

**College of Health Professions
School of Counseling**



**Marriage and Family
Counseling/Therapy Program
Master's Internship Handbook**

School of Counseling
College of Health Professions
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GUIDELINES FOR INTERNSHIP in Marriage and Family Counseling/Therapy (MFC/T)

INTRODUCTION

The supervision of MFC/Ts in training is a valued and essential part of the MFC/T master's program, which is housed in the School of Counseling. Therefore, this MFC/T Site Supervisor Internship Handbook is provided to each site supervisor for use as a guide to explain the internship process and requirements, supervision requirements, and to provide forms required of supervisors or MFC/T master's students during the MFC/T's master's student internship experience.

The internship experience is the last phase of training for becoming a marriage and family counselor/therapist (MFC/T). This experience is intended to be an intensive on-the-job experience conducted in a setting as close as possible to the one in which the MFC/T master's student will seek employment. The nature of this experience should be as similar to a regular MFC/T position as possible, but with much more supervision than is usual, more specifically with an employed marriage and family counselor/therapist.

Internship occurs at the end of the sequence of core and elective (optional) courses that comprise the curriculum of the master's degree programs in Marriage and Family Counseling/Therapy. As the culminating experience of this program, the internship is designed to provide an opportunity for the MFC/T master's student to synthesize and apply theory, practice, and research, in an actual mental health care setting. While at their internship site, the site supervisor serves as an important role model and mentor, guiding the intern's clinical training.

The School of Counseling, MFC/T master's program acknowledges that the participation in the MFT/C internship experience requires a commitment of time and effort. It is highly recommended that MFC/T master's students do not work full-time during their internship, as MFC/T master's students will commit 20-25 hours (including 12-15 client contact hours) per week at their internship site. The Marriage and Family Counseling/Therapy (MFC/T) Master's Program Coordinator/Director and MFC/T Master's Clinical Coordinator/Director are available to offer consultation and support. During the internship, we welcome feedback and will be happy to discuss any questions, concerns, or ideas that you wish to share.

CRITERIA FOR ADMISSION TO INTERNSHIP

Eligibility for admission to the Master's MFC/T Internship in Counseling (5600:685) includes successful completion of all core-MFC/T and clinical course work (Pre-Practicum and Practicum), as well as the approval of the MFC/T Master's Program Clinical Coordinator/Director.

A. INTERNSHIP PLACEMENT

The internship placement is based upon several conditions.

- First, the internship experience should be one that offers a variety of opportunities for the MFC/T master's student, not limited to direct hours.
- Second, the internship site should be able to provide enough client contact hours for the intern to complete the experience in a timely manner (two-three semesters).

- Third, the clinical experiences offered by the site should be congruent with the MFC/T master's student skill level as well as the MFC/T Master's Program requirements.

To graduate, MFC/T master's students are required to complete a minimum of 500 direct hours with couples, families, individuals, and groups. All therapy must be done from a relationship perspective, and half (250) of the direct hours must be with couples and families. Practicum hours and Team hours are counted towards completion of these direct hours, but will not be representative of the ethnic, lifestyle, and demographic diversity of the community. The internship placement is also based upon the availability of appropriate site supervision:

- Supervision is unique for the MFC/T intern because of the Program's dual accreditation by COAMFTE and CACREP. MFC/T master's students therefore must have a supervisor that has a degree in MFT, is licensed as an IMFT or IMFT-S, or holds the AAMFT Approved Supervisor status, or is able to meet the MFC/T Program's Supervisor Equivalency status (please see attachments). Concurrently the MFC/T master's student must be supervised by an LPCC or LPCC-S.
- The MFC/T master's program does grant supervisor equivalency for those PCC supervisors who are not AAMFT Approved Supervisors if they meet the appropriate program requirements. Please review the Program Equivalency Form for these requirements.

B. INTERNSHIP PLACEMENT PROCESS

This is an MFC/T master's student-driven process. Each MFC/T master's student should work with the MFC/T master's Program Clinical Coordinator/Director and identify 1-2 internship sites that can provide adequate clinical hours and appropriate supervision. The MFC/T master's student should then contact the site(s) and schedule an interview appointment for the possibility of selection as an intern. MFC/T master's students should become familiar with this Handbook before the interview so that they might answer any questions the site might have about requirements. Each MFC/T master's student should also provide their vita and a cover letter/letter of interest at the site interview. If the site accepts the MFC/T master's student for placement, the MFC/T Master's Program Clinical Coordinator/ Director must receive a letter of acceptance (on agency letterhead) from the internship site.

IMPORTANT: This letter must be received before registration for internship is approved. A sample letter is enclosed in Appendix A, and can be sent via email. In addition, each supervisor who wants to qualify for MFT Program Equivalency must submit a Supervisory Equivalency Form with resume. This form and other required documentation will be reviewed by the program and approved before placing any MFC/T master's student at a site. This process is completed to insure appropriate supervisor knowledge, experience, and training in MFT for MFC/T master's student interns placed at internship sites. MFC/T master's student interns must be covered by professional liability insurance while participating in the internship. Once a site has verified acceptance, and the MFC/T master's student knows who their PCC-S supervisor will be, they should immediately register for Marriage and Family Therapy Training (MFTT) and Counselor Trainee (CT) status with the

Ohio Counselor, Social Worker, and Marriage & Family Therapist Board. Information is on their website at cswmft.ohio.gov

C. HOME-BASED INTERNSHIP CRITERIA

MFC/T master's student intern should be placed at the internship site for therapy experiences with individuals, couples and families. This initial placement is a way to assess the student's readiness to work more and more independently. In the situation of home-based therapy, the MFC/T intern first shadows, then engages in co-therapy and over time, solo home-based therapy. It is important that these internship sites assure, before having an MFC/T master's student Intern function solo as home-based therapist, that the site supervisor has evaluated the MFC/T master's student' competency level and skill development as adequate for participation in a home-based therapy experience.

IMPORTANT: Site supervisors, or other appropriately licensed site employees, must be the lead therapist on the first several assigned home-based cases. When a new case is assigned, the supervisor must go to the family's home with the trainee on the first time.

Interns should have immediate access to their supervisors when at a family's home. When a supervisor or other appropriately licensed person is not in attendance with the intern, the agency must make provisions for the intern to carry a cell phone to home-based appointments.

