



COAMFTE

Commission on Accreditation for
Marriage and Family Therapy Education

Daniel Lord, PhD, LMFT
Chair

November 21, 2017

Jaime Goff, PhD, LMFT
Chair Elect

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Dear Dr. Bertram:

Lloyd Kaufman, MA
Public Member

The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), at its November 3-4, 2017 meeting, reviewed the Marriage and Family Therapy (MMFT) program at Abilene Christian University for the Special Report and Renewal of Accreditation. This review included consideration of the program's Eligibility Criteria, Self-Study, COAMFTE's Self-Study Review Letter, Program's Additional Information, Site Visit Report, Program's Response to Site Visit Report, and any additional materials submitted by the program.

The Commission voted to accept the program's Special Report and previously deferred Annual Report based on the following information provided by the program.

The program provided sufficient information at this time. The program provided evidence of the survey used to determine sufficiency of the identified resources, data collected by that survey, and minutes of a faculty meeting where this data was discussed regarding sufficiency.

The Commission voted to grant Renewal of Accreditation for a period of seven (7) years, November 1, 2017 - November 1, 2024, with **Stipulations** on the following Key Elements:

Key Element I-B
Key Element IV-C

Key Element V-B

Consistent with the COAMFTE policy on *Notification to Program of COAMFTE Actions*, the program must agree in writing to any stipulations for accreditation before the status can be conferred (*COAMFTE Accreditation Manual: Policies and Procedures*). **The program is required to respond in writing by December 1, 2017 to coa@aamft.org.**

The Commission's review of the program's Renewal of Accreditation materials is below:

ELIGIBILITY CRITERIA

Commission's Response:

The program provided sufficient information to meet all the Eligibility Criteria.

STANDARD I: OUTCOME-BASED EDUCATION

Key Element I-A: Outcome-Based Education Framework

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

- *A description of the program's mission, and how it fits with the larger institutional setting of the program.*
- *Specific program goals (which describe broad aspirations for the program and for students/graduates of the program) are clearly derived from the program's mission and that promote the development of Marriage and Family Therapists (including knowledge, practice, diversity, research, and ethics competencies).*
- *Measurable Student Learning Outcomes (SLOs) for each program goal.*
- *Programs must include SLOs that measure student/graduate achievement appropriate to the program's mission and goals.*
- *Specific assessment measures for operationalizing the achievement of Student Learning Outcomes (including student/graduate achievement) including targets and benchmarks. Measurement includes assessment of students' academic and professional competencies by the faculty and others, appropriate to the program's mission, goals, and outcomes.*

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of a program mission aligned with its institution and program goals supported by a system of alumni and student learning outcomes that are measured with benchmarks and targets that include student/graduate achievement.

Key Element I-B: Assessment Plan with Mechanisms and Timeline

The program has an overall assessment plan that includes:

- *Mechanisms in place for evaluating/reviewing the Student Learning Outcomes, including student/graduate achievements (utilizing specific measures identified in I-A).*
- *Mechanisms in place for evaluating student support services; curriculum and teaching/learning practices; fiscal and physical resources; technological resources; and instructional and clinical resources to determine sufficiency for attainment of targeted program outcomes.*
- *An assessment plan and corresponding timeline that addresses when, from whom, and how data is collected, and a description of how data will be aggregated and analyzed and the findings used for program improvement (feedback loop). The assessment plan should include a specific description of how the program will review and revise, as needed, their overall outcome-based education framework and assessment plan.*

- *The assessment plan must incorporate feedback from Communities of Interest (as defined in Key Element I-C).*

Commission's Response:

The program does not meet the requirements of this Key Element. The program described multiple assessment activities and schedules via narrative related to its cycle of assessment that address the program achievement areas identified in this Key Element. Also, the program provided faculty meeting minutes supporting review activity. The program needs to provide evidence of an assessment plan that clearly presents these multiple activities and includes a comprehensive timeline with details defining when, from whom, and how data is collected, aggregated, analyzed and used for program improvement. The Commission encourages that this plan be clearly defined, detailed and documented in program resources in to support both the complexity of assessment activity and program improvement of the assessment plan itself.

