

MFT Program Handbook

2018 – 2019 Cohort



Marriage and Family Therapy Specialization¹

Department of
Human Development & Family Science

Oklahoma State University
Stillwater, Oklahoma

¹The Marriage and Family Therapy Program at Oklahoma State University is accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), 112 South Alfred Street, Alexandria, Virginia 22314, (703) 838-9808, coa@aamft.org.

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Introduction

Welcome and Congratulations on your continued academic success!

Graduate school represents a new educational experience, and students are faced with a large amount of complex information. The OSU MFT Program Handbook serves as a resource to help guide students through this experience. This handbook describes expectations from the point of admission to degree completion and provides information about the program's policies and procedures.

All students receive a copy of the OSU MFT Program Handbook upon entrance to the program and an electronic version of the Handbook is provided to students in the form of an easily accessible pdf on the program's website and server.

It is important for you to be familiar with this handbook and to review it periodically as it is your responsibility to ensure that you are meeting all requirements for continued progress and eventually graduation.

Program Overview

The Master of Science Degree Specialization in Marriage and Family Therapy (MFT) in the Department of Human Development and Family Science (HDFS) at Oklahoma State University (OSU) is designed to provide those who are beginning careers in marriage and family therapy with the basic knowledge, skills, and professional identity essential to the practice of marriage and family therapy at the entry level. Students in this program will be involved in an educational experience that will qualify them to practice in controlled settings, while continuing education, personal growth, and professional experiences are accumulated. Consistent with the guidelines established by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), the curriculum includes coursework in human development, marital and family studies, marriage and family therapy, professionalism and ethics, research and statistics, and supervised practicum. Students are required to follow an organized sequence of study, in which academic and practicum coursework are integrated. A minimum of 60 graduate credit hours is required.

MFT Specialization Mission Statement

The Master of Science (M.S.) specialization in marriage and family therapy at Oklahoma State University prepares students to competently assess for individual and family risk and to foster resilience and positive transformation in the face of adversity from a systemic perspective. The program emphasizes parallel development in the areas of clinical skills, self-awareness, and the establishment of an integrated systemic approach to family therapy, with a progressive synthesis of the three areas as the student develops basic competence in each area.

Values & Objectives

Graduates of the program will:

1. Demonstrate clinical competence with assessment, admission to treatment, paperwork and case management, therapeutic interventions, and ethical decision-making.
2. Have a clear, integrated systemic approach to family therapy that consistently informs their assessment and treatment decisions and practices.
3. Have a high degree of self-awareness in both therapeutic and professional contexts and will be open and committed to continual self-evaluation in the context of diverse systems.
4. Be knowledgeable consumers of research, demonstrating competence in evaluating and summarizing research related to the field of MFT.

In the program no single theory of marriage and family therapy is presented as THE approach. Rather, students are exposed to a broad range of marriage and family therapy models and encouraged to develop their own systemic approach to treatment. The process of developing proficiency as a marriage and family therapist is viewed as an ongoing integration of growing awareness and development of self, growing skillfulness in the application of various therapeutic methods, and growing knowledge and understanding of individual/family dynamics, diverse family forms, problems, resources and possibilities for change.

The specialization in Marriage and Family Therapy at OSU is accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) of the American Association for Marriage and Family Therapy (AAMFT). This will allow students to apply for Clinical Membership in AAMFT and take the Oklahoma, and most other states' MFT licensure exam (some states require additional coursework due to unique requirements) after they have completed the required number of post-graduate hours practicing family therapy. It is the student's responsibility to explore licensure in the state she/he plans to practice Marriage and Family Therapy given that licensure requirements change from time to time, and differ from state to state.

Roles and Responsibilities

MFT Program Coordinator

The Program Coordinator is responsible for oversight of the curriculum and the overall clinical training program, planning and growth of the Center for Family Services (CFS) facilities in conjunction with the CFS director, and for both maintenance and enhancement of program quality. The Program Coordinator is ultimately responsible for the MFT program through adherence to the MFT program mission, and the goals and objectives related to the maintenance and enhancement of the mission.

The Program Coordinator is additionally responsible for the program's compliance with MFT State of Oklahoma licensure law, maintaining and/or achieving COAMFTE accreditation standards, and the overall success of the program as determined by a joint group of the MFT faculty, the OSU HDFS Department Head and the Human Sciences Dean. Each student who satisfactorily completes an MFT Masters level program is to receive a formal declaration from the Program Coordinator attesting to that fact. The Program Coordinator will not attest to a student's completion of a Masters level program without adequate records demonstrating that all requirements for graduation have been met.

CFS Clinic Director

This person is responsible for seeing that services provided within the scope of the Center for Family Services (CFS) meet appropriate ethical, legal, and competent service standards. S/he is responsible for the clinic operations maintaining economic viability, and for the services provided being consistent with the policies of the MFT program and greater HDFS department. S/he approves all activities to be conducted in the clinic on the basis of said activities meeting the stated requirements. This authority may be delegated to temporarily designated faculty or clinic staff.

Clinical students and staff are responsible to the Clinic Director for all clinic activities in the CFS not otherwise specified. The clinic director and ultimately, the MFT Program Director, can authorize changes or waivers of student responsibilities in the clinic. The Clinic Director, in conjunction with the MFT faculty, is responsible for maintaining the clinic facilities upkeep and planning toward growth or development of the facilities, services provided, or staffing and resource needs to meet said growth and development.

MFT Faculty

There are currently four core MFT faculty members in the HDFS department at OSU. You will work closely with the MFT faculty as you pursue your degree. The MFT faculty will teach the majority of your courses, will provide the majority of your clinical supervision, and one of the MFT faculty members will serve as the chair of your committee. Following is a brief introduction to each of these faculty members.

Matt Brosi, Ph.D., LMFT is a graduate of the COAMFTE accredited Ph.D. program at Michigan State University. Dr. Brosi came to OSU in 2004. His research interests focus on men's issues/fathering, co-parenting, divorce, and remarriage, as well as co-parenting relationship education and evaluation. Dr. Brosi serves as the MFT Program Coordinator.

Kami Gallus, Ph.D., LMFT is a graduate of the COAMFTE accredited Ph.D. program at Texas Tech University. Dr. Gallus came to OSU in 2007. Her research interests are systemic dynamics and intergenerational transmission of trauma, systemic factors of posttraumatic growth and resiliency, women’s mental health and childbearing issues, and quality of life for individuals with intellectual and developmental disability and their families.

Nathan Hardy, Ph.D., is a graduate of the COAMFTE accredited Ph.D. program at Kansas State University. Dr. Hardy came to OSU in 2016. His research interests focus on change processes in couple therapy, relationship education delivery and curricula, the longitudinal course of healthy marriage, couple’s sexual dynamics, systemic progress monitoring, and effective clinical training in MFT.

Todd Spencer, Ph.D., is a graduate of the COAMFTE accredited M.S. program at Oklahoma State University and received his Ph.D. in Human Sciences from Oklahoma State University. His research interests focus on reconciliation, discernment counseling, fatherhood and co-parenting, and couple relationship education development. Dr. Spencer currently serves as the Center for Family Services Clinic Director.

Clinical Staff

A “Clinical Staff” designation must be made by the Program Coordinator in conjunction with the MFT faculty. This designation must be carried in order to provide CFS services, supervise clinicians operating in the CFS, or otherwise have access to view or to provide services, training or supervision within the scope of the Center for Family Services clinic operations. CFS support personnel would need to be given clinical staff designation before managing intakes, working with clinic data, etc.

A temporary designation may be given to a visiting faculty member, clinician, or other appropriately qualified person for purposes fitting with the MFT program mission and goals. The temporary designation may be given only by the MFT Program Coordinator, their appointed designee, or the CFS Director in communication with the Program Coordinator.

Graduate Chair and Advisor

During your first semester, the MFT Program Coordinator will serve as your temporary chair. However, during your second semester you will need to choose a permanent chair. Your chair is the faculty person who will serve as your primary contact. In other words, s/he oversees your academic program. The following descriptions taken from the graduate college website describe the distinct roles of the chair and the advisor:

The Chair’s primary duty is to monitor the progress of the student toward the degree. S/he need not necessarily be the advisor, but should have a strong familiarity with the academic requirements appropriate to the degree sought. The chair must hold an OSU faculty appointment, normally a tenure-track appointment in the academic unit in which the degree is housed (i.e. MFT core faculty member). The chair’s duties include convening meetings of the advisory committee as appropriate; ensuring compliance with policies, procedures and requirements; overseeing the plan of study and research document submission processes; and ensuring that the research topic undertaken is appropriate to satisfy degree requirements, with the results openly accessible. If the chair is not also the

advisor, s/he should serve as a liaison with the advisor with regard to progress of research in fulfillment of degree requirements.

The Thesis Advisor's primary duty is to mentor the student in regard to the conduct of research necessary for the completion of the degree for thesis track students. As a result, it is expected that the advisor establish the closest working relationship with the student. S/he may also serve as the chair of the thesis committee if an MFT core faculty member. The advisor must be a Member of the Graduate Faculty, but need not hold an OSU faculty appointment. The advisor's duties and privileges include guiding and counseling the student in, and reporting to the advisory committee on, the research effort, and ensuring compliance with applicable research regulations. It is the advisor's responsibility to mentor the student toward a research project that is original and worthy of the degree sought.

Note: If you choose the **non-thesis track**, your chair and advisor will be the same person and all three members of your committee will be MFT faculty. If you choose the **thesis track**, your committee chair will be an MFT faculty, but your advisor and other committee member could be other graduate faculty in the college, depending on research topic.

Student Professionalism

Given the nature of the MFT program as a professional degree program and the close connection with student work being completed within the CFS, students are expected to act in accordance with the CFS Policies and Procedures Manual, the AAMFT Code of Ethics and the Oklahoma LMFT Act and Regulations in addition to the MFT Program Handbook. The CFS Policies and Procedures Manual specifically outlines student rules and procedures for work with clients, case management, confidentiality responsibilities, use of OSU and CFS computers, parking, etc. Violation of the policies outlined in the CFS Policies and Procedures Manual will result in dialogue with the MFT faculty to address the violated policies and/or additional sanctions related to the status or nature of student involvement with the CFS and/or MFT program.

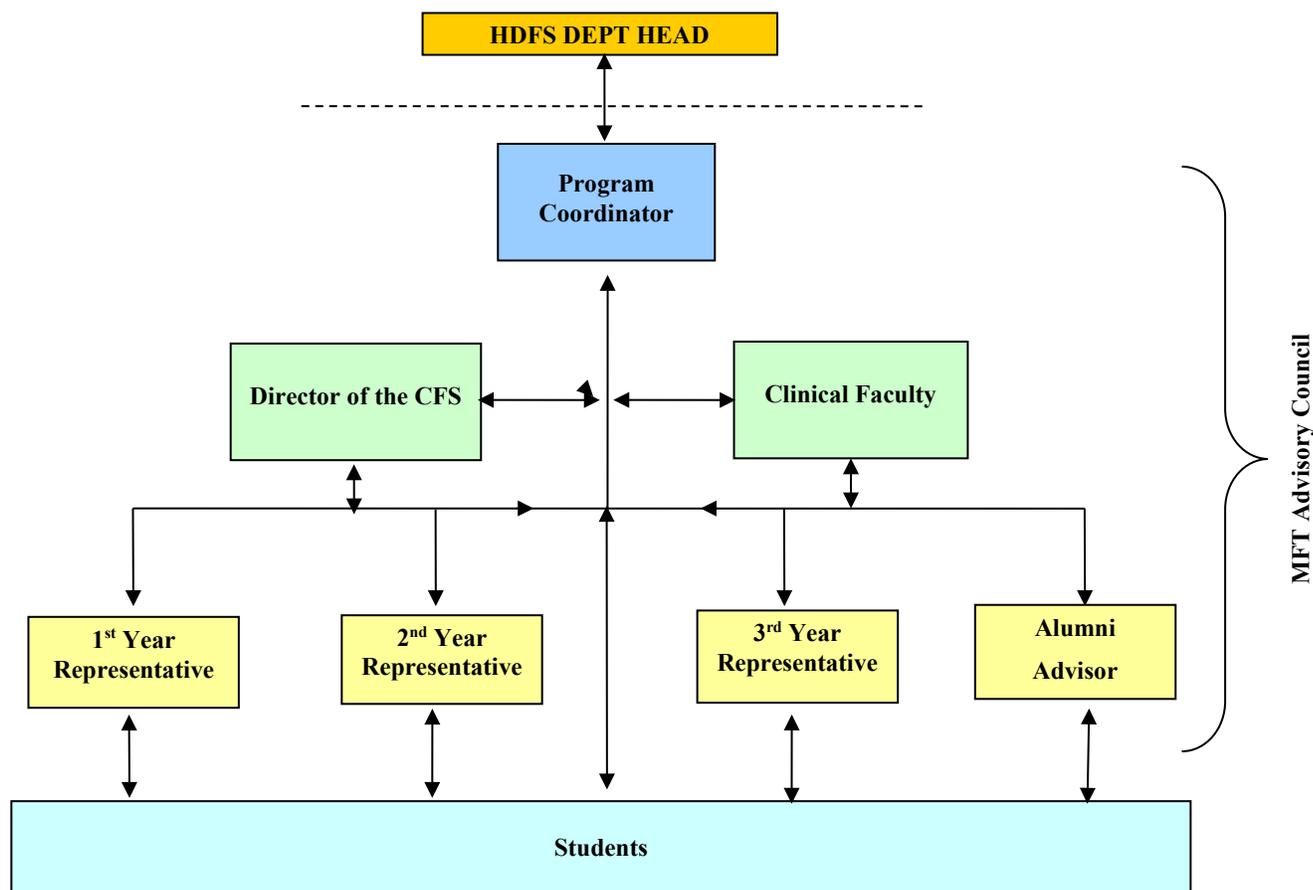
Given the degree of close relationships with the MFT program, it is expected that students maintain a high degree of professionalism in their interactions with fellow colleagues, faculty, student interns, non-MFT faculty, etc. Though the faculty often choose to work collaboratively with students, students should respect the authority and hierarchy within the program as well as the liability under which their clinical work falls. Thus, students should understand that the faculty have ultimate responsibility for student case management, research advisement, and assistantship management. Students should also be aware that their behaviors in the classroom have an effect on faculty instruction and peer learning and should adhere to each faculty members' preference governing the use of technology, social media, etc. during class, MFT program meetings, events, etc. Any lack of professional behavior within the program will result in direct feedback from faculty with additional sanctions (e.g., removal from clinical activity, formal sanctions through the MFT program, HDFB department, College of Human Sciences, OSU graduate college and/or OSU) for continued unprofessional actions.

As a professional in the MFT program, it is important to maintain a professional appearance. Although personal and class time allows for casual wear (e.g., shorts, tank tops, flip flops, sweatshirts, etc.), it is expected that you will dress professionally and in accordance to the CFS dress code outlined in the CFS Policies and Procedures Manual during times when clients are present in

the CFS (the dress standard applies even when you are just observing cases). All students are expected to minimally adhere to business casual guidelines. Specifically, male students are not mandated to wear neckties; however, a collared shirt is preferred with slacks. For female students, please avoid unprofessional clothing (e.g., low cut shirts, short skirts, see through tops; open-toed shoes are acceptable with the exception of flip-flops). When observing, please attempt to wear dark colored clothes to minimize being seen behind the mirrors. Also, please respect all CFS space and behave in a professional manner during supervision times, staff meetings, etc. in terms of keeping your shoes on and feet off the furniture.

Overall, it is expected that students maintain a high degree of academic preparedness for classes as well as supervision (e.g., completed weekly readings and assignments, materials necessary for note taking and active involvement). Students should also be timely for class meetings, clinic meetings, supervision, and other events that are required by the program, department, or college. Your behavior is a direct reflection of this program, its faculty, the department, and your profession and the utmost attention to these details is imperative. Finally, as part of an intense clinical program, there will be guest speakers and additional program meetings outside of class time. You will be required to attend these meetings but you will be given appropriate notice to make arrangements to attend. Any absence from required MFT program meetings will need special approval well in advance of the scheduled meeting by MFT faculty.

MFT Program Organizational Flow Chart



Students participate in the governance of the program through representing their cohorts on MFT Council, providing input to cohort representatives who serve on MFT Council, completing annual surveys, and providing direct feedback/requests to faculty.