Safety Issues: Interns should not be assigned cases in which family/domestic violence is a current problem. If any family member has an active substance abuse problem, it is recommended that the family member be receiving additional services to deal with substance abuse issues in conjunction with home-based treatment.

Students might also seek out other internship assignments such as for profit or non-profit mental health centers, hospitals and other mental health and health care centers.

IMPORTANT: Private Practice placements are not allowed to serve as an MFC/T master's internship site. Out of state placements are also not allowed.

INTERNSHIP CLINICAL INSTRUCTION

The School of Counseling's Marriage and Family Counseling/Therapy Master's Program is accredited by COAMFTE and CACREP. Therefore, the programs must meet specific accreditation requirements, state licensure standards and School of Counseling program standards.

A. Clinical Requirements

- A minimum of 500 hours (including Practicum and Team hours) of direct service with clients appropriate to the program of study. Team hours cannot count towards the minimum of 250 relational hours.
- Direct client contact hours per week should not exceed 12 direct client contact hours during the 1st semester of internship. If the MFC/T master's internship student would like to increase his/her hours in the 2nd semester of internship, s/he does so by petitioning

the MFC/T faculty in writing and providing a rationale for the increase in direct client contact hours each week. It is the MFC/T master's program core faculty that determine if an MFC/T master's student's petition to increase his/her direct client contact hours should be granted in the 2nd semester of internship.

IMPORTANT: MFC/T master's students in Internship that are going beyond the maximum direct client contact hours may not count these additional hours.

- CPST/Case Management hours do not count as Direct Client Contact.
- Co-therapy is considered as 50% (or larger) of responsibility for all aspects of the therapy case. Co-therapy should only be engaged in during the internship when necessary, and must be discussed with the supervisor prior to starting. If the University supervisor does not deem the co-therapy case as valid, the hours will not count toward graduation. It is recommended that you get co-therapy cases cleared with the University Supervisor prior to starting.
- One hour of supervision for every five hours of direct client contact. A minimum of 50 hours of individual supervision for MFC/T master's students is required. The remaining 50 hours of required supervision may be either individual or group supervision. MFC/T master's students are required to meet with their University Supervisor an average of 1½ hour per week for group supervision.
- Time spent in the therapy room during live supervision counts as both clients contact and supervision time; e.g., 1 hour of therapy plus 15 minutes pre- and 15 minutes' post-session counts as 1 hour of client contact time plus 1.5 hours of individual supervision.
- The opportunity for the MFC/T master's student to become familiar with a variety of professional activities in addition to direct service (e.g., record keeping, supervision, information and referral, in service, and staff meetings).
- MFC/T master's student are required to bring audio and/or videotapes of their MFC/T work with clients for use in group supervision.
IMPORTANT: audio and/or videotapes are used for supervision purposes only and not released to clients or third parties. They will be stored at the agency and erased after supervision, to maintain client confidentiality.
- The opportunity for the MFC/T master's student to gain supervised experience in the use of a variety of professional resources such as assessment instruments, technologies, print and non-print media, professional literature, and research.
- A formal clinical evaluation of the MFC/T master's student's performance at the end of each semester is provided by the site supervisor.

B. Additional Program Clinical Requirements

Program requirements for intern MFC/T master's students in the Marriage and Family Counseling Programs include the appropriate use of the current edition of the Diagnostic and Statistical Manual for Mental Disorders and an understanding of the International Classification of Diseases. The internship experience must include a focus on systemic/relational perspective, as set forth by COAMFTE, as well as conducting mental status examinations, and on the development and recognition of a framework for identifying symptomology, etiology, and psychodynamics of mental and emotional disorders. (OCSWMFT Board 4757-13-01) (CACREP Standard III.H).

GRADING

The internship passes or fail grade will be assigned by the university faculty internship supervisor with consultation or recommendations from the site supervisor taken into consideration. The grade will be based upon the site supervisor clinical evaluations at the end of each semester, the university supervisor evaluations, and completion of all internship course requirements.

IMPORTANT: Although the MFC/T Internship site supervisor will review and rate the MFC/T master's student's performance at the internship, it is the university internship supervisor who assigns the internship grade.

INTERNSHIP RESPONSIBILITIES

A. Responsibilities of the Cooperating Agency/Site Supervisor:

- Interview potential interns. If a site agrees to a placement, notify the MFC/T Master's Program Clinical Coordinator/Director to this effect in writing.
- Designate an on-site counseling supervisor for the MFC/T master's student intern. On-site supervisor will complete the Supervisory Designation form and return to Internship Coordinator. After review and approval of the supervisor, all contact regarding the MFC/T master's student will be directed to the on-site supervisor.
- Provide an opportunity for the MFC/T master's student to participate in the routine professional activities appropriate for her/his skill level. These may include: individual and group counseling/therapy; couples and family counseling/therapy; career counseling/therapy; administration, scoring and interpretation of tests for clients being served by the MFC/T Master's student; use of educational, occupational, and personal-social information; consultation with staff and other agencies, referral of clients; and staff meetings.
- Provide MFC/T master's student intern with the rules and guidelines for their professional conduct at the agency/school/university.

B. Responsibilities of the On-Site Supervisor

- To be well grounded in the theory of marriage and family therapy, to use a systemic/relational perspective when providing individual couple family and group counseling/therapy.
- Register with the Board as the supervisor on record for the intern's MFTT and CT status.
- Participate in the development of and approval of the internship plan and supervision plan, which must also be approved by the university supervisor.
- Sign and date the Memorandum of Agreement, Internship Plan, and Supervision Plan.
- Supervise each MFC/T master's student for at least one hour per week. A maximum of two MFC/T master's students can be supervised at any one time to meet this requirement. Individual supervision is that which occurs in groups of two or fewer MFC/T master's students. This may include live supervision by the supervisor while the intern is counseling the client. Live supervision includes both the preplanning and post feedback time.

- Encourage the MFC/T master's student to attend professional meetings, training sessions, and workshops.
- Complete site supervisor evaluation of the intern at the end of each semester.
- Address issues such as diagnosis, treatment planning, goals and help the MFC/T master's student identify his/her systems theory that they operate from (by the end of the 1st semester of internship), in addition to monitoring session-to-session progress and following ethical codes and state statutes.
- Adhere to supervision being a process/parallel process to counseling/therapy, which is clearly distinguished from personal psychotherapy or didactic instruction.
- Focus on the raw data from the MFC/T master's student's current clinical work, which is made directly available to the supervisor through such means as written clinical materials, direct observations, and video and audiotapes. Supervision that relies solely on written clinical materials or verbal reports does not meet adequate standards.