Key Element I-C: Communities of Interest

The program identifies its Communities of Interest, obtains formal and informal feedback from them, and describes how they inform the program's mission, goals, and Student Learning Outcomes. Communities of Interest vary according to the program's mission, goals, and outcomes and may include, but are not limited to, students, administrators, faculty, supervisors, consumers, graduates, potential employers, germane regulatory bodies, germane private and public funding sources, and diverse, marginalized, and/or underserved groups within these communities.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of identifying specific Communities of Interest relevant to its program mission, goals and outcomes. In addition, the program provided multiple ways that feedback from each Community of Interest is gathered and used for program improvement. Also, the program identified marginalized Spanish speaking clients as a diverse, marginalized, and/or underserved group that it engages and demonstrated how it receives and incorporates feedback from this population.

STANDARD II: COMMITMENT TO DIVERSITY AND INCLUSION

Key Element II-A: Multiculturally-informed Education Approach

The program has a multiculturally-informed educational approach that includes:

- 1) *specific program goals with specific Student Learning Outcomes reflecting a commitment to diversity and inclusion;*
- 2) *an overarching definition of diversity; and*
- 3) *curriculum elements with accompanying teaching/learning practices consistent with the program's mission. The educational approach includes the teaching of ideas and professional practices for MFTs that address a range of diversity, including (but not limited to) race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religious, spiritual, and/or political beliefs, nation of origin or other relevant social categories, immigration or language.*

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of a multiculturally-informed educational approach through a program goal, alumni and student learning outcomes, a definition of diversity, and multiple elements of curricular activity.

Key Element II-B: Program Climate of Safety, Respect, and Appreciation

The program demonstrates a climate of safety, respect, and appreciation for all learners including those from diverse, marginalized, and/or underserved communities, and has mechanisms in place for evaluating the climate and responding to any feedback regarding the climate.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of demonstrating and evaluating a climate of safety, respect and appreciation for all learners through inclusion of student representatives in faculty meetings, alumni and student surveys, and program transparency on these processes and program responses.

Key Element II-C: Experience with Diverse, Marginalized, and/or Underserved Communities

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

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

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence that demonstrates student experience with diverse, marginalized, and/or underserved communities both in clinical contact and classroom experiences supported by assessment/tracking mechanisms that include alumni and student surveys and aggregated client demographics from the program's clinic.

STANDARD III: INFRASTRUCTURE AND ENVIRONMENTAL SUPPORTS

Key Element III-A: Fiscal and Physical Resources

The program demonstrates that fiscal and physical resources are sufficient to achieve the program's mission, goals, and outcomes. These resources are reviewed, revised as needed, and support program effectiveness.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of access to fiscal resources through program budget funds, alumni and student surveys that provide feedback regarding perception of fiscal and physical resources, and narrative of a program review process supported by faculty meeting minutes. The Commission recommends that the program more clearly define how it determines sufficiency of resources based on these data such as specific benchmarks and targets.

Key Element III–B: Technological Resources

The program demonstrates that technological resources (e.g., laptops, audio/visual equipment, EMRs and Billing Systems, Virtual Meeting Space) are secure, confidential, Health Insurance Portability and Accountability Act compliant (if relevant), and sufficient to achieve the program’s mission, goals, and outcomes. These resources are reviewed, revised as needed, and support program effectiveness.

Commission’s Response:

The program meets the requirements of this Key Element. The program provided evidence demonstrating technological resources as identified in this Key Element are assessed through alumni and student surveys, reviewed by faculty, and revised as needed to support the program mission, goals, and outcomes. The Commission recommends that the program more clearly define how it determines sufficiency of resources based on these data such as specific benchmarks and targets.

Key Element III-C: Instructional and Clinical Resources

The program demonstrates that instructional and clinical resources (e.g., space, personnel, supplies) are sufficient to enable the program to meet the program’s mission, goals, and outcomes. These resources are reviewed, revised as needed, and support program effectiveness.

Commission’s Response:

The program meets the requirements of this Key Element. The program provided evidence demonstrating instructional and clinical resources are funded, assessed through alumni and student surveys, reviewed by faculty, and improved as needed to support the program’s mission, goals, and outcomes. The Commission recommends that the program more clearly define how it determines sufficiency of resources based on these data such as specific benchmarks and targets.