MFT Advisory Council

The MFT Council is made up of the MFT faculty, student representatives from each active cohort, and an alumni representative. The council will meet regularly to discuss student and program needs. Students in the program are encouraged to share any concerns, feedback, or recommendations with their representative so that their representative can relay the information to the MFT council in their regular meetings. Notes from council meetings will be made available to all students in the program following the meetings.

Student and Alumni Representatives

One student from each cohort will be elected (by the members of their cohort) during the first semester in the program to serve as a cohort representative on the MFT Council. Student representatives serve for a minimum period of one year. Student representatives will attend MFT council meetings and bring feedback, concerns, suggestions, and questions to the meeting from the members of their cohort. In addition, one former student will serve as the alumni representative to the council. The alumni representative will be selected and invited by the Program Coordinator to function in this role.

Program Components & Degree Requirements

Major requirements for successful completion of a Master of Science degree with a specialization in Marriage and Family Therapy include:

- Completion of all **required coursework** with a B average or better.
- Completion of all **clinical requirements** with a minimum of 500 hours of face-to-face client contact, and with 200 of these hours being relational (with couples and families).
- Demonstration of development of the **program core competencies** (see *MFT Program Educational Outcomes: Student Learning Outcomes*).
- Completion of the **thesis or non-thesis track requirements**.
- Passing all elements of the **capstone project requirements**.

Additional Instruction and Training Requirements

In addition to coursework students will have other opportunities to receive additional instruction and training. Students are required to attend weekly CFS clinic nights (Wednesday and Thursday evenings) and team meetings, and monthly CFS staff meetings. In addition to addressing CFS business, during the monthly CFS meetings guest speakers will be invited to teach students about specific clinically relevant topics. Students are required to attend Capstone presentations and absences from any scheduled program meeting or event should be approved by faculty before the event.

Annual Check-In Interviews

Each year each student will have a 20-30-minute interview with program faculty and clinical staff to review the student's progress and discuss steps for continued growth in the program. Interviews will be held for the first year students near the beginning of spring semester and for the second year students near the end of fall semester. During the interview the student and faculty will discuss the evaluations from each perspective (student, MFT faculty, and other instructors) and discuss next steps for continued progress. In advance of the check-in interviews, students will be asked to complete a brief survey on their experience in the program.

Third year students will not have an annual interview with all faculty but will meet informally with the program director and/or MFT faculty for a brief final check-in. The students will then meet with the Program Coordinator and the CFS Director for a final checklist review and a brief exit interview prior to graduation. During this final meeting, students will ensure that they have all items checked off prior to final grades being turned in. The final checklist can be found in the MFT Program Files folder on the CFS server.

Students should plan to take a minimum of two and one half years (including summers) to complete their M.S. degree.

Curriculum Requirements & Sequencing

DEPARTMENT OF HUMAN DEVELOPMENT AND FAMILY SCIENCE
OKLAHOMA STATE UNIVERSITY
SPECIALTY TRACK IN MARRIAGE AND FAMILY THERAPY

AREA I. Theoretical Foundations (6 hours)

HDFS 5613 Theoretical Models of Marriage and Family Therapy
HDFS 5623 Systems Theory: Applications to the Family

AREA II. Clinical Practice (12 hours)

HDFS 5603 Pre-Practicum in Marriage and Family Therapy: Counseling Skills
HDFS 5633 Couples Treatment in MFT
HDFS 5643 Child & Adolescent Treatment in MFT
HDFS 5653 Psychopathology/psychopharmacology

AREA III. Individual Development and Family Relations (12 hours)

HDFS 5543 Coping with Family Crises
HDFS 5583 Intimate Relationships and Sexuality across the Lifespan
HDFS 5513 Issues in Family Science
HDFS 5213 Lifespan Development

AREA IV. Professional Identity and Ethics (3 hours)

HDFS 5663 Professionalism and Ethics in Marriage and Family Therapy

Standard Curriculum Clinical Experience Requirements (18 hours)

HDFS 5690: Marriage and Family Therapy Practicum (Students will be continuously enrolled in practicum from their 2nd to their 7th semester. Students will continue to enroll in practicum after their 7th semester if needed until they complete the 500 client contact hours requirement and until they develop expected program competencies).

AREA V. Research (3 hours)

HDFS 5123: Research Methods I

Thesis Option (9 hours)

HDFS 5133 Research Methods II
HDFS 5000 Masters Research (6 hours)

Non-Thesis Option (9 hours)

HDFS 5160 Masters Creative Component (3 hours)
Electives (two 3-credit courses for 6 hours)

Total semester hour requirement is 60 to 63

Plan of Study

Students are required to complete a Plan of Study through the OSU Graduate College. The Plan of Study identifies the courses you will be taking during your graduate education. This document is to be electronically signed by all members of your graduate committee and submitted to the graduate college for approval no later than March of your first spring semester. Students should use the sequence of courses provided below to complete their plan of study based on their chosen thesis/non-thesis track and anticipated graduation. Any changes or deviations from the coursework or sequence submitted on your original plan of study must be submitted to the Graduate College by completing a revised plan of study.

Important Links:

- Graduate College Forms
<http://gradcollege.okstate.edu/FormsPage>
- Graduate College Round-Up website link for the Plan of Study
<http://gradcollege.okstate.edu/planofstudy>

Non-Thesis Track
2 and ½ Year Sequence of Courses for MFT Specialization (2018 Cohort)

	Year 1 (2018-19)	Year 2 (2019-20)	Year 3 (2019)
Fall	HDFS 5513 (Issues in Family Science) HDFS 5603 (Pre-Practicum: Skills) HDFS 5623 (Systems Theory) HDFS 5653 (Psycho-path/pharm)	*Elective (3 hours)* HDFS 5690 (Practicum) HDFS 5613 (Th Models of MFT)	HDFS 5690 (Practicum) *Elective (3 hours) HDFS 5160 Creative Component (3 hours)
Spring	HDFS 5663 (Prof/Ethics in MFT) HDFS 5690 (Practicum) HDFS 5123 (Research Methods I) HDFS 5543 (Coping w/ Fam Crises)	HDFS 5213 (Lifespan) HDFS 5690 (Practicum) HDFS 5633 (Couples Treatment)	
Summer	HDFS 5690 (Practicum) HDFS 5583 (Relationships & Sex)	HDFS 5690 (Practicum) HDFS 5643 (Child/Adol Tx)	

*Note that the two 3-hour elective course are recommended for fall years 2 & 3 but could be taken any semester

Non-Thesis Track
2-Year Sequence (Early Graduation) of Courses for MFT Specialization (2018 Cohort)

	Year 1 (2018-19)	Year 2 (2019-20)
Fall	HDFS 5513 (Issues in Family Science) HDFS 5603 (Pre-Practicum: Skills) HDFS 5623 (Systems Theory) HDFS 5653 (Psycho-path/pharm)	HDFS 5690 (Practicum) HDFS 5613 (Th Models of MFT) *Elective (3 hours)
Spring	HDFS 5663 (Prof/Ethics in MFT) HDFS 5543 (Coping w/ Fam Crises) HDFS 5690 (Practicum) HDFS 5123 (Research Methods I)	HDFS 5633 (Couples Treatment) HDFS 5213 (Lifespan) HDFS 5690 (Practicum)
Summer	HDFS 5690 (Practicum) HDFS 5583 (Relationships & Sex) *Elective (3 hours)	HDFS 5690 (Practicum) HDFS 5643 (Child/Adol Treatment) HDFS 5160 Creative Component (3 hours)

*Note that the two 3-hour elective courses are is recommended for summer year 1 and fall year 2 but could be taken any semester

Thesis Track
2 and ½ Year Sequence of Courses for MFT Specialization (2018 Cohort)

	Year 1 (2018-19)	Year 2 (2019-20)	Year 3 (2020)
Fall	HDFS 5513 (Issues in Family Science) HDFS 5603 (Pre-Practicum: Skills) HDFS 5623 (Systems Theory) HDFS 5653 (Psycho-path/pharm)	HDFS 5133 (Research Methods II) HDFS 5690 (Practicum) HDFS 5613 (Th Models of MFT)	HDFS 5690 (Practicum) HDFS 5000 Thesis (3 hours)
Spring	HDFS 5663 (Prof/Ethics in MFT) HDFS 5543 (Coping w/ Fam Crises) HDFS 5690 (Practicum) HDFS 5123 (Research Methods I)	HDFS 5213 (Lifespan) HDFS 5633 (Couples Treatment) HDFS 5690 (Practicum)	
Summer	HDFS 5690 (Practicum) HDFS 5583 (Relationships & Sex) HDFS 5000 Thesis (1 hour)	HDFS 5690 (Practicum) HDFS 5643 (Child/Adol Treatment) HDFS 5000 Thesis (2 hours)	

Thesis Track
2-Year Sequence (Early Graduation) of Courses for MFT Specialization (2018 Cohort)

	Year 1 (2018-19)	Year 2 (2019-20)
Fall	HDFS 5513 (Issues in Family Science) HDFS 5603 (Pre-Practicum: Skills) HDFS 5623 (Systems Theory) HDFS 5653 (Psycho-path/pharm)	HDFS 5133 (Research Methods II) HDFS 5690 (Practicum) HDFS 5613 (Th Models of MFT)
Spring	HDFS 5663 (Prof/Ethics in MFT) HDFS 5543 (Coping w/ Fam Crises) HDFS 5690 (Practicum) HDFS 5123 (Research Methods I)	HDFS 5213 (Lifespan) HDFS 5633 (Couples Treatment) HDFS 5690 (Practicum)
Summer	HDFS 5690 (Practicum) HDFS 5000 Thesis (3 hours) HDFS 5583 (Relationships & Sex)	HDFS 5690 (Practicum) HDFS 5000 Thesis (3 hours) HDFS 5643 (Child/Adol Treatment)

Clinical Requirements and Sequencing

The clinical sequence of training begins, for most students, during the first fall semester. During early fall semester, students will begin observing other therapists' sessions in the clinic. Students will begin working on processing teams on other therapists' cases during the latter weeks of fall semester. At times team responsibilities may involve working as a reflecting team for the therapists and clients where the team enters the therapy room to provide direct input. Students typically begin seeing cases during spring semester of the first year. At the end of fall semester the MFT faculty will make a determination as to whether each student is ready to begin seeing clients in the CFS. This determination will be based primarily on student demonstration of skills in the Counseling Skills Exercises in the Fall Basic Skills course, but will also be based on the student's grasp of course concepts and demonstrated maturity and professionalism. Faculty will discuss with students their perceived clinical readiness during the annual interviews at the beginning of spring semester. Students who are judged by faculty to be ready for the next phase of clinical training will begin seeing clients as a member of a co-therapy team. A student's co-therapist may be another student from the same cohort, a more advanced student, or a clinical faculty member. During the first semester of practicum, a student therapist will carry a minimal caseload (1-3 cases) and will be expected to be an active and contributing member of the co-therapy team, in addition to continuing to observe other therapists' cases.

During the next stage of the clinical sequence, the student therapist is assigned cases without a co-therapist. This typically occurs during the fall semester of the student's second year, but does not occur without the clinical supervisor's approval. During this stage, the student therapist's caseload is increased to four or more cases. Some advanced student therapists may serve as co-therapists with beginning therapists. For most this means they will have come from being the beginning therapist to being the senior member of a co-therapy team. This is a challenging and rewarding indicator of students' growth as a therapist.

As long as students are enrolled in practicum (HDFS 5690) they are expected to be present and to participate in both clinic nights (Wednesday and Thursday) each week for a minimum of 6 hours; the full clinic night (5-9pm on your assigned practicum supervisor's clinic night). Participation includes direct client contact, actively observing cases, and working the front desk. Exceptions may be granted with faculty approval.

Supervision: Students enroll in HDFS 5690 for three credit hours each semester they see cases as a student therapist, whether those cases are seen in the Center for Family Services, an off-campus placement site, or both. During each semester students will be assigned to an individual supervisor and to a practicum group. Both individual and group supervision are required in each semester, with few exceptions. In addition, a substantial number of a student therapist's cases at the CFS will be "live observed" by a supervisor. Specifically, a supervisor will observe therapy sessions and may provide feedback before, during, and after a therapy session. Much of group and individual supervision will also include the opportunity for students to demonstrate their skills to supervisors through showing video recordings of sessions conducted in the CFS. All student therapists are encouraged to record as many sessions as possible. In this program, students will receive a minimum of 100 hours of supervision including individual, group, and live observation. When students receive live supervision (on clinic night or when presenting sessions on video), students should be sure to specify these hours of live supervision on their monthly hours log.

Off Campus Placements: Student therapists who have demonstrated readiness will begin an off-campus placement during the late summer/early fall of their second year. While student therapists can state a preference for geographic location (e.g., Stillwater, Tulsa, OKC) or type of placement (e.g., children, adolescence, substance abuse, domestic violence), the decision of where to place a student therapist is the responsibility of the clinical supervisors. Off-site placement supervisors typically make announcements to the MFT program of their interest/availability to take clinical interns and faculty then announce these placements and contact information to the students in the program. It is the students' responsibility to reach out to the placement site to identify the position responsibilities, as well as the application and interview process. *Students are not to begin training or clinical activity without first having a signed contract (signed by the offsite coordinator, the student, and the MFT Program Director) on file with the MFT program.

In situations where faculty make placement decisions, the faculty will take into consideration student requests, the areas of competency in which the student needs to grow, and how well the site will provide the student with diverse clinical experience in terms of client background and presenting problems. Students who receive “below expectation” or “deficient” scores on the **Clinical Skills Evaluation Device** during their first spring and/or summer semester may be asked to take additional time to develop the necessary competencies prior to beginning off campus clinical work. No student therapist is placed at an off-campus site until all supervisors agree that the student can function as a solo therapist in relative autonomy from close supervision. Unless other arrangements are agreed upon by the program coordinator, the student, and the offsite supervisor the students will spend no more than 15 hour per week working at the offsite placement and no more than 10 hours a week in direct client contact. In addition to the clinical hours reporting form for the Center for Family Services, students will be required to complete a separate clinical hours reporting form for their sites each month and to have their site supervisor sign each form (see Appendix). In addition, students will be required to complete an evaluation of their sites (see Appendix) and to have site supervisors complete an evaluation (see Appendix) of their performance/professionalism at the conclusion of their off-site work. These evaluations help faculty assess whether the sites are providing the students with an appropriate context for student development as well as student performance. Note that students may not provide direct therapeutic services to clients off campus until they have been cleared by the faculty to begin their externship. If students desire to provide therapeutic services off campus at sites other than the one assigned to them they must have the approval of the program faculty. Students can only see clients at their externship placements during weeks they are receiving supervision by their OSU supervisor.

Clinical Hours Requirement: As a requirement of the program, each student is required to conduct a minimum of 500 direct-contact client hours with at least 200 hours being relational (i.e., couple or family session). The 500 hours of clinical contact should be seen as a minimum expectation and not as an absolute end. Students will be required to continue their clinical training until faculty agree that students have met the minimal level of clinical competency. Students who receive “below expectation” or “deficient” scores on the **Clinical Skills Evaluation Device** their final semester may be asked to enroll in practicum the following semester to continue to work on those competencies (even if they have accrued the required 500 hours) until the faculty are satisfied the student has developed the necessary competencies. In this case, all faculty would meet with the student to develop a written plan specifying the expectations for the student along with specific steps the clinical supervisor and student would take to accomplish the plan. The plan would be signed by the student and the clinical supervisor.

Alternative Hours: Of the 500 required hours, no more than 75 hours may be counted from serving on a processing team or other approved alternative therapeutic contact (i.e., non-CFS contact with client populations such as clinical screenings, psychoeducation programming, etc.). For alternative hours to count they must be approved by the MFT Program Coordinator and must be interactive and systemic in nature. Students must complete and submit a **Request for Alternative Hours Form** to the Program Coordinator documenting the nature of the clinical contact, the estimated hours that would be accrued, as well as the dates of expected clinical activity. For processing teams to count toward the 75 alternative hours maximum students must be assigned to the team by a faculty supervisor and students must complete the **CFS Teaming Form** for each processing team hour that is counted. These forms must be kept in the student’s teaming folder locked in the student business office filing cabinet to document each completed teaming hour. Forms are subject to audit to confirm appropriate completion of each form (i.e., substance/thoroughness) and the counting of each teaming hour towards program clinical hour fulfillment. Furthermore, students must collaborate with the therapist in preparations for the session, actively observe the session, provide input at break and after the session, and collaborate with the therapist in considering plans for the next session.