C. Responsibilities of MFC/T Program Faculty

- Approve MFC/T master's students for internship registration (only after the MFC/T student has been accepted as an Intern at an approved Internship site) and placement through the MFC/T Program Clinical Coordinator/Director.
- Provide an MFC/T Program Faculty Supervisor who will be the contact person for MFC/T master's student intern and site during the internship experience.
- Insure that University MFC/T master's Internship Supervisor meets with the program's MFC/T master's students in internship throughout each semester enrolled for internship.
- Monitor the MFC/T master's student internship performance through consultation with the site supervisor when needed.
- Assign course grades.
- Work closely with the participating agency/school/university to ensure that the internship is a reciprocal arrangement benefiting all who are involved.

D. Responsibilities of the MFC/T Master's Student Intern

- Arrange through the MFC/T Master's Program Clinical Coordinator/ Director to register for the internship. The MFC/T master's student is responsible for meeting deadlines to insure appropriate placement.
- Attend on-campus, group supervision sessions in conjunction with the internship.
- Complete and send to Ohio CSWMFT Board the Supervision Training agreement at beginning of supervision and Internship Evaluation form at end of internship.
- Complete all requirements for the group supervision portion of the internship, including evaluation of site/site supervisor at the end of each semester.
- Prepare proposed plan for internship experience. The plan should include the MFC/T master's student's goals, the activities to achieve the goals, a plan for assessing the experience, and scope of practice.
- Perform the MFC/T and internship functions agreed to in the internship plan, as well as other functions as directed by the Site Supervisor.

- Continuously work to improve his/her performance in response to feedback made by the Site Supervisor.
- Meet at least one hour per week with the site supervisor for critique of work, including direct (e.g., individual, couple family and group, etc.) and indirect (e.g. progress notes, treatment plan, etc.) service. An attempt should be made to videotape or audiotape all therapy sessions.
- Keep a daily log of client contact hours, indirect service hours, and supervisory hours in accordance with the University supervisor's guidelines.
- Secure appropriate liability insurance through AAMFT (student members get free liability insurance).
- Be consistent with the requirements of the agency/school/university in regard to grooming, punctuality, etc.
- Demonstrate behavior in accordance with the highest ethical and professional standards.
- Obtain written consent for all clients before treatment begins. Obtain written parent/guardian consent for all clients under the age of 18.
- Obtain written consent for audio and/or videotape recordings of therapy sessions prior to recording, and inform clients that the audio and/or videotapes: (a) are not released to clients and/or third parties, (b) will be stored at the internship site/agency, (c) are used for the purpose of clinical supervision with his/her agency and/or university supervisor, and (d) will be erased after the supervision has occurred, to maintain client confidentiality.
- Commit to the Agency/School and to the School of Counseling to fully participate and meet all internship requirements.

APPENDIX A

MFC/T SUPERVISION CONTRACT

The following contract is between:

SUPERVISOR

and

SUPERVISEE

for the _____ Semester. This contract involves general and specific guidelines for both supervisor and supervisee.

Supervisory Context, Format, & Schedule

You will be supervised bi-weekly in 3 hour blocks of time, in a group-supervision format with the other students enrolled in the Internship course. If you cannot attend any of the bi-weekly individual supervision, it is your responsibility to notify the supervisor as soon as possible to reschedule a supervision session. Likewise, the supervisor will notify you as soon as possible when the need to re-schedule supervision arises.

Supervisees and the supervisor are expected to arrive on time and be prepared for supervision. Being prepared includes having a case ready to present in supervision. If using a video/audio of therapy, the tape should be appropriately cued for presentation.

Paperwork

Your clinical activity forms are required to be completed and submitted for each week at the start of group supervision/internship seminar. You are expected to complete all required paperwork for the internship seminar, at designated times. You are required to complete all clinical paperwork required and designated by your site in a timely manner. You are to work out this arrangement with your site supervisor.

Confidentiality

All supervision participants are expected to keep information shared during supervision confidential. Client confidentiality must be respected within the context of supervision; supervisees are expected to notify all clients at the initial therapy session that all cases receive supervision, and that client information may be shared within supervision, yet client information shared will not extend beyond the parameters of supervision. Similarly, supervision is a growth experience for supervisees. Personal information shared by supervisees is expected to stay within the parameters of supervision. The supervisor will also maintain and respect supervisees' confidentiality in supervision. Please be aware that information shared by supervisees in supervision may be shared among MFT faculty. Supervisees

are being trained in Marriage & Family Therapy at an academic institution. Some sharing of supervision information is likely as faculty continue to ensure the personal and professional growth of students. Information shared by supervisees in supervision will not be shared with other students or in the classroom setting.

Other Expectations

One purpose of supervision for supervisees is to grow as clinicians. The supervisor role includes guiding, encouraging supervisees to think beyond their current realm, and trying new therapeutic techniques. Supervisees are expected to be open to new ideas provided by the supervisor and other supervisees. Supervisees will be asked at the beginning of supervision to provide goals to work on throughout the supervisory process. The supervisor may provide additional goals for supervisees to work on in supervision.

Supervisees and the supervisor are expected to follow AAMFT ethical guidelines at all times. The supervisor is to be notified of any and all crisis incidents prior to filing paperwork with outside authorities, such as when a client poses a danger to him/herself, others, in cases of suspected child abuse/neglect, or when police are called on a client's behalf. Supervision notification is required in such cases to ensure that ethical and legal issues are properly addressed, as well as for liability issues. If you have a case that involves the court system in any way, you must keep your supervisor updated on the case weekly—at a minimum.

Supervisees are to carry liability insurance. A copy of current liability insurance needs to be provided to the supervisor if not already on file in the clinic.

Evaluation

Evaluation of supervisees is an ongoing process. The supervisor will provide ongoing informal feedback for supervisees throughout the semester. Supervisees will also have the opportunity to evaluate the supervisor and the supervision process. The supervisor will communicate with supervisees about serious/major problems if they are apparent before mid-semester.

The supervisor will give formal evaluations at the end of the semester. Supervisees are expected to formally evaluate the supervisor at the end of the semester.

