



COAMFTE

Commission on Accreditation for
Marriage and Family Therapy Education

Daniel Lord, PhD, LMFT
Chair

May 18, 2017

Jaime Goff, PhD, LMFT
Chair Elect

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Dear Dr. Katafiasz:

Lucien Capone III, JD
Public Member

The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), at its April 21-22, 2017 meeting, reviewed the Marriage and Family Therapy (MS) program at University of Akron for Renewal of Accreditation. This review included consideration of the program's 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 grant Renewal of Accreditation for a period of four (4) years, May 1, 2017 - May 1, 2021, with **Stipulations** on the following Key Elements:

Key Element I-A

Key Element III-E

Key Element II-C

Key Element IV-A

Key Element II-G

Key Element IV-C

Key Element III-A

Key Element IV-D

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](#), p. 21). **The program is required to respond in writing by June 1, 2017 to coa@aamft.org.**

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

STANDARD I: OUTCOME-BASED EDUCATION

Key Element I-A:

The program will have clearly specified educational outcomes congruent with the institution and program's mission and appropriate to the profession of MFT.

Commission's Response:

The program does not meet the requirements of this Key Element. The program provided evidence of Educational Outcomes complete with Program Outcomes, Faculty Outcomes, and Student Learning Outcomes. However, none of these outcomes linked to the program's mission statement regarding "training students to become advanced practitioners, teachers/supervisors, and researchers". The program needs to provide evidence of a distinct master's program mission focusing on preparation for the profession of MFT that is congruent with the program's Educational Outcomes. Also, the Commission encourages the program to clarify an accurate understanding of its institutional mission and more strongly relate its MFC/T master's program mission to the missions of the College of Health Professions and School of Counseling.

Key Element I-B:

Educational outcomes reflect an understanding and respect for cultural diversity.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of having a consistent evaluation of an Educational Outcome that reflects an understanding and respect for cultural diversity and implemented through a measured Program Outcome, Faculty Outcome, and Student Learning Outcome.

Key Element I-C:

Educational outcomes are reviewed periodically and revised to reflect professional marriage and family therapy principles, educational guidelines, the communities of interest, and the advancement of the program.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of specific structured processes for periodic review and revision of its full set of Educational Outcomes. This was verified by the Site Visit Team on site.

Key Element I-D:

The program will be clearly identifiable as training students in the profession of marriage and family therapy.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence that the program is clearly identified as training students in the profession of marriage and family therapy.

Key Element I-E:

Roles of faculty and students in the governance of the program are clearly defined and enable the program to meet stated educational outcomes.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of the roles of the faculty and the students in the governance of the program as stated in the Self-Study and the Self-Study Addendum.

Key Element I-F:

Documents and publications accurately reflect the program. Any references to published or promotional materials to the program's offerings, faculty and student learning outcomes, accreditation/approval status, academic calendar, admission policies, grading policies, racial and cultural composition of the faculty, students, and supervisors, degree completion requirements, tuition, and fees are accurate.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of working links and printed material requested by the Commission's evaluation of the program's Self-Study. In the program's response to the Site Visit Report, they provided a link to the annually updated faculty diversity information.

Key Element I-G:

Policies of the program are fair, equitable, published, and are reviewed and revised as necessary. These policies include but are not limited to those relative to student recruitment, anti-discrimination, admission, retention, and graduation.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of these policies in their Self-Study and the Site Visit Team was able to verify working links to these publications.

STANDARD II: COMMITMENT TO DIVERSITY AND INCLUSION

Key Element II-A:

The program resides in an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the educational outcomes of the program.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of an academic environment that encourages faculty teaching, scholarship, service, and practice in keeping with the Educational Outcomes of the program. The Site Visit Team verified this evidence on-site.

Key Element II-B:

Fiscal and physical resources are sufficient to enable the program to meet educational outcomes. These resources are reviewed, revised, and improved as needed.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence that fiscal and physical resources are sufficient to enable the program to meet its educational requirements, including the approval of one new core faculty to reduce the use of adjunct faculty. The program provided evidence of a clear framework with guidelines for determining whether fiscal and physical resources are sufficient to meet the educational outcomes and the evidence was verified by the Site Visit Team.