Sequence of Clinical Experience*

First Year	
Fall	<ul style="list-style-type: none"> • Complete Informed Consent for Clinical Training • Complete CFS Confidentiality Agreement • Obtain CPH Insurance • Begin observation of cases • Meet with 2nd year clinical mentor • Begin working CFS front desk • Begin working on clinical teams • Begin co-leading parenting groups • Complete PREPARE/ENRICH Certification <ul style="list-style-type: none"> ○ Begin co-therapy with PREPARE premarital cases • Begin turning in CFS Monthly Clinical Hours Report
Spring	<ul style="list-style-type: none"> • Begin seeing clients (co-therapy) • Begin individual/dyadic supervision
Summer	<ul style="list-style-type: none"> • Begin seeing clients without co-therapist • Interview at potential offsite placement(s)
Second Year	
Fall	<ul style="list-style-type: none"> • Begin work at offsite placement • Begin mentoring 1st year student • Renew CPH Insurance and provide verification form to MFT program • Turn in CFS and *Off-Site Monthly Clinical Hours Reports
Spring	<ul style="list-style-type: none"> • Develop initial sections of capstone project
Summer	<ul style="list-style-type: none"> • Complete work at offsite placements • Complete Evaluation of Offsite Experience

	<ul style="list-style-type: none"> • Turn in Request to Complete capstone requirements (for summer capstone)
Third Year	
Fall	<ul style="list-style-type: none"> • Turn in request to complete capstone requirements (for fall capstone) • Complete capstone requirements • Complete 500 (200 relational) clinical hours

*This timeline identifies the typical sequence of clinical training based across 2-2 ½ years, but progress to each developmental stage of clinical training is dependent upon student readiness.

Student Learning Outcomes

(methods for assessment are described in parentheses by the outcomes)

Student Learning Outcomes

The OSU MFT faculty have identified a list of competencies we believe to be key to competent and sound practice for new professionals in the field of marriage and family therapy. The activities, assignments, and learning experiences in courses throughout the program are focused on assisting students in the development of these fundamental competencies. The competencies are listed below by domain.

Executive Clinical Skills

1. Students demonstrate competence in the skills of admitting and engaging clients in treatment through;
 - a. Attending and addressing barriers to help-seeking and treatment completion that may be associated with gender, race/ethnicity, culture, sexual orientation, and social class of clients.
 - b. Effectively explaining practice setting rules, fees, rights, and responsibilities of each party, including privacy and confidentiality policies.
 - c. Effectively joining with and engaging each member of the client system in treatment.
 - d. Establishing mutually agreed upon therapeutic contracts with clients.
2. Students demonstrate competence in clinical assessment and diagnosis through;
 - a. Accurately diagnosing mental/behavioral disorders using the DSM 5.
 - b. Effectively using basic interviewing skills -- empathic listening, reflective statements, validating statements, paraphrasing.
 - c. Accurately identifying contextual risk (e.g., divorce, family violence, low SES, minority status, powerlessness) and current client crises (e.g., suicidal ideation, danger to self or others).
 - d. Accurately identifying client strengths, resilience, and resources.
 - e. Systematically integrating client reports, observation of client behaviors, client relationship patterns, results from questionnaires/rating scales, and interactions with clients in the assessment process to guide the development of treatment plans.
3. Students demonstrate competence with case management through;
 - a. Structuring and organizing sessions consistent with the formulated treatment plan.
 - b. Adapting treatment plans throughout treatment based on client need (i.e., treatment progress or new problems, new information about client contextual risk and protective factors).
 - c. Accurately and promptly completing case documentation in accordance with agency policies, professional standards, and state laws.
 - d. Effectively collaborating with community systems of care (i.e., church, other family, other service providers) to facilitate client change.
4. Students demonstrate competence with therapeutic interventions through;
 - a. Effective use of questioning (circular, reflexive, lineal, and strategic; open vs. closed, use of follow up questioning).
 - b. Effectively utilizing skills of normalizing and reframing.
 - c. Eliciting and utilizing family strengths.
 - d. Effectively managing and regulating intensity within sessions.
 - e. Effectively facilitating and managing couple and family interaction in sessions.
 - f. Delivering interventions in a way that is sensitive to special needs of clients (e.g.,

- gender, age, SES, culture/race/ethnicity, sexual orientation, disability, personal history).
 - g. Appropriately responding to and delivering interventions that effectively address crisis situations such as trauma, domestic violence, addictions, sexual assault, substance abuse, self-harm, etc.
5. Students demonstrate competence with regard to ethical decision making in their clinical work through;
- a. Practicing in accordance with the AAMFT code of ethics and the Oklahoma state licensure acts and regulations.

Conceptual Skills

6. Students demonstrate competence with regard to Conceptual Skills through formulating, with client input and from a systemic perspective, treatment plans that incorporate a summary of key issues, including:
- a. Context – identifying key contextual influences relative to problem formation and/or the change process.
 - b. Phases of Change – conceptualizing treatment (goals and interventions) in terms of clearly definable phases of therapeutic change.
 - c. Intrapersonal (within individual) process that impacts problem formation/maintenance or the change process.
 - i. Perspective – identifying key facilitative or constraining beliefs.
 - ii. Emotion – identifying key emotional experience/expression.
 - iii. Behavior – identifying key behavioral responses as they related to perspective and/or emotion.
 - d. Interpersonal processes that impact problem formation/maintenance or the change process
 - i. Structure – identifying relevant characteristics of family structure.
 - ii. Process – identifying key interactive processes among family members as well as between family members and others.

Theoretical Skills

7. Students demonstrate competence with regard to Theoretical Skills through;
- a. Developing and articulating a clear personalized and systemic model of family therapy that fully integrates theoretical concepts/perspectives from select models of family therapy.
 - b. Recognizing strengths and weaknesses of own theoretical model in assessment and treatment for different populations and contexts (e.g., cultural, gender, economic).

Self of the Therapist

8. Students demonstrate competence in the area of Self of the Therapist through;
- a. Continually evaluating self in terms of conceptual, perceptual, executive, professional, and evaluative skills.
 - b. Receiving feedback from supervisors and colleagues non-defensively.
 - c. Showing awareness of and ability to manage own anxiety, attitudes, and personal well-being.
 - d. Demonstrating authenticity and flexibility in session.
 - e. [Intentionally left blank]
 - f. Showing understanding of and continually monitoring personal experiences, characteristics, (e.g., family of origin, culture, race, ethnicity, SES, personality, etc.),

personal issues, and beliefs to insure they do not impact the therapy process adversely or create vulnerability for misconduct.

- g. Demonstrating professionalism in interaction with colleagues, clients, supervisors, and other professionals.

Research

9. Students demonstrate competence in the area of research by;
 - a. Locating, critically evaluating, and synthesizing findings from key research articles on particular research topics.
 - b. Writing a concise and well-organized description of research methodology (measures, sample, procedures, and data analysis) for an actual or proposed project.
 - c. Identifying clinical applications from basic research to inform clinical work.

Knowledge

10. Students will Demonstrate Knowledge of:
 - a. Theorists, concepts, goals, and interventions of all major theories of family therapy.
 - b. Major tenets, axioms, and concepts of systems theory, and communication theory.
 - c. Diagnostic criteria for, mood, anxiety, disorders of childhood, personality disorders, eating disorders, substance-related disorders, schizophrenia and other psychotic disorders, sexual disorders, trauma and stress-related disorders, and adjustment disorders.
 - d. AAMFT code of ethics and state licensure acts and regulations.
 - e. Key milestones in child development and ages at which they are accomplished.

Note that the Student Learning Outcomes of the program are designed to be congruent with the missions of OSU and the program and to support the achievement of the other Educational Outcomes.

Oklahoma State University Mission

Oklahoma State University is a multi-campus public land grant educational system that improves the lives of people in Oklahoma, the nation, and the world through integrated, high-quality teaching, research, and outreach. The instructional mission includes undergraduate, graduate, technical, extension, and continuing education informed by scholarship and research. The research, scholarship, and creative activities promote human and economic development through the expansion of knowledge and its application.

MFT Specialization Mission

The Master of Science (M.S.) specialization in marriage and family therapy at Oklahoma State University prepares students to competently assess for individual and family risk and to foster resilience and positive transformation in the face of adversity from a systemic perspective. The program emphasizes parallel development in the areas of clinical skills, self-awareness, and the establishment of an integrated systemic model of family therapy, with a progressive synthesis of the three areas as the student develops basic competence in each area.

Link of Program Mission to University Mission: The mission of the program to foster student learning and development and promote resilience and positive change are highly congruent with and supportive of the institution's missions of providing high quality instruction to promote human development and improve lives.

Link of Program Outcomes to Program and Institutional Missions: Achievement of the Program Outcomes support the realization of the program's and institution's missions as timely graduation and employment, passing state and national exams, and a diverse student population translate into alumni who possess the skills and credentials to improve lives and promote human development, resilience, and positive change.

Link of Student Learning Outcomes to Program and Institutional Missions: Achievement of the Student Learning Outcomes support the realization of the program's and institution's missions by promoting the development of student competencies that position alumni to have maximal effect in promoting human development, resilience, and positive change.

Link of Educational Outcomes to the Professional Marriage and Family Therapy Principles: The Educational Outcomes of the program were developed and are reviewed with attention to the [AAMFT Core Competencies](#), the [AMFTRB Tasks and Domains](#), and the [AAMFT Code of Ethics](#).

Evaluation and Assessment of Educational Outcomes

In addition to directing course instruction and learning opportunities toward fostering student competencies, faculty also focus course evaluation and assessment on student knowledge and skill relative to the core program competencies (Student Learning Outcomes). There are several purposes to assessing student progress with regard to these competencies: First, it provides students with a continuing source of direct feedback with regard to their progress which helps them know where to focus their efforts; second, it helps faculty to identify student strengths and growth areas in order to best know how to continue to foster student development; third, it aids faculty in determining student readiness for increasing responsibility and challenge (i.e., begin clinical work, begin independent work at offsite placement, etc.); fourth, it helps faculty identify whether the instruction and training in the program are fostering in the students the desired competencies and where the instruction and training may need to be modified to be more effective.

Much of the assessment of the program Student Learning Outcomes takes place within courses and in conjunction with students' clinical work in the Center for Family Services. Exams, papers, scoring checklists and rubrics that are used to assess program competencies are kept for a minimum of 7 years after the completion of the work to enable faculty to track student performance across cohorts. Qualtrics is the web-based interface used for much of the recording and reporting of assessment data on student performance. It is also used as a mechanism through which students are asked to provide feedback on faculty and program performance and through which students and alumni are asked to provide feedback on their experience in the program.

It is important to note that data are aggregated across students, as well as across cohorts, such that no one individual student is identified when creating reports on outcomes. Faculty, supervisors, instructors, and staff may have access to your data, along with the COAMFTE site visit team. Otherwise, data collected is confidential and will not be released to anyone without the student's written authorization.

Some examples of Student Learning Outcome assessments include:

- **Clinical Skills Evaluation Device**
 - Each semester students are enrolled in practicum they will be evaluated by their practicum supervisor using the Clinical Skills Evaluation Device. Benchmarks are provided to the students so they can compare supervisor ratings with where faculty expect students to be in their skill development. Students are also asked to rate their own performance on each of the competencies.
- **Counseling Skills Exam**
 - Students conduct a mock counseling exercise during their first year in the program and are evaluated on use of basic clinical skills including joining, empathy, reflection, active listening, questioning.
- **Oral and Written Exams**
 - Examples of written exams that are used to assess core competencies include exams on models of family therapy, law and ethics, and psychopathology.
 - An example of an oral exam that is used to assess core competencies is an oral exam on appropriate ethical responses to particular dilemmas in the ethics course.
- **Integrative Systemic Therapy - Capstone Project**

- During their final semester students complete a paper on their integrated systemic model of change. Faculty evaluate students' self-awareness, accurate understanding of their integrated systemic theory of change with existing models of treatment, and integration of the integrated systemic model with a client system.
- **Comprehensive Exam**
 - During the summer of students' 2nd year, students will take a written comprehensive examination that will include content related to each of the knowledge domains of the program Student Learning Outcomes (SLO#10a-e). The exam will include around 100 items and will be multiple choice. A total of 70% or above is a passing score. Students' performance on the comprehensive exam will contribute to the summer practicum grade.

Information collected on student performance/experience outside of class and CFS clinical work include:

- **Offsite Supervisor Evaluations of Intern** (*conclusion of externship*)
 - Students' externship site supervisors are asked to complete an evaluation of students' skills, competency, and general performance at the externship site at the conclusion of their externships.
- **Students' Evaluation of Offsite Experience**
 - Students complete a survey on their experience at their externship.
- **Students' Annual Program Feedback**
 - Students complete a survey each year on their experience in the program. This includes information on facilities, resources, faculty, the program coordinator, and general feedback on the program.
- **Exit Interviews and Surveys** (*conclusion of the program*)
 - Prior to graduation students meet with the program coordinator in an exit interview and complete a survey about their experience in the program.

Information collected on students after graduation include:

- **Alumni Survey**
 - Around one year after graduation alumni are asked to complete a survey on their experience in the program. Alumni are asked a number of questions about how well the program prepared them to work with particular clinical populations/issues, about the quality of specific aspects of the program (e.g., facilities, faculty attention, open communication, etc.), about program resources, and how effective each course was in preparing alumni for their career. In addition, alumni are asked about current employment, time required to obtain a clinical job post-graduation, and experience with national and state licensing exams (dates taken and results).
- **Employer Evaluation of Alumni**
 - One year post graduation alumni are contacted to ask for permission to contact on-site supervisors at their place of employment to solicit their feedback on the alumnus's performance.
- **National and State Licensing Exam Performance**
 - The state of Oklahoma has an open records policy. This policy allows the MFT program coordinator to request licensing exam performance data from the Oklahoma State Department of Health, Director of Professional Counselor Licensing on each of the alumni of the program. The program coordinator requests dates alumni sat for the exams, whether exams were passed, and dates alumni were

awarded licensure. Note that the MFT faculty do not share with others (beyond the MFT faculty) information regarding individual performance of alumni on the licensing exams. Only aggregated data are shared (i.e., program alumni pass rates).

Faculty review Student Learning Outcome data in aggregated form early spring semester for the prior summer and fall semesters and during mid-summer for the prior spring semester. Faculty review data to assess whether students, faculty, and the program as a whole are meeting established benchmarks. Where benchmarks are not met, faculty identify ways to strengthen the training in order to improve student development. During these biannual meetings faculty also review the Student Learning Outcomes of the program, the methods for assessing outcomes, the teaching and learning practices in the program, policies and procedures of the program, and feedback from students and other communities of interest.

Thesis/Non-thesis Track Requirements

You will be required to complete either the Thesis or Non-thesis Track as part of the program requirements.

Thesis Track

The **thesis track** involves identifying a research question, writing a literature review on the topic, writing a description of the methods of the study, analyzing the data, writing up the results, and writing up a discussion section interpreting and applying the results. In sequence with this project, you will complete 3 hours of Research Methods (enrolling in HDFS 5133 Research Methods II) and 6 hours of Thesis Research (HDFS 5000) with satisfactory marks.

Non-thesis Track

The **non-thesis track** involves identifying a clinical specialty area or areas you wish to develop, identifying 6 hours of elective graduate level courses that would assist you in developing your, seeking and obtaining committee approval of elective courses, enrolling in and completing the committee approved elective coursework and 3 hours of Creative Component with satisfactory marks. The specific elective courses and timing of enrollment in each should be discussed with your advisor and committee as soon as possible and ultimately when developing your plan of study.

Choosing between the Thesis and Non-thesis Tracks

During the spring of year 1 you will:

- Meet with faculty to discuss thesis/non-thesis track options
- Decide between thesis and non-thesis track
- Select committee members:
 - If Non-thesis Track, your chair and advisor will be the same person and you will select two additional core MFT faculty members to serve on your committee.
 - If Thesis Track your committee chair will be an MFT core faculty member, but your advisor and other committee member could be other graduate faculty in the college, depending on research topic. You will select other committee members with the assistance of your thesis advisor.
- Complete the Graduate College [Plan of Study](#) Form and get necessary signatures (Per the OSU Graduate College, Plans of Study must be submitted to the Graduate College prior to the completion of the second semester)

Selection of a Thesis Advisor

When trying to make a decision on thesis advisor it may be useful for you to review the research interests of the MFT faculty and other HDFS faculty on the department website. Identify several faculty members with areas of research that interest you and schedule an appointment with them to discuss options. Although some students may decide to collect their own data for their project, it is recommended that you use an already collected data set for your project as this will significantly simplify the process for you. When you meet with faculty members to discuss options, reference the faculty member's area of research that you are interested in and inquire about what data they have in that area that might be available to use for your project. In addition to faculty data sets, another option to consider is the Center for Family Services (CFS) research data set, which includes the data from the families that have received services in the CFS. You can speak with any of the MFT faculty to learn more about this data set and research possibilities. After you have a sense for the types of

data that are available you can begin to discuss with faculty specific studies that you could do using the data. This is not an easy process and it is assumed that it will take several meetings with faculty before you arrive at a clear idea for your project.

