Maintain the clinical assessment/research database
 - Purchase software & measurement licenses/renewals
 - Write and maintain syntax to score assessments
 - Facilitate access to data for student and faculty research
 - Implement outcome-based procedures/data collection

Internship Coordination:

Doctoral Internship Coordination

- Facilitate student documentation/enrollment
- Audit student files for current internship agreements and evaluations
- Visit internship sites periodically to elicit feedback from partners
- Foster relationships with future internship sites

Masters 'Externship' Placement Coordination

- Facilitate student placements
- Process internship documentation
- Maintain contact with site/agency contact
- Provide clinical supervision as assigned

Clinic Development and Community Liaison:

- Public Relations/Marketing/Community outreach and networking

- Participate in health fairs, campus resource events, and other community events
- Update and coordinate outreach and placement of promotional materials
 - Distribute to referral sources and attend local organizational meetings
 - Assess and expand current and new referral sources
- Organize annual continuing education training events
- Generate contracts (corporate, service delivery grants)
 - Expand revenue generating sources

Instructor for CFAS/CMFT

- Teach 2 courses per semester

Assistant Clinic Directors (FTC & CBHC): The assistants to the clinical director have similar responsibilities but operate out of either our campus-based clinic (FTC) or the medical center-based clinic (CBHC). The FTC serves clients and families from Lubbock and surrounding communities, providing in person and some telehealth services. The CBHC primarily serves children and families who have experienced medical challenges or trauma, as well as other behavioral health challenges. In-person and telehealth services are also available in this setting.

FTC Position Description

Qualifications: Master's degree or higher in couples, marriage, and family therapy or related field, TX license eligible, has completed the supervision course, has acquired the majority of the supervision of supervision needed to complete the supervisor credential, and prefer someone with experience teaching in a university setting.

Responsibilities: To provide day to day operations support to the clinical director, assist with training and supervision of master's students, review clinical documentation compliance and hours accrual verification, support clinic coordinator and staff, and teach one class per fall/spring semester and one summer course.

CBHC Position Description

Qualifications: Master's degree or higher in couples, marriage and family therapy or related field, TX license at associate level, but full licensure preferred, is a supervisor candidate or an approved supervisor, has clinical experience with chronic health and medical conditions, and possesses the skills to teach a graduate level practicum or didactic course., as needed.

Responsibilities: To provide day to day operations support to the clinical director, assist with training and supervision of master's students, review clinical documentation compliance and hours accrual verification, support clinic coordinator and staff, manage data tracking and compliance for clinic grant requirements, and teach a graduate course, as needed.

Program Faculty: The program faculty are expected to take active roles in the ongoing governance of the program. Although the Program Directors and Clinical director have specific coordination roles, all the faculty have an equal voice in the governance of the program. Wherever possible, decisions about teaching/learning practices, curriculum, clinical training, supervision, hiring, admissions, allocation of resources, and student issues are made by consensus of the program faculty. Governance responsibilities of the program faculty include:

- Attend and participate in weekly (fall, spring semesters) CMFT faculty meetings.

- Participate in the review of applications for admission, the interview for admissions process, and the selection of students for the program.
- Be available and open to hearing concerns or suggestions from students and communicating the concerns or suggestions to the program faculty as a whole.
- Participate in the grading of qualifying examinations/portfolios.
- Function as an advisor for students in the program.
- Participate in regular review of program goals, outcomes, resources, teaching/learning practices, and curriculum; be an active voice in shaping the direction of the program; and be willing to contribute actual work product (e.g., developing portfolio components, curriculum suggestions, drafting program policies and procedures, etc.)
- Participate in the production of annual reports and self-studies for accreditation.
- Participate in program level committees formed to address program governance, curriculum, accreditation, or other related issues.
- Function professionally in ways that support the programs' goals related to research, clinical training, supervision, teaching, diversity, and addiction sciences.

Program clinical Supervisors: The program clinical supervisors provide MFT relational/systemic supervision within the program. Program Clinical Supervisors include both the program faculty or potentially adjunct faculty who are the instructors of record of CMFT 6395, as well as the doctoral students who are AAMFT Approved Supervisor Candidates providing supplement supervision to the master's students. In accordance with the COAMFTE Standards v12.5, Program Clinical Supervisor qualification includes:

- Demonstration of professional identity as a marriage and family therapists, and
- Demonstration of training in MFT relational/systemic supervision by one of the following:
 - A graduate course in MFT relational/systemic supervision equivalent to three semester-credit hours
 - Postgraduate professional education in MFT relational/supervision of at least 30 clock hours
 - A state established MFT supervisor designation that includes relational/systemic supervision training.
 - Designation as an AAMFT Approved Supervisor Candidate.

Program clinical supervisors have the following responsibilities with the CMFT program:

Faculty operating as Program Clinical Supervisors:

- Program clinical supervisors, specifically faculty who are operating as Program Clinical Supervisors, provide supervision under the teaching of CMFT 6395: Practicum in MFT, which is the course all active student therapists must be enrolled in to see clients.
- Program clinical supervisors teaching CMFT 6395 update the course syllabi prior to the start of the semester.
- Program clinical supervisors provide consistent and regular supervision (i.e., weekly) to the student therapists enrolled in CMFT 6395, including individual supervision (one or two student therapists), and group supervision (no more than 8 student therapists), as well as live supervision, case note supervision (e.g., the review of recorded sessions, and case records) in accordance with the AAMFT COAMFTE.
- The Program clinical Supervisor is responsible for all cases seen by the student therapists under their supervision.

- Sign the Monthly Case Supervisor Report (MCSR) for all student therapists, each month.
- Complete regular review of the student therapists' client files.
- Evaluate student therapists' development as MFTs and complete the End of Semester Practicum Evaluations for all student therapists enrolled in their CMFT 6395 course.
- Follow all FTC/CBHC Policies and Procedures, as well as legal and regulatory standards of the state and profession.
- Maintain the highest ethical standard of clinical and supervisory practice in accordance with the AAMFT Code of Ethics (AAMFT, 2015).
- Grade all CMFT 6395 course assignments and submit university grades in compliance with TTU policies.
- Attend the weekly TTU CMFT faculty meetings to receive information about clinic updates and discuss any case or student therapists concerns with the Core Program Faculty.
- Review supervision forms, including Goals of Supervision, Weekly Case Summary, and the MCSRs.
- Work with the doctoral supervisors and the supervisor of supervision to best support student therapist development.

Doctoral Students operating as Program Clinical Supervisors

- Program clinical supervisors, specifically doctoral supervisors operating in the role as Program Clinical Supervisors, provide supplemental supervision to the faculty teaching CMFT 6395.
- Provide weekly individual supervision to their assigned master's student-therapist.
- Provide live supervision at the FTC during alternative nights and on practicum night based on the requirements of CMFT 6397.
- Doctoral students receive regular supervision of supervision from their CMFT 6397/6395 faculty Program Clinical Supervisor, in accordance with program and AAMFT Approved Supervisor Handbook requirements.
- Doctoral students collaborate with the CMFT 6395 course instructor/faculty supervisor to provide information about the student-therapists' progress and report any clinical or student concerns within an appropriate time frame.
- Follow all FTC/CBHC Policies and Procedures, as well as legal and regulatory standards of the state and profession.
- Maintain the highest ethical standard of clinical and supervisory practice in accordance with the AAMFT Code of Ethics (AAMFT, 2015).
- Complete regular review of the student therapists' client files.
- Review supervision forms, including Goals of Supervision, Weekly Case Summary, and the MCSRs.
 - Doctoral Supervisors regularly review the student-therapists' MCSRs to ensure accurate reporting of their doctoral supervision each month.

Students: We value the input of our students and want you to have an active role in the governance of the program. You are always welcome to discuss ideas or concerns with any of the program faculty and should expect them to be responsive. In addition to informal input, there are three formal mechanisms by which you can be directly involved in the governance of the program:

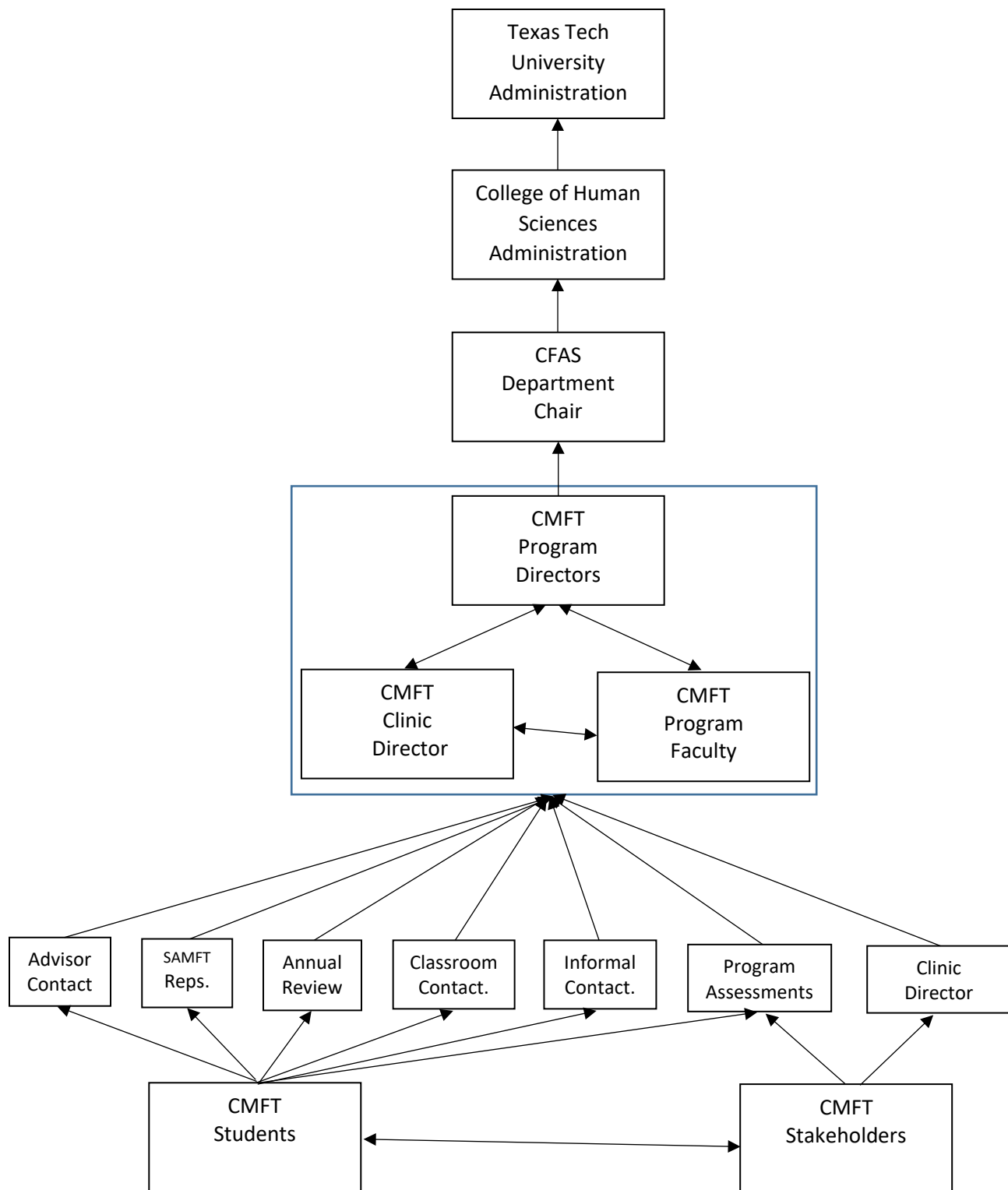
- Take the time to thoughtfully complete the Practicum Self Evaluations, Supervision Practicum Self-Evaluations, Program Exit Evaluation, and Alumni Survey. Your feedback is used to shape

the program and to determine if we are meeting the program goals. We want to hear what you really think!

- Join the Student Association for Marriage and Family Therapy (SAMFT). The student organization helps coordinate student participation in interview days with potential students, student participation in the faculty hiring process, and program social gatherings. SAMFT also elects student representatives. The student representatives attend at least one faculty meeting a semester during which outcome data is reviewed and functions to share ideas, suggestions, or concerns about the program with the program faculty. They also collect feedback from students each semester and present this to the faculty.
- Offer honest, considered feedback during your annual review. All students participate in the annual review process in which the faculty evaluate your progress in the program. However, the annual review is also intended as an opportunity for you to give feedback to program faculty about your experience in the program. We want to hear your ideas, concerns, and suggestions for how the program can be better. Some things we will ask about are whether the physical, technological, and instructional resources are sufficient for you to meet program goals. We will also ask about whether the teaching/learning practices and curriculum of the program are helping you to meet the program goals.

Communities of Interest: We value the input of our Communities of Interest and want their input to influence the governance of the program. We maintain informal dialogue with all of our Communities of Interest and welcome their feedback and suggestions. In addition to informal feedback, a formal data collection process exists:

1. **Community Clinical Training Sites/Doctoral Internship Placement Sites** are regularly asked to complete the Internship/Stakeholder Evaluation. The survey has two components. The first portion of the survey requests information on student intern/extern performance specifically related to program goals and SLOs. The second portion of the survey requests more general feedback about the program and the relationship between the program and the Community of Interest. Data from the surveys is used as part of our assessment plan to evaluate program goals, curriculum, and teaching learning practices.
2. **Students and Program Graduates.** Data is collected from students using the Practicum Self-Evaluation, Supervision Practicum Self Evaluation, and Program Exit Evaluation. Data is collected from graduates using the Alumni Survey. The surveys collect data related to program SLOs, available resources, and program climate.
3. **Program Faculty.** Data is collected from Program Faculty using the Practicum Evaluation, Supervision Practicum Evaluation, and Program Director Evaluation. The evaluations collect data related to the program SLOs, resources, program climate, and program director effectiveness.



Evaluation of the Sufficiency of Faculty & Supervisors

The TTU CMFT program in alignment with the COAMFTE Standards v12.5 demonstrate sufficiency of core faculty by maintaining a core faculty-to-student ratio not to exceed 1:15 (COAMFTE, 2021). In addition to utilizing the COAMFTE sufficiency ration, throughout each academic term the program directors seek feedback and observations from faculty and students pertaining to the sufficiency of faculty resources. Faculty are engaged in this process through deliberations at CMFT faculty meetings held weekly during each long semester (fall, spring). A comprehensive deliberation of faculty and supervisor sufficiency is completed on an annual basis in the context of a faculty meeting during the Spring academic semester with emphasis on overall program performance and development. Students are engaged in this process through direct interaction with the program director, core faculty members, and via their deliberations within the context of the TTU student association for marriage and family therapy (SAMFT), through the annual review process, and through feedback provided on Practicum, Supervision, and Program Exit evaluations. The available data is utilized by the program faculty in their process of collaborating with our departmental chair, college dean, the graduate school, and higher administration while determining faculty performance and sufficiency in light of the program mission, goals, and requirements for each entity within which the CMFT program is housed.

Assessment of faculty sufficiency entails several factors that can roughly be categorized within five domains:

- 1) course coverage - the preponderance (at least 80%) of CMFT courses will be developed and delivered by core CMFT faculty without requiring a teaching load beyond the departmental requirement for any of the core CMFT faculty.
- 2) accessibility to students - students will have direct, live, and regular (face-to-face contact with faculty at least weekly throughout the course of studies) access to faculty within the context of didactic instruction, research team work, clinical / supervision and other mentoring experiences, and informal interactions in the form of office meetings and social functions.
- 3) committee assignments - there are a sufficient number of faculty to complete the committee allotment necessary for each aspect of student oversight including: dissertation, thesis, portfolio/qualifying examinations, advisory, and mentoring.
- 4) the collective knowledge/skills among the faculty cohort - expertise by the faculty within each of the core content domains relevant to the program's mission and goals will be sufficient to provide for the educational and developmental needs of the students. The sufficiency of knowledge by the faculty will be demonstrated by the items detailed in the Program Governance Statement.
- 5) Ability to meet Program Goals and achieve the associated SLOs or demonstrate improvement when deficits are identified.

Supervisor Sufficiency

The TTU CMFT MS Program is designed so that all clinical supervision is provided by CMFT program faculty. On rare occasion, for example faculty turn over, it may be necessary for a qualified member of the ADRS faculty or a qualified adjunct faculty to provide clinical supervision. However, the supervisor role is distinct from that of classroom instructor/faculty. As such, all clinical supervisors, whether CMFT faculty, department faculty, or adjunct, must be program clinical supervisors who meet the following qualifications:

- Demonstrated professional identity as a marriage and family therapist
- AAMFT Approved Supervisor or Supervisor Candidate under appropriate supervision of supervision and/or a state established MFT supervisor designation that includes relational/systemic supervision training.
- CMFT Faculty Supervisor Candidates are expected to be making progress toward AAMFT Approved Supervisor status.
- Primary orientation as a relational/systemic clinician/supervisor.
- Ability to be present for all scheduled clinical practicum and provide a minimum of bi-monthly case note/video supervision.
- Sound knowledge of the AAMFT Code of Ethics.
- Ability to provide direct feedback to the CMFT Faculty.
- Able to complete and distribute all required program assessments.
- Clinical experience providing systemic/relational family therapy.

Sufficiency of clinical supervisors is determined based on the following criteria:

- The program maintains a ratio of clinical supervisors to clinically active students of 1:8 or better.
- There are sufficient supervisors to offer two master's degree clinical practicum, one master's degree externship practicum, and one doctoral clinical practicum each semester (Fall, Spring, Summer, Summer).
- Clinical Practicum have no more than eight enrolled students.
- The clinical supervisors meet the minimum requirements listed above.
- All clinically active master's and doctoral students receive a minimum of one hour of weekly contact with a clinical supervisor.

SECTION V

PLAN OF STUDY

GRADUATE COURSES REQUIRED IN THE CMFT CURRICULUM

COURSES IN MARRIAGE AND FAMILY THERAPY (CMFT)

CMFT 5300. Introduction to Couple, Marriage, and Family Therapy (Foundational Curriculum).

Analyses of and solutions for common problems in couple, marriage, and family therapy practice. Prerequisites: CMFT majors only; consent of instructor.

CMFT 5302. Family Therapy II (Foundational Curriculum).

Prerequisite: Consent of instructor. Examination of post-modern models of family therapy with a focus on constructivist and constructionist theory.

CMFT 5322. Family Systems (Foundational Curriculum).

Application of general systems theory and cybernetics to family systems. Exploration of interactional patterns, information processing, family structure, family belief systems, and family life cycle transitions with an emphasis on change processes.

CMFT 5305. Use of the DSM, Psychopathology, and Assessment in MFT (Foundational Curriculum).

This course will focus on the assessment and diagnosis of clinical and mental health concerns. Specific attention will be given to a relational/systemic framework for understanding diagnosis. However, students will be prepared to understand and apply traditional diagnostic classifications.

CMFT 5330. Lifespan and Human Development (Foundational Curriculum).

Covers biopsychosocial and lifespan models for the assessment and treatment of individual and relational adjustment challenges from a systemic perspective. Child, adolescent, and elderly assessment methods and approaches for clinical intervention will be presented from BPS, human and family development, and health perspectives.

CMFT 5350. Introduction to Relational/Systemic Statistics (Foundational Curriculum).

This course will focus on foundational statistics. The course is required for master's degree students and recommended for doctoral students without a graduate level statistics course.

CMFT 5351. Research Methods in Individual and Family Studies (Foundational Curriculum).

Study of research strategies and techniques relevant to human development, family studies, and marriage and family therapy including experience in conducting research investigations.

CMFT 5370. Issues in Professional Development (Foundational Curriculum).

An examination of the major issues for professionals in marriage and family therapy. Emphasis on ethical standards, professional identity, and private practice issues.

CMFT 6303. Family Therapy III. [Couple/Sex Therapy] (Foundational Curriculum).

Prerequisite: Consent of instructor. An examination of family influences on human sexual functioning, basic interactional assessment, and interventions for common sexual dysfunctions. Intervening in incestuous families and the role of addiction in sexual behavior.

CMFT 6000. Thesis. (Variable credit).

CMFT 6311. Contemporary Directions in CMFT.

An examination of postmodern thought in marriage and family therapy with emphasis on the collaborative and narrative approaches.

CMFT 6320 Dyadic Data Analysis for Clinical Relational/Systemic Research.

Explores the use of dyadic data analysis procedures as related to systems theory and as applicable to relational/systemic clinical work and clinical evaluation.

CMFT 6321 Longitudinal Modeling for Clinical and Systemic Research (Recommended Elective).

Applies advanced statistical analysis and growth curve modeling as related to systems theory and as applicable to clinical work and clinical evaluation.

CMFT 6322. Advanced Research Design.

Advanced research methodology with a special focus on systemic and clinical research design.

CMFT 6323. Qualitative Methods in CMFT.

This course will focus on qualitative research methodologies specifically related to marriage and family therapy research. Students will gain practical experience applying qualitative methods to their research with clinical populations and family therapy topics.

CMFT 6342 Advanced Family Therapy Topics - Grounded Theory (recommended elective)

This course will focus on qualitative grounded theory research methodologies for use with relational/systemic data. Students will gain practical experience applying qualitative methods to their research with clinical populations and family therapy topics.