Key Element III-D: Academic Resources and Student Support Services

The program demonstrates that academic resources (e.g., library, advising, writing centers) and student support services (e.g., access to counseling, financial advising) are accessible to students and sufficient to achieve the program’s mission, goals, and outcomes. These resources are reviewed based on core faculty and student input, and the program takes action or advocates for institutional change to address areas required for program effectiveness.

Commission’s Response:

The program meets the requirements of this Key Element. The program provided evidence demonstrating academic resources and student support services resources are assessed through alumni and student surveys, reviewed by faculty, and improved as needed to support the program’s mission, goals, and outcomes. The Commission recommends that the program more clearly define how it determines sufficiency of resources based on these data such as specific benchmarks and targets.

Key Element III-E: Faculty Qualifications & Responsibilities

The faculty roles, in teaching, scholarship, service, and practice are identified clearly and are congruent with the program’s mission, goals, and outcomes.

- *The faculty members are academically, professionally, and experientially qualified to achieve the program's mission, goals, and outcomes. The qualifications must be identified in documented descriptions of roles and responsibilities. Faculty members must have documented expertise in their area(s) of teaching responsibility and knowledge of the content delivery method (e.g., distance learning).*
- *The program must demonstrate that it has mechanisms for reviewing and evaluating faculty effectiveness in support of the program's mission, goals, and outcomes. Faculty evaluations include explicit links to the program's mission, goals, and outcomes.*

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence that faculty members are academically, professionally, and experientially qualified and that these qualifications are aligned with the program's mission, goals, and outcomes. Also, the program provided evidence that faculty evaluation occurs through university faculty review processes and use of IDEA course evaluations with specific links to the program's mission, goals, and outcomes.

Key Element III-F: Faculty Sufficiency

The faculty must be sufficient in number with a faculty-student ratio that permits the achievement of the program's mission, goals, and outcomes and ensures that student educational needs are met. These resources are reviewed, revised as needed, and support program effectiveness.

- *The program must have sufficient core faculty members who are knowledgeable and involved in ongoing program development, delivery, and evaluation required to achieve the program's mission, goals, and outcomes.*
- *The program must have a stated process for evaluation of ongoing sufficiency of faculty resources.*
- *The program must demonstrate there are sufficient faculty and effective linking mechanisms with feedback loops, such as regular coordination, meetings, and/or communication, to connect and involve all faculty members in the achievement of expected and actual Student Learning Outcomes of the program.*
- *The program is permitted to use a combination of full-time, part-time and/or multiple adjuncts.*

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of demonstrating faculty sufficiency through compliance with the institution's required faculty-student ratio of 1:11 and reviewing perceptions of sufficiency through alumni and student surveys (Question 42). Also, the program provided evidence of a primary linking mechanism for connecting with and involving all faculty in achievement of student learning outcomes through an annual pre-session meeting. The Commission recommends that the program more clearly define its review process of faculty sufficiency with documentation in a program resource.

Key Element III-G: Governance of Program

Roles of faculty and student participation in the governance of the program are clearly defined and enable the program to meet the program's mission, goals, and outcomes.

The program must describe decision-making processes and procedures at the program and institutional levels regarding the operation of the program that support program effectiveness.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of defined program governance roles for faculty and students, and description of decision-making processes at the program and institutional level to support program effectiveness. The Commission notes that the student role in program governance is documented in the Academic Handbook under the title of "Student Representatives" (pp. 15-16). While the information is clear and detailed, the title obscures the section's applicability to Program Governance.

Key Element III-H: Supervisor Qualifications & Responsibilities

Supervisors must be AAMFT Approved Supervisors or meet the supervisor equivalency definition in the glossary. Supervisor roles, as distinguished from teaching faculty, are identified clearly and are congruent with the program's mission, goals, and outcomes.

- *Supervisors are academically, professionally, and experientially qualified to achieve the program's mission, goals, and outcomes. The qualifications must be identified in documented descriptions of roles and responsibilities.*
- *If supervisor equivalency is used, there must be full disclosure to students in order for them to make informed decisions and evaluate regulatory implications for other states/provinces/locations.*

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of supervisor qualifications and responsibilities through definition of supervisor roles in the Academic Handbook and presentation of supervisor credentials, partially in documents provided by the program and further information available to the Site Visit Team.

