# PEPPERDINE UNIVERSITY

Graduate School of Education and Psychology

# LMFT/LPCC Handbook 2019-2020

Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy

(MACLP Degree)

**Evening Format Program** 

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### **Pepperdine University**

GRADUATE SCHOOL OF EDUCATION AND PSYCHOLOGY

Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy (MACLP Degree or LMFT/LPCC Program)

# LMFT/LPCC Handbook

### INTRODUCTION

Welcome to Pepperdine and to the Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy (MACLP) degree program, also known as the LMFT/LPCC Program. Here you will have an opportunity to learn clinical psychology, marriage and family therapy and clinical counseling. With the MACLP degree, and 3,000 hours of approved supervised clinical experience, you will be eligible to sit for the license exam to practice independently as a **Licensed Marriage and Family Therapist** (LMFT) and/or a **Licensed Professional Clinical Counselor** (LPCC) in California.

### What Do LMFTs Do?

Marriage and Family Therapists are mental health practitioners who are specifically trained to help individuals, couples and families improve and maintain healthy relationships. With the LMFT license, you can help children, adolescents and adults with a variety of problems. You can treat individuals, couples, families, groups and larger systems; work in private practice by yourself or with a group; work in community clinics, residential treatment centers and hospitals or you can consult, develop and manage programs. As an LMFT, you will be a psychotherapist by law and may be paid for your services directly.

### Licensed Professional Clinical Counselors (LPCC) and the MACLP Program

In October of 2009, the Governor of California signed legislation creating another psychotherapy profession in this state – Licensed Professional Clinical Counselor (California is the last state in the nation to approve this professional category). The bill went into effect on January 1, 2010 and is regulated by the Board of Behavioral Sciences (BBS). According to the legislation, "'Professional clinical counseling' means the application of counseling interventions and psychotherapeutic techniques to identify and remediate cognitive, mental, and emotional issues, including personal growth, adjustment to disability, crisis intervention and psychosocial and environmental problems. Professional clinical counseling includes conducting assessments for the purpose of establishing counseling goals and objectives to empower individuals to deal adequately with life situations, reduce stress, experience growth, change behavior and make well-informed rational decisions". [Business and Professions Code (BPC) 4999.20].

The legislation suggests that the scope of practice may permit greater individually-oriented mental health practices as well as specialized qualifications as career development counselors, rehabilitation counselors, art and dance therapists, couple and family counselors, etc. There may also be the promise of greater inter-state portability with this license.

As the Pepperdine GSEP Administration gathers more clarity about this new license, its full requirements and the advantages to pursuing the LPCC degree, we will keep all students informed via the GSEP website, email blasts and community meetings.

Important: As of August 1, 2012, Pepperdine University's MACLP Program enables students to simultaneously satisfy the curriculum requirements for both the LMFT and LPCC professional licenses in the State of California.

In addition, the specialized training in couple and family counseling will permit LPCC's to provide family counseling services.

### The MACLP Program at Pepperdine

In the MACLP program, you will learn how to use a variety of psychotherapeutic and counseling theories in the assessment, diagnosis and treatment of individuals and their relationships. You will also learn models of individual and family therapy including, but not limited to, psychodynamic, object-relations, humanistic, cognitive-behavioral, strategic, structural, narrative, solution-focused models and models emphasizing recovery-oriented mental healthcare. Courses will be didactic, experiential and practical, including both theory and technique. In your three-term clinical practicum Traineeship, you will see clients under the supervision of licensed professionals at approved sites while concurrently enrolled in a clinical practicum class (PSY 662). The clinical site experience, in conjunction with the clinical practicum class, provides the opportunity to integrate theory and therapy skills and earn hours towards the LMFT license. Note: For students intending to qualify for the LPCC license as well, practicum hours earned as a graduate student satisfy Pepperdine's and the BBS' requirements for graduation but do not apply to the 3,000 hour requirement. Hours fulfilling LPCC pre-license requirement can only be accrued after graduation.

### THE LMFT/LPCC HANDBOOK

The **LMFT/LPCC** Handbook contains the policies and procedures for the MACLP degree program and is a contract for your performance in the program. It will also guide you through the academic and experiential requirements for the MFT license and will address questions you may have about the exam process. **READ THIS HANDBOOK THOROUGHLY** and become familiar with its contents.

In addition, please read these publications that contain useful information for your success in the graduate program:

- 1. The GSEP Catalog for your year of entry or transfer to the MACLP Program (available on the Pepperdine website);
- Psychology Division Policies & Procedures handbook, distributed at New Student Orientation.

- 3. Focus on Clinical Training, a newsletter published by the Clinical Training and Professional Development Department (found online at http://gsep.pepperdine.edu/psychology/professional-development-workshops/).
- 4. Laws and Regulations Relating to the Practice of Marriage and Family Therapy, published by the Board of Behavioral Sciences (see page 6).
- 5. CAMFT Code of Ethics Part I (2010).

### **Program Administration**

The MACLP Program is administered by the MACLP Committee. This committee is currently chaired by the MACLP Evening Format Director and consists of faculty, the Directors of the Irvine Graduate Campus and Encino Graduate Campus Community Counseling Centers, the clinical training staff and program administrators. The Associate Dean of Psychology sits *ex officio*.

### Where Do Program Requirements Originate?

Some of the requirements for your MACLP degree have been designed by Pepperdine Graduate School of Education and Psychology; others originate in state law. The Board of Behavioral Sciences (BBS), a division of the California Department of Consumer Affairs, regulates the LMFT and LPCC licenses. The Board provides forms, verifies applicants' educational and clinical experiences, administers the licensing exams and issues the LMFT and LPCC license.

### **MACLP Program Accreditation Status**

Pepperdine University is accredited by the Western Association of Schools and Colleges (WASC), the regional accrediting agency for higher education. The Pepperdine PsyD program is accredited by the American Psychological Association; APA does not accredit master's degrees. The MACLP Program is not accredited by AAMFT through its Commission on Accreditation of Marriage and Family Therapy Education (COAMFTE).

### **LEGAL NOTIFICATION**

Applicants seeking the LMFT or the LPCC license must graduate with a *qualifying degree* that has been approved by the BBS. At Pepperdine, that program is the MACLP degree. **We are required by law to notify you that:** 

The Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy (MACLP) degree is designed to meet the education requirements of Sections 4980.36 of the Business and Professions Code of the State of California, leading to licensure as a Licensed Marriage and Family Therapist. In addition, the MACLP degree is designed to meet the education requirements of Sections 4999.33, 34, 36 of the Business and Professions Code of the State of California for licensure as a Licensed Professional Clinical Counselor.

Please note: The LMFT/LPCC Handbook is designed to supplement the information distributed by the BBS. As licensing requirements change, academic requirements follow suit. Pepperdine makes every effort to inform students of changes that impact their programs.

However, it is ultimately the student's responsibility to understand the effects of legal and regulatory changes on license eligibility as well as to keep original BBS and Practicum documents safe and secure after graduation (to stay informed, join CAMFT – see page 7).

### GENERAL REQUIREMENTS FOR LICENSURE

To obtain licensure as an LMFT or an LPCC, applicants must fulfill specific educational and experiential requirements, in addition to passing written exams. In general, applicants must have completed an appropriate graduate degree and 3,000 hours of experience under the direct supervision of qualified supervisors. To qualify for licensure as an LMFT up to 1,300 hours may be completed while enrolled in the master's program. All 3,000 hours must be completed in the six years immediately preceding the filing date for the exam, although up to 500 hours gained during practicum are exempt from this time limit (and are secure to be used toward licensure). As stated previously, to qualify for licensure as an LPCC, all 3,000 hours of experience must be earned after graduation with the master's degree.

