



**Rueckert-Hartman College for Health Professions
Division of Counseling and Family Therapy**

**Master of Arts in Marriage and Family Therapy
Student Handbook**



Updated July 29, 2023

Department of Couple and Family Therapy Student Handbook

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Regis University Outcomes and Key Jesuit Values

Regis University, in conjunction with the Higher Learning Commission, is committed to universal learning outcomes for all students. The “Regis 9” highlights the university level outcomes of knowledge, skills, and values for students graduating from Regis University. The outcomes are linked to coursework and assessed regularly to foster continued quality in our programs and to assure the greatest impact on student learning.

The Key Jesuit Values are inherent in the instructional processes and learning at Regis University. These values highlight the virtues that every student may experience and gain in their learning - values that graduates will bring to their service to the community in their professional role.

Regis University Learning Outcomes: “The Regis 9”

Knowledge	Knowledge of a discipline or content area Knowledge of diverse cultures, perspectives, and belief systems Knowledge of arts, sciences, and humanities
Skills	Ability to think critically Ability to communicate effectively Ability to use contemporary technology
Values	Commitment to ethical and social responsibility Commitment to leadership and service to others Commitment to learning as a lifelong endeavor

Key Jesuit Values

1. Cura Personalis - Latin phrase meaning "care for the person," cura personalis is having concern and care for the personal development of the whole person. This implies a dedication to promoting human dignity and care for the mind, body and spirit of the person.
2. Magis - Latin meaning the “more,” magis embodies the act of discerning the best choice in a given situation to better glorify or serve God. Magis does NOT mean to always do or give “more” to the point of exhaustion. Magis is the value of striving for the better, striving for excellence.
3. Men and Women for and With Others - This value embodies a spirit of giving and providing service to those in need and standing with the poor and marginalized. We are encouraged to pursue justice on behalf of all persons.

4. Unity of Mind and Heart - Our hearts and minds are not divided; they are congruent when the whole person is educated and engaged.
5. Contemplatives in Action - Although we are thoughtful and philosophical, we do not merely think about social problems, we take action to address them. Developing the habit of reflection centers and strengthens one's spiritual life and guides our actions.
6. Finding God in all Things - This may be the one phrase that sums up Ignatian Spirituality. It invites a person to search for and find God in every circumstance of life; God is present everywhere and can be found in all of creation.

DIVISION OF COUNSELING AND FAMILY THERAPY OVERVIEW

Division of Counseling and Family Therapy Mission Statement

The mission of the Division of Counseling and Family Therapy (DCFT) is to involve students in a search for truth, values and a just existence within the framework of humanistic, depth and post-modern psychological traditions.

The vision of the DCFT involves a commitment to the two deepest roots of the Regis Mission, to educate counseling professionals who are grounded in the awareness and cultivation of their intrinsic values and the understanding of how to mobilize those values in the service of community.

Cultivating truth, values and a just existence in the field of counseling requires a holistic and humanistic perspective that recognizes the lived interplay of thought, feeling and action, as well as the deeper influences of soul and spirit, in the creation and transformation of human meaning and the relationships in which this meaning is enacted. At the heart of the therapeutic relationship and the art of counseling, disciplined thought encourages an openness to truth; an appreciation for the deep life of feeling fosters an understanding of the origins of one's values and a sense of beauty; and a responsible, ethical willingness to act in the world and in one's community opens one to a sense of a good and just existence. The healing aspects of a therapeutic relationship are founded in its ability to reflect the greater whole which balances thinking, feeling and action as intimations of truth, beauty, and goodness.

Service to the community in the field of counseling necessitates a broad understanding of the social, political, and cultural influences that shape our lives and frame the question of "how ought we to live?" Counseling students wrestle with how best to incorporate theories and techniques of change into the practice of creating therapeutic relationships which will foster hope and courage in those we serve who are striving to live more productive and just lives.

DCFT Programs

The Division of Counseling and Family Therapy houses two departments. The Department of Couple and Family Therapy and the Department of Counseling. The Department of Couple and Family therapy offers a COAMFTE accredited 60 credit hour Master of Arts program in Marriage and Family Therapy (MFT) and a non-accredited post-graduate Certificate in Marriage and Family Therapy. The Department of Counseling offers a CACREP accredited 60 credit hour Master of Arts program in Clinical Mental Health Counseling and two post-graduate certificate programs: Counseling Children and Adolescents and Depth Psychotherapy. The Regis Center for Counseling and Family Therapy is an accredited International Center for Play Therapy, which allows student taking courses within the Child and Adolescent Certificate program to take classes to meet the educational requirements for the registered play therapist designation.

MFT Program Mission & Educational Outcome Framework

The Master of Arts in Marriage and Family Therapy (MAMFT) program is guided by its Educational Outcome Framework. This framework outlines our ideas about what competencies a student needs to develop in order to be ready to engage in the post-graduate part of training as a Marriage and Family Therapist. The framework includes our overall mission and the goals that have evolved out of this mission. These goals communicate what we are trying to accomplish as a program related to your training. Underneath each goal are several SLOs (student learning outcomes). These student learning outcomes represent the specific parts of our goals that we measure throughout your program of study. These student learning outcomes can guide you in seeing how you are doing at developing the competencies we believe are important. We also use them to measure how well our program is structured and operating to support you as you work toward competency. The micro-level evaluations (you receiving feedback on your own progress toward competency) happen when you receive feedback on your benchmark assignments and finally on your Clinical Competency Evaluations and Capstone. The macro-level evaluation (the program evaluating itself) happens on a yearly basis at the MFT program evaluation, usually scheduled in August.

The mission of the Master of Arts in Marriage and Family Therapy (MAMFT) program is to prepare competent professionals who practice socially just systemic therapy, consultation, and advocacy with diverse clients.

Goal 1: Graduate students who demonstrate relational ethics.

SLO 1: Students can describe how their socio-political identity shapes their attitudes, values, beliefs, and primary emotions.

SLO 2: Students can describe how the intersection of their own and the clients' socio-political identities inhibit or facilitate the therapeutic relationship and process.

SLO 3: Students can articulate how the cultural context shapes the presentation of symptoms.

SLO 4: Students can use knowledge of socio-political contexts to inform decisions to intervene in the system.

(Notes for measuring outcomes: SLO 1 understanding racial identity development models)

Goal 2: Graduate students who address the ethical and legal components of clinical work.

SLO 5: Students can identify the most salient ethical concerns in a case.

SLO 6: Students can apply a systemically focused ethical decision-making model to a case.

SLO 7: Students access the resources and support needed to address ethical concerns.

Goal 3: Graduate students who grasp systemic theory and intentionally intervene with clients according to systemic theories and models.

SLO 8: Students will demonstrate knowledge of (or familiarity with) a range of C/MFT theories and how they are used in practice

SLO 9: Students are able to access and evaluate research in order to use empirical evidence to guide clinical decision-making.

SLO 10: Students use psychometrically sound assessment tools to track clinical progress.

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SLO 11: Students are able to develop a systemically oriented treatment plan to guide the development of therapy.

SLO 12: Students will demonstrate the ability to implement the systemically oriented treatment plan and evaluate client progress.

Goal 4: Graduate students who grasp the function of advocacy in their role as MFTs and intentionally engage in advocacy efforts.

SLO 13: Students can identify policies that impact client functioning and the therapeutic process as well as identify ways to intervene* to support client change.

*e.g., participation in the legislative process, participation in professional organizations as it relates to advocacy efforts, use of research to support and change policy

COAMFTE Developmental Competencies

V.12.5

COAMFTE Developmental Competency Components (CC) refer to the primary areas of professional learning and skill-development central to the effective and ethical practice of a future Marriage and Family Therapy professional including:

CC-1 knowledge of the profession;

CC-2 practice of therapy;

CC-3 human diversity and social structures;

CC-4 professional identity, ethics, and law; and

CC-5 research and evidence-based practice.

This framework is intended to encompass historical, current, and future elements of MFT professional identity and practice, and to organize student learning outcomes expected of a graduate of the COAMFTE Accredited program.

Outcome Based Assessment Plan

The following plan is used to assess the Regis University Outcome Based Assessment Framework. Formative Evaluations represent the places in the program where you first receive feedback on your developing competency specific to each SLO. The summative evaluation represents the place in the program where you receive your final feedback related to the competency. It is expected that growth will take place between formative and summative evaluations. Summative evaluations are where we evaluate your growth in these areas as compared to what we expect out of a person beginning their post-graduate supervised experience.

Student Learning Outcome (SLO)	COAMFTE Developmental Competencies	Formative Feedback	Summative Feedback
SLO #1		MFT 616 Benchmark Assignment MFT 650 Benchmark Assignment	MFT 699B/C Clinical Skills Evaluation Capstone

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SLO #2		MFT 616 Benchmark Assignment MFT 650 Benchmark Assignment	MFT 699B/C Clinical Skills Evaluation Capstone
SLO #3		MFT 616 Benchmark Assignment MFT 650 Benchmark Assignment	MFT 699B/C Clinical Skills Evaluation Capstone
SLO #4		MFT 625 Benchmark Assignment MFT 690 Benchmark Assignment	MFT 699B/C Clinical Skills Evaluation Capstone
SLO #5		MFT 625 Benchmark Assignment	MFT 699B/C Clinical Skills Evaluation Capstone
SLO #6		MFT 690 Benchmark Assignment MFT 699A Benchmark Assignment	MFT 699B/C Clinical Skills Evaluation Capstone
SLO #7		MFT 610 Benchmark Assignment MFT 665 Benchmark Assignment MFT 690 Benchmark Assignment MFT 699A Benchmark Assignment	MFT 699B/C Clinical Skills Evaluation Capstone
SLO #8		MFT 640 Benchmark Assignment MFT 690 Benchmark Assignment MFT 699A Benchmark Assignment	MFT 699B/C Clinical Skills Evaluation Capstone
SLO #9		MFT 620 Benchmark Assignment MFT 690 Benchmark Assignment	Capstone
SLO #10		MFT 620 Benchmark Assignment MFT 690 Benchmark Assignment	Capstone
SLO #11		MFT 638 Benchmark Assignment MFT 690 Benchmark Assignment	Capstone
SLO #12		MFT 625 Benchmark Assignment	Capstone

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		MFT 690 Benchmark Assignment	
SLO #13		MFT 690 Benchmark Assignment MFT 699A Benchmark Assignment	Capstone

The target benchmark score is 3. Tevera scores are analyzed annually during our MAMFT Program Evaluation. If aggregate program scores fall below 3, the MFT Committee will discuss program revisions during the MFT committee meeting following the Annual Program Evaluation to address problematic areas.

DCFT Anti-discrimination Policy and Diversity Statement

Regis University strongly supports diversity. We encourage applications from persons from a variety of sociopolitical contexts, such as racial and ethnic minorities, persons with disabilities, veterans, sexual and gender minorities, and individuals from a variety of religious and spiritual backgrounds. Regis University is committed to diversity and equality in education and employment.

At Regis University, diversity is at the core of our faith-inspired commitment to build an inclusive community that values the dignity and contributions of all of our members. Our differences thrive in a learning environment characterized by the Jesuit traditions of mutual respect and the pursuit of justice, an environment in which our human differences, whether physical or philosophical, are respected. Because MFTs and Professional Counselors work with clients having diverse lifestyles, beliefs and values, the Division exposes students to a wide range of social, relational, and cross-cultural contexts. The MAMFT faculty provides open and supportive learning environments where students are invited to engage in personal and reflective processes about their own and others' experiences, beliefs and values. We seek to train therapists who can approach clients with integrity, respect and sensitivity for differences in beliefs, values, and lifestyles.

The AAMFT Code of Ethics statement regarding diversity includes the following: Marriage and family therapists provide professional assistance to persons without discrimination on the basis of race, age, ethnicity, socioeconomic status, disability, gender, health status, religion, national origin, or sexual orientation. *AAMFT Code of Ethics Section 1.1*

MAMFT Degree Requirements

Admission Status

Upon application for the program, students are evaluated by faculty and complete an in-person interview. MFT faculty will make a determination to admit or deny a student. Prospective students may request to take up to two courses as a special student. This request requires approval from the chair of the department. Completion of courses as a special student does not guarantee admission to the master's in MFT program. If a special student is admitted to the program, any MFT degree courses, which are successfully completed with a B- or higher will be applied to degree requirements.

All admitted students are required to attend the MAMFT program orientation prior to enrollment in MFT courses. Students may enroll in courses with the designation MFT or MCPY when admitted to the Division of Counseling and Family Therapy. Students admitted prior to the Fall of 2022 must complete the co-requisite of Human Development Across the Lifespan or apply to the chair to have the requirement waived based on the appropriate completion of undergraduate coursework.

Portability of Licensure

Regis University's Master of Arts in Marriage and Family Therapy (MAMFT) program is a 60-credit-hour degree that meets the academic requirements for Colorado Licensed Marriage and Family Therapists (LMFT) set forth by the Colorado Licensed Marriage and Family Therapists Examiners Board. The MAMFT degree is accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE). Please note that each state has specific requirements for licensure that may change from time to time. Each student is responsible for contacting the licensing board in the state where they wish to be licensed to ensure that they will be in compliance with all the requirements of that state and to obtain an application packet.

Students interested in being licensed in states other than Colorado can find links to those licensing boards here. https://www.aamft.org/Directories/MFT_Licensing_Boards.aspx?hkey=c0f838ad-2672-4b4e-8b51-b9578fe5c28a Students wishing to be licensed in other states should consult with their faculty liaison as early as possible in order to discuss implications for their program of study. Opportunities are available in the program to take additional semesters of internship to accrue more clinical hours if these are required in the state they will be seeking licensure.

MAMFT Academic Requirements

For Students Admitted prior to August 2022

To successfully graduate from the MAMFT program, the following must be completed.