By signing below, supervision participants agree to the above expectations.

_____	_____	_____
Supervisee Name – Written	Signature	Date
_____	_____	_____
Supervisor Name – Written	Signature	Date

APPENDIX B

MFC/T INTERNSHIP STUDENT INFORMATION FORM

Student Contact Information

Student Name: _____

Phone Number: (____) _____ Email: _____

Current Address: _____

Site and Supervisor Information

Site Name: _____

Supervisor: _____

Phone Number: (____) _____ Email: _____

Site Address: _____

Background Information

Liability Insurance Carrier & Expiration Date: _____

Are you currently employed part or full time outside of your internship? Yes No

If Yes, where? _____ How many hours per week? _____

Please list any specific life experiences or previous concerns with supervision that have:

What would you like to include for goals for this supervision experience?

APPENDIX C

MFC/T MEMORANDUM OF AGREEMENT

Agency Representative: _____

University Representative: _____

Student: _____

This agreement will be effective for a period from: _____ to _____.

Purpose

The purpose of this agreement is to provide a qualified graduate student, who has met program requirements, for an internship experience in the field of Marriage and Family Counseling/Therapy.

The Marriage and Family Counseling/Therapy Program Shall Be Responsible for the Following:

1. Selecting a student who has successfully completed all pre-requisite coursework and can show proof of obtaining professional liability insurance.
2. Designating a qualified licensed faculty member as the Internship Supervisor who will work with the Agency in coordinating the internship experience.
3. Notifying the student that he/she must adhere to the administrative policies, rules, standards, schedules and practices of the Agency.
4. Supporting the Agency and notifying the student intern, if such an occasion arise that the Agency deems student intern's placement is no longer appropriate.

The Agency Shall Be Responsible for the Following:

1. Providing the intern with an overall orientation to the Agency's specific services necessary for the implementation of the internship experience.
2. Designating a qualified appropriate licensed professional as the Site Supervisor. The Site Supervisor shall be responsible with the approval of the administration of the Agency for providing opportunities for the intern to engage in a variety of counseling/therapy activities (program appropriate) under supervision, and for evaluating the intern's performance.
3. Providing the intern with adequate workspace, telephone, office supplies, and staff support to conduct professional activities.
4. Providing the University Supervisor access to the intern's clinical work via video/audio recording, live observation, case consultation, and/or case notes.
5. Ensuring the intern does not have more than 15 direct client contact hours per week, unless agreed upon by the site supervisor and university supervisor.

The Student Intern Shall Be Responsible for the Following:

1. Attesting to having read and understood the American Counseling Association and the American Association for Marriage and Family Therapy ethical standards. Student interns will practice counseling/therapy in accordance with these standards. Any breach of these ethics or any

unethical behavior will result in removal from internship, a failing grade, and documentation of such behavior will become part of the permanent academic record of the student.

2. Agreeing to adhere to the administrative policies, rules, standards, and practices of the internship site.
3. Agreeing to inform immediately, both the Agency and the University Supervisor regarding concerns or issues as related to the internship experience or clinical work.
4. Understanding that a passing grade in the Internship course is contingent upon having demonstrated a competent skill level, as well as completion of all required paperwork and clinical hours.

Equal Opportunity

It is agreed by all parties that there will be no discrimination on the basis of race, color, nationality, ethnic origin, age, sex, creed, or sexual orientation/attraction.

Financial Arrangements

There are no financial stipulations in this agreement.

Termination

It is understood and agreed by the parties hereto that the Agency has the right to terminate the internship experience of the student whose health status is detrimental to the services provided to the patients/clients of the Agency. Further, the agency has the right to terminate the use of the agency by the intern, if, in the opinion of the Site Supervisor, or their Agency Representative, the Interns' behavior is detrimental to the operation of the Agency, and/or patient/client care. Such action will not be taken until the grievance against any intern has been discussed with the intern, and with the University Supervisor.



The names of the responsible individuals charged with the implementation of this contract are listed at the top of the document, and their signature below indicates agreement to the terms and statements above.

 Agency Representative/Site Supervisor

 Date

 University Supervisor

 Date

 Student

 Date

APPENDIX D

MFC/T INFORMED CONSENT FOR USE OF VIDEOTAPED THERAPY

Client Name: _____

Student Therapist: _____

I hereby authorize and consent for the student named above to use whole or part of our videotaped therapy sessions for the purpose of supervision at the University of Akron, School of Counseling until consent has been revoked.

I understand that the videotaped session will be used for supervision only and that the viewers of these sessions are mental health professionals and will be cautioned to respect the confidentiality of this material. I understand that I will not be identified beyond information on the videotaped segments. Further, I understand that the original tapes and any written materials in my case file are still protected and confidential.

I understand that this consent remains in place until I notify the student above via oral or written format of my revocation of consent. If oral revocation is provided, a follow-up written letter of revocation will be required. If my therapy sessions have ended, I know I can contact the agency where I received services, and they can provide contact information for the student.

Client Written Name

Client Signature

Client Written Name

Client Signature

Client Written Name

Client Signature

Client Written Name

Client Signature

Student Therapist Written Name

Student Therapist Signature

Site Supervisor Written Name

Site Supervisor Signature

APPENDIX E

MFC/T INTERNSHIP PLAN

Agency: _____

Agency Representative: _____

Student: _____

This plan will be effective for a period from: _____ to _____.

Supervision:

Requirements;

Weekly Individual Supervision Time: _____

Weekly Group Supervision Time: _____

Types of Supervision to be Received (check all that apply);

- Live Video Audio Case Consult Other:

Clinical Work:

My Schedule will be;

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Types of Direct Service Activities Available (check all that apply);

- Intake Interview Couples Therapy Family Therapy Individual Therapy
 Group Therapy Testing/Appraisal Career Counseling Other:

Types of Indirect Service Activities Available (check all that apply);

- Writing Intake Reports Writing Case Notes Completing Forms

Workshops

Staff Meetings

Writing Treatment Plans

Professional Reading

Scoring Tests

Other:

Objectives of Internship:

1. _____

2. _____

3. _____

4. _____

5. _____

Activities of Internship:

1. _____

2. _____

3. _____

4. _____

5. _____

Evaluation Methods

1. _____

2. _____

3. _____

4. _____

5. _____



The names of the responsible individuals charged with the implementation of this plan are listed at the top of the document, and their signature below indicates agreement to the terms and statements above.