Applicants are eligible to take the written exams when all academic and experiential requirements have been completed. In order for hours to be counted as supervised experience, students in master's programs must comply with the specifications of their educational institutions for appropriate experience. To earn ANY hours in private practice, one must have already graduated and registered with the BBS as an MFT Associate or an LPCC Associate and have received an Associate Registration Number from the Board (the **LMFT/LPCC Handbook** provides a full discussion of these and other requirements).

### **Questions about this Document: Resources**

The LMFT/LPCC Handbook was written for the specific purpose of providing information about the LMFT/LPCC program. We are happy to answer questions, but we have a favor to ask: **PLEASE READ THIS HANDBOOK BEFORE YOU CONTACT US!** 

### M.A. Clinical Training and Professional Development (CTPD) Staff

Your first resource! - Kathleen Wenger, Manager of Clinical Training and Professional Development, oversees the clinical training for the MACLP program and professional development for both the MAP and the MACLP program. She also plans, develops and implements special services and events for students such as the E newsletter, Clinical Connections and alumni private practice tours. Her office is at the Irvine Graduate Campus.

Rebecca Reed is the CTPD Coordinator for students at the West Los Angeles Graduate Campus and Alice Richardson is the CTPD Coordinator for students at the Encino Graduate Campus. Kathleen, Rebecca and Alice provide program assistance to the MACLP Program Directors and can answer questions about practicum, counting hours, supervision, practicum sites, obtaining an MFT Associate number, and much, much more. They conduct new LMFT/LPCC student meetings, meetings to help students prepare for practicum, and meetings to assist prospective graduates in registering for their Associate numbers; in addition, they organize practicum fairs and other MACLP student events as well as professional development events.

Kathleen Wenger
Rebecca Reed
Alice Richardson

(Irvine Grad. Campus) (949) 223-2580 kathleen.wenger@pepperdine.edu
(WLA Grad. Campus) (310) 568-5776 rebecca.reed@pepperdine.edu
(SFV Grad. Campus) (818) 501-1619 alice.richardson@pepperdine.edu

Note: For the sake of simplicity, Kathleen, Rebecca and Alice are referred to as "Clinical Training Staff."

### **Academic Advisors**

At this time, the MACLP Program has *two* Academic Advisors: **Marissa Spruiell** (Senior Academic Advisor - Psychology) and **Nazanein Vazira-Bhullar** (Academic Advisor - Psychology). Marissa and Nazanein work with enrolled students and handle questions about classes, enrollment, registration, add/drop, challenge exams, enrolled student course waivers and other academic matters, including transfers between the MAP and MACLP programs. Marissa also has office hours at the Encino Graduate Campus, usually on Mondays and Nazanein has office hours at the Irvine Graduate Campus, usually on Wednesdays. You may contact either of them by phone or email:

Marissa Spruiell (310) 568-5503 marissa.spruiell@pepperdine.edu

Nazanein Vazira-Bhullar (310) 568-5618 nazanein.vazira@pepperdine.edu

Note: For questions about Program Certifications (not transcripts) please contact Terrance Cao at (310) 568-5656. For questions about academic verifications and transcripts, please contact Marissa Spruiell or Nazanein Vazira-Bhullar. For questions about transcripts, please call the Malibu Registrar's Office (310) 506-7999 or OneStop@pepperdine.edu.

### **Program Director**

The Clinical Training/Professional Development staff and Program Administrators work directly with **Carrie Castaneda-Sound**, **PhD**, MACLP Program Evening Format Director. If further consultation is needed, you may reach her at (818) 501-1636, carrie.castaneda-sound@pepperdine.edu.

### **Deviation from Policy**

Even if they'd like to, the friendly staff of the BBS has no discretionary authority to deviate from the statutes and regulations governing the LMFT/LPCC license. Therefore, they can make no exceptions to LMFT or LPCC requirements. We have a bit more flexibility at Pepperdine, but would like to request that you follow the policies and procedures for successful completion of your degree program. We hold firmly to the MACLP clinical training procedures as these policies adhere to state regulations and have refined our program over time to ensure, to the best of our ability, that our MACLP students receive the most meaningful practicum experience possible.

### **Legal and Professional Boards and Associations**

### **Statutes and Regulations**

As therapists licensed to practice independently, LMFTs and LPCCs must know the legal parameters of their profession. **Statutes** typically originate with the legislators or their lobbyists and go through the standard legislative channels. The legal code most relevant to the LMFT and LPCC license is the Business and Professions Code. **Regulations** carry out the law and, in the case of the LMFT and LPCC licenses, are written by the Board of Behavioral Sciences and adopted after public hearings. The Board of Behavioral Sciences issues the "Laws and Regulations Relating to the Practice of Professional Clinical Counseling, Marriage and Family Therapy, Licensed Clinical Social Work, and Licensed Educational Psychology."

### **Board of Behavioral Sciences (BBS)**

The Board of Behavioral Sciences (BBS) is a group of licensed professionals and members of the public who are charged by the Department of Consumer Affairs to protect the consumer by carrying out the statutes and regulations which assure minimum standards for education and training as well as ethical practice by the professionals under its jurisdiction. In essence, the BBS issues the professional licenses that legally permit therapists to provide mental health services. Members of the Board are appointed by the governor to represent the licenses that it regulates: Licensed Marriage and Family Therapists (LMFTs), Licensed Clinical Social Workers (LCSWs), Licensed Educational Psychologists (LEPs), and Licensed Professional Clinical Counselors (LPCCs). Two public members also serve on the Board. (For more Board history visit their website, www.bbs.ca.gov).

The Executive Officer of the BBS assists the Board in carrying out its motions, as well as overseeing the evaluative and research functions of the license analysts (BBS staff members who determine

eligibility for the various licenses and registered positions). Board meetings are held in both Northern and Southern California and are attended regularly by a few hardy souls from the academic community as well as by members of CAMFT, AAMFT and other organizations. We encourage you to attend a meeting—you'll learn about the legislative body that oversees your professional activities and you may even have an opportunity to influence the direction of the LMFT and/or LPCC profession through your testimony.

The BBS's voicemail system handles many questions. For recorded messages, call (916) 574- 7830. The board may also be reached through e-mail at <a href="mailto:BBSWebMaster@bbs.ca.gov">BBSWebMaster@bbs.ca.gov</a> or on its homepage <a href="https://www.bbs.ca.gov">www.bbs.ca.gov</a>. BBS forms are available through the BBS homepage's forms and publications link, although you will receive most of what you need from the Clinical Training Coordinators when you go through the preparing for practicum and information meetings.

In addition to this aforementioned regulatory body, there are two state professional organizations that licensed LMFTs frequently join. One is CAMFT, the *California Association of Marriage and Family Therapists*, a free-standing organization that claims a membership of about 29,000 combined licensed and pre-licensed MFTs and functions more or less as a "professional union" for LMFTs in the state. AAMFT-CA, the state division of the *American Association for Marriage and Family Therapy*, is smaller but is nationally affiliated.

The professional advocacy group for LPCC's in California is the California Association for Licensed Professional Clinical Counselors (CALPCC). They can be contacted at <a href="www.calpcc.org">www.calpcc.org</a>. The national organization for professional counselors is the American Counseling Association (ACA) which has been established since 1952. They can be contacted at <a href="www.counseling.org">www.counseling.org</a>.

Each of these organizations offers student-members the opportunity to learn about the field of marriage and family therapy and professional clinical counseling and to receive certain professional benefits. CAMFT, AAMFT and CALPCC offer impressive annual conferences and have an active interest in the training and professional development of their members.

