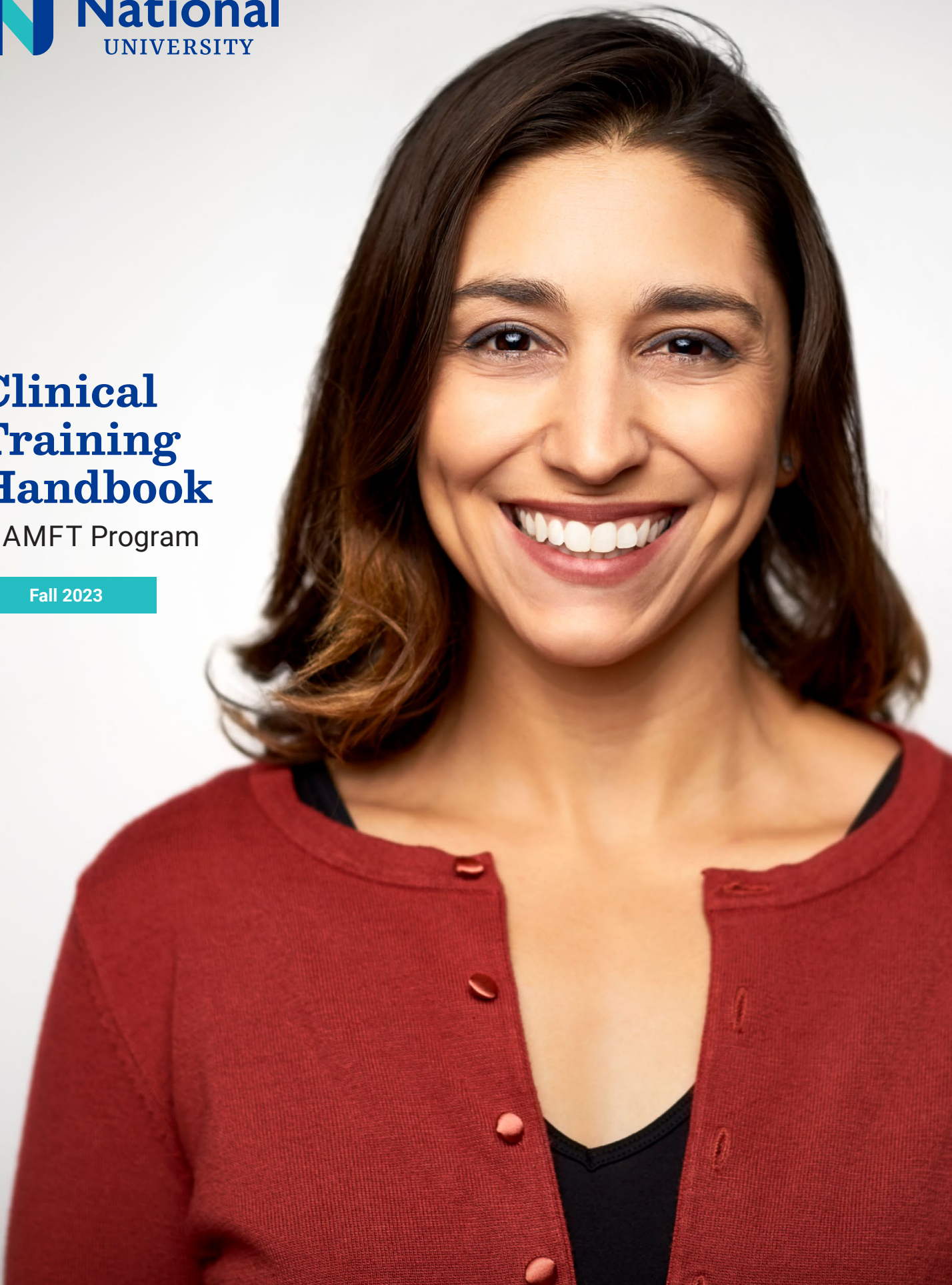




# Clinical Training Handbook

MAMFT Program

Fall 2023



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# 1 General Information





## 1 – Introduction

Welcome to MAMFT Clinical Training! The purpose of the MAMFT Clinical Training Experience is to provide structured experiences for students to practice applying systemically focused clinical theory to clinical situations and thus grow in their professional identity. Clinical training in Marriage and Family Therapy (MFT) is unique in two very significant ways. First and foremost, our training is **systemic**, that is, we focus on the person and the person's web of relationships. The other major difference is that MFT has historically been grounded in a **"health" model** – a focus on strengths and abilities that can be activated, rather than a focus on pathology. Students will be entering a unique mental health discipline with its unique skill sets and unique body of knowledge.

**Read this handbook carefully** and keep it handy for reference. Students can also provide this to their Site Representative and Local Clinical Supervisor.

Students acknowledge that they have been informed that the MAMFT Program has been designed to meet the curriculum requirements set forth by COAMFTE, which reflects the requirements in most state licensure laws.

It is ultimately the students responsibility to confirm with the university the state in which they intend to pursue licensure, as there may be different educational requirements for each state.

Students acknowledge that they have reviewed the link below for information pertaining to the state in which I intend to pursue licensure.

Further, students acknowledge that it is their responsibility to communicate with the clinical training team both the state in which they intend to be licensed and the state where they will be completing my clinical training if they are not the same.

The form below reflects the most current educational requirements and clinical requirements for all states in which NU students can complete the MAMFT program.

<https://form.jotform.com/SBSNU/state-and-spec-course-information>

Students acknowledge they have reviewed the educational requirements listed within the JotForm for the state in which students intend to pursue licensure.



## Time Frame

The Clinical Training year at NU consists of 2 practicum and 2 internship 12-week courses and then one 4- week capstone course. The typical clinical year lasts a minimum of 52 weeks/1 year

- Students should enroll in consecutive clinical courses for a minimum of 12 months.
- If a Leave of Absence is needed, students must notify the Director of Clinical Training, their current advisor, and program faculty (if applicable).
- Students who need additional time to complete required graduation hours may enroll in an additional internship course(s) prior to the final 4-week capstone course. These additional courses are referred to as extension courses.
- The minimum time for the Clinical Training year completion is 52 weeks. During this time students must be enrolled in a clinical course, actively provide direct client contact, and engage in supervision.

## NU Group Structure

There are NU group options offered Monday through Friday. Groups are generally designated as practicum or internship. Students will start in a practicum group with one Program Faculty and then will transition into an internship group with another Program Faculty. This transition is scheduled to occur when students start Internship I. Parallel practicum and internship groups are held so when students transition into the parallel group there will be no impact to the day/time they attend their current NU supervision. In some instances, a transfer to the internship group may be delayed, so the move to the internship group may not happen until Internship II, the extension courses, or the final Capstone course. Please note students are not permitted to stay in their practicum group if they are in internship courses and space is available in the parallel internship group.

Students who have a prior relationship before entering NU group supervision are **not** permitted to be in the same NU clinical group. If students with a prior relationship are completing their clinical training at the same site with the same Local Clinical Supervisor, they are expected to communicate this with the Authorized Site Representative and Local Clinical Supervisor.

## Clinical Preparation

Students must complete the MAMFT Clinical Preparation Process (CPP) to be eligible for enrollment in clinical courses and to start at their site. All tasks in the MAMFT CPP must be approved prior to enrollment in the first clinical course. For some students, finding an appropriate training site and Local Clinical Supervisor is the most difficult part of the CPP, so it is recommended that students start looking early in their program. If sites require an additional contract between them and the university [commonly referred to as a Memorandum of Understanding (MOU) or Affiliation Agreement (AA)], refer them to CAT at MFTtraining@nu.edu.

***The policy of the University related to COVID-19 or other communicable diseases is that students in clinical training must follow the policies and requirements of the local clinical placement site.***

***This policy pertains only to students actively engaged in clinical practice.*** Students are encouraged to ask questions about any policies and requirements that they will be expected to follow when they are interviewing with potential sites.





## 2 Marriage and Family Therapy Program Mission



## 2 – Marriage and Family Therapy Program Mission

The mission of NU's Marriage and Family Therapy Program is to prepare **competent, ethical, culturally sensitive** Marriage and Family Therapists. The program **emphasizes a family systems** perspective so that client processes are contextually conceptualized, whether these clients are individuals, couples, or families. Program Faculty engage students in a one-on-one process that invites students to grow both professionally and personally through the development of critical thinking skills, information literacy, **clinical skills**, an appreciation of research through the scholar-practitioner model, a **valuing of diversity**, and a lifelong **commitment to learning and service**.

### Learning Outcomes

The MFT program at NU has been built around outcomes which operationalize the program mission. Practicum and Internship courses in the MFT program at NU include assignments and evaluation measures that relate to each of the four student learning outcomes:

1. Students will employ **competence** in working with **diverse populations** in clinical settings.
2. Students/Graduates will evaluate family systems-oriented **clinical skills** across a variety of contexts.
3. Students will examine **family systems theory-oriented** models of therapy.
4. Students will formulate a decision-making process for ethical dilemmas congruent with the AAMFT Code of Ethics.
5. Students will integrate relevant **research** to inform their practice of marriage and family therapy.

Course Learning Outcomes in Masters-level MFT Practicum and Internship	
Practicum:	Internship:
1. <b>Prioritize</b> competence in the delivery of marriage and family therapy with <u>diverse</u> populations in a clinical setting.	1. <b>Justify</b> competence in the delivery of marriage and family therapy with <u>diverse</u> populations in a clinical setting.
2. <b>Apply</b> family systems-oriented clinical <u>skills</u> appropriate to a supervised clinical setting.	2. <b>Apply</b> family systems clinical <u>skills</u> appropriate to a supervised clinical setting.
3. <b>Explore</b> family systems <u>models</u> of therapy.	3. <b>Develop proficiency</b> in family systems <u>models</u> of therapy.
4. <b>Determine</b> professional and legal conduct consistent with the AAMFT <u>Code of Ethics</u> and applicable laws and regulations.	4. <b>Conduct</b> professional identity consistent with the attitudes and behaviors outlined in the AAMFT <u>Code of Ethics</u> and applicable laws and regulations.
5. <b>Prioritize</b> <u>supervision</u> processes for the development and evaluation of MFT clinical competence.	5. <b>Incorporate</b> <u>supervision</u> processes for the development and self-evaluation of MFT clinical competence.