All required classes for a total of 60 academic credit hours

- Students must earn a grade of B- or higher in all content courses
- Students must earn a grade of Pass in MFT 635, MFT 638, MFT 690, MFT 692, MFT 699 A, MFT 699 B, MFT 699 C (if needed)
- Students must maintain a minimum cumulative GPA of 3.0
- All courses must be completed within six years

Suggestions for planning your course of study

If students have questions about planning out their course of study, they can search for answers in this Student Manual or contact the academic success coach. In general, students should prioritize completion of the Core Courses, followed by MFT 638, and then, the Clinical Sequence. Follow the guidelines and use the chart below.

It is recommended that you take one or two classes for the first semester. Graduate school signifies a considerable transition from undergraduate studies, requiring increased effort and time. Each course typically requires about nine hours of study per week, excluding class time. It is recommended that your first term you start with one or two classes to see how graduate school aligns with your work life balance. Going forward, you can enroll in up to four classes a semester, depending on your work-life balance. However, this will depend on how much time you are able to devote to graduate-level coursework. Registering for more than 12 credits per semester requires permission from your faculty liaison.

Each program amounts to 60 credit hours. To complete your degree in your desired timeframe, consider how many classes to take each term. For instance, to complete a master's degree program in three years, you need to average completing 6.67 credits each semester.

Prerequisite/Co-requisite:

- Take Human Growth & Development Across the Lifespan prior to admission or any time prior to graduation
- MCPY/MFT 605 satisfies this requirement, and effective 9/28/2021, you may take MCPY/MFT 605 and count this as one of your open electives if you'd like to do so.
- If you successfully completed a **graduate level** Human Growth and Development Across the Lifespan Course from another university and received a B- or higher within the last six years, you may request approval to transfer in this course to count as one of your open electives. You must make a request and submit an official transcript and a copy of the syllabus to the chair for the department of couple and family therapy for approval.
- If you successfully completed an undergraduate level Human Growth and Development Across the Lifespan course and received a B- or higher within the last six years, you may request this requirement to be waived but may not count that class toward an open elective requirement. You must make a request and submit an official transcript and a copy of the syllabus to the chair for the department of couple and family therapy for approval.

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Note on curriculum updates beginning August 2022.

You are required to take the course prefix and course number that are on your program evaluation in Webadvisor. If you were admitted to the program prior to August of 2022, some course titles have been changed, and MFT 615 will no longer be offered. See below for a table describing the modified course names and options to complete the requirement for MFT 615, if you have not done so yet.

Course Number	Original Course Title	New Course Title beginning 08/2022
MFT 605	Human Growth & Development	Contextual Human and Relational Development
MFT 610	Theories of Family Therapy	No change
MFT 620	Assessment and Diagnosis	Assessment, Diagnosis, & Treatment Planning
MFT 625	Professional Orientation and Ethical Issues	Legal and Ethical Issues in Family Therapy
MFT 635	Counseling Techniques I	Process Oriented Practice in MFT
MFT 638	Techniques in Family & Couple Therapy	Common Factor Skills in Family Therapy
MFT 615	Cultural Issues & Social Justice	No longer offered. Students can take MCPY 615 or MFT 616. If students take MFT 616, they can count this 6-credit course for both MFT 615 and an elective requirement.
MFT 621	Integrated Healthcare	No change
MFT 640	Research Methods and Program Evaluation	No change
MFT 650	Family Origins & Lifecycles	Multi-contextual Family Lifecycles
MFT 660	Substance Abuse Treatment	Addiction Assessment and Treatment in the System
MFT 665	Gender Development & Sexuality	Gender and Sexuality
MFT 667	Couple Therapy	No change
MFT 668	Play in Family Therapy	No change

Core Courses:

- Take 4 Core Courses from Section I close to beginning of program
- You can take these courses along with other courses from Section III below

MFT 638: Techniques in Family and Couple Therapy

- Once 4 Core Courses (Section I) are completed, take MFT 638: Techniques in Family and Couple Therapy (Section II)
- You can take MFT 638 along with other courses from Section III, Section IV(Advanced Skills), and Section V(Electives)

Clinical Sequence:

- After completing MFT 638: Techniques in Family and Couple Therapy, you can begin your Clinical Sequence (Section VI)
- A minimum of 3 terms
- Begin with 1 term of Practicum (take MFT 690 and MFT 692 together, 6 credits)
- Followed by 2 consecutive terms of Internship (A and B)

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- You may choose to take Internship C, if you need more time to complete your requirements for Internship (e.g., clinical hours, demonstrate competency, pass your Capstone project)
- If you are able to demonstrate competency and complete all graduation requirements in Internship B, then you may choose to take an additional open elective course instead of Internship C.
- If you are unable to demonstrate competency and complete all graduation requirements in your final term of Internship Class, either Internship B or C, then you will receive an incomplete in that internship class and be required to take Internship C or D and continue to accrue hours until you are able to do so. Students may be eligible to take Internship C or D for a variable number of credits to complete their clinical requirements, see below.
- While in Clinical Sequence, you can take courses from Sections III, IV, and V

Prior to applying for enrollment in Practicum (MFT690/692), all students must receive acceptable ratings on the MFT Professional Performance Evaluation in MFT 635 and MFT 638. They must also successfully complete all prerequisites for practicum. Enrollment in MFT690/MFT692 must be approved through application to the MFT Clinical Coordinator.

1. All Clinical Practicum and Internship courses must receive a Pass grade in order for the course to count toward degree requirements. If a student receives a grade of “Fail” or “No Pass” in a Practicum or Internship course, none of the supervised experience hours within that term will count toward degree requirements. Please see the Academic Compliance Policies for further implications of receiving a No Pass/Fail in a clinical course.
2. Students must be in good standing and not involved in an active remediation.
3. Successful completion of fieldwork requirements (see MFT Clinical Manual on DCFT and Me for a detailed description of these requirements)
4. Satisfactory completion of the requirements for a Capstone Project (a written and oral clinical case presentation) during the final term of Clinical Internship (either MFT699 B, C, or D). See section on Capstone for more details.

Course Number	Course Title	Credits
	See Curriculum Change Table on page 10, outlining changes in course names and MFT 615	
Prerequisite/Co-requisite	Can complete any time before graduation or may request that an undergraduate or graduate course be approved to fulfill this requirement (must be approved by department chair, see page 14 above)	
MFT/MCPY 605	Human Growth & Development (fulfills prerequisite/corequisite requirement and may also count as an open elective)	3
I.	Core Courses	
MFT 610	Theories of Family Therapy	3
MFT 620	Assessment and Diagnosis	3
MFT 625	Professional Orientation and Ethical Issues	3
MFT 635	Counseling Techniques I	3

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II.	Advanced Techniques Class (must complete all 4 Core Courses before you take this)	
MFT 638	Techniques in Family & Couple Therapy	3
III.	Courses to be taken any time in the program	
MFT 615	Cultural Issues & Social Justice	3
MFT 621	Integrated Healthcare	3
MFT 640	Research Methods and Program Evaluation	3
MFT 650	Family Origins & Lifecycles	3
MFT 660	Substance Abuse Treatment	3
IV.	Advanced Skills Classes- MFT 635 is a prerequisite	
MFT 665	Gender Development & Sexuality	3
MFT 667	Couple Therapy	3
MFT 668	Play in Family Therapy	3
V.	2 Electives: Choose 1 course from the below and Choose 1 course from any MFT/MCPY class	6
MFT 669	Advanced Couple Therapy (Prereq: MFT 635)	3
MCPY 630	Groups: Process & Counseling (Prereq: MFT 635)	3
MCPY 670	Advanced Play Therapy (Prereq: MCPY 678)	3
MCPY 677	Counseling Pre-Adolesnts/Adolesn (Prereq: MFT 635)	3
VI.	Clinical Sequence- Prerequisite MFT 638	
MFT 690	Practicum: Practice of Family Therapy (take with 692)	3
MFT 692	Practicum: Clinical Supervision (take with 690)	3
MFT 699A	MFT Internship A (Prereq: MFT 690/692)	3
MFT 699B	MFT Internship B (Prereq: MFT 699A)	3
MFT 699C	MFT Internship C (Prereq: MFT 699B) or complete another open elective if you are able to complete hour requirement, demonstrate competency, and complete all graduation requirements during MFT 699B. Students may elect to take Internship C and/or D to accrue additional hours toward licensure requirements in other states	3

Internship B or C Incomplete Option

Beginning in Fall 2023, if a student enrolled in their final semester of internship (Internship B or C) meets **all** of the following conditions, they may be eligible to take an incomplete in their final semester of internship (Internship B or C) and enroll in Internship C or D for 1 or 2 credits to complete their clinical hours.

If the student:

1. Has successfully passed both the oral and written portions of Capstone
2. Is demonstrating competency as measured by passing scores on the Clinical Competency Evaluation

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3. Has completed all other required courses toward their master's degree AND
4. Has completed a minimum of 225 of their required direct client contact hours by the end of their internship B or C class

Then, they can consult with their internship instructor to determine whether they 1) may be eligible to take an incomplete in their final semester of internship (Internship B or C) and 2) should enroll in either 1 or 2 credits of Internship C or D to complete their remaining clinical hours in order to complete their remaining clinical hours. The requirements for this variable format of Internship C or D will be consistent with the requirements of attending Internship C or D for 3 credits, however, the student will be able to complete the course and graduate when their hours are completed.

MAMFT Academic Requirements For Students Admitted August 2022 and after

To successfully graduate from the MAMFT program, the following must be completed.

All required classes for a total of 60 academic credit hours

- Students must earn a grade of B- or higher in all content courses
- Students must earn a grade of Pass in MFT 635, MFT 638, MFT 690, MFT 692, MFT 699 A, MFT 699 B, MFT 699 C (if needed)
- Students must maintain a minimum cumulative GPA of 3.0
- All courses must be completed within six years

Suggestions for planning your course of study

If students have questions about planning out their course of study, they can search for answers in this Student Manual or contact the academic success coach. In general, students should prioritize completion of the Core Courses, followed by MFT 638, and then, the Clinical Sequence. Follow the guidelines and use the chart below.

It is recommended that you take one or two classes for the first semester. Graduate school signifies a considerable transition from undergraduate studies, requiring increased effort and time. Each course typically requires about nine hours of study per week, excluding class time. It is recommended that your first term you start with one or two classes to see how graduate school aligns with your work life balance. Going forward, you can enroll in up to four classes a semester, depending on your work-life balance. However, this will depend on how much time you are able to devote to graduate-level coursework. Registering for more than 12 credits per semester requires permission from your faculty liaison.

Each program amounts to 60 credit hours. To complete your degree in your desired timeframe, consider how many classes to take each term. For instance, to complete a master's degree program in three years, you need to average completing 6.67 credits each semester.

Core Courses:

- Take 5 Core Courses from Section I close to beginning of program
- You can take these courses along with other courses from Section III below

MFT 638: MFT Common Factors Skills in Family Therapy

- Once 5 Core Courses (18 credits in Section I) are completed, take MFT 638 (Section II)

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- You can take MFT 638 along with other courses from Section III, Section IV (Advanced Skills), and Section V (Electives)

Clinical Sequence:

- After completing MFT 638, you can begin your Clinical Sequence (Section VI)
- A minimum of 3 terms
- Begin with 1 term of Practicum (take MFT 690 and MFT 692 together, 6 credits)
- Followed by 2 consecutive terms of Internship (A and B)
- You may choose to take Internship C, if you need more time to complete your requirements for Internship (e.g., clinical hours, demonstrate competency, pass your Capstone project).
- If you are unable to demonstrate competency and complete all graduation requirements in Internship B, then you will be required to take Internship C and continue to accrue hours until you are able to do so. There may also be an option to take an additional semester of internship with variable credit, see below.
- While in Clinical Sequence, you can take courses from Sections III, IV, and V

Prior to applying for enrollment in Practicum (MFT690/692), all students must receive acceptable ratings on the Student Performance Evaluations and a grade of Pass in MFT 635 Process Oriented Practice in MFT as well as a grade of pass in MFT 638.

Application to take Practicum and Internship is completed in Tevera. Enrollment in MFT690/MFT692 as well as MFT 699 A must be approved through this application process.

- All Practicum and Internship courses must receive a Pass grade in order for the course to count toward degree requirements. If a student receives a grade of “Fail” or “No Pass” in a Practicum or Internship course, none of the supervised experience hours within that term will count toward degree requirements. Please see the Academic Compliance Policies for further implications of receiving a No Pass/Fail in a clinical course.
- Students must be in good standing and not involved in an active remediation.
- Successful completion of fieldwork requirements (see MFT Clinical Manual on DCFT and Me for details about the clinical component).
- Satisfactory completion of the requirements for a Capstone Project (a written and oral clinical case presentation) during the final term of Clinical Internship (either MFT699 B, C, or D). See section on Capstone for more details.

Course Number	Course Title	Credits
Section I.	Core Courses	
MFT 610	Theories of Family Therapy	3
MFT 616	Influence of Systemic Power and Oppression on Family Functioning	6
MFT 620	Assessment, Diagnosis, and Treatment Planning	3
MFT 625	Legal and Ethical Issues in Family Therapy	3
MFT 635	Process Oriented Practice in MFT	3

II. MAMFT Degree Requirements

Section II.	Advanced Techniques Class (must complete <i>all five Core Courses</i> before you take this)	
MFT 638	Common Factor Skills in Family Therapy	3
Section III.	Courses to be taken any time in the program	
MFT 605	Contextual Human and Relational Development	3
MFT 621	Integrated Healthcare	3
MFT 640	Research Methods and Program Evaluation	3
MFT 650	Multi-contextual Family Lifecycles	3
MFT 660	Addiction Assessment and Treatment in the System	3
Section IV.	Advanced Skills Classes	
MFT 665	Gender & Sexuality (Prereq: MFT 635)	3
MFT 667	Couple Therapy (Prereq: MFT 635)	3
Section V.	2 Electives: Choose 1 course from the below and Choose 1 course from any MFT/MCPY class	6
MFT 668	Play in Family Therapy	3
MFT 669	Advanced Couple Therapy (Prereq: MFT 635)	3
MFT 626	Special Topics in Couple and Family Therapy	3
MCPY 630	Groups: Process & Counseling (Prereq: MFT 635)	3
MCPY 672	Crisis Trauma and Loss	3
MCPY 677	Counseling Pre-Adolesnts/Adolesn (Prereq: MFT 635)	3
VI.	Clinical Sequence - Prerequisite <i>MFT 638</i>	
MFT 690	Practicum: Practice of Family Therapy (take with 692)	3
MFT 692	Practicum: Clinical Supervision (take with 690)	3
MFT 699A	MFT Internship A (Prereq: MFT 690/692)	3
MFT 699B	MFT Internship B (Prereq: MFT 699A)	3
MFT 699C optional	MFT Internship C (Prereq: MFT 699B) if you are unable to complete hour requirement, demonstrate competency, and complete all graduation requirements during MFT 699B Students may elect to take Internship C and/or D to accrue additional hours toward licensure requirements in other states	

Internship B Incomplete Option

Beginning in Fall 2023, if a student enrolled in Internship B meets **all** of the following conditions, they may be eligible to take an incomplete in their final semester of internship (Internship B) and enroll in an additional semester for 1 or 2 credits to complete their clinical hours, rather than the standard 3 credits of internship.