### The California Association of Marriage and Family Therapists (CAMFT)

CAMFT has been a long-standing advocate for LMFTs in California, working tirelessly with legislators and with the BBS to ensure professional parity for LMFTs. We highly recommend that you join CAMFT now, as a pre-licensed member. You will receive CAMFT's bi-monthly magazine, The Therapist, the pages of which are full of information about such topics as the latest BBS actions, new statutes and regulations and their effects on LMFTs, ethical and practical issues, insurance information, workshops on professional issues and exam preparation, a classified section, information on disciplinary actions against licensed and pre-licensed practitioners, job listings and much, much more. CAMFT members get an added bonus— free advice from CAMFT's legal counsel. If you ever have legal or ethical concerns regarding your clinical work as a student/Associate or a licensed MFT, CAMFT legal staff is available for consultation. To be able to speak with them, however, you'll need to be a CAMFT member.

CAMFT publishes a two-part pamphlet on professional ethics for LMFTs that is required reading for students in PSY 623, *Ethics and Law for Mental Health Professionals*. Students enrolled in PSY 623 will need to acquire this free pamphlet through CAMFT.

While you're in school, we will inform you of changes in BBS requirements. Once you graduate, however, it will be more difficult to stay informed. Joining CAMFT is an excellent way to learn about changes in the statutes or regulations that might affect your practice as both an Associate and as a licensed LMFT. You may request an application for membership from CAMFT by calling and requesting an application packet or by using the application on CAMFT's homepage. You are a *Pre-licensed Member* and your current status is "Student enrolled in a degree program leading toward licensure." CAMFT's address is:

California Association of Marriage and Family Therapists 7901 Raytheon Road San Diego, CA 92111-1606 (858) 29-CAMFT (292-2638) http://www.camft.org

CAMFT has a number of local chapters that welcome student members. By affiliating with established professionals in your geographical area, you can develop valuable contacts and learn from those who are more experienced. For information on local chapters and their contact persons, check CAMFT's website, email or call CAMFT.

IMPORTANT: Those who work in clinical settings should carry professional liability insurance – this includes student MFT and PCC Trainees, LMFT and LPCC Associates and licensed LMFTs and LPCCs!



By joining CAMFT, you are eligible for a free professional liability policy with your Graduate Student Membership. Contact CAMFT directly for information on insurance policies.

### The American Association for Marriage and Family Therapy (AAMFT)

AAMFT is the *national* professional organization for marriage and family therapists, equivalent to the American Psychological Association for psychologists. AAMFT puts on an excellent annual conference and provides its members with considerable information on the practice of marriage and family therapy as well as the research

upon which it is based. AAMFT is also working to create parity for LMFTs with other mental health professionals on the national level, as well as to educate the public about the value of marriage and family therapy. *The Journal of Marital and Family Therapy* and its other publications are excellent; we

encourage you to join this excellent organization for both professional benefits and for continuing knowledge about the practice of therapy.

Once you are a member of AAMFT, you are eligible to join AAMFT-CA. To request an application for AAMFT membership, write or call AAMFT at:

American Association for Marriage and Family Therapy 112 S. Alfred St. Alexandria, VA 22134 Tel: (703) 838-9808 Fax: (703) 838-9805

**1-800-66AAMFT** (Toll Free) Website: http://www.aamft.org

### The California Association of Licensed Professional Clinical Counselors (CALPCC)

As stated previously, Licensed Professional Clinical Counselors became a legal profession in California in 2010. Under the guidance of CALPCC, this relatively new profession in California is working hard to establish itself as a viable addition to other master's-level clinical profession. In theory, the professional status of LPCC's should have a broader scope of practice, comparable to other states. Again, there is the possibility of greater interstate portability of this license.

CALPCC is a relatively new organization, and is striving to provide visibility and political viability of the profession in this state.

CALPCC is eager to encourage student membership and participation in the organization. Students can become members for \$30/yr (Associates, \$55/yr).

For further information, contact CALPCC at calpcc.org.

### QUESTIONS ABOUT LMFTs and LPCCs

### What's in a Name? - "Licensed Marriage and Family Therapist"

As used by family therapists, the term "family" is generic; it includes individuals, couples (unmarried, married or divorced), children, adolescents, siblings, single parents and children, adults and older parents, blended families, step-families or any social unit where there is a relationship by blood, marriage or domestic partnership.

Where does helping children fit in? To an LMFT, it is understood that family therapy includes children. And if a child is presented as the troubled member of the family, it is understood that the parents, guardians or caretakers will be somehow involved in the assessment and treatment of the child's problems. In fact, many family therapists believe that the best way to help troubled children is to

increase the competence of their parents. This is often best accomplished by seeing parents and children together, whenever possible.

Why "therapist"? Family therapists have an eclectic heritage that includes psychiatrists, psychologists, counselors, social workers, engineers and anthropologists. Because therapists work with clinical populations and are required to be trained in the assessment and diagnosis of mental disorders, it is appropriate that LMFTs refer to their work as therapy. LMFTs are defined in the California Evidence Code as "psychotherapists" and are governed by the same laws as psychologists and other mental health professionals in the state.

The Business and Professions Code applying to LMFT's states, "...the practice of marriage and family therapy shall mean that service performed with individuals, couples or groups wherein interpersonal relationships are examined for the purpose of achieving more adequate, satisfying and productive marriage and family adjustments." While the regulations emphasize the improvement of relationships, the actual practice of Marriage and Family Therapy has been broadly defined, permitting any number of emotional and psychological difficulties to be approached from a relational perspective.

### What's in a Name? - "Licensed Professional Clinical Counselor"

It has proven to be a most challenging task to differentiate the clinical practices between LMFTs and LPCC's. Some clarity can be achieved by describing what clinical practices LPCC's are not permitted to do under current regulations. According to Business and Professions Code applicable to LPCC's, "'Professional clinical counseling' does not include the assessment or treatment of couples or families unless the professional clinical counselor has completed...additional training and education, beyond the minimum training and education required for licensure." (Note: Current Pepperdine MACLP education provides the additional education qualifying for this specialization). Furthermore, the Business and Professions Code states that "professional counseling does not include the provision of clinical social work services". In addition, the administration of assessment services, "...shall not include the use of projective techniques in the assessment of personality, individually administered intelligence tests, neuropsychological testing, or utilization of a battery of three or more tests to determine the presence of psychosis, dementia, amnesia, cognitive impairment, or criminal behavior" – apparently this is the domain of clinical psychology".

### Are LMFTs or LPCC's Psychologists?

Only those who have passed the licensing exam for psychology may call themselves psychologists. LMFTs and LPCCs may NOT call themselves "psychologists," may not refer to their services in any form as "psychological," nor advertise in any medium holding themselves out to be "psychologists."

You may refer to your practice as "psychotherapy" or "counseling" and refer to yourself as a "psychotherapist" or a "counselor" on business cards and written materials as long as you also write out the full name of your license status – e.g. Marriage and Family Therapist Trainee, Associate or Therapist or Professional Clinical Counselor Trainee, Associate - at the same time. (See also the discussion about the use of psychological tests, page 19). The Board of Behavioral Science's main interest is the protection of the consumer, and in this case, the consumer must not be confused into thinking that the LMFT or the LPCC holds a different license.

### **Becoming Licensed in another State**

As of 2010, all 50 states currently regulate LMFTs and LPCCs, either by license or certification. Requirements are not identical across states, but there are some similar requirements for education and training.

Historically, Pepperdine University LMFT graduates have been very successful in acquiring licensure in other states. MACLP program administrators will be glad to assist those who desire to seek out-of-state licensure.

To find out about out-of-state requirements for licensure or certification, contact the appropriate state licensing board for the requirements to practice at the master's level. It is important to find out about licensure requirements in another state in which you are interested in as early as possible so that we can assist you in determining if our curriculum will meet this other state's requirements or if there are additional experiences you must complete. While we will do our best to aid you in the process, please remember that or program is, first and foremost, designed to meet the LMFT and LPCC licensure requirements in California. Ultimately, if you wish to become licensed in another state, it is your responsibility to ensure that you meet the qualifications to be licensed in that state. CAMFT and AAMFT list the various state regulatory agency contact information on their websites. Although you will need to complete the required forms on your own, we will do our best to help you in your efforts.