Selection of Advisory Committee Members

Incoming students are assigned temporarily to the Program Coordinator as academic advisor and non-thesis students are typically then assigned to one of the core MFT faculty to serve as their academic advisor. Recommendation of final Advisory Committee members should be a collaborative activity between the graduate student and their advisor. Although the student has the ultimate responsibility for recommending his/her Advisory Committee membership, his/her advisor is a valued resource that can provide insight that will help the student make informed decisions. The student should meet with potential Advisory Committee members prior to recommending them to better understand their experience, availability, mentoring style and willingness to serve as an Advisory Committee member.

Recommended Timeline for Completion of Thesis Projects

1 st Year Late Fall/ Early Spring	Talk with faculty about possible research topics.
1 st Year Mid Spring	Select a topic, a thesis advisor, and a committee.
1 st Year Summer	Complete introduction (i.e., research purpose and questions) and begin work on literature review (take 1 credit hour of HDFS 5000)
2 nd Year Fall	Use research methods course (HDFS 5133) to finish a draft of your literature review and methods sections.
2 nd Year Spring	Finish up proposal (intro, literature review, & methods sections) and propose in May. Begin data collection (if collecting own data)
2 nd Year Summer	Complete data collection, enter and clean data. Complete data analyses and results section (take 2 credit hours of HDFS 5000).
3 rd Year Fall	Complete discussion section and defend by end of October (take 3 credit hours of HDFS 5000).

Student's Research Advisor Leaves the Institution

Should a student's Research Advisor leave OSU before the student completes his/her degree, the following steps may be taken after consultation with the Research Advisor, Department Graduate Coordinator, and MFT Program Coordinator:

- For a master's student who need only complete their research project to finish the degree, the student may complete the research project under the direction of the original Research Advisor. If the Advisor is also the Chair of the student's Advisory Committee, a new Chair would be appointed. The original Research Advisor can continue as a member of OSU's Graduate Faculty, participate in the student's thesis defense, and fulfill his/her obligations to the student.
- For a master's student who is in the early stages of their program and research project, he/she may choose a new Advisor and start a new research project.
- A student may also choose to transfer to the advisor's new educational institution.

If a student is unable to secure a new Advisor in 30 calendar days, there is no obligation on the part of the program, Graduate College or Oklahoma State University to provide a new one. Without an Advisor the student will not be eligible to continue in the graduate program.

Student-Advisor Relationship

When it is determined that a graduate student and Advisor can no longer work together, and all efforts for conflict resolution within the program have been exhausted, it is the responsibility of the student to identify a new Advisor or change to another degree option or program. The Graduate Program Coordinator can assist with this process, but Oklahoma State University is under no obligation to provide the student a new Advisor. If a new Advisor cannot be identified in 30 calendar days, the student will no longer be eligible to continue in the graduate program.

Important Links:

- Graduate Faculty Database
<https://gradcollege.okstate.edu/faculty-and-staff-resources>
- Plan of Study Workshops
<https://gradcollege.okstate.edu/pos-workshops>
- Plan of Study Portal
<http://gradcollege.okstate.edu/planofstudy>
- Thesis Template
<http://gradcollege.okstate.edu/content/thesis-and-dissertation-templates>
- Best Practices: Advisory Committees and Defenses
<https://gradcollege.okstate.edu/best-practices>
- Responsible Conduct in Research Overview
<http://compliance.okstate.edu/rcr/rcr-index>
- RCR Core Subject Areas
<http://compliance.okstate.edu/rcr/core-subject-areas>
- RCR Training
<http://compliance.okstate.edu/rcr/training>
- RCR Policy
<https://stillwater.sharepoint.okstate.edu/Policies/Shared%20Documents/Requirements%20for%20Training%20in%20the%20Responsible%20Conduct%20of%20Research.pdf>
- Appropriate Use of Human Subjects in Research
<http://compliance.okstate.edu/irb/irb-index>

Capstone Instructions Integrative Systemic Therapy Paper and Presentation

The capstone paper will be scored by MFT faculty using the designated rubric. Based on your paper score you will receive one of the following grades: pass, rewrite, and fail. Your capstone presentations will not be scheduled until you receive a passing grade for your paper. Students who receive a rewrite grade on the paper will have one week to complete and turn in revisions. If students receive a failing grade on the paper, their capstone presentation will not be scheduled for that semester but will be postponed to the following semester to provide the student the needed time to make necessary improvements to the paper.

The point breakdown for the three possible results are provided below:

	Pass	Rewrite	Fail
IST Paper and Presentation (50 points possible)	≥38	37-32	< 32

Below are the instructions outlining the requirements of the paper and presentation. When referring to yourself (thoughts, behaviors, feelings) please use first person. It is expected that the paper will follow APA guidelines and that you will use headings liberally. The structure of the papers should match the outline provided and headings should mirror the topics provided below. You must provide citations from original works to support descriptions of specific concepts and strategies used from different models throughout your paper.

The paper should be *no more than 25 pages* and should include the following elements:

1. **Section one (2-3 pages)**, You will describe a clear, detailed **description of a client system** that you have worked with while in the program. The case must be **'relational'** in that it is conceptualized systemically with the majority of the sessions being relational. The case may be either onsite in the CFS or be a case you have seen at your offsite placement with **no fewer than 8 sessions being conducted**. Please include important "up-front" information including description of basic client demographics, the client system's purpose for attending therapy, potential obstacles for completing therapy, factors pertinent to the client system's decision to attend therapy, and group membership contexts (race, SES, etc.; see Pinsof et al., 2018, pg. 113). *Please be sure to also include the following information:*
 - a. Please include in your description how you contracted with your case and determined the problems to be addressed.
 - i. Please include a co-constructed definition of the problem (*not* the problem-sequence)
 - b. Please describe both the direct and indirect client systems.
 - c. Please address both the direct and indirect therapist system.

2. **Section two (12 pages)**, You will describe your clinical decision-making process pertaining to the selected case in which you are clearly using/have clearly used the IST "blueprint for therapy." As you describe the four components of the blueprint

(hypothesizing, planning, conversing, and feedback; see Pinsof et al., 2018, Ch. 4 for an overview) in your work, you will demonstrate how you guided a case from the first phone call to termination (following the IST essence diagram). The overarching goal is for you to demonstrate your ability to systemically conceptualize, hypothesize, and change interpersonal patterns, with clarity regarding what interventions were implemented when to address the problematic interactional sequences and why. Below is a description of the components that must be addressed to successfully complete this paper. Note, the blueprint does not represent *phases* in therapy, but rather the recursive process that occurs throughout the entire process of therapy (e.g., we are always redeveloping hypotheses and creating new plans).

- a. Hypothesizing (comprehensive conceptualization of the case; see Pinsof et al., 2018, Ch.5)
 - i. Please fully describe the hypothesized problem sequence and what informed your hypothesis.
 - ii. Please describe the relevant aspects of the web of human experience including resources and constraints *to resolving the presenting problem*.
 - iii. Please describe how you assessed for these things.
 - iv. How did your hypotheses change over the course of treatment.
- b. Planning (treatment strategies—or planning metaframeworks—you planned to use based on your conceptualization; see Pinsof et al., 2018, Ch.6).
 - i. What was your initially defined solution sequence? How did you develop this solutions sequence? (i.e., where did you begin treatment on the planning matrix and why?)
 - ii. How did you attempt to implement this solution sequence (what strategies or combination of strategies did you use and what MFT models informed these strategies)?
 - iii. How did you shift gears in your treatment strategies based on your client’s response and unfolding/evolving hypotheses during the course of treatment? (i.e., how did you move across the planning matrix and why)
- c. Conversing (how you conversed with clients to achieve four therapeutic functions; see Pinsof et al., 2018, Ch.7). For each of your responses, please describe conversational strategies you used (draw from the 5 elements of therapeutic conversation used in IST; basic building blocks; language of action, meaning, and emotion; turn taking; non-verbal communication; alternatives to talk therapy; see pages 203-229); also, take liberty in bringing in your personal style of therapy and preferred modes of communication with clients.
 - i. How did you develop, maintain, and repair the therapeutic relationship? How did you balance the relationship systemically?
 - ii. How did you develop an understanding of the client system?
 - iii. How did you engage clients in the process of change?
 - iv. How did you structure the therapy?

- d. **Feedback** (how you knew therapy was working; how you used feedback to inform therapy; see Pinsof et al., 2018, Ch.8).
 - i. How did you promote and *read* feedback about the case (how did you observe, react, and incorporate this feedback into your work)?
 - ii. How did you *give* feedback to your clients about their problem description and sequences, their efforts to change, and performance, etc.
 - iii. How did you *receive* feedback from clients about your performance as the therapist, the therapeutic alliance, and how the client is progressing in therapy, etc.?
 - iv. How did you gather *systematic and empirical feedback* (What assessment devices were used initially and across time and how did you see change from these measurements)?

3. **Self of the Therapist** (4 pages): The focus of this section includes addressing diversity issues, biases/blind spots, beliefs/values, etc. as they influenced your clinical views, decisions, and behaviors toward the client system in treatment. The goal is for you to be able to identify how factors related to yourself specifically intersect and interact with the client system in producing (or inhibiting) change. Examples within this section might center on how a reactive and expressive client's state may intersect with a therapist's introverted personality or difficulty in challenging/confronting or a minority client's experience with a Caucasian therapist; with the outcome being an active and direct inclusion of these insights into fully addressing client needs by the therapist.
 - a. Describe how your diverse and intersecting "contexts of membership" (e.g., family of origin, culture/race/ethnicity, gender, social class, spirituality/religion, ability/disability, and any other key life experiences) impacted your work with the client system.
 - i. Emphasize your blind spots and how your experiences in some of these areas may have affected your objectivity with the client system
 - b. Describe how your own issues interacted with client's issues.
 - i. How did you work through your own issues so as to better meet the client's needs?
 - c. Describe what areas of personal strength you brought to your work with your client
 - i. How did you leverage these areas of personal strength in the therapy?

4. **Strengths and limitations of your use of the blueprint for therapy.** (1-2 pages) Evaluate the quality of your therapy according to your use of the blueprint (hypothesizing, planning, conversing, feedback) and areas you recognize as the necessary foci for your professional development.
 - a. Particular strengths and limitations of your use of the blueprint with your case.
 - i. What metaframeworks you are keen on using when hypothesizing and planning and how this might be a strength and limitation.

- ii. What is your natural conversing style and way of gathering feedback: what are the strengths and limitations of this approach?
- b. Reflections on your development in the program:
 - i. Particular populations (e.g., race/ethnicity, socioeconomic status, sexual orientation, etc.), treatment configurations (i.e., individual, couple, family, child, adolescent), or clinical issues (e.g., relationship problems, psychological problems, trauma) for whom your use of IST is particularly effective or limited?
 - ii. Describe what you learned about yourself and your therapy during the program.
 1. What did your experience teach you about the change process?
 2. What do you want to improve to be a better clinician?
 3. What do you want to keep doing?
 4. How did your experience inform how you will do therapy in the future?

Case Presentation (30-40 minutes)

*Please use PowerPoint for your presentation.

1. **Case Synopsis (2-4 minutes)**
 - a. You will present a case you worked with in the clinic to demonstrate your use of integrative systemic therapy. In your description of the case, please provide all necessary demographic information; info on the direct and indirect client system and how you convened therapy around a particular problem.
2. **Your use of the blueprint for therapy with this particular case (15-20 minutes).**
 - a. Organize your presentation by the blueprint for therapy outlined in the paper. For each process, briefly describe how carried out each process across the course of therapy, including changes you made along the way, with your clients.
 - i. Hypothesizing
 - ii. Planning
 - iii. Conversing
 - iv. Feedback
 - b. Video Clip (if using off-site video, you must have a signed consent form from your client): Please provide 1 video clip demonstrating the “conversing” process in your work with your selected case. You may highlight *one* of the following conversing functions: developing an understanding of the client system, engaging clients in the process of change, or structuring therapy. The goal is to demonstrate one area in how you actually *do* therapy.
3. **Self-of-the-therapist issues (2-4 minutes)**
 - a. Describe your background and how it influences your use of the blueprint and *who you are* in the therapy room.

- i. Diversity: How have your core contexts of membership (i.e., race, class, culture, religion, gender, sexual orientation) impacted how you experienced the client system, conceptualized the case, and approached treatment?
 - ii. Signature Theme: What core vulnerabilities (signature theme) impacted your work with this case and how did you work within this in an effective or non-effective way?
4. Lessons learned (8-10 minutes):
 - a. From your work with this case:
 - i. What you've learned from the case, what you would do differently in future cases, and what limitations you have discovered in your therapeutic approach. How did your work with the case inform your developing understanding of the change process?
 - b. From your experience in the program: Please describe:
 - i. The biggest lessons you have learned (about yourself, systemic therapy, and the therapeutic process) and how you will take these lessons with you into the future
 - ii. Looking ahead, what are some of the biggest growth areas you hope to address as you move forward.
5. Q&A (5 min)

Creative Component

The Creative Component [syllabus/instructions](#) and the Creative Component [Rubric](#) are both posted on the CFS server under the MFT Program Files folder and then in Creative Component.

Please enroll this summer or fall in your [advisor's](#) Creative Component section (HDFS 5160) if possible. *If you need a section of 5160 opened for the summer or fall semester, please email your advisor and they will ask administration to open a section/add seats as needed.

Please update your Plan of Study as needed to reflect the timing of your Creative Component course and updated electives. The Creative Component forms ([proposal](#) and [defense](#) forms) are on the CFS server (in the MFT Program Files; Creative Component folders) with instructions and a template built in. Please modify the language and details to fit your topic. **You need to complete the *proposal* form and send it to your [advisor](#). Your advisor will then bring the form to the faculty meeting, discuss, and sign or send back to you; and your advisor will email you with the approval.

Creative Component Course Description

This course is designed for students enrolled in creative component hours with one of the four core MFT faculty. The faculty will notify students of which faculty section they are expected to enroll.

- Students enrolled in this course are expected to be proactive by taking primary responsibility for their creative component project by demonstrating a professional attitude and adequate time commitments.
- Students are also expected to adhere to all professional (e.g., APA, AAMFT) and University (e.g., Graduate College) guidelines.
 - Please complete the Creative Component Proposal form (found in the MFT Program files folder on the CFS server), submit to your graduate advisor for faculty approval and signatures, and placement in your MFT program student file.

Course Requirement: Clinical Topic Paper

For this requirement students are to complete a thorough literature review on the extant efficacy and effectiveness research a specific clinic topic of your choice with approval by the MFT faculty. Specifically, the paper should present an overview of the topic and the treatment processes or components/skills/resources needed to appropriately address the topic with an individual/couple/parent/child.

1. The paper should initially provide a **clear/accurate description of the topic/population** and/or **treatment approach/program** provided.
 - a. Introduce reader to the population of interest or presenting problem (e.g., grief issues for children who experienced loss of a parent).
 - b. Present an overview of the systemic approaches to treating the population or presenting problem (e.g., systemically-oriented programs for children who lost their parent).
2. The review should include a synthesized **critical evaluation of the research** including the key findings for reviewed studies, as well as a sophisticated understanding of the methodological strengths and weaknesses/limitations of specific studies as well as across studies, the clinical significance (or lack thereof) of findings and report on strengths of

the conclusions. For example, if interested in various aspects of sex therapy, in a section of the paper, the student could review research on the relationship between differentiation and individual and relationship functioning.

- a. The paper should include at least 10 citations and include a minimum of 5 research studies demonstrating efficacy/effectiveness of the intervention/approach with various populations.
3. At the end of the paper, provide a **summary** paragraph that succinctly summarizes what is and is not known about the effectiveness of the approach as well as **recommendations for future treatment and/or research** on the topic.
 - a. Note that with models that have a sparse research literature the review will describe the studies that have been done in much greater depth.
4. Please submit an electronic copy of your final paper to the CFS server (in the MFT Program Files → Creative Component folder → YOUR NAME) by 10am the first Friday of July (for summer graduation) or the first Friday of November (for fall graduation).
5. Please submit electronic copies of each of the manuscripts you used for your creative component paper to the CFS server as well; placing them in a separate folder on the server.