If the student:

1. Has successfully passed both the oral and written portions of Capstone
2. Is demonstrating competency as measured by passing scores on the Clinical Competency Evaluation
3. Has completed all other required courses toward their master's degree AND
4. Has completed a minimum of 225 of their required direct client contact hours by the end of their internship B class

Then, they can consult with their internship instructor to determine whether they 1) may be eligible to take an incomplete in their final semester of internship (Internship B) and 2) should enroll in either 1 or 2

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credits of an additional semester of internship to complete their remaining clinical hours. The requirements for this variable format of internship will be consistent with the requirements of attending Internship C for 3 credits, however, the student will be able to complete their attendance in the course and graduate when their hours are completed. Once the term begins, after the add drop period, the student cannot change the number of credits in which they are enrolled.

Capstone Project Requirements

Capstone Project for MAMFT

Your capstone project is the culminating and determinative assignment of the MAMFT curriculum. It includes both a written case study and a formal oral presentation of your work with a client system. Together the paper and presentation are your opportunity to demonstrate how you work as a clinician by using a clinical case to demonstrate your efforts and ideas. As such, the focus of both the presentation and the paper should be how you work as a therapist. In doing this, you are meant to show competency in the assessment of client systems, skillfulness in formulating a clinical goal(s) in collaboration with clients, sound grasp of the ethical and legal responsibilities of clinical work, and the intentional use of effective systemic interventions. Additionally, your identity as a systemically oriented therapist should be threaded throughout the various components of your paper and presented in a way that shows you embody a clear theoretical orientation and self-awareness around person-of-the-therapist considerations. In other words, prepare to present yourself as a professional with confidence rooted in competence.

Written Case Study

Below we have provided some guidelines for how you might structure your written case study to comprehensively present your work with clients during the assessment phase, when developing goals, while intervening, and ultimately as you terminate with clients. The following is a detailed description of the components you will want to include as you write these sections. While we have provided extensive details related to each section of the capstone paper, it is important to note that you will need to be concise in your descriptions so your paper is between 25-30 **pages** (including the title page, all references, tables, and figures). Your reference list is included in the page limit, and you are required to have a minimum of 12 scholarly sources. Only the treatment plan is exempt from the page limit (see Appendix F for the Capstone Treatment Plan Template). If your paper is more than 30 pages, it will be returned to you and you will not be able to present your capstone.

Theoretical and Research Basis for Treatment

This section includes important context for presenting your work with the client family. Specifically, describe your *systemic* theoretical orientation, including a brief description of your theory's cornerstone concept or philosophical underpinnings and provide a discussion of current research related to the case you are presenting.

Theoretical Orientation. Presenting your theoretical orientation involves discussing the basic principles of a *systemic* theoretical model (citing original primary sources throughout this discussion). Please do not cite resources like those by Robert Guise or Diane Gehart, as these are review texts and do not offer a nuanced understanding of specific models. **Briefly** explain the following for your model:

5. Assumptions about the origin of problems (why problems occur in systems)
6. Theoretical assumptions of the model including why change happens and under what circumstances change happens (the *why* of the model)
7. Assessment specific to the model (how the model views systemic context)

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8. General treatment goals of the model
9. Basic interventions of the model (the *what* of the model)
10. Commonly used techniques of the model (the *how* of the model)
11. The role of the client in this model (where is the client located in the experience i.e. as the agent of change, narrator)
12. Your role as the therapist in this model (what clinical posture you hold i.e. expert, collaborator, co-author)
13. What limitations exist for the model and what adaptations (if any) you have made
14. How well the model informs/accounts for diversity in clients' cultural identities and experiences

A critical requirement of the capstone assignment is a clearly articulated theoretical framework that underpins every aspect of your work. It is not enough to describe your theoretical orientation without then applying it throughout your capstone paper. It should be evident throughout your paper that you move from and embody the theoretical orientation in a way that is consistent with the assumptions of the model. Said differently, your theoretical orientation should emerge in all sections of your capstone because your theoretical model should frame how you went about each of the clinical tasks with your client family. Consider the difference between saying “*Emotion Focused Therapists focus on identifying attachment injuries*” and “*As an emotion focused therapist, I focused on understanding how the conflict Chris and Pat were experiencing was the manifestation of the attachment injuries they both experienced in their family of origins.*” One reflects an academic understanding of a model while the other indicates an integrated identity as an emotion focused therapist and the embodiment of the theoretical orientation. It will not be enough to simply say what clinical model you follow. Capstone requires that you present in a way that makes your emerging clinical identity clear. You are essentially using your work with one of your clients as the medium through which you demonstrate how you assess client systems, how you formulate goals with clients, and intervene from your theoretical orientation.

Integration of Research. In addition to describing your theoretical orientation, this section should include a discussion of current and related research.

15. Mention research on best practices and/or effectiveness research for a particular clinical strategy that addresses the primary concern your clients faced.
16. Cite research that indicates how common a particular phenomenon is and under what circumstances it emerges. Include research on the effectiveness of your clinical model and any contraindications supported by empirical findings.
17. Use social research (PEW, CATO, etc.) to discuss current social trends as a means of contextualizing your clients' experiences. Remember that the strongest clinicians are intentional about using clinical and social research in their work.

Case Introduction

In this section, provide the reader with information about the client system and a general overview of the structure of therapy. This involves a description of who you are working with including:

18. Each clients' constellation of sociocultural identities (age, developmental stage, racial identity, cultural/ethnic identity, sexual identity, gender identity, class background, physical ability, educational experiences, religious/spiritual affiliations, etc.). Use the RESPECTFUL model as a framework for providing this information
19. Each clients' employment status

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20. How the various clients are related to each other

It is also important to include information about the structure of therapy including:

21. How many sessions you have seen the clients. Include frequency and length of sessions (e.g. weekly for 50 min)

22. Reasoning underlying length of treatment

23. In what composition(s) you saw the clients. Include reasoning for underlying compositions.

**Be sure that when you refer to specific clients you protect their identities by using pseudonyms, changing any identifiable information, and not disclosing the site name and location. Instead provide only a contextual description of the site. Please see Appendix G for additional information on how to de-identify a case.

Presenting Complaints

In this section, you will want to include an accurate representation of what the clients said they came to therapy for help with. Clients' descriptions of their concerns are essential context for understanding a case and for your work with the client system. This section might include:

24. What each client said was the concern

25. If there was agreement among family members about the concern

26. What each client initially described wanting to get from therapy (note that this may be distinct from the clients' goal – for example, one client may state initially they want relief)

History

It is important to describe how the clients came to be in therapy and if they are in therapy of their own volition. Historical data includes:

27. Referral information – this provides information about, how the client family came to the agency, consultation with other professionals at intake, how “resourced” the client was in their community, who they considered (or did not consider) to be a resource, and whether they were a visitor, complainant, or customer of therapy

28. Your understanding of the “why now” question, meaning what precipitated their coming to therapy from your perspective

29. Whether the clients were mandated for therapy and how this impacted your work with them

Assessment

When describing your assessment efforts, demonstrate that you were purposeful and systemic in your collection of data related to the client system. To be truly systemic in your assessment, it will be important that you have assessed for and integrated any biological, psychological, and social contributors in to your conceptualization of the clients' concerns. As a means of providing a quick and consolidated look at your assessment efforts, use and present *at least* two of the following: timeline, genogram, structural map, and/or results from a formal assessment instrument. Your choice of assessment methodologies and mechanisms should be clearly tied to your theory. Additionally, your description of your assessment efforts should include information about:

30. Clients' expectations related to therapy and the therapeutic process

31. How the problem has impacted and continues to impact the clients' lives

a. Outcomes from any formal assessment instruments you have used. If you used a formal assessment instrument, be sure to include details about the reliability and validity of the scale.

32. Unique strengths and resiliencies of the client system

33. Complete biopsychosocial for every client attending therapy

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34. How broader cultural dynamics shaped the presentation of the client(s) symptoms and were contributing to the client(s) concerns. This should include how understanding the clients' intersectional identities helped to inform how you understand the problem and how you formulate goals.
35. DSM 5 differential diagnoses for every client attending therapy and for the system as a whole. In addition to mentioning what diagnosis you used, you will want to demonstrate your thought process by addressing the following:
 - b. Describe symptom severity and level of functioning that informed your decision for each diagnosis
 - c. Describe alternative diagnosis you considered and then ruled out for each client
 - d. Describe your thinking related to the costs and benefits of providing formal diagnosis for individuals in the family system
 - e. Describe how you used DSM 5 diagnosis in your treatment of the client system
 - f. Describe what cultural/contextual considerations you weighed as you arrived at the various diagnoses
 - g. Describe how individual diagnoses might have contributed to relational concerns and how relational concerns might have impacted individual diagnosis

Provide a case conceptualization. From a systemic perspective, a case conceptualization includes your impressions of what systemic dynamics (e.g. structural features, interactional patterns, intergenerational patterns, attachment experiences, and broader cultural dynamics) are contributing to your clients' presenting problem. Your description of these patterns should clearly reflect knowledge of socio-political context, your theoretical orientation, and the language of your model.

When describing your systemic impression be sure to include a description of the primary interactional pattern between clients, an explanation of how cultural context has shaped this interactional pattern, and the hypothesized homeostatic functioning of the presenting problem.

Articulation of the primary pathologizing interpersonal pattern should include the following:

36. Description of the start of the tension in the system
37. Description of the conflict or other symptom that escalate the tension in the system
38. Description of how the system returns to "normal" (homeostasis)

Articulation of how cultural context shapes the primary interactional pattern between clients should:

39. Explain how the primary pathologizing interpersonal pattern reflects features of the broader cultural system (e.g. white supremacy, gender-based inequity, gender binary, classism)

Articulation of the hypothesized homeostatic functioning should:

40. Explain how the primary pathologizing interpersonal pattern functions for the client system (e.g. creates independence/distance, establishing influence, reestablishes connection, otherwise organizes the system)

Goal Development and Treatment Plan

In this section, you will want to demonstrate your ability to develop a plan for your work with a client system. Begin by *very briefly* describing the client(s) presenting concerns and then describe the client(s) long term goal(s) for therapy with a corresponding short term objective(s). Each goal should simultaneously be:

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41. Process oriented rather than content oriented
42. Consistent with what you presented in your case conceptualization
43. Use the language of your theoretical orientation
44. Emphasize intrapersonal/relational functioning in the system
45. Be stated in terms of the positive (what clients want rather than what they don't want)
46. Be congruent with the clients' presenting concern
47. Concrete and measurable

In this section you will also want to demonstrate that you addressed the dilemma of change with your client(s) as well as discussed the goal(s) and treatment plan with them in order to identify and respectfully address areas of agreement and disagreement. This is in the interest of showing that you developed the goal(s) with the client(s) in a collaborative fashion that honors client autonomy. Finally, complete and attach a systemic treatment plan using the provided template (see Appendix F).

Course of Treatment and Continued Assessment of Progress

The treatment section of your capstone project is where you describe your intervention efforts (i.e. what you did to foster change for your clients) during each phase of therapy. Remember that your descriptions of your interventions should use the language of your theoretical model and reflect the theoretical underpinnings of that model in their focus. This section should address each of the following:

48. Describe how you identified which members of client system would be involved in specific tasks and stages of the treatment
49. Describe a beginning, middle, and end phase of treatment
50. Provide at least one detailed example *for each phase of therapy* that includes actions you took to foster systemic change and how the client responded to those actions
51. Include specific techniques you used (i.e. metaphor, reframing, inventiveness, creativity, humor, prescribing symptom) in your descriptions
52. Explain how you assessed the effectiveness of your interventions and evaluated client progress
 - h. This can be through the use of a formal assessment tool, through informal solicitation of feedback from the client, and/or by revisiting/revising therapeutic goals
53. Describe your working alliance with *each* client as well as the entire system including:
 - i. How well you were connected with each client
 - j. How each client may have experienced you in session
 - k. Process-level observations regarding your involvement in the client system
54. Describe any collaboration with collateral systems that happened as treatment progressed
55. Describe any advocacy efforts you made to intervene in the broader systems affecting your client(s) in order to support your client(s) change
56. Explain what adjustments you made to your interventions and/or techniques based on cultural/contextual factors. These can include:
 - l. Structural and/or policy demands of your internship site
 - m. Unique needs of the client population served by your internship site
 - n. The socio-political identities of your client(s)
 - o. Established/cited limitations of your clinical model
 - p. Other complicating factors (e.g. medical management, involvement in legal system, broader healthcare systems impacting access to systemically oriented therapy)

Ethical and Legal Issues

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Your discussion of the ethical and legal considerations of a case should demonstrate that you have identified the most salient ethical and/or legal issues of your case, that you accessed the appropriate resources for support when addressing ethical and legal concerns, and that you were able to weigh and act on various ethical demands in a way that prioritizes client well-being. To do this, describe:

57. The most salient ethical/legal concerns of the case and the decision making process you used to address them
 - q. Demonstrate how you used all of the available relevant resources (e.g. supervision, AAMFT Code of ethics, Colorado Revised Statutes, books/articles) to inform your decision making for handling each ethical/legal concern
58. What actions you took based on your decision
59. What the outcomes of these actions were and how these have informed what you would do in a future similar situation

Reflections

It is likely that you have dedicated a significant amount of time and energy outside of the therapy room to evolving and consolidating your identity as a systemically oriented therapist. Be sure that you document these efforts. In the reflection section of your capstone, you should include:

60. Person-of-the-therapist insights you had during your work with client(s) such as:
 - r. Which process level patterns you inherited from your FOO and how they manifested for you as you participated in the client system
 - s. How your socio-political identities have shaped your values, attitudes, beliefs, and primary emotions and how these manifested for you when working with the client system
61. A description of how the intersection of your own and the client(s)' socio-political identities either inhibited or facilitated the therapeutic relationship and process
62. Any missteps, oversights, and/or ruptures in the therapeutic alliance that occurred during your work with the clients and what you learned from these experiences that helped you evolve as a therapist

In the reflections section, you must also describe at least one of two of the Key Jesuit Values that were most meaningful for you as you worked with the client system. Reflection questions for the Key Jesuit Value are listed below for you to consider as you address this requirement.