### **SUMMARY AND ACTION ITEMS**

### Review of the terms:

- The title of my profession is Marriage and Family Therapy and/or Professional Clinical Counselor.
- The title of my **license** is Licensed Marriage and Family Therapist and/or Licensed Professional Clinical Counselor.
- The title of my degree is Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy.

### Have I done the following?

Read the remainder of the MFT Handbook.
 Read the GSEP Catalog.
 Read the Psychology Division "Policies & Procedures."
 Send completed membership application to CAMFT, AAMFT, CALPCC or ACA
 Consider joining other professional organizations.

### **JOB DESCRIPTIONS**

### MFT/PCC Trainee, MFT/PCC Associate, Licensed MFT & PCC

The following definitions are taken from the California Business and Professions Code specifying the legal parameters and scope of practice, both before and after licensure as an LMFT (see Chapter 13, Sections 4980.02, 4980.03, 4980.43 and 4980.44). The legal parameters and scope both before and after licensure as an LPCC are designated in Sections 4999.12-51).

### "MFT Trainee" & "PCC Trainee"

An unlicensed person who is currently enrolled in a state-approved graduate degree program, has completed at least 12 semester units of coursework in that program, fulfilled practicum course prerequisites and who performs MFT and PCC services under supervision and who has a written "4-Way Agreement" on file in the Clinical Training Department. (See page 40 for details about gaining hours.)

### What this means:

- You are still in school and have completed 12 units of coursework at Pepperdine.
- You have signed the "Acknowledgment of BBS Requirements."
- You may NOT gain any hours in private practice, even as a volunteer (see below).
- You may be paid a salary by a non-profit or charitable corporation, school, college or university, government entity or licensed health facility but you may NOT be paid directly by your clients.
- You may also work in additional settings in the manner defined by law and as defined in Business and Professions Code:
  - A. Lawfully and regularly provides mental health counseling or psychotherapy.
  - B. Provides oversight to ensure that the trainee's work at the setting meets the experience and supervision requirements set forth in this chapter and is within the scope of practice for the professions.
  - C. Is not a private practice owned by a licensed marriage and family therapist, a licensed professional clinical counselor, a licensed psychologist, a licensed clinical social worker, a licensed physician and surgeon, or a professional corporation of any of those licensed professions.
- You must inform your clients before starting therapy that you are unlicensed and are working under the supervision of (your supervisor's name).
- As an MFT Trainee, you may count up to 1,300 hours of pre-degree experience. As a PCC Trainee, you must complete at least 280 hours of face-to-face counseling with clients to graduate, but no counseling hours gained as a Trainee count towards licensure.
- The office of Clinical Training must approve the practicum experience for every MACLP student.

### **No Private Practice for Trainees?**

The regulations that restrict MFT and PCC Trainees from working in private practice were adopted to protect Trainees. It is believed that a private practice is vulnerable to economic and other pressures that a public, non-profit agency is not. Although it is an obvious generalization, private practitioners are responsible only to themselves and have the freedom to move about more or less at will. The Board is concerned that a Trainee in private practice could be left "high and dry" if the supervisor were to suddenly abandon his or her office.

In addition, the Board is concerned that the economic pressures upon a private, for-profit venture might be placed upon the Trainee, who would then be required to perform duties beyond those appropriate for his or her level of education and ability. LMFT and LPCC Associates, with their M.A. degrees and practicum experience, are thought to be more knowledgeable about the possibility of exploitation.

### "MFT and PCC Associate"

An unlicensed person, who has earned a qualifying masters or doctoral degree, is registered with the BBS and performs MFT or PCC services under supervision.

### What this means:

- You have graduated with your M.A. in Clinical Psychology (MACLP degree).
- You have registered with the BBS as an MFT or PCC Associate (see page 56 for instructions).
- You may work, under supervision, either in private practice or in a non-profit venue.
- You may be paid by your supervisor or employer, but NOT paid directly by your clients.
- You must inform your clients before starting therapy that you are "unlicensed and are working under the supervision of (your supervisor's name)."
- You must earn at least 1,700 hours post-M.A. as an MFT Associate and at least 3,000 hours post-degree as a PCC Associate.
- While working on Associate hours, you must renew your registration annually. Five renewals are allowed, for a
  total of six years in which to gain hours as an Associate.
- You must furnish your new supervisor with your previous supervisor's name and address.

Important: Upon graduation, you may register with the BBS as <u>either</u> a MFT Associate <u>or</u> PCC Associate or <u>both</u> if you have satisfied the practicum requirements of the respective professions.

## "Licensed Marriage and Family Therapist" (LMFT) or "Licensed Professional Clinical Counselor (LPCC)

What it means to be a licensed LMFT or LPCC:

- You have fulfilled all of the academic and experiential requirements for the license, and have passed all required examinations for Licensure.
- You may work independently in private practice.
- You may get paid directly by your clients or their health care providers.
- You may call yourself a Licensed Marriage and Family Therapist or a Licensed Professional Clinical Counselor.
- After two years of practice, you may begin to supervise your own Trainees and Associates, following the requirements for supervisors in effect at the time.
- You are eligible to join CAMFT and AAMFT as full Clinical Members. As an LPCC you are eligible to join CALPCC as a full Clinical Member.

### **SUMMARY AND ACTION ITEMS**

### MFT or PCC TRAINEE:

- still in school
- no private practice
- must be supervised

### REGISTERED MFT or PCC ASSOCIATE:

- completed qualifying MA degree
- · can work in private practice
- must be supervised

### **LICENSED LMFT or LPCC:**

- completed M.A. + 3,000 hours + passed licensing exams
- can work independently
- 1.\_\_\_\_Read, sign and file "Acknowledgment of BBS Requirements" with your CTC staff.
- 2. \_\_\_\_Follow your academic degree program.

### THE MACLP CURRICULUM: 60-66 UNITS

### **Program Levels**

The MACLP curriculum has two levels: foundation and core.

Effective Fall of 2014, students who have an undergraduate degree in psychology or a closely-related field, will not have to take foundation courses.

Since many of our students have not had academic backgrounds in psychology, we offer courses at the graduate level that are usually part of an undergraduate degree in Psychology. These *foundation courses* prepare you for advanced study and should be taken first in your program. However, you are encouraged to enroll in a *core* course, PSY 606 *Interpersonal Skills and Group Therapy*, early in your course of study. The experiential nature of this course can provide a good introduction to your graduate program.

Some students delay the inevitable by waiting until the end of their programs to take courses that they think will be difficult (perhaps they are saving the best for last!). Don't be tempted; it is wise to take the foundation courses first as they will better prepare you for the core courses.

### Length of Time to Complete the Program

How long it takes to complete the master's degree depends on a variety of factors. Even with an undergraduate background in psychology, students rarely finish the required 60 units in fewer than

two years. To complete all foundation, core, and clinical practicum, a total of 66 units, will probably take a bit more than two years.

The BBS doesn't care how long you take to complete your degree, but Pepperdine does: The GSEP Catalog gives a *seven-year limit* for finishing a master's degree. If you need an extension on this limit, please put your request in writing to Robert de Mayo, PhD, Associate Dean, Psychology.

### **Continuous Enrollment and Leave of Absence**

Students who temporarily drop out of school may find that degree requirements have changed during their absence. To keep curricular modifications to a minimum, it is a good idea to remain continuously enrolled until you graduate. This means that you must enroll in at least one course during each of the Fall and Spring semesters. (Enrollment in the Summer Sessions is optional, although students in practicum settings may need to take Practicum during the summer.) Students who are absent for two or more years must reapply to the program and comply with admissions and program requirements in effect at the time.