Key Element II-C:

Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs.

Commission's Response:

The program does not meet the requirements of this Key Element. The program provided evidence of formal evaluation from alumni. The program needs to provide evidence of a clear framework with guidelines for determining whether academic support services are sufficient to meet the Educational Outcomes, that current students and faculty contribute to this evaluation, and clarification on who reviews these evaluations, and how the program uses these reviews to ensure that Educational Outcomes are being met.

Key Element II-D:

The program director is academically, professionally, and experientially qualified and is vested with the authority necessary to accomplish the educational outcomes of the program. The program director provides effective leadership to the program in achieving its educational outcomes.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of a qualified Program Director with the authority necessary to accomplish the master's program's Educational Outcomes. Also, the program provided evidence of an institutional review of the Program Director that included opportunity for faculty input.

Key Element II-E:

The program director, or whoever has or shares ultimate program responsibilities, will be an AAMFT Approved Supervisor or a State Approved Supervisor. Supervisory candidacy status or equivalency does not satisfy this element.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of current status as an AAMFT Approved Supervisor and of posting her credentials for the Site Visit Team to verify.

Key Element II-F:

Program director responsibilities include oversight of the curriculum, clinical training program, facilities, services, and the maintenance and enhancement of the program's quality.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of the Program Director's responsibilities and oversight and a plan for transition of these to the new Program Director. The Site Visit Team was able to verify evidence on site.

Key Element II-G:

Faculty members are academically, professionally, and experientially qualified and sufficient in number to achieve educational outcomes of the program.

Commission's Response:

The program does not meet the requirements of this Key Element. The program provided evidence of obtaining permission for a new faculty line. The program will need to provide evidence of the process by which it determines that the faculty are/are not sufficient in number to achieve its Educational Outcomes.

Key Element II-H:

The faculty roles in teaching, scholarship, service, and practice are identified clearly and are congruent with the educational outcomes of the program.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of faculty roles and the program's conception of how faculty roles are linked to Program Goals.

STANDARD III: INFRASTRUCTURE AND ENVIRONMENTAL SUPPORTS

Key Element III-A:

The curriculum is based on and developed, implemented, and revised to reflect clear statements of expected student learning outcomes that are consistent with Professional Marriage and Family Therapy Principles and congruent with the program's educational outcomes.

Commission's Response:

The program does not meet the requirements of this Key Element. The program provided evidence of basing its curriculum on AAMFT Core Competencies, COAMFTE Educational Guidelines, and AMFTRB Task Statements. This evidence included a curriculum map of the AAMFT Core Competencies, specific references to one set or another within a Course Objectives table displayed in syllabi, and a standardized statement titled, "Syllabi Attachment", which is presented in the "MFC/T Master's Handbook" and attached to each syllabus. The program needs to provide evidence of identifying in each course syllabus the **specific** Student Learning Outcome(s) related to that course's content, and an accurate and consistent reference to the specific Professional Marriage and Family Therapy Principles presented in each syllabus course objectives table. Also, the program needs to describe a specific curriculum review and revision **process** by which it determines that the program's curriculum supports the achievement of expected Student Learning Outcomes.

Key Element III-B:

The curriculum is based upon a comprehensive and substantive understanding and foundation of human development, family dynamics, systemic thinking, interactional theories, traditional and contemporary marriage and family therapy theories, research, and the cultural context in which they are embedded.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of how each of the courses fits into the comprehensive plan and the Site Visit Team verified how core and departmental faculty ensure the inclusion of MFT materials.

Key Element III-C:

The curriculum is logically structured to meet expected program outcomes.