CMFT 6342 Advanced Family Therapy Topics – Lifespan Human Development (Foundational Curriculum).

This course will focus on individual, couple, and family development across the lifespan from a relational/systemic perspective.

CMFT 6342. Advanced Family Therapy Topics.

Prerequisite: Consent of instructor. Advanced topics in the field of family therapy that may include family therapy with special populations and recent developments in family therapy theory and application.(e.g., **Medical Family Therapy, Relational Teletherapy,**

Mindfulness, Way of Being, Violence & Trauma, Experiential Models & CBT, Grant Writing).

CMFT 6370. Diversity in CMFT (Foundational Curriculum).

An examination of issues of race, ethnicity, and culture as they relate to family therapy. The course is designed to raise awareness and to train multiculturally competent therapists.

CMFT 6395. Practicum in Marriage and Family Therapy.

Supervised experiences designed to prepare the student for involvement in marriage and family therapy and family life education. May be repeated for credit up to 30 hours. Doctoral students must have completed at least 500 face to face clinical contact hours (40% relational) to meet the requirements of the Foundational Curriculum.

CMFT 6396. Supervision of Marriage and Family Therapy.

Prerequisite: Two years marriage and family therapy practicum and consent of instructor. Theory, research, and supervised practicum of family therapy supervision.

CMFT 6397. Supervision Practicum in Marriage and Family Therapy.

Prerequisite: Completion of CMFT 6396 or equivalent and consent of instructor. Course provides structured experience in supervision of marriage and family therapy students.

CMFT 7000. Research. (Variable credit)

CMFT 7395. Internship in Marriage and Family Therapy.

Prerequisite: Permission of Director of Marriage and Family Therapy Program. Full-time supervised internship in an appropriate setting. May be repeated for up to a minimum of 6 hours credit.

CMFT 8000. Doctor's Dissertation. (Variable credit)

**DEPARTMENT OF COMMUNITY, FAMILY, AND ADDICTION SCIENCES
COUPLE, MARRIAGE, AND FAMILY THERAPY PROGRAM**

PLAN OF STUDY/EXAMINATION MEETING

PRELIMINARY EXAMINATION

The purpose of the Plan of Study/Examination meeting is to:

1. Confirm the fit between the student's goals and the goals of the CMFT Program (Recommended, Conditional Continuation, Not Recommended)
2. Approve the Plan of Study, including transfer courses
3. Develop a plan for remedial work if needed
4. Confirm the student's choice of Faculty Advisor
5. Approve any waiver of client contact and supervision hours

Please adhere to the following instructions in preparing materials for your Plan of Study/Examination meeting. The meeting is scheduled with the CMFT Faculty for the Spring Semester of your first year in the Master's or Doctoral Program.

I. In preparation for the formal meeting in the Spring:

1. Submit a current curriculum vitae to the program Business Administrator.
2. Submit a clean version of the program degree plan form, the Graduate School Degree Plan, and the sequence chart to the program Business Administrator.
3. Distribute **Evaluation Forms** to the faculty: Request that every departmental faculty member from whom you have taken CMFT courses fill out the faculty evaluation form and return it directly to the CMFT Program Director (top of form should be filled out by the student before distributing).
4. Complete the **Environmental Support Survey** prior to the meeting and submit it to the Master's or PhD Program Director on the day of your meeting.
5. Decide on an Advisor: You were assigned a temporary advisor when you entered the program. At the time of the Spring Plan of Study/Examination meeting, you must name a faculty member as your advisor. This may be the faculty member originally assigned as a temporary advisor or another CMFT or Addictive Disorders and Recovery Studies (ADRS) full-time graduate faculty member.

TEXAS TECH UNIVERSITY
Department of Community, Family and Addiction Sciences

CMFT PROGRAM

REPORT OF PRELIMINARY EXAMINATION

Ph.D.

MS

Student Name

Date

I. Committee Members Attending:

Douglas Smith (Chairperson)

Carissa D'Aniello

Kristy Soloski

Nicole Piland

Jaclyn Cravens

Stephen Fife

Cameron Brown

II. Strengths:

III. Concerns:

IV. Plan for Remediation:

V. MFT Faculty Action:

Continuation in Program Recommended

Conditional Continuation Recommended (letter attached)

Continuation in Program Not Recommended (letter attached)

VI. Approved:

CMFT Program Director

**Transfer of Client Hours from Work completed
Prior to Doctoral Program**

Student's Name _____

- A. For work completed in COAMFTE – accredited/candidacy Master's program

Name of Program _____

Program Director _____

(Attach verifiable form signed Program Director)

- B. For work completed and supervised by AAMFT Approved Supervisor

Location where therapy completed _____

Approved Supervisor _____

(Attach verification signed by Approved Supervisor)

<u>Client Contact</u>		<u>Supervision</u>	
Individual	_____	Individual-Live	_____
Couple	_____	Individual-Audio	_____
Family	_____	Individual – Video	_____
Group Individual	_____	Individual – Case Note	_____
Group Couple	_____	Group-Live	_____
Group Family	_____	Group-Audio	_____
Total Hours	_____	Group-Video	_____
		Group-Case Note	_____
		Total Hours	_____

Accepted by _____ on _____
(TTU Program Director) (Date)

Entered into TTU computer records by _____ on _____

When complete, place in student's clinical file in MFT Secretary's office with documentation attached.

CMFT MASTER'S CURRICULUM

STUDENTS ENTERING THE PROGRAM (**Even Year Program Entry**) USUAL COURSE SEQUENCE

Master's degree: students usually take 9-12 hours a semester and 6 hours during the combined Summer I and II sessions.

YEAR	FALL	SPRING	SUMMER I	SUMMER II
1st	CMFT 5300 Intro to MFT CMFT 5322 – Family Systems CMFT 5370 – Ethics ADRS 6301 – Couple/Family Dynamics of Addiction	CMFT 5302 – Family Therapy II CMFT 6370 – Diversity Elective Options: (1) ADRS 6315 – Systemic Treatment of Addictions or (2) CMFT 6342 CMFT 6395 - Practicum	Elective as needed CMFT 6395 - Practicum	Elective as needed CMFT 6395 - Practicum

YEAR	FALL	SPRING	SUMMER I	SUMMER II
2nd	CMFT 5305 – DSM CMFT 5330 – Lifespan and Human Development CMFT 5350 – Intro to Stats CMFT 6395 Practicum/externship	CMFT 5351 – Research Methods CMFT 6303 – Family Therapy III (or other MFT) Elective Options: (1) ADRS 6329 – Eating Disorders or (2) CMFT 6342 CMFT 6395 – Practicum/externship	Elective as needed CMFT 6395 – Practicum/ externship	Elective as needed CMFT 6395 – Practicum/ externship

ELECTIVES

Students must take **two courses**.

CMFT MASTER'S CURRICULUM

STUDENTS ENTERING THE PROGRAM (**Odd Year Program Entry**) USUAL COURSE SEQUENCE

Master's degree: students usually take 9-12 hours a semester and 6 hours during the combined Summer I and II sessions.

YEAR	FALL	SPRING	SUMMER I	SUMMER II
1st	CMFT 5300 Intro to MFT CMFT 5322 – Family Systems CMFT 5330 – Lifespan & Human Development CMFT 5370 – Ethics	CMFT 5302 – Family Therapy II CMFT 6370 – Diversity Electives as needed: CMFT 6342; ADRS 6329 – Eating Disorders CMFT 6395 - Practicum	Elective as needed CMFT 6395 - Practicum	Elective as needed CMFT 6395 – Practicum

YEAR	FALL	SPRING	SUMMER I	SUMMER II
2nd	CMFT 5305 – DSM CMFT 5350 – Intro to Stats ADRS 6301 – Couple/Family Dynamics of Addiction CMFT 6395 Practicum/externship	CMFT 5351 – Research Methods CMFT 6303 – Family Therapy III (or other MFT) Electives as needed: CMFT 6342; ADRS 6315 – Systemic Treatment of Addictions CMFT 6395 – Practicum/externship	Elective as needed CMFT 6395 – Practicum/externship	Elective as needed CMFT 6395 – Practicum/externship

ELECTIVES

Students must take **two courses**.

CMFT MASTER'S (Thesis Option) CURRICULUM

STUDENTS ENTERING THE PROGRAM (**Even Year Program Entry**) USUAL COURSE SEQUENCE

Master's degree: students usually take 9-12 hours a semester and 6 hours during the combined Summer I and II sessions.

YEAR	FALL	SPRING	SUMMER I	SUMMER II
1st	CMFT 5300 Intro to MFT CMFT 5322 – Family Systems MFT 5370 – Ethics ADRS 6301 – Couple/Family Dynamics of Addiction	CMFT 5302 – CMFT Theory and Models CMFT 6370 – Diversity Elective Options: (1) ADRS 6315 – Systemic Treatment of Addictions or (2) CMFT 6342 CMFT 6395 - Practicum	Elective as needed CMFT 6395 - Practicum	Elective as needed CMFT 6395 - Practicum

YEAR	FALL	SPRING	SUMMER I	SUMMER II
2nd	CMFT 5305 – DSM CMFT 5330 – Lifespan and Human Development CMFT 5350 – Intro to Stats CMFT 6395 Practicum/externship	CMFT 5351 – Research Methods CMFT 6303 – Family Therapy III (or other MFT) Elective Options: (1) ADRS 6329 – Eating Disorders or (2) CMFT 6342 CMFT 6395 – Practicum/externship	Elective as needed CMFT 6395 – Practicum/externship	Elective as needed CMFT 6395 – Practicum/externship

YEAR	FALL	SPRING
3rd	CMFT 6000 - Thesis	CMFT 6000 - Thesis

ELECTIVES

Students must take **two courses**.

CMFT MASTER'S (Thesis Option) CURRICULUM

STUDENTS ENTERING THE PROGRAM (Odd Year Program Entry) USUAL COURSE SEQUENCE

Master's degree: students usually take 9-12 hours a semester and 6 hours during the combined Summer I and II sessions.

YEAR	FALL	SPRING	SUMMER I	SUMMER II
1st	CMFT 5300 Intro to MFT CMFT 5322 – Family Systems CMFT 5330 – Lifespan and Human Development CMFT 5370 – Ethics	CMFT 5302 – Family Therapy II CMFT 6370 – Diversity Electives as needed: CMFT 6342; ADRS 6329 – Eating Disorders CMFT 6395 - Practicum	Elective as needed CMFT 6395 - Practicum	Elective as needed CMFT 6395 – Practicum

YEAR	FALL	SPRING	SUMMER I	SUMMER II
2nd	CMFT 5305 – DSM CMFT 5350 – Intro to Stats ADRS 6301 – Couple/Family Dynamics of Addiction CMFT 6395 Practicum/externship	CMFT 5351 – Research Methods CMFT 6303 – Family Therapy III (or other MFT) Electives as needed: CMFT 6342; ADRS 6315 – Systemic Treatment of Addictions CMFT 6395 – Practicum/externship	Elective as needed CMFT 6395 – Practicum/externship	Elective as needed CMFT 6395 – Practicum/externship

YEAR	FALL	SPRING
3rd	CMFT 6000 - Thesis	CMFT 6000 - Thesis

ELECTIVES

Students must take **two courses**.

TEXAS TECH UNIVERSITY
DEPARTMENT OF COMMUNITY, FAMILY, and ADDICTION SCIENCES

COUPLE, MARRIAGE, AND FAMILY THERAPY

MASTER'S DEGREE

MASTER'S DEGREE (Leveling requirements for Doctoral Degree)

Transfer hours may be applied toward a graduate degree (Up to 6 hours toward the M.S. and up to 30 hours toward the Ph.D.) on a course-by-course substitution basis upon approval of the CMFT faculty and the Graduate School.

MARRIAGE AND FAMILY THERAPY (21 hours)

	Semester	Hours
CMFT 5322 Family Systems	_____	3
CMFT 5305 DSM	_____	3
CMFT 5302 Family Therapy II	_____	3
CMFT 5370 Issues in Professional Development	_____	3
CMFT 6303 Family Therapy III [Couple/Sex]	_____	3
CMFT 5330 Lifespan	_____	3
CMFT 6370 Diversity	_____	3

ELECTIVES (6 hours)

Clinical or Research Elective	_____	6
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RESEARCH (6 hours)

CMFT 5350 Introduction to Statistics	_____	3
CMFT 5351 Research Methods in CMFT	_____	3

CLINICAL PRACTICE AND PROFESSIONAL DEVELOPMENT (24 hours)

CMFT 5300 Intro to CMFT Practice	_____	3
CMFT 6395 Practicum	_____	21 min

ADDICTIVE DISORDERS AND RECOVER STUDIES (3 hours)

ADRS 6301 Couple and Family Dynamics of Addiction	_____	3
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TOTAL M.S. Hours **60**

TEXAS TECH UNIVERSITY
DEPARTMENT OF COMMUNITY, FAMILY, and ADDICTION SCIENCES

COUPLE, MARRIAGE, AND FAMILY THERAPY

**MASTER'S DEGREE
(THESIS OPTION)**

MASTER'S DEGREE (Leveling requirements for Doctoral Degree)

Transfer hours may be applied toward a graduate degree (Up to 6 hours toward the M.S. and up to 30 hours toward the Ph.D.) on a course-by-course substitution basis upon approval of the CMFT faculty and the Graduate School.

MARRIAGE AND FAMILY THERAPY (21 hours)

	Semester	Hours
CMFT 5322 Family Systems	_____	3
CMFT 5305 DSM	_____	3
CMFT 5302 Family Therapy II	_____	3
CMFT 5370 Issues in Professional Development	_____	3
CMFT 6303 Family Therapy III [Couple/Sex]	_____	3
CMFT 5330 Lifespan	_____	3
CMFT 6370 Diversity	_____	3

ELECTIVES (6 hours)

Clinical or Research Elective	_____	6
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RESEARCH (6 hours)

CMFT 5350 Introduction to Statistics	_____	3
CMFT 5351 Research Methods in CMFT	_____	3

CLINICAL PRACTICE AND PROFESSIONAL DEVELOPMENT (24 hours)

CMFT 5300 Intro to CMFT Practice	_____	3
CMFT 6395 Practicum	_____	21 min

ADDICTIVE DISORDERS AND RECOVER STUDIES (3 hours)

ADRS 6301 Couple and Family Dynamics of Addiction	_____	3
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OTHER PROGRAM REQUIREMENTS (6 hours)

CMFT 6000 Thesis	_____	6
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TOTAL M.S. Hours		66
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CMFT DOCTORAL CURRICULUM

STUDENTS ENTERING THE PROGRAM (**Odd Year Program Entry**) USUAL COURSE SEQUENCE

Doctoral degree: students usually take 9-12 hours a semester and at least 6 hours during the combined Summer I and II sessions. Students entering with a master's degree from an accredited CMFT program may be excused from all or most of the Standard Curriculum (Master's level courses). Course transfers are done on a course-by-course basis, as evaluated and approved by the instructor for the course. When a student is not eligible for exclusion from one or more of the above listed courses, the student will be required to take these classes and some modification may be necessary to follow the course sequence listed below. Students are encouraged to discuss the most appropriate course sequence with their advisor.

YEAR	FALL 2023	SPRING 2024	SUMMER I 2024	SUMMER II 2024
1 st	CMFT 5350 Introductory Statistics (if needed) CMFT 6311 Contemporary Directions in CMFT CMFT 6323 Qualitative Methods CMFT 6395 Practicum	CMFT 6370 Diversity (if needed) CMFT 6395 Practicum CMFT 6342 Grounded Theory ADRS 6342 Multiple Regression CMFT 6342 Elective	CMFT 6395 Practicum CMFT Elective (if needed)	CMFT 6395 Practicum CMFT Elective (if needed)

YEAR	FALL 2024	SPRING 2025	SUMMER I 2025	SUMMER II 2025
2 nd	CMFT 6396 Supervision of CMFT ADRS 6342 SEM CMFT 6397 Supervision Practicum CMFT 7000 (if not taken previously)	CMFT 6322 Advanced Research Design CMFT 6397 Supervision Practicum CMFT 6320 Advanced SEM (Longitudinal/Dyadic) CMFT 6342 Elective	CMFT 6397 (6395) Supervision Practicum CMFT Elective (if needed)	CMFT 6397 (6395) Supervision Practicum CMFT Elective (if needed)

YEAR	FALL 2025	SPRING 2026	SUMMER I 2026	SUMMER II 2026
3 rd	CMFT 8000 Dissertation CMFT 7395 Internship	CMFT 8000 Dissertation CMFT 7395 Internship	CMFT 8000 – Dissertation	CMFT 8000 - Dissertation COMPLETE PH.D.

ELECTIVES: Doctoral students are required to take **THREE ELECTIVES**.

Electives may be selected from graduate level courses that clearly advance the students' knowledge/skills related to advanced clinical practice, clinical supervision, research, college level instruction, grant writing, or advanced clinical theory.

NOTES: CMFT 7395 (Internship) Students should be enrolled during the semester(s) they are working on internship. This may or may not be the fall semester of their third year and will vary by student and internship site.

CMFT 8000 (Dissertation) It is also important to remember that once students register for dissertation credits, they must continue be enrolled for these credits each semester until they graduate.

CMFT DOCTORAL CURRICULUM

STUDENTS ENTERING THE PROGRAM (**Even Year Program Entry**) USUAL COURSE SEQUENCE

Doctoral degree: students usually take 9-12 hours a semester and at least 6 hours during the combined Summer I and II sessions. Students entering with a master's degree from an accredited CMFT program may be excused from all or most of the Standard Curriculum (Masters level courses). Course transfers are done on a course-by-course basis, as evaluated and approved by the instructor for the course. When a student is not eligible for exclusion from one or more of the above listed courses, the student will be required to take these classes and some modification may be necessary to follow the course sequence listed below. Students are encouraged to discuss the most appropriate course sequence with their advisor.

YEAR	FALL 2024	SPRING 2025	SUMMER I 2025	SUMMER II 2025
1 st	CMFT 5350 Introductory Statistics (if needed) or ADRS 6342 SEM CMFT 6396 Supervision of CMFT CMFT 6395 Practicum	CMFT 6370 Diversity (if needed) CMFT 6395 Practicum ADRS 6342 Multiple Regression CMFT 6320 Advanced SEM (Longitudinal/Dyadic) CMFT 6342 Elective	CMFT 6395 Practicum CMFT Elective (if needed)	CMFT 6395 Practicum CMFT Elective (if needed)

YEAR	FALL 2025	SPRING 2026	SUMMER I 2026	SUMMER II 2026
2 nd	CMFT 6311 Contemporary Directions in CMFT ADRS 6342 SEM CMFT 6323 Qualitative Methods CMFT 6397 Supervision Practicum CMFT 7000 (if not taken previously)	CMFT 6322 Advanced Research Design CMFT 6397 Supervision Practicum CMFT 6342 Grounded Theory CMFT 6342 Elective	CMFT 6397 (6395) Sup. Practicum CMFT Elective (if needed)	CMFT 6397 (6395) Sup. Practicum CMFT Elective (if needed)

YEAR	FALL 2026	SPRING 2027	SUMMER I 2027	SUMMER II 2027
3 rd	CMFT 8000 Dissertation CMFT 7395 Internship	CMFT 8000 Dissertation CMFT 7395 Internship	CMFT 8000 – Dissertation	CMFT 8000 - Dissertation COMPLETE PH.D.

ELECTIVES: Doctoral students are required to take **THREE ELECTIVES**.

Electives may be selected from graduate level courses that clearly advance the students' knowledge/skills related to advanced clinical practice, clinical supervision, research, college level instruction, grant writing, or advanced clinical theory.

NOTES : CMFT 7395 (Internship) Students should be enrolled during the semester(s) they are working on internship. This may or may not be the fall semester of their third year and will vary by student and internship site.

CMFT 8000 (Dissertation) It is also important to remember that once students register for dissertation credits, they must continue be enrolled for these credits each semester until they graduate.

Revised: 8/23/22

TEXAS TECH UNIVERSITY
The Graduate School

STATEMENT OF INTENTION TO GRADUATE

The *Statement of Intention to Graduate Form (Secure)* – should be completed online at:

<https://www.depts.ttu.edu/gradschool/private/default.aspx>

IMPORTANT!!! – Pay specific attention to the published deadlines for submitting the intent to graduate. Late submissions will not be accepted and this will delay your graduation. Important deadlines for the Graduate School may be found at:

https://www.depts.ttu.edu/gradschool/academic/degree_plan_deadlines.php

Environmental Support Survey

This survey is to evaluate the environmental supports, including institutional and program resources, that contribute to your success as a student in our program. You should complete this form prior to your Preliminary Examination meeting.

Name: _____

Date: _____

1. The physical resources ((clinic rooms, waiting room, student workroom, computers, etc.) were sufficient to support my academic/clinical activities.

YES ☐ NO ☐ (If you check NO, we will discuss your concerns during the meeting)

2. The technological resources (computers, computer labs, software, Advanced MD, data collection etc.) were sufficient to support my academic/clinical activities.

YES ☐ NO ☐ (If you check NO, we will discuss your concerns during the meeting)

3. The clinical resources (clinic space, advanced MD, clinic support staff, etc.) were sufficient to support my academic/clinical activities.