Clinical students are expected to develop and **demonstrate competence** in applying clinical skills (such as applying the diagnostic standards as defined by the current edition of the *Diagnostic and Statistical Manual* of the American Psychiatric Association) to a variety of therapeutic situations. Clinical students are expected to explore MFT models of therapy and develop competence working with at least one model. Additionally, students are expected to explore and facilitate personal growth of the therapist as it relates to awareness of and appropriate handling of emotional reactions to clients. Furthermore, students are expected to demonstrate competence in applying the current **AAMFT Code of Ethics** to given clinical situations. Finally, students are expected to demonstrate an appreciation for human diversity and competence working with a variety of clients.

The outcomes for the Clinical Training year are defined by the American Association for Marriage and Family Therapy (AAMFT) and include the AAMFT Code of Ethics; the CAMFT Code of Ethics and the AAMFT Core Competencies. The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) defines the clinical training guidelines, which the NU program follows.





## Official Terms

<b>Authorized Site Representative (ASR)</b>	This individual is the point of contact between the site, student, and NU Training Team. The ASR needs to be legally qualified to sign documents on behalf of the site.
<b>Capstone Course</b>	The <u>course</u> is the final internship of the entire clinical experience and requires passing the draft Capstone Presentation and a minimum number of clinical hours to enroll.
<b>Capstone Presentation</b>	The <u>final case presentation</u> completed during the Capstone Course demonstrates the student's MFT clinical competency. Students must demonstrate competency of one of the models that was taught in the program or a systemic model that their local supervisor has trained them on. Students need to ask their NU faculty if they are not sure.
<b>Clinical Administrative Team (CAT)</b>	Comprised of the Director of MFT Clinical Training, Office of Professional Training and the Clinical Coordinator, (OPT) Includes all those who work to assist students in their clinical training including the Director of MFT Clinical Training, MFT Clinical Coordinator, MAMFT Program Director, clinical faculty, Senior Director of Clinical Training, and Director of Clinical Training do not count towards direct client contact or graduation hours to the Indirect Contact Hours definition. Email <a href="mailto:MFTtraining@nu.edu">MFTtraining@nu.edu</a> to connect with any of these individuals.
<b>Clinical Experience</b>	Includes the entire clinical endeavor a student participates in at NU. It encompasses the CPP, Practicum, Internship, and Capstone.
<b>Clinical Preparation Process (CPP)</b>	This includes several tasks that must be completed prior to approval to enroll in the first practicum course and engaging in direct clinical contact hours or supervision. Site and Local Clinical Supervisor approval are included in this process.
<b>Direct Clinical Contact Hours</b>	A therapeutic meeting of a therapist and client (individual, relational, or group) occurring in-person synchronously, either physically in the same location or mediated by technology. Assessments may be counted if they are in-person processes that are more than clerical in nature and focus. Intakes are only counted if the intention is that the client will continue with you as the therapist.
<b>Program Clinical Faculty</b>	NU faculty member students are assigned to for a clinical course.
<b>Graduation Requirements vs. Licensure Requirements</b>	<p><u>Graduation requirements</u> are dictated by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), an accrediting body for MFT Programs, and are consistent across states.</p> <p><u>Licensure requirements</u> are dictated by each state and vary by state. Students are responsible to know the licensing requirements for the state in which they intend to seek licensure.</p> <p><i>If there is ever a difference between the student's state licensure standards and the NU graduation standards, the higher standard will be chosen. Should a state require more than NU, students should follow the higher standard.</i></p>
<b>Indirect Contact Hours</b>	Includes activities such as telephone contact, case planning, observation of therapy, record keeping, trainings, role-playing, travel, administrative activities, consultation with community members or professionals, and/or MFT relational/systemic supervision. These activities are not considered direct client contact. These hours may be required by the site placement, but do not count towards direct clinical contact hours.
<b>Individual Supervision</b>	This includes supervision with an NU-approved local supervisor and one or two supervisees.
<b>Internship</b>	Comprised of at least three courses, these courses are the second part of the clinical experience (following the Practicum courses). Students generally switch to the parallel NU group with another clinical NU faculty member for their Internship courses, but students do NOT have to switch sites.
<b>Local Clinical Supervisor (LCS)</b>	<p>This individual has been vetted and approved by the NU CAT and meets at least the state requirements to supervise a post-graduate MFT intern/associate. Students must engage in local supervision every week they obtain direct clinical contact hours. For graduation, at least 52 individual supervision hours are required with the NU approved Local Clinical Supervisor. Only supervision with the NU-approved Local Clinical Supervisor can count towards graduation requirements.</p> <p>The Local Clinical Supervisor may be onsite or offsite.</p> <p>An <u>onsite</u> supervisor is typically employed at the site where the student is completing their clinical experience and has access to all files and client information. It is common for a site to have someone onsite who supervises interns.</p> <p>An <u>offsite</u> supervisor is independent from the site where the student is completing their clinical experience and does not have ready access to files or client information. An offsite supervisor is only required if an onsite supervisor does not meet the state requirements for who may supervise a post-graduate MFT intern/associate.</p>
<b>Observable Data Supervision</b>	Supervision that includes the approved Local Clinical Supervisor or NU clinical Faculty having direct access to the student conducting direct clinical contact. This can include live observation, video recordings, or audio recordings and does NOT include role plays in which the student is role playing as therapist. A minimum of 50 observable data supervision hours are required in university group supervision for graduation.
<b>Practicum</b>	The first clinical courses at NU that are followed by Internship courses.





<b>Relational Hours</b>	<p>A category of direct clinical contact hours in which a clinician delivers therapeutic services with two or more individuals conjointly, who share an ongoing relationship beyond that which occurs in the therapeutic experience itself. Examples include family subsystems, intimate couple subsystems, enduring friendship/community support subsystems, and residential, treatment, or situationally connected subsystems.</p> <ul style="list-style-type: none"> <li>• Relational hours also may be counted with relational subsystems that include a person whose only available means to participate in the in-person therapeutic meeting is telephonic or electronic (e.g., incarcerated, deployed, or out-of-town subsystem members.)</li> <li>• Group therapy can be counted as relational hours if those in the group therapy have a relationship outside of (above and beyond) the group itself. Conversely, group therapy sessions of otherwise non-related individuals are not considered as relational hours.</li> </ul>
<b>Site</b>	The physical location at which a student acquires direct client contact hours to meet graduation requirements. Students are permitted to have more than one site. All sites must be approved and CPP tasks must be completed prior to students acquiring any hours at the site.
<b>Vetting</b>	The process by which the CAT reviews all documents submitted in the clinical tracking system to determine that a site and supervisor are appropriate for an MFT student intern to meet graduation requirements.

## Requirements/Expectations

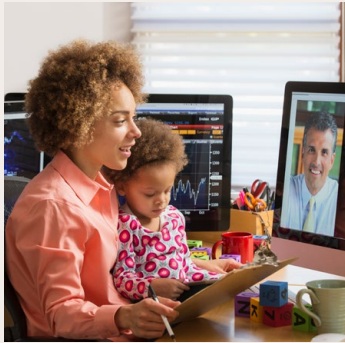
### Clinical Preparation Process (CPP)

Prior to starting the clinical experience, students must complete all CPP tasks to demonstrate they are prepared to start clinical courses. This includes vetting of a site and supervisor. When students are cleared to enroll in clinical training, they will receive a formal Clinical Eligibility Letter (CEL) jotform. The letter will notify the student about the completion of all pre-clinical training tasks, eligibility to enroll in clinical courses, and permission to begin seeing clients at their approved site. The Local Clinical Supervisor, Site Representative, Academic and Financial Advisor, and NU Faculty are copied on the communication.

All sites and supervisors must have documented NU approval. **Students may NOT provide therapy at any site that has not been fully approved by the CAT.** Because students are not fully licensed clinicians, they may only provide therapy under very specific regulations. Those regulations require prior documented approval of the Site and Local Supervisor. **Hours earned without weekly local approved supervision do not count towards meeting graduation requirements.** If a student provides therapy at a site that has not been approved, they may be acting illegally and may make themselves vulnerable to a lawsuit. Hours at a non-approved site do not count toward graduation. This policy applies to students who are starting clinical work and to students who are adding additional sites and supervisors during their clinical experience.



# 3 Telehealth



## Policy

Teletherapy is the process of delivering synchronous therapeutic services using a secure video platform according to relevant state, federal, and provincial regulatory requirements, or guidelines. Telesupervision is the process of delivering synchronous supervision services using a secure video platform.

The NU MAMFT program recognizes the growing need and use of teletherapy and telesupervision by MFTs and has integrated basic information regarding the ethics and use of teletherapy into the curriculum. We also recognize that licensure boards, legislative bodies, and the field are making efforts to determine how and when this modality can be used in a manner that protects both the client and therapist. The 2015 AAMFT Code of Ethics added language addressing the ethics and expectation of using this modality (Standard VI)\*. In addition, state regulatory boards require therapists to be licensed in both the state that the therapist resides and the state that the client resides when teletherapy crosses state lines.

NU requires all faculty, students, and local supervisors to be compliant with current state regulatory requirements and practices regarding teletherapy. *NU does not permit students to provide therapy across state lines*, and supervisors must be licensed and physically located in the states where direct clinical contact services are provided. The local clinical supervisor must be licensed and qualified to provide supervision in the state in which the therapy is being provided and received. Please note, phone sessions/meetings DO NOT count as teletherapy sessions.

Students are minimally required to obtain the following hours to graduate from NU's MAMFT program.