Key Element III-I: Supervisor Sufficiency

Supervisors must be sufficient in number with a supervisor-student ratio that permits the achievement of the program's mission, goals, and outcomes, especially Student Learning Outcomes. Supervisory resources are reviewed, revised as needed, and support program effectiveness.

- *The program must have a stated process for evaluation of ongoing sufficiency of supervisor resources.*
- *The program must demonstrate there are sufficient and effective linking mechanisms with feedback loops, such as regular coordination, meetings, and/or communication, connecting and involving all supervisors in the achievement of expected and actual achievement of Student Learning Outcomes within the program.*

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of defining supervisor sufficiency through a supervisor-student ratio of 1:6 and by reviewing perceptions of sufficiency through alumni and student surveys (Question 41). Also, the program provided evidence of a primary linking mechanism for connecting with and involving all supervisors in achievement of student learning outcomes through an annual pre-session meeting

and monthly faculty and supervisor meetings. The Commission recommends that the program more clearly define its processes to support review of supervisor sufficiency including documentation in a program resource.

STANDARD IV: CURRICULUM

Key Element IV-A: Curriculum and Teaching/Learning Practices

The program must provide:

- *A description of the logical sequencing of the curriculum and practice components, including rationale for how the program's goals and accompanying Student Learning Outcomes fit within the program offered (e.g., where goals and outcomes are addressed and assessed within the curriculum).*
- *A description of key teaching/learning practices used to accomplish program goals, and Student Learning Outcomes.*
- *A description of processes and procedures to ensure and monitor student progress and completion of requirements.*
- *A description of governance processes and procedures for designing, approving, implementing, reviewing, and changing the curriculum.*

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of the logical sequencing of the curriculum and practice components that included how student learning outcomes are addressed and displayed in course syllabi, processes and procedures to ensure and monitor student progress and completion, and governance processes guiding curricular review and change.

Key Element IV-B: Foundational and Advanced Curricula

Foundational Curriculum

The foundational curriculum covers the knowledge and skill required to practice as a MFT by covering the Foundational Curricular Areas below.

- *Master's degree program must demonstrate that they offer course work that covers all the FCAs that make up the foundational curriculum.*
- *Doctoral degree programs must demonstrate that they offer course work and/or that students have completed course work, in all the areas contained in the foundational curriculum or that students demonstrate competence in those areas.*
- *Post-degree programs must demonstrate that they offer course work and/or that students have completed course work in all the areas contained in the foundational curriculum, or that students demonstrate competence in those areas.*
- *Programs may combine more than one of these foundational curriculum areas into a single course, as they build their curriculum in ways that are congruent with the program's mission, goals, and outcomes.*
- *Programs may emphasize some of the areas more than others and include other areas that are consistent with their program's mission, goals and outcomes. Programs may include another layer of requirements based on a specialization or emphasis (e.g., faith-based*

orientation, licensure laws, specialized certification, and so on) as long as there is a clear rationale and relational/systemic philosophy in the majority of the program.

- *Minimum semester/quarter credits or equivalent clock hours are established for the first seven curricular areas. Programs may choose what combination of additional area 1 through 7 semester/quarter credits or equivalent clock hours beyond the individual area minimums will be taught consistent with their program's mission, goals, and outcomes.*
- *Programs must require students to develop and/or present an integrative/capstone experience before completion of their degree program as part of the foundational curriculum below. Programs must decide how to meet this requirement in keeping with the program's mission, goals, and outcomes. Examples include: a theory of change/therapy theory presentation/paper, a thesis, a therapy portfolio, or a capstone course.*

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

FCA 8: Contemporary Issues

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

FCA 9: Community Intersections & Collaboration

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

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of meeting the required content areas detailed in the Foundational Curriculum, including the use of an integrative capstone project. Also, the program provided evidence of a curriculum map detailing where program goals and student learning outcomes are addressed and evidence of presenting this information within each course syllabus as relevant.

Key Element IV-C: Foundational and Advanced Application Components

The program must demonstrate they offer an application component with appropriate placement in the curriculum, duration, focus, and intensity consistent with their program's mission, goals, and outcomes.