- 1. The master's curriculum is clinically and empirically focused consistent with the educational outcomes of the program.*
- 2. The doctoral curriculum is based upon a foundation of research and teaching principles as well as advanced clinical and supervision training consistent with the educational outcomes of the program. The doctoral curriculum builds upon the foundation of the master's curriculum.*

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence in the Self-Study Addendum of how the coursework is logically constructed and linked to Program Outcomes. The Site Visit Team verified the evidence and the students' experience of developing an identity as an MFT through taking those courses prior to the more counseling focused ones.

Key Element III-D:

Curriculum and teaching/learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.

Commission's Response:

The program meets the requirements of this Key Element. The program provided a table with details on the Faculty's Course Evaluation Process, Educational Outcomes, Supervisor Evaluation and Assessment Cycle. The Site Visit Team verified that the Program Director reviews the supervisor evaluations by the students, and then consults with the Clinical Director if problems arise.

Key Element III-E:

The didactic and clinical teaching/learning practices and learning environments support the achievement of expected and actual student learning outcomes.

Commission's Response:

The program does not meet the requirements of this Key Element. The program provided evidence of the teaching and learning practices linked to Student Learning Outcomes #1-4. The program needs to provide evidence of how the program's learning environments and teaching practices support the achievement of the program's Student Learning Outcomes.

Key Element III-F:

The curriculum and teaching/learning practices consider the needs and expectations of the identified communities of interest.

Commission's Response:

The program meets the requirements of this Key Element. The Site Visit Team verified evidence of meetings with current students and a newly established Advisory Board, and several proposed changes that resulted from these meetings.

STANDARD IV: CURRICULUM

Key Element IV-A:

Student performance in both coursework and clinical practice is evaluated by faculty and supervisors and reflects achievement of expected outcomes. Evaluation policies and procedures are defined, published, and consistently applied.

Commission's Response:

The program does not meet the requirements of this Key Element. The program provided evidence of a published and applied pre-practicum readiness review. The Site Visit Team verified that the Internship Clinical Evaluation was tied to Student Learning Outcomes #1-3. The program needs to provide evidence of how the assessment data for Student Learning Outcome #4, (a 70% pass rate on the national LMFT exam)

is evaluated and the subsequent process for program improvement should the evaluation team determine improvements are required for any Student Learning Outcome.

Key Element IV-B:

Programs will have policies and procedures specifying how to collect information about students, demonstrated achievements of graduates, and employer satisfaction. Student outcome data include, but are not limited to, graduation rates, national (or state) licensing exam pass rates, and job placement rates as appropriate.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of program collection of students', graduates', and employers' satisfaction. The Commission suggests that the program construct written policies and procedures of how the data are collected and evaluated, by whom, and on what timeline.

Key Element IV-C:

Program outcome data are analyzed to provide evidence of program effectiveness and are used to foster ongoing program improvement.

Commission's Response:

The program does not meet the requirements of this Key Element. In the response to the Site Visit Report, the program provided evidence of students' scores from the national examination that are program specific. The Site Visit Team verified Program Outcome data from several cohorts. The program needs to provide evidence of aggregate data from evaluations (not raw data/individual evaluations) of each of the Program Outcomes, analyze the data and explain how the analyses of data indicate program improvement.

Key Element IV-D:

Faculty outcomes demonstrate achievement of the program's educational outcomes, and enhance program quality and effectiveness.

Commission's Response:

The program does not meet the requirements of this Key Element. The Site Visit Team verified that the program provided evidence of achievement of Faculty Outcomes. The program needs to provide evidence of analysis of aggregated data of faculty achieving outcomes and explain how the analysis of the data indicated program quality and effectiveness.

Key Element IV-E:

The program has established policies and procedures by which it defines and reviews formal student complaints.

Commission's Response:

The program meets the requirements of this Key Element. The program provided evidence of policies and procedures for reviews of student complaints and the Site Visit Team verified the evidence.

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 (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) | July 31, 2017 |
| Annual Report | |
| Response to Stipulations | January 31, 2018 |
| Eligibility Criteria | April 1, 2019 |

In accordance with COAMFTE policy, the program will need to submit an Annual Report on July 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