**NU will always defer to students' state standards if they exceed program standards.**

300 total therapy hours

- At least 150 of these consist of relational therapy hours
- At least 50 of these consist of in-person therapy hours
- At least 50 of these consist of specialization therapy hours (as applicable)

At least of 100 hours of university group supervision

- At least 50 observable data university group supervision hours

At least 52 local individual supervision hours

- Weekly individual supervision is required
- At least 12 in-person supervision hours (once a month) are required

\*AAMFT Code of Ethics (2015), Standard VI: **Technology-Assisted Professional Services**

\*Minimum of 100 NU Supervision hours are required to meet COAMFTE requirements

*Therapy, supervision, and other professional services engaged in by marriage and family therapists take place over an increasing number of technological platforms. There are great benefits and responsibilities inherent in both the traditional therapeutic and supervision contexts, as well as in the utilization of technologically-assisted professional services. Standard VI addresses basic ethical requirements of offering therapy, supervision, and related professional services using electronic means.*

## Procedure

In compliance with the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) version 12.5 Accreditation Standards, the program permits students to engage in teletherapy to meet graduation requirements. Students must:

1. Be familiar with and comply with all state requirements regarding teletherapy;
2. Complete NU required documentation to inform the program they will be participating in teletherapy;
3. Provide therapy to clients physically in the same state they are providing therapy;
4. Be supervised by a local supervisor who is fully licensed and physically located in that state, meets the state and COAMFTE qualifications for supervision, and has been vetted and approved by the NU MFT clinical team.







For example, a student who is physically located and practices in Wyoming can only do teletherapy with clients who are in Wyoming AND the student is supervised by someone who is licensed and qualified to supervise them in Wyoming. Additionally, that person needs to have been approved and vetted by the CAT. Students may not be physically located in one state (Wyoming) and engage in therapy services with clients physically located in another state (Montana), even if they are working with a local supervisor who is licensed in that other state (Montana).

In compliance with the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) version 12.5 Accreditation Standards, the program permits students to engage in telesupervision to meet graduation requirements. Students will need to coordinate with their Local Clinical Supervisor to determine how the local supervision will be with compliant with relevant federal, state, or provincial regulatory requirements. This includes the secure HIPAA-compliant platform that will be used for telesupervision.

Students must abide by confidentiality and all other standards/policies indicated in the NU MFT Clinical Handbook. Placement sites and Local Clinical Supervisors are responsible to be aware of and comply with any state/regional and/or clinical setting limitation, laws, and regulations regarding the use of telehealth which involves NU students. Any state regulations that supersede these standards must be followed.

NU encourages students to have conversations with their Site Representative and Local Clinical Supervisor around the following questions:

- Does my state allow interns/trainees (i.e., pre-degree student therapists) to participate in teletherapy sessions?
- AAMFT Code of Ethics requires training before doing teletherapy. Does my state have minimum requirements for distance-based or technology-assisted training before providing teletherapy?
- Are there any ethical considerations to be mindful of, such as client abandonment and confidentiality, if I engage or NOT in teletherapy sessions?
- Do I have the necessary training, liability insurance, supervision support, and resources to conduct teletherapy sessions? NU does not provide the technology platform resources to see clients via teletherapy.

It is recommended that students review the report published by AAMFT entitled Best Practices in the Online Practice of Couple and Family Therapy ([https://www.aamft.org/online\\_education/online\\_therapy\\_guidelines\\_2.aspx](https://www.aamft.org/online_education/online_therapy_guidelines_2.aspx)).

Students should also review and follow the AMFTRB Guidelines for Telehealth and Telesupervision (<https://amftrb.org/wp-content/uploads/2021/09/AMFTRB-Teletherapy-Guidelines-9-21.pdf>).



## Technology Materials

By virtue of the course material, students will be talking about very sensitive material in clinical courses. Students are ethically mandated to take reasonable steps to safeguard the client's confidentiality. It is all too easy to forget while sitting at home that this is a confidential, professional conference to which others, such as family members, including children, should have no access. Additionally, attending online group while sitting in a public location (e.g., coffee shop or fast-food restaurant) would be an even more serious breach of confidentiality due to the ease with which someone could intercept an insecure transmission (e.g., if student is using a location's free Wi-Fi) and/or overhear some or all the conversation or see the student's screen. Students are ethically responsible to treat every supervision session with the same degree of professionalism that they would as if they were sitting in their Faculty Supervisor's office – or their Local Clinical Supervisor's office (or sitting in as a co-therapist).

### Requirements:

- **Broadband, high speed Internet connection** (e.g., FiOS, cable, or DSL). If students live in an area where broadband is not available, they might check the various cell phone companies (Verizon, Sprint, AT&T, T-Mobile) for their data card coverage (aka 3G or 4G coverage - it will not necessarily be the same as their voice service). Recommendation: Plug directly into the router rather than working on a wireless connection. Check to be sure that the router is an 802.11g or 802.11n or newer.
- **Noise-canceling headset.** Please note that a handheld microphone plus the computer speakers will NOT work - neither will the microphone built into the webcam (or laptop) plus your computer speakers. If you do not use a headset or earbuds, it will create an intrusive echo for everyone trying to listen, which makes understanding the student very difficult. Students also want to make sure that the audio card in their computer is full duplex. Students will be wearing the headset for the entirety of their supervision time, so it should be comfortable. Students do not need a lot of fancy features, other than noise-canceling ability.
- **Webcam.** Most laptops built in the last few years have built-in webcams, and these should work well. Be aware of surroundings. **Most webcams have a broad focus**, which means participants can typically see the student and everything behind them – typically up to 150 degrees. Students should think about what is in their background before enabling their camera. Family members should never come into the room where students are discussing clinical cases. If they do, ensure that they cannot see your screen or hear the discussion. Also, do provide sufficient light.

Students should contact the NU IT Service Desk as far in advance of their presentation as possible if any technical problems arise. With enough time, the Service Desk may walk students through resolution of most of the technical problems likely to arise.

## E-Professionalism

When students attend NU group training, they are meeting in their Program Faculty's office. The same professional expectations relate to NU group training that apply to local supervision. When meeting virtually, it can be easy to forget that students are participating in a professional meeting with people who can see and hear everything they say and do, just as if they were in the same physical space. Because our culture is still creating the rules for proper social discourse in a digital environment, these guidelines are offered to assist students in conducting themselves in a properly professional manner during digital meetings, including the practicum and internship courses at NU.



The following specific expectations relate to the student online supervision experience:

- **Behave professionally on camera.**

- Except for those times when the instructor requests that students turn off their cameras, students should plan on keeping their camera turned on during the entire class. Clinical classes are intended to be face-to-face. They are simply taking place in a digital space rather than a physical space.
- Dress professionally on camera. Shirts are required. Casual shirts are acceptable, if there is nothing obscene on the shirt. Pajamas are not appropriate.
- Sit in a chair.
- Drinking nonalcoholic beverages is usually allowed in most professional meetings. If that does not become disruptive, it is acceptable in the NU course room. Note that without prior explicit permission of the course instructor, students should not be eating during class.

- **Position the camera appropriately**

- Students should show their full face and not the side of their face or top of their head only.
- Students must consider the information they are broadcasting to their Program Faculty and cohort in the background of their camera image.

- **Be mindful of noise**

- Keep the microphone muted except when talking. Microphones pick up lots of ambient noise from physical space (e.g., computer fans, people talking in another room, televisions).
- Don't eat, floss, use the restroom, etc. with your camera or phone unmuted.

- **Demonstrate 100% commitment and presence in the course**

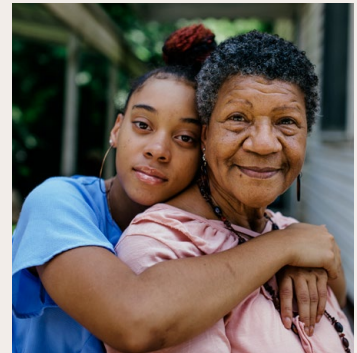
- If students would not do an activity while sitting in the conference room at their clinical training site, they should not do that activity in the digital conference room of their practicum or internship class.
  - Do not surf the internet or post to social media during class.
  - Do not drive while attending class.
  - Do not prepare meals, write emails, or engage in any hygiene-related tasks.
  - Do not actively engage in childcare during class.
- There are a number of group options available during the week so that students may choose a time that they do not have to engage in other responsibilities.
- If for some reason students need to excuse themselves briefly, it is appropriate to send a private chat message to the Program Faculty to inform them. Students should return to the meeting as expeditiously as possible and inform their instructor that they have returned, again via private chat message.
- Turn off or mute cell phone. Students would not normally take non-emergency calls during supervision at their site. The same should apply to non-emergency calls during the NU class. If students expect an emergency call, they can leave their phone on vibrate so they can discreetly check the call without disturbing others. If they are expecting an emergency call (or if they are on call for their site), students should let their Program Faculty know in advance so she/he can be prepared if the student must suddenly leave.

- **Protect Client Confidentiality**

- Guard the confidentiality of all clients whose cases are being discussed. It is not just the primary therapist who has a moral and ethical obligation to guard the confidentiality of the client. All participating in the case consultation share in that ethical responsibility. **This means that family members, coworkers, or others not directly involved in the class should not be able to see the screen or hear the audio on the case presentation.** Again, if the student would not invite this person into their clinical site's physical conference room, they should not invite them into the digital conference room, since discussion involves clients and very sensitive matters.
- Always wear earbuds or a headset.
- Attend class from a "closed" location (e.g., secure Wi-Fi, not allowing family members, friends, or strangers to overhear class conversation).
- Do NOT attend class when physically located in a public space (e.g., Starbucks, McDonalds, local library). Do NOT join class from an unsecured Wi-Fi location.



# 4 Direct Client Contact





## Graduation Requirements

National University's clinical training requirements are designed to meet COAMFTE standards for clinical training. The COAMFTE standards are intended to be rigorous enough to give MFT graduates the best chances of qualifying for licensure possible. Despite this, National University's standards are not always going to align with licensure requirements for clinical training. To graduate, students must have 300 hours of direct client contact with at least 150 relational hours approved by their Local Clinical Supervisors in the clinical tracking system for at least one full year (minimum of a full year). Students will be held to a higher standard if they are in a state that requires more than the program requires. If a student has a declared specialization for which they have taken the necessary content courses, 50 hours of the total 300 client contact hours must be with clients focused on that specialization. Finally, no more than 50 hours can be co-therapy.