- t. Cura Personalis – In what way did your experience reflect your concern for your client(s)' personal development and how did you respond in terms of promoting human dignity?
- u. Unity of Mind and Heart – How did you integrate your academic knowledge with care and compassion for your client(s)?
- v. Finding the Sacred in All Things – How did this experience fit into the notion of developing your own spiritual awareness and how you “ought to live”?
- w. Magis – What is your understanding of working towards the “greater good” and how did your work with your client help them “meet the challenges of their present circumstances?”
- x. Men and Women for Others – In what way did your work address issues of inequity and center/prioritize those with non-dominant experiences?

Case Study Presentation

Below we have provided some guidelines for how to structure the presentation of the case study you have selected for your Capstone. As context for the presentation of the case, you will want to clearly state what

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theoretical orientation you use and a brief explanation of the basic principles of your model. For the remainder of the presentation, present the information in a way that follows the overall structure of the course of therapy. Specifically, start with a brief introduction of the case and then present your assessment of the system that informed your conceptualization of the case. Move to the goals you established with clients and end with interventions and techniques you used to facilitate the client(s) stated goal(s). You will also want to describe your efforts to assess your clients' progress, manage any ethical/legal concerns, and end with a brief summary of the current status of your work with the client system. As a means of concluding your presentation, you can describe your reflections about the case and your evolution as a systemic therapist. Remember that this presentation is meant to reflect the preeminent example of your work so you will want to be practiced in your presentation of this information.

Suggested time frame for presentation sections:

Statement of Theoretical Orientation	– 5 minutes
Brief Case Introduction	– 5 minutes
Assessment and Analysis of System	– 10 minutes
Goal Development and Treatment Plan	– 10 minutes
Course of Treatment and Continued Assessment of Progress	– 10 minutes
Ethical and Legal Issues	– 5 minutes
Reflections Including Regis Mission	– 5 minutes
Questions and Group Discussion	– 10 minutes

Please see Appendix F for the MFT Capstone Evaluation Rubric

DIVISION OF COUNSELING AND FAMILY THERAPY POLICIES

Transfer Credits

The transfer of a maximum of twelve credit hours from another regionally accredited institution is possible if approved by the CFT department chair. They must be graduate level courses of a passing grade (B- or better) and be no older than 6 years in order to count towards degree requirements. The transfer courses cannot be part of a previously completed Master's or Doctoral degree. An official transcript, a description of the course(s), and a course syllabus needs to be submitted to the department chair for consideration and will be approved on an individual basis by the chair. The only courses that *cannot* be transferred in are MFT635, MFT 638, MFT690/692 Practicum, and MFT699A/B/C MFT Internships.

Required Program & Clinical Orientation

All graduate students are required to attend the Division of Counseling and Family Therapy Orientation prior to enrolling in coursework. In addition, during each term, Clinical Orientations are provided by the Division to orient students to the clinical portion of the program. Attendance is required prior to application to Practicum. Students will be notified by email for all events.

STUDENT HEALTH INSURANCE

As a benefit of being a Regis student, you will have the option to obtain student health insurance. According to national Insurance policies, all students will be automatically enrolled in the insurance, UNLESS you opt out/waive the plan. This enrollment will take place each year in August. DCFT administration and staff are unable to answer specific questions about the plan or the process. Please direct all questions to the below links.

To enroll in or waiver the insurance plan, you will need to go to: <http://gallagherstudent.com/ru>, create a login and waive/enroll. Gallagher Student Health will notify Regis students accounts.

Direct WAIVER Link:

<https://www.regis.edu/life-at-regis/wellness-and-recreation/student-health-services/student-health-insurance>

Other helpful links:

FAQ's

<https://www.gallagherstudent.com/students/view-brochure.php?idField=1406>

More information on the healthcare coverage:

<https://www.gallagherstudent.com/students/student-home.php?idField=1406>

Email for questions for the **Student Health Insurance Program**

(ship@regis.edu) after you have gone to GSH website where all the information is regarding the health insurance.

Email Policy

Please click this link to read the current Regis University policy on email:

<http://regis.edu/content/cpedcn/pdf/emailpolicy.pdf> All students and faculty are **required** to utilize their RegisNet account for University business. This account will serve as the primary means of communication from the MAMFT Program.

Technology Requirements and Training

Students and faculty are required to have basic proficiency with computer use and the following technologies: Microsoft Word, presentation software (such as PowerPoint or Prezi), Excel, Webadvisor, Ranger Portal, Tevera, WorldClass, and, if involved in the clinical component, Titanium, and audiovisual technology (Intelligent Video Solutions and Apple I-PADS). Students and faculty receive training on Webadvisor and Ranger Portal from Student Services staff and WorldClass from Information and Technology Services staff at New Student Orientation, offered three times per year. All students, faculty, and supervisors are offered training on the use of Titanium and Intelligent Video Solutions each term by the DCFT Practicum Coordinator. All students and faculty have access to computers in the computer labs at all campus locations, including Thornton and Northwest Denver.

Tevera Student Portfolio System

All MFT students will be charged a \$200 fee for access to Tevera. All students must submit course benchmark assignments to their individual Tevera account. Submission of the benchmark assignment is a condition of receiving a passing grade in all courses that are part of the Outcome Based Assessment Plan. All students will be graded according to the MFT benchmark rubric that measures attainment of the MAMFT Student Learning Outcomes and COAMFTE Developmental Competencies Components.

All students and faculty receive an initial training on how to use Tevera, followed by a question and answer session during new student orientation, offered three times per year by the Assessment Coordinator. Students will have access to two follow up trainings including: 1) how to use Tevera to apply for practicum and internship and 2) how to use Tevera during practicum and internship. All trainings are self-guided modules that students will have access to throughout their program of study. The training modules are available in the DCFT & Me shell in Worldclass. Students should contact ITS to get access to this shell if it is not already available to them in Worldclass. Additional Tevera training information is available within the Tevera program.

Students will retain limited access to their Tevera account after graduation. They can continue to use the program to track their post-graduate clinical experience.

Grading

Grades in the Division of Counseling & Family Therapy are consistent with the University-wide Course Grading System. For more information, see the Regis University Bulletin on the Regis University website.

Minimum grade required

A minimum grade of B- is required for courses to count toward your degree requirements. If a student receives a letter grade below a B-, they will have to repeat the course. Students must earn a grade of Pass in a Pass/ No Pass course or they will be required to repeat the course.

Grading Scale and Equivalent Points			
<i>Letter Grade</i>	<i>Percentage</i>	<i>Grade Point</i>	<i>Minimum number of points</i>
A	93 to 100	4.00	93-100
A-	90 to less than 93	3.67	90-93
B+	88 to less than 90	3.33	88-90
B	83 to less than 88	3.00	83-88
B-	80 to less than 83	2.67	80-83
C+	78 to less than 80	2.33	78-80
C	73 to less than 78	2.00	73-78
C-	70 to less than 73	1.67	70-73
D+	68 to less than 70	1.33	68-70
D	63 to less than 68	1.00	63-68
D-	60 to less than 63	.67	60-63
F	Less than 60	0	59 and below

Grade of Incomplete

A grade of incomplete (“I”) is assigned to a student who has experienced unforeseen circumstances and is unable to complete the requirements of the course. Examples of unforeseen circumstances include: an accident, a death, an illness, a major and unexpected life transition that impacts the student’s ability to complete the coursework; or other unforeseen and serious circumstances over which the student has little or no control. Incompletes are granted at the discretion of the instructor. To request a grade of incomplete, the student must submit a written request for the incomplete to the course instructor, explaining the unforeseen circumstances that have occurred.

Other requirements:

1. The request must be submitted prior to, or by, the last meeting date of the course. If the request is not submitted by the last meeting date of the course, the student will be graded on whatever assignments and performance requirements (including attendance) have been completed. In cases where a student is incapacitated and unable to meet this deadline, if written evidence is presented regarding the circumstances, the instructor will work with the student regarding this deadline.
2. The student must have completed 75% of the course with a passing grade in order to be eligible for an incomplete. If the student has not successfully completed 75% of the course, the student will be advised to withdraw from the course. Withdrawal dates vary. Check the RHCHP

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Academic Calendar to determine the withdrawal date for your specific course. It is the student's responsibility to withdraw from a course.

3. The length of time and the remaining requirements to complete the course are determined by the instructor; however, the maximum length of time for completion is the end of the following term.
4. If the course work is not completed by the end of the following term*, the incomplete grade reverts to an "F" ("I/F") and is calculated in the GPA. It is up to the student to complete the work, send the work to the faculty, and keep track of the final due date.
5. Note that some corporations/companies may not reimburse tuition money if the grade of incomplete is assigned.
6. If students have questions about how an incomplete impacts their financial aid, they should contact financial aid directly (303-458-4128 or 800-568-8932)

*"End of the following term" is defined as:

- a. For a 14-week course, the end of the following term.
- b. For a seven-week course, the end of the next seven-week period.
- c. For a variable course, the end of the following term.
- d. Students taking incompletes in MFT 692/690, and MFT 699 have one year to complete the course.
- e. Students who experience military deployment have one year to complete the course.

APPEALS

Grade Appeals

The Division of Counseling and Family Therapy Grade Appeals policy and procedure is delineated here. The primary policy and procedure is outlined in the current Regis University Academic Catalog. Policies may differ by academic unit. See Regis University website for current Regis University Academic Catalog.

APPEALS OF DISPUTED COURSE GRADES

Grade appeals involving an issue of academic integrity are handled by the Academic Integrity Board of Rueckert-Hartman College for Health Professions. The policy and procedure delineated here is specific to the Division of Counseling and Family Therapy (DCFT henceforth) and applies to all programs, certificates, and courses within DCFT.

The following procedure is to be followed if students wish to protest a grade received in a course when progression is not affected.

1. All grade appeals must be initiated within two weeks after the official term end date following receipt of the grade that is being challenged. DCFT official term end dates include the date a grade is posted via WebAdvisor for 7 week 1, 7 week 2, 14 week, and Weekend Variable classes.
2. The student first contacts the instructor and reviews the issues. DCFT students are required to provide a written rationale for the grade change and all relevant documentation (a copy of the assignment, quiz, exam, presentation etc., highlighting areas of dispute; syllabus highlighting specific areas of dispute; and specific written evidence that substantiates the requested grade change. Instructors are required to provide a written decision within two weeks of receipt of the grade change request by the student. If the grade remains in dispute the student should follow step 3.

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3. The student contacts the appropriate program director/chair and, in writing, protests the disputed grade. DCFT students must contact their program's Department Chair within 3 business days of the receipt of the instructor decision (see step 2). The department director/chair then follows the following procedures:

Both the student and the instructor submit written statements explaining the issue to the appropriate department director/chair. For DCFT students, all written documentation required in step 2 must be provided, including the name of the course, instructor, term the course was taken, student address, phone number, and email. The department director/chair reviews all the documentation submitted to determine the validity of the challenge. The department director/chair contacts the student and instructor to schedule an appointment, if necessary. The department director/chair may choose to seek additional information from other sources, if indicated by the circumstances. The department director/chair makes a decision about the disputed grade and conveys that decision in writing to the student and instructor within 2 weeks of the request of grade appeal by the student. If either party wishes to contest the department director's/chair's decision, the dissatisfied party may appeal the decision within two weeks of receipt of the decision, via step 4.

NOTE: If the instructor of record is the program director/chair, a designee will be appointed.

4. Further appeal is made to the DCFT Associate Dean (or Academic Dean of RHCHP in the absence of the Associate Dean). The appropriate dean reviews the proceedings to date, obtains any new information deemed necessary, and makes the final determination. The appropriate dean notifies all parties in writing of the final decision. The decision of the division dean is final.

Academic Compliance Policy

Academic Probation

Students must have a minimum cumulative GPA of 3.000 to graduate. If a GPA falls below 3.000 in the program, the student will be notified and placed on academic probation. Students placed on academic probation have one term to raise their GPA to 3.000. Any student who believes they have an exceptional reason to request an extension to the one term rule must seek approval through the department chair (see the decision and appeals process below). Courses with a grade of C+ or below (or No Pass/Fail in Pass/Fail non clinical courses) may be repeated one time and students must earn a grade of B- or greater to continue progression in the program. Students who receive a No Pass/Fail in clinical courses will be either placed on probation or may be suspended (see below) and must also repeat the course. Students will be notified of probationary status by the department chair and must complete and submit an *Academic Success Plan* for review and signature by their faculty liaison prior to the stated deadline or face suspension.