Quality of Writing:

Graduate level writing is expected and required for this project. Papers will be evaluated based upon quality and clarity of writing and thoroughness of description of the research. Errors in grammar, spelling, word selection, punctuation, and writing style are not acceptable. Students are expected to know and adhere to the *Publication Manual of the American Psychological Association, Sixth Edition*. Students are expected to carefully proofread their own work and seek external reviewers for their paper prior to the final submission date.

Final Course Grade

Final course grade will be based on a passing score using the Creative Component Rubric.

Based on your paper score you will receive one of the following grades: pass or fail. A grade of passing (A) indicates that the student has performed at a level expected of a graduate student in the MFT program at OSU with advanced clinical experience, whereas failing (F) indicates that the student has not performed at a level expected for a graduate student in the MFT program at OSU with advanced clinical experience.

- The point breakdown for the three possible results are provided below:

	Pass	Fail
Creative Component Paper (25 points possible)	≥18	<18

- When a passing grade is received from the faculty, you will need to complete the Verification of Completion of Creative Component form (found on the CFS server in the MFT Program Files folder), receive faculty signatures, and ensure that the form is placed in your MFT program student file.
- *Students who receive a failing grade on the paper will have one week to complete and turn in revisions. After the re-grade, if students receive a second failing grade on the

paper, they will receive an Incomplete for the course grade that semester and will be expected to use the following semester to provide the student the needed time to make necessary improvements to the paper.

Academic Integrity:

Oklahoma State University is committed to the maintenance of the highest standards of integrity and ethical conduct of its members. This level of ethical behavior and integrity will be maintained in this course. Participating in a behavior that violates academic integrity (e.g., unauthorized collaboration, plagiarism, multiple submissions, cheating on examinations, fabricating information, helping another person cheat, unauthorized advance access to examinations, altering or destroying the work of others, and fraudulently altering academic records) will result in a student being sanctioned. Violations may subject a student to disciplinary action including the following: receiving a failing grade on an assignment, examination or course, receiving a notation of a violation of academic integrity on transcript (F!), and being suspended from the University. Students have the right to appeal the charge. Contact the Office of Academic Affairs, 101 Whitehurst, 405-744-5627, academicintegrity.okstate.edu.

*These creative component requirements are subject to change prior to student enrollment in the creative component course.

Important MFT Program and Graduate College Timeline

First Year	
Fall	<ul style="list-style-type: none"> • Submit GSSI form (GTA/GRA tuition waiver form; due before 1st day of semester classes) • Obtain AAMFT Membership & Liability Insurance & Submit verification emails (due September 1st) • Complete and submit OSBI Criminal History Report • Apply for Graduate Scholarships (typically due in December)
Spring	<ul style="list-style-type: none"> • Submit GSSI form (due before 1st day of semester classes) • Identify permanent faculty advisor/chair and advisory committee members • Complete Plan of Study (due March 1st)
Summer	<ul style="list-style-type: none"> • Submit GSSI form (due before 1st day of semester classes)
Second Year	
Fall	<ul style="list-style-type: none"> • Submit GSSI form (due before 1st day of semester classes) • Renew AAMFT Membership & Liability Insurance & Submit verification (due September 1st) • Apply for Graduate Scholarships (typically due in December)
Spring	<ul style="list-style-type: none"> • Submit GSSI form (due before 1st day of semester classes)
Summer	<ul style="list-style-type: none"> • Submit GSSI form (due before 1st day of semester classes) • Take comprehensive exam <p><i>If graduating in 2 years, during first two weeks of summer semester, submit:</i></p> <ul style="list-style-type: none"> • Submit Request to Complete Capstone (due June 1st) • Diploma Application • Graduate Clearance Form • Revised Plan of Study (if necessary) • Graduate Committee Change Request Form (if necessary) • Complete the Student Graduation Checklist
Third Year	
Fall	<ul style="list-style-type: none"> • Submit GSSI form (due before 1st day of semester classes) • Submit Request to Complete Capstone (due September 1st) • Renew AAMFT Membership & Liability Insurance & Submit verification (due September 1st) <p>During first two weeks of semester, submit:</p> <ul style="list-style-type: none"> • Diploma Application • Graduate Clearance Form • Revised Plan of Study (if necessary) • Graduate Committee Change Request Form (if necessary) • Complete the Student Graduation Checklist

Important Links:

- Graduate College Academic Calendar
<http://gradcollege.okstate.edu/graduate-college-academic-calendar>
- Graduate College Forms
<http://gradcollege.okstate.edu/FormsPage>
- Graduate College Round-Up website link for the Plan of Study
<http://gradcollege.okstate.edu/planofstudy>

MFT Program Policies

Diversity & Inclusivity

A key value of the Marriage and Family Therapy Program at Oklahoma State University is the understanding, respect, acceptance, and equal treatment of others regardless of age, race, income, culture, ethnicity, sexual orientation, religion, and physical ability. It is expected that faculty, staff, and students will live by this value, whether it be with each other, with other professionals, or with clients. It is expected that during the program students will strive to learn about and understand the unique life experiences, values, practices, and beliefs of individuals from diverse backgrounds and will learn to respond sensitively and appropriately to client needs. Students will be provided opportunities in program courses, practicum experiences, and staff meetings to be exposed to and discuss issues of diversity. As students examine their own and others' identities with regard to diversity and explore associated beliefs and values it is imperative that students acknowledge and are respectful of differing perspectives and experiences and maintain a safe environment so that the conversation can be sustained.

As guided by AAMFT values regarding inclusivity, the OSU MFT program aims to be inclusive to all students, volunteers, staff, and clients affiliated with the program and the Center for Family Services to ensure a comfortable, safe, and respectful environment by reflecting the diverse interests of our all parties involved. We are committed to providing an inclusive environment for all, regardless of gender, age, gender identity, race, health status, national origin, relationship status, sexual orientation, disability, ethnicity, socioeconomic status, and religion.

This Inclusivity Statement outlines our expectations for all those who participate in OSU MFT program interactions, as well as the handling of unacceptable behavior.

“MFT Program interactions” in this policy includes, but is not limited to, MFT program events, including meetings, courses, conferences, staff meetings, non-mft program courses, forums, and any other interaction involving students in the MFT program.

Expected Behavior

We expect all parties to abide by this Inclusivity Statement in all venues of OSU and the MFT program including ancillary or other events in any official capacity.

- Exercise consideration and respect in your speech and actions.
- Refrain from demeaning, discriminatory, or harassing behavior and speech.
- Be mindful of your surroundings and of your fellow participants.
- Alert OSU MFT program faculty if you notice violations of this Inclusivity Statement.

Unacceptable Behavior

- Intimidating, derogatory or demeaning speech, or actions by any member of the OSU MFT program, at all program-related events and in all personal and written communications.
- Harmful or prejudicial verbal or written comments or visual images related to gender, age, gender identity, race, health status, national origin, relationship status, sexual orientation, disability, ethnicity, socioeconomic status, and religion.
- Inappropriate use of nudity and/or sexual images in public spaces (including presentation slides).
- Deliberate stalking or following.
- Harassing photography or recording.

- Sustained disruption of talks or other events.
- Unwelcome and uninvited attention or contact.
- Physical assault (including unwelcome touching or groping).
- Real or implied threat of physical, professional or financial damage or harm.

Retaliation for reporting an incident is a violation of the Inclusivity Statement. Reporting an incident in bad faith is a violation of the Inclusivity Statement.

Handling of Unacceptable Behavior

Unacceptable behavior from any member of the OSU MFT program will be met with empathy and practicality in a serious manner. To ensure that no member of the OSU MFT program feels unsafe or uncomfortable, these are the parameters for handling the unacceptable behavior explained above.

- The OSU MFT program faculty and staff will be trained in handling incidents involving unacceptable behavior.
- The OSU MFT program faculty and staff will provide assistance to those participants to which the incident occurred.
- The OSU MFT program faculty and staff will attempt to resolve the issue in a civil manner for those scenarios which call for such treatment. This means resolving the issue will allow for productive conversation in which both parties may come to a peaceful conclusion.
- The OSU MFT program faculty and staff reserve the right to remove an individual from any MFT program interaction and if necessary to preserve the integrity of the policies outlined above, to prohibit an individual from future participation in MFT program interactions.

If You Are Subject or Witness to Unacceptable Behavior

If you are feeling uncomfortable or unsafe, witness any inappropriate behavior, or have any other concerns, please contact an OSU MFT program faculty member and address your comments to the MFT Program Director.

If possible, provide the following information in writing on the provided form:

- Identifying information (name/badge number, appearance) of the participant who allegedly violated this policy.
- The behavior that was in violation.
- The approximate time of the behavior.
- The circumstances surrounding the incident.
- Other people involved in or witnessing the incident.

Addressing Grievances

If you feel you have been falsely or unfairly accused of violating this Inclusivity Statement, notify the MFT Program Director. The MFT Program Director will take steps to resolve the issue appropriately.

Program Communication

It is the MFT Program policy that students must use their Okstate email to communicate with faculty, staff, and students about program and clinic matters. The Okstate email and MFT Program's online calendar (<http://humansciences.okstate.edu/mft/index.php/calendar>) is important for students to check, as that is the University's (as well as the MFT Program's) communication channel with students. Students are responsible for any events and information communicated via email or on the online calendar.

Vacations

Students are expected to plan vacations and absences around the OSU academic calendar and/or the OSU employee calendar and CFS official closures. You must get MFT Program Director, Supervisor, and of CFS Director permission for absences that impact class attendance, client sessions, clinic night attendance, internship, and/or assistantship duties, and other program requirements. Best practice for leave request situations is to email the Program Director with the request who will then process with the core faculty. If/when the leave is approved, you must leave your contact information with CFS Director in case you need to be contacted while you are away.

As the CFS closing schedule does not supersede employment responsibilities, students will also exercise care in ensuring that they receive clearance from their RA/TA supervisor prior to taking a vacation. Not receiving approval while being paid as a RA/TA may result in an immediate loss of employment as well as tuition waivers and health insurance or a loss of future employment within the department or college.

Annual MFT Program Events

- Summer Capstone Presentations (approximately in July)
- Fall Semester Kick-off & Welcome Event: (August)
- Homecoming Celebration: (Fall Semester)
- Fall Capstone Presentations (approximately in October/November)
- 3rd Year Graduation Party: (December)

Assistantships & Scholarships

Assistantships

Assistantships include both Graduate Teaching Assistantships (GTA) and Graduate Research Assistantships (GRA). GTAs involve graduate students assisting a faculty member with teaching a class and/or teaching their own class. GRAs involve helping faculty with research, such as conducting literature reviews, calling/interviewing participants, gathering and analyzing data, preparing reports, or preparing results for presentation at conferences.

Assistantships depend on 1) funding availability; 2) student's need; 3) the student's performance in previous semester assistantship(s); and 4) the student's year in the program. Our first priority is to fund all students, however, students in their first and second year of the program take priority for assistantship funding over 3rd year students.

Students must demonstrate satisfactory performance each semester to receive an assistantship for the following semester. Students will be evaluated at the end of each semester. Successful students who do well on their assistantships treat their assistantship assignment like a job. Students should plan to schedule around the needs of their assistantship supervisor.

Assistantships awarded are .25 FTE, or 10-hours per week.

With a .25 FTE (10 hours a week) assistantship (GTA or GRA):

- You receive a full waiver of non-resident tuition (gives you in-state rate)
 - *Students are responsible for submitting their GSSI waiver prior to each semester they intend to enroll in courses.
- You receive a monthly stipend of \$675 a month
- You receive a scholarship which pays for tuition each semester you have an assistantship.
- OSU pays the cost of your health insurance (approximately \$642/semester)

Assistantships do not cover fees.

Summer tuition is waived if students have an assistantship the spring prior the summer in which tuition is waived. Students do not receive a stipend during the summer, however.

Important Links:

- Graduate Assistantships:
<http://gradcollege.okstate.edu/assistantship>
- Fall/Spring/Summer Enrollment Guidelines:
<https://gradcollege.okstate.edu/enrollment>
- Student Health Insurance:
<http://uhs.okstate.edu/student-health-insurance-plan>
- Tuition Waiver Forms:
<http://gradcollege.okstate.edu/FormsPage>

Graduate Student Scholarships

Each year the College of Human Sciences awards multiple fellowships and scholarships to graduate students. Applications for these fellowships and scholarships are available in November and are typically due in December or January each year. Awards range from \$500 to \$5,000 and are presented during the Celebration of Excellence awards banquet in April. All recipients and their families are invited to attend. Scholarship/fellowship recipients must be majoring in a graduate degree program in the College of Human Sciences and currently enrolled in a minimum of six credit hours during the period of the scholarship award. Criteria vary for each scholarship/fellowship, but usually include scholastic record (GPA), college and university leadership activities, professional goals, etc.

Remember the Ten Run Scholarship

The purpose of this award, made possible by the generosity of donors, sponsors and participants in the annual Remember the Ten Run (www.remembertheten.com), is to give financial support to assist outstanding students in meeting their academic goals and further their professional development and counseling-related skills. The [Remember the Ten Run Scholarship](#) Program provides support to Oklahoma State University (OSU) students enrolled in Counseling (Community Counseling), Human Development & Family Science (Marriage & Family Therapy), Psychology (Clinical Psychology), and Educational Psychology (Counseling Psychology). Recipients receive a \$1,000 cash scholarship, with \$500 being awarded in the Fall and \$500 in the Spring. All students studying in one of the disciplines above, on the Stillwater campus and enrolled full-time, are eligible to apply. Applicants must exhibit good citizenship, high moral character and a strong work ethic. Applications are generally due in March for the following Fall/Spring scholarship award period.

AAMFT Now is the Time: Minority Fellowship Program-Youth

Now Is The Time: Minority Fellowship Program- Youth (NITT-MFP-Y) is a fellowship program for masters students interested in service provision to the nation's youth. The NITT-MFP-Y is part of the President's Plan, [Now Is the Time](#), to increase access to mental health services for youth in America. This program expands the focus of the current MFP program to support master's level trained behavioral health providers in the fields of psychology, social work, professional counseling, marriage and family therapy, and nursing. The purpose of this grant program is to reduce health disparities and improve behavioral health care outcomes for racially and ethnically diverse populations by increasing the number of culturally competent master's level behavioral health professionals serving children, adolescents, and populations in transition to adulthood (aged 16 – 25) in an effort to increase access to, and quality of, behavioral health care for this age group.

Financial Support & Training Benefits:

- Financial support is provided for the NITT-MFP-Y fellowship for a 1-2 year term. This includes a stipend to be used for all related costs of a master's program attendance and training.
- The NITT-MFP-Y fellowship provides travel support to the AAMFT Annual Conference. This includes reimbursement for NITT-MFP-Y Fellows for all costs of attendance at the AAMFT Annual Conference--attendance at the conference will provide continuing education and cross-collaboration with faculty and other leaders in the field, as well as an opportunity to present their work.

- Mentorship and Leadership Development, Online Training and Access to Educational Resources via the AAMFT Online Community.
- Lifetime network of professional association with Marriage and Family Therapists interested in ethnic minority mental health and services.

All applicants to the NITT-MFP-Y must comply with the following eligibility criteria outlined in this section. Applicants must:

- Be U.S. citizens or have permanent U.S. residence status (I-551 or I-151);
- Be an AAMFT member at the time of selection;
- Demonstrate experience and/or commitment to working with youth and young adults between the ages of 16-25;
- Be enrolled full-time or part-time in a Marriage and Family Therapy master's program for the duration of the fellowship;
- Demonstrate experience and/or commitment to serving ethnic minority children, adolescence, and individuals in transition to adulthood (16-25), and underserved populations, including but not limited to persons who identify as LGBTQ and people with disabilities;
- Be AAMFT members at the time of selection and for the duration of the Fellowship;
- Be enrolled in a Master's MFT program no later than the start of the Fellowship year to which they are applying;
- Be enrolled in courses approved by their academic advisor that will fulfill the requirements needed to complete their Master's degree.