YES ☐ NO ☐ (If you check NO, we will discuss your concerns during the meeting)

4. The academic resources (library facilities, writing center, technology support, financial aid office, student affairs, etc.) were sufficient to support my academic/clinical activities.

YES ☐ NO ☐ (If you check NO, we will discuss your concerns during the meeting)

5. The student support services (Student Disability Office, counseling services, academic advising, financial aid office, etc.) were sufficient to support my academic/clinical activities.

YES ☐ NO ☐ (If you check NO, we will discuss your concerns during the meeting)

TEXAS TECH UNIVERSITY
DEPARTMENT OF COMMUNITY, FAMILY, and ADDICTION SCIENCES
COUPLE, MARRIAGE, AND FAMILY THERAPY

DOCTORAL DEGREE

Transfer hours may be applied toward a graduate degree (Up to 6 hours toward the M.S. and up to 30 hours toward the Ph.D.) on a course-by-course substitution basis upon approval of the CMFT faculty and the Graduate School.

<u>RESEARCH (15 hours)</u>	<u>Semester</u>	<u>Hours</u>
CMFT 5350 Introductory Statistics (only if needed)	_____	3
ADRS 6342 SEM (required)	_____	3
CMFT 6320 Advanced SEM (Longitudinal/Dyadic)	_____	3
CMFT 6322 Advanced Research Design (required)	_____	3
CMFT 6323 Qualitative Methods (required)	_____	3
CMFT 6342 Grounded Theory	_____	3
ADRS 6342 Multiple Regression	_____	3

Students may take other research courses to complete the non-required elements with approval of the program director. Examples include HDFS 6364 or HDFS 6365

COUPLE, MARRIAGE, AND FAMILY THERAPY (15 hours)

CMFT 6370 Diversity in CMFT (required)*	_____	3
CMFT 6311 Contemporary Directions in CMFT (required)	_____	3
CMFT 6396 Supervision of CMFT (required)	_____	3
CMFT 6342 CMFT Elective	_____	3
CMFT 6342 CMFT Elective	_____	3

ADVANCED PRACTICE COMPONENT (42 hours)

CMFT 6395 Clinical Practicum	_____	12 min.
CMFT 6397 Supervision Practicum	_____	12 min.
CMFT 7395 Internship	_____	6
CMFT 8000 Dissertation	_____	12 min.

ELECTIVE COURSES (3 hours)

Elective	_____	3
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Students should select elective courses which support the advancement of clinical, supervision, research, or college level instructional skills. Electives must be approved by the program director.

OTHER PROGRAM REQUIREMENTS (3 hours)

CMFT 7000 Advisor	_____	3
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TOTAL Ph.D. HOURS **78**

PROJECTED DATE FOR DOCTORAL PORTFOLIO: Fall Spring 20____

PROJECTED DATE FOR GRADUATION: Fall Spring 20____

*CMFT 6370 may be waived for students who have taken a diversity course in their master's program that is approved by faculty. These students will need to find another course to substitute for this class.

SECTION VI
QUALIFYING EXAMINATION

CMFT Program Comprehensive Examination (Master's Portfolio)

I. Purpose of the Comprehensive Examination

The portfolio provides an opportunity for students to document a variety of developmental activities relevant to the broad range of skills and experiences encompassed within their Master's training. The portfolio requirements are designed to reflect students' competencies and accomplishments as they matriculate through the course of their training and consequently provides a record of their emergence as scholars. The portfolio is created throughout the duration of the student's Master's studies. Progress is evaluated annually by the student's advisory committee and serves to determine the progress of the student in fulfilling the requirements for their degree and in the pursuit of their post-graduate goals.

II. Role of Faculty

The full-time members of the CMFT Faculty in residence that semester will serve as the comprehensive examination committee for CMFT students. The portfolio is to represent the student's own work and is to be done independently. It is assumed that the student has received faculty feedback on their work during coursework and supervision. Students should work closely with their faculty advisor to complete the portfolio. The faculty advisor can review the portfolio up to two times, once for content and editorial feedback on the elements of the portfolio, and a second time for a final review to approve the submission of the portfolio to the CMFT Faculty. The Program Director will also have an informational meeting about the Master's portfolio during the Spring semester and as needed based on Masters' students projected completion dates.

Faculty shall treat comprehensive examination results as confidential. One copy of the Master's portfolio will be kept in the CMFT office as part of the program's official records. Students may show other students their own copy of their Master's portfolio after the comprehensive examination process is finished.

In extremely rare cases, the student may request in writing special consideration with respect to involving an outside person in the comprehensive examination process. For example, a student with dyslexia may require the help of a technical (not content) editor. The student will turn in both the edited and unedited versions.

III. Timing of the Comprehensive Examination

Although the faculty advisor will provide approval of submission for the portfolio, it is the responsibility of students to determine when they are ready to submit their portfolio for grading by the CMFT faculty. Typically, students will submit the completed portfolio for evaluation by the committee after the second Spring semester of classes and a minimum of two weeks prior to the deadline for August graduation (usually late June or early July). Submitting the portfolio after the start of Summer I courses will reduce the revision period students receive if their portfolio requires revision and resubmission. Students must have completed most of their clinical hours for the program, and the bulk of their coursework before submitting

the portfolio. Generally, the earliest it is feasible for students to complete their comprehensive examination is the end of the second Spring semester, and the latest is the Fall of the third calendar year of study. Students completing a master's thesis will be eligible to submit their portfolio after they have completed the majority of their coursework, clinical hours for the program, and successfully passed their thesis proposal. The Thesis Proposal form will be submitted to fulfill Part II: Science-informed Perspective, Track A of their portfolio. Once the thesis is completed, the student will add the thesis component.

IV. Criteria for Scoring

Once the Master's portfolio is turned in to the program, the CMFT faculty will independently score the portfolio within two weeks of submission (**not including University holidays or breaks**). Faculty will score the portfolio as passing with honors (4), passing (3), resubmit with changes (2), or fail (1). Following the two-week review period, the CMFT MS Program Director will average the recorded faculty scores. An average score of 3 or better is required to pass. A score of two or greater but less than 3 will require revision and resubmission. A score less than 2 will require the student to make significant changes to the portfolio and resubmit no sooner than the next 16-week academic semester following the original submission date. A score of less than 2 for the second submission may result in dismissal from the program.

V. Format

The portfolio should be submitted in electronic form as a pdf document with bookmarks for each section. Because the portfolio is meant for professional use, students should attend to the aesthetics as well as the content of the portfolio. Include a Title Page, Table of Contents, a copy of your Curriculum Vitae, and Section Title Pages. Be thoughtful about the use of color and design on title pages, etc. Your goal should be to create a document that potential employers will want to review.

ELEMENTS OF THE MASTER'S PORTFOLIO

PART I: CLINICAL PROFICIENCY

PROGRAM GOAL: Students will be qualified to provide Couple, Marriage, and Family Therapy from a relational/systemic perspective.

REQUIRED COMPONENTS:

Theory of Therapy: Students will write a theory of therapy paper describing their therapeutic approach and models incorporation. Elements of the Theory of Therapy Paper include:

- Clearly articulate an advanced understanding of a relational/systemic clinical model or model(s) (epistemological integration should be addressed when multiple models are applied).
- Discuss the epistemological assumptions consistency with core Systems Theory assumptions.
- Discuss the intersection of epistemological assumptions with contextual factors (ethnicity, gender, sexual orientation, SES, etc.)
- Discuss the application of systemic/relational ethics.
- Provide a case study of the application of the model.

Note: Elements of the Theory of Therapy paper will be developed during assignments for CMFT 6395 Clinical Practicum. Prior to submitting the portfolio, the three independent assignments will be combined to one cohesive theory paper.

Required Documentation:

- Append a copy of the Theory of Therapy paper.

Clinical Observation: Student will have a formal observation, should be live, and assessment of a relational case completed by two separate MFT faculty.

Note: This requirement should be completed in conjunction with CMFT 6395 Clinical Practicum, one completed in spring of first year and the second completed fall of year two. Both cases observed should be relational.

Required Documentation:

- Include copies of the observation assessments that indicates clinical competency (see attached observation forms).

PART II: SCIENCE-INFORMED PERSPECTIVE

PROGRAM GOAL: Students will be prepared to operate from a science-informed perspective.

COMPLETE AND DOCUMENT ONE OF THE FOLLOWING TRACKS: Students in the Master's program will complete one of the following tracks to demonstrate their ability to operate from a science-informed perspective. Students will complete either Track A or Track B.

TRACK A: THESIS TRACK REQUIRED COMPONENTS:

Thesis: Student will complete and successfully defend their Thesis Proposal.

Note: See Program Manual for description of requirements for completing the thesis requirements.

Required Documentation:

- Provide a copy of the Thesis title page and abstract.
- Provide a copy of the signed Approval of Thesis form indicating the committee approves the thesis proposal.

Note: After successfully defending the Thesis, the student will resubmit their portfolio with the completed thesis if they submitted their thesis for faculty review with the thesis proposal.

TRACK B: RESEARCH TRACK REQUIRED COMPONENTS:

Data-Based Assessment of Clinical Outcomes: Student will empirically analyze client progress and provide a report.

Note: This requirement will be completed as part of the CMFT 5350: Intro to Family Systems Statistics course or as part of CMFT 6395 Clinical Practicum.

TRACK B: RESEARCH TRACK – DOCUMENT ONE OF THE FOLLOWING COMPONENTS:

Publication: Students will have one peer-reviewed manuscript for publication:

- One article accepted in a peer-reviewed journal by the time of portfolio submission.
- The article should incorporate a relational/systemic/clinical component. This can be a focus on family processes, incorporating dyadic data, or addressing clinical implications.

Note: Open-sourced or paid publications do not meet the publication requirement.

Required Documentation:

- Citations for all publications.

- Append most recent manuscripts (submitted, revised-for-resubmission, published).
- Append all correspondence with journal, including editorial feedback.
- Append evidence that the journal is peer reviewed.

Presentations: The student will present two peer-reviewed works, at least one that is empirical, in a professional capacity at the local/state/national/international level (e.g., TAMFT, AAMFT, NCFR, McKenzie Lectureship, TTU Graduate School Poster/Research Competition, TTU Women's Studies Presentations, Tech NCFR, Big 12 LGBTQIA Summit). The presentations can be in any format (i.e., poster/presentation/research discussion/workshop).

- One presentation must be **an empirical** poster, paper, or workshop.
- The second presentation may be empirical or the application of empirical clinical literature.
- Workshops presentations must involve a minimum of 1 hour of individual effort.
- The two presentations must be on separate topics or material.
- Prior CMFT Faculty advisor approval is required for presentations to count (see Advisor Approval Form).

Required Documentation:

- Advisor Approval Form.
- Citations of all presentations.
- Append a copy of acceptance letters.
- Append presented copies and/or handouts.
- Append a copy of program pages.

Additional Research Training: Student will attend at least one research training event.

Additional research training can be in one or more of the following formats:

- Attendance to a workshop training (e.g., quantitative or qualitative statistical training, neurophysiological training) equivalent to at least a one-day workshop (or 6 hours of training).
 - For example, see <http://www.statscamp.org/>
- Enrollment in an additional statistical or research-based course for credit above their degree plan requirements.

Required Documentation:

- If enrolling in a statistical workshop or training event, student will provide a copy of registration information, certificate of attendance, and description of the event including a description of the topics covered and date/length of training.
- If enrolling in an additional course, student should provide a copy of their syllabus and proof on transcript of their enrollment in the course.

PART III: ADVANCED PROFESSIONAL AND CONTEXTUAL DEVELOPMENT

PROGRAM GOAL: Students will integrate advanced professional and contextual issues into their clinical practice.

REQUIRED COMPONENTS:

Integration of Advanced Professional Issues and Contextual Development in Theory of Therapy: Student will integrate how they approach, assess, and treat advanced clinical issues including suicidal ideation, homicidal ideation, self-harm, eating disorders, substance use, interpersonal violence, child abuse/neglect, or elder abuse/neglect in therapy in their theory of therapy paper.

Note: This requirement will be completed as part of CMFT 6395 Clinical Practicum.

Required Documentation:

- Include in the appended copy of the Theory of Therapy paper.

Complex Case Assignment: Student will be involved with at least one ongoing therapy case with an advanced professional issue (recommended 10 hours of direct therapy or of a team case with the advanced professional issue). Student will complete a complex case assignment based on advanced professional issues and contextual development.

Note: This requirement will be completed as part of CMFT 6395 Clinical Practicum.

Required Documentation:

- Include Complex Case Paper completed in CMFT 6395 Clinical Practicum.

DOCUMENT TWO OF THE FOLLOWING COMPONENTS:

Diversity Excursion or Advocacy in Action: Student will address how power and privilege influence individuals and families from a social location different from their own and how it informs their clinical work.

Note: This requirement will be completed as part of CMFT 6370 Diversity in CMFT.

Required Documentation:

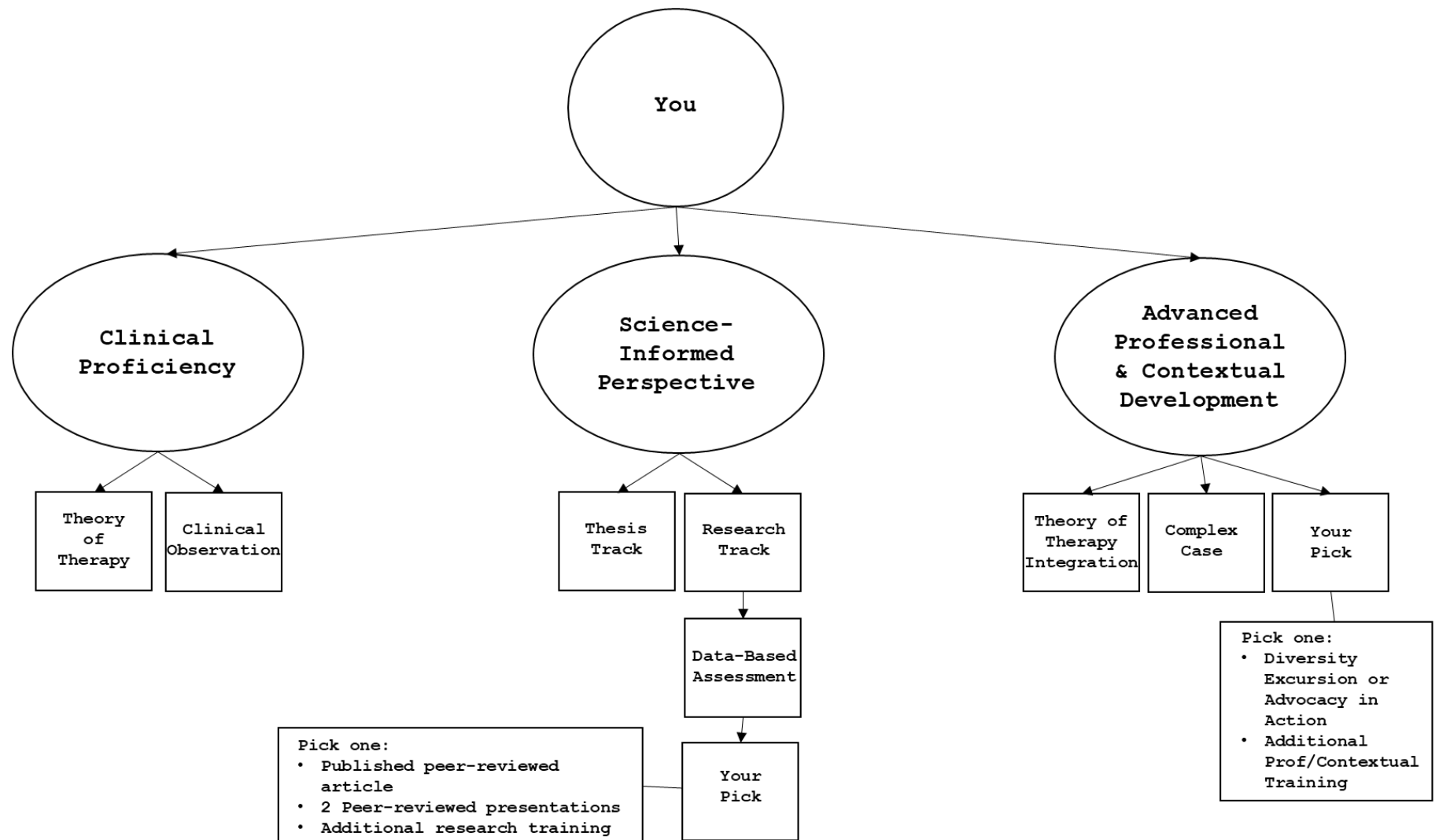
- Include Diversity Excursion Reflection Paper or Advocacy in Action assignment completed in CMFT 6370 Diversity in CMFT.

Additional Professional or Contextual Training:***Additional training can be in one or more of the following formats***

- Attendance to a workshop training on contextual issues (e.g., TTU events, TLPDC trainings, CEU trainings) or additional clinical development equivalent to an additional certification on Advanced Professional Issues (e.g., ASIST, IPV, Financial Counseling with Couples).
 - Trainings should result in a certificate or be equivalent to at least one-day workshops (6 hours of training).
 - For clinical training, students can complete foundational requirements (i.e., level 1 certification) for the portfolio requirements.
- Enrolling in an additional course on advanced issues in the CMFT field above their degree plan requirements.

Required Documentation:

- If enrolling in a clinical training event or workshop, student should provide a copy of registration, certificate of attendance, and a description of the event, including a description of the topics covered.
- If enrolling in an additional course, student should provide a copy of their syllabus and proof on transcript of their enrollment in this course.



MASTER'S PORTFOLIO
Integrated Theory of Therapy Paper Rubric

Paper Sections	Key Questions Addressed
<i>Part I: Theoretical Foundation</i>	
Family Systems Theory	How is family systems theory important in understanding a client system? Include key assumptions of family systems theory, concepts and terms. Describe how family systems theory differs from linear causality models.
Epistemology	What epistemology/theory of knowledge serves as the foundation of your primary model and how you make sense of the world (e.g., Humanism, Attachment Theory, Objectivist, Constructivist, Reductionism, etc.)? Include key assumptions and terms.
Primary Model(s)	Identify the primary assumptions, terms, concepts of your model(s). What model or models of therapy do you most closely identify with? And how is systems theory embedded within your model? (<i>If you identify with more than one model of therapy, in what ways are the models congruent with one another and in what ways do they contrast with each other? How do you integrate the models or in what ways do you diverge from the original theory?</i>)
<i>Model-based Definitions and Terms</i>	Based on your model, what is therapy? what brings people to therapy? And How is the therapeutic relationship established?
<i>Power and Influence of Therapist</i>	What is the role/responsibility/power or influence of the therapist on the client system?
<i>Defining Health, Wellness and Change Processes</i>	How does your model define individual, relational and family health/wellness/functioning or lack thereof? How important are emotions, thoughts, behaviors, insight/self-awareness or action in understanding client problems? Does your model encourage therapists to value one of these elements more than the other or how might these elements be connected? What factors contribute to client change, resolving problems, and/or achieving greater functioning?
<i>Problem Definition, Goals and Interventions</i>	How does your theory of therapy define/identify/assess problems, set/establish goals? What interventions are used to create change?? Who determines when therapy should be terminated? What factors reflect successful completion of therapy?
<i>Part II: Contextual Factors</i>	
Diverse Clients	How does your theory guide your work with different constellations? Presenting problems? Or diverse clients? Marginalized clients? Critique your theories consideration of working with diverse clients. You should speak to gender, power, sexual orientation, culture, ethnicity, and working with persons living with cognitive challenges/limitations?

Advanced Professional Issues	How does your theory guide your work with advanced clinical issues? Students will integrate how they approach, assess, and treat advanced clinical issues such as suicidal ideation, homicidal ideation, self-harm, eating disorders, substance use, interpersonal violence, child abuse/neglect, or elder abuse/neglect in their theory of therapy paper.
Self of the Therapist	What is your social location and how might that benefit or challenge you in the room with certain clients? How do you incorporate the 'use of self' in therapy (i.e., How you use observations/intuition/impressions/hunches in session)? What client interactions/presenting problems/situations have been most challenging for you so far? And why?
<i>Family of Origin</i>	Based on your personal genogram, how does your family of origin inform and influence what you attend to most and possibly avoid in the room with clients? Consider, identify, and describe your role/position in your family of origin, the systemic nature of your FOO (open/closed/rigid/permissive) and how your family experiences have influenced your awareness in the room with clients (describe what might grab your attention most during session or areas which you might inadvertently overlook or become overwhelmed by).
Part III: Relational Case Application Apply your theory of therapy to a relational case by using specific theoretical terms, assumptions, and concepts which are evident in your description of the processes that took place in the therapy room. Avoid simply repeating theoretical content that is previously addressed.	
Case Overview	Identify and describe a clinical couple or family system and include all pertinent de-identified demographic case information; including potential diagnoses, health factors, addiction history, risks issues (e.g., suicidality, homicidality, intimate partner violence, child/elder abuse), and contextual considerations.
Theoretical Application	Provide specific examples of what you did or said in the room, patterns/dynamics exhibited by clients, and the interaction between you and your clients should be included; demonstrating how they are tied to the terms and concepts rooted in your model.
Conclusion and Takeaway	Identify ways your model was ideal and most challenging for use with the client system, what you learned from the case, discuss the role of supervision in your clinical development, and what you would do differently now.