Academic Suspension

Students who fail to raise the cumulative grade point average to 3.000 are suspended. Students who earn a grade of C+ or below in two courses (including repeated courses) may be suspended from the program for up to one academic year. Students who are suspended and then return to the program are placed on probation for the term(s) required to raise their GPA to 3.000. Students who are notified of academic suspension (without remediation-see below) may complete any regular and required courses for which

III. Division of Counseling and Family Therapy Policies

they are currently enrolled. Any additional registrations will be dropped for the suspension period. Students are not allowed to register for further courses during the suspension period.

Any student who earns a grade of No Pass/Fail (NP/F) during clinical courses (techniques, practicum, internship) will have an MFT Professional Performance Evaluation (MFT PPE) (Appendix A) review with the course instructor and will be referred to remediation. Students may be required to immediately discontinue client contact in practicum and internship. Additionally, suspension may be immediate for all academic classes and/or clinical courses if continuation would result in the inability to effectively participate in courses or to provide client services. Additional remediation requirements apply and failure to successfully complete a remediation plan will result in further suspension or dismissal.

Students who are suspended will be notified by the department chair and must complete an *Academic Success Plan*, including a meeting with their faculty liaison to review the plan, prior to the stated deadline and return to the program. In order to return to the program students must petition for readmission by contacting the chair in writing, requesting a return and submitting the faculty liaison approved and signed *Academic Success Plan*. Failure to reapply by contacting the chair and completing and reviewing the plan with their faculty liaison by the stated deadline may result in academic dismissal. The Academic Success Plan and readmittance will be reviewed with the faculty liaison and the department faculty for readmittance decisions.

Academic Dismissal

Following suspension and reenrollment in the program, any student who fails to raise their GPA to 3.000 or earns a grade of C+ or below or No Pass/Fail in any additional course may be dismissed from the program. Students who earn a grade of C+ or below in three courses at any time during the program may be dismissed from the program. Any student who receives a No Pass/Fail in any two clinical courses (e.g., techniques, groups, practicum, or internship), or upon failing a repeated clinical course will be dismissed.

Academic Review, Decisions, and Appeals Process

The department chair receives notification of non-compliance of students with academic expectations to maintain a 3.000 or greater GPA and multiple course grades below C+ per student, or No Pass/Fail in clinical courses. When a student is identified as out of compliance, an academic review is conducted to determine the level of probation, suspension, or dismissal. Students are notified of the policies and decision by the chair in writing, and the decision for probation, suspension, or dismissal and must confirm receipt of the decision notification. Students may request an extension from the department chair to increase the number of terms to increase their GPA. If in the case a student is unable to raise their GPA within a semester, in addition to submitting an Academic Success Plan, the student may petition the department chair at any time during probation and suspension to modify the plan and request additional time to raise their GPA above 3.000.

Appeals to the decision for probation and suspension may be made with the Division of Counseling and Family Therapy Associate Dean and must be made within 10 business days of the decision date provided by the Department Chair. Appeals for probation and suspension decisions made by the DCFT Associate Dean are final. Appeals for dismissal are brought first to the Associate Dean and reviewed with the RHCHP Dean and University Provost in conjunction with department faculty

Leave of Absence and Withdrawal from the Program

According to the policy of Regis University, students have up to (6) years to complete their degree from the time they start their program. Students who need a leave of absence for two or more consecutive terms are required to complete a “Leave of Absence” form on Webadvisor. Students who are withdrawing from the program are required to complete the “Leave of Absence” form indicating their intention to permanently leave the program. Additionally, students should inform their faculty liaison and the academic success coach in writing of their intention to take a leave of absence or to permanently leave the program. If a student withdraws from the program, they must reapply to be considered for readmission.

Policy Exceptions

If a student would like to request an exception to any DCFT or MFT program policies, a formal request should be made in writing to the chair for the department of couple and family therapy explaining the reason for the request. Requests will be considered by the MFT program faculty and the DCFT leadership team. A written response will be provided to the student request within 14 business days.

STUDENT RESPONSIBILITIES AND PROFESSIONALISM

MFT Professional Identity and Development

The AAMFT Code of Ethics

Student Code of Conduct

In the spirit of the Jesuit mission of Regis University, students and faculty share responsibility for maintaining an appropriate learning environment. In order for faculty members to provide and students to receive effective instruction, the Division of Counseling & Family Therapy expects students to

- ◆ Respect the rights and human dignity of others.
- ◆ Ensure that your actions maintain an atmosphere conducive to learning and personal development.
- ◆ Respect the University's traditions of academic freedom, including honesty, freedom of expression, and open inquiry.
- ◆ Respect the different backgrounds, religious traditions, and identities of others.
- ◆ Cultivate a community in which assistance is offered to others in need of support, guidance, or friendship.
- ◆ Obey federal, state, and local laws and ordinances.
- ◆ Abide by the directives of University authorities and adhere to University policies, procedures and regulations.

More details regarding the Regis University Student Code of Conduct and procedures related to violations are located https://www.regis.edu/_documents/student-life/regis-code-of-conduct-2019-2020.pdf

Ethics and Confidentiality

An integral component of Counseling and Family Therapy Division courses is student and instructor self-disclosure and the use of personal experiences for the purpose of facilitating coursework and learning. Each student is expected to honor confidentiality as it pertains to student self-disclosure. No shared

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information, comments, or opinions expressed by other students or instructors in the educational setting should ever be used in a manner which may result in humiliation, embarrassment, harassment, damage, or other injury to the student or faculty in their personal, public or business life. In addition, confidentiality must be upheld by not disclosing any information that would identify a particular individual or organization.

An additional integral component of higher education is challenging one's own perceptions and beliefs regarding the course content and integrating information as well as understanding opposing perceptions and beliefs. Thus, students have the right to choose how much they will disclose and must also accept the responsibility of respecting disclosures of other students and instructors.

Note on practice courses in which students create recordings of practice therapy sessions

A number of our courses require you to record your practice therapy sessions and download them onto a personal device, which you often submit to your instructor as part of an assignment. The same rules of confidentiality apply to the use and handling of recorded practice sessions as stated in the paragraphs above. All recorded materials must be deleted off your device by the end of the semester. Any student found to retain recording beyond that time period may be placed in remediation.

HIPAA Policy and Procedures

HIPAA Privacy & Security Reminder

The goals for maintaining rigorous adherence to HIPAA compliance requirements within all Regis University-sponsored programs, projects and activities are designed to:

- Ensure the security and confidentiality of PHI and ePHI as covered by HIPAA;
- Protect against any anticipated threats or hazards to the security or integrity of such information, and
- Protect against unauthorized access, use or disclosure of such information.

Each student should have completed the necessary training on how to comply with the policies and procedures for maintaining HIPAA compliance. If you have not received or completed your HIPAA training at Regis University, you must inform your instructor.

Reminders

Protected health information is any information that allows you associate a person's identity with their health care information. This applies to all forms of media including: paper documents, electronic files and data, course notes, research papers, video and sound recordings, photos, charts, etc. As it pertains to Regis University-sponsored programs, project and activities, the following are reminders of common privacy and security practices for protected health information that must be followed:

- Any personal documents and notes in any form that contains individually identifiable health information on patients you come into contact with as a result of Regis University-sponsored training must be properly protected and its confidentiality must be maintained.
- Regis University students who are training at partner health provider organizations are prohibited from removing documents that contain individually identifiable health information without a written and signed authorization from the health care provider's Health Information Management (HIM) Department or authorized representative ***and*** the proper patient authorization.

Special note on minors—in most cases, minors cannot legally consent or authorize the release of their protected health information. In these cases, parental or guardian consent would be required.

- Regis University students participating in Regis University-sponsored health care training and research activities must only use de-identified information or limited data sets in any presentations or

III. Division of Counseling and Family Therapy Policies

publications outside of the health care provider organization. (See Appendix A on ‘How to de-identify individual health information’.)

- For Regis University students participating in Regis University-sponsored health care training and research activities, the following activities involving individually identifiable health information are explicitly prohibited:
 - Sending such information through unsecure email,
 - Posting such information on any social networking site—regardless of the user account used by the Regis University student, faculty or staff to post the information, and
 - Disclosing such information during classroom discussions and/or presentation.

Policy compliance and sanctions

It is the responsibility of each student to review all aspects of the course syllabus including the Regis University HIPAA Privacy & Security Reminders. In doing so, the student acknowledges that they agree to adhere to these practices. Furthermore, the student agrees not to divulge the contents or to provide access of any examination or assignment to another student in this or ensuing terms.

All violations of the Regis University HIPAA privacy and security policies and practices are taken very seriously. All violations will be reported to the Regis University HIPAA Privacy & Security Committee for review to determine the extent of the violation and the appropriate sanctions to be applied, where necessary.

Sanctions may include notification of the student’s faculty liaison with a note in the student’s advising file, reductions in the grade for the course up to and including failure, and remedial action as directed by the Regis University HIPAA Privacy & Security Committee.

Reporting requirements

In the event that any Regis University staff, faculty or student becomes aware of the unauthorized use or disclosure of PHI or ePHI that is under the control and protection of Regis University, the incident must be reported within 5 days of discovery to:

Sheila Carlon, HSA Division Director
Regis University
3333 Regis Blvd.
Denver, CO 80221
303 458 4108
PrivacyOfficer@Regis.edu

See Appendix H for information on how to deidentify clinical information.

Academic Integrity Policy

It is the responsibility of each student to review all aspects of the course syllabus and agree to adhere to the Regis University Integrity Policy. In doing so, the student acknowledges that the work represented in all examinations and other assignments is their own and that they have neither given nor received unauthorized information. Furthermore, the student agrees not to divulge the contents of any examination or assignment to another student in this or ensuing terms. More details regarding the Academic Integrity Policy and procedures related to violations are located

<https://www.regis.edu/policies/academic-integrity>

Attendance Procedures

Student participation is essential in a learning environment. For this reason, the Division of Counseling and Family Therapy expects students to attend Division courses. 100% class attendance is expected, per Regis University policy. The Division has an attendance policy which includes a maximum number of times a student can miss a course without needing to automatically retake the class. This policy is spelled out below. In addition to this policy, instructors may have their own policies that limit absences further or may spell out how absences can impact a student's grade in the course. These absence policies can be more, but not less restrictive than the policy outlined here. If you must be absent from a class, the following limits apply:

- For a 14-week course, you may have up to two absences, exceptions are practicum, internship, MFT 635, and MFT 638.
- For a 7-week course, you may have up to one absence.
- For a weekend variable course, you may miss up to 4 hours of class time.

Stipulations:

- a. Any absence beyond this limit (including any additional 4 hours of absence from a weekend variable course) will result in a non-passing grade of no higher than a C, or NP.
- b. For absences due to emergencies, illness, professional requirements, or unforeseen circumstances, these same stipulations apply.
- c. You are responsible for the material for any missed class. Your instructor is not responsible for making sure you get caught up with what you missed. It is your responsibility to gather and know the material presented during your absence.
- d. All assignments are due on the dates indicated on the syllabus. Other penalties (including an assignment grade of F) may occur for late assignments, at the discretion of the instructor. It is also at the discretion of the instructor to offer/not offer make-up work for any missed class, regardless of reason.
- e. You are expected to attend a course for the duration of the scheduled start time through dismissal from class by the instructor. This includes being on time at the scheduled start, remaining in class until all students are dismissed, and being on time returning from breaks. Habitual lateness or leaving early (more than two times) will result in the loss of participation points. See your syllabus for specific point losses for lateness.
- f. Attendance in class includes participation in discussions and required activities and will be graded accordingly. Instructors may determine point reductions for failure to participate while attending, as well reduce participation points due to your absence from class or due to lateness, even when the absence is designated as allowable, as in the above criterion.
- g. Please notify the instructor, in advance, if you know you will be absent from class. This does not excuse you from these procedures; it is a professional courtesy.

MFT Professional Performance Evaluation and Remediation

The DCFT recognizes its obligation to ensure the scholastic, professional skills-based, ethical preparation, and intellectual competencies of its students. In addition, emotional maturity should be demonstrated in interactions with others. Consequently, we are committed to consistently evaluating students in all of these areas. DCFT faculty, affiliates, advisors, and supervisors (**hereafter referred to as "evaluators"**), use their professional judgment and a developmental view of training to evaluate the performance and progress of students. Consequently, we are committed to consistently evaluating students in all of these areas. These evaluations will be made formally and informally from observations in classroom situations and in fieldwork placements throughout the course of the program.

The criteria used by evaluators to make such judgments include observations of student behavior/professional conduct in or outside of classrooms, evaluations of students' performances in simulated practice situations, evaluations of students' performances in fieldwork placements, and the disciplines' codes of ethics.

The MFT Professional Performance Evaluation (MFT PPE) is used to give students feedback on these areas of professional development, behavior, or competency as therapists in training. All students will be evaluated on the MFT PPE at the completion of MFT 616 and at the completion of MFT 638. Additionally, faculty may use this form at any time during students' enrollments in the Division. The purpose may be developmental/supportive or remedial.

The MFT PPE is generally not used in the following situations: problems that are solely about academic performance and/or grades, cases of academic integrity, HIPAA violations, or a Title IX allegation. These issues are handled through different procedures. In the cases of HIPAA violations, academic integrity violations, or Title IX allegations, RHCHP and University procedures supersede DCFT remediation. If an evaluator believes that any student is making unsatisfactory progress or is not meeting program or university standards, they are encouraged to give the student concrete feedback about what is needed to improve. If the evaluator believes (or witnesses) that the student's performance does not or cannot improve to acceptable standards of professional conduct (see criteria in the second paragraph above; see items on the MFT PPE), the following steps occur:

1. Establishing Need for Remediation and/or Support

Students who do not meet developmental goals in the program or who engage in behavior or performance deemed inappropriate (see above) are given feedback on the MFT PPE by the evaluator. Students who receive at least one rating of "1" on the MFT PPE (performance is rated as "unsatisfactory") will be referred to remediation.