The above notwithstanding, we understand that choice and chance do not always create manageable situations. If there are circumstances in your life that require you to suspend your academic progress temporarily, please do not hesitate to contact us. We want you to succeed and will do our best to assist you in maintaining continuity in your program.

**IMPORTANT:** If you are going to take a temporary break from school, including the summer sessions, please call or email your academic advisor. They will need to make sure that you receive the necessary paperwork for pre-registration upon your return.

### THE MACLP CURRICULUM: REQUIRED COURSES

### FOUNDATION LEVEL (eligible for waiver or transfer):

PSY	TITLE	UNITS
657	Psychopathology	3
659	Principles and Theories of Learning	3

### MAXIMUM UNITS = 6

(IMPORTANT: Foundation courses should be completed before core courses.)

### CORE CURRICULUM (eligible for transfer only):

PSY	TITLE	UNITS	PREREQUISITES
600 603* 606	Diagnosis and Treatment of Mental Health Disorders Assessment of Individuals, Couples and Families Interpersonal Skills and Group Therapy	3 3 3	657 626
612	Theories of Counseling and Psychotherapy	3	
622	Multicultural Counseling	3	
623 624 626	Ethics and Law for Mental Health Professionals Individual and Family Treatment of Substance Abuse Research and Evaluation Methods for Mental Health	3 3	606, 612 600, 606, 612
	Professionals	3	
627 628	Psychopharmacology for Mental Health Professionals Human Sexuality and Intimacy	3 1	600
637 639 640	Techniques of Counseling and Psychotherapy Couple and Family Therapy I Couple and Family Therapy II	3 3 3	600, 606, 612 600, 606, 612 639
642	Mental Health Systems, Practice and Advocacy	3	622, 639, 640 +1 semester 662
658	Individual, Couple & Family Development: A Life		
	Cycle Approach	3	
661 662	Preparation for Practicum Clinical Practicum	2 2	600, 606, 612, 623 600,606,612,623, 637,639,661
662 662 668 669 671	Clinical Practicum Clinical Practicum Clinical Interventions with Children & Adolescents Trauma in Diverse Populations Career Development Theories and Techniques	2 2 3 3 3	same as above + 662 same as above + 662 658 600

### MINIMUM UNITS = 60

\*Although they are not prerequisites, PSY 600, 612 and 639 are useful courses to take before PSY 603.

### **Prerequisites and Course Scheduling**

Prerequisites represent the faculty's attempts to ensure student readiness for new course content. In planning your schedule, *you must attend to prerequisites*. Attempts to enroll in a class without having taken its prerequisite will be blocked by the computer registration. (*Please note that concurrent enrollment in a course and its prerequisite is not permitted.*)

### PREVIOUS COURSEWORK

If you have taken psychology courses *before* entering Pepperdine, you may be able to waive or transfer a required course.

### Waiving a Course

If you have taken one or more courses at the undergraduate or graduate level that are equivalent to courses in the foundation level, you may be able to use them *in lieu of* foundation courses. (Note that you must still complete a minimum of **60** units to graduate). Courses used as waivers must be recent (taken within the past seven years), must have been earned at an accredited college or university and must have a grade of "B" or better on your transcript.

The curriculum sheet that you received at admission will inform you of any foundation courses that have been waived based on your previous coursework. If it is not clear whether or not a course is equivalent, you will be asked to provide supporting documentation such as syllabi, texts, exams, and class notes. Only foundation level courses can be waived; in the MACLP program these are: PSY 657 and 659.

### **Transferring a Course**

If you have previously taken a *graduate-level* course that is equivalent to either a foundation level or core course, you may petition to have that course transferred, rather than take the equivalent course at Pepperdine. Up to six (6) semester units may be transferred and/or challenged. (See discussion under "Total Unit Limits" below.) Courses eligible for transfer credit must be recent (taken within the past seven years), must have been earned at an accredited college or university and must have a grade of "B" or better on transcript.

If you believe that a previous graduate course is equivalent to an existing MACLP course, you may file a "Petition to Transfer Coursework" with the program administrator for admissions and provide supporting documentation as requested. A transferred course becomes part of your Pepperdine transcript and counts toward degree requirements. The grade recorded on the transcript will be "CR" for credit; letter grades are not awarded for transfers.

Again, whenever possible, verify with specific out-of-state licensing boards that a transferred course will be acceptable to them.

#### Semester vs. Quarter Units

Schools offer courses in semester or quarter units, depending on contact hours and number of weeks of class. A semester is 15 weeks long and a quarter is 10 weeks long. The difference in course length means that the units differ in value: 5 quarter units = 3 semester units. Pepperdine courses are offered in semester units. Courses that are used for waiver or transfer must not only be equivalent in content, but they must also have equivalent unit value.

#### Transfer of Units

Although you may waive as many of the foundation courses for which you are eligible, the number of units you may transfer is limited to six (6) units total. Limits on transfers function as a residency requirement, in which schools maintain control of the quality of most of the academic experience required for their degrees (accrediting bodies prefer this). Please refer to the Psychology Division's **Policies and Procedures** for more information.

### **Need Additional Units for the Degree?**

The MACLP degree must contain at least 60 units. Transferred/waived courses (see above) count toward this total. If additional units are needed to fulfill the 60-unit requirement for graduation, students may enroll in seminars, electives or independent study. Check the course schedules or see your academic advisor for assistance.

# THE MASTER OF ARTS IN PSYCHOLOGY (MAP DEGREE) AND THE MFT LICENSE

### MACLP Degree Needed for the LMFT and LPCC License

Students in the **Master of Arts in Psychology (MAP)** program often plan to enter a doctoral program or work in the field when they graduate. If these plans don't work out, MAP program graduates may decide to pursue the LMFT or LPCC license instead. Unfortunately, it is not possible to **add** MACLP courses to the MAP degree. It would be necessary to transfer programs. California law specifies that all coursework must be taken within a program that is approved by the BBS and meets state regulation for licensure. The MAP degree is not acceptable for the LMFT or LPCC license.

### MAP Student Transfers to the MACLP Program

Students in the Master of Arts in Psychology (MAP) program who wish to transfer to the MACLP program must file a formal request. The application will be evaluated by the MACLP Admissions Committee; admission is not guaranteed. Here is the procedure to follow:

- 1. Contact your academic advisor to discuss the process to request a change of programs.
- 2. Follow the admission procedures described on the form. (An updated personal statement describing the applicant's reasons for changing programs is required.)
- 3. Upon acceptance into the MACLP program, read the LMFT/LPCC Handbook in its entirety.
- 4. Complete and sign an "Acknowledgment of BBS Requirements." (See Appendix III, pg. 65).
- 5. Follow the curriculum listed for the MACLP program, page 16 (See also the discussion of PSY 603, Assessment for Marriage and Family Therapists, below.)
- 6. Be sure NOT to graduate until you have completed all MACLP degree requirements. If you have already applied to graduate, notify the Manager of Records and Enrollment at the West Los Angeles Campus that you have changed programs and wish to postpone graduation. *Once issued, a degree cannot be rescinded*.

### THE ASSESSMENT REQUIREMENT

#### MAP Transfer Students DO take PSY 603

The instruments covered in PSY 601, *Assessment of Intelligence*, and PSY 602, *Personality Assessment*, focus on the individual, not the relationship. The emphasis of PSY 603 is on the assessment of *relationships*, although individual testing is covered as well. MAP transfer students must take PSY 603 to be eligible for licensure in the state of California.

