



# COAMFTE

Commission on Accreditation for  
Marriage and Family Therapy Education

May 18, 2017

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Chair

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Dr. Rikki Patton  
Marriage and Family Therapy Program  
University of Akron (PhD)  
School of Counseling  
302 Buchtel Common  
Akron, OH 44325-5007

Dear Dr. Patton:

The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), at its April 21-22, 2017 meeting, reviewed the Marriage and Family Therapy (PhD) 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 I-B  
Key Element II-G  
Key Element III-A

Key Element III-E  
Key Element IV-A  
Key Element IV-C  
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](mailto: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 a revised Educational Outcomes template that is consistently presented in program materials and of linkages between the Program Mission and its twelve Program, Faculty, and Student Learning Outcomes. The program needs to provide evidence of an accurate understanding of its institutional mission endorsed by its institutional leaders. Also, the program is asked to clarify (a) how the Program Objectives section in its Doctoral Handbook (page 8) presents a purpose statement and eight student competencies relates to its Program Mission and Educational Outcomes as presented in the revised Educational Outcomes template, and (b) how the program implements its mission statement's commitment to training students to become "teachers" as well as "supervisors" in the field of marriage and family therapy.

**Key Element I-B:**

*Educational outcomes reflect an understanding and respect for cultural diversity.*

**Commission's Response:**

The program does not meet the requirements of this Key Element. The program provided evidence of attention to an understanding and respect for diversity in its Program Mission and specific outcomes in its Program Outcomes, Faculty Outcomes, and Student Learning Outcomes. Also, the program defines adequate measures of the respective Program and Faculty Outcomes. The program needs to provide evidence of a measure for Student Learning Outcome #3 matched with the Student Learning Outcome's statement that "students will demonstrate advanced knowledge, understanding, and respect for diversity".

**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 a collection of review processes used to accomplish an overall review of Educational Outcomes. These included a Program Improvement Cycle, a Data Review process occurring every two years, and a Student and Program Review section in the Doctoral Handbook. The program also provided evidence of (a) intentionally engaging Communities of Interest to receive input in the review process and (b) faculty consideration of review data for program advancement.

**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 of presenting the program as a Marriage and Family Therapy training program and faculty and student identity as marriage and family therapists in program documents and site visit interaction.

**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 defined faculty and student roles in program governance that support achievement of its Educational Outcomes.

**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 accurate program information as required.

**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 published policies pertinent to this Key Element, surveys for gathering data used in review activity as needed, and minutes of a special faculty session called to review Educational Outcomes data and additional aggregated data related to program policies.

**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 institutional, departmental, and program practices that demonstrate a supportive environment for faculty activities aligned with the Program's Educational Outcomes.

**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 of sufficient fiscal and physical resources and an active review process to meet Educational Outcomes.

**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 meets the requirements of this Key Element. The program provided evidence of sufficient academic support services and ongoing processes for receiving and reviewing student and program needs.

**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 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 the Program Director's status as an AAMFT Approved Supervisor.

**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 an institutional job description verifying Program Director responsibilities.

**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 the qualifications of its current faculty members and reports that it has been approved for an additional faculty line currently being recruited. The program needs to provide evidence of how it determines that faculty members are sufficient in number to achieve the Program's 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 clearly defined faculty roles required by this Key Element that are congruent with the Program's Educational Outcomes.

**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: MFC/T Doctoral Student Information", which is presented in the Doctoral 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 content and accurate and consistent reference to the specific Professional Marriage and Family Therapy Principles presented in syllabi Course Objective tables. 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 attention to the content areas required in the Key Element.

**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 of a doctoral curriculum that requires the foundation of the master's curriculum and required coursework in research, clinical training and supervision consistent with the Program's Educational Outcomes. The doctoral curriculum includes a mix of Counselor Education and Supervision related courses and MFT related courses.

**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 evidence of both formal and informal processes for evaluating and improving curriculum and teaching/learning practices. The Commission requests that the program clarify where the Teaching Evaluation and Supervisor Evaluation processes described in the Doctoral Response to Site Visit Report are located.

**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 learning environment resources that support achievement of its four Student Learning Outcomes. The program needs to provide evidence of didactic and clinical teaching/learning practices that it identifies as intentionally designed to support achievement of its 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 program provided evidence of implementing a new advisory board that includes persons from several of its identified Communities of Interest as the primary means for achieving this Key Element.

**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 student performance evaluations used in coursework and clinical practice related to Student Learning Outcomes and specific rubrics for evaluation of Student Learning Outcomes #1, #3, and #4. The program also presented a 2015 Biannual Review narrative table reporting all Student Learning Outcomes' benchmarks as met supported by faculty minutes of the review "Special Session." The program also reported a section in its Doctoral Handbook describing "Student and Program Review Process." While that section listed review of CACREP learning outcomes, it did not include review of student performance data related to the program's COAMFTE Student Learning Outcomes. The program needs to provide evidence of a rubric for assessing Student Learning Outcome #2 and a policy and procedure that implements review of student performance data specific to achievement of its revised COAMFTE Student Learning Outcomes

as reported in 2015. Also, the program should provide evidence of implementing this policy such as minutes of faculty meetings complete with the aggregated data presented for review.

**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 policies and procedures for six areas of student/graduate achievement or input to the program presented in the Doctoral Response to Site Visit Report. The Commission requests information on where the policies and procedures reside in program documents for future use.

**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. The program provided evidence of collecting data from the measures reported for each of the four Program Outcomes that indicated benchmarks were met. However, the Commission is unable to determine that these data are reviewed specifically for the purpose of considering program effectiveness and improvement. The program needs to provide evidence of reviewing Program Outcome aggregate data for analysis of program effectiveness and improvement rather than for determining if a graduation requirement or benchmark is met.

**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 program provided evidence of collecting data from the measures reported for each of the four Faculty Outcomes that indicated benchmarks were met. However, the Commission is unable to determine that these data are reviewed specifically for the purpose of considering how these data can be used to enhance program quality and effectiveness. The program needs to provide evidence of reviewing Faculty Outcome aggregate data for analysis of enhancement of 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 established policies and procedures related to formal student complaints. The program also indicated that it had received no formal complaints in the past five years.

**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](mailto: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 31<sup>st</sup> of every year of your accreditation term.



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

Sincerely,

A handwritten signature in black ink that reads "Daniel Lord". The signature is written in a cursive style with a large initial 'D'.

Daniel Lord, PhD  
COAMFTE Chair

A handwritten signature in black ink that reads "Tanya A. Tamarin". The signature is written in a cursive style with a large initial 'T'.

Tanya A. Tamarin  
Director of Accreditation