Agency Representative/Site Supervisor

Date

Student

Date

APPENDIX F

APPENDIX G

MFC/T SUPERVISION WORKSHEET

The University of Akron, Marriage and Family Counseling/Therapy Program

****Bring this worksheet EACH internship seminar of the semester****

Student Name: _____ DATE: _____

Case of Concern #1 Please circle type: Formal Informal

Case # (or initials): _____ Modality: I C F OTHER

Total # of Sessions Seen: _____ Date of Last Session: _____

Presenting Issue:	Focus of Last Session:
-------------------	------------------------

Safety Issues / Concerns:

<i>Supervisor Notes:</i>

Case of Concern #2 Please circle type: Formal Informal

Case # (or initials): _____ Modality: I C F OTHER

Total # of Sessions Seen: _____ Date of Last Session: _____

Presenting Issue:	Focus of Last Session:
-------------------	------------------------

Safety Issues / Concerns:

<i>Supervisor Notes:</i>

APPENDIX H

MFC/T SUPERVISOR EQUIVALENCE FORM

GENERAL INFORMATION

Name: _____ Date: _____

Agency Name: _____

Agency Address: _____

Highest Degree: MA/MS
 PhD
 Other _____

Ohio License: Independent Marriage and Family Therapist (IMFT)
 Professional Clinical Counselor (PCC)
 Independent Social Worker-Supervisor (ISW-S)
 Psychologist
 Psychiatrist
 Another State License _____

DETERMINATION OF SUPERVISORY STATUS

Category I

1. Are you an AAMFT Approved Supervisor? YES NO
2. Are you an AAMFT Approved Supervisor-in- Training? YES NO
If you answered YES, who is the Supervisor-of-Supervision? _____
3. Are you a licensed Independent Marriage and Family Therapist, with three years post degree experience in MFT? YES NO

If you answered YES to either of these questions, this form is complete. Please sign the last page, verifying the accuracy of this info. You are granted approved supervisor status for The University of Akron Marriage and Family Therapy/Counseling program's master's and doctoral programs in the School of Counseling. You are required to submit a copy of your resume or vita and verification from AAMFT of your supervisory status, to complete this approval process (in accordance with: OH4757, COAMFTE 202.02).

Category II

COAMFTE Standard 11-202.02) A program may designate a person who is not an AAMFT Approved Supervisor or Supervisor Candidate as equivalent to an AAMFT Approved Supervisor for purpose of supervision, if (1) the program documents the equivalent supervision, and the demonstrated

training, education and experience in marriage and family therapy. This may be demonstrated by state MFT credential, AAMFT clinical membership or other documentation of training, education and experience in individuals, couples, and family therapy, and (2) demonstrated training, education and experience in individual, couple and family therapy supervision. This may be demonstrated by state credential to provide MFT supervision, completing coursework or continuing education in MFT supervision, significant MFT supervised supervision experience, or more than 10 years of experience supervising MFT students. (Equivalence criteria must include training in MFT supervision.)

1. Education in MFT: Has completed 2 courses in MFT, or can evidence extensive non-academic training in MFT (e.g. a minimum of at least 25 credits of continuing education, etc.). Please list (a) university attended and courses completed, or (b) dates, topics and number of continuing education credits accrued.

IMPORTANT: Documentation may be requested for accreditation purposes.

2. Training and experience in MFT: Have a minimum of three years of clinical experience with couples and/or families. Please list types of clinical experiences and place(s) of experience.

3. MFT supervision education and training: Please list education and/or training, including dates and courses, workshops, or continuing education credits in MFT supervision.

4. MFT supervision experience or supervision of MFTs: A minimum of two years being supervised as a marriage and family supervisor. Please list supervisor's name and site where the experience took place.

OR

A minimum of 10 years supervising MFT students. Please list site(s) where the supervision took place and the dates.

Please return this completed form, a resume or vita, and any documentation such as copies of licensure, certificates, transcripts, etc. to The University of Akron, School of Counseling (Marriage and Family Therapy/Counseling program)

Mailing Address:

The University of Akron
Chima Family Center
302 Buchtel Common
Akron, Ohio 44325
Attn.: MFT/C Program Director

Fax Number:

330-972-5292

Applicant Signature: _____ Date _____

For Office Use Only

MFT/C Program Coordinator(s): please review application form to determine applicant's qualifications and mark below, as appropriate;

Approved

Denied

Need more information

MFT Program Director: _____ *Date:* _____

APPENDIX I

MARRIAGE AND FAMILY COUNSELING/THERAPY INTERNSHIP

SUPERVISION CONTRACT

The following contract is between _____ as supervisor, and _____ as supervisee, for the period of _____ to _____, which is the _____ semester of the year _____. This contract involves general and specific guidelines for both supervisor and supervisee.

Supervisory Context, Format, & Schedule

Individual supervision will take place once a week for a minimum of one hour, with a minimum hourly supervision-to-client-contact ratio of 1:5. You will be supervised in student pairs. This means another student will be present during the supervision session. If you cannot attend weekly individual supervision, it is your responsibility to notify the supervisor as soon as possible to re-schedule a supervision session. Likewise, the supervisor will notify you as soon as possible when the need to re-schedule supervision arises.

Supervisees and the supervisor are expected to arrive on time and prepared for supervision. Being prepared includes having a case ready to present in supervision. If using a video of therapy, the tape should be appropriately cued for presentation. If live supervision is scheduled, supervisees need to prepare a back-up case to present in the event that the client cancels or no-shows for the therapy session.

Paperwork

Paperwork will be reviewed on an ongoing basis; that is, the supervisor will review the case file when you present the case in supervision. Supervisees are responsible for ensuring that inactive case files are closed. Supervisees are expected to have all case notes fully written. Supervisees are strongly encouraged to write case notes immediately after a session. Monthly client contact sheets are to be turned in on the last day of the month. Bring all your files to the last supervision session of the month.