- **Direct client contact** is therapy work with clients when the student is in the "driver's seat." Other clinical tasks, such as observation or shadowing, working on clinical records, staff meetings and referral consultation, do **NOT** count as direct client contact.
- A **relational therapy hour** is when the session includes two or more people that have some type of relationship (e.g. spouses, partners, parent/child, siblings) physically present and presenting for therapy based on that relationship.
- **Group therapy** with individuals counts as an individual hour; group therapy only counts toward the required "relational" hours if the group involves multiple members of the same family (couples, parents, siblings). Group therapy at a residential facility, when the focus is on interpersonal dynamics, may count as relational (pending Local Clinical Supervisor approval). One hour of group therapy counts as one hour of direct client contact, whether there are two clients or many clients in the group.

NU has an ethical, legal, and moral responsibility to verify that all students have completed the required clinical training. From the legal perspective, our diploma is verification to a licensing board that the student has met the standards contained in this document. Licensing boards and accrediting agencies can ask us how we know that students who live at some distance from campus, and who may never have come on campus, have met these standards.

## Direct Client Contact Recommendations by Course

Clinical Hour Recommendations Based on Program Requirements				
Direct Therapy Hours Expected at End of Each Course				
Course	Total Weeks	Total Therapy Hours	Total Relational Hours	Total In-Person Hours
Practicum I	Week 12	72	36	12
Practicum II	Week 24	144	72	24
Internship I	Week 36	216	108	36
Internship II	Week 48	288	144	48
- If students do not have needed hours approved or if they don't pass the Capstone draft, they will be enrolled in extension courses until that minimum is reached and/or until they are clinically cleared to do so.				
Capstone	Week 52	300	150	50



## Recording

Students are expected to record (video or audio) client sessions to review during their local supervision and to complete course assignments. Video is an excellent learning tool, as it is the only one that effectively allows students to see themselves as others see them. However, it does raise the level of ethical risk for a violation of the client's confidentiality. Students should carefully follow HIPAA and AAMFT Ethical Code Standards, the NU Ethics Protocol, and additional instructions from their site and state to guard client confidentiality. Students who are unable to record sessions at their site will need to find an additional site. Students who lose a site where they could record must find a new site. Any site must be fully approved, and all required documentation must be submitted and acknowledged before the student can enroll in additional clinical courses.

There are a few key considerations regarding the recording requirement:

1. Students must always use a written video consent document regarding recording sessions with each client for any session (in-person or teletherapy).
2. Recordings are prohibited on most personal devices, such as a cellphone or laptop. Other personal devices, such as a tablet, must be solely designated to recording for the purposes of completing the raw data requirements of the clinical experience.
3. When using video, students are encouraged to record sessions so that the camera is focused on the entire therapy room. If there are concerns raised by the clients or site, please reach out to [MFTtraining@nu.edu](mailto:MFTtraining@nu.edu) to discuss this.
4. Students should plan **to record every session** for which the client will sign the appropriate release to consent, for the simple reason that they may never know when a valuable learning experience might happen during a session.
5. Before the first use of the camera and microphone with clients, students should take a few minutes to **practice the set up**.
6. **Turn the camera on just before the client comes into the room** (this assumes the students have already secured the clients' signed release to allow the student to record). Allow the camera to record the entire session and then turn it off after the clients have left. When clients do not see the set-up and take down of the equipment, they are less likely to be "camera shy."
7. It is important to clarify for student, Site Representative, and Local Clinical Supervisor that all recordings will be kept secure, maintained in confidentiality, and always deleted after supervision.
  - Make sure that data is captured in a way that it is not uploaded to a "cloud".
  - When data is transported from one location to another, make sure it is double-locked (in a lock box, in the trunk of a car, encrypted).
  - Make sure that the computer where data will be edited is password protected.
  - After the video is shown in supervision, completely remove all data from the computer and Recycle Bin. Removal from the recording device is appropriate if the students does not think the recording will be useful for their final Capstone presentation.
8. If video recording is not an option at the site, the student should talk with their Site Representative and/or Local Clinical Supervisor about audio recording.
9. If no recording is allowed at all, the student will need to confirm that the Local Clinical Supervisor will provide direct observation of some of their clinical work either through co-therapy or observation of sessions as they occur. Students will need 50 hours of supervision that includes some form of direct observation (or review of their observable data) to complete the program requirements. Also, students would need a secondary placement where they can see a small number of clients and record some sessions for use in group supervision with their NU Faculty.



### Summary of technology needs when recording client sessions:

- Cameras
  - Camera set to record **SD video** (NOT HD – HD video, though far better resolution, requires too much bandwidth)
  - Camera set to export video file in **\*.mov, or \*.mp4** format
  - **External omni-directional microphone** connected to the video camera
  - **Tripod** or other device to hold the camera during the session
- Tablets and audio recorders are additional tools acceptable for recording sessions in lieu or in addition to a camera
- Simple **video editing software** so clips can be cut to use locally and in online supervision. Typically clips will total NO MORE than 10 minutes per supervisory session.

## Records

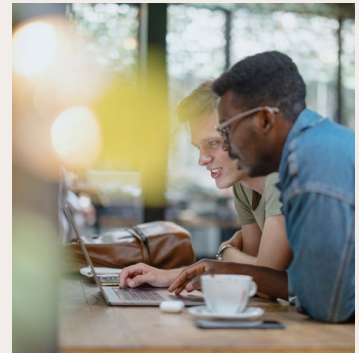
All therapists have an ethical and legal responsibility to **maintain accurate client records** and to **maintain those records in such a way as to protect the client's confidentiality**. Therapists who do not properly maintain records leave themselves open to an ethics complaint to the professional association ethics' committee or to the state licensing board, and possibly to civil court action (a malpractice suit). Please remember that, according to well-established practice in the profession, the supervisor (including the NU Faculty and the Director of Clinical Training) is bound by the same standards of confidentiality as the client's own therapist.

### Students are expected to abide by the following:

- **Track clinical hours.** The Local Clinical Supervisor will approve all direct therapy and local supervision hours.
- Ensure that all case **documentation (including billing) is completed in a timely manner** according to site expectations and requirements. Students who do not submit case documentation and billing documents on time, according to the standards of the training site will be in danger of losing their site.
- **Complete a Written Release Form** on each client that the student audio or video records. Students will file these release forms as directed by the site's record keeping policies. These release forms may be either the site's standard release or may be the NU form (the NU informed consent). They are not routinely sent to NU.
- Maintain all client contact records in accordance with the site's requirements and in a secure manner. **Students are responsible for guarding the confidentiality of information related to all clients with whom they work.** This includes handling video or audio recordings and written documents (including slide presentations). Client names are never used in any work sent to NU.
- Maintain all **clinical experience records** until the **statute of limitations** on malpractice expires in the student's state of practice, or until graduation, whichever happens last.
- To protect client confidentiality, students will **shred all material** they receive from other students regarding that student's clinical work. In the case of electronic records, "shred" includes using a secure delete, not just the regular moving to the Trash or Recycle Bin. See the computer operating system instructions for performing a secure delete.
- Students will never discuss case material either from their own work or case material reviewed with their Local Clinical Supervisor or case material reviewed during the Clinical Training Class with anyone other than their supervision group at the site, their Local Clinical Supervisor, or the Clinical Training class instructor and course colleagues. This specifically prohibits discussing case material with spouses, friends, and family members.
- Students utilizing client records (including recordings and notes/files) from a site placement where they are no longer active must have written permission from the site director. This documentation should be emailed to the assigned NU Faculty and copy [MFTtraining@nu.edu](mailto:MFTtraining@nu.edu).



# 5 Local Supervision





## Graduation Requirements

To graduate students must have a total of 100 NU supervision hours and the following local supervision hours:

- At least 52 individual supervision hours with their Local Clinical Supervisor. Individual weekly supervision should be with the student and the Local Clinical Supervisor and may include another trainee. Local group supervision counts as group (not individual) supervision (includes at least three trainees). Local supervision only counts when it occurs with the Local Clinical Supervisor. Telephone or other electronic means of supervision count toward the required hours but **at least 12 of these local supervision hours must be in-person.**
- At least 50 observable data (video or audio) university group supervision hours must be obtained to meet graduation requirements.
- Students are strongly encouraged to share their video or audio recordings during local supervision as well as feedback from local supervisors is very valuable.

*\*Per COAMFTE, ONLY observable data hours shared in university group supervision with program faculty count toward graduation requirements.*

- Students are strongly recommended to share observable data with their local supervisor weekly so the local supervisor can continue reviewing data and providing feedback in local supervision. If a student shares observable data during University group supervision, all students in that group are able to count that hour as observable data. When no data has been shared, then students submit that class time as Group Case Report. Students will need to complete a minimum of 50 observable data hours in their University group supervision approved in Tevera by their NU clinical faculty. Questions about "what counts" should be directed to the NU clinical faculty and additional resources can be found in the MFT Clinical Support Module in the learning platform.
- Role plays do NOT count toward the required observable data supervision hours.
- Students may count an hour of co-therapy with their NU approved Local Clinical Supervisor as both an hour of therapy and an hour of live supervision. However, **an additional hour of individual supervision (separate from the co-therapy) must occur during the same week.**
  - Co-therapy requires planning and debrief. If there is no pre-planning or follow-up, it isn't effective co-therapy or supervision.
- Students cannot count co-therapy as observable data supervision if they are doing co-therapy with another therapist or even with their site supervisor who is not a designated supervisor of record (Local Clinical Supervisor).

The Local Clinical Supervisor will **verify student hours by approving clinical activities in the clinical tracking system.** Additionally, the Local Clinical Supervisor submits a **formal evaluation** of the student's work at the end of each clinical course. The due dates for these assignments are specified in the course syllabus. At the end of each course, an approved hour log is generated. These two sets of documentation – the evaluation and the approved hour log – complement each other and provide NU the confidence that they can certify the student has met the standards for competence and professional identity.