### **CAREER AND PROFESSIONAL ISSUES**

The results of CAMFT's **2015 Member Practice Demographic Survey** available from CAMFT in the September/October 2015 issue of *The Therapist* lends empirical support for an optimistic view of practice patterns. Here is one important highlight: 20% of licensed therapists surveyed earned between \$65,000 to \$80,000 annually. Appendix I of this MFT Handbook and the September/October 2015 issue of *The Therapist* lists a sampling of findings from the CAMFT survey.

### **Can MFTs Conduct Psychological Testing?**

This is a controversial and often misunderstood area involving arguments of restriction of trade, scope of practice, competence, and similar issues. Under the licensing act, an LMFT or LPCC may administer, score and interpret tests of *intelligence*, *aptitude*, *and personality* (traditionally referred to as "psychological tests") ONLY if <u>each</u> of the following conditions is met:

- The LMFT or LPCC has received adequate training in the instruments used for assessment and is competent in their use. (Competence is defined by general standards for the profession, based on education and supervised training.)
- The tests are used for the purpose of assessment and treatment of the licensee's **own** clients. MFTs cannot hire out their services to test people who are not their clients.
- The activity is **not** called psychological testing.

Do you have questions regarding your future as a professional and the opportunities that exist in professional practice? (Who doesn't?) Do you wonder how to work within the current health services

environment? Where are the jobs for LMFTs and LPCCs? These and similar questions are addressed in **PSY 642, Mental Health Systems, Practice and Advocacy.** 

# PSYCHOLOGY CAREER SERVICES DEPARTMENT FOR PSYCHOLOGY STUDENTS

GSEP Career Services operates from an innovative model of career education and holistic career counseling for today's rapidly changing job market. We help students and alumni construct their career narrative, build lifelong employability skills, and connect with alumni and industry leaders in order to strengthen their lives for purpose, service, and leadership. If you need assistance with your resume or cover letter, GSEP Career Services offers "Virtual 30" Self-Marketing Consultations via Zoom. To schedule a 30-minute consult, simply log onto your Handshake account via Wavenet, and click on "Career Center"-->"Appointments" (<a href="https://app.joinhandshake.com/appointments">https://app.joinhandshake.com/appointments</a>). Also, find sample psychology resumes and cover letters under "Career Center"-->Resources."

Before working on your self-marketing materials, however, it may be helpful to clarify your purpose and career direction. GSEP Career Services offers face-to-face career counseling appointments to help you construct your career narrative. To schedule a face-to-face appointment, email gsep.careerservices@pepperdine.edu.

### CONTINUATION IN THE PROGRAM

The MACLP program is designed to prepare students to become entry-level psychotherapists who are licensed as MFTs and PCCs. The assessment, diagnosis and treatment of people in crisis or with ongoing problems require considerable knowledge and skill. But in addition to competence, the practice of psychotherapy (as well as BBS regulations!) requires the personal qualities of maturity, integrity, judgment, compassion and flexibility on the part of the therapist. Thus, there are two sets of criteria for continuation in the MACLP program: academic and behavioral.

### **Grade Point Average**

Students must maintain a 3.0 grade point average. If the G.P.A. falls below 3.0, the student has only one term to raise it to 3.0. Grades of "C" or lower will lead to a review of the student's academic record and possible remediation.

### Incomplete (I) and In Progress (IP)

Life's emergencies do not respect final exams; at times, they seem perversely drawn to the end of the term! A grade of "Incomplete" is a temporary grade that is given to a student who is passing the course and who, at the end of the term, cannot complete all course requirements due to factors beyond their control. A grade of "In Progress" is used for students enrolled in PSY 662, Clinical Practicum, who cannot complete all course requirements by the end of the term. "Incompletes" are not to be used to "buy" extra time to bring up a low grade. Please be aware that if it is not completed by the end of the *following* term, an "Incomplete" grade will automatically convert to an "F "or "No Credit". You will not be able to receive credit towards practicum if you are on

a leave of absence. If you are having difficulty in your academic program and/or personal life and cannot finish your coursework on time, please speak with your instructor. If you find that you must temporarily suspend your education, you may apply for a temporary withdrawal (Leave of Absence). In most cases, if you re-enroll within six months, your financial aid repayment schedule will not be affected. Call Financial Aid for details.

### **Academic/Grading Standards**

Many students feel that they MUST get an "A" in each course. For these students, an "A-" will not do and a grade of "B" or "B+" is thought of, mistakenly, as "failing." We wish to encourage you to do excellent work, to study very hard and to learn all that you can — the profession of marriage and family therapy is difficult and demands your level best. Please don't let the pursuit of a letter grade become more important than the level of knowledge that it implies.

A grade of "A" should indicate exemplary accomplishment in a course. A grade of "B" should indicate satisfactory class work. A grade of "C" should indicate substandard work, and is to alert the student to deficiencies in academic performance. Plus and minus grades may be assigned for intermediate grade achievement.

### **Behavioral Standards**

The GSEP Catalog addresses nonacademic matters, thus:

In addition to meeting academic standards for graduation, students are expected to meet generally accepted behavioral criteria for mental health professionals. Relevant areas include, but are not limited to, following appropriate ethical-legal standards, demonstrating reasonable maturity in professional interpersonal contacts, and remaining relatively free of interpersonal-emotional behaviors that could constitute a potential threat to the welfare of the public to be served. (GSEP Catalog, 2018-19, page 190).

### **Evaluation of Students' Suitability to Become Therapists**

The BBS has given the educational institutions the responsibility to ensure that their graduates demonstrate personal characteristics and interpersonal skills appropriate to the practice of psychotherapy. Supervisors, agency directors and the BBS strongly request that the schools screen their students for obvious psychopathology, severe emotional immaturity or questionable ethics and they not send these students on to clinical sites.

Please note that on an ongoing basis or by request of the MACLP Program Director (either Daytime or Evening Format), faculty who teach MACLP students are asked to communicate with the MACLP Program Director and Clinical Training staff about any student whose behavior in or around class or practicum sites may lead them to question the student's suitability to work with the public as a psychotherapist. Program and GSEP staff are also asked to provide their impressions of students based on their interactions with them.

Because it is the goal of the MACLP Program faculty and staff to maintain the integrity of the program, aspire to ensure the wellbeing of mental health consumers receiving services from their students and facilitate students' successful completion of the program, evaluations of student conduct and academic performance are taken very seriously. The MACLP Program Director, in concert with

Clinical Training staff and/or faculty members, may require discussions with a student who has presented significant emotional, behavioral, or academic concerns to the faculty and staff. These discussions may result in requirements of student rehabilitation to include faculty or peer-mentoring and specific evidence of rehabilitation in order for the student to continue in the program. There may also be requirements for ongoing monitoring of the student's rehabilitation to ensure the successful resolution of the problems.

The student may choose to concur with these requirements or decide that they do not agree with the decisions. If there is no consensus between the Program Director, staff or faculty and the student, the matter can be referred to the MACLP Faculty Panel.

### **MACLP Faculty Panel**

The MACLP Faculty Panel, a sub-committee of the MACLP Committee, will request information about the situation from faculty, staff, clinical supervisors and other professionals, where relevant. The student will also be invited to share his or her own experience. The Faculty Panel will assess the situation and make its recommendations to the Associate Dean and to the student. If it is decided that there is a problem that should be addressed, a variety of remediation plans are possible. In extreme cases of an ethical or legal violation, a student may be put on probation or dismissed from school.

\*Note: Information disclosed during the "group therapy" portion of PSY 606, Interpersonal Skills and Group Therapy, is *confidential*. Faculty who teach this course may not reveal this information to the MACLP Program but are encouraged to discuss their concerns directly with the student.