Data-Based Assessment of Clinical Outcomes Description and Rubric

Instructions: As therapists, we often gather information about our clients and their progress in our assessments. It's important that we understand what that information means, and how to analyze that information. It can be a helpful tool to be able indicate the effectiveness of your work, or to understand what factors affect your clients. In private practice, you should use this information to analyze client progress in treatment, and you can even use this information to advertise to clients the overall effectiveness of your work. You will each obtain a copy of the questionnaire given to clients at their intake session, and assessed throughout treatment here at the TTU Family Therapy Clinic. You will identify an outcome from your clients that you are interested in analyzing, and conduct the respective analysis. You will present this empirical analysis of client progress in a report in the form of a Method section of a publishable paper. You will write up a Method section of a paper, that includes a description of the population (your client sample, including age, race, gender, constellation, etc.), describes each measure that you are interested in using, provides a data analysis plan describing what you examined and through what statistical analyses, and presents the results from the analyses. The data analysis plan should describe the statistical analysis you are going to use, to identify the assumptions of that analysis, and to identify how it fits with your research question and measures of interest. The results should be written up in the form of a results section and should include all figures and tables to display results consistent with the analysis you performed. All steps of the analysis should be explored and explained. (Please include with your assignment a print-out of the final results you are reporting)

MFT 5350 Data-Based Assessment of Clinical Outcomes Rubric				
Components	Exceeded Expectations – 9-10 points	Met Expectations – 7-8.9 points	Below Expectations – 5-6.9 points	Deficient – 4.9 points and below
Research Question of Interest – 10 points	Research question meets all the following criteria: <ul style="list-style-type: none">- Identify independent (predictor) and dependent (outcome) variables<ul style="list-style-type: none">o Accurately identify scale of measurement of	Research question is lacking in 1 of the criteria. Notes:	Research question is lacking in 2 of the criteria. Notes:	Research question is lacking in more than 2 of the criteria. Notes:

	<p>each variable being examined</p> <ul style="list-style-type: none"> - Research question includes items or questions from the questionnaire for the TTU Family Therapy Clinic - Research question written in the form of a question, includes null and alternate hypothesis 			
Corresponding Analysis – 10 points	<p>Corresponding analysis meets all the following criteria:</p> <ul style="list-style-type: none"> - Analysis appropriate given the scale of measurement of each variable being examined - Analysis type is best fit with research question - Analysis type takes advantage of the richness of the data available 	<p>Corresponding analysis is lacking in 1 of the criteria. Notes:</p>	<p>Corresponding analysis is lacking in 2 of the criteria. Notes:</p>	<p>Corresponding analysis is lacking in more than 2 of the criteria. Notes:</p>
Description of the sample – 10 points	<p>Description of the population (your caseload that are being included in the analyses) meets all the following criteria:</p> <ul style="list-style-type: none"> - Which participants would you be examining? Subsample of the whole clinic sample? - Describe the process of clients receiving the survey 	<p>Description of the population is lacking in 1 of the criteria. Notes:</p>	<p>Description of the population is lacking in 2 of the criteria. Notes:</p>	<p>Description of the population is lacking in more than 2 of the criteria. Notes:</p>

	<ul style="list-style-type: none"> - Who is taking and responding to the survey? Which session is the survey administered? Who administers the survey? 			
Description of each measure – 10 points	<p>Description of each measure meets all the following criteria:</p> <ul style="list-style-type: none"> - Specify source of the item or scale (primary resource if the Family Therapy Clinic is using a validated measure) - Include an example question to display question wording - Identify answer categories/scale of question - How questions were coded - Identify reliability and validity of scale if measure is validated 	<p>Description of each measure is lacking in 1 of the criteria. Notes:</p>	<p>Description of each measure is lacking in 2 of the criteria. Notes:</p>	<p>Description of each measure is lacking in more than 2 of the criteria. Notes:</p>
Data Analysis Plan – 10 points	<p>Data analysis plan meets all the following criteria:</p> <ul style="list-style-type: none"> - Identify the assumptions of that analysis - Identify how it fits with research question - Identify how it fits with measures of interest - All steps of analysis explored and explained 	<p>Data analysis plan is lacking in 1 of the criteria. Notes:</p>	<p>Data analysis plan is lacking in 2 of the criteria. Notes:</p>	<p>Data analysis plan is lacking in more than 2 of the criteria. Notes:</p>

Results Section – 10 points	<p>Results section meets all of the following criteria:</p> <ul style="list-style-type: none"> - Results are presented following APA standards - Results are accurate to the analysis conducted - All parts of the results are presented - Results are described in a manner consistent with what they indicate 	Results section is lacking in 1 of the criteria. Notes:	Results section is lacking in 2 of the criteria. Notes:	Results section is lacking in more than 2 of the criteria. Notes:
Tables and Figures – 10 points	<p>Tables and figures meets all of the following criteria:</p> <ul style="list-style-type: none"> - Tables and figures are displayed in APA formatting - Tables and figures convey all the pertinent information that should be included - Tables and figures are easy to read and free of grammatical errors/typos 	Results section is lacking in 1 of the criteria. Notes:	Results section is lacking in 2 of the criteria. Notes:	Results section is lacking in more than 2 of the criteria. Notes:

Additional Feedback:

**Presentation for Portfolio
Advisor Approval Form**

Name: _____

Date: _____ Degree: _____

Presentation
Title: _____

Type of
Presentation: _____

Conference or
Organization
Presenting at: _____

Date of
Presentation: _____ Length of
Presentation: _____

Authorship
Order: _____

Narrative of Role(s) and
Contribution(s) to Presentation: _____

Was this presentation
empirically based?

Student
Signature: _____ Date: _____

Advisor
Name: _____

Advisor
Signature: _____ Date: _____

Advisor Comments: _____

Note: Please include this signed form in your portfolio with other presentation materials as required by the portfolio.

Complex Case Paper Description

You will type a brief overview (3 pages max) of a ***couple or family*** you are currently seeing in the clinic. The complex case should focus on either high risk/complex issues (e.g., IPV, self-harm, suicidality, eating disorders, addiction/substance abuse) or advanced professional issues (e.g., presenting issues covered in your CMFT 6342 elective courses, teletherapy, mindfulness, Medical Family Therapy, trauma). The description will include demographic and background information, treatment plan/goals, and examples of how you are applying your systemic/relational model in session. Your paper should include specific examples of how your theory was applied, and model theory-congruent language/terminology. You will include a genogram of the family system and the treatment plan. This assignment is completed in CMFT 6395: Practicum in CMFT.

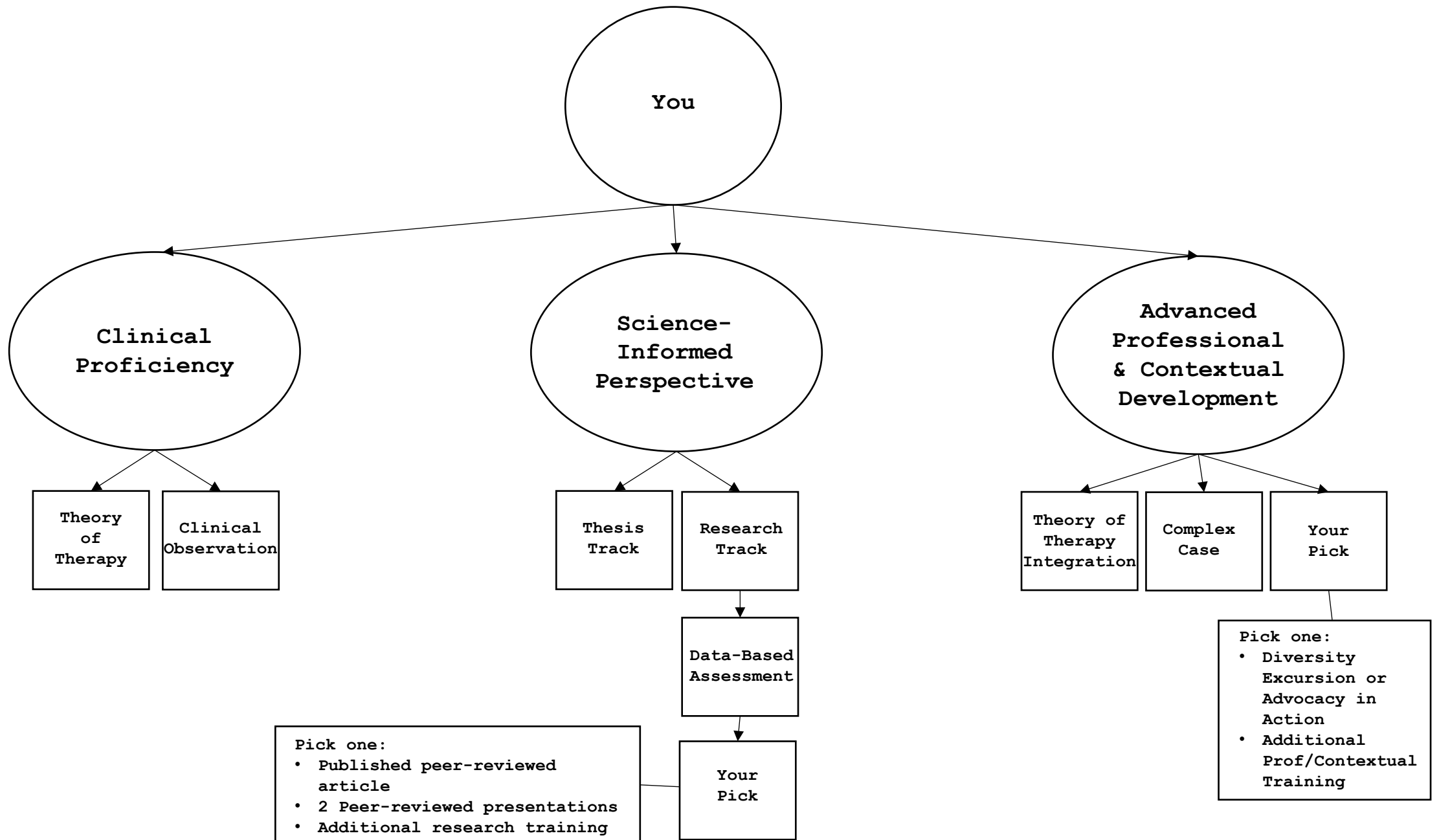
Complex Case Summary Paper Rubric

Students will take turns presenting an existing ***couple or family*** case to the team during the group supervision portion of practicum. Case presentations should include a brief description of the family (ages, role, length of relationship, ethnicity, genogram, and any other essential information), presenting problem, stage in therapy (session number to date), goals, a treatment plan for achieving goals, challenges or issues you would like the team to focus on during your presentation.

A written version of this information will be turned in to the instructor on the day you are scheduled to present, and will be graded according to the criteria described below. Summary papers should be no longer than 3 pages (typed) unless absolutely necessary (quality, not quantity please).

Grading Rubric for Complex Case Assignment:

PAPER	(4 POINTS)
Inclusion of relevant case information and attach a genogram (age, roles, relationship length, ethnicity, abuse history, complex clinical issue history, and other important details)	1 pt. ____
Brief description of presenting problem	.25 pts. ____
Case conceptualization (From the perspective of your theory of therapy) <ul style="list-style-type: none"> Including use of assumptions, terms/constructs, and interventions applied to case 	1.5 pts. ____
Treatment plan / goals/strategy for achieving therapeutic goals <ul style="list-style-type: none"> Use template for treatment plan The Child/Adolescent/Family/or Couple Treatment Planner books are recommended 	1 pts. ____
Technical writing details (stapled, correct grammar and spelling, flow, etc.)	.25 pts. ____
PRESENTATION	(1 POINTS)
Presented case background/overview in organized manner (15-20 min)	.5 pt ____
Provided copy of genogram for peers	.25pt ____
Identified concerns and developed questions to receive feedback on?	.25 pt ____
TOTAL earned:	____ out of 5 TOTAL



MASTER'S PORTFOLIO
Integrated Theory of Therapy Paper Rubric

Paper Sections	Key Questions Addressed
<i>Part I: Theoretical Foundation</i>	
Family Systems Theory	How is family systems theory important in understanding a client system? Include key assumptions of family systems theory, concepts and terms. Describe how family systems theory differs from linear causality models.
Epistemology	What epistemology/theory of knowledge serves as the foundation of your primary model and how you make sense of the world (e.g., Humanism, Attachment Theory, Objectivist, Constructivist, Reductionism, etc.)? Include key assumptions and terms.
Primary Model(s)	Identify the primary assumptions, terms, concepts of your model(s). What model or models of therapy do you most closely identify with? And how is systems theory embedded within your model? <i>(If you identify with more than one model of therapy, in what ways are the models congruent with one another and in what ways do they contrast with each other? How do you integrate the models or in what ways do you diverge from the original theory?)</i>
<i>Model-based Definitions and Terms</i>	Based on your model, what is therapy? what brings people to therapy? And How is the therapeutic relationship established?
<i>Power and Influence of Therapist</i>	What is the role/responsibility/power or influence of the therapist on the client system?
<i>Defining Health, Wellness and Change Processes</i>	How does your model define individual, relational and family health/wellness/functioning or lack thereof? How important are emotions, thoughts, behaviors, insight/self-awareness or action in understanding client problems? Does your model encourage therapists to value one of these elements more than the other or how might these elements be connected? What factors contribute to client change, resolving problems, and/or achieving greater functioning?
<i>Problem Definition, Goals and Interventions</i>	How does your theory of therapy define/identify/assess problems, set/establish goals? What interventions are used to create change?? Who determines when therapy should be terminated? What factors reflect successful completion of therapy?
<i>Part II: Contextual Factors</i>	
Diverse Clients	How does your theory guide your work with different constellations? Presenting problems? Or diverse clients? Marginalized clients? You should speak to gender, power, sexual orientation, culture, ethnicity, and working with persons living

	with cognitive challenges/limitations?
Advanced Professional Issues	How does your theory guide your work with advanced clinical issues? Students will integrate how they approach, assess, and treat advanced clinical issues such as suicidal ideation, homicidal ideation, self-harm, eating disorders, substance use, interpersonal violence, child abuse/neglect, or elder abuse/neglect in their theory of therapy paper.
Self of the Therapist	What is your social location and how might that benefit or challenge you in the room with certain clients? How do you incorporate the 'use of self' in therapy (i.e., How you use observations/intuition/impressions/hunches in session)? What client interactions/presenting problems/situations have been most challenging for you so far? And why?
<i>Family of Origin</i>	Based on your personal genogram, how does your family of origin inform and influence what you attend to most and possibly avoid in the room with clients? Consider, identify, and describe your role/position in your family of origin, the systemic nature of your FOO (open/closed/rigid/permissive) and how your family experiences have influenced your awareness in the room with clients (describe what might grab your attention most during session or areas which you might inadvertently overlook or become overwhelmed by).
Part III: Relational Case Application Apply your theory of therapy to a relational case by using specific theoretical terms, assumptions, and concepts which are evident in your description of the processes that took place in the therapy room. Avoid simply repeating theoretical content that is previously addressed.	
Case Overview	Identify and describe a clinical couple or family system and include all pertinent de-identified demographic case information; including potential diagnoses, health factors, addiction history, risks issues (e.g., suicidality, homicidality, intimate partner violence, child/elder abuse), and contextual considerations.
Theoretical Application	Provide specific examples of what you did or said in the room, patterns/dynamics exhibited by clients, and the interaction between you and your clients should be included; demonstrating how they are tied to the terms and concepts rooted in your model.
Relational/Systemic Ethics	Identify and address relational/systemic ethics relevant to your case; you should include specific citation of AAMFT ethical codes and a description of your actions to manage your ethical responsibilities (e.g., dual relationships, confidentiality, reporting, teletherapy).
Conclusion and Takeaway	Identify ways your model was ideal and most challenging for use with the client system, what you learned from the case, discuss the role of supervision in your clinical development, and what you would do differently now.
Format Guidelines	APA Format (25-page minimum, typed/double spaced/plus 20-25

	references; integrating literature from core courses, and utilizing original publications from primary theorists).
Overall Writing Quality/Flow/Organization	Graduate level writing, which is free of typographical errors, organized with headers and subheadings, appendices and references. Appendices: Therapist Genogram (Appendix A), De-identified Client Genogram (Appendix B), De-identified Client Treatment Plan (Appendix C).

Therapist Name: _____ Date: _____ Session #: _____ Therapy Model: _____
 Observer Name: _____ Client #: _____ Clients Present: _____

0 = Not Observed 1 = Below Expectations 2 = Meets Expectations 3 = Above Expectations

Clinical Observation Form: Therapists' General Clinical Skills and Qualities

Relationship Factors		Item Score
Appropriate Affect and Warmth	Appropriate use of humor to connect with clients: Therapist uses humor with clients at appropriate times.	
	Therapist affect: Therapist appropriately uses affect with their clients. For example, the therapist smiles when greeting clients and at appropriate times during session.	
	Voice tone: Therapist uses a supportive, calm tone.	
Empathy	Reflective statements or empathic understanding of client thoughts and emotions (as evidenced by exchange between therapist and client). For example, Client: "I just feel like he ignores me, and doesn't listen to me" Therapist: "You don't feel heard or appreciated by your partner" Client: "Yes, that's it, I just don't feel appreciated by him"	
Validation	Affirming/legitimizing: Therapist verbalizes that they take the clients' thoughts and feelings seriously. For example, Client: "I think we are just really tired all the time, and that's why we're fighting" Therapist: "Yes, it is more difficult to constructively deal with problems when we are tired."	
Therapist Collaboration	Asking for client opinions and preferences regarding interventions, tasks, and goals. For example, "We've discussed several ways the two of you could spend time together this week – which sounds best to you?"	
	Collaborative language use displayed by the therapist such as "we" and "us". For example, Therapist: "I am confident that all of us are working hard and trying our best to make things a little better."	
	Goal consensus: Therapist checks in to make sure the session is aligned with client goals.	
Comments/Feedback:		
Therapist Factors		Item Score
Therapist Presence	Asking personal questions, showing interest in clients' lives: Therapist asks questions about the clients in order to learn more about them as people.	
	Staying on topic: Therapist follows a clear line of questioning, follows up on client statements, and does not jump from topic to topic.	
	Eye contact: Therapist makes eye contact with clients when he/she is speaking, and when clients are speaking.	
	Body language: Posture oriented towards the clients; no physical barriers.	
Contextual Factors	Aware of and responsive to client contextual factors: Such as ethnicity, gender, sexual orientation, socioeconomic factors, able status, religion, power, etc.	
Self-of-the-therapist	Effective management of personal emotions/issues in session.	
Comments/Feedback:		
Treatment		Item Score

Therapist Name: _____ Date: _____ Session #: _____ Therapy Model: _____
 Observer Name: _____ Client #: _____ Clients Present: _____

0 = Not Observed 1 = Below Expectations 2 = Meets Expectations 3 = Above Expectations

Systemic Conceptualization	The therapist demonstrates systemic understanding of family members' problem(s). In other words, the attitude or behavior of one person or subsystem (e.g., parents; children) is affecting the attitude or behavior of another person or subsystem and vice versa, (i.e., in a reciprocal or circular fashion).	
Systemic Based Interventions/ Techniques	Balanced attention to partners/family members: Therapist involves all clients in session by addressing each of them and following up with each.	
	Noting cyclical patterns in couple/family interactions: Therapist identifies patterns that fuel the problems. For example, "So when Partner A gets angry, Partner B gets scared, then both of you pull away."	
	Circular questioning: Questions that encourage clients to think about mutual influence between themselves, in dyadic terms. For example, "What have you noticed happens between the two of you that escalates arguments?"	
	Seeking information and/or creating interventions based on multiple environmental levels. For example, If the couple mentions their child's behavior problems, the therapist asks questions that relate to various aspects of the child's environment, daily activity, and life experiences.	
	Systemic/Relational interventions: Interventions include multiple family members and are focused on relational/systemic change.	
Session Structure (Constructive & Productive)	Manage conflict: Managing overt conflict behaviors displayed by clients towards one another, like partners blaming one another or making critical remarks.	
	Pacing & efficient use of time: Allowing flexibility and facilitating client discussion of important topics without allowing clients to go off on tangents.	
	Provides opportunity for all members of couple/family system to express concerns & goals.	
	Starting and ending the session on time.	

Comments/Feedback:

Effective Use of MFT Models		Item Score
Case Conceptualization and Treatment Plan	Therapist demonstrates knowledge of MFT models(s) in case conceptualization.	
	Therapist demonstrates knowledge of MFT models(s) treatment plan.	
	Interventions are consistent with treatment plan.	
Model-based interventions	Therapist effectively utilizes interventions from MFT model(s) in session.	

Comments/Feedback:

Ethical and Legal Issues		Item Score
Professional Boundaries	Therapist maintains appropriate/professional boundaries with clients.	
Ethical/Legal Standards	Therapist is aware of and abides by relevant ethical and legal standards.	