Confidentiality

All supervision participants are expected to keep information shared during supervision confidential. Client confidentiality must be respected within the context of supervision; supervisees are expected to notify all clients at the initial therapy session that all cases receive supervision, and that client information may be shared within supervision, yet client information shared will not extend beyond the parameters of supervision. Similarly, supervision is a growth experience for supervisees. Personal information shared by supervisees is expected to stay within the parameters of supervision. The supervisor will also maintain and respect supervisees' confidentiality in supervision. Please be aware that information shared by supervisees in supervision may be shared among MFT faculty. Supervisees are being trained in Marriage & Family Therapy at an academic institution. Some sharing of supervision information is likely as faculty continue to ensure the personal and professional growth of students. Information shared by supervisees in supervision will not be shared with other students or in the classroom setting.

The supervisor may videotape supervision sessions.

Other Expectations

One purpose of supervision is for supervisees to grow as clinicians. The supervisor role includes guiding, encouraging supervisees to think beyond their current realm, and trying new therapeutic techniques. Supervisees are expected to be open to new ideas provided by the supervisor and other supervisees. Supervisees will be asked at the beginning of supervision to provide goals to work on throughout the supervisory process. The supervisor may provide additional goals for supervisees to work on in supervision.

Supervisees and the supervisor are expected to follow AAMFT ethical guidelines at all times. The supervisor is to be notified of any and all crisis incidents prior to filing paperwork with outside authorities, such as when a client poses a danger to him/herself, others, in cases of suspected child abuse/neglect, or when police are called on a client's behalf. Supervision notification is required in such cases to ensure that ethical and legal issues are properly addressed, as well as for liability issues. If you have a case that involves the court system in any way, you must keep your supervisor updated on the case weekly—at a minimum.

Supervisees are to carry liability insurance. A copy of current liability insurance needs to be provided to the supervisor if not already on file in the clinic.

Evaluation

Evaluation of supervisees is an ongoing process. The supervisor will provide informal feedback for supervisees about halfway through the semester. This informal feedback session will be brief, yet it will allow time for a general review of supervisees' progress over the first part of the semester; supervisees will also have the opportunity to evaluate the supervisor and the supervision process. The supervisor will communicate with supervisees about serious/major problems if they are apparent before mid-semester.

The supervisor will give formal evaluations at the end of the semester. Supervisees are expected to formally evaluate the supervisor at the end of the semester.

By signing below, supervision participants agree to the above expectations.

Supervisee Signature

Date

Supervisor Signature

Date

APPENDIX J

MFC/T MASTER'S INTERNSHIP AGREEMENT

It is highly recommended that the student intern not be working full-time at other employment during the practicum and internship period. In all cases, the student therapist must show adequate release time to complete all requirements, which includes scheduled group supervision meetings and individual supervision.

Marriage and Family Students are required to earn at least 40 client contact hours during practicum.

Direct client contact is defined as face-to-face (counselor and clients) therapeutic meetings. Activities such as phone contact, case planning, observation of therapy, record keeping, travel, administrative activities, consultation with community members or professionals, or supervision are not direct client contact. Assessments may be counted as direct client contact if they are face-to-face processes that are more than clerical in nature or focus.

Students may earn up to 100 hours (toward the 500 needed to graduate) of direct client contact through team practice. Team practice is defined as a process in which all students on a team jointly and actively participate in the counseling on an ongoing basis. One counselor (or co-counselors) is in the room with the clients and the rest of the team members participate, usually, from behind the two-way mirror. The entire team is expected to attend each session.

Each student participates in both individual (one or two supervisees) and group supervision at a ratio of one hour of supervision per every five hours of direct client contact. In addition, at least 50 hours of supervision must be based on raw data (supervision based on live observations, videotaped sessions, or audiotaped sessions). If a student is simultaneously being supervised and having direct clinical contact, the time is counted as both supervision time and direct clinical contact time. Even if additional students are present when a supervisor is conducting live supervision, the counselor(s) in the room with the client (up to two counselors) may count the time as individual supervision.

If a student misses the supervision during the mutually agreed upon time, this may impact his/her ability to see clients that week. Missing multiple supervision sessions, and/or arriving late may result in the student being removed from the practicum experience and taking practicum again the following semester. Supervision is a vital component to working competently with the clinic clients. In addition, students who cancel client sessions or do not show up for his/her block hours may be restricted in his/her ability to see clients. The student's grade will be impacted and this may also result in removal from practicum for that semester.

Student's observing someone else's clinical work may receive credit for group supervision provided that (1) at least one supervisor is present with the students, (2) there are no more than six students altogether, and (3) the supervisory experience involves an interactional process between the counselor(s), the observing students, and the supervisor. If there are no more than two students altogether, the observing student may receive credit for individual supervision under the same conditions.

In accordance with both the AAMFT and IAMFC Code of Ethics, psychotherapy is not done during supervision nor is psychotherapy done by a supervisor outside of supervision. Nonetheless, personal issues that relate to the student's ability to do counseling may be addressed in supervision. A supervisor, faculty member, or the clinical team may also suggest that a student explore issues with one's own counselor. However, personal counseling is not a required component of the MFC/T program. Nevertheless, if personal issues appear to interfere with a counselor's ability to provide services to clients in an ethical manner, this interference may impede the student's progress in the program (see section on Review and Retention). Students can obtain free counseling services from UA's Counseling, Testing and Career Center. They offer free, confidential (we would have no access to your records there) help. A staff of six psychologists and three psychology interns provide personal therapy, educational counseling, group counseling and crisis intervention.

Any personal information revealed in the process of supervision will be treated with the utmost respect. Personal information will be kept confidential unless the supervisor believes it is necessary to reveal the disclosure to a subsequent supervisor to enhance supervision or because the content of the disclosure affects the counselor's ability to do counseling in an effective manner. Any information that impedes the counselor's ability to ethically provide services to clients may be discussed with the clinical team.

In addition to being supervised by the MFC/T faculty, students will be supervised by doctoral level MFC/T students. Doctoral level supervisors are advanced students enrolled in the supervision course and are monitored by faculty supervisors. Similar to how counselors are supervised, doctoral supervisors will be supervised by a faculty member through consultation, videotape, and/or live observation.

All students in practicum must know both the AAMFT Code of Ethics and the IAMFC Code of Ethics.

I understand the client contact requirements for practicum, the supervision requirements, how to count client contact hours, and I have read the AAMFT and ACA Code of Ethics.