2. Establishing Remediation Committee

The Remediation Coordinator will form a committee, composed of the student and 2-3 members of the faculty (not including the original evaluator). The Remediation Coordinator may obtain additional information about students' performance that would inform the Committee, *as it pertains to the ratings on the MFT PPE*. (examples include but are not limited to: written statements from the evaluator or other instructors, faculty liaisons, academic success coaches, or supervisors; email correspondence to/from the student; information available in Ranger Portal, Webadvisor, Colleague, and Tevera).

3. Remediation Committee Meeting

The Remediation Coordinator and/or the appointed committee will set up an in-person, one-hour meeting with the student. The committee will discuss the MFT PPE and issues of concern with the student, and the student will have an opportunity to respond and present information regarding their progress in the program.

A Remediation Plan is drawn up by the committee to address the developmental growth or remedial needs of the student. Specific concrete activities and target dates are included in the plan, with the expectation that the student will follow through with the prescribed activities, within the timeline stated on the form. Within 10 business days of the Remediation Meeting, the Committee will send to the student the final remediation plan. These can include but are not limited to: recommending that the student be allowed to remain in the program with remediation and support; recommending the student voluntarily withdraw

from or take a leave of absence from the program; or, in some situations, that the student be dismissed from the program. **The student must provide written/email assent to the plan within 5 business days.**

4. Follow up Meeting

The need for a follow up meeting is determined case by case. Typically, a follow up, one-hour Remediation Committee Meeting is scheduled to evaluate progress and discuss continued support needs and student progress in the program. The Committee may hold multiple follow-up meetings, if deemed appropriate.

If the stipulations of the Remediation Plan are satisfactorily met, the remediation is considered ended, and the Committee disbands. **Failure to participate in any aspect of the remediation or failure to meet any of the above outlined deadlines may result in dismissal from the program and/or university.**

Student Appeal of Committee recommendations other than dismissal

Students may appeal the Final Remediation & Support Plan by following these procedures:

1. The student may write a letter to the Associate Dean, stating their reasons for the appeal. The letter may be an email (if sent by Regis email).
2. **The letter must be received by the Associate Dean within 5 business days of the student's receipt of the Final Remediation & Support Plan.**
3. Within 10 business days of receiving the written appeal, the Associate Dean will notify the Remediation and Support Committee and the student of the decision.
4. If the Associate Dean needs additional time to make a decision, the student will be notified in writing.
5. The decision of the Associate Dean is final and binding.

If the Final Remediation & Support Plan recommends **suspension/dismissal**, students may follow the same appeal process outlined above. Within 10 business days of receiving the written appeal, the Associate Dean will notify the Committee and the student of the decision. If the Associate Dean needs additional time to make a decision, the student will be notified in writing. The Associate Dean's decision is final and binding.

* All correspondence referred to above can be accomplished through use of electronic mail.

Procedures for withdrawal/dismissal from a DCFT Program after an unsatisfactory remediation

Following the due process outlined here, if the student has not made satisfactory progress in meeting the stipulations of the Remediation Plan, the student may be advised to withdraw from the program, or the Committee may recommend dismissal from the program. **A withdrawal/dismissal recommendation** will be followed by a letter of dismissal or a letter confirming the withdrawal from the Program Chair to the student, within 10 business days of the Remediation Meeting. If the student does not accept the committee and program chair's decision, the student has 5 business days (from the date of receiving by certified mail the program chair's decision) to submit a written appeal of the decision to the Associate Dean. The Associate Dean has 10 business days to review and respond to the student. Final decision for dismissal rests with the Associate Dean of DCFT.

Regis University Alcohol and Drugs Policy

Regis University's policy on alcohol and drugs is centrally informed by our ethic of care and concern for the individual person and the welfare of our community members (*cura personalis*). Regis University is committed to providing a learning, living, and work environment for all members of its community of students, faculty, and staff that promotes adhering to personal standards and values that are socially responsible and develop the skills and leadership abilities necessary for distinguished professional performance and important contributions to the improvement of society. For more information on the policy, see this link <https://www.regis.edu/policies/alcohol-and-drugs-policy>

NONDISCRIMINATION AND SEXUAL MISCONDUCT POLICY

For the full policy, go to this link.

<https://www.regis.edu/policies/discrimination-sexual-misconduct-retaliation>

Policy for Student Complaints of Faculty

If students have complaints regarding a DCFT faculty member, they should follow the following policy to address their concerns:

1. Email the faculty member outlining student concerns and request to set up an in-person meeting with the faculty member to discuss these concerns. This email contact must be initiated by the student no later than 30 days of the end of the term in which the incident prompting the complaint occurred.
2. The student can request that another faculty member be present at this meeting.
3. If the concern is not alleviated after the in-person meeting, the student should send a detailed email to the Program Chair (or Associate Dean, if the complaint is against the Chair). This email should include:
 - a. all correspondence with the faculty member that pertains to this concern,
 - b. the student's account of their concerns regarding the faculty member,
 - c. the student's account of the face-to-face meeting,
 - d. and what continues to concern the student. This email must be submitted to the program chair within 10 days of the in-person meeting.
4. At that point, the Program Chair (or Associate Dean) determines the course of action. The Chair (or Associate Dean) will communicate this decision via email to the student within 14 days.

Students also have the option of filing a formal complaint with student services. You can initiate this process by following the directions at the following link:

<https://www.regis.edu/policies/student-complaints>

Graduation/Commencement at Regis University

Registration for graduation is required for degree seeking students. Deadlines are **early in the term** the student intends to graduate. In addition, post-master's certificate students must apply for graduation in order for their post-master's degree certificate to be posted on their diploma as complete. Students are responsible for applying for graduation and commencement ceremonies through the Regis University website: <https://www.regis.edu/about/offices-services/academic-records-registration/graduation-commencement/index>

PERSONAL THERAPY

In addition to the academic and clinical knowledge required in counseling and family therapy, self-awareness is also essential. To facilitate this personal exploration the DCFT faculty strongly recommend that each student complete a minimum of 20 hours of individual, couples, family and/or group therapy sessions with a licensed mental health provider or a student or candidate, who is practicing under supervision of a licensed practitioner.

It is strongly recommended that therapy hours be initiated prior to or at the beginning of the clinical practicum and internship experiences. The faculty believes that the first requirement for becoming a competent therapist is maintaining your psychological health and well-being.

Students can access pro-bono therapy services by contacting the CU Denver Counseling Center:
<https://www.ucdenver.edu/counseling-center>

Administration, Faculty, & Supervisor Information

The leadership for the Division of Counseling and Family Therapy is comprised of the associate dean, the affiliate coordinator, the chairs for the two departments (couple and family therapy and counseling), and the clinical director for the Regis Center for Counseling and Family Therapy. The Department of Couple and Family Therapy has core faculty members that have training and expertise in couple and family therapy practice and research. All MFT program core faculty and program supervisors hold active licenses or candidacy in the state of Colorado as Marriage and Family Therapists and are AAMFT Approved Supervisors or Candidates. New MFT program core faculty hires and new MFT program supervisors must hold active MFT licenses or MFT Candidacy in Colorado within one year of hire and be AAMFT Approved Supervisors or Candidates within one year of hire.

In addition to providing administrative leadership, the core program faculty serve three primary roles in their interactions with students: instructor, program clinical supervisor, and academic advisor. Additionally, faculty engage in scholarship, service, and community practice.

Affiliate faculty are licensed mental health professionals who are active in their profession in the community. They bring their understanding of the current practices, constraints and opportunities that exist in Colorado. They, too, come from a variety of backgrounds and offer rich and diverse perspectives about couple and family therapy theory and practice.

DCFT Leadership Team

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IV. Administration, Faculty, &
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IV. Administration, Faculty, & Supervisor Information

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<https://www.regis.edu/academics/faculty-finder/faculty/luis-vargas>

Frequently Asked Questions

Students should consult this program manual, course syllabi, and the information on DCFT and ME (WorldClass) when they have questions. When questions remain, the following guides students in selecting which faculty to approach for various programmatic questions and tasks.

Questions and tasks for the academic success coach:

Orientation and advising materials

Ranger Portal and Webadvisor Use: adding, dropping, withdrawing from classes

Academic advising questions- course rotation, course sequencing, etc.

Degree plan review

Registration waitlists

Course registration for courses with prerequisites

Questions and tasks for faculty liaison:

Theoretical or Career Interests

Research Interests

Licensure in Colorado and other states/Licensure Portability questions

Concerns about academic progress

Planning for clinical component

Planning for Capstone Project

Other professional development inquiries

Questions to ask instructors:

Clarification on expectations, assignments, or other course criteria

Problems completing a course (also speak with faculty liaison)

Problems concerning a course

Questions about grading

Questions to ask program clinical supervisor:

Concerns about client care

Concerns about a site or supervisor, such as not getting enough supervision or relational hours, etc.

Capstone questions

Transition to MFTC

Post-Graduate Certificates

Post-Graduate Certificate in Counseling Children and Adolescents

Offered on-campus, the post-graduate certificate in Counseling Children and Adolescents (CCA) is developed for community professionals with a master's degree in counseling, MFT, or closely related area of clinical mental health who meet the requirements for admission to the certificate program. Current graduate students in the Master of Arts in Counseling and Master of Arts in Marriage and Family Therapy programs may also be admitted to the CCA certificate program concurrently during their master's degree coursework. The CCA certificate cannot be awarded to current students until the term following graduation from the master's degree program and upon completion of the certificate coursework.

The Regis University Center for Family Counseling and Play Therapy is a *designated Approved Center of Play Therapy Education by the Association for Play Therapy* (APT). Therefore, students completing the CCA certificate program meet the academic requirements for the Registered Play Therapy (RPT) national certification through the APT. The certificate is a planned program of study which includes 18-credit hours (six courses). CCA certificate courses are offered in weekend and intensive formats so that students may accommodate work schedules and complete the coursework within one calendar year.

For more information contact Dr. Jesseca Manson, CCA Post-Graduate Certificate Coordinator at jmanson@regis.edu

Post-Graduate Certificate in Depth Psychotherapy

Offered on-campus, the post-graduate certificate in Depth Psychotherapy (DP) evaluates issues of meaning, values and a just existence from an individual, community and cultural perspective. The DP courses highlight the communal nature of the world, incorporating soulful, spiritual and religious world traditions whose powerful influences reflect both inherited and evolving cultural and ecological realities and narratives. The stories that shape us and the stories we create directly impact the psychological wellbeing of individuals, families and communities. The DP curriculum looks to phenomenological description, human imagination, heart-felt ways of knowing, intuition, contemplation, and community dialog as essentials in addressing the basic mental health needs of our times.

The certificate is a planned program of study which includes 18 graduate credits (six courses) to complete. Certificate course work is offered in evening or weekend intensive formats so that students may complete the course work within one calendar year. This certificate is designed for community professionals with a master's degree in MFT, counseling, or closely related area of clinical mental health who meet the requirements for admission to the certificate program.

Current graduate students in the Master of Arts in Counseling and Master of Arts in Marriage and Family Therapy programs may also be admitted to the DP certificate program concurrently during their master's degree coursework. The DP certificate cannot be awarded to current students until the term following graduation from the master's degree program and completion of the certificate coursework.

V. Post-Graduate Certificates

For more information contact Dr. Steven Bennett, Depth Psychotherapy Post-Graduate Certificate Coordinator, sbennett@regis.edu or 720-938-9136

Post-Graduate Certificate Admission Requirements

Current students may apply to the Post-Graduate Certificates using the application located on Webadvisor, under Student tab, Student Forms, Academic Certificate Application

The following faculty serve as coordinators to the certificates:

Dr. Jesseca Manson, Child and Adolescent Certificate Coordinator

Dr. Steven Bennett, Depth Psychotherapy Certificate Applications

Dr. Jennifer Cates, Marriage and Family Therapy Certificate Coordinator

*Certificates must be completed within six years of being accepted.

Appendix A

MFT Professional Performance Evaluation

Student Name _____ Faculty Name _____

Students will demonstrate the following:

1. Ability to incorporate constructive and critical feedback

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

2. Ability to give constructive feedback (direct, respectful, avoid triangulation)

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

3. Anxiety/Stress management: distress tolerance, recognizing and identifying discomfort

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

4. Courage: engage when there is an uncertain outcome, risk of failure, and/or emotional exposure

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

5. Tolerance of ambiguity

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

6. Maintain appropriate boundaries, guided by awareness of self and others in system

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

Appendix A: MFT Professional Performance Evaluation

7. Flexibility in place of rigidity

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

8. Differentiation (emotion regulation, wait, then respond, rather than react)

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

9. Ability to empathize with the perspective of others

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

10. An understanding of how formative relationships impact interactional style and experiences

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

11. Active engagement in class: arriving on time, being present and prepared in class, using technology additively not as a detractor or distraction from engagement

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

12. Integrate conventions of professional discourse (written, verbal, and non-verbal)

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

13. Take responsibility and exhibit agency for own learning

Appendix A: MFT Professional Performance Evaluation

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

14. Effective time management

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

15. Ability to think about the impact of professional presentation and professional role specific to the context (e.g. attire, hygiene, awareness and management of social media)

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

16. Valuing and integrating established knowledge

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

17. Respectful communication (written, verbal, and nonverbal)

1-Unsatisfactory	2-Improvement Needed	3-Meets Expectations	4-Exceeds Expectations	5-Exceptional

Comments:

Student Signature _____ Date _____

Faculty Signature _____ Date _____

Appendix B Resources

RegisNet

A RegisNET Account allows students to use and access Regis University web-based resources. RegisNET provides access to SHAREPOINT, free email, course modules and syllabi, Dayton Memorial Library Databases, computer labs, presentation equipment, etc. To register for a RegisNET account, go to INsite (<http://insite.regis.edu/>). Select “RegisNET Account”. You will be required to post either your social security number or student ID.