Comments/Feedback:

Therapist Name: _____ Date: _____ Session #: _____ Therapy Model: _____
 Observer Name: _____ Client #: _____ Clients Present: _____

0 = Not Observed 1 = Below Expectations 2 = Meets Expectations 3 = Above Expectations

Case Management and Documentation		Item Score
Consent Forms	Consent Forms completed in accordance with clinic policy.	
Case Notes	Case Notes completed in accordance with clinic policy (e.g., within 24 hours and reflect a clinical model).	
	Case Note content reflects content and process observed.	
Treatment Plan	Treatment Plan completed in accordance with clinic policy and reflects a clinical model.	
Client Fees	Fees and payment history are documented in accordance with clinic policy.	
Comments/Feedback:		
Appropriate Use of Supervision		Item Score
Seeking Feedback	Therapist seeks, is receptive to, and applies feedback from faculty and doctoral supervisors	
Supervision	Therapist is prepared for and appropriately uses individual/dyadic supervision.	
Comments/Feedback:		

Experiential Learning Excursion Rubric – 25 points

Instructions:

As mental health clinicians, it is important that we spend time considering perspectives that are different from our own. To assist you in this process, this semester you will select a culture or a social location that you personally struggle with understanding, or group (different from one you identify with) that you are passionate about working with or researching. I would like you to find a resource or choose an activity that you can do that is ongoing throughout the semester. For example, you may struggle with understanding the unique experiences or history of Black/African Americans, and so could listen to the entirety of the Podcast 1619. You may also consider television series focused in a culture different from your own, podcasts on special topics related to certain social locations, following different social media pages representing different cultures' messages, etc. The activity you choose should provide you ongoing exposure to information or messages about the community you're interested in becoming more familiar with, equivalent to around 5 hours of exposure. Think about issues of power and privilege. Social location may be from any of the following: race, gender, sexual orientation and gender minorities, able status, socioeconomic status, or weight status. Try to choose an activity that will stretch your personal comfort zone. If you have questions about the appropriateness of the activity, please consult with me. After you have completed the activity, you will write a brief (4-5 page) reaction paper about the experience. Here are some questions you might think about in your reaction paper. Why did you choose the experience you did? How would your daily life be similar/different if you identified as a member of this group? What would you be more/less aware of as you went throughout your day? How would your interactions with others, and others' interactions with you, differ as a result of your identifying as a member of this group? What were your previous stereotypes regarding the group you attend, and how has it changed? What were your feelings and reactions? How might it inform your clinical work?

Experiential Learning Excursion Rubric – 25 points					
Grade	Components	Exceeded Expectations	Met Expectations	Below Expectations	Deficient
	Page Length – 2 points	<i>Possible points: 1.8 – 2 points</i> The paper was between 4 and 5 pages long.	<i>1.6 – 1.79 points</i> The paper was between no more than ¼ of a page less than or over the page limit. <i>Notes:</i>	<i>1.4 – 1.59 points</i> The paper was between ¼ - ½ of a page less than or over the page limit. <i>Notes:</i>	<i>1.39 points and below</i> The paper was more than ½ of a page less than or over the page limit. <i>Notes:</i>

	<i>Stretched Comfort Zone – 3 points</i>	<i>Possible points: 2.7 – 3 points</i> The student chose an activity that clearly stretched her/his comfort zone. The activity: <ul style="list-style-type: none"> - Involved a dimension of diversity that the student is not a part of (i.e., if you are of a Christian faith, you do not go to a different Christian denomination church than your own) - Was an activity that provided some experience that was outside of the student's regular experiences - Was an activity they participated in without more than one other classmate or friend 	<i>2.4 – 2.69 points</i> The student chose an activity that stretched her/his comfort zone. <i>Notes:</i>	<i>2.1 – 2.39 points</i> The student chose an activity that somewhat stretched her/his comfort zone. <i>Notes:</i>	<i>2.09 points and below</i> The student chose an activity that was within her/his comfort zone. <i>Notes:</i>
	<i>Why did you choose the experience you did? – 5 points</i>	<i>Possible points: 4.5 – 5 points</i> The student fully described their reasoning for choosing the experience they did, including: <ul style="list-style-type: none"> - Why they chose this experience and what their learning goal was - What made this experience a learning experience for him/her 	<i>4 – 4.49 points</i> The student adequately described her/his reasoning for choosing the experience they did. <i>Notes:</i>	<i>3.5 – 3.99 points</i> The student somewhat described her/his reasoning for choosing the experience they did. <i>Notes:</i>	<i>3.49 points and below</i> The student was not clear in her/his reasoning for choosing the experience they did, or they did not include reasoning. <i>Notes:</i>

		<ul style="list-style-type: none"> - What was the personal motivation for going on this excursion - In what way were they hoping to grow by going to this experience 			
	<i>What were your feelings and reactions? – 5 points</i>	<p><i>Possible points: 4.5 – 5 points</i></p> <p>The student fully described/processed her/his feelings and reactions to the activity. As evidenced by:</p> <ul style="list-style-type: none"> - Identifying observations - Identifying reactions to observations, including emotional reactions - Indicating how those emotional reactions affected the student in the moment - Indicating whether the observations/reactions changed how the student acted/interacted in the moment - Was able to identify how feelings and reactions were linked to behavior changes 	<p><i>4 – 4.49 points</i></p> <p>The student adequately described her/his feelings and reactions to the activity. <i>Notes:</i></p>	<p><i>3.5 – 3.99 points</i></p> <p>The student somewhat described her/his feelings and reactions to the activity. <i>Notes:</i></p>	<p><i>3.49 points and below</i></p> <p>The student was not clear in describing her/his feelings and reactions to the activity, or did not include a description of her/his feelings/reactions. <i>Notes:</i></p>
	<i>How might it inform your clinical work? – 5 points</i>	<p><i>Possible points: 4.5 – 5 points</i></p> <p>The student fully described/processed how the</p>	<p><i>4 – 4.49 points</i></p> <p>The student adequately</p>	<p><i>3.5 – 3.99 points</i></p> <p>The student somewhat</p>	<p><i>3.49 points and below</i></p> <p>The student was not clear in</p>

		<p>experience might inform or affect her/his clinical work. As evidenced by:</p> <ul style="list-style-type: none"> - Indicating how the information and content from the experience might be used in session - Indicating how the emotional experience of the student might be channeled into clinical work - Identifying how any self of the therapist work might interact with the student's clinical work 	<p>described/processed how the experience might inform or affect her/his clinical work. <i>Notes:</i></p>	<p>described/processed how the experience might inform or affect her/his clinical work. <i>Notes:</i></p>	<p>describing/processing how the experience might inform or affect her/his clinical work. <i>Notes:</i></p>
	<p><i>How did being in a position of power/privilege, or lack thereof, affect your experience? – 5 points</i></p>	<p><i>Possible points: 4.5 – 5 points</i></p> <p>The student fully described/processed how being in the position of power/privilege, or lack thereof, affected her/his experience. Student was able to differentiate between privileged/subjugated positions and being in the majority/minority in a situation. The student was accurate in her/his identification of whether they were in a privileged position or not during the excursion, identifying which identities were in privileged positions and which</p>	<p><i>4 – 4.49 points</i></p> <p>The student adequately described/processed how being in the position of power/privilege, or lack thereof, affected her/his experience. Or, the description/processing was fully done but the student was somewhat inaccurate in her/his identification of whether they were in</p>	<p><i>3.5 – 3.99 points</i></p> <p>The student adequately described/processed how being in the position of power/privilege, or lack thereof, affected her/his experience, and the student was somewhat inaccurate in her/his identification of whether they were in a privileged position</p>	<p><i>3.49 points and below</i></p> <p>The student was not clear in describing/processing how being in the position of power/privilege, or lack thereof, affected her/his experience, and the student was inaccurate in her/his identification of whether they were in a privileged position or not during the excursion.</p>

		<p>were not. The student was able to identify how intersectionality was part of the experience. The student reflected on how their social location affected his/her comfort with the event, and how it might have changed their perceptions or overall experience.</p>	<p>a privileged position or not during the excursion. <i>Notes:</i></p>	<p>or not during the excursion. <i>Notes:</i></p>	<p><i>Notes:</i></p>
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Advocacy in Action – 25 points

AAMFT 2015 Code of Ethics:

Commitment to Service, Advocacy and Public Participation

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

Instructions:

As marriage and family therapists it is our responsibility to remain aware of the systems which influence our clients and their treatment. Further, taking an active role in shaping policies and societal narratives around mental health and vulnerable populations is important. This assignment is designed to give you an opportunity to put your ideas for advocacy into action. You can form a group of 2-3 students for this assignment. Each group will choose an underserved, underrepresented, or historically oppressed group for which you would like to advocate. You will develop a project meant to advocate for the group you have selected. You may write a letter to a person or agency creating/voting on policy (TTU president, AAMFT, a member of congress, etc.), volunteer at a conference such as the LGBTQIA and Allies Summit, plan a fundraiser, make a video or visually appealing infographic, create a community outreach presentation, etc. Do not feel limited by these options. You are free to do advocacy work that you feel passionate about, but make sure to clear your project with the instructor. Your time spent prepared and enacting **your activity should total at least 5 hours**. Further, because the projects you will choose to complete will inherently be different based on the group you chose to work in and advocate for, you will be able to create your own rubric. The entire assignment will be worth 25 points. You will decide as a group how you would like the instructor to grade your work. Your group will need to provide a rubric to be graded on when you turn in your project.

You may use the blank rubric below as a guide if you prefer, but you may also create your own rubric. ***Please note that your project idea must be approved by the instructor by Monday, March 1, 2021.***

Advocacy in Action Rubric – 10 points					
Grade	Components	Exceeded Expectations	Met Expectations	Below Expectations	Deficient
	Project was approved by instructor	<i>Possible points: 5 points</i> -Project was approved by the instructor by Monday March 2nd		<i>2.5 points</i> - Project was approved, but not by March 2nd	<i>0 points</i> -Project was not approved by the instructor
		<i>Possible points:</i>			
		<i>Possible points:</i>			
		<i>Possible points:</i>			

SECTION VII
PRACTICUM

**Couple, Marriage, and Family Therapy Program
Practicum Hours**

Hours Policy – Summary

- The TTU Master's CMFT Program requires a minimum of 500 hours of client contact. This total must be completed by graduation.
- For hours to count under the externship umbrella, requirements for the externship (e.g., Externship Contract) must be in place.

**Texas Tech University
Marriage and Family Therapy Program
Clinical Experiences**

I. Professional Standards and Professional Behavior

CMFT faculty and students enrolled in the CMFT Program must adhere to AAMFT standards of ethical professional behavior in their therapy training, teaching, supervision, and research. A complete copy of the most current edition of the AAMFT Code of Ethical Principles for Marriage and Family Therapists is available in the Texas Tech Family Therapy Clinic and online.

Violations of these standards must be reported to the CMFT Program Director (See Section on Grievance and Dismissal Procedures). Any violation may be reported also, in writing, to the AAMFT Committee on Ethics and Professional Practices.

Adherence to the AAMFT ethical standards includes carrying proper liability insurance to protect the clients and agencies involved in training students. CMFT students and faculty are required to carry professional liability coverage. The CMFT program purchases liability coverage through Texas Tech University each year for all students in Lubbock. *This excludes students who have moved away to teach and practice but have not yet graduated from the program.*

The national professional organization for marriage and family therapists is AAMFT. CMFT faculty and students are expected to be members of AAMFT and to become actively involved in the work of AAMFT at the local, state, and national level.

Professional conduct with clients, other students, CMFT faculty, and other agencies is an absolute requirement of the CMFT Program. CMFT faculty are expected to demonstrate appropriate models of such professional conduct, and students are expected to follow appropriate models of professional behavior.

II. Client Contact Hour Requirements

Prior to graduation from the CMFT Master's Program, each student is required to complete at least 500 hours of client contact under the supervision of a Program Clinical Supervisor, at least 400 hours must be direct client contact and 250 of those hours must be relational.

- "Direct contact" means face-to-face or teletherapy contact with clients.
- Two therapists working together (co-therapy) in the room or online with the clients is considered "direct contact" for both therapists.
- Psychoeducation may be counted as direct client contact.

- Observation of another therapist's work, although valuable, does not constitute "direct contact" unless during a team session or practicum.
- Up to 20% of clinical hours may consist of alternative therapeutic contact that is systemic and interactional. **Prior** approval by the Director of Clinical Training is required to include alternative therapeutic contact and psychoeducation hours in the hours requirement. (See "Alternative Client Contact Hours" Section)
- 40% of the hours of client contact must be with couples, families, or other relational systems.

The hour requirement for the TTU CMFT program is met as follows:

A. PRACTICUM

Because the CMFT program includes both master's and doctoral-level students, it is important to determine the requirements for each student. There are 4 categories: (1) master's students (2) students who enter the Ph.D. program with a master's degree in an area that does not include clinical experience, (3) students who enter the Ph.D. with a master's degree in an area that does include clinical experience, but is not accredited by the Commission on Accreditation of Marriage and Family Therapy Education (COAMFTE), and (4) students who enter the doctoral program with a master's from a program accredited by the COAMFTE. **Please note for MS students, only category 1 is relevant to the completion of your MS degree.**

1. Master's CMFT students.

- a. Master's degree students will enroll in a minimum of 21 credits of CMFT 6395 Practicum.
- b. Master's degree students are expected to maintain a clinical caseload in the Family Therapy Clinic During the Spring, Summer I, and Summer II semesters of the first academic year of enrollment and during the Fall semester of the second academic year of enrollment.
- c. Master's students are expected to transition to an externship placement during the Summer of their first year or Fall semester of the second year of enrollment.
- d. Master's degree students are expected to meet the requirements of the Foundational Practice Component of the COAMFTE Version 12.5 Accreditation Standards.
 - i. Complete 500 clinical contact hours under the supervision of Program Clinical Supervisors.
 - ii. 400 of the 500 clinical contact hours must be direct client contact hours.
 - iii. Up to 100 of the direct clinical contact hours may be "alternative" hours.
 - iv. 40% of the 500 clinical contact hours must be direct client contact hours with couples, families, or other relational systems.

- v. Students must participate in a minimum of 100 hours of qualifying supervision.

2. Ph.D. CMFT students with a master's degree in a nonclinical area (e.g., sociology, family studies).

- a. Although these students may be able to transfer in classes (up to 9 credits worth) from their nonclinical master's degree, they will then be required to complete the Foundational Curriculum in MFT (equivalent of an MFT master's degree from TTU).
 - i. Requirements
 - 1. Complete 500 direct clinical contact hours under AAMFT approved supervision (or equivalent).
 - 2. Complete at least 200 of the direct clinical contact hours in the TTU Family Therapy Clinic.
 - 3. Up to 100 of the direct clinical contact hours may be "alternative" hours.
 - 4. 40% of the 500 direct clinical contact hours must be with couples, families, or other relational systems.
 - 5. Students must participate in a minimum of 100 hours of qualifying supervision.

3. Ph.D. CMFT students with a master's degree in a related clinical area (e.g., clinical or counseling psychology, social work) or from a MFT master's program not accredited by COAMFTE.

- a. These doctoral students may transfer in up to 500 of their clinical hours if a Formal Waiver is granted by the Clinic Director.
- b. *Formal Waiver:* Students who have clinical experience and have received a Master's degree from a program that is NOT accredited by the COAMFTE may apply to have a portion (up to 500) of their clinical experience hours transferred if these hours were accumulated under the direct supervision of an AAMFT Approved Supervisor or a supervisor who has been deemed as being equivalent to a AAMFT Approved Supervisor by the Director of Clinical Training and 40% of the contact hours occurred with couples, families, or other relational systems. An additional 200 direct clinical contact hours must be accrued during the doctoral program which meet the same requirements for proportion of relational hours, proportion of alternate hours, and AAMFT supervision.
- c. Family Therapy Clinic (FTC) and Children's Behavioral Health Clinic (CBHC)

- i. All direct contact hours earned in the FTC or CBHC or accepted by the Director of Clinical Training from elsewhere are counted toward the required 500 hours for the Ph.D.
- d. Students who have a full 500-hour waiver
 - i. Will provide services in the Family Therapy Clinic or Children's Behavioral Health Clinic (CBHC) on a continuous basis for a minimum of four semesters. (Fall, Spring, Summer I, Summer II).
 - ii. This experience will be completed in the Texas Tech University Family Therapy Clinic under CMFT faculty supervision. At least 40% of these hours must be relational. Students must be enrolled in CMFT 6395 while providing direct client services in the FTC or CBHC
- e. Students with less than a full 500-hour waiver
 - i. Will provide services in the FTC or CBHC on a continuous basis for a minimum of four semesters.
 - ii. A minimum number of direct client contact hours required in practicum will be set by the Director of Clinical Training (i.e., 500 hours – the number of hours accepted). At least 40% of these hours must be relational. Students must be enrolled in CMFT 6395 while providing direct client services in the FTC or CBHC.
- f. Alternative Therapy Hours—the number of alternative hours is limited to 1/5th of the direct clinical contact hours credited to the student over the period of the Ph.D. program enrollments (limit = 100 hrs.). See the section on alternative hours for a definition of activities that are considered alternative hours. The Clinic Director must approve the source of alternative hours in advance

4. Students with a Master's from a COAMFTE-Accredited Program.

- a. These students may transfer in up to 500 of their clinical hours (including 100 hours of supervision) if a Formal Waiver is granted by the Clinic Director.
- b. The "Transfer of Client Hours" form must be submitted to the Director of Clinical Training prior to the student's Plan of Study meeting with the Program Director. A copy of this form may be found in the CMFT Program Training Manual for Graduate Students, Section V: Plan of Study.
- c. Family Therapy Clinic and Children's Behavioral Health Clinic
 - i. Students in this category will provide services in the FTC or CBHC on a continuous basis for a minimum of four semesters.
 - ii. A minimum of 200 hours of direct client contact must be completed during the doctoral program in the Texas Tech University Family Therapy Clinic and/or internship under CMFT faculty supervision or supervision by an AAMFT Approved Supervisor/Supervisor Candidate. At least 40% of

these hours must be relational. Students must be enrolled in CMFT 6395 while providing direct client services in the FTC or CBHC. Students may choose to earn more of their hours in the FTC or CBHC.

- d. Alternative Therapy Hours—the number of alternative hours is limited to 1/5th of the direct clinical contact hours credited to the student over the period of the Ph.D. program enrollments (limit = 100 hrs.). See the section on alternative hours for a definition of activities that are considered alternative. The Director of Clinical Training must approve the source of alternative hours in advance.

III. Requirements for AAMFT Clinical Membership and Licensure in Texas

Student membership

Student members are those that are enrolled in a graduate marriage or family therapy program, or an equivalent graduate mental health program, which can reasonably be expected to lead to qualifications as a Clinical Fellow or Member of AAMFT. Student members may remain in this category for a maximum term of five (5) years or until satisfactory completion and receipt of a qualifying graduate degree, whichever shall come first. Students who are eligible for a higher category of membership are ineligible for student membership in AAMFT.

Pre-Clinical Fellow Membership

An individual who has completed a master's or doctoral degree in marriage and family therapy from a regionally accredited educational institution, or an equivalent course of study, and is completing the post degree supervised clinical hours toward the highest level of MFT licensure in a US state.

Clinical Fellow Membership

Clinical Fellow membership is the credentialed level of membership in AAMFT. Clinical Fellows have met rigorous standards of training in marriage and family therapy and are recognized worldwide for these standards.

However, in states/provinces, such as Texas, where AAMFT has approved the licensure/certification process, a state/provincial license as a Marriage and Family Therapist is required for clinical membership. Currently, the State of Texas requires 3000 postgraduate hours (a minimum of 1500 hours of direct clinical services of which a minimum of 750 hours must be direct clinical services to couples and/or families) and 200 hours of supervision (100 hours of which must be individual supervision).

Only clinical hours obtained following completion of a master's in MFT or its equivalent will be counted toward full licensure. Therefore, it is imperative that students apply for licensure as a Marriage and Family Therapist-Associate as soon as they meet the requirements for the Associate license. Associate status is required for some paying positions and some internships.

- Students completing a master's degree in MFT with (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist are eligible to apply for licensure as a Licensed Marriage and Family Therapist-Associate.
- Students who enter the CMFT Ph.D. program with a master's in a nonclinical area (e.g., sociology, family studies) must complete (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist to be eligible to apply for licensure as an Licensed Marriage and Family Therapist-Associate license.
- Students who enter the CMFT Ph.D. program with a master's in a related clinical area (e.g., clinical or counseling psychology, social work) are still required to meet the following requirements (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist to be eligible to apply for licensure as an Licensed Marriage and Family Therapist-Associate license. It is the student's responsibility to present sufficient evidence to the Board for acceptance of clinical experiences and master's-level coursework.
- Students who enter the CMFT Ph.D. program with a master's from an accredited (COAMFTE) CMFT program must present evidence that they meet the following requirements (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist to be eligible to apply for licensure as a Licensed Marriage and Family Therapist-Associate license. Students meeting these criteria are encouraged to apply immediately for Associate licensure.

III. Supervision Hour Requirements (Practicum and Internship)

A. PRACTICUM

Students in practicum must obtain individual or dyadic supervision with an appropriate supervisor (AAMFT Approved Supervisor, AAMFT Supervisor Candidate, or equivalent) at least once every week in which they have direct client contact in order to have direct client service hours counted toward the hour requirement.