Foundational Practice Component

- *Master's degree program and Post-degree programs that teach the foundational curriculum offer the foundational practice component (practicum and/or internship).*
- *Includes a minimum of 500 clinical contact hours with individuals, couples, families and other systems physically present, at least 40% of which must be relational. The 500 hours must occur over a minimum of twelve months of clinical practice. The 500 hours may include a maximum of 100 alternative hours or clinical activity (e.g., couple or family groups, live cases where reflecting teams are directly involved in working with clients, etc.) that is directly related to the program's mission, outcomes, and goals. Alternatively, the program may demonstrate that graduating students achieve a competency level equivalent to the 500 client contact hours. The program must define this competency level and document how students are evaluated and achieve the defined level. The program demonstrates a consistent set of evaluation criteria for achieving the defined level of competency across all students. In addition, programs that do not require 500 hours must document that students are informed about licensure portability issues that may result from not having 500 hours. Those programs requiring less than 500 hours may not use alternative hours to count toward total client contact hours.*
- *The program demonstrates a commitment to relational/systemic-oriented supervision. Students must receive at least 100 hours of supervision, and must receive supervision from an AAMFT Approved Supervisor or Supervisor Candidate for at least one hour each week in which they are seeing clients. Additional supervision may be provided by AAMFT Approved Supervisors, Supervisor Equivalents, or State Approved Supervisors. Supervision can be individual (one supervisor with one or two supervisees) or group (one supervisor and eight or fewer students) and must include a minimum of 50 hours of supervision utilizing observable data. Supervision may utilize digital technology in which participants are not in the same location as long as the majority of supervision is with supervisor and supervisee physically present in the same location and appropriate mechanisms/precautions are in place to ensure the confidentiality and security of the means of technology delivery.*
- *Programs have agreements with practice sites that outline the institutions', the practice sites' and the students' responsibilities, and published procedures in place for managing any difficulties with sites, supervisors, or students.*

Commission's Response:

The program does not meet the requirements of this Key Element. The program provided evidence of meeting the Foundation Practice Component's requirements for client contact experience and commitment to relational/systemic supervision. Also, the program described the linkages between the Foundational Practice Component and the Foundational Curriculum Component. The program needs to provide evidence of consistent and clear description of roles and responsibilities for the Program Director and Clinical Director regarding student clinical placement experience, including where these are presented in program documents. Also, the program needs to provide evidence that indicates the program's Externship Site Agreements are completed for active Externship Sites.

Key Element IV-D: Program and Regulatory Alignment

The program demonstrates that graduates have met educational and clinical practice requirements (e.g., coursework, clinical experience, and supervision) that satisfy the regulatory requirements for entry-level practice in the state, province, or location in which the program physically resides or in which the student intends to practice. Programs must also document that students are informed (e.g., demonstrate review of appropriate regulatory sites or licensing laws) about the educational, clinical, and regulatory requirements for entry-level practice in the state, province, or location in which each student resides or intends to practice.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of providing students with information on regulatory alignment of the program with Texas MFT licensure, as well as accessing parallel information in other states.

Key Element IV-E: Curriculum/Practice Alignment with Communities of Interest

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

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of considering the needs and expectations of its Communities of Interest supported by faculty meeting minutes and surveys. The Commission notes that the program activity described is presented in narrative only, but without supporting documentation of these procedures in program resources. The Commission recommends that such documentation be considered to support consistency and program improvement related to this Key Element.

STANDARD V: PROGRAM EFFECTIVENESS AND IMPROVEMENT

Key Element V-A: Demonstrated Student/Graduate Achievement

The program provides aggregated data regularly collected on student/graduate achievement.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of three-year aggregated data for Student/Graduate Achievement, including student licensure exam pass rates, licensure rates, AAMFT membership, students going on to doctoral programs, and numbers of students working in the field.

Key Element V-B: Demonstrated Achievement of Program Goals

The program describes how data was analyzed and provides aggregated data that demonstrates achievement of each program goal via data from measured Student Learning Outcomes, based on targets and benchmarks provided in the program's outcome-based education framework—data from Student Learning Outcomes demonstrate that the program is meeting program goals.