## Supervision Hours by Course



Supervision Hour Recommendations Based on Program Requirements					
Supervision Hours Expected at End of Course					
Course	Total Weeks	NU Group Supervision Hours	Local Individual Supervision Hours	Total In-Person Hours	University (NU) Observable Data Hours
Practicum I	Week 12	30	12	3	10
Practicum II	Week 24	60	24	6	22
Internship I	Week 36	90	36	9	34
Internship II	Week 48	120	48	12	46
- In addition to the hours identified in the clinical hour recommendations table, students must have at least 48 local individual supervision hours, 10 in-person supervision hours, and 45 observable data hours to enter Capstone.					
Capstone	Week 52	130	52	12	50

## Guidelines

Students must abide by these guidelines pertaining to supervision:

- **Participate in individual local supervision every week** with the Local Clinical Supervisor.
- Ensure that they keep their Local Clinical Supervisor **apprised of ALL clients**.
- Ensure that they actively **protect client confidentiality** during all supervision and clinical class supervision. This means, among other things, that students have an ethical responsibility to be sure that during online clinical classes, no one other than the NU Faculty and the clinical class members can overhear any of the conversations or see the student's computer/tablet screen. This also means that students are to be sure that no personally identifiable information is transmitted during clinical class supervision; students transmit only the minimum amount of information necessary to help the Program Faculty and other students understand the case.
- Ensure that **documents** sent to the instructor and to other students never contain names (other than the student's name and the local clinical supervisor's name) or any other personally identifiable information about the client. **Protecting client confidentiality is a prime ethical responsibility** of all therapists, including student-interns.
- Record and track all supervision hours in the Clinical Tracking System.

If the Local Clinical Supervisor decides to make personal therapy a requirement for the student who is receiving supervision, the program supports the supervisor in making that recommendation. Local Clinical Supervisors do not provide therapy to students.

## State Requirements

NU approves Local Clinical Supervisors based upon State requirements for postgraduate supervision. Supervisor requirements vary from state to state. It is the student's responsibility to know whether their supervised hours will count if the student moves to a state that is different than the one in which their supervisor was approved. If their Local Clinical Supervisor is AAMFT approved, then the supervision may be easier to transfer from one state to another.

Some states, such as California, explicitly prohibit counting webcam/online based supervision toward licensure with a non-California licensed supervisor. Students in those states may count the weekly NU clinical training classes toward the NU graduation requirement but may NOT count those hours toward their state's requirements for licensure.

**It is the student's responsibility to verify whether the NU clinical classes can count as "group supervision" for state licensure or not.**

- Students are expected to meet with their Local Clinical Supervisor for at least one hour each week.
- Students are expected to attend and actively participate in the two-hour online course with their assigned NU Faculty. Students must consult with the CAT to discuss any exceptions to this weekly arrangement.
- According to COAMFTE standards, **students may not count any client contact hours during a week in which they did not meet with an AAMFT Approved Supervisor or Supervisor Candidate** (NU Faculty meet this requirement).



## Vetting a New Site and/or Local Clinical Supervisor

Students are ONLY allowed to provide therapy if they are enrolled in a Practicum or Internship course. Students may ONLY provide therapy at a site that has been fully approved by the CAT.

**If a student is dismissed from their local training site or local supervision, or if they resign, the student must:**

- Email their NU Faculty and copy the CAT at [MFTtraining@nu.edu](mailto:MFTtraining@nu.edu) **within 24 hours**.
- Make sure that they maintain **professionalism** as they leave their site and/or Local Clinical Supervisor. Students must remember that their reputation is valuable, and their local clinical community is not a good place to burn a bridge. Student will be expected to adhere to any site policies and should work closely with their sites as they end their time at the site.
  - Unless their Local Clinical Supervisor instructs them otherwise, students must make sure that all clinical documentation is complete (e.g., all case notes and client communication have been placed in client files).
  - Leave **all client data onsite**. Do not take any client data (written or recorded). That data is the property of the site.
  - **Cease contact with clients**. Any contact from a client should be provided to the Local Clinical Supervisor in a HIPAA-compliant manner.
  - It is always preferred **to connect with the site and Local Clinical Supervisor in-person** when the student decides to end the relationship.

If the student is dismissed from the site or the relationship is ended with the local supervisor, the student will be asked to meet with the Clinical Development Committee (CDC). The purpose of the meeting is to determine what support is needed for continued clinical development. Depending on the circumstances, a CDC meeting may also be required if the student resigned. Please see the Clinical Administrative Training Team Interventions for more details on this process.

**If the student needs an additional site or Local Clinical Supervisor:**

- Email [MFTtraining@nu.edu](mailto:MFTtraining@nu.edu) to gain additional access to the clinical tracking system to vet a new site or Local Clinical Supervisor
  - Complete all tasks and submit required documents for vetting a new site and/or Local Clinical Supervisor.
- Support the new Site Representative or Local Clinical Supervisor as they submit the required information and documents.
  - When the approval process is complete, the site will be entered into the clinical tracking manager.
  - Students may not see clients at the new site until they have received notification from the CAT that the site has been fully approved.





## Vacations – Student and Local Clinical Supervisor

If the student takes a 1-2-week break/vacation without seeing clients:

- Students should treat the site like a place of employment. Even if the student is not formally employed by the site, they have a professional obligation to the site and client.
- The student **should not** inform the site that they will be taking leave but should ask whether they may take leave and how appropriate arrangements can be made. Seeking permission is a demonstration of professionalism and ensures arrangements can be made for clients' continued care.

Students must ensure that they attend NU group supervision to count any direct therapy hours.

- If the Local Clinical Supervisor misses a week (for vacation/leave), while the student is seeing clients, students can make up the time with the Local Clinical Supervisor upon the supervisor's return and **MUST** attend NU group supervision that week to count any direct therapy hours obtained in that week.
  - In CA, the student must have local supervision every week that they see clients. They cannot count hours the weeks they do not engage with their NU-approved supervisor.
- If a student is planning to meet with a substitute supervisor who has not been fully approved by NU, the student must email their NU Faculty and copy the CAT. **Do not enter the local substitute supervision in the clinical tracking system.**
- If the approved Local Clinical Supervisor is unavailable for more than four consecutive weeks, that supervisor needs to provide the student with information for a colleague who can fill in for weekly consultation. **That colleague/new supervisor needs to be approved by the CAT and that approval needs to be documented as soon as possible.** Students will receive notification that the Local Clinical Supervisor has been approved and will then be entered in the clinical tracking system.





# 6 NU Clinical Courses



## Overview

The five Practicum and Internship classes are unique academic classes, but like any other academic classes, there are course requirements. The syllabus for each course lists the specific academic learning activities students will need to complete during the course and many assignments are presented during the group time. The assumption is that students are devoting most of their course time to doing therapy and participating in supervision. Students are encouraged to connect with their NU Faculty on expectations regarding assignment submissions.

## Guidelines

Students must comply with the following guidelines related to clinical experience:

- Students only have permission to **see clients when enrolled in a clinical course**. Students may not see clients unless they are enrolled in and attending their weekly NU Group Practicum or Internship course and actively receiving weekly Local Clinical Supervision. Students must email the CAT regarding approval for an alternate local supervision arrangement.
- Students must maintain **professional liability (malpractice) insurance**. If a student's insurance policy expires prior to the completion of the clinical experience, they will need to renew the policy. This requirement is waived for international students interning internationally, if not required or available within the practice location.
- Check with the Site Representative to see if the site requires a background check, a record of inoculations, or other actions. If so, the student must comply with the site's requirements before beginning clinical work.
- Ensure **every** client receives an **informed consent** document. In addition to the site's standard informed consent, the informed consent document must inform each client about the student status as a therapist trainee or student therapist (which includes participation in the Practicum/Internship class) and tell each client that the Local Clinical Supervisor supervises the student's work. Additionally, this informed consent serves as the client's release to allow video or audio recording of the sessions.
- Students must email the Director of Clinical Training regarding approval to see more than 15 clients on a regular basis (and/or to earn more than 15 clinical hours per week); this decision is made in collaboration with the Local Clinical Supervisor and CAT, as we consider supervisory oversight, developmental skills, work-life balance/self-care, academic performance, and state regulations.
- All students are encouraged to seek personal therapy. Sitting in the client's chair can help us be more sensitive to the therapy process when we are in the therapist's role.
- Students should remain actively seeing clients for the duration of clinical courses.

## Hours Tracking

Students are expected to use the University-approved system for tracking clinical hours. Please read the clinical tracking system handbook carefully.

- Students should track all direct therapy hours by creating activities that reflect time spent and submitting those activities to the Local Clinical Supervisor for approval.
  - Questions about "what counts" as a direct therapy hour should be directed to the Local Clinical Supervisor. Generally, Direct Client Contact includes a formal appointment, and in-person service **that is part of a larger treatment plan** (e.g., informed consent, intake assessment, diagnosis, intervention).
  - "Alternative" (psychoeducational and observation) hours do NOT count as direct client contact. This time is not tracked in the clinical tracking system.
- Students should track all supervision hours that reflect the time spent and submit those activities for approval to the Local or NU supervisor, as appropriate.
- Weekly student participation points are based on hours tracked for local and NU supervision. **Therapy and Supervision Hours should be submitted for approval weekly**. Students are expected to follow-up with their corresponding supervisor regarding hours that have not been approved after a week.
- Some states allow indirect hours towards licensure. NU does not track those, but students are free to keep separate records should they desire to report these hours in the future.



## Rounding Hours

Students will need to connect with their site representative and their local clinical supervisor for questions and directions on rounding hours. The site representative should be consulted on the required or advised length of therapy sessions. The local clinical supervisor should be consulted about any questions related to the reporting of therapy hours. The local clinical supervisor should follow standard practice and/or policies that are provided by any governing agencies. Generally, it is acceptable to round up to the nearest minute 5.

## Auditing

Student hours will be audited at the end of each clinical course by the faculty.

- In Internship II, the NU Faculty will review each student's total approved hours and consider the student's Capstone draft presentation. Students should regularly audit their hours in each course.
  - If a student has passed their Capstone draft presentation AND have met the minimum hour requirements to start their final clinical course, they will start the Internship and Capstone course when Internship II ends.
  - If students have met the minimum hour requirements but have not passed their Capstone draft presentation, the NU Faculty will work with the student to determine what is needed to pass the Capstone. If more time is needed than is available in Internship II, the student will be enrolled in a 4-week extension course.
- If students have not met the minimum hour requirements, regardless of the status of the Capstone draft presentation, they will take an extension course.
  - If CAT does not receive the Internship II hours summary jotform, signed by clinical faculty, to determine next clinical course, students will be automatically enrolled in a 4-week extension course.