Signature

Date

APPENDIX K

MFC/T MASTER'S INTERNSHIP EVALUATION

Trainee Name: _____ Date: _____

Supervisor Name: _____

Please rate the above named trainee on each of the following items based on the scale below:

- 5 = Very Strong in this area with all clients; this comes naturally for him/her.
- 4 = Strong in this area, though still may have times of difficulty with some clients.
- 3 = Competent in this area, but s/he should continue to work on this skill.
- 2 = Inconsistent in this area; often displays weakness and uncertainty in this area.
- 1 = Weakness in this area; needs additional supervision and guidance.
- N/A = I am not able to assess the trainee on this competency at this time.

Attending to Therapeutic Relationship

	N/A	Weak	Needs Work	Competent	Strong	Very Strong
The trainee creates an atmosphere of acceptance and understanding.	N/A	1	2	3	4	5
TASK STATEMENT 1.05						
The trainee attends to clients' emotional climate in order to build trust.	N/A	1	2	3	4	5
TASK STATEMENT 1.01						
The trainee engages clients in the therapeutic process.	N/A	1	2	3	4	5
TASK STATEMENT 1.06						
The trainee develops mutually agreeable goals for therapy.	N/A	1	2	3	4	5
TASK STATEMENT 3.05						
The trainee recognizes and attends to split alliances within relational therapy.	N/A	1	2	3	4	5
TASK STATEMENT 1.07						

Addressing Family Process

The trainee identifies problematic relational interactions among family members.	N/A	1	2	3	4	5
TASK STATEMENTS 2.03, 2.04						
The trainee integrates individual and medical models of functioning within a systemic perspective	N/A	1	2	3	4	5

TASK STATEMENT 1.03						
The trainee determines boundaries, hierarchies, & patterns within families.	N/A	1	2	3	4	5
TASK STATEMENT 2.02						

Remaining Aware of the Larger System

The trainee develops treatment approaches from a range of theoretical perspectives.	N/A	1	2	3	4	5
TASK STATEMENT 2.16						
The trainee identifies psychosocial and environmental influences on each client.	N/A	1	2	3	4	5
TASK STATEMENTS 2.12, 2.19						
The trainee coordinates therapy with relevant individuals and institutions.	N/A	1	2	3	4	5
TASK STATEMENTS 2.20, 2.21						
The trainee addresses external influences that affect family functioning.	N/A	1	2	3	4	5
TASK STATEMENT 1.04						

Designing and Conducting Treatment

The trainee can determine who should attend therapy and in what configuration.	N/A	1	2	3	4	5
TASK STATEMENT 2.05						
The trainee facilitates therapeutic involvement of all necessary participants in treatment.	N/A	1	2	3	4	5
TASK STATEMENT 1.02						
The trainee matches the needs of the client with an appropriate therapeutic approach.	N/A	1	2	3	4	5
TASK STATEMENTS 3.02, 3.03						
The trainee integrates information from a variety of sources to develop a treatment plan.	N/A	1	2	3	4	5
TASK STATEMENTS 2.07, 2.08, 2.09, 2.10, 2.11, 2.17, 2.18, 2.21						
The trainee establishes a sequence of treatment processes in a treatment plan.	N/A	1	2	3	4	5
TASK STATEMENTS 2.16, 3.08						
The trainee assists the client to change their perspective of the presenting complaint to facilitate solutions.	N/A	1	2	3	4	5
TASK STATEMENT 3.18						

The trainee helps the client identify strengths and resources that assist therapy.	N/A	1	2	3	4	5
TASK STATEMENT 2.12						
The trainee assists the client in developing effective problem-solving abilities.	N/A	1	2	3	4	5
TASK STATEMENT 3.20						

The trainee helps a client to alter problematic relationship patterns.	N/A	1	2	3	4	5
TASK STATEMENTS 3.18, 3.20						
The trainee tailor's therapy to a client's developmental needs.	N/A	1	2	3	4	5
TASK STATEMENTS 3.05, 4.01						
The trainee modifies treatment techniques to the cognitive level of a child or adolescent.	N/A	1	2	3	4	5
TASK STATEMENTS 3.05, 4.01						
The trainee responds appropriately to a client's culture or ethnicity.	N/A	1	2	3	4	5
TASK STATEMENTS 5.01, 5.05						
The trainee respects a client's sexual orientation in order to enhance the process of change.	N/A	1	2	3	4	5
TASK STATEMENTS 5.01, 5.05						

Evaluating Ongoing Process and Outcomes

The trainee utilizes published books or articles to guide the therapeutic process.	N/A	1	2	3	4	5
TASK STATEMENT 4.01						
The trainee modifies the treatment plan based on information about client's progress.	N/A	1	2	3	4	5
TASK STATEMENTS 4.02, 4.03						
The trainee utilizes ongoing assessment to monitor the nature and severity of a client's problems.	N/A	1	2	3	4	5
TASK STATEMENTS 2.13, 2.15						
The trainee assesses a client's interests and abilities using published standardized tests.	N/A	1	2	3	4	5
TASK STATEMENT 2.14						
The trainee can interpret client's standardized test results related to published norms.	N/A	1	2	3	4	5
TASK STATEMENT 2.14						
The trainee can evaluate clients' outcomes for the need to continue or terminate therapy.	N/A	1	2	3	4	5
TASK STATEMENT 3.21						

Thinking about Practice

The trainee has a theory of how change occurs.	N/A	1	2	3	4	5
TASK STATEMENTS 3.06, 4.01						
The trainee recognizes how his/her assumptions about human nature influence therapy.	N/A	1	2	3	4	5
TASK STATEMENT 3.19						

The trainee integrates supervisor/team communications into treatment.	N/A	1	2	3	4	5
TASK STATEMENT 5.05						

Maintaining Professional Ethics

The trainee recognizes when personal biases may influence the therapeutic process.	N/A	1	2	3	4	5
TASK STATEMENT 5.04						
The trainee recognizes when consultation with a colleague or supervisor is appropriate.	N/A	1	2	3	4	5
TASK STATEMENT 5.05						
The trainee understands the ethical codes of the profession.	N/A	1	2	3	4	5
TASK STATEMENTS 5.01, 5.02						
The trainee maintains adequate and timely clinical records.	N/A	1	2	3	4	5
TASK STATEMENTS 5.01, 5.12						
The trainee can discuss how fiscal responsibility, confidentiality, and legal issues can influence the therapeutic process.	N/A	1	2	3	4	5
TASK STATEMENTS 5.06, 5.07						
The trainee describes the therapeutic process to clients so that they can make informed decisions about treatment.	N/A	1	2	3	4	5
TASK STATEMENTS 5.01, 5.08						
The trainee makes appropriate referrals to other professionals.	N/A	1	2	3	4	5
TASK STATEMENT 5.09						