Find more information at <http://www.aamftfoundation.org>

Oklahoma State Bureau of Investigation (OSBI) Criminal History Information Request

Serving as a therapist for individuals, couples, and families is a significant position of trust. The character of the therapist is important to clients, to the state licensing board, and to the faculty of the OSU Marriage and Family Therapy Specialization. In an effort to ensure high standards among student therapists, all student therapists are required to submit to the Program Coordinator the current results of an OSBI Criminal History Information request. Students are responsible to obtain results of the background check from the OSBI at students' expense. The results must be submitted to the CFS Director before conducting therapy at the Center for Family Services. The results submitted to the Program Coordinator must be an original and cannot be a photocopy. This report will be placed in the student therapist's permanent file. An OSBI check is valid for two years.

Program faculty may prohibit a student therapist from conducting therapy in the Center for Family Services if the results of the student's OSBI check reveals past criminal activities that would likely lead the Oklahoma Board of Health to deny that person licensure under Title 59 of Oklahoma Statutes, Section 1925.15. This includes "Been convicted of a crime the Commissioner determines after a hearing to be of such a nature as to render the person convicted unfit to practice marital and family therapy."

Students should follow the attached directions to file the Criminal History Information Request with the OSBI. This request is at student expense and the student is responsible for ensuring that the Program Coordinator receives the original report from OSBI. No cases will be assigned to a student therapist who does not have a current OSBI report on file.

Oklahoma State University also requires graduate students to secure an OSBI check for the purposes of securing a graduate assistantship. Specifically, the Graduate College states: "In support of OSU's commitment to provide a safe and secure environment for employees and students, the new Policies and Procedures Letter, 3-0771, Background Check Policy for Faculty and Graduate Assistants/Associates (Teaching and Research), has been fully approved and the policy can be found on the University's policy site (<https://stw.sp.okstate.edu/Policies/Shared%20Documents/Forms/AllItems.aspx>). Additionally, in cooperation with OSU Human Resources, reference documents were created (Operational Guidelines and Frequently Asked Questions) to guide implementation of this important policy. All related documents are attached for your use and distribution as needed within your area.

With the adoption of this policy, background checks are to be conducted on the successful hires for all faculty (tenure and non-tenure track) positions, as well as Graduate Assistants and Associates (Teaching and Research), employed after March 1, 2018."

Submitting a criminal history information request can be completed by mailing or faxing a completed criminal history information request or by submitting the form in-person at the OSBI headquarters. The OSBI headquarters is open from 8:30 a.m. until 4:30 p.m., Monday through Friday, except for holidays and is located in the Broadway Executive Office Park one half block west of the Broadway Extension on Northwest 63rd in Oklahoma City. The address is 6600 North Harvey, Oklahoma City, OK, 73116. All requests must be typed or legibly printed in ink. The current cost of a criminal history information request is \$15.00. Accepted forms of payment include cash with in-person requests only, money orders, Visa, Mastercard, Discover, cashier's checks, certified checks, government checks or warrants, and business checks imprinted with the company name and address and made payable to the OSBI. **Personal checks are not accepted.**

The average wait times to receive a processed criminal history information request are as follows:

In-person Requests: Results are processed the same day they are submitted. Approximate wait time is 10-15 minutes.

Faxed Requests: Faxed credit card requests are usually processed within three days of their receipt and require the customer to provide a dedicated fax line number for the return results.

Mailed Requests: Mailed requests are processed within one to three weeks from the date they are received. The average wait time from when the form is mailed to receipt of results is approximately 3-4 weeks.

For more information regarding criminal history information requests or to download the current request form or credit card fax form, please visit

http://www.ok.gov/osbi/Criminal_History/index.html#

AAMFT Membership & Liability Insurance

All students must be **members of AAMFT** and have **liability insurance** prior to the start of clinical work in the program. Liability insurance is included as part of the student's yearly AAMFT fees. The current cost to become a student member in Oklahoma is \$63 (plus a \$25 processing fee). Membership and professional liability insurance is to be renewed by September 1st of each year. A copy of the membership verification certificate (via email) as well as a copy of the student's personal liability insurance certificate (via email) must be sent to the MFT Program Coordinator to be placed in the student's file by September 1st each year.

As an AAMFT student member, a portion of your annual dues automatically covers divisional dues and membership in the Oklahoma Association for Marriage and Family Therapy (OKAMFT). Students are strongly encouraged to become active in AAMFT and OKAMFT.

Important Links:

- AAMFT Student Membership Application
https://www.aamft.org/AAMFT/Membership/Join_AAMFT/Shared_Content/Membership/New_Join_Application/Join_AAMFT.aspx?hkey=b16a4aa7-0e1e-47d4-b47f-5fb8ebdd28a9
- AAMFT Student Liability Insurance FAQs
http://www.aamft.org/iMIS15/AAMFT/Content/membership/Student_liability_FAQS.aspx
- OKAMFT Website
www.okamft.org

Observation in the Center for Family Services

Observation in the Center for Family Services is a privilege that we must all protect. Families allow observation of their therapy sessions and in doing so must trust our professionalism and ethics. We feel that protecting client's rights is crucial to the continuation of this valuable experience. All clients know about observation and have given their permission in writing. When you are observing, please follow the rules listed below.

1. Arrive 10 to 15 minutes PRIOR to when the session is scheduled to start. Allow clients to leave the building before exiting the observation room. This will help you avoid seeing clients in the hall.
2. When you are in the observation room speak softly and only when necessary. The walls are not soundproofed and noise in the observation room is disruptive of sessions. Avoid going "in and out" of the observation room.
3. If you discuss cases in CFS, with other MFT students or MFT faculty, always do so in a secure area. You will never know when someone may overhear you and recognize who you are talking about, or feel uncomfortable you are disclosing the information.
4. NEVER use names, identifying information, or discuss sessions of clients when in public areas. Do not talk about cases with individuals outside of the MFT students and faculty.
5. If you take notes during observations, do not include names or any other identifying information. Only use case numbers to identify summaries for class.
6. When you are observing a session that is also being supervised, do not get in the way of the supervisors or distract them. They need to focus attention on the session. If you have a question, ask them when would be a convenient time or wait until after the session.
7. During a mid-session break allow the supervisors and therapists to talk. Often much information must be transferred in a short amount of time.
8. We are responsible for the facility. Please do not leave any trash in the room.
9. If you happen to know the client(s), do not observe the session.
10. Avoid wearing white clothing if sitting near the observation mirrors as white is more easily seen through the one-way mirrors.
11. The more you observe the more you will understand the therapy process.

Remember, you are being given an opportunity most students do not have. Treat the clients with respect and do not do anything that would cause embarrassment for you, the clients, or the program. Observation is an integral part of your training and will be expected throughout your tenure at OSU. Take advantage of this privilege. You cannot observe too much.

Recording Clinical and Supervisory Hours

It is the MFT Program policy that students must record their clinical and supervisory hours using the CFS/Off-site Monthly Clinical Report template and turn it in to the Program Coordinator at the end of every month. **Reports for the month are due to the Program Coordinator or Clinic Director by the 15th day of the following month.** It is each student's responsibility to personally submit PDF reports in the Monthly Clinical Hours Report folder on the program server. Reports should be saved as *student'slastname month.date* (e.g., Brosi 8.16). Reports received after the due date will not be accepted and hours will not be counted toward the student's cumulative hours.

Definition of Clinical Hours

- **Individual:** The session is counted as *individual* when you are meeting with one person.
- **Group (Individual):** This session consists of a *therapeutic group with people who are not related* to each other, or considered by themselves to be a family.
- **Couple:** The session is counted as *couple* when you see two individual adults who have presented for therapy for relationship concerns.
- **Family:** The session is counted when you see *more than one family member* together who are working on family issues.
- **Group (Relational):** This session consists of a group of couples working on relational issues or a group of different families working on family issues.
- **Alternate (Individual):** This is a session seen by an ongoing team of therapists (no more than 6) who provide treatment as a team or another approved alternative hour experience with an individual.
- **Alternate (Relational):** This is a session with a couple or family that is seen by an ongoing team of therapists (no more than 6) who provide treatment as a team or another approved alternative hour experience with a couple or family.

Definitions of Supervisory Hours

Category of Supervision

- **Individual Supervision** – This type of supervision occurs in the presence of your OSU MFT supervisor and with one to two supervisees (grad students).
- **Group Supervision** – This supervision occurs in a small group of three to no more than eight students. Count this when your cases and/or other student's cases are reviewed by the group and your OSU MFT supervisor as in Practicum or Clinic Night.

Type of Supervision

- **Case Consultation:** This is counted when your case or another student's case is reviewed and supervised without the use of raw data (video, audio tape, or live supervision).
- **Video:** This is counted when you are supervised and videotape of the case is presented. In *Group Supervision*, this is counted when you or another student is supervised and a videotape of the case is presented. For example in a two hour group supervision if two students are scheduled to show video then all students may count two hours of group video supervision. However, if two students are scheduled to present in a two hour group supervision session and only one shows a video while the another presents a case, then all students may count one hour group video supervision and one hour group case supervision.
- **Audio:** This is counted when you are supervised and an audiotape of the case is presented. In *Group Supervision*, this is counted when you or another student is supervised and an audiotape of the case is presented. For example in a two hour group supervision if two students are scheduled to present audiotape then all students may count two hours of group audiotape supervision. However, if two students are scheduled to present in a two hour group supervision session and only one shows an audiotape while the another presents a case, then all students may count one hour group audiotape supervision and one hour group case supervision.
- **Live:** Live supervision is counted when you conduct therapy in the presence of your supervisor at the CFS, or you view a live case with your supervisor. This is to be counted only if the session was conducted at the CFS. It can be counted as live, by the one or two therapists conducting the session, or those therapists viewing the session. No more than 6 total students can be involved in a live supervision session (combined total conducting and observing the session.).

Transportation of Confidential Materials

Student therapists will frequently need to transport confidential materials between their off-campus placement site and the Center for Family Services for supervision purposes. Therapists must have site approval to remove any confidential materials from the off-campus placement site. Examples of materials that might be transported would include case notes, audio or videotapes, and client assessments. When transporting confidential materials the student therapist must take extra precautions to ensure client confidentiality. The following are guidelines for the secure transfer of confidential materials.

1. Therapists who need to transport confidential materials will be issued a locked briefcase by the Director of the Center for Family Services. Therapists will return the briefcase when not needed for transportation between practicum sites.
2. The briefcase must be kept locked anytime it contains confidential materials during transport between the off-campus site and the Center for Family Services.
3. The briefcase cannot be left unattended anytime it contains confidential materials during transport between the off-campus site and the Center for Family Services.
4. When in either the Center for Family Services or the off-campus site, confidential materials will be handled according to agency and CFS policy.

Addressing Student Deficiencies²

Most students who enter a graduate program believe they are embarking on their chosen profession. Some discover that this is not what they desire, or that they lack the talent to perform effectively in the field of marriage and family therapy, and drop out of the program. A few students, although lacking the skills to be effective, continue on with their degree program. Because marriage and family therapists have a great deal of influence in the lives of their clients, it is important that only competent beginning-level clinicians be allowed to graduate. In addition, because of the vulnerable position that clients are in when they receive treatment, it is imperative that students of this program meet high standards of conduct and performance in areas including, but not limited to, professionalism, emotional health, and ethical behavior. MFT faculty have the responsibility of determining whether a student is emotionally, ethically, and professionally suited to enter the profession and to counsel out of the program students that might pose serious risk to their clients and the standards of the profession. What follows is a list of areas of student performance/functioning and a short description of the expectations associated with each.

Academic

It is expected that students will be invested in and perform well in their coursework. Students must maintain a 3.0 grade point average ("B" Average) at all times while enrolled as graduate students in the Department of Human Development and Family Science. In accordance with the OSU Graduate College's standard on minimum grade requirements, "a grade-point average of "B" (3.00) is required to (1) maintain good standing as a graduate student and (2) meet requirements for a degree. Receiving a grade of a C or below in any course (or UR in research) requires departmental approval prior to enrolling in subsequent semesters. No course with a grade of "D" or "F" can be used on the Plan of Study to satisfy the degree course requirements. At the graduate level, a grade of a "D" or "F" is a failing grade that can result in dismissal by the dean of the Graduate College, regardless of academic standing." Academic standards are set forth by the HDFS Department as well as the OSU Graduate College, thus, students who do not meet the minimum academic requirements will be placed on academic probation and/or dismissed from the program.

Professional

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.

Emotional

Students are expected to demonstrate emotional strength and stability. Students must take appropriate steps to prevent their emotional problems from having a negative effect on their clients or others with whom they work as judged by faculty or site supervisors. Students are expected to resolve any personal problems that impede their ability to be effective in their clinical work and/or their ability to be appropriate in their interaction with other students, faculty, or other professionals with whom they work.

Where students are unable to resolve their personal problems through their own efforts they may need to seek professional help. Where these issues are evident in the students' conduct/performance, faculty will provide feedback to students and encourage them to address the problematic issues. In cases where students' emotional problems pose a risk to their clients they may be immediately removed from cases and may be asked to immediately discontinue all clinical work. In cases where students fail to adequately address the problematic issues they may be counseled out or dismissed from the program.

² Portions of this section were adapted from the Purdue University at Calumet MFT Handbook.

Ethical

Students are expected to conduct themselves in their clinical work and in their general conduct according to ethical and legal guidelines as outlined in Oklahoma law and the AAMFT code of ethics. Due to the sensitivity of the professional role of a marriage and family therapist, 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, receiving a failing grade, removal from cases and all activity in the clinic, removal from external placements, completion of sanctioned activities (e.g., attend ethics trainings, retake a specific course, write essays, enroll in additional practicum hours), and dismissal from the program.

Clinical Skills

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 or specific tenets of family therapy theory 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 MFT faculty.

Severe Deficiency

The faculty will make the determination of when a problem warrants the label, "severe deficiency." If the problem is termed a severe deficiency by the faculty, the student will be notified by his/her practicum supervisor, major advisor, or the Program Coordinator. The 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 the sanctions. This contract will be finalized in writing with a copy given to the student, a copy to remain in the student's file, and copies for all members of the MFT faculty. If the student satisfactorily resolves the severe deficiency, he/she will receive a letter notifying him/her of such with a copy placed in his/her file and copies for all members of the MFT faculty.

Dismissal from the Program

If the student still does not resolve the severe deficiencies s/he may be dismissed from the program. S/he will meet with the MFT faculty to discuss the situation, and if dismissed from the program will receive a letter from the Program Coordinator notifying him/her of dismissal. Copies of the letter may also be sent to all MFT faculty members and the graduate coordinator with one 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 his/her dismissal. The members of the MFT 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.

Important Links:

- Graduate Student Appeals
<https://gradcollege.okstate.edu/content/appeals-policy>
- Leave of Absence Policy
<https://gradcollege.okstate.edu/leave-of-absence-policy>
- OSU Student Code of Conduct
<https://studentconduct.okstate.edu/code>
- AAMFT Code of Ethics
https://www.aamft.org/Legal_Ethics/Code_of_Ethics.aspx

Grievance Policy

The faculty of the Marriage and Family Therapy Specialization place open and honest communication between students and faculty as a high priority. To further such communication the faculty have established the following grievance policy statement. This policy is intended to supplement the existing OSU Grievance Policy as established by the Academic Appeals Board, not to replace that policy.

During their time as students at Oklahoma State University, those in the MFT Specialization may at some time feel they have been unjustly treated by a faculty member. In order to address these instances, we recommend that student(s) take the following steps. While we recognize that there may be instances where students will need to start by filing a formal grievance with the Academic Appeals Board, we hope that in most instances the following steps will provide a mechanism for addressing grievances within the MFT Specialization.

- (1) Contact the faculty member with whom you have a grievance and make an appointment to discuss the matter.
- (2) If after the meeting you do not feel the matter was adequately resolved, you should meet with the MFT Program Coordinator, or another MFT core faculty member if the grievance involves the Coordinator, about the grievance.
- (3) If, after meeting with the Coordinator, you do not feel your grievance was adequately resolved the next step is for you to explain the grievance to the HDFS Department Head.
- (4) If, after all of the above steps are completed, you are not satisfied that your grievance has been adequately addressed, we recommend that you contact Dr. Christine Johnson, Associate Dean for Research and Graduate Studies to try to resolve your concerns.

We hope that the above policy will foster open and direct communication between faculty and students and provide an avenue for students to address grievances they may have.