### **4-week extension course is appropriate if ANY of the following are true:**

- there are minor adjustments to the Capstone draft needed, OR, 15-35 therapy hours still needed until therapy graduation requirements are met, OR, 4-8 individual supervision hours until therapy graduation requirements are met.

### **8-week extension course is appropriate if ANY of the following are true:**

- there are significant adjustments to the Capstone draft needed, OR, 36-70 therapy hours still needed until therapy graduation requirements are met, OR, 8-12 individual supervision hours until therapy graduation requirements are met.

### **12-week extension course is appropriate if ANY of the following are true:**

- there are significant adjustments to the Capstone draft needed, OR, 71+ therapy hours still needed until therapy graduation requirements are met, OR, 12+ individual supervision hours until therapy graduation requirements are met.

*\*Extension courses may also be appropriate if University Group Supervision hours or university observable data hours are needed to meet graduation requirements.*

*\*If students have exhausted all extension courses offered, and still need additional time to meet hours requirements, they will need to fail the extension course in order to be eligible for a retake.*

- In Capstone, the NU Faculty will review hours and the Capstone presentation.
  - If all hours required for graduation have been approved in the clinical tracking system and the student passed their Capstone Presentation, graduation will be recommended.
  - If all hours required for graduation have been approved in the clinical tracking system but the student did not pass the capstone presentation, students will fail and must re-take the course (maximum of three attempts at course).
  - If the student passes the Capstone Presentation but the hours needed for graduation are not approved in the clinical tracking system, students will fail and must re-take the course (maximum of three attempts).



## Evaluation of Clinical Training Experience

- Because the focus of the clinical year is growth in competence and professional identity, formal and informal evaluations are expected and necessary. At the end of every non-Capstone course, **the Local Clinical Supervisor will complete a formal evaluation of the student.**
- At the end of the non-Capstone courses, you will evaluate yourself and your faculty will also evaluate you. These evaluations will be seen by all clinical faculty to aid in your growth and development on several competency domains. The ability to accurately self-evaluate one's own work is a vital professional skill that students will want to cultivate during their time at NU and during their post-degree supervision toward MFT licensure.
- Another piece of the self-evaluation is the student's evaluation of their ability to use **the person of the therapist (i.e., who they are) as a tool for therapy.** A good part of the data will be how clients, supervisors, faculty, and student's fellow classmates respond to them. For example, if the student finds that they are having trouble getting long-term clients, they should discuss this with their supervisor. If their experience is not mirrored by others at that site, it may be a good time to discuss how they are coming across to their clients – how their presentation of "self" may be helpful, or not.
- The student experience is a critical part of the evaluation process, so students will complete formal evaluations, too. Students will submit a **formal evaluation of their Local Clinical Supervisor, the NU Faculty, and the Clinical Site itself.** All these formal evaluations are currently completed online within the clinical tracking system.
- Please note that NU representatives (including the CAT, NU Faculty, Academic and Financial Advisor, and others in administration) communicate on a regular basis about students. This may also include communicating with the Local Clinical Supervisor and/or Site Representative. Information shared by students, including emails, may be shared directly or indirectly for the purpose of tracking status, assessing progress, and coordinating support.

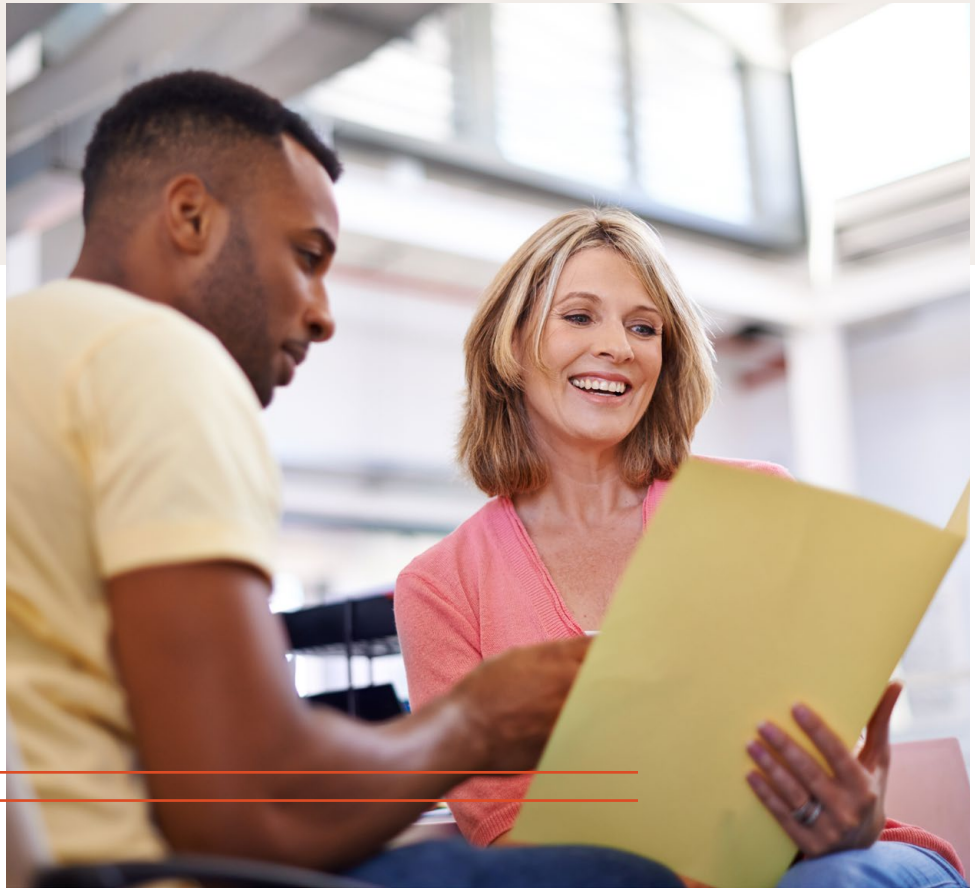
## Missing Class

Weekly participation in a practicum or internship course is a requirement of the MFT program once a student starts seeing clients.

1. If a student misses a week of NU Group Supervision, the student must:
  - Communicate with their NU Clinical Faculty within the same week of the missed group or before.
  - Let the NU Clinical Faculty know they will not be attending group.
  - Request faculty's approval to miss, and fill out a make-up group request as a NU make-up group will be needed during the same week of their missed group.
  - Obtain NU Supervision during the week that group was missed OR not count client contact hours for that week.
- For direct therapy hours/client contact hours to count, students must attend a supervision group with a NU Clinical Faculty, an AAMFT Approved supervisor, within the same week that the class is missed.
- If local clinical supervision is attended but NU group supervision is not:
  - Direct therapy hours/client contact hours do not count for that week and participation points for NU group supervision are not provided. Partial points will be earned that week due to only attending local supervision.
  - Students should complete the JotForm to request attending a NU Supervision make-up group at another time that week. This link is: <https://form.jotform.com/SBSNU/makeup-group-request>
- Attending a make-up group:
  - Students should not present assignments in a make-up group. Grading belongs to the assigned NU Clinical Faculty. The student will need to arrange a time to submit or present any assignments that were due during the class they missed.
  - The student may count the make-up group in the clinical tracking system and will send the activity to their assigned Clinical Faculty for approval.
  - Notify Clinical Faculty that they attended the group.
  - At the conclusion of the make-up group session, the student should send an email to their Clinical Faculty and copy the make-up faculty Supervisor whose group they attended indicating that they were present.
  - Students will still submit their NU group hours in the clinical tracking system to their assigned faculty to approve.







*NOTE: These instructions for missing a supervision group also apply to any holidays you may celebrate (if the University is not closed for the full week) and needs to be communicated to your NU clinical faculty so they may assist you in filling out a NU supervision make-up group request.*

1. Students can miss ONE University Supervision Group during a 12-week clinical course. This does not apply for courses that are less than 12-weeks.
2. If a student takes a break between clinical courses:
  - Students MAY NOT see clients unless they are enrolled in a NU clinical supervision course and any plans to take a break need to be communicated to your clinical faculty, and your advisor.

## **Vacations**

If class is cancelled by the Clinical Faculty, the faculty will request students attend a NU supervision make-up group during that week so that students can earn points for the class missed and count their direct therapy hours.



# 7 Ethical Behavior



## Ethical Behavior

National University's marriage and family therapy (MFT) program is committed to the highest standards of professional competence and excellence. We expect MFT faculty and students to abide by both the letter and the spirit of the 2015 AAMFT Code of Ethics (hereafter referred to as "the Code"), as well as applicable state and federal codes and statutes. This protocol is intended to provide guidance on implementing the Code. If students have any questions, they should always consult their Local Clinical Supervisor and/or their NU Faculty.

## Duty to Clients

Everything we do should be for the good of the client (Standard 1). This has direct implications for NU practicum and internship students.

- **Evidence-based practice.** Throughout the program, students have been introduced to commonly accepted theories of marriage and family therapy and articles that support certain kinds of therapy for certain kinds of presenting problems. While it is true that there is no such thing as a "one size fits all" therapy, students should select the therapy for clients that evidence suggests has the best chance of benefiting the client. Supervisors can help students choose the best "fit" until students gain the experience to make these choices alone.
- **Therapist impairment.** Section 3.3 of the Code requires that therapists seek assistance for any situation that could impair their professional judgment or ability to work for the good of the client. Going to graduate school, and especially going to graduate school while working full-time, is inherently stressful. Students need to monitor themselves and the feedback they receive from others (spouse or significant other, friends, supervisors, co-workers, etc.) for any signs that the stress may be causing a degradation of their performance, clinically or in any other area of life. Therapist self-care and well-being is imperative to the therapy process. If there is a concern about student well-being, pausing the clinical experience may be necessary for students to receive the care they need from an appropriate professional. Supervision should not be therapy (Section 4.2), but it is appropriate to engage in "self-of-the-therapist" conversations any time a student has reason to believe that they could possibly be impaired. If necessary, referrals to appropriate professional resources (a therapist or psychiatrist) may be made.
- **Informed consent.** Section 1.2 of the Code requires that therapists provide an informed consent process/form to the client. This section of the Code is firmly rooted in the ethical principle of autonomy, that is, that clients have a right to the information they need to be able to make an informed choice about what happens to them. Since this principle is also found in numerous laws, state and federal, it is highly probable that sites will have informed consent that all clients receive. Follow the Local Clinical Supervisor's directions in providing and briefing the standard informed consent to clients. In addition, provide information about student intern status including a copy of the NU Informed Consent located in MFT Clinical Support in the learning management system.