### Personal Therapy: Should You Become a Client?

The BBS encourages those who apply for an LMFT or LPCC license to undergo their own personal therapy. Pepperdine does not require its MACLP students to undergo personal therapy, but we solidly recommend it. Page 190 of the 2018-19 GSEP Catalog states:

The psychology faculty and administration strongly recommend personal therapy for all students training to be psychotherapists since it is believed that personal therapy is a vital component of the training and growth of the psychotherapist and that it is the professional responsibility of every therapist to identify, address, and work through personal and relational issues that may have an impact on clinical interactions with future clients.

Personal therapy may increase your chances of securing a practicum site when it comes time to find a site for practicum and/or your post-degree Associateship. There are some top-notch agencies that will *only* consider applicants of their trainee or Associate positions who have already been in therapy or who are currently involved in psychotherapy. If you are planning on continued study in a doctoral program, or even if you are not, personal therapy may demonstrate your sensitivity to the issues of being a client in therapy.

The members of the Clinical Training staff have a list and of Pepperdine graduates who are licensed therapists and Associates offering to see students at lower fees. Or, ask your fellow students or faculty for referrals. Just remember that your therapist cannot be your clinical supervisor - now, in the past, or in the future.

### **CLINICAL PRACTICUM EXPERIENCE**

In addition to earning a qualifying master's degree, applicants for the LMFT/LPCC license must learn how to do therapy. This training occurs when pre-licensed individuals, both trainees and Associates, see clients and receive supervision on therapy performed with those clients. For LMFTs a complete list of requirements may be found in BPC Section 4980.36. For LPCCs, a complete list of requirements may be found in BPC Section 4999.30-64.

### Collecting BBS LMFT Hours: Required and Allowed Activities

Current BBS requirements include 1,750 hours of direct clinical counseling (500 of those must be experience in diagnosing and treating couples, families, and children). The remaining 1,250 hours may be a maximum of non-clinical experience (direct supervisor contact, client centered advocacy, writing reports, or attending workshops or conferences).

### Collecting BBS/LMFT Hours: Overview of the Process

- You must take at least two years (104 weeks) to gain your hours; 52 weeks must occur post degree.
- You may credit no more than 40 hours of experience (except for "workshop hours") for any week. This includes categories: client contact, supervision, workshops, and progress notes.
- For any week in which you wish to count experience, you must have at least one (1) hour of individual or two (2) hours of group supervision. *No supervision, no hours!*
- For every five (5) hours of client contact you gain as a trainee, you need either one hour of individual or two hours of group supervision. (As an Associate, you may work ten client hours for the same amount of supervision). Note: see "How to Calculate Supervision Ratios" on page 51.
- During practicum, you must gain a minimum of 225 supervised hours of which 150 must be direct client contact hours. The 75 additional hours can be credited for direct client contact and/or client centered advocacy.
- Practicum class time is NOT counted as part of your supervised experience; it is counted as part of your 60 academic units.
- You may count up to 1,300 hours before graduation (of the 1,300 hours, a maximum 750 can be Client Contact AND Supervision hours).
- After graduation, you must gain at least 1,700 hours.
- All hours that you wish the board to evaluate for license requirements must have been earned
  within the six (6) years preceding the date you apply for the exam. (See "LMFT Clock," page 58.
  However, the Board will evaluate up to 500 hours gained during practicum, even if they were
  earned more than six years before filing for the exam.
- LMFT/LPCC student Trainees can fulfill practicum requirements for training at sites only after Pepperdine GSEP, Office of Clinical Training and Professional Development, has approved the site and signed a 4-Way Agreement with the site.

### Collecting BBS/LPCC Hours: Overview of the Process

The requirements for LPCC licensure are the same for LMFT licensure, <u>therefore, for students</u> <u>interested in qualifying for both the LPCC license and the LMFT license, hours gained can be</u> "double-counted", except for the following:

- 1. The 280 hours of PCC Traineeship do not count toward licensure, therefore
- 2. All 3,000 hours must be gained as a PCC Associate (post degree).
- 3. There is no credit for client centered advocacy for PCC Trainees
- 4. PCC Associates need to accrue at least 150 hours of clinical experience in a hospital or community mental health setting.

(See additional information on the BBS website regarding PCCI hours, <a href="http://www.bbs.ca.gov/lpcc\_program/">http://www.bbs.ca.gov/lpcc\_program/</a>).

### Clinical Practicum Experience: Pepperdine's Legal Responsibility

Students are often curious about how soon they can begin to earn their 3,000 hours but for <u>clinical</u> hours to count, the LMFT/LPCC student must have Pepperdine's *formal approval* of the supervised experience, as follows:

On and after **January 1, 1995**, all hours of experience gained as a trainee shall be coordinated between the school and the site where the hours are being accrued. **The school shall approve each site** and shall have a *written agreement* with each site that details each party's responsibilities, including the methods by which supervision shall be provided. The agreement shall provide for regular process reports and evaluations of the student's performance at the site.

—Section 4980.42 (b) of Business and Professions Code

For an LPCC Clinical Counselor Trainee, BPC 4999.34: "A clinical counselor trainee may be credited with pre-degree supervised practicum and field study experience completed in a setting that meets all of the following requirements:

- (a) Lawfully and regularly provides mental health counseling and psychotherapy.
- (b) Provides oversight to ensure that the clinical counselor trainee's work at the setting meets the practicum and field study experience and requirements set forth in this chapter and is within the scope of practice for licensed professional clinical counselors.
- (c) Is not a private practice
- (d) Experience may be gained by the clinical counselor trainee solely as part of the position for which the clinical counselor trainee volunteers or is employed."

4999.36. (a) A clinical counselor trainee may perform activities and services provided that the activities and services constitute part of the clinical counselor trainee's supervised course of study and that the person is designated by the title "clinical counselor trainee."

(b) All practicum and field study hours gained as a clinical counselor trainee shall be coordinated between the school and the site where hours are being accrued. The school shall approve each site and shall have a written agreement with each site that details each party's responsibilities, including the methods by which supervision shall

be provided. The agreement shall provide for regular progress reports and evaluations of the student's performance at the site.

- (c) If an applicant has gained practicum and field study hours while enrolled in an institution other than the one that confers the qualifying degree, it shall be the applicant's responsibility to provide to the board satisfactory evidence that those practicum and field study hours were gained in compliance with this section.
- (d) A clinical counselor trainee shall inform each client or patient, prior to performing any professional services, that he or she is unlicensed and under supervision.
- (e) No hours earned while a clinical counselor trainee may count toward the 3,000 hours of post-degree Associateship hours.
- 4999.40. (a) Each educational institution preparing applicants to qualify for licensure shall notify each of its students by means of its public documents or otherwise in writing that its degree program is designed to meet the requirements of Section 4999.32 or 4999.33 and shall certify to the board that it has so notified its students. (b) An applicant for registration or licensure shall submit to the board a certification by the applicant's educational institution that the institution's required curriculum for graduation and any associated coursework completed by the applicant does one of the following:
  - (1) Meets all of the requirements set forth in Section 4999.32.
  - (2) Meets all of the requirements set forth in Section 4999.33.
- (c) An applicant trained at an educational institution outside the United States shall demonstrate to the satisfaction of the board that he or she possesses a qualifying degree that is equivalent to a degree earned from an institution of higher education that is accredited or approved. These applicants shall provide the board with a comprehensive evaluation of the degree performed by a foreign credential evaluation service that is a member of the National Association of Credential Evaluation Services and shall provide any other documentation the board deems necessary.

Remember, that for the LPCC license, hours earned at a practicum site count towards the degree <u>only!...BUT</u> do not count towards satisfying the 3,000 hours of clinical experience required for licensure – those 3,000 hours must be earned <u>post-degree!</u>

Before these laws were passed, Trainees were pretty much on their own in finding good supervision and reputable sites. LMFT/LPCC programs could either take a great deal of interest in their students' training or none at all. Although most agencies employed conscientious supervisors, there were far too many examples of trainees with considerable responsibility for client welfare working under inadequate supervision. Understandably, Trainees may be reluctant to challenge the *status quo* with their sites or supervisors; the schools are in a far better position to ensure quality training by approving the practicum experience of each student. Clearly, this law benefits both student and consumer alike.