Commission's Response:

The program does not meet the requirements of this Key Element. The program indicated three cohorts of data for most alumni/student learning outcomes and one cohort of data for most student learning outcomes. Also, some student learning outcomes had no data reported. The data that was reported indicated the program was achieving its program goals. The program needs to provide evidence of fully implementing its Outcomes-Based Education Framework and its assessment plan, by systematically collecting and aggregating data for review of all student learning outcomes for more than one student cohort to demonstrate ongoing achievement of program goals.

Key Element V-C: Demonstrated Achievement of Faculty Effectiveness

The program must demonstrate faculty effectiveness in achieving the program's mission, goals, and outcomes.

- *The program provides aggregated data that demonstrates the Program Director provides effective leadership for the program to achieve its program's mission, goals, and outcomes.*
- *The program provides aggregated data that demonstrates the performance and achievements of faculty that support attainment of the program's mission, goals, and outcomes.*

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of data from one assessment cycle from its identified mechanisms for evaluating faculty effectiveness.

Key Element V-D: Demonstrated Program Improvement

The program demonstrates how evidence is used to maintain the achievement of Student Learning Outcomes and/or foster program improvement with plans for future improvement based on the evidence. Evidence includes but is not limited to findings regarding program goals and outcomes, student/graduate achievement, Communities of Interest, and evaluations (as described in the assessment plan) of curriculum and teaching/learning practices; fiscal and physical resources; technological resources; instructional and clinical resources; academic resources; and student support resources. Data should demonstrate that the program is meeting its goals and outcomes, especially specified targets and benchmarks and if not, what plans the program has for meeting or modifying its goals.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of engaging data from its assessment plan components to foster program improvement as supported by faculty meeting minutes.

NOTE: Consistent with the COAMFTE Corrective Action Policy (COAMFTE Accreditation Manual: Policies and Procedures, pp. 20-21), COAMFTE accredited programs carrying stipulations will have a maximum of two years from the date of stipulation to come into compliance with the standards. Year One will include Imposing of Stipulations; Year Two will include Probation and hosting a Focused Site Visit. Programs that fail to rectify such compliance issues will be subject to revocation of accreditation status at the beginning of Year Three.

Please note that the program is now in its Year 1 – Impose Stipulations stage. Consistent with the Corrective Action Policy, programs must submit a compliance report addressing deficiencies by the noted deadline, review accreditation materials, and consult with Accreditation Staff. Additionally, it is recommended that the program attend accreditation trainings and seek consultation from an external consultant (a list of consultants can be obtained from the Accreditation Office).

Programs may elect to submit their response to stipulations earlier, for an interim review, to clear their stipulations. The interim response can only be submitted during the first year of the Corrective Action Policy. Following the interim response, programs will continue to report on the established timeline. Programs interested in submitting an interim response should contact COAMFTE staff to confirm the submission deadline.

Program's Response to Stipulations Instructions:

- 1) Program's response should address all Key Elements that have Stipulations and include definition of all referenced Key Elements.
- 2) Program's response should not refer to previously submitted documents (Eligibility Criteria, Self-Study, appendices, etc.).
- 3) Programs may provide additional information as supporting evidence of the program's response.
- 4) Program's Response to Stipulations and any supporting documentation must be in one document, in a PDF format with bookmarks linked to the individual components. The bookmarks MUST follow the order of the individual components. The PDF document must not exceed 30 MB in size.
- 5) Program's Response to Stipulations must be submitted on or before the due date to coa@aamft.org.

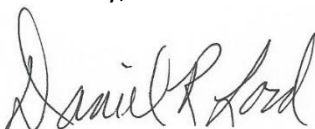
The following documents must be submitted in the required format by the noted deadlines:

Document	Submission Deadline
Interim Response to Stipulations (optional)	January 31, 2018
Annual Report	
Response to Stipulations	July 31, 2018

In accordance with COAMFTE policy, the program will need to submit an Annual Report on January 31st of every year of your accreditation term.

Please feel free to contact the Accreditation Office by e mail at coa@aamft.org or by phone at (703) 253-0448 if you have further questions or if you would like any additional information.

Sincerely,



Daniel Lord, PhD
COAMFTE Chair



Tanya A. Tamarkin
Director of Accreditation