During the period of the practicum, the student will be expected to receive supervision at least once a week. Students must receive supervision hours equivalent to 20% of their total client contact hours. Half of the supervision hours must utilize observable data (live, video, or audio supervision). Supervision may be individual or group.

Under the current rules of the COAMFTE, individual supervision is defined as meeting with the supervisor with no more than two supervisees. Group supervision is defined as meeting with the supervisor with no more than 8 total student supervisees. Under normal circumstances, every student in the Texas Tech CMFT Program will receive more hours of supervision than the COAMFTE minimum requirement.

Students are responsible for maintaining acceptable supervision for any hours of direct client contact obtained after the first three years of enrollment in the CMFT Program if the practicum requirement is not met by that time. Students are also expected to obtain appropriate supervision for on-going clinical work after practicum is complete. Arranging for appropriate supervision is the responsibility of the student. Such supervision may or may not be provided by the CMFT Program faculty. Under no circumstances may a full-time CMFT faculty member receive payment from a student for supervision of a current CMFT graduate student.

In the Texas Tech CMFT Program, hours of supervision will be counted only when the supervisor is an AAMFT Approved Supervisor, Supervisor Candidate, or equivalent. Prior determination by the CMFT faculty that the supervisor meets an equivalent standard is required if the proposed supervisor is not an AAMFT Approved Supervisor or an AAMFT Supervisor-in-Training.

Hours of supervision of graduate students by other graduate students in the CMFT program may be counted toward the required hours of supervision only if the other graduate student is an AAMFT Approved Supervisor in Training and at a higher level of clinical experience. The student being supervised must continue to meet with an approved supervisor or equivalent at least every other week to ensure that the hours of direct client contact are available to meet CMFT Program, COAMFTE, LMFT, and AAMFT Clinical Membership requirements.

IV. Documentation of Hours (Practicum and Internship)

To meet the direct client contact requirements in practicum over a one-year period, the student therapist will need to conduct 6-8 hours of therapy sessions each week under appropriate weekly or biweekly supervision. Each CMFT student will be assigned one evening each week for clinical practicum and additional clinical slots will be determined through the TTU Family Therapy Clinic Director. 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 through the week. In reality, more client contact hours must be scheduled to allow for vacation periods, slow times, clients who fail to attend appointments, illness, etc. Similarly, supervision sessions should be scheduled to allow for vacation times, conferences, illnesses, etc.

During the course of each semester, FTC and CBHC Clinic records will be used to update the student's permanent record of hours of therapy and hours of supervision, using the Monthly Clinical Supervision Report form (MCSR, see Clinic Manual), supplemented by client records. The updated information will be based on the FT Clinic record as corrected by the student therapist and their supervisor. The MCSR, with required signatures, must be filed with the Director of Clinical Training no later than 30 days after the last day of the month of the report in order for the client contact and supervision hours for both practicum and internship to be included in the student's permanent record. The FTC and CBHC Clinic records will be considered the definitive record of a student's therapy and supervision hours. Student therapists will have periodic opportunities, i.e., at least yearly, to correct errors in the FTC/CBHC Clinic records with their supervisor's approval. FT/CBHC Clinic records are not subject to further change as the result of student action after this review.

V. Other Information

1. Evaluation of Practicum Performance. Prior to the end of each semester enrolled in clinical practicum or supervision practicum, both the clinical supervisor or supervisor of supervision and the student will use the Qualtrics system to complete the Practicum or Supervision Evaluation and the Practicum or Supervision Self Evaluation. One week prior to the end of the semester, the student therapist/supervisor and the practicum supervisor/supervision mentor will meet to review practicum performance. The student will complete a self-evaluation. However, these comments do not constitute an appeal of the grade for practicum (See Section on Grievance and Dismissal Policies and Procedures, for grade appeal procedures). The Practicum/Supervision Evaluation and the Practicum/Supervision Self Evaluation will become part of the student's CMFT program record. In addition, each student will receive the university teaching evaluation survey via their university email account, in which they will have the opportunity to evaluate their experience in the practicum course and provide anonymous feedback that will be returned to the course instructor after the semester grades have been submitted.
2. Completion of Clinic Responsibilities. In addition to completing the required hours in practica and receiving permission from the faculty, doctoral students who wish to be released from practicum and begin internship must provide written documentation that they have taken the national-level Marriage and Family Therapy Licensure Examination and received a score that would be considered passing by the Texas Board of Examiners of Marriage and Family Therapists or have permission from the Board to take the next examination available.
3. State of Texas Marriage and Family Therapy Licensure Requirements
In states/provinces, such as Texas, where AAMFT has approved the licensure/certification process, a state/provincial license as a Marriage and Family Therapist is required for clinical membership. Currently, the State of Texas requires

3000 postgraduate hours (a minimum of 1500 hours of direct clinical services of which a minimum of 750 hours must be direct clinical services to couples and/or families) and 200 hours of supervision (100 hours of which must be individual supervision). For other states in the US, please see section XIII Licensure/

Statement on client load. Over the period of time spent in the Family Therapy Clinic and/or Children's Behavioral Health Clinic, client loads are expected to increase to between 6 and 8 hours a week. However, client loads are determined by the student's supervisor in consultation with the Clinic Director, and may be more than 6 or either more or less than 8 a week. Further, the mix of individual, couple, family, and group cases is also a matter determined by the student's supervisor and the Clinic Director. Because the FTC and CBHC operate as public facilities, there may be times when loads increase over the expected level and the mix of cases desired by the student may not be feasible.

SECTION IX
MASTER'S EXTERNSHIP

EXTERNAL PLACEMENT INFORMATION

I. DEFINITION OF AN EXTERNAL PLACEMENT

“The external placement is to provide master’s degree students with a supervised, full-time experience of at least 9 months duration, emphasizing relationally focused practice.” In the Texas Tech CMFT program, “full-time” is interpreted to mean approximately 5-8 hours a week on site(s). The external placement typically begins in the 2nd year of the master’s program, and each student must complete sufficient direct client contact hours to achieve the total of 500 (50% relational) direct client contact hours required for completion of the master’s degree. Further, the student should consider whether the external placement will provide sufficient hours of direct client contact and supervision to meet licensure and/or clinical membership requirements. Direct contact hours must be supervised by an AAMFT-Approved Supervisor or equivalent, and supervision must take place at least every other week.

Prior to beginning the external placement, a written external placement proposal must be submitted to and approved by the Director of CMFT External placements and the CMFT Program Director.

II. THE PURPOSE OF AN EXTERNAL PLACEMENT

An external placement is intended to build on the student’s existing clinical skills and to provide an intensive professional experience. Training is the primary focus of the external placement. Establishing an external placement involves student-faculty-site collaboration.

III. PROCEDURES TO BEGIN AN EXTERNAL PLACEMENT

- A. First, the student should speak with their CMFT faculty advisor and the Clinic Director well before approaching potential external placement sites. Other CMFT faculty may be consulted as well. The product of such a dialogue should be an assessment of the student’s training interests, identification of potential external placement sites, and a preliminary statement of the requirements for completion of the external placement.
- B. Second, the student should approach potential external placement sites to determine which site(s) will meet the external placement requirements for that student. Once agreement is reached with the site, the student will complete the development of a formal External placement Proposal to be submitted to the CMFT faculty advisor and Clinic Director for approval.
- C. Third, once the External placement Proposal is approved, the External placement Agreement must be completed by the site(s) and returned to the Clinic Director.

- D. Any change in the External placement Proposal or External placement Agreement(s) must be approved by the student's CMFT faculty advisor and the Clinic Director.

IV. WHO IS QUALIFIED TO BEGIN AN EXTERNAL PLACEMENT

- A. The student must be in good standing in the CMFT program (individuals on academic or clinical probation or on leave of absence cannot apply).
- B. The student must have completed a minimum of three semesters/terms (Fall, Spring, Summer I) of coursework and preferably four semesters/terms of coursework.
- C. The student must have completed a minimum of two semesters/terms of practicum and be enrolled in their third semester/term of practicum.
- D. The student must be sufficiently advanced in the CMFT program to maximally benefit from the external placement experience. This means that external placement activities do not interfere with completion of coursework and continued progress in the CMFT program and vice versa.
- E. The student must receive approval from their spring practicum supervisor based on spring practicum performance, based on the spring Practicum Evaluation, to begin Externship during Summer I. For the student to begin externship during Summer II, both the Spring and Summer I practicum supervisor must approve the student's request.
- F. Preferred Qualifications
 - 1. Completed at least 250 direct contact clinical hours and have completed intro to practicum and 2-3 semesters/terms of practicum (spring, summer I, and summer II).
 - 2. No incompletes.

V. DOCUMENTATION REQUIRED BEFORE THE EXTERNAL PLACEMENT BEGINS

- A. External placement Proposal.
- B. Student's current *curriculum vitae*.
- C. *External placement Supervisor Application* (required of each supervisor).
- D. *External placement Agreement from each site*.

VI. SUPERVISION OF EXTERNAL PLACEMENT

In an external placement that involves direct client contact, the intern must meet with an AAMFT Approved Supervisor (or equivalent) at least every other week for case supervision. All master's degree students will be enrolled in CMFT 6395 during their externship and will have a CMFT faculty clinical supervisor. Regardless of the Approved Supervisor, each site must provide an administrative and/or clinical supervisor who is responsible for the efforts of the intern and who provides supervision of cases at least every other week. If that supervisor is not an AAMFT Approved Supervisor, the student must still obtain appropriate supervision.

VII. DOCUMENTATION REQUIRED IN THE EXTERNAL PLACEMENT

- A. Monthly Clinical Supervision Report (MCSR). The MCSR must be submitted for each month and each site in the external placement. The AAMFT Approved Supervisor (or equivalent) must sign each MCSR, along with the Director of Clinical Training. The MCSR, with appropriate signatures, must be submitted to the Director of Clinical Training within 30 days of the last day of the month of the report.
- B. The external placement requirements are deemed completed once all of the following criteria have been met:
 - a. The duration of the external placement experience has lasted a minimum of nine (9) months and no more than twelve (12) months; and
 - b. The concluding date as stipulated on each "External placement Agreement" form has been reached; and
 - c. All required evaluation forms for each external placement site have been filed with the Director of External placements; and
 - d. The student has accumulated a minimum of 500 documented and verified hours of direct face-to-face client contact as required by to complete the master's in CMFT; and
 - e. A certificate of completion addressing the external placement experience has been placed in the student's program file.

Should it become evident that an external placement experience will stretch beyond the maximum twelve (12) month period, a new "External placement Agreement" form must be completed and submitted to the Director of External placements prior to the expiration date of the original agreement.

- C. At the completion of the external placement or upon leaving an external placement site, the Intern Self Evaluation (student), the Intern Evaluation (separately, AAMFT Approved Supervisor and the site supervisor(s)), the External placement Site Evaluation

(student), and Intern Evaluation of Supervision (student) must be submitted to the Director of External placements.

VIII. EXTERNAL PLACEMENT SITE REQUIREMENTS

- A. The program will maintain clear relationships with all external placement site(s), which will be specified in a written document.
- B. Activities of each intern will be documented at the external placement site(s). These records will be made available to the marriage and family therapy program.
- C. The institution sponsoring the external placement site(s) will have been in operation for at least two years.
- D. External placement site(s) will provide adequate facilities and equipment for the intern to carry out designated responsibilities.
- E. Mechanisms for student evaluation of external placement site(s) and supervision, and site evaluation of the intern's performance, will be demonstrated.
- F. Documentation of liability insurance for interns will be confirmed. Liability insurance may be provided by the external placement site(s), the marriage and family therapy program, or the intern.
- G. External placement site(s) will publish and adhere to policies prohibiting discrimination on the basis of age, culture, ethnicity, gender, physical ability, race, religion, sexual orientation, and socioeconomic status.
- H. An AAMFT Approved Supervisor or the equivalent will supervise the intern's clinical work.
- I. The external placement supervisor will be available to the intern and will be an active participant in their training.
- J. The external placement supervisor will be clearly senior in experience to the intern.

IV. WHAT TO DO IF CONCERNS ARISE?

Students are expected to communicate ethical, clinical, training, interpersonal, or any other concerns that arise in their external placement. Students should follow the steps below to address concerns related to externship or follow the steps outlined in the program Grievance & Dismissal Policy.

- 1. As with most concerns it is preferable to address the person or issue directly and seek resolution. However, if that is not possible or is unsafe, the student should address concerns to the externship site administrative supervisor/lead and to their CMFT faculty clinical supervisor.
- 2. If the concern is not resolved or if the student is unsafe discussing concerns with the site supervisor and the CMFT faculty clinical supervisor, the student should discuss the concerns with the CMFT Clinic Director. Regardless of resolution, the CMFT Clinic Director should be made aware of any ethical concerns, mistreatment, or issues related to the ability to progress on clinical hours as soon as possible.

3. If the concern is not addressed or if the student is unsafe discussing the concern with the Clinic Director, the student should discuss the concerns with the CMFT Program Director.
4. If resolution is not achieved, the student should follow the Grievance Procedure outlined in the Program Manual.

Every effort will be made to address concerns that arise with externship placements, including identifying alternative externship placement if necessary.

Texas Tech University

MS in Couple, Marriage, and Family Therapy

Box 41210

Lubbock, TX 79409-1210

(806) 742-3060

EXTERNAL PLACEMENT AGREEMENT

This agreement is made on _____ by and between
(date)

_____, _____,
(Student) (External Placement Site)

and The Couple, Marriage, and Family Therapy Program at Texas Tech University. The agreement will be

effective from _____ to _____ for the external
(start date) (concluding date)

placement of _____.
(student's name)

Purpose:

The purpose of this agreement is to specify the conditions for external placement of a qualified CMFT master's student.

Texas Tech University CMFT Program Responsibilities:

1. Select external placement candidates who have successfully completed all prerequisite courses and practica for external placement.
2. Facilitate placements conducive to the student's training needs and qualifications, and the interests and capacities of the external placement agency.
3. Provide information to both the student and external placement site delineating the responsibilities of the CMFT program, the external placement agency, and the student.

4. Maintain a collaborative relationship with the external placement site.
5. Monitor student development throughout the experience and provide grades based on the student's performance.
6. Maintain records of student's client contact and supervision hours completed during external placement.
7. Students will be covered under malpractice liability coverage by TTU at no additional charge to the site.

External Placement Site Responsibilities:

1. Maintain charter or license by appropriate state authority.
2. Provide a caseload sufficient to fulfill the student's client contact requirements as described under Student Responsibilities.
3. Maintain contact with the CMFT MS Director of External Placement Training, foster the student's development as a marriage and family therapist in collaboration with the CMFT MS program, and advise of any difficulties encountered with the student's performance.
4. Provide adequate facilities and training to the student relevant to the performance of assigned responsibilities.
5. Provide a confidential office space for the student intern to conduct therapy services.
6. Supplies and materials to create the required record-keeping of therapy services.
7. A secure file to store confidential records of the therapy services provided.
8. Provide documentation of the student's client contact and supervision hours to the CMFT Director of External Placement Training.
9. Provide written evaluations (at least two over the course of the external placement) of the student's performance to the CMFT Director of External Placement Training.
10. An administrative supervisor who will agree to sign the documentation form of monthly hours completed at the site by the student.

Student Responsibilities:

1. Maintain responsibility for assigned cases throughout the external placement.
2. Adhere to the policies and standards of professional practice set forth by the CMFT program and external placement site.
3. Complete a sufficient number of on-site, direct client contact hours, of which at least 40% must be with couples and families.
4. Complete a minimum of nine (9) months of external placement experience.
5. Complete on-site supervision with student.

6. Maintain regular contact (no less than monthly) with the CMFT Director of External Placement Training and advise of any difficulties encountered associated with the external placement experience.
7. Maintain availability for supervision and other necessary appointments with the CMFT Director of External placement Training as requested.
8. Complete written evaluations regarding the external placement experience as specified in the course syllabus.
9. Ensure that adequate malpractice coverage is maintained throughout the external placement.

We the undersigned have read and agree to the conditions of external placement delineated in this contract.

_____ Date: _____

(Student)

_____ Date: _____

(External Placement Agency Director)

_____ Date: _____

(External Placement Site Supervisor)

_____ Date: _____

(CMFT Director of External placement Training)

_____ Date: _____

(CMFT Program Director)

SECTION VIII
ALTERNATIVE CLIENT CONTACT HOURS

Alternative Client Contact Hours

The CMFT Program allows for 20% of the required clinical practicum client contact hours to be comprised of alternative experiences that may not be strictly clinical in nature. The alternative hours **MUST** be systemic and interactive in nature, and **PRIOR** approval is needed to claim such hours.

The TTU CMFT faculty has determined that these alternative experiences may include:

1. Interactive Team Member

Time spent as an interactive team member who follows, observes, and discusses the ongoing case(s) with the primary therapist. This team member need not act in the capacity of a co-therapist, **but must directly observe** the case from the observation room and offer input to the primary therapist. Time spent participating as a team member as described herein during practicum is eligible under these criteria.

The following activities may count as an Alternative Team Hour if you have received faculty approval via the Alternative Hour Activity Proposal form with which you have been previously provided:

- a. **If you observe a live session during practicum and participate by providing input to the therapist.** Any participation that would be considered as “Live Group Supervision” during practicum can also be counted as an Alternative Team activity.
- b. **If you observe a live session of a student therapist and you participate by providing input to the therapist *PROVIDED YOU CAN HONESTLY DOCUMENT THE SESSION AND HAVE YOUR ALTERNATIVE HOURS WCSR VERIFIED VIA SIGNATURE OF AN MFT FACULTY.***
- c. **If you serve as a co-therapist to another student therapist during a live session *ONCE YOU HAVE COMPLETED ALL OF YOUR PRACTICUM HOURS REQUIREMENTS.***
- d. **If you accurately report your participation on the Alternative Hours WCSR form, following the same 30-day rule that governs the standard WCSR form.**
- e. **If you do not exceed the total cumulative limit for ALL alternative activities specified under Section VII-Practicum.**

NOTE: Observation and interaction as a Supervisor-in-Training **will not** be considered as an Alternative Hour activity.

2. Providing Therapeutic Psycho-Education

Providing **therapeutic psycho-education** (e.g., a depression support group), as opposed to therapy, will count as long as the experience is face-to-face, direct contact. This does NOT include a psycho-educational presentation to a group of therapists for the purpose of professional development (e.g., local, state or national conference presentations), nor does this include any classes you may have taught or will teach in the future.

Prior approval by the CMFT faculty of ANY proposed Alternative Hour activity is required in order for

the experience to be considered acceptable as an Alternative Hour Activity. Approval must be obtained for each different activity and/or site via the new "Alternative Hour Activity Proposal" form which MUST be presented to the faculty BEFORE any activity will be counted.

Alternative hours must be recorded on a separate MCSR (or separate tab on the spreadsheet), clearly identified as Alternative Hour Experience, and signed first by your current practicum, project, or internship supervisor, and then by the Clinic Director. Alternative Hours will be entered separately into the data bank and reported as a different entity so we can keep track of the number of alternative hours accumulated.

NOTE: Alternative Hours cannot be substituted for any portion of the minimum number of hours you are required to spend serving clients in the FTC or CBHC.

SECTION X
MASTER'S THESIS

TEXAS TECH UNIVERSITY
DEPARTMENT OF COMMUNITY, FAMILY, and ADDICTION SCIENCES
CMFT PROGRAM

Master's Thesis

I. Committee

Students are responsible for forming their thesis committees with the advice and consent of their Thesis Advisor. The Thesis Advisory Committee shall be composed of at least three members of the graduate faculty from within CMFT and ADRS, including their Thesis Advisor/Chair. Students have the option to also include an external committee member (one graduate faculty member outside CMFT and ADRS, either within or outside of the college). External committee members are optional and not required. The Thesis Advisor (Chair) must be a member of the full-time CMFT or ADRS graduate faculty. On all committees there must be at least one CMFT faculty. For the thesis, students should sign up for 3 credits of CMFT 6000 under the major advisor and for 1 hour under each of the three committee members, for a total of 6 hours.

II. Proposal

The thesis proposal is prepared in consultation with the advisor. Guidelines for the formatting of the thesis should be obtained by the student from the Graduate School or the Texas Tech Bookstore. Guidelines for the content of the thesis is on the document "Thesis Components for TTU MFT Doctoral Students" which should be followed carefully.

When the advisor has approved the proposal, it is submitted to the other members of the committee, and a proposal meeting is scheduled. The committee **MUST** have a minimum of **two** weeks between the time they receive the proposal and time of the meeting. If the committee members do not receive the document within two weeks, the meeting must be rescheduled. If the committee approves the proposal, the student may proceed with the project; if the proposal is not approved during this meeting, the student will be asked to work with the committee in revising the document. When the proposal is approved, the student must fill out the "Approval of Thesis Proposal Form" and acquire the signature of all committee members. The original completed form must then be turned into the CMFT secretary. This form will be placed in the student's permanent file. Committee signatures on a proposal form are an important safeguard for the student and should be obtained prior to proceeding with the research. Once the proposal is approved, the appropriate human subject forms must be submitted and approved before data collection can begin.

