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November 28, 2018

Dr. David Ward
Marriage and Family Therapy Program
Pacific Lutheran University (MA)

Dear Dr. Ward:

The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), at its November 2-3, 2018 meeting, reviewed the Marriage and Family Therapy (MA) program at Pacific Lutheran University for 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 grant Renewal of Accreditation for a period of seven (7) years, November 1, 2018 - November 1, 2025, with **Stipulations** on the following Key Elements:

Key Element I-C	Key Element III-D
Key Element III-A	Key Element III-G
Key Element III-B	Key Element III-H
Key Element III-C	Key Element IV-E

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 clear mission with specific ties to the larger institutional mission and to clearly identified program goals. The program also demonstrated measurable student learning outcomes for each goal and mechanisms of measuring student attainment of these learning outcomes.

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 meets the requirements of this Key Element. The program provided evidence of an assessment plan that allows them to collect information about student learning outcomes, student/graduate achievement, and support services and resources for learning. The program demonstrated how its plan incorporates feedback from Communities of Interest. The Commission strongly recommends the program adopts faculty minutes as evidenced for the assessment plan for future reports.

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 does not meet the requirements of this Key Element. The program indicated obtaining feedback from their Communities of Interest and using that feedback to inform their program's mission and student learning outcomes. The program needs to provide evidence of how they are informing their off-site supervisors of the student learning outcomes and their role in supporting students in meeting them.

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 parts of the mission, one program goal and two student learning outcomes, specifically related to diversity and inclusion. Additionally, the program provided an overarching and encompassing definition of diversity and demonstrated a focus on diversity in their curriculum and supporting learning practices.

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 creating a climate of safety and including mechanisms for feedback related to the climate. The program has demonstrated efforts to attract and retain a diverse group of students, faculty, and supervisors.

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 of providing students with several experiences that allow them to interact with diverse, marginalized, and underserved communities and reflect on those experiences.

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 does not meet the requirements of this Key Element. The program provided evidence of sufficiency of fiscal and physical resources to achieve the program's mission, goals, and outcomes. The program outlined a process for the collection of feedback from students about adequacy of resources, how they evaluate the adequacy of resources to help them meet their mission, goals, and outcomes, and where they make decisions about revision of resources if necessary. The program needs to provide evidence of how faculty provide feedback about fiscal and physical resources.

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 does not meet the requirements of this Key Element. The program provided evidence of sufficiency of technological resources to achieve the program's mission, goals, and outcomes. The program outlined a process for the collection of feedback from students about adequacy of resources,

how they evaluate the adequacy of resources, and where they make decisions about the revision of resources if necessary. The program needs to provide evidence of how faculty provide feedback about technological resources.

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 does not meet the requirements of this Key Element. The program provided evidence of sufficiency of instructional and clinical resources to achieve the program's mission, goals, and outcomes. The program outlined a process for the collection of feedback from students about adequacy of resources, how they evaluate the adequacy of resources, and where they make decisions about revision of resources if necessary. The program needs to provide evidence of how faculty provide feedback about instructional and clinical resources.

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 does not meet the requirements of this Key Element. The program provided evidence of accessibility and sufficiency of instructional and clinical resources to achieve the program's mission, goals, and outcomes. The program outlined a process for the collection of feedback from students about adequacy of resources, how they evaluate the adequacy of resources, and where they make decisions about revision of resources if necessary. The program indicated faculty feedback is discussed in both weekly faculty meetings and at the retreat; however, the program did not provide any meeting notes for weekly faculty meetings. The program needs to provide evidence of faculty feedback provided at weekly meetings.

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 of faculty qualifications to achieve the student learning outcomes of the program. Additionally, the program provided evidence of an assessment process to evaluate faculty effectiveness.

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 that surveys are examined in terms of any feedback about faculty sufficiency at the annual retreat and provided evidence of making changes to address issues of faculty sufficiency.

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 does not meet the requirements of this Key Element. The program provided evidence of faculty involvement in governance of the program. The program indicated students are involved in the governance of the program through formal feedback mechanisms and informal conversations with faculty and the Program Director and provided examples of changes that had been made. The program needs to provide evidence of a policy informing students of the mechanisms for their involvement in student 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 does not meet the requirements of this Key Element. The program provided evidence that all current supervisors are qualified to achieve the program's mission, goals and student learning outcomes. The program provided evidence of the status of all current supervisors as AAMFT Approved Supervisors or Candidates. The program indicated this is a requirement of being a clinical supervisor within the program. The program provided a job description for program supervisors; however, it did not clearly link the job description to the program's mission, goals, and student learning outcomes. The job description also does not clearly identify the credentials needed to become a supervisor in the program. The program needs to provide evidence of the links between the program's supervisor job description and the program's mission, goals, and student learning outcomes. The program needs to demonstrate that the credentials one needs to become a supervisor in the program are clearly spelled out in the job description.

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 a sufficient number of supervisors and a process for evaluating continued sufficiency. The program indicated a clear process for keeping all supervisors involved in the process of the achievement of the program's student learning outcomes and a clear process for evaluating supervisors.

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 a logically sequenced curriculum and clear teaching and learning practices to accomplish the program's student learning outcomes. Additionally, the program has a clear and comprehensive system for monitoring and giving feedback on student progress.

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 a curriculum that includes the necessary fundamental elements.

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 meets the requirements of this Key Element. The program provided evidence of an appropriately placed clinical application component structured to assist students in meeting their student learning outcomes and the program in meeting its goals and mission. Additionally, the program has policies in place to address any difficulties that may arise.

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 that graduates are educationally prepared for licensure in their state and that students are informed about the requirements necessary to get licensed in their intended state.

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 does not meet the requirements of this Key Element. The program provided evidence of receiving and implementing feedback from most of its Communities of Interest into its revision of curricular and practice components of the program. The program needs to provide evidence of how it collects and aggregates feedback from supervisors in order to review and inform the formal decision making about the curriculum and clinical components.

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 aggregated data on student and graduate achievement.

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 meets the requirements of this Key Element. The program provided evidence of a process for aggregating data on student learning outcomes and provided data that indicated students are meeting most established benchmarks. In areas where the program had fallen below the benchmarks, the program outlined its process for addressing the deficiencies and demonstrated how those indicators are now within established benchmarks.

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 aggregated data on both the leadership and effectiveness of the Program Director and the performance of the faculty that support the program's mission, goals, and outcomes.

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 its use of aggregated data and feedback to monitor progress in the program and to guide decisions about improvements.

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.).
 - *Programs may provide additional information as supporting evidence of the program's response.*
- 3) 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.
- 4) 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
Annual Report	January 31, 2019
<i>Interim Response to Stipulations (optional)</i>	<i>January 31, 2019</i>
Response to Stipulations	July 31, 2019

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,


Jaime Goff, PhD
COAMFTE Chair


Tanya A. Tamarin
Director of Accreditation