Important Links:

- Graduate Student Appeals
<https://gradcollege.okstate.edu/content/appeals-policy>
- Leave of Absence Policy
<https://gradcollege.okstate.edu/leave-of-absence-policy>
- OSU Student Code of Conduct
<https://studentconduct.okstate.edu/code>
- Academic Integrity Policy:
<http://academicintegrity.okstate.edu/>

All persons who believe that they have been subjected to discrimination or sexual harassment are encouraged to seek assistance.

Instructions for receiving assistance and/or filing a grievance for **gender discrimination or sexual harassment** can be found at:

https://eeo.okstate.edu/sites/default/files/gender_discriminationsexual_harassment_policy_and_title_ix_grievance_procedure.pdf

Instructions for filing a **grievance for other discrimination** can be found at:

<http://eeo.okstate.edu/sites/default/files/2015%20Title%20IX%208-2-16%20--%20Intake%20Questionnaire.docx>

Getting Involved

Looking for ways to get involved? Participating in various organizations is a great way to network with other professionals, build leadership skills, and gain experience. Below is a list of available state and national organizations to help you get connected.

AAMFT

The American Association for Marriage and Family Therapy (AAMFT) is the professional association for the field of marriage and family therapy. AAMFT represents the professional interests of more than 50,000 MFTs throughout the US, Canada and abroad.

- AAMFT
www.aamft.org

OKAMFT

The Oklahoma Association for Marriage and Family Therapy (OKAMFT) is your first and best stop for news on employment and practice building opportunities in your state/province. The Division represents you at the state or provincial government on legislative and regulatory matters that affect your ability to make a living. You will find opportunities to enhance your leadership skills, stay up-to-date on the latest innovations in the field and meet, work with other MFTs throughout Oklahoma. Historically each year, student/associate members of OKAMFT elect a student representative to the OKAMFT board. The student rep serves as a nonvoting member of the board and president of the OKAMFT student board. The student board is made up of graduate student representatives from each of the MFT graduate programs across Oklahoma. Each fall, the OKAMFT student board also hosts the Student & New Professional Conference.

- OKAMFT Website
www.okamft.org

National Council on Family Relations (NCFR)

The National Council on Family Relations is the premier professional association for the multidisciplinary understanding of families.

- NCFR Website
www.ncfr.org

Appendices*

*Note that updated forms can be found on the program server in the “MFT program files” folder.

Commonly Asked Questions about OSU and the MFT Specialization

To help you to know more about who we are and what we do, the faculty of the MFT specialization have put together the following list of commonly asked questions and answers. If you have other questions not on this list, feel free to ask the Program Coordinator. We hope you find this helpful and welcome you to OSU/MFT.

How do I know what classes I should take?

Your faculty chair is a primary source of information about the classes you should take. In addition, a curriculum with recommended sequence is included in this handbook. .

Is health insurance available for graduate students?

Yes. All students on a graduate assistantship receive health insurance from OSU. If you are not on an assistantship, you can call the Student Governing Association for more information at (405) 744-6500. There is also an on-campus student health center for non-emergency health care.

Are computers available for student use?

There are several means for students to have access to computers. There are computers available to clinically active students in the business office. The Human Sciences computer lab is located in the basement of Human Sciences and an HDFS Graduate Student lounge with computing access is available on the second floor of the Human Sciences building.

When will I know about assistantships and financial aid?

You will know as soon as we know. We are hoping we will know by August of each year you are at OSU. The graduate coordinator will contact you if you are to be offered an assistantship. If you are interested in an assistantship notify the graduate coordinator and he/she will add your name to the list of interested students. Assistantships awarded can be research, teaching, or other administrative functions.

In addition, there are other sources of financial assistance, such as scholarships and fellowships. Watch your HDFS mailbox for announcements and apply for everything! For most scholarships and fellowships if you do not apply you will not be considered.

Finally, there are government loan programs for which you might qualify. Check with the OSU Office of Financial Aid (744-6604) for application procedures.

Will I have any other responsibilities during my first year?

In addition to your responsibility to observe cases and to serve as an active team member when assigned, as you become more familiar with CFS procedures we will ask you to take on other tasks. These tasks will likely include sitting in on non-therapy clinical experiences with a senior therapist (i.e. depression screenings or relationship checkups), helping with publicity efforts by hanging flyers on bulletin boards, and eventually spending 1-2 hours per week answering the telephone in the CFS office and doing “intakes.” Intakes are the first contact potential clients have with us when seeking services. This is an important responsibility since conveying professionalism, competence, and getting accurate information from potential clients is related to successful therapy. In addition, when you start doing intakes you will be given keys to the CFS where confidential client files are located, so your responsibility to preserve client confidentiality is great.

How much time should I plan to commit to this program?

We consider this program to be a full-time commitment. You will take a full load of classes and have clinical responsibilities (observing at first, then doing) every semester. If anything, most students tell us the time commitment increases with each semester due to the increasing clinical responsibilities. Even as a full-time program, most students take 2 1/2 years to complete all graduation requirements.

What is a Plan of Study?

The Plan of Study is your contract with the Graduate College detailing what degree requirements you must meet before graduating. The Plan includes the courses you will take, the faculty members who agree to be on your committee (including your choice of major advisor), and your decision to do either a thesis or non-thesis track. You will need to file your Plan of Study by the middle of spring semester.

Do I have to do a thesis?

No, our graduation requirement is that every student must complete either a thesis or non-thesis track. Students who choose the non-thesis track take an additional 6 credit hours of elective courses approved by the MFT core faculty. When you file your plan of study you will have to choose which option. Faculty can help you with this decision

Should I join a professional organization?

Definitely! You will be encouraged during your time at OSU to become a student member of AAMFT and to actively participate in professional development activities. These activities will include attending and presenting at professional meetings. In addition, our students have a good record of service to the profession through volunteering at state and national conferences, and serving as Student/Associate Member of the OKAMFT Board of Directors. OSU/MFT students also are frequent presenters at the AAMFT Annual Conference and other national and state conferences. Becoming an active professional is highly encouraged. AAMFT has a website with much valuable information (including a membership application) at <http://www.aamft.org>.

Am I guaranteed a job when I finish?

No, but I'm certain someone in the past has told you there are no guarantees in life, right? However, the employment record of our graduates is good. Many have job offers from their internship sites before they graduate. Most of our graduates have been able to find employment as therapists within a few months after graduation (many before graduation), even when competing in some very tough job markets. We are proud of our graduates' records.

How will I know when I am finished with my degree?

You will be finished with your M.S. in MFT when you have completed all the classes on your plan of studies (receiving an average of a B /3.0 gpa across all courses meeting the degree requirements), have successfully completed the 500 (minimum) hours client contact with at least 200 hours with couples or families present, received a minimum of 100 hours of supervision (including both group and individual), demonstrated basic clinical competencies as judged by faculty supervisors, and successful completion of the capstone requirements, and completed your thesis/non-thesis track requirements.

What support services are available to me?

Students are entitled to 12 counseling sessions through the University Counseling Services' Student Counseling Center in 320 Student Union each fiscal year (July 1st through June 31). Both individual and group counseling are available.

For more information go to: <http://ucs.okstate.edu/counseling>

Or, to contact the Student Counseling Center call (405) 744-5472

Graduate College & University Resources

Graduate College:

- Graduate College: <http://gradcollege.okstate.edu/>
- OSU Catalog: <https://registrar.okstate.edu/University-Catalog>
- Academic Calendar: <https://gradcollege.okstate.edu/graduate-college-academic-calendar>
- Fall/Spring/Summer Enrollment Guidelines: <https://gradcollege.okstate.edu/enrollment>
- Graduate Assistantships: <http://gradcollege.okstate.edu/assistantship>
- Graduate College Academic Calendar: <http://gradcollege.okstate.edu/graduate-college-academic-calendar>
- Graduate Degree/Certificate Programs: <http://gradcollege.okstate.edu/degree>
- Graduate Faculty Database: <https://gradcollege.okstate.edu/faculty-and-staff-resources>
- Graduate Student Appeals Policy: <http://gradcollege.okstate.edu/content/appeals-policy>
- Graduate and Professional Student Government Association (GPSGA): <http://gpsga.okstate.edu/>
- Graduate College Forms: <http://gradcollege.okstate.edu/FormsPage>
- Graduate Student Appeals: <https://gradcollege.okstate.edu/content/appeals-policy>
- Graduation Checklist (Doctoral Degree): <http://gradcollege.okstate.edu/doctoral-checklist>
- Graduation Checklist (Master's Degree): <http://gradcollege.okstate.edu/masters-checklist>
- International Teaching Assistant Test: <https://gradcollege.okstate.edu/ita>
- Leave of Absence Policy: <https://gradcollege.okstate.edu/leave-of-absence-policy>

- OSU Guidelines for Best Practices in Graduate Education: <http://gradcollege.okstate.edu/bestpractices>
- OSU Best Practices: Advisory Committees and Defenses: <https://gradcollege.okstate.edu/best-practices>
- Test of English Language Proficiency: <http://gradcollege.okstate.edu/telp>

University:

- Career Services: <http://www.hireosugrads.com/StudentsAlumni/>
- Edmon Low Library: <http://www.library.okstate.edu/>
- Family Resource Center: <http://www.reslife.okstate.edu/frc/>
- Health Insurance (Student): <http://uhs.okstate.edu/student-health-insurance-plan>
- Information Technology: <http://www.it.okstate.edu/>
- Institute for Teaching and Learning Excellence: <http://itle.okstate.edu/>
- International Student and Scholars Office: <http://iss.okstate.edu/>
- International Students Arrival and Orientation: <http://iss.okstate.edu/arrival-orientation>
- Office of Multicultural Affairs: <http://oma.okstate.edu/>
- OSU High Performance Computing Center: <http://hpc.it.okstate.edu/>
- OSU Writing Center: <http://osuwritingcenter.okstate.edu/>
- Residential Life: <http://www.reslife.okstate.edu/>
- Responsible Conduct Research Training: <https://research.okstate.edu/compliance/rcr/training.html>
- OSU Research Compliance:
 - Appropriate Use of Human Subjects in Research: <https://research.okstate.edu/compliance/>
 - Appropriate Use of Animals in Research: <http://compliance.okstate.edu/iacuc/iacuc-index>

- Biosafety Program: <http://compliance.okstate.edu/ibc/ibc-index>
- Radiation Safety Program: <http://compliance.okstate.edu/rso/rso-index>
- Laser Safety Program: <http://compliance.okstate.edu/lso/lso-index>
- Seretean Wellness Center: <http://wellness.okstate.edu/>
- Services for Students with Disabilities: <http://sds.okstate.edu//>
- Student Affairs: <https://studentaffairs.okstate.edu/>
- Student Code of Conduct: <https://studentconduct.okstate.edu/code>
- The OSU Student Union: <http://union.okstate.edu/>
- University Counseling Services: <http://ucs.okstate.edu/>
- University Health Services: <http://uhs.okstate.edu/>
- University Parking Services: <http://www.parking.okstate.edu/>

Informed Consent for Clinical Training

OKLAHOMA STATE UNIVERSITY
CLINICAL MASTERS SPECIALIZATION IN MARRIAGE AND FAMILY THERAPY
INFORMED CONSENT

PREFACE: The clinical portion of training in the M.S. specialization in Marriage and Family Therapy offered by the Department of Human Development and Family Science involves the student in a unique applied learning experience. The clinical experiences, with their additional responsibilities and methods of evaluation, are not typical of other non-clinical, graduate programs offered by HDFS. Because of the unique aspects of clinical training, this document is designed to describe aspects of the Marriage and Family Therapy specialization of which the student might not otherwise be aware. This document should be read and used in conjunction with other documentation concerning the MFT specialization and graduate studies in HDFS.

CLINICAL PRACTICUM: Beginning spring semester of the first year, students must be continuously enrolled in a three credit hour practicum for a minimum of 18 months and until the 500 client contact hour requirement (at least 200 relational) is completed and the faculty agree that the students have met the minimum level of clinical competencies. During the time that students are enrolled in practicum they will receive supervision during every week that they see cases. *The student is responsible for the accurate recording and reporting of these hours to the Program Coordinator on a monthly basis.*

Students are responsible for complying with program requirements concerning accurate and prompt clinical record-keeping. Case files will be audited regularly.

During the latter stages of clinical training students are placed at off-campus sites. Students are required to provide transportation and other expenses associated with these placements.

Learning to be a therapist is challenging and requires a high degree of commitment to clients, co-therapists, and supervisors. If at any time during the clinical portion of training a student determines that she/he does not want to complete his/her degree in MFT, the student should inform the Program Coordinator in writing.

Students may be expected to fulfill commitments to clients and co-therapists until the end of the semester in which they withdraw from training or complete their clinical hours.

LIABILITY INSURANCE: Students and their supervisors incur liability for the therapy services provided by the student. During the practicum experiences in the Center for Family Services, students are required to obtain and pay for liability insurance before enrolling in a clinical practicum or working clinically with clients. Liability insurance is provided through AAMFT, if the student is a member.

THE NATURE OF SUPERVISION: The primary goal of supervision is the enhancement of the supervisee's professional competence and a secondary goal of assuring quality of service to clients. Each student enrolled in a clinical practicum must receive weekly individual and/or group supervision. A large portion of this supervision must be live observation or review of recorded sessions.

Supervisors vary in the degree to which they focus on theory, skills, and use of self. However, each of these issues will receive attention at some point in the program.

If the supervisor thinks that personal material is interfering with the student's assessment or treatment of clients, the supervisor will bring that concern to the attention of the student and may suggest that the student seek professional services to address the issue further. *Supervisors will not conduct personal therapy with supervisees, nor will the program require a student to obtain personal therapy.* However, if personal issues appear to the faculty supervisors to continue to interfere with the student's performance as a therapist, the supervisor will provide consultation for the student therapist and that difficulty will be reflected in the student's practicum grade and possibly in the student's progress through the program. If the personal issues continue to negatively affect the therapist's clinical work, the

therapist can be removed from cases in accordance with Oklahoma LMFT Regulations and AAMFT Code of Ethics concerning protection of clients.

Students who choose to reveal personal information during clinical supervision deserve to have that information treated with respect. That respect includes keeping the information confidential, even from other faculty and supervisors. ***Oklahoma LMFT Regulations will be followed in regards to confidentiality.*** If the supervisor believes disclosure to another supervisor who is, or will be, working with the student would enhance supervision, that recommendation will be discussed with the student, who will be allowed to follow the recommendation or not.

Supervisors may, however, share information about general areas in which the student is having difficulty in the conduct of therapy with another supervisor with whom the student is now, or will be, working. In addition, end of semester evaluations are routinely forwarded to the student's next on campus clinical supervisor to assist him/her in continued supervision of the student. Students also receive a copy of this evaluation.

Students in a clinical practicum can expect to receive live supervision from behind a one-way mirror, as well as supervision based on recordings of sessions and case notes. Students can also expect regular feedback on their progress in clinical practicum. This regular feedback will be verbal during the course of the semester, unless the faculty have reason to be especially concerned. In that case, a letter outlining the concern(s) will be sent to the student. End of semester evaluations will include a course grade, which goes on the student's transcript, and a copy of the Clinical Skills Evaluation Device from his/her individual supervisor.

PROGRESS TOWARD LICENSURE AND AAMFT CLINICAL MEMBERSHIP: The student is responsible for direct communication with the appropriate licensing board regarding licensure and AAMFT regarding clinical membership. Most students continue to work on licensure and clinical membership after graduation. The Program Coordinator at OSU will provide documentation of supervision and client contact hours accomplished at OSU as requested.

RESEARCH. An important aspect of the OSU land grant mission and our responsibility as MFTs is to expand knowledge through research. Therefore, ongoing research is conducted at the Center for Family Services into therapy, supervision, and training outcomes. All participants in this research (CFS clients, student therapists, and faculty) have the right to decline participation in the research. All research participants are guaranteed that they will never be identified by name in reports of the research. Student therapists who wish to not be included in CFS research should notify the Program Coordinator in writing.

I understand the nature of clinical training as described above and choose to enter the clinical practicum in marriage and family therapy.