Name	URL	Description	Phone Number (if applicable)
Regis University	regis.edu		
Worldclass	Worldclass.regis.edu		
DCFT & Me	Worldclass.regis.edu	This is a shell in Worldclass that contains updated copies of the manual, internship sites, announcements, etc... Contact ITS to have the shell added to your Worldclass site if it is not already there.	
Regis University Catalog	http://regis.edu/Academics/Course%20Catalog.aspx	Program and course descriptions University and College Policies	
Dayton Library	https://www.regis.edu/academics/student-success/library	Books, Articles, Videos, etc... Items can be delivered to the Thornton campus	
RHCHP Academic Calendar		Term start and end dates; drop and add dates, withdrawal dates for courses University holidays can also be located through a link on the main page	
Webadvisor and Ranger Portal	webadvisor.regis.edu/ rangerportal.regis.edu/	Course schedules Program evaluation Registration Forms Fee Payments	

Appendix B: List of Administrative Staff & Other Resources

4941, or by email at disability@regis.edu. For more information, please visit the [SDS/UT's website at regis.edu/disability](http://regis.edu/disability).

The Learning Commons

The Learning Commons is your link to free academic support. Designed to promote student confidence, our Writing Center, Tutoring, and Academic Success Workshops help with writing and studying in a range of subjects, in person and online, in one-on-one and group sessions. Smarthinking is an online tutoring service which offers both asynchronous and live tutoring and writing assistance. Regis University provides 10 hours of FREE tutoring or writing assistance per year for all students through Smarthinking. The tutoring year is January 1 – December 31.

To access Learning Commons Resources

<https://www.regis.edu/Academics/Learning-Commons.aspx>

Student Leadership and Interest Groups

Marriage and Family Therapy Student Representatives-

The Department of Couple and Family Therapy has a team of student representatives. They can answer questions and are a great resource throughout your program. You can email the current student representatives at mftstudentrep@regis.edu

If you are interested in becoming a student representative, you can reach out to the current student representatives with questions or contact the Department Chair, Dr. Jennifer Cates, jcates001@regis.edu for more information.

Student Special Interest Groups

Narrative Therapy and Post-Modern Psychology Student Group: This group draws together those with an interest in Narrative Therapy and Post-Modern theories and approaches. The group seeks to invoke the power of story through both personal and cultural narratives, reaching out into the world to address such concerns as power, identity, construction of reality, fragmentation, isolation, and community. Contact faculty advisor: Steven Bennett, Ph.D., sbennett@regis.edu

RU Mindful: Regis University Mindfulness Group is a student-centered group that focuses on the interest of mindfulness, integration of mindfulness into one's personal life and community, integration of mindfulness into the practice of counseling and family therapy, meditation practices, mindfulness in life, wellness, activities, speakers and fellowship. Events are held each semester including field trips, hikes, yoga, speakers, as well as regularly scheduled meditation prior to class. Contact faculty advisor: Tom Lonneman-Doroff, Ph.D., tlohnema@regis.edu

Students of Color Network (SOCN): Focuses on the interests of students of color in the professional, personal, and educational context. Provides an environment of support, spending time in community, and conversation. Includes opportunities to address microaggressions, equality, marginalization, and social justice, personal and professionally. Contact faculty advisor: Marty Munoz, Ph.D. mmunoz@regis.edu

Regis Association for Emerging Therapies

Appendix B: List of Administrative Staff & Other Resources

RAET is a student interest group that explores current clinical research on the development of new therapeutic modalities. Our community offers opportunities for students to learn about recent developments in the field, make connections with working professionals, and build relationships with peers interested in research regarding emerging treatment methods. Contact faculty advisor: Marty Munoz, Ph.D. mmunoz@regis.edu

Start your own Student Interest Group:

Within the Division of Counseling and Family Therapy students may form Student Interest Groups by following the University's guidelines and filling out the Student Organization Form found at the below link. All student groups require a faculty sponsor. <https://www.regis.edu/life-at-regis/student-activities/clubs-and-organizations/index>

Appendix C: MAMFT PROFESSIONAL AFFILIATION

AAMFT Code Of Ethics

http://www.aamft.org/imis15/content/legal_ethics/code_of_ethics.aspx

Students enrolled in the MAMFT Program are required to uphold all ethical and legal guidelines of the profession as outlined in the American Association for Marriage and Family Therapy (AAMFT) Code of Ethics & Standards of Practice and the Colorado Mental Health Statute and the Colorado Board of Licensed Marriage and Family Therapist Examiner Rules. These laws and rules can be obtained by contacting the board at the following address:

State Board of Licensed Marriage & Family Therapist Examiners
1560 Broadway, Suite 1350
Denver, CO 80202
303-894-7766

AAMFT Membership

To facilitate the identification and participation of students with their future marriage and family therapist role, it is highly recommended that students in the Program join their professional association. The American Association for Marriage and Family Therapists (AAMFT) provides a wide variety of resources to professional counselors such as educational programs and workshops. Students may obtain an AAMFT brochure in the MAMFT office, Thornton Campus, Regis University or request information directly from AAMFT by calling (703)-838-9808 or by contacting their website at www.aamft.org. Once students become members of AAMFT, they are automatically members of the Colorado Association for Marriage and Family Therapy (CAMFT), which is the state division of the AAMFT. We encourage our MFT students to participate in CAMFT events, which include trainings and annual meetings.

Regis University's MFT Program is accredited by AAMFT's **Commission on Accreditation for Marriage and Family Therapy Education** (COAMFTE). COAMFTE is a specialized accrediting body that accredits master's degree, doctoral degree, and post-graduate degree clinical training programs in marriage and family therapy throughout the United States and Canada. Since 1978, the COAMFTE has been recognized by the United States Department of Education (USDE) as the national accrediting body for the field of marriage and family therapy. In addition, the Council for Higher Education Accreditation or (CHEA) officially recognizes the COAMFTE. CHEA is a non-governmental organization that works to foster and facilitate the role of accrediting bodies in promoting and insuring the quality and diversity of American post-secondary education. The USDE and CHEA regularly review the policies and practices of the COAMFTE for continued recognition.

The Standards for COAMFTE accreditation can be found at:

Commission on Accreditation of Marriage and Family Therapy Education
American Association for Marriage and Family Therapy
112 South Alfred Street, Alexandria, VA 22314
Phone: (703) 838-9808 - Fax: (703) 838-9805
E-mail: coamfte@aamft.org

Honor Societies

Visit our website at RegisHonorSocieties.org

Delta Kappa - Kappa Chapter

Mission: Delta Kappa, as the International Marriage and Family Therapy Honor Society, serves to further and complement the work being done by the American Association of Marriage and Family Therapy (AAMFT), the American Family Therapy Association (AFTA), and the International Family Therapy Association (IFTA). Delta Kappa has three primary aims. The first aim is to train emerging leaders in the field of marriage and family therapy to assume the mantle of leadership in the profession. The second aim is to provide a structure for developing scholarly forums that present cutting edge research and theory on marriage and family therapy to practitioners on an ongoing basis at the local, state, regional, national, and international level. The third aim is to recognize and promote the achievements of marriage and family therapy clinicians and scholars.

Membership

Delta Kappa members must meet the following requirements:

- Be students in an accredited marriage and family therapy program
- Earned at least 12 credit hours
- Have an average grade point average of 3.75 or higher

How to Join

Please visit our website at: www.deltakappamft.org

Contact Dr. Joanna Stratton at jstratto@regis.edu

Benefits of Membership

Professionalism: To develop your professional identity as a marriage and family therapist. Do not wait to involve yourself in your profession. People in the field recognize your membership as a mark of excellence that identifies you as exceptional.

Enrich your education: Honor society membership can provide more insight into disciplines than can be gained through classroom experience alone. Honor society membership helps keep members current in their fields through publications and by means of local, state, regional, national and international meetings. Although this service may begin in graduate school it may continue beyond through our alumni program. This includes but is not limited to networking events, workshops, and advocacy events.

Recognition: Recognition for the pursuit of personal excellence is a fundamental purpose of the Honor Societies. It is through the efforts of the individual members that the collective influence of the Society is realized. As a consequence, the Society seeks to identify and encourage all those who have made a commitment to excel in all that they do.

In the Division of Counseling and Family Therapy, members of Delta Kappa leadership work closely with members of Chi Sigma Iota (the honor society for the counseling profession) in providing on going opportunities for training, community building, and advocacy.

Licensed Marriage and Family Therapist Application

The Colorado State Board of Licensed Marriage and Family Therapist Examiners requires the Licensed Marriage and Family Therapy examination. Details about the Marriage and Family Therapist examination and application can be found on the DORA website. Examination deadline dates can be found on the website of the Association of Marital and Family Therapy Regulatory Boards (AMFTRB) at www.amftrb.org/examdate.cfm. Regis University does not administer the exam and does not award the Marriage and Family Therapist License. Students are encouraged to contact the State Licensing Board early in the program to acquire licensing information to assist in planning their course work and to assist in planning post-graduate experience. The information includes the Colorado Mental Health Statute, the Licensed Marriage and Family Therapist Examination Rules and Regulations and application forms. These materials are also available at the DCFT seminars scheduled each term. To acquire information, contact:

State Board of Licensed Marriage and Family Therapist Examiners
1560 Broadway, Suite 1350
Denver, CO 80202
303-894-7766

<https://dpo.colorado.gov/MarriageFamilyTherapy/Applications>

Required MAMFT Program Forms

A signed Student Informed Consent Contract, signifying agreement with all of the requirements and procedures contained in the MAMFT Program Student Handbook, is required of all students enrolled in the Regis MAMFT program. The Student Informed Consent Contract will be signed by the student during orientation and placed in the student's Tevera file.

In addition, all students in the MAMFT Program must sign the No Private Practice Agreement at orientation. This form will also be kept in the student's Tevera file.



**RUECKERT-HARTMAN COLLEGE FOR
HEALTH PROFESSIONS**

Division of Counseling & Family Therapy

STUDENT INFORMED CONSENT CONTRACT

Description of Course Expectations and Program Experiences

The course content and experiential activities in the Division of Counseling and Family Therapy (DCFT) are designed to afford students the opportunity to advance their personal, intellectual, and professional development. Throughout the program of study, you will be expected to receive and integrate feedback concerning your personal, academic, and professional strengths, limitations, and performance in a manner in accordance with the professional standards. (Refer to the Student Performance Evaluation form for specific criteria regarding these standards.) This feedback will come from faculty, supervisors, peers, and clients. You will be expected to incorporate this feedback in a mature and professional manner.

The expectations of the counseling curriculum are that you will explore and recognize the effect that your personal beliefs, values, issues, emotions, and behaviors have on your ability to function as a counseling professional. The various methods courses, practicum, and internships, will require that you develop and demonstrate your clinical skills as you work with classmates in role-play scenarios and with clients in actual therapy sessions. You will be asked to examine your behaviors, beliefs, and emotions in relation to your clinical activities and experiences consistently and systematically.

If, in the professional judgment of a faculty member, a student's behavior is deemed below minimum program standards, unethical, illegal, and/or professionally unbecoming at any time during the course of training, a student may be referred for faculty review. At that time the Program Remediation and Support Committee will be called to review the performance, record, and behavior of the student and to make recommendations to the Program Chair and Associate Dean of the DCFT.

The DCFT Formal Endorsement Policy

Program faculty endorsement is given only:

- a) On the basis of demonstrated proficiency specific to the vocation and/or credentialing for which endorsement is sought;
- b) After the candidate has completed a substantial portion of the program, necessarily including the practicum and internships during the MAC or MAMFT program at Regis University; and
- c) For the professional credentials for which the candidate has been prepared, necessarily including appropriate coursework and practicum and internship placements.



**RUECKERT-HARTMAN COLLEGE FOR
HEALTH PROFESSIONS**

Division of Counseling & Family Therapy

I have read and understand that I must uphold the (check below):

____ AAMFT Code of Ethics (Appendix D for MAMFT Students)

I have read the (check below):

____ MFT Student Manual including the Student Performance Evaluation. I am willing to adhere to the principles and requirement as described. I have also read the description of course requirements and program experiences required in the curriculum. I will be willing to participate fully in the courses and requirements of the Division of Counseling and Family Therapy. I further understand that a course grade of B- or better must be obtained to progress in and graduate from the program and successful completion of the Capstone Project.

Student Signature

Date

Print Student Name

Degree Portability Disclosure and Acknowledgement

Licensure for Marriage and Family Therapy (MFT) is regulated at a state level. A listing of state licensure requirements and resources for comparison is available at:

- <https://amftrb.org/resources/state-licensure-comparison/>,
- https://aamft.org/AAMFT/ADVANCE_the_Profession/License_Portability/Advocacy/MFT%20License%20Portability.aspx?hkey=1faeeaeab-a780-4add-ba09-9b41a144692f, and

The MFT Master's Program at The University of Akron is a [Commission On Accreditation Of Marriage And Family Therapy Education](#) accredited program (V.12). This accreditation allows graduates from MFT Master's Program at The University of Akron to be eligible for the entry level MFT license in the state of Ohio after completion of all required curriculum, including supervised clinical experiences, and successful passage of the National Licensing Examination (Marriage and Family Therapy National Examination; www.amftrb.org). For information regarding the educational, clinical, and supervisory requirements for licensure within the state of Ohio, please see <https://codes.ohio.gov/ohio-administrative-code/rule-4757-25-01>.

A degree from the MFT Master's Program at The University of Akron will facilitate licensure in other states; however, applicants must review the state requirements for licensure in a state where they are interested in becoming licensed. The Program Director may be required to complete additional paperwork on behalf of the student verifying their program attendance/graduation. For students who are interested in the portability of their degree and a comparison of degree requirements across states, please see the American Marriage and Family Therapists Regulatory Board website: <https://amftrb.org/mft-exam/request-for-score-transfer/>.