## Client Confidentiality

There are few things that will put one's future career at greater jeopardy than violating client confidentiality. In addition to the sections of Standard 2 of the Code, most states list violating client confidentiality as an unintentional tort and therefore grounds for a malpractice suit against the therapist. Below are a few considerations; this is not an exhaustive list.

- **Mandated reporting.** As indicated in Section 2.1 of the Code, every state has statutory limits to confidentiality. Among these are the mandated reporting laws. Students must be aware of these limits and brief them to clients as early in the therapy process as possible. They must discuss the state's mandated reporting requirements and processes with their Local Clinical Supervisor. This is the other side of maintaining confidentiality. Failure to report something that should have been reported could be a very serious offense on the student's part.



- **Discussing cases.** Discussing cases with a supervisor is the norm in the MFT profession, and all states require supervision of clinical work as part of their license requirements. Students should remember that discussing cases with their Local Clinical Supervisor and local supervision group members, and with their Program Faculty and classmates, is for the good of the client. However, discussing cases outside of these tightly constricted exceptions is strictly prohibited. Students should always be aware of the possibility of their conversations being intercepted or overheard. To guard client privacy and confidentiality, students should only use the minimum necessary identifying information about their client so that even if the conversation should be intercepted, electronically or any other way, or overheard, the client's confidentiality is still protected. Outside of the secure location of their Local Clinical Supervisor's physical office, students should never use the first and last name of their client.
- **Role plays.** When completing role plays for course assignments, students shall maintain the confidentiality of clients and preferably complete the assignment with a Local Clinical Supervisor. If the role play is completed with others (e.g., family or friends), students must use a fictional case.
- **Security with recordings.** There are some steps students should take to ensure proper protection and client confidentiality, especially in our digital environment (Sections 2.5, 6.3 and 6.4).
  - Download the video from the camera and keep it in a secure location. Alternatively, keep the camera under lock and key. Adequate security requires a double lock (e.g., a locked file cabinet inside a locked closet or put the video file inside a password-protected folder inside of an encrypted folder on an external hard drive – and both passwords must be unique.) If downloading to a thumb drive or some other easily transportable media, then the physical double-lock standard applies. Be sure to have a means of securing the thumb drive when transporting it so that it is not lost or stolen (e.g., a lock box within a locked trunk).
  - For group supervision, NU provides a HIPAA-compliant platform and has a business associate agreement (BAA) with the provider. Students are asked to complete assignments through synchronous streaming.
  - Never post observable data clips on public channels (e.g., YouTube) social media (e.g., Facebook), or media sharing site (e.g., Flickr, Photobucket, etc.). Do not email or upload raw data to any media sharing site or to the learning management system.
  - Client recordings (raw data) are for training purposes only and not intended to be a part of the permanent client record. Please consult with the Local Clinical Supervisor regarding applicable state laws and site policies. Maintain the video only if needed. Once the recording is no longer needed, securely delete it.
- **Security of client records.** Most states have requirements for how long client records must be maintained. Sites need to have procedures for secure, proper storage of client records. Follow the site's protocols for client records exactly. For any notes students make for their own use (e.g., for the final case presentation or getting ready for a case presentation to the practicum or internship class), follow the same security protocols as for the video files. Delete text records using the secure delete process just as required for video files.

## Summary

This protocol is not intended to be exhaustive. Follow the AAMFT Code of Ethics, plus state and federal laws. Where there appears to be a conflict, always follow the most restrictive or stringent guidelines or rules.





# 8 Frequently Asked Questions



## Frequently Asked Questions

### Q: How long will it take me to find a site and Local Clinical Supervisor?

Based on the data, the average time to secure a practicum site and supervisor was 15 weeks (4 months). Some students took longer, up to a year. Allow plenty of time to find a site and supervisor. Use the resources in MFT Clinical Support (in the course room platform). Above all, network, network, network, and start this process of looking and networking as soon as possible. Finding a site and Local Clinical Supervisor takes work and persistence on the student's part. This is the same kind of persistence and networking that students will need to build a successful practice after they are fully licensed, so this effort now can pay dividends later.

### Q: Can I be paid for clinical training?

Yes, NU allows students to be paid for clinical training. However, students should check to make sure their state has no such prohibition. It is not a good practice for students to accept payment personally. If clients pay cash or check, etc. it should be made to the site, then students can be paid by the site. Students cannot be in their own private practice as a student. Students work for the site (either as a volunteer or employee) and if paid, should be paid by the site. Clients are the clients of the site and not the student's clients directly.

### Q: Will I have to pay for clinical supervision?

Maybe. Many students can find sites that offer supervision for free. In some instances, the sites where students want to do their clinical work do not have a qualified Local Clinical Supervisor, so the student needs to find an off-site supervisor, who may charge as much as they would for an hour of therapy. Students are not required to select a placement (site) that will require them to pay for supervision. Only loan money that is part of a stipend may be used to pay for local supervision. Students are advised to connect with their Academic and Financial advisor with any questions about their loan or stipend amount.

### Q: What credentials are needed for my Local Clinical Supervisor to be approved?

Marriage and Family Therapy students are ultimately responsible for identifying appropriate sites and supervisors. Once sites and supervisors have been identified by the students, they are reviewed by the CAT. All supervisors must meet the requirements for post-degree supervision for marriage and family therapists in the student's intended state of licensure. The CAT approves sites and supervisors by reviewing the state regulations and the credentials of the proposed supervisor. The utilization of the state regulations for post-degree supervisors is an NU policy and is not required by any boards that license marriage and family therapists.

### Q: What are the differences between the onsite and offsite supervisor?

If an onsite supervisor doesn't meet the state's supervisor requirements, students will need an offsite supervisor. The onsite supervisor will sign off on all client case notes and is ultimately responsible for the care of the clients. The offsite supervisor will work with students on their overall systemic understanding and facilitate growth with MFT models, as well as case consultation. The offsite supervisor will approve hours in the clinical tracking system, which will require collaboration between both supervisors to ensure that the clinical hours are accurately documented.



**Q: Can I do my practicum/internship in a private practice setting rather than a site?**

NU does not have a policy around this, but some states may not allow a student therapist to work in private practice settings. As always, it is the student's responsibility to verify that the selected clinical site conforms to state licensing board requirements. As an example, California does not allow student therapists, accruing hours for their clinical degree, to work in a private practice setting. Before students agree to work in a private practice setting, they need to be sure that the practice has a sufficient volume of clients that they can guarantee students will be able to average 10 or more clients per week who are pro bono or self-pay, rather than billing any sort of third-party payer. Gaining sufficient client contact hours has been the biggest struggle for students working in a private practice setting.

**Q: May I have more than one clinical site at a time?**

Yes. Some students decide to have an additional site to get additional hours or to gain experience with a particular client group. **All sites must be vetted and approved by the CAT. Students may not count hours earned at an unapproved site. Students may be breaking the law in their state by working as a therapist without approval to do so as a part of their academic program.** Depending on the Local Clinical Supervisor's qualifications and preference, it may be possible to have only one Local Clinical Supervisor sign off on student's work at both sites. The Local Clinical Supervisor is legally and ethically responsible for the student's work, so only the Local Clinical Supervisor can decide whether she/he is comfortable supervising the student's work at more than one site. If the Local Clinical Supervisor is not, students will need to have more than one Local Clinical Supervisor if they are going to intern at more than one site. The new supervisor also needs to be fully approved.

**Q: Do I have to change sites during my clinical training experience?**

No. If students are struggling to get the hours needed for graduation, they can change or add an additional site. This should be discussed with your NU Faculty and the CAT.

**Q: Where is it appropriate for me to conduct therapy?**

Students should ONLY conduct therapy at a location that has been fully vetted and approved by NU. If students have multiple approved sites, students should only see clients at the site the clients are associated with (have signed the paperwork for). IF the student's site offers in-home services, students will provide therapeutic services in that specific client's home. Therapy should NEVER be conducted in-person at a student's residence or in a public place (restaurants, coffee houses, etc.) as it presents ethical challenges.

**Q: Who needs to be physically present at the site when I'm conducting therapy?**

Some states require that a licensed professional be on the premises when interns are practicing therapy. All students need to ensure they are aware of any state's requirements and are clear on the safety and emergency plans for their sites. This should be discussed with the Site Representative and Local Clinical Supervisor.

**Q: If I speak two languages, can I provide therapy in both?**

Performing therapy in a language other than a student's primary language requires additional understanding and sensitivity to possible misunderstandings related to culture, power, and humor. Students should recognize that therapy goes beyond words, and students who provide therapy in another language are expected to obtain supervision that addresses cultural sensitivities around learning/thinking in a language other than English, as well as related self-of-the-therapist factors. Any clinical course assignments with observable data in a language other than English should include written translation or a transcript in English.



**Q: Does it matter what kind of clients I have if I get the required hours?**

Yes. NU's MFT program requires 150 relational hours. If the state the student is seeking licensure in requires more, students will be required to meet those requirements. A relational therapy hour is when two or more people that have some type of relationship (e.g., husband/wife, parent/child, siblings, partners) are in the same session. MFT is the one mental health profession that is specifically trained on how to work with multiple people in the room. This is an important requirement that students should discuss with their Local Clinical Supervisor and Site Representative.

**Q: Can I count group therapy?**

Yes. Group therapy with individuals counts as an individual hour; group therapy only counts toward the required "relational" hours if the group involves multiple members of the same family (e.g., couples, parents, siblings). One hour of group therapy counts as one hour of direct client contact.

*Per COAMFTE.* Relational Hours is a category of direct clinical contact hours in which a clinician delivers therapeutic services with two or more individuals conjointly, who share an ongoing relationship beyond that which occurs in the therapeutic experience itself. Examples include family subsystems, intimate couple subsystems, enduring friendship/community support subsystems, and residential, treatment, or situationally connected subsystems.