SIGNED: _____ (Therapist)

_____ (Coordinator, MFT Specialization)

_____ (Date)

Clinical Skills Evaluation Device (with benchmarks)

Expected levels of development (benchmarks) as of the end of each semester are listed below (1=Spring Yr1, 2=Summer Yr1, 3=Fall Yr2, 4=Spring Yr2, 5=Summer Yr2, 6=Fall Yr3)

1. Admission & Engagement	1 Not at all	2 Minimal	3 Partial	4 Mostly	5 Fully
f. Attend to and address barriers to treatment engagement for diverse clients.			1	2	3 >
g. Effectively explain practice setting rules, fees, rights, and responsibilities.				1	2 >
h. Effectively join with and engaging each member of the client system in treatment.			1	2	3 >
i. Establish mutually agreed upon therapeutic contracts with clients.		1	2	3	4 >

2. Assessment & Diagnosis	1 Not at all	2 Minimal	3 Partial	4 Mostly	5 Fully
a. Accurately diagnose mental/behavioral disorders using the DSM 5			1	2, 3	4 >
b. Effectively use basic interviewing skills -- empathic listening, reflective statements, validating statements, paraphrasing.			1	2	3 >
c. Accurately identify contextual risk (e.g., divorce, family violence, low SES, minority status) and current client crises (e.g., suicidal ideation, danger to self or others)			1	2	3 >
d. Accurately assess client strengths, resilience, and resources.			1	2	3 >
e. Systematically integrate client reports, observation of client behaviors, and other information from assessment to guide the development of tx plans.		1	2	3, 4	5 >

3. Case Management	1 Not at all	2 Minimal	3 Partial	4 Mostly	5 Fully
a. Structure and organize sessions consistent with the formulated treatment plan.		1	2, 3	4, 5	6 >
b. Adapt treatment plans throughout treatment based on client need.		1, 2	3	4	5 >
c. Accurately and promptly complete case documentation in accordance with agency policies, professional standards, and state laws.			1	2	3 >
d. Effectively collaborate with community systems of care (i.e., church, other family, other service providers) to facilitate client change.		1	2	3, 4	5 >

4. Interventions	1 Not at all	2 Minimal	3 Partial	4 Mostly	5 Fully
a. Effective use of questioning (circular, reflexive, lineal, and strategic; use of follow up questioning).		1	2	3, 4	5 >
b. Effectively utilize skills of normalizing and reframing.			1	2, 3	4 >
c. Elicit and utilize family strengths.			1	2, 3	4 >
d. Effectively manage and regulate intensity within sessions.		1, 2	3	4, 5	6 >
e. Effectively facilitate and manage couple and family interaction in sessions.		1, 2	3	4, 5	6 >
f. Deliver interventions in a way that is sensitive to special needs of clients (e.g., gender, age, SES, culture/race/ethnicity, sexual orientation, disability).		1	2, 3	4	5 >
g. Appropriately respond to and deliver interventions that effectively address crisis situations such as trauma, domestic violence, addictions, self-harm, sexual assault, substance abuse, etc.		1	2, 3	4	5 >

5. Professionalism and Ethics	1 Not at all	2 Minimal	3 Partial	4 Mostly	5 Fully
a. Practice in accordance with the AAMFT code of ethics and the Oklahoma state licensure acts and regulations.				1	2 >

6. Conceptual Skills	1 Not at all	2 Minimal	3 Partial	4 Mostly	5 Fully
a. Context – identify key contextual influences relative to problem formation and the change process.			1	2, 3	4 >
b. Phase of Change – conceptualize treatment (goals and interventions) in terms of clearly definable phases of therapeutic change.	1	2	3,4	5,6	
c. Intrapersonal (within individual) – Identify key intrapersonal experiences/processes that impacts problem formation/maintenance or the change process (perspective, emotion, and behavior)			1, 2	3	4 >
d. Interpersonal (between individuals) – Identify key interpersonal processes that impact problem formation/maintenance or the change process (structure, process)			1, 2	3	4 >

7. Conceptual/Theoretical Skills	1 Not at all	2 Minimal	3 Partial	4 Mostly	5 Fully
a. Develop and articulate a clear personalized and systemic model of family therapy that fully integrates theoretical concepts/perspectives from select models of family therapy.	1, 2, 3	4	5	6	

b. Recognizing strengths and weaknesses of own theoretical model in assessment and treatment for different populations and contexts (e.g., cultural, gender, economic).	1, 2, 3	4	5	6	
c. Demonstrate the consistent implementation of a fully integrated, personalized, and systemic model of family therapy.	1, 2, 3	4	5	6	

8. Self of Therapist	1 Not at all	2 Minimal	3 Partial	4 Mostly	5 Fully
h. Continually evaluate self in terms of conceptual, perceptual, executive, professional, and evaluative skills.			1, 2	3, 4	5 >
i. Receive feedback from supervisors and colleagues non-defensively.				1, 2	3 >
j. Show awareness of and ability to manage own anxiety, attitudes, and personal well-being.			1, 2	3, 4	5 >
k. Demonstrate authenticity and flexibility in session.		1	2, 3	4	5 >
f. Show understanding of and continually monitor how personal experiences, characteristics, issues, and beliefs influence the therapeutic process.		1	2, 3	4	5 >
g. Demonstrate professionalism in interaction with colleagues, clients, supervisors, and other professionals.					1 >
Consistently presents to individual supervision on time well prepared with marked video and clear objectives for supervision.					1 >
Actively participates in group supervision, providing thoughtful comments and suggestions, aiding colleagues in the conceptualization of cases.					1 >

Oklahoma State University Marriage and Family Therapy CFS Monthly Clinical Hours Report

Student Name: _____ Site Name: ___ CFS ___

Month/Year: January 2018

Therapy Hours

Dates of Week (e.g., 7.12 -- 7.17)	Individual	Group (Ind)	Couple (Relat)	Family (Relat)	Group (Relat)	Alternate (Relat)	Alternate (Ind)	Relational Total	Total Hours
								0	0
								0	0
								0	0
								0	0
								0	0
								0	0
Month Totals	0	0	0	0	0	0	0	0	0

¹ Prior Total	0	0	0	0	0	0	0	0	0
² Updated Total	0	0	0	0	0	0	0	0	0

Supervision Hours

Dates of Week (e.g., 7.12 -- 7.17)	Live	Audio Group	Audio Individual	Video Group	Video Individual	Case Note Group	Case Note Individual	Total Hours
								0
								0
								0
								0
								0
Month Totals	0	0	0	0	0	0	0	0

¹ Prior Total	0	0	0	0	0	0	0	0
² Updated Total	0	0	0	0	0	0	0	0

Student Signature: _____ Date: _____

Program Coordinator Signature: _____ Date: _____

¹Cumulative total at the end of prior month

²Cumulative total at the end of current month

Oklahoma State University Marriage and Family Therapy External Site Monthly Clinical Hours Report

Student Name: _____ Site Name: _____

Month/Year: September 2018

Therapy Hours

Dates of Week (e.g., 7.12 -- 7.17)	Individual	Group (Ind)	Couple (Rel)	Family (Rel)	Group (Rel)	Alternate (Rel)	Alternate (Ind)	Relational Total	Total Hours
								0	0
								0	0
								0	0
								0	0
								0	0
								0	0
Totals for this Month	0	0	0	0	0	0	0	0	0

¹ Prior Total	0	0	0	0	0	0	0	0	0
² Updated Total	0	0	0	0	0	0	0	0	0

Student Signature: _____ Date: _____

On-Site Supervisor Signature: _____ Date: _____

¹Cumulative total at the end of prior month

²Cumulative total at the end of current month

Externship Site Requirements

Marriage and Family Therapy Specialization
Oklahoma State University

1. Externships must take place within a setting that is chartered or licensed by the appropriate state authority, if applicable, and that has been in operation for at least two (2) full years. The institution must have a governing board that includes representation reflecting the public interest.
2. A continuous 9-12 month clinical experience in marital and family therapy must be available at the externship site.
3. Caseloads at the externship site must be sufficient so that a minimum of 50% of the intern's time at the site involves direct client contact of a therapeutic nature. Up to 50% of the intern's time at the site may involve administrative case support work such as case consultations and staffing meetings, generation and review of case notes, etc.
4. The Intern's weekly work schedule shall be agreed upon at the beginning of each semester. Combined off campus externship work shall not exceed 15 clock hours per week, with no more than 10 hours per week of direct client contact, unless special permission is obtained from the intern's supervisor and the MFT program coordinator.
5. The intern will not be available for home-based services.
6. The intern will not be available to provide transportation for clients.
7. Accurate records of client contact of each intern must be documented and verified and signed by the externship site supervisor and made available to the marriage and family therapy program.
8. The externship site must provide adequate facilities and equipment for the intern to carry out designated responsibilities.
9. The externship site must provide interns with an appropriate orientation to the policies and procedures of the externship site.
10. Externship sites must have published procedures for handling grievances.
11. Externship sites must have published policies prohibiting discrimination on the basis of race, ethnicity, religion, and gender.
12. For supervision purposes, the externship site shall allow the MFT program faculty supervisor to have unencumbered on-site access to all of the intern's raw clinical data. (raw clinical data includes all aspects of clinical work including case notes, audio or video tapes, agency case staffing meetings, consultations, live therapy observation, etc.)
13. The externship agency must designate a specific person who shall serve as the intern's on-site administrative supervisor.
14. The role for the administrative supervisor is two fold, to:
 - 1) Provide administrative support and management responsibility over the intern while at the facility;
 - 2) Serve as the liaison person between the site and the OSU Marriage and Family Therapy Program.
15. The OSU clinical supervisor maintains primary legal and ethical responsibility for the intern's work. Therefore, during the times that the OSU faculty supervisor is not available (typically three to four weeks per year), the intern will not be available to perform clinical services at the external site.
16. A signed agreement, the "Inter-Institutional Letter of Agreement", must be on file between Oklahoma State University and the externship site before the intern may begin work at the site.

Inter-Institutional Letter of Agreement

Marriage and Family Therapy Specialization Clinical Externship

_____ enters into this agreement with the Oklahoma State University Marriage and Family Therapy Program to provide a field experience for _____, who is a graduate student in the Marriage and Family Therapy Specialization. We have read the MFT Specialization's "Externship Site Requirements" and find the requirements agreeable to all participating parties.

This externship agreement shall begin on _____, and shall continue through the end of July, 2018, subject to renewal and continuation on a month-to-month basis after that point.

This Agreement entered into on this _____ Day of _____, 2018

Extern Site Administrator

Marriage and Family Therapy Intern

Coordinator, OSU Marriage and Family Therapy Specialization

OSU MFT Off Site Evaluation of Clinical Intern

Intern: _____ **Evaluation Date:** _____

Clinical Site: _____ **Site Supervisor:** _____

We ask that you complete the following form regarding the intern's performance within your agency at the conclusion of the intern's work at your agency. Upon completion of this form we ask that you review it with the intern. You can either return this form with the intern or mail it back to the MFT Program Coordinator, Human Development and Family Science, 233 HES, Stillwater, OK 74078. We appreciate your help in providing feedback on the performance of this student and for the important role that you play in the intern's development!

Please rate each area using the following scale:

1 = Inadequate, 2 = Somewhat Adequate, 3 = Adequate, 4 = Good, 5 = Superior

_____ 1. Ability to form therapeutic relationships with a wide range of clients

Comments:

_____ 2. General therapy skills

Comments:

_____ 3. Openness to on-site supervision and feedback

Comments:

_____ 4. Sensitivity to issues of diversity (e.g., gender, economics, ethnicity, and race)

Comments:

_____ 5. Professional behavior

Comments:

_____ 6. Professional appearance

Comments:

_____ 7. Attitude

Comments:

_____ 8. Relationship with agency staff

Comments:

_____ 9. Dependability

Comments:

_____ 10. Following agency procedures and policies

Comments:

_____ 11. Timeliness of completing paperwork

Comments:

_____ 12. Quality of paperwork

Comments:

_____ 13. Overall performance at your agency

Comments:

14. Please comment on the intern's areas of strength.

15. Please comment on the areas that you would like to see the intern improve on.

16. Please describe the manner and frequency of onsite supervision.

17. Please provide any general feedback to the MFT Program Coordinator about the structuring of the MFT program externships.

Supervisor Signature: _____

Date: _____

Intern Signature: _____

Date: _____

Clinical Intern Evaluation of Off Site

Intern: _____ **Evaluation Date:** _____

Clinical Site: _____ **Site Supervisor:** _____

To provide a sense for your clinical work at your site please provide a rough estimate of the percentage of therapy provided in each format since the beginning of your off-site work or since the last evaluation.

Relational

Family _____
 Couple _____
 Group _____

Individual

Child _____
 Teen _____
 Adult _____
 Group _____

Please indicate your experience at your off site by responding to the following questions using the following six-point likert scale.

- | | |
|--------------------------|------------------------|
| 1. Completely inadequate | 4. Slightly adequate |
| 2. Primarily inadequate | 5. Primarily adequate |
| 3. Slightly inadequate | 6. Completely adequate |

- _____ Number and availability of cases
- _____ Types of cases/presenting problem
- _____ Treatment modalities emphasized/encouraged
- _____ On-site training/lectures/seminars
- _____ Agency emphasis on intern development
- _____ Agency conduciveness to MFT orientation
- _____ Workload
- _____ Relationship with fellow therapists
- _____ Relationship with agency staff/supervisors
- _____ Availability of agency staff
- _____ Work environment
- _____ Appropriateness of agency expectations
- _____ Flexibility with student's schedule
- _____ Facilities and physical resources
- _____ Positive influence of off-site on student development
- _____ Overall off-site experience

What are the most positive aspects of this placement?

What are the most significant problems/challenges with this placement?

Would you recommend this site for a future placement?

Other Comments?

Request to Schedule Capstone

In order to be eligible to complete the capstone requirements of the program (capstone papers and clinical presentations) students must complete the requirements listed below by the specified deadlines.

	Summer 2nd Year	Fall 3rd Year
Deadline	June 1 st	September 1 st
Requirements	<ul style="list-style-type: none"> • Completion of approximately 400 client contact hours. • Submission of this completed form to the program coordinator. 	

Upon receiving the student’s request, all MFT faculty will meet to review the student’s clinical development. If the student is judged to be meeting MFT program core competencies, is on track with the development of the program clinical competencies, and has completed all of the above listed requirements, the student will be allowed to complete and submit the capstone paper during that semester.

Please provide the following information:

1. Number of direct client contact hours completed _____.
2. Number of relational hours completed _____.

 Student’s Signature Date Committee Chair Signature Date

Student’s Request Approved Yes No

 Program Coordinator’s Signature Date

Methods of Assessing Student Learning Outcomes

Course	Semester	Assess/Activity	Items	Benchmarks	SLO	
Models	1.1 or 2.1	Final Exam		80% ≥ 80%	10a	
Systems Theory	1.1	Final Exam			10b	
Psychopathology	1.1 or 2.1	Final Exam			10c	
Ethics	1.2	Oral Final Exam			10d	
		Written Final Exam			10d	
Child	1.2 or 2.2	Exam			10e	
Practicum	1.2 to 3.1	Clinical Skills Evaluation	See evaluation Note for formative evaluation: 75% will meet bench on each item	Students will average 80% meeting benchmark across items for each SLO	1 to 8	
	2.3 or 3.1	Capstone: Model Paper and Rubric	Self of the therapist	80% ≥ 4	8f	
			Healthy family	Students will average 80% ≥ 4 across items	7a	
			Problem formation		7a	
			Role of therapist		7a	
			Phases of change		7a	
			How change happens		7a	
			Strenghts and limitations	80% ≥ 4	7b	
	2.3	Offsite Supervisor Evaluation	Form therapeutic relationships	80% ≥ 4	1a-d	
			Openess to supervisor feedback		8b	
			Sensitivity to issues of diversity		1a, 2c, 4f	
			Professional behavior		8g	
			Quality of paperwork		3c	
CC/Thesis	2.3 or 3.1	CC/Thesis and Rubric	Thoroughness of review	Students will average 80% scoring ≥ 4 across the five items for 9a.	9a	
			Critical evaluation of research			
			Synthesis and integration			
			Summary and recommendations			
			Hypotheses			
				Proposed sampling and procedures	Students will average 80% scoring ≥ 4 across the five items for 9b.	9b
				Proposed measurement		
				Proposed analyses		
				Answer to questions		
N/A	One year after graduation	Employer Evaluation of Alumni	Admitting and egaging clients	80% ≥ 4	1a-d	
			Assessment and diagnosis		2a-e	
			Quality and timliness of paperwork		3c	
			Utilizing interventions		4a-g	
			Ethics		5a	
			Treatment planning		6a-d	
			Openness to feedback		8b	
			Self of therapist		8c	
			Sensitivity to issues of diversity		1a, 2c, 4f	
			Practicum		2.3	Comprehensive Exam
Systems	10b					
Psychopathology	10c					
Ethics	10d					
Child	10e					