III. Defense

The student works with their advisor in preparing the final document. When the advisor has approved the document, copies are submitted to each member of the committee. The committee members **MUST** have at least **two** weeks to review the document and

make suggestions. At this stage, the student may spend several months working with committee members. When all committee members have agreed that the thesis is ready to defend, the defense may be scheduled. Because of Graduate School deadlines, the committee approval must be obtained at least **four** weeks prior to the scheduled defense. The student should work with their Thesis Advisor/Chair to identify a Dean's Representative, who will observe the thesis defense and submit documentation to the Graduate School. The student is responsible for meeting the deadlines of the Graduate School for scheduling of the defense. Prior to the defense, the student should fill out the "Approval of Thesis" form to be signed by committee members upon approval of the final thesis. The original signed copy of the final approval of the thesis must be turned in to the CMFT Secretary to be placed in the student's permanent file. Students must provide an electronic copy of the final thesis document to each committee member and to the department. Hard copies can be distributed upon request from committee members.

Thesis Components for TTU CMFT Master's Students

Adapted from guidelines from the Santa Barbara Graduate Institute and the book "How to prepare a thesis proposal" by Krathwohl and Smith (2005).

The rubric on the following pages is meant to help MS students understand what constitutes a quality thesis in the CMFT program at TTU. The thesis is a key component of meeting our student learning outcomes. Specifically, the thesis will demonstrate proficiency in the candidate's ability to conduct original research in the profession. See also the *APA Seventh Edition Publication Manual* for components and examples of research manuscripts.

Students should see TTU's guidelines for formatting and submitting thesis for additional technical information. It is also helpful to review other completed theses to see their formatting and content. In regard to components, there is some flexibility, especially for qualitative studies, which may deviate from the format below in presentation of results. However, in general students will do well to follow carefully these guidelines.

Although some overlap or building upon the student's previous independent work is acceptable (e.g., there may be similar areas of literature review in the articles), self-plagiarism is not. Students must be first author on all articles unless the student is unwilling to revise the manuscript for publication, at which time the chair may assume first authorship if they are willing to make the effort to submit the revised manuscript for publication; other students should not be co-authors. The chair or other committee members may be authors on some or all of the eventual submissions.

The traditional format usually consists of the elements described below, arranged in five chapters: Introduction, Literature Review, Methods, Results, and Discussion. Variations on the traditional format may be warranted by the study design (e.g., qualitative study) and approved by the thesis committee.

Title Page

_____ **Layout:** The student has precisely followed the title page layout requirements that are stipulated in the TTU thesis guidelines.

_____ **Title:** The title is succinct and descriptive of the research. If a quantitative study is proposed, the title includes the primary independent and dependent variables (e.g., The Impact of Structural Family Therapy on Generalized Anxiety Disorder).

Other Thesis Pages. These will consist of pages as designated by the TTU formatting guidelines (e.g., signature pages).

Abstract. The abstract is a short overview of the proposed research. It should include the following items.

_____ **Pagination:** The abstract starts on a new page.

_____ **Word count:** The abstract does not exceed 250 words.

_____ **Tense:** The abstract is written in the past tense (except for the proposal abstract).

_____ **Content:** The abstract summarizes the study:

_____ The abstract indicates what the thesis's research questions (if a qualitative or mixed-methods study) or hypotheses (if a quantitative or mixed-methods study) were.

_____ The abstract describes the participants (e.g., "30 post-menopausal women in their 40s who suffer from clinical depression and live in the Denver area").

_____ The abstract summarizes what methods were used to collect and analyze the data.

_____ The abstract summarizes the study's key findings.

_____ **Clarity:** The abstract is readable, coherent, well-organized, concise, and self-contained.

_____ **Key words:** Because the abstract is often indexed in research databases, the student may wish to embed key words in it so that researchers searching computerized databases can access it easily.

Table of Contents (TOC)

- _____ **Pagination:** The TOC starts on its own page and is labeled Table of Contents.
- _____ **Headings:** The TOC lists all of the headings and subheadings that appear in the thesis with their accompanying page numbers which are printed with a dot leader and are justified flush right.
- _____ **Heading Structure:** The TOC shows that the hierarchical organization of headings and subheadings in the manuscript is correct. That is, the manuscript does not have any instances of a single subheading within a section. This is shown in the TOC by there being at least two entries of the same level below any entry of a higher level. (If there is only one entry below an entry of a higher level, the student has not structured the sections and subsections of the manuscript correctly and needs to fix this in the body of the document.)

Introductory Chapter (One). The introduction needs to address each of the elements stipulated below (except where otherwise noted). The order in which the student incorporates the elements is up to his or her discretion, provided that there is a logical flow. The aim of the introduction is to provide an overview of the study and to engage the reader by why this research is interesting, important, and necessary.

- _____ **Pagination:** Like all chapters in the thesis, the introduction starts on the top of a new page.
- _____ **Headings:** The introduction, like all chapters in the thesis, is divided into meaningful subsections each with its own heading. (The only exception to this is that the very first section of the introduction should NOT have any heading.)
- _____ **Study Focus:** The introduction elucidates what the focus of the study is. The topic should be focused but not trivial.
- _____ **Study Importance:** The introduction explains why the focus of the research is a significant problem worthy of study. Specifically, it draws on the literature to provide a brief, well articulated, and engaging argument for the need for the research. (Please bear in mind that the fact that something has not been studied before is not a sufficient argument for why it should be studied. Also, it is generally preferable to study a topic that is important in its own right and not just a narrow issue about the MFT profession. For example, clinical research on a juvenile anxiety is preferred to just studying MFT supervisor stressors).
- _____ **Inquiry Framework:** The introduction clarifies what theoretical issue(s) the research will draw upon or illuminate. The thesis research needs to be driven by, grounded in, and make a contribution to theory.

- _____ **Terms:** If technical or other specialized terms are used (e.g., psychological or family systems concepts), it is helpful to have a section defining them (by drawing on the literature, NOT the dictionary). This is often done in a subsection at the end of this chapter.
- _____ **Inquirer's stake:** The introduction may (but is not required to) include a *brief* discussion on what the author's personal stake is in the research, that is, why this project is personally meaningful to him or her. This is particularly relevant for qualitative work.
- _____ **Study Boundaries:** Statement of study boundaries, presuppositions, trade-offs, and limitations, including what the study will not do.
- _____ **Summary:** By the end of the introductory chapter, the reader knows what the author studied (or is proposing to study). This is usually established by a Purpose of Study subheading that lists the research questions and/or hypotheses. Sometimes these complete hypotheses are placed at the end of the Literature Review chapter. If so, give a shorter version here and a more thorough version there.
- _____ **Inquiry Statement(s):** (For quantitative and mixed-methods studies): The hypotheses are clearly stated by indicating what the study's variables are and what the proposed the relationship is between or among them (e.g., I hypothesize a negative correlation between developmental trauma and capacity for intimacy).
- _____ **Inquiry Clarity:** The research questions and/or hypotheses make clear sense in light of the introduction.

Review of the Literature or Manuscript #1 Chapter(s) (Two). The literature review places the study in the context of previous research. As noted in the *Publication Manual of the American Psychological Association* (7th ed.), a scholarly review of earlier work provides an appropriate history and recognizes the priority of the work of others. Citation of and specific credit to relevant earlier works is part of the author's scientific and scholarly responsibility (2009). Students who choose a two article format will include a traditional literature review as the second chapter. For student who choose a three article thesis, Chapter 2 will be a modified lit review that can likely be submitted as a stand-alone article (conceptual, theoretical, or position paper).

- _____ **Structure:** The literature review is broken into subsections, each with its own heading. These usually correspond to the organization of the research questions/hypotheses.
- _____ **Sections:** The subsections are ordered in a logical fashion and have a clear relationship to each other (rather than reading as discreet, disconnected blocks of text).
- _____ **Justification:** The literature review, like the introduction, draws on select literature to *build a case* for why this particular study needs to be conducted.

- _____ **Selection Process:** The review focuses only on literature *directly pertinent* to the problem addressed in the research (e.g., is attached to the research questions/hypotheses). Chosen based on assessment of scope, relevance, and methodological quality of literature reviewed.
- _____ **Major Works:** The research discussed in the literature review is drawn from recent peer-reviewed journals (refereed journals), dissertations/theses, and books published by university presses (e.g., Univ. of Washington Press) or academic publishers (e.g., Sage, Routledge, Oxford). The balance weighs most heavily on journals because this is where the most up-to-date empirical findings are published. Secondary source citations are avoided where possible (e.g., According to Smith, Minuchin argued that . . .).
- _____ **Implications:** Summary of implications from the literature review (including theoretical positions and their support, empirical evidence, policy statements, and practical knowledge and experience) for (a) understanding the phenomena of interest, and (b) studying the phenomena of interest.
- _____ **Quality:** The literature review is interesting: it tells a story, rather than reads like a laundry list of previous research. Do not just review previous works, but organize literature conceptually.
- _____ **Summary:** Summary of literature review and transition to Method Statement.

Empirical Manuscripts or Methods and Results Chapters (Three and Four). Chapters three and four will consist of completed individual manuscripts ready for submission to a scholarly journal with significance in the profession of MFT. In addition to the elements of the introduction and literature review, the manuscripts will contain well developed methods, results, and discussion sections:

Theoretical and Epistemological Influences and Research Design

- _____ **Cohesion:** The methodology should connect to the questions asked, and should also indicate the researcher's theoretical and epistemological assumptions about the knowledge being proposed and generated.
- _____ **Methodological Orientation:** (For qualitative or mixed-methods studies.) The student indicates in which qualitative paradigm the study was grounded (e.g., phenomenology, grounded theory, feminist, ethnography) and why. (In addition to the student's theoretical justification, he or she is invited to note any personal, political and/or epistemological rationales for his or her choice of qualitative paradigm.)
- _____ **Methodological Findings:** This section cites literature to support the use of the above design or orientation. (Optional: Other designs or orientations the student considered but rejected are discussed and why he or she determined these would be less effective is explained.)

_____ **Research Design:** (For quantitative or mixed-methods studies.) The student indicates what research design he or she used—that is, what his or her logic of your inquiry was (e.g., experimental, quasi-experimental, comparative case study, cross sectional, longitudinal) and why. (In addition to the student’s theoretical justification, he or she is invited to note any personal, political and/or epistemological rationales for his or her choice of design.)

Participants and Sampling

_____ **Participants:** The student describes who he or she studied—that is, who his or her participants were— and indicates why. All characteristics of the sample that are relevant to the study are specified.

_____ **Selection Process:** The student indicates the method he or she used to select participants (e.g., purposive sampling, random sampling, convenience sampling, snowball sampling) and why he or she used this method.

_____ **Recruitment:** The student indicates how he or she gained access to participants (e.g., through a professional organization’s mailing list, posters advertising the study).

_____ **Sample Size:** The student indicates how many people participated in the study and provides a rationale for his or her sample size (whether large or small).

_____ **Support of Selection:** This section cites literature to support the use of the above participant selection methods.

Data Collection

Data Collection Method

_____ The student indicates what data collection method(s) he or she used (e.g., interviews, diaries, psychological tests, participant observation, archival research) and why.

Measures. (For quantitative or mixed methods studies.)

_____ The student indicates the quality of the measure (e.g., reliability, validity)

_____ The student indicates how he measured the predictor (independent) and outcome (dependent) variables.

_____ The student explains why he or she chose these specific operational measures if this has not been explained earlier and the rationale for their use is not self evident.

_____ The student indicates which research instruments (e.g., specific psychological tests), if any, were used. (The student provides citations for the instruments and includes them in the appendices).

_____ This section cites literature to support the use of the above measures.

Data Collection Procedures. (Required for experiments, otherwise optional.) Students who employed an experimental design need to describe in precise detail how the experiment was conducted. Those who conducted qualitative research or used a quantitative design other than an experiment may opt to include a data collection procedures section if the data collection methods section does not clarify all of the steps that were undertaken to gather the data.

_____ The student indicates all of the steps that were undertaken to conduct the experiment/collect the data.

_____ (For experiments): The procedures section is sufficiently detailed to allow another researcher to replicate the experiment.

Data Analysis Methods.

_____ **Analysis:** The student describes methods (e.g., constructivist grounded theory analysis of interviews, examination of field notes, structural equation modeling, dyadic data analysis) and procedures he or she undertook to analyze the data and indicates why he or she employed these methods and procedures.

Ethical Protection of Participants

_____ **Implications:** The student provides a meaningful reflection on the ethical implications of his or her study.

_____ **Anticipated Risk:** The student assesses what the level of risk (physical and psychological) was for those who participated in the study and states how he or she minimized this risk if its level was moderate to high.

Results

For quantitative studies:

- _____ **Structure:** The results section is structured around the hypotheses.
- _____ **Components:** For each hypothesis, the student provides the following information:
 - _____ The hypothesis
 - _____ The data analysis method used to test it (e.g., a Student's t-test, ANOVA)
 - _____ The outcome of the analysis (e.g., At $p < .05$, the analysis supports [or fails to support] the hypothesis that....), including the relevant statistics (e.g., the *t*-statistic, the p-value).
- _____ **Table content:** Tables and figures are self-descriptive and informative.
- _____ **Table relation:** The tables and figures are clearly related to the narrative in the chapter.

For qualitative studies:

- _____ **Structure:** The results section is structured around the research questions. Each question may be examined in its own section of the results.
- _____ **Supporting Themes:** Patterns, relationships, and themes reported as findings are supported by appropriate and sufficient evidence that is included in the body of the section. Additional evidence should be included in appendices (e.g., sample transcripts, researcher logs, field notes/memos, etc.).
- _____ **Reporting Data:** The section reports on all salient findings, including (and especially) discrepant cases and disconfirming data.

Discussion. The discussion section is where the student explains what they believe their findings mean and why their findings matter. In addition, limitations of the study are discussed as are recommendations for future research.

- _____ **Overview:** The discussion section begins with an *overview* of the results, which are summarized, evaluated, and interpreted with respect to the original research questions and/or hypotheses. (A table may be used to organize the findings.)
- _____ **Study Contributions:** The section addresses how the study contributes to scientific knowledge in the student's area of interest. More specifically, the section addresses the *theoretical* consequences of the study's results, that is, how the findings inform one or more specific bodies of theory.

_____ **Study Implications:** The section addresses the *practical* consequences of the study's results—that is, what practitioners (e.g., therapists, health care workers, policy makers) may take away from the research in order to improve practice or create beneficial social change.

_____ **Limitations:** The section provides a thoughtful reflection on the *limitations* of the study by indicating what methodological trade-offs were made in designing the research and the implications of those trade-offs.

_____ **Future Research:** The section provides prescriptions for *future research*. To identify avenues for future research, you may want to consider what questions your study has raised, what remains unanswered or unclear, and what you are curious about now. Further, you may want to consider the following: Knowing what you know now, what might you do differently if you were to design the study now?

Discussion Chapter (Five). Chapter five will consist of a global discussion intended to integrate the articles presented in the thesis. The section should relate the findings/assertions of the individual manuscripts back to the global unifying themes of the thesis research.

References. Reference lists can either be done separately for each manuscript, or as a complete list at the end.

_____ **Pagination:** The reference list starts on its own page and has the heading References.

_____ **Format:** The references follow APA specifications.

_____ **Citations:** The list includes all works cited in the thesis.

_____ **References:** All items listed as references are cited in the paper.

Appendices

_____ **Pagination:** Each appendix starts on its own page and is labeled. If there is only one appendix, it has the heading Appendix. If there is more than one, each appendix is labeled with a letter (i.e., Appendix A, Appendix B, etc.).

_____ **Copies of Key Documents:** Appendices include additional information or documentation relevant to the research (e.g., psychological instruments used, interview schedules, a blank copy of an informed consent form, interview transcripts).

Global Criteria

Writing, APA Style, and Organization. In addition to the elements described above, the thesis is evaluated on how well written it is and the degree to which the student follows APA style guidelines.

_____ **Writing Standard:** The document is written with a polished scholarly style.

_____ All sentences are grammatically correct.

_____ All paragraphs are self contained and focused on a single topic or point.

_____ The document's tone is appropriately formal.

_____ **Organization:** The manuscript is organized logically.

_____ All sentences follow each other logically.

_____ All paragraphs follow each other logically.

_____ Each section is limited to a single global concept.

_____ **Logical Flow:** The sections add up to an integrated "whole."

_____ Subheadings are used to identify the logic and movement of the document.

_____ Transitions between sections are smooth and coherent.

_____ **Quotations:** Excessive use of scholarly quotations is avoided (especially long quotes) because the student primarily relies on his or her own words to explain others' ideas.

_____ **Format:** Correct APA style is used throughout the manuscript.

_____ In-text citations are formatted correctly.

_____ Citations for paraphrased ideas are formatted correctly.

_____ Citations for short quotes are formatted correctly.

_____ Citations for long quotes are formatted correctly.

_____ Headings are formatted correctly.

Scholarly Contribution Learning Outcomes. Finally, the thesis is evaluated by the committee on its scholarly value. The four learning outcomes are as follows:

- _____ **Congruency:** The thesis's research question, research design, data collection methods, data analysis methods, and interpretation of findings are congruent with one another
- _____ **Contribution:** The thesis makes a significant contribution to the knowledge of the discipline.
- _____ **Research Skill:** The thesis demonstrates the student's capacity to carry out independent research.
- _____ **Publication:** The thesis contains material worthy of scholarly publication.

ORAL DEFENSE FOR THE Thesis
List of Major Steps as Required by the Graduate School

The Semester you plan to Graduate, do the following FIRST:

1. File your "Statement of Intention to Graduate" with official title of the thesis listed with the Graduate Dean.
2. Pay your associated fees at Student Business Services.
3. As is the case with every other semester, be sure that you are enrolled for thesis hours with each committee member.

After Completing your Thesis Draft

At least FIVE WEEKS before you plan to defend:

1. After first obtaining approval from your advisor, circulate copies of your draft to the other members of your advisory committee.
2. Allow two weeks for your committee to review your draft. During the second week, your committee should have feedback concerning your draft.
3. You may set the date for the defense ONLY after having the approval of all members of the advisory committee to do so.

Setting your Thesis Defense Date

At least FOUR WEEKS before you plan to defend:

1. Set a time and day for the defense.
2. The student and faculty should work together to assure that faculty are available to review written documents according to the policy stated here. (Sometimes faculty have out-of-town professional obligations).
3. Reserve a room for your defense. The CMFT Secretary can help you with this or you may make reservations through the Dean's office. The examination is a formal public affair, and should be scheduled in a room conducive to general attendance by faculty members and students.
4. Write your defense announcement and obtain approval from your advisor. Take one (1) copy to the CMFT Secretary for posting.
5. Submit your signed notification form and UMI abstract.

After Your Defense

1. Submit an electronic copy of the thesis to the graduate school.

2. Articles based upon the thesis should be written and submitted. Except under extraordinary circumstances, the student is first author and the advisor is second author on the main article to come from the thesis research. Authorship follows APA guidelines.

TEXAS TECH UNIVERSITY
DEPARTMENT OF COMMUNITY, FAMILY, AND ADDICTION SCIENCES
CMFT PROGRAM

APPROVAL OF THESIS PROPOSAL

_____	_____
Name	Date

Title of thesis proposal:

Committee Approval:

_____	_____
Chair	
_____	_____

xc: Student File

SECTION XI

PRELIMINARY REVIEW/FIRST-YEAR MEETING

**DEPARTMENT OF COMMUNITY, FAMILY, AND ADDICTION SCIENCES
COUPLE, MARRIAGE, AND FAMILY THERAPY PROGRAM**

FACULTY EVALUATION FORM

Student's Name _____ Date _____

Faculty Member _____

Capacity in which faculty member has known you:

Course # _____
Research Assistant _____
Teaching Assistant _____

I agree () do not agree () that diagnostic statements solicited may be kept confidential. If I agree, I understand that such statements may not be released to me at a later date without the expressed permission of those who wrote them. I further understand that if I do not agree to the confidentiality of the diagnostic statements, this will not in itself disqualify me from being considered for continuation in my degree program.

Signature _____ Date _____

Based upon any experiences you have had with this student, please rate the following on a 1 - 5 scale, 1 = lowest, 5 = highest.

RATING

- _____ 1. Capability of completing work in the CMFT program
- _____ 2. Degree of fit between student ability/interests and CMFT program
- _____ 3. Organizational/time management skills
- _____ 4. Writing skills
- _____ 5. Potential for contributing to the MFT Profession
- _____ 6. In your opinion, should this student be continued in the CMFT program (Yes, No, or comment below)

COMMENTS

Faculty Signature _____ Date _____

****Return Directly to the CMFT MS or PhD Program director**

Environmental Support Survey

This survey is to evaluate the environmental supports, including institutional and program resources, that contribute to your success as a student in our program. You should complete this form prior to your Preliminary Examination meeting.

Name: _____

Date: _____

1. The physical resources ((clinic rooms, waiting room, student workroom, computers, etc.) were sufficient to support my academic/clinical activities.

YES ☐ NO ☐ (If you check NO, we will discuss your concerns during the meeting)

2. The technological resources (computers, computer labs, software, Advanced MD, data collection etc.) were sufficient to support my academic/clinical activities.

YES ☐ NO ☐ (If you check NO, we will discuss your concerns during the meeting)

3. The clinical resources (clinic space, advanced MD, clinic support staff, etc.) were sufficient to support my academic/clinical activities.