I _____ (student name) acknowledge that the MFT Master's Program provided information that licensing regulation may differ across state and provinces. I also understand that this information was provided prior to my enrollment in any courses in the Program. I further acknowledge that prior to my program enrollment, that I may ask the Program Director questions about the potential limits of portability of MFT licensing regulation across states and provinces. I recognize that it is my responsibility to ask questions that enhance my understanding of these limitation. Further, I acknowledge that it is my responsibility to arrange to meet with either the Program Director if I need additional assistance in understanding or have concerns about the portability.

Student Electronic Signature (type full name here)	Student ID	OR	Student Social Security # (type last four digits here)	Date
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Note: Please return this completed document to the Program Director, Dr. Heather Katafiasz (hkatafiasz@uakron.edu). This form must be submitted prior to the start of your first semester in the MFT Master's Program.

NO PRIVATE PRACTICE POLICY AGREEMENT AND PROCESS FOR APPLYING FOR AN EXCEPTION TO POLICY

Students shall not be permitted to operate a private practice while enrolled in the Division of Counseling and Family Therapy. During orientation, students will be required to sign a form (Appendix E) agreeing they will refrain from operating a private practice during their program of study. Students may request an exception to this policy by filling out the exception form, attaching all relevant materials, and submitting these to the chair of their respective program.

The request for an exception must include copies and/or links to all advertising materials, client disclosures, or any other materials promoting the student's practice that describes his/her credentials and the services s/he provide within his/her private practice for approval by the Division. If the exception is approved, an exception form (Appendix E) will be completed and signed by the student and program director and placed in the student's file. Students who receive exceptions are expected to submit any changes they make in advertising materials, client disclosures, or any other materials promoting their practice that describe their credentials and the services they provide for approval by the Division before making them publicly available. These materials should be submitted to the chair of their respective program.



Division of Counseling and Family Therapy
Private Practice Agreement

I _____ agree not to operate an independent private practice while

Print name

I am enrolled in the Division of Counseling and Family Therapy (MAC or MAMFT) at Regis University.

I understand that in order to be ethical practitioners, “counselors practice only within the boundaries of their competence, based on their education, training, supervised experience, state and national professional credentials, and appropriate professional experience” (ACA Code of Ethics, 2014, p. 8). In addition, “counselors claim or imply only professional qualifications actually completed and correct any known misrepresentations of their qualifications by others” (ACA Code of Ethics, 2014, p. 9). Also, “marriage and family therapists do not diagnose, treat, or advise on problems outside the recognized boundaries of their competencies” (AAMFT Code of Ethics, 2015, Principle 3.10). In addition, “marriage and family therapists accurately represent their competencies, education, training, and experience relevant to their practice of marriage and family therapy in accordance with applicable laws” (AAMFT Code of Ethics, 2015, Principle 9.1). I have read and understand this policy. I understand that violation of this policy may result in remediation or dismissal from the Division of Counseling & Family Therapy programs.

Student Signature

Date

I am currently certified and/or practicing as a _____.
(e.g., Coach, CAC-I, Pastoral Counselor, Registered Psychotherapist)

In order to continue in this independent practice, I will seek approval and complete required paperwork with the MFT or MAC program chair.



RUECKERT-HARTMAN COLLEGE FOR
HEALTH PROFESSIONS

**Division of Counseling and Family Therapy
Private Practice Exception Form**

We, the Division of Counseling and Family Therapy grant an exception to the following student to continue to operate an independent practice, limited to the services outlined below.

I, _____ (name of student), understand that I have been granted an exception to continue work within my independent practice, as outlined above, while I am enrolled in the Division of Counseling and Family Therapy (MAC or MAMFT program) at Regis University. **I understand that I am not allowed to advertise that I am enrolled in a graduate program or have received training from the Regis University Division of Counseling and Family Therapy until my degree has been conferred.**

This exception is contingent on my agreement to limit my independent practice as described below:

Limits to Practice:

In addition, I agree to submit any changes I make in advertising materials, client disclosures, or any other materials promoting my practice that describe my credentials and the services I provide within my private practice for approval by the Division before making them publicly available. I may need to provide additional documentation of my supervisor's credentials and a supervisory contract, upon request.

I understand that violation of this agreement may result in an immediate void of this exception, as well as remediation and/or dismissal from the Division of Counseling and Family Therapy programs.

(Student Signature)

(Date)

(Program Chair Signature)

(Date)

COPY: Student's File (imagenow)

Appendix E: Background Checks

In accordance with the ethical and legal demands of the fields of Counseling and Marriage and Family Therapy, students in the DCFT will be required to have a background check before enrolling in the program. DCFT students will be required to submit to a second background check prior to applying for Practicum. It also is common practice for agencies and/or field placement sites to have policies requiring drug screening and/or criminal background checks for their employees, volunteers, and for students who are assigned to the facility.

Regis University will assist students with understanding and complying with the requirements. However, the responsibility for providing such information, and the associated costs, rests with the student and not with Regis University. Failure to submit to such testing or to provide such information as required as a condition of a clinical placement or internship may result in disqualification from further study at the University. Similarly, results from drug screening tests or criminal records may result in disqualification from further study at the University.

DISQUALIFYING OFFENSES

Convictions and deferred adjudications of the following offenses will automatically disqualify an applicant from admission to the MAMFT Program at Regis University:

- Crimes against persons (homicide, assaults, kidnapping, and unlawful sexual behavior) as defined in Title 18-3-101 through 18-3-405.5 C.R.S.
- Any crime of child abuse or incest, as defined in Title 18-6-401 and 18-6-301 C.R.S.
- Any act of domestic violence, as defined in Title 18-6-800.3 C.R.S.
- Any offense involving moral turpitude (prostitution, public lewdness, indecent exposure, etc.), unlawful sexual behavior as defined by Colorado law.
- Registered sex offenders.
- Any crimes of theft, burglary or robbery except misdemeanor shoplifting.
- Felony crimes of arson, criminal mischief, fraud or forgery.
- Any offense related to the unlawful possession, use, sale, manufacture, transfer or distribution of a schedule I, II, III, IV, or V controlled substance.
- Any offense related to the unlawful possession, use, sale, manufacture, transfer, or distribution or more than one ounce of marijuana or any amount of marijuana concentrate.
- Multiple DUI offenses or Driving with Ability Impaired (DWAI) offenses (The Admissions Committee will consider DUI and DWAI offenses on a case-by-case basis for review).

Appendix E: Background Checks

The University reserves the right to deny admission, services, continued enrollment and re-enrollment to any applicants, students or other persons whose personal history, medical history, background or behavior indicates that their presence in University facilities, programs, or activities, or use of University services would endanger themselves, the health, safety, welfare, well-being or property of the University, its employees, students, guests, or others, or would interfere with the orderly performance and conduct of the University's or affiliated agencies' functions.

Appendix F Capstone Treatment Plan and Faculty Evaluation Rubric

DIVISION OF COUNSELING AND FAMILY THERAPY
 MASTER OF ARTS IN MARRIAGE AND FAMILY THERAPY

Treatment Plan

Therapist: _____ Case/Client(s): _____
 Date: _____ Therapy Model Used: _____

Primary Client Configuration:

Clients Also Seen As:

- | | |
|---|---|
| <input type="checkbox"/> Couple
<input type="checkbox"/> Conjoint
<input type="checkbox"/> Family
<input type="checkbox"/> Individual (Adult)
<input type="checkbox"/> Individual (Child)
<input type="checkbox"/> Group | <input type="checkbox"/> Couple
<input type="checkbox"/> Conjoint
<input type="checkbox"/> Family
<input type="checkbox"/> Individual (Adult)
<input type="checkbox"/> Individual (Child) |
|---|---|

Client Concern #1:				
Client goal #1		personal/relational dynamic:		to reduce (symptom):
<input type="checkbox"/> Increase <input type="checkbox"/> Decrease				
<i>Measure of Progress</i>				
Able to sustain:		for period of:		with no more than: episodes of:
	Enter #	<input type="checkbox"/> Weeks <input type="checkbox"/> Months	Enter #	
<i>Initial Phase Objectives:</i>				
a.				
Interventions:				
b.				
Interventions:				
c.				
Interventions:				

Appendix F: Capstone Treatment
Plan and Faculty Evaluation Rubric

Client Concern #2:				
Client goal #2		personal/relational dynamic:		to reduce (symptom):
<input type="checkbox"/> Increase				
<input type="checkbox"/> Decrease				
<i>Measure of Progress</i>				
Able to sustain:		for period of:		with no more than: episodes of:
		Enter #	<input type="checkbox"/> Weeks <input type="checkbox"/> Months	Enter #
<i>Initial Phase Objectives:</i>				
a.				
Interventions:				
b.				
Interventions:				
c.				
Interventions:				
Anticipated strengths:				
Anticipated obstacles:				
Client Perspective				
Has treatment plan been reviewed with client: if no, explain				
<input type="checkbox"/> Yes				
<input type="checkbox"/> No				

Appendix F: Capstone Treatment
Plan and Faculty Evaluation Rubric

Describe areas of client agreement and concern:	
Referrals to Other Resources:	

I/We have read, understand, and agree to this Treatment Plan:

Client Signature(s): _____ Date:

Date:

Date:

Date:

Minor child signature(s):

Date:

Date:

Date:

Master of Arts in Marriage and Family Therapy Capstone Project

Student Name: _____ Date: _____ Faculty _____ Evaluator: _____

Faculty Supervisor: _____ Site: _____

0=insufficient/did not address; 1=developing; 2=at level; 3=exceptional

A. Statement of Theoretical Orientation (5 minutes)				
1. Grasp of why change occurs from systemic theoretical model (i.e. Systemic understanding of the origins of and solutions to concerns)	0	1	2	3
2. Knowledge of primary interventions of systemic theoretical model	0	1	2	3
3. Knowledge of primary techniques of systemic theoretical model	0	1	2	3
4. Description of the client(s)' role and the therapists' role from systemic theoretical model	0	1	2	3
5. Flexibility with regard to technique	0	1	2	3
6. Adjustments in use of theory based on context of client(s) and therapy services	0	1	2	3
7. Theoretical congruence in presentation of work	0	1	2	3
8. Integration of research (e.g. best practice, contraindications, support for social trends)	0	1	2	3
<i>Comments on Presentation:</i>	Subtotal:			
<i>Comments on Written Case Study:</i>				
B. Case Introduction (5 minutes)				
1. Description of client system and in what configuration they were seen	0	1	2	3
2. Description of client(s) presenting complaints	0	1	2	3
3. Presentation of relevant background information for case	0	1	2	3
<i>Comments on Presentation:</i>	Subtotal:			

Appendix F: Capstone Treatment Plan and Faculty Evaluation Rubric

<i>Comments on Written Case Study:</i>				
C. Assessment and Analysis of System (10 minutes)				
1. Description of systemic impressions of case and client(s) process	0	1	2	3
2. Client(s) concerns represented within systemic case conceptualization	0	1	2	3
3. Articulation of differential diagnostic impression for each client	0	1	2	3
4. Integration of diagnostic impression and systemic theoretical model	0	1	2	3
5. Description of bidirectional influence of individual diagnosis and relational dynamics	0	1	2	3
6. Client's strengths, resources, and community described	0	1	2	3
7. Explanation of cultural/contextual considerations weighed during diagnosis	0	1	2	3
<i>Comments on Presentation:</i>	Subtotal:			
<i>Comments on Written Case Study:</i>				
D. Goal Development and Treatment Plan (10 minutes)				
1. Goal(s) of client system described	0	1	2	3
2. Primary treatment goal(s) formulated in relation to systemic theoretical model	0	1	2	3
3. Primary treatment goal(s) focused primarily on process instead of content	0	1	2	3
4. Client(s) concerns addressed by primary treatment goal(s)	0	1	2	3
5. Assessment and analysis of system used to formulate primary treatment goal(s)	0	1	2	3
6. Ability to connect individual symptoms with systemic functioning	0	1	2	3
7. Completion of treatment plan	0	1	2	3

Appendix F: Capstone Treatment
Plan and Faculty Evaluation Rubric

I. Overall Quality of Oral Presentation and Written Paper				
Oral Presentation				
1. Maintained client confidentiality	0	1	2	3
2. Well-articulated; Easy to follow	0	1	2	3
3. Facility with psychological language	0	1	2	3
4. Presentation focused on therapist/therapist's work; case study used to demonstrate work	0	1	2	3
5. Adherence to time guidelines	0	1	2	3
Written Paper				
1. Completion of capstone guidelines for written case study	0	1	2	3
2. Congruence with systemic/process oriented focus throughout paper	0	1	2	3
3. Mechanics of paper (quality of writing; spelling; grammar; APA 6th formatting)	0	1	2	3
<i>Comments on Presentation:</i>	Subtotal:			
<i>Comments on Written Case Study:</i>				
J. Final Evaluation				
Total Score (Presentation/Paper)				
Recommended for Presentation:	PASS / NO PASS / REVISION			
Recommended for Paper:	PASS / NO PASS / REVISION			
Signature:				Date:

Appendix G How to De-Identify Individual Health Information

Health information must be stripped of all of the following elements that identifies the individual, his or her relatives, employers, or other household members

- Names;
- Social Security numbers;
- Telephone numbers;
- All specific geographic location information such as subdivisions smaller than a State, including street address, city, county, precinct, zip code, and their equivalent geocodes, except for the initial three digits of a zip code, if, according to the current publicly available data from the Bureau of the Census: (1) The geographic unit formed by combining all zip codes with the same three initial digits contains more than 20,000 people; and (2) The initial three digits of a zip code for all such geographic units containing 20,000 or fewer people is changed to 000;
- All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older;
- Fax numbers;
- Electronic mail addresses;
- Medical record numbers;
- Health plan beneficiary numbers;
- Account numbers;
- Certificate/license numbers;
- Vehicle identifiers and serial numbers, including license plate numbers;
- Device identifiers and serial numbers;
- Web Universal Resource Locators (URLs);
- Internet Protocol (IP) address numbers;
- Biometric identifiers, including finger and voice prints;
- Full face photographic images and any comparable images; and
- Any other unique identifying number, characteristic, or code (note this does not mean the unique code assigned by the investigator to code the research data)