Assessment and Diagnosis

The trainee can recognize and evaluate an adult client who is depressed.	N/A	1	2	3	4	5
TASK STATEMENTS 2.14, 2.15, 2.16, 2.18						
The trainee can recognize and evaluate a child or adolescent client who is depressed.	N/A	1	2	3	4	5
TASK STATEMENTS 2.14, 2.15, 2.16, 2.18						
The trainee can assess an adult client's behavior based on DSM-IV criteria.	N/A	1	2	3	4	5
TASK STATEMENTS 2.14, 2.15, 2.16, 2.18						
The trainee can assess a child or adolescent client's behavior based on DSM-IV criteria.	N/A	1	2	3	4	5
TASK STATEMENTS 2.14, 2.15, 2.16, 2.18						
The trainee can recognize and evaluate an adult client who has an anxiety disorder.	N/A	1	2	3	4	5
TASK STATEMENTS 2.14, 2.15, 2.16, 2.18						

The trainee can recognize and evaluate a child or adolescent client who has an anxiety disorder.	N/A	1	2	3	4	5
TASK STATEMENTS 2.14, 2.15, 2.16, 2.18						
The trainee can distinguish a client who has a personality disorder.	N/A	1	2	3	4	5
TASK STATEMENTS 2.14, 2.15, 2.16, 2.18						
The trainee can identify a client who has a developmental disorder.	N/A	1	2	3	4	5
TASK STATEMENTS 2.14, 2.15, 2.16, 2.18						
The trainee can assess the level of risk of harm that a client's behaviors pose.	N/A	1	2	3	4	5
TASK STATEMENT 2.13						

Strengths:

Weaknesses:

Case Notes and Family Assessment
Case Notes

Competencies	Excellent	Competent	Unsatisfactory
<p>Systemic conceptualization</p> <p>1.2.2; 1.2.3; 1.3.2; 1.4.1; 2.2.4; 2.3.8</p>	<p>Considers all participants in therapy and identifies interactions between them</p> <p>Identifies situational and developmental stressors and the impact of these on session content</p>	<p>Considers most but not all participants in therapy, and considers interaction patterns between most but not all parties in session</p> <p>Identifies situational and developmental stressors but does not link these to session content</p>	<p>Considers most but not all participants in therapy and does not consider interaction patterns in session</p> <p>Does not identify situational and developmental stressors</p>
<p>Capturing content and process</p> <p>2.2.3</p>	<p>States content as presented within interaction process of session</p>	<p>States content but does not include statement of interaction process of session</p>	<p>Does not identify content or interaction process of session</p>
<p>Provides appropriate and sufficient clinical information</p> <p>4.3.12; 4.5.3</p>	<p>Concise and clear description of session content and process</p> <p>Gives sufficient information for supervisor to gain picture of client</p> <p>Provides relevant information</p>	<p>Gives description of session content and process but may be unclear or incomplete</p> <p>Insufficient information for supervisor to gain picture of client</p> <p>Some irrelevant information included</p>	<p>Does not identify either content or process of session</p> <p>Minimal information given for supervisor</p> <p>Irrelevant information outweighs relevant information</p>
<p>Adheres to professional writing standards</p> <p>5.1.3</p>	<p>Free of grammatical errors and typing errors</p> <p>Uses non-judgmental language</p> <p>Gives clear behavioral descriptions of observed behaviors and interactions</p>	<p>One or two grammatical and/or typing errors</p> <p>Uses non-judgmental language</p> <p>Some behavioral descriptions presented</p>	<p>More than two grammatical and/or typing errors</p> <p>Judgmental language used</p> <p>Minimal behavioral descriptions presented</p>

Timeliness 5.1.3	Submitted on time	Submitted late with notice to instructor	Submitted late with no notice to instructor
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Family Assessment Form

Competencies	Excellent	Competent	Unsatisfactory
Systemic conceptualization 1.2.2; 1.2.3; 1.3.2; 1.4.1; 2.2.4; 2.3.8	<p>Considers all members in family system that may be involved with the clients even if they are not attending session</p> <p>Identifies historical and current interactions between above family members</p> <p>Identifies situational and developmental stressors and the impact of these on presenting problem</p>	<p>Considers only those family members who are present in session</p> <p>Identifies historical and current interaction patterns between only those family members who are present in sessions</p> <p>Identifies situational and developmental stressors but does not link these to current presenting problem</p>	<p>Considers most but not all participants in therapy</p> <p>Presentation of interaction patterns limited to current situation only</p> <p>Does not identify situational and developmental stressors</p>
Capturing content and process in systemic hypothesis 2.2.3	Hypothesis focuses on interaction patterns, not content	Hypothesis has some process information	Hypothesis focused on content
Provides appropriate and sufficient clinical information regarding contextual variables 4.3.12; 4.5.3	<p>Concise and clear description of family history</p> <p>Gives sufficient information regarding contextual variables for supervisor to gain picture of client</p> <p>Provides relevant information</p> <p>Considers a wide variety of contextual variables</p>	<p>Family history presented but may be unclear</p> <p>Some contextual variables are considered but one or two are overlooked</p> <p>Some irrelevant information included</p> <p>Contextual variables focus on immediate situation</p>	<p>Minimal family history given</p> <p>More than two contextual variables are overlooked</p> <p>Irrelevant information outweighs relevant information</p> <p>Contextual variables may be mentioned but are not connected to current situation</p>

<p>Adheres to professional writing standards</p> <p>5.1.3</p>	<p>Free of grammatical errors and typing errors</p> <p>Uses non-judgmental language</p> <p>Gives clear behavioral descriptions of observed behaviors and interactions</p>	<p>One or two grammatical and/or typing errors</p> <p>Uses non-judgmental language</p> <p>Some behavioral descriptions presented</p>	<p>More than two grammatical and/or typing errors</p> <p>Judgmental language used</p> <p>Minimal behavioral descriptions presented</p>
<p>Timeliness</p> <p>5.1.3</p>	<p>Submitted on time</p>	<p>Submitted late with notice to instructor</p>	<p>Submitted late with no notice to instructor</p>