YES ☐ NO ☐ (If you check NO, we will discuss your concerns during the meeting)

4. The academic resources (library facilities, writing center, technology support, financial aid office, student affairs, etc.) were sufficient to support my academic/clinical activities.

YES ☐ NO ☐ (If you check NO, we will discuss your concerns during the meeting)

5. The student support services (Student Disability Office, counseling services, academic advising, financial aid office, etc.) were sufficient to support my academic/clinical activities.

YES ☐ NO ☐ (If you check NO, we will discuss your concerns during the meeting)

SECTION XII

LICENSURE

WHERE CAN I GO WITH MY DEGREE AND LICENSE?

MS Degree

The TTU CMFT Master's Degree Program is accredited by the COAMFTE. Additionally, Texas Tech University is accredited by the Southern Association of Colleges and Schools Commission on Colleges. Your degree is nationally recognized and accepted, and once you complete the degree, you may identify yourself as having completed a Master's of Science Degree (John Doe, M.S.).

If you are interested in doctoral studies, your MS degree should transfer credits toward a doctoral degree dependent on the field of study you pursue. If you are interested in pursuing a doctoral degree from a COAMFTE accredited doctoral program, your MS degree is designed to meet the Foundational Curriculum requirements set forth in Version 12.5 of the COAMFTE accreditation standards and required as part of earning a doctoral degree from an accredited program.

The TTU CMFT MS degree is designed to meet the licensure requirements for the LMFT-Associate's license in Texas. Some states, not Texas, continue to allow graduates of accredited master's degree programs to forgo supplying specific curriculum/course information as part of the licensure process. However, due to changes in accreditation standards, many states require complete transcripts and evidence of course content for licensure regardless of accreditation status. Because licensure is regulated by individual states and provinces, it is possible that a state other than Texas may have additional requirements not provided as part of the standard CMFT curriculum at Texas Tech. Students considering pursuing licensure in other states or provinces are strongly encouraged to consult with their advisor and visit the licensure board for the state of interest. TTU CMFT MS students received this information in writing during the interview day, before the start of the program (Licensure Portability Disclosure Form). Some resources that may be helpful are provided in the resource section of this document.

Students enrolled in the TTU CMFT master's degree program are strongly encouraged to take the national licensure exam during the final semester of study (even if you plan to seek licensure in another state) and apply for the LMFT-Associate's License as soon as the degree is conferred. Students should check their intended state of practice for examination requirements.

RESOURCES

AAMFT link to state licensure boards

http://www.aamft.org/iMIS15/AAMFT/Content/Directories/MFT_Licensing_Boards.aspx?hkey=2f66f29c-ca16-4a58-8fff-30d176311f87

Third Party Aggregator of MFT Licensure Requirements – **THIS IS A VERY USEFUL SITE!**

<http://www.mft-license.com/>

MFT LICENSURE IN TEXAS

AS SOON AS YOU ARE ELIGIBLE (See attached table) YOU MUST APPLY FOR LICENSURE AT THE STATUS FOR WHICH YOU ARE ELIGIBLE (Licensure, Associate Intern License, Provisional License)

You can practice MFT without a license as long as you practice MFT only as part of your master's or doctoral program. Practice as part of your program is defined as (a) practice in the Family Therapy Clinic or Children's Behavioral Health Clinic, (b) practice in service contracts accepted as a part of the program, e.g., LCJJC, CAC, (c) practice as part of an official external practicum placement or internship. For the last category, you would have an external practicum agreement or internship agreement on file that was approved by the program director and all other relevant parties. These are, of course, the same hours the program "counts" towards program requirements.

The appropriate forms are available on-line at <https://www.bhec.texas.gov/>. For the supervision report, ask the Clinic Coordinator for a summary of contact and supervision hours, complete the form, attach the relevant computer printout and give to the CMFT Program Director for verification and signature. For hours earned outside the program, send another

supervision form to each of your old supervisors. The hours “in the computer” are our official records. As always, it is your responsibility to make sure they are accurate and up-to-date. The Clinic Director must approve any changes. The CMFT secretary is a notary and can witness your forms. A model “Supervisory Agreement Form” is included in your Program Manual.

Comparison of Requirements for MFT Credentials			
QUALIFYING DEGREE	MASTERS IN MFT (Accredited Program)	MASTERS IN OTHER MENTAL HEALTH PROFESSION	NON-QUALIFYING MASTERS DEGREE
NUMBER OF CONTACT HOURS AT START OF PHD	500	0 – 500	0
WHEN TO APPLY FOR TEXAS ASSOCIATE LICENSE	During the last semester of master’s study At entry to Ph.D. Program	When complete Master's equivalent MFT coursework + Practicum	At completion of Ph.D. degree
PRACTICUM CONTACT HOURS IN PROGRAM	MS – 500 PhD - 250	500	500
WHEN TO APPLY FOR SUPERVISOR INTENT TO TRAIN	At entry into Ph.D. Program	At completion of 500 hours in Ph.D. Program	At completion of 500 hours in Ph.D. Program
REQUIRED CONTACT HOURS IN INTERNSHIP	N/A	500	500
WHEN TO APPLY FOR AAMFT CLINICAL MEMBERSHIP	Upon receipt of LMFT licensure	Upon receipt of LMFT licensure	Upon receipt of LMFT licensure
WHEN TO APPLY FOR TEXAS FULL LICENSURE	Two years post masters + 1500 direct & 1500 indirect + exam	Two years post masters + 1500 direct & 1500 indirect + exam	Two years post Ph.D. + 1500 direct & 1500 indirect + exam
WHEN TO APPLY FOR LICENSURE IN OTHER STATES	[Issue here is whether other states will take clinical membership or must document hours past the qualifying degree]		
WHEN TO APPLY FOR APPROVED SUPERVISOR			
MINIMUM HOURS TO TEXAS LICENSURE	1500	1500	2000

Note. AAMFT and the Texas Licensure Board have been taking masters degrees in HDFS, Sociology, Psychology, Counseling, Social Work, etc. as "mental health degree." The problem has been in degrees like history and English, and some MDiv's. The appropriateness of the degree will be evaluated at the time of application.

Texas Tech University
Graduate Programs in Couple, Marriage, and Family Therapy

Licensure Portability Disclosure

The Couple, Marriage, and Family Therapy Master's program meets the educational requirements for Associate Marriage and Family Therapist licensure in the state of Texas. Students seeking licensure in other states or provinces should check the regulatory bodies for potential differences in MFT licensure requirements.

I, _____ (student name) acknowledge that I was informed by the Texas Tech University Couple, Marriage, and Family Therapy Master's program, prior to the start of my degree about the potential for different licensure requirements in states other than Texas. I have been informed that if I plan to seek licensure in a state or province other than Texas, that I am responsible for seeking information from the state of interest's regulatory body to ensure that my degree will meet licensure requirements after graduation. I understand that if I seek licensure in a state or province, other than Texas, I might be required to complete an additional course or meet other state or province-based clinical requirements; which could delay my eligibility for associate level licensure after graduation from the Texas Tech University Couple, Marriage, and Family Therapy Master's of Science degree program.

Student's signature: _____

Date: _____

SECTION XIII

AAMFT MEMBERSHIP

AAMFT Membership

It is expected that all students become student members of AAMFT within their first semester of joining the TTU CMFT program (if they are not already). Guidelines for applying are found on the website at www.aamft.org.

It is also desirable that students will be active in the TTU Student Association of Marriage and Family Therapy (SAMFT) - student organization of AAMFT at TTU.

SECTION XIV
HUMAN SUBJECT RESEARCH

HUMAN RESEARCH PROTECTION PROGRAM

All research involving human subjects, whether led by faculty or independently pursued by students is governed by the Human Research Protection Program (HRPP) and the Institutional Review Board. All students must be familiar with and follow the requirements for proposal submission and reporting established by the HRPP, BEFORE starting any research that involves human subjects or data collected from human subjects. It is expected that you will work in conjunction with faculty to ensure that you are following appropriate HRPP protocols. The policies and procedures for human subject research are available at:

<http://www.depts.ttu.edu/vpr/irb/policies.php>

SECTION XV
PROGRAM GOVERNANCE

TTU CMFT Graduate Programs Program Governance

The faculty of the CMFT Graduate Programs are dedicated to a model of program governance that is collaborative where possible and honors the voices of all the program faculty and students. In almost all cases, decisions about program governance are made through program faculty consensus, with input from students and Communities of Interest.

Program Director: The CMFT Program Directors are the facilitative lead for the CMFT graduate programs and point of contact for the respective programs, clinical, or faculty related concerns. If you have a concern or suggestion, you can always bring it to the program director directly. The responsibilities of the program directors include:

Academic Program Director

- Coordinate weekly faculty meetings addressing issues relative to the CMFT programs
- Coordinate admissions process for doctoral and master's applicants to the graduate programs
- Receive and distribute messages to students and faculty related to position openings, internships, training opportunities, Program Bulletins, and other pressing matters
- Meet with students from both Master's and Doctoral programs to address and resolve issues related to program of study, cohort concerns, qualifying exams, and so forth
- Coordinate the grading of qualifying examinations/portfolios
- Field regular inquiries from prospective graduate students and position applicants (national and international)
- Coordinate management transition issues related to faculty and staff turnover
- Support all CMFT graduate students and their faculty advisors in coordinating their programs of study, committee formation, internships, and graduation plans
- Coordinate regular review of program data, resources, and teaching/learning practices

Department, College, and University Interaction

- Liaison with the CFAS Department Chair
 - Assist with Annual Faculty Reviews
 - Meet as member of the Executive Committee (2x monthly)
- Serve as CMFT liaison with College and Graduate School
- Respond to immediate needs from Department, College, or University
- Works with department chair and CFAS coordinator to manage undergraduate degree

National and State Interaction

- Participate in AAMFT program director's listserve
- Attend the MFT Doctoral Educator's Summit (or similar MFT academic meetings).

- Lead national and state representation at conferences (including research meetings for Texas *association of MFT, program director's meetings at AAMFT, etc.*)

Accreditation

- Coordinate continual accreditation of CMFT doctoral and master's programs
- Correspond with Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) to address ongoing issues related to changes and concerns
- Coordinate submission of annual reports and reaccreditation site visits
- Coordinate the response to accreditation concerns with program functioning
- Coordinate the preparation and submission of annual reports and the Self Study

Business Management

- Supervise and work with the Lead Processor – CMFT Staff for the following:
 - Coordinate all course content and sequencing
 - Coordinate recruitment, admissions, and retention efforts
 - Maintain the program web page
 - Coordinate the tracking of accreditation related data

Family Therapy Clinic (FTC) and Children's Behavioral Health Clinic (CBHC)

- Coordinate with the Clinic Director in the following responsibilities:
 - Coordinate Clinic data base and research projects (including IRB renewal)
 - Manage clinic finances
 - Coordinate supervision of graduate and undergraduate students in the clinic
 - Maintain Clinic data base and address issues related to service delivery
 - Update and enforce FTC and CBHC policies and procedures manual
 - Coordinate community initiatives, (e.g., education groups, aftercare programs, internship placements) outreach, and networking
 - Assists with clinic emergencies and client concerns
 - Maintain compliance with ethical and professional standards of care regarding client confidentiality, record keeping, and professional conduct of student therapists
- Serve as co-director of the Center for Family Systems Research and Intervention.

Clinic Director: The CMFT Clinic director is the primary point of contact for issues related to clinic operation, clinical issues, and internship/externship issues. The Clinic Director works closely with the Program Directors and all program Faculty to ensure the TTU Family Therapy Clinic and Children's Behavioral Health Clinics function to support the Program goals and SLOs. Responsibilities of the CMFT Clinic Director include:

Clinical Director of the Family Therapy Clinic and Children's Behavioral Health Clinic

General Operations:

- Maintain FTC and CBHC recording equipment and clinic facilities
- Update and maintain the FTC/CBHC Policies & Procedures Manual
- Train incoming students on clinic policies and recording equipment
- Address student concerns when primary faculty supervisor is unavailable
- Maintain compliance with ethical and professional standards of care regarding client confidentiality, record keeping, and professional conduct of student therapists.

Clinic Finances:

- Submit annual budget revisions (advertising, insurance, student travel, etc.)
- Track clinic income and expenditures
- Deposit clinic fees/process account transfers
- Manage billing for outside contracts (i.e., Aftercare)

Staff Management:

Clinic Coordinator position

- Case assignment/intake scheduling
- Maintain MCSR database and syntax to track student hours
- Organize program special events
- Maintain client records/scanned files

Undergraduate HDFS/CFAS practicum students (~250hrs/semester)

Monitor therapy rooms/supplies and forms
Room usage/scheduling documentation
File scanning and storage
Special projects as assigned

Database Management:

- Maintain the Titanium software for client file management
- Maintain the clinical assessment/research database
 - Purchase software & measurement licenses/renewals
 - Write and maintain syntax to score assessments
 - Facilitate access to data for student and faculty research
 - Implement outcome based procedures/data collection

Internship Coordination:

Doctoral Internship Coordination

- Facilitate student documentation/enrollment
- Audit student files for current internship agreements and evaluations
- Visit internship sites periodically to elicit feedback from partners
- Foster relationships with future internship sites

Masters 'Externship' Placement Coordination

Facilitate student placements
Process internship documentation
Maintain contact with site/agency contact

Clinic Development and Community Liaison:

- Public Relations/Marketing/Community outreach and networking
 - Participate in health fairs, campus resource events, and other community events
 - Update and coordinate outreach and placement of promotional materials
 - Distribute to referral sources and attend local organizational meetings
 - Assess and expand current and new referral sources
- Organize annual continuing education training events
Generate contracts (corporate, service delivery grants)
 - Expand revenue generating sources

Program Faculty: The program faculty are expected to take active roles in the ongoing governance of the program. Although the Program Director and Clinical directors have specific coordination roles, all the faculty have an equal voice in the governance of the program. Wherever possible, decisions about teaching/learning practices, curriculum, clinical training, supervision, hiring, admissions, allocation of resources, and student issues are made by consensus of the program faculty. Governance responsibilities of the program faculty include:

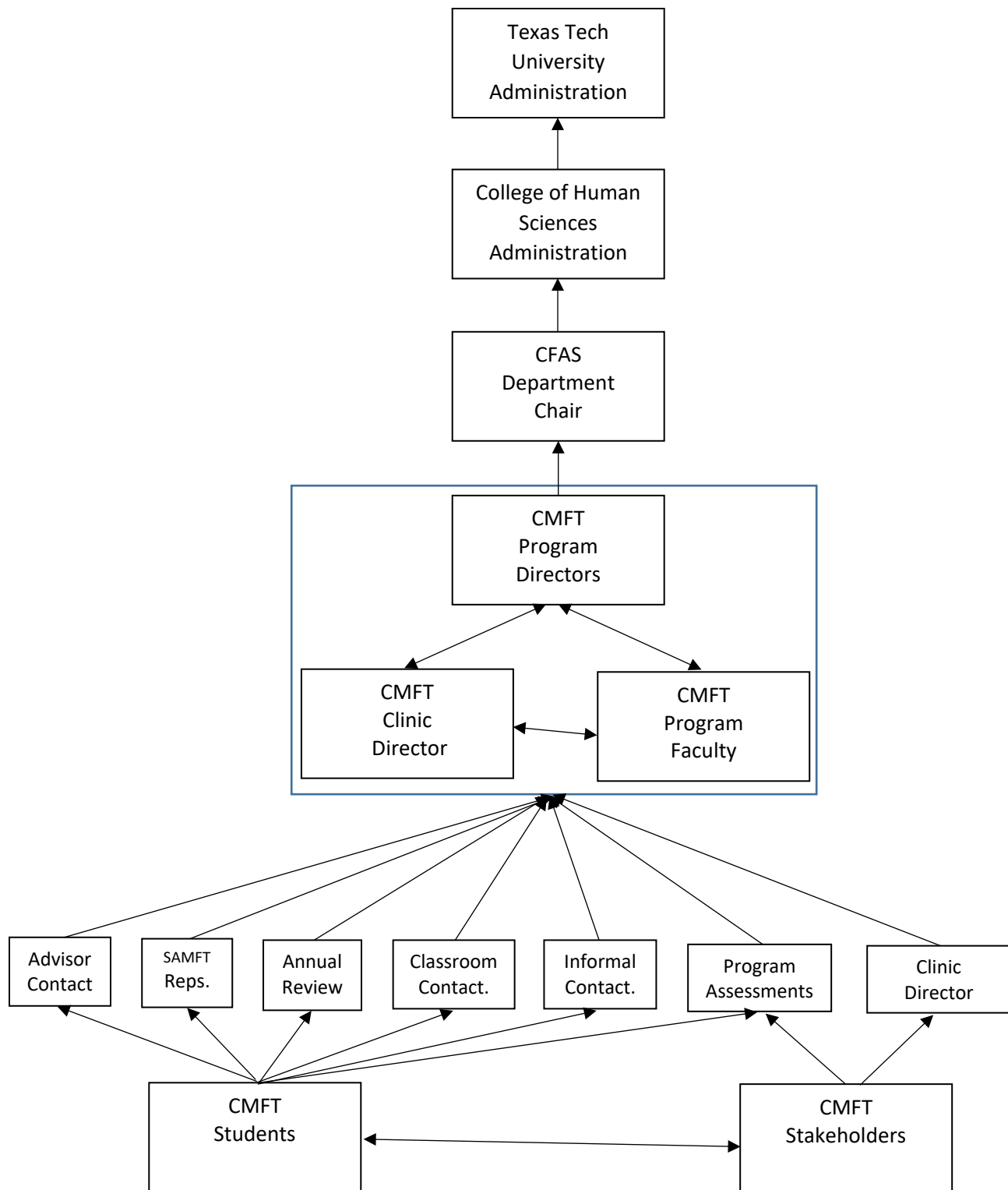
- Attend and participate in weekly CMFT faculty meetings.
- Participate in the review of application for admission, the interview for admissions process, and the selection of students for the program.
- Be available and open to hearing concerns or suggestions from students and communicating the concerns or suggestions to the program faculty as a whole.
- Participate in the grading of qualifying examinations/portfolios.
- Function as an advisor for students in the program.
- Participate in regular review of program goals, outcomes, resources, teaching/learning practices, and curriculum; be an active voice in shaping the direction of the program; and be willing to contribute actual work product (e.g., developing portfolio components, curriculum suggestions, drafting program policies and procedures, etc.)
- Participate in the production of annual reports and self-studies for accreditation.
- Participate in program level committees formed to address program governance, curriculum, accreditation, or other related issues.
- Function professionally in ways that support the program's goals related to research, clinical training, supervision, teaching, diversity, and addiction sciences.

Students: We value the input of our students and want you to have an active role in the governance of the program. You are always welcome to discuss ideas or concerns with any of the program faculty and should expect them to be responsive. In addition to informal input, there are three formal mechanisms by which you can be directly involved in the governance of the program:

- Take the time to thoughtfully complete the Practicum Self Evaluations, Supervision Practicum Self-Evaluations, Program Exit Evaluation, and Alumni Survey. Your feedback is used to shape the program and to determine if we are meeting the program goals. We want to hear what you really think!
- Join the Student Association for Marriage and Family Therapy (SAMFT). The student organization helps coordinate student participation in interview days with potential students, student participation in the faculty hiring process, and program social gatherings. SAMFT also elects student representatives. The student representatives attend at least one faculty meeting a semester during which outcome data is reviewed and function to share ideas, suggestions, or concerns about the program with the program faculty. They also collect feedback from students each semester and present this to the faculty.
- Offer honest, considered feedback during your annual review. All students participate in the annual review process in which the faculty evaluate your progress in the program. However, the annual review is also intended as an opportunity for you to give feedback to program faculty about your experience in the program. We want to hear your ideas, concerns, and suggestions for how the program can be better. Some things we will ask about are whether the physical, technological, and instructional resources are sufficient for you to meet program goals. We will also ask about whether the teaching/learning practices and curriculum of the program are helping you to meet the program goals.

Communities of Interest: We value the input of our Communities of Interest and want their input to influence the governance of the program. We maintain informal dialogue with all of our Communities of Interest and welcome their feedback and suggestions. In addition to informal feedback, a formal data collection process exists:

1. **Community Clinical Training Sites/Doctoral Internship Placement Sites** are regularly asked to complete the Internship/Stakeholder Evaluation. The survey has two components. The first portion of the survey requests information on student intern/extern performance specifically related to program goals and SLOs. The second portion of the survey requests more general feedback about the program and the relationship between the program and the Community of Interest. Data from the surveys is used as part of our assessment plan to evaluate program goals, curriculum, and teaching learning practices.
2. **Students and Program Graduates.** Data is collected from students using the Practicum Self-Evaluation, Supervision Practicum Self Evaluation, and Program Exit Evaluation. Data is collected from graduates using the Alumni Survey. The surveys collect data related to program SLOs, available resources, and program climate.
3. **Program Faculty.** Data is collected from Program Faculty using the Practicum Evaluation, Supervision Practicum Evaluation, and Program Director Evaluation. The evaluations collect data related to the program SLOs, resources, program climate, and program director effectiveness.



COLLEGE OF HEALTH and HUMAN SCIENCES
Department of Community, Family, and Addiction Sciences