- Relational hours also may be counted with relational subsystems that include a person whose only available means to participate in the in-person therapeutic meeting is telephonic or electronic (e.g., incarcerated, deployed or out-of-town subsystem members.)
- Group therapy can be counted as relational hours if those in the group therapy have a relationship outside of (above and beyond) the group itself. Conversely, group therapy sessions of otherwise non-related individuals are not considered as relational hours.

**Q: Can I count the "extra" hours I spend at my site?**

No. The only hours that count toward NU graduation requirement are hours that the student spends providing therapy to clients. Psychoeducation, contacting referral sources, scheduling clients, observing other therapists, staff meetings, and case documentation may be ethically and professionally necessary, but these indirect hours do not count toward the direct therapy hours required for graduation.

**Q: Can I conduct therapy through a video platform?**

Yes. Students at NU are permitted to conduct telehealth (video-based therapy using a HIPAA compliant platform) for most of their therapy hours, if the state they are in allows, but do need to engage in at least 50 in-person (same room) therapy hours. Phone sessions/meetings are NOT permitted.

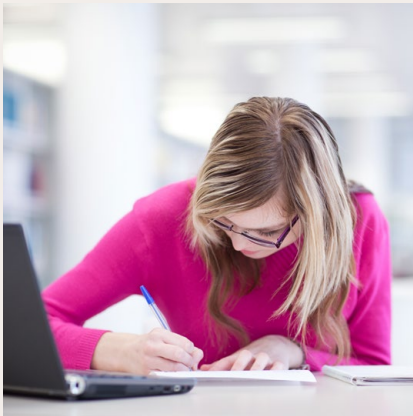
**Q: Can I finish my clinical experience in less than one year?**

No. Students must have a full calendar year of clinical experience.





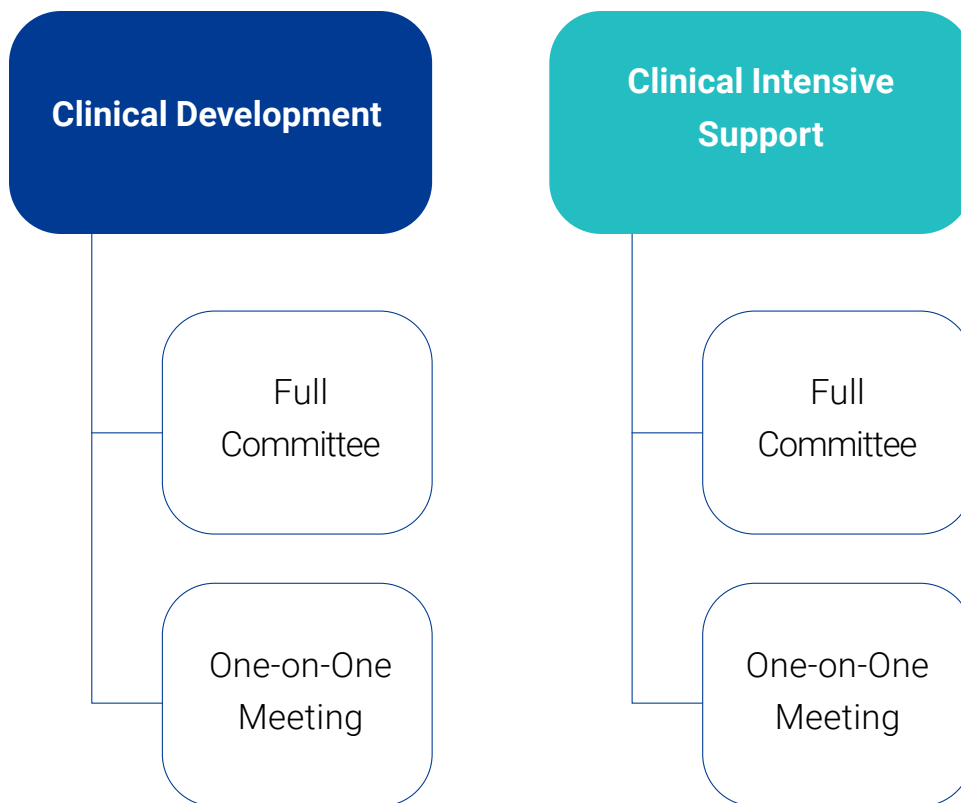
# 9 Additional Policies & Processes



## Clinical Administrative Training Team Interventions

There are several instances in which it will be necessary for a student to engage with the CAT while they are enrolled in a clinical course. There are two distinct types of interventions, Clinical Development and Clinical Intensive Support, with two tiers, One-on-One or Full Committee. The type and level of contact required will depend on the specific situation the student is experiencing.

There is a similar referral process for both processes in that any NU Faculty, Local Clinical Supervisor, or Site Representative with concerns about a clinical student may refer them to the CAT. It is expected that prior to a referral from the Program Faculty, the Program Faculty has discussed the concerns with the student. Once a referral is made, the CAT discusses which intervention and tier is most appropriate. One member of the CAT will email the student to set up a synchronous meeting. Documentation of the meeting and any action items will be provided based on the type of intervention completed. The image below shows the different interventions and tiers.



### Clinical Development Committee (CDC):

The CDC supports the professional development of MFT students in the practicum preparation process and subsequent clinical courses. The Full Clinical Development Committee is chaired by the Director of MFT Clinical Training and comprised of the MAMFT Program Director and the NU Clinical Faculty, who is also invited to attend. The one-on-one CDC-lite meetings will take place with the Director of MFT Clinical Training. The nature of the concern and recommendations from the NU Faculty may be considered when determining the appropriate intervention tier.



Students may be referred to the CDC for several reasons, such as but not limited to:

- Reports of professionalism concerns from site or local supervisor
- Missing more than two NU group supervisions within a course
- Prior concerns from didactic course faculty on clinically relevant areas (interpersonal interactions, assignment timeliness, etc.)
- Termination from site\*
- Concerning evaluations\*\*

The CDC has the authority to develop clinical action plans for students that target identified growth areas. The plans will include action items that students are required to complete before they can be registered for their next clinical course. If referred to the CDC during the final clinical course, students must complete the required action items prior to meeting clinical program graduation requirements. Full Committee CDC meetings will be formally documented in the student's file. Appeals of CDC plans should be made to the Program Director.

\* Three Strikes Policy: After a student has been referred to the CDC three times, the student will meet with the CDC. However, the student will not be provided with a third action plan. Instead, the follow-up letter will be a recommendation to the Program Director that the student does not continue with clinical training. The student will be required to meet with the Program Director to discuss academic options.

\*\* Insufficient Competence: Insufficient Competence is indicated when a Local Clinical Supervisor or NU Faculty evaluates a student as below a developmentally appropriate standard for the student's training level by either: 1) marking 50% or more of the evaluation items as "not observed" or 2) providing a written comment about the student's lack of progress and/or lack of responsiveness to supervision.

### **Clinical Support Committee (CSC):**

The CSC supports those who are experiencing personal struggles that may impact their professional and/or academic development during the practicum preparation process and subsequent clinical courses. The Full CSC is chaired by the Director of MFT Clinical Training and comprised of the MAMFT Program Director and the NU Clinical Faculty, who is also invited to attend. The one-on-one CSC-lite meetings will take place with the Director of MFT Clinical Training. Additional support, such as Clinical Faculty, the Local Clinical Supervisor and/or Authorized Site Representative may also be asked to attend. The nature of the concern and recommendations from the NU Faculty will be considered when determining the appropriate intervention tier.

Students may be referred to the CSC for several reasons, such as:

- Sudden health concern
- Significant change in one's life (end of relationship, loss of loved one, etc.)
- Displaying symptoms of burnout or compassion fatigue
- Struggle with work/life balance

At the conclusion of the meeting, the CSC will identify via email any follow up items that must be completed and/or recommendations for next steps.



## Specialized Training

The MAMFT Program at NU is designed to prepare students to think and interact systemically with a broad range of individual and relational clients. The program curriculum is designed to prepare students to take the national licensing exam, which requires broad knowledge of MFT schools of therapy.

- Students who attempt the following types of therapeutic intervention need to ensure that they receive supervision and/or additional training specific to these specializations: EMDR, Hypnosis, Addiction, many types of assessments\*.
- It is beyond the scope of competence for an MFT student to perform EMDR, energy psychology, tapping, somatic experiencing\*.

\*Please note that these lists are intended to be exemplary, not exhaustive. Students need to practice within their area of competency. In other words, **if the student did not study the topic within the NU MFT program, they need to demonstrate that they are receiving additional supervision/training before attempting to intervene with that population or approach.**

## Consider the AAMFT Code of Ethics (2015):

**3.6 Development of New Skills.** While developing new skills in specialty areas, marriage and family therapists take steps to ensure the competence of their work and to protect clients from possible harm. Marriage and family therapists practice in specialty areas new to them only after appropriate education, training, and/or supervised experience.

**3.10 Scope of Competence.** Marriage and family therapists do not diagnose, treat, or advise on problems outside the recognized boundaries of their competencies.

**3.1 Maintenance of Competency.** Marriage and family therapists pursue knowledge of new developments and maintain their competence in marriage and family therapy through education, training, and/or supervised experience.

**3.2 Knowledge of Regulatory Standards.** Marriage and family therapists pursue appropriate consultation and training to ensure adequate knowledge of and adherence to applicable laws, ethics, and professional standards.

**9.1 Accurate Professional Representation.** 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 law.

**9.7 Specialization.** Marriage and family therapists represent themselves as providing specialized services only after taking reasonable steps to ensure the competence of their work and to protect clients, supervisees, and others from harm.

Students who choose to receive training from certificate programs (e.g., EFT, Imago, Gottman, Play Therapy) must use care in how they refer to their level of competency before they have completed all steps for certification (e.g., students may not refer to themselves as an EFT, Gottman, or Play Therapist). While in the NU MFT program, students should represent themselves clearly as “a student in training.”

Once again, students should keep this handbook handy for their reference. It may be necessary to review multiple times during the clinical courses, in order to ensure compliance and successful completion of their clinical training. If students and/or their Local Clinical Supervisor have questions about the policies, they should be sent to [MFTtraining@nu.edu](mailto:MFTtraining@nu.edu).

*We look forward to supporting students during their clinical training!*