	Get the "scoo	op" on your hours with our "journalist's questions":
I	WHO? WHAT?	Students in the MACLP program, Gain supervised hours,
I	WHEN? WHERE?	While enrolled in Clinical Practicum (PSY 662), At a site which meets the BBS requirements
	HOW?	With a written agreement (the "4-Way Agreement"),
I	WHY?	To comply with state law.

### What is Clinical Practicum?

Clinical Practicum is a structured **three-course sequence** (**two of the three terms must be 15-week semesters**) in which LMFT/LPCC students gain clinical hours by working under supervision at approved clinical sites, while attending a practicum class concurrently. Students have on-site supervisors who assume both legal and ethical responsibility for students' clinical work; the practicum class is similar to a case management seminar during which students discuss their clinical cases and receive feedback from both the practicum instructor and their classmates regarding clinical issues and treatment.

Practicum also allows us to "encourage students to develop those personal qualities that are intimately related to the counseling situation such as integrity, sensitivity, flexibility, insight, compassion, and personal presence." —Business & Professions Code, Section 4980.37(e4).

Note: The Program Director, in concert with faculty and/or clinical training and professional development staff members, may require a student, who has presented to University faculty or staff or practicum site personnel significant emotional, behavioral, or academic concerns that could adversely impact the student's ability to provide clinical services to the public, to engage in discussions with the Program Director regarding the student's continuation in the program. These discussions may result in the Program Director requiring that the student meet certain conditions to continue in the program, including, but not limited to, ongoing faculty or peer monitoring, delayed entry into or temporary suspension of clinical work, and/or audit (e.g. attend and participate in class without receiving course credit) a practicum course prior to entry into a clinic site.

## Why Must You Be Enrolled in PSY 662 – Clinical Practicum, to Have Your Experience Approved?

Students are legally defined as "Trainees" after completing 12 semester units in the MACLP program and have a written agreement (4-Way Agreement) on file in the Clinical Training Department. Pepperdine does not sanction the acquisition of clinical experience until students have enrolled in PSY 662 – Clinical Practicum. The MACLP Committee believes that the most effective way to carry out the coordination and approval function mandated by state law is to use

the Clinical Practicum class to monitor the clinical training experience of our students and to encourage their growth as therapists. The course structure also allows us to collect evaluations from supervisors, students and practicum instructors, serving as the "regular progress reports" required by law.

As of August 1, 2012, the BBS requires that LMFT students are concurrently enrolled in Clinical Practicum (PSY 662) while earning clinical hours. Therefore, if you have additional practicum requirements to complete beyond your third practicum class, you will need to enroll in a 4th practicum class if you have not completed the minimum clinical hour requirements for graduation.

If you enroll in your third term of Practicum in Summer Session I and plan to graduate in Summer Session II, then MFT hours may count towards licensure and LPCC hours may count towards the 280 hours required to graduate. If you have completed 225 hours for MFT and wish to continue earning LPCC hours only, you do not need to enroll in a 4<sup>th</sup> practicum class. Most malpractice insurance carriers will enroll pre-licensed persons only when their work in clinical settings is part of their educational requirements. You are not required to work in a clinical setting until you take Clinical Practicum. Thus, you may not be able to get insurance if you are not formally enrolled in this course (see page 7 and 34 for additional details on insurance.)

### **Does Pepperdine Actually Approve Hours?**

By law, only the Board of Behavioral Sciences has the authority to approve hours and does so at the time you file your application for the license exam. However, the board has given considerable responsibility to both supervisors and graduate schools for guiding and evaluating students' clinical experience. Supervisors verify the hours of their Associates and trainees by signing both weekly logs and Experience Verification forms. Schools attempt to ensure that their students' clinical sites will provide supervision and clinical experience that is consistent with statutes and regulations.

Thus, Pepperdine approves each trainee's clinical experience in general, but not his or her hours per se. However, only those hours gained in an approved site with a written agreement between the school and the site will count toward LMFT licensing requirements and/or practicum class. Again, the 280 hours of direct client contact required for LPCC Practicum are not counted towards the 3000 hours. It is imperative that your 4-Way Agreement is turned into the Clinical Training Department at your campus, for hours to begin accruing.

### When to Take Practicum: It Depends

Students may receive conflicting advice about when to take Practicum - as soon as humanly possible or during their final three terms. Each plan has its relative merits. Students who first take all practicum prerequisites may start gaining hours sooner but they will probably have "leftover" academic classes. In addition, if students planning to become an MFT Associate wish to keep gaining hours at their clinical sites after completing their third practicum course, they must be concurrently enrolled in a 4<sup>th</sup> or 5<sup>th</sup> practicum class. (As a reminder, PCC Associates only need to be enrolled in 6 units of practicum.)

On the other hand, students who wait until the last year of their program to take Practicum may be better prepared academically but they won't get exposure to clinical issues as soon. Given these considerations, we recommend that students take practicum during their final three terms.

As a reminder, the LMFT requirement for pre-degree client hours is a minimum 150 client contact hours plus 75 additional contact hours and/or client centered advocacy hours. The LPCC requirement for pre-degree hours is 280 client contact hours (client centered advocacy hours do not count).

### **Practicum Prerequisites**

We also want to give our students a head start when they go out into the field. Prerequisite courses for Practicum help make the first clinical experience a positive one. From most reports, Pepperdine LMFT Trainees have a very good reputation throughout the training sites and are academically well prepared when they go out into the field. Competence at the student level is important for client welfare and for the maintenance of good professional relationships with our supervisors and agency directors.

Before taking Practicum, students must have completed the following prerequisite courses in assessment, diagnosis, case management, law and ethics, interpersonal communication and therapy with individuals, couples and families that provide the foundation for competent practice as a training therapist:

PSY 600	(Diagnosis and Treatment of Mental Health Disorders)
<b>PSY 606</b>	(Interpersonal Skills and Group Therapy)
PSY 612	(Theories of Counseling and Psychotherapy)
PSY 623	(Ethics and Law for Mental Health Professionals)
PSY 637	(Techniques of Counseling and Psychotherapy)
PSY 639	(Couple and Family Therapy I)
PSY 661	(Preparation for Practicum)

### **PSY 661 – Preparation for Practicum**

This course addresses common questions and concerns students have prior to beginning clinical work at their practicum sites. Students are taught how to prepare for beginning stages of therapy, how to effectively utilize consultation and supervision, how to deal with clients in crisis, advocacy practices, and other practical skills such as completing case notes, treatment documentation and recording clinical hours toward licensure Special attention is given to recovery-oriented practices and intervention with diverse individuals, couples, families and communities, and those who experience severe mental illness. Students must register for PSY 661 one term before beginning Clinical Practicum (PSY 662). Prerequisites: PSY 600, 606, 612, and 623.

In order to remain enrolled in practicum class, students must have secured an approved practicum site and have a 4-Way Agreement signed and submitted to your CTC by Thursday of the first week of their practicum class.

Where to Find a Clinical Practicum Site

To gain countable hours, students must be approved to work in sites that have been screened by the MFT Clinical Training staff. Information on sites where students have earned LMFT/LPCC Trainee hours is accessible on Handshake, the web-based **Practicum Site Directory**. By searching Handshake, LMFT/LPCC students can view descriptions of sites throughout Pepperdine's four campus areas – WLA, IGC, EGC and Malibu. Sites listed in the Handshake Site Directory have been visited by phone and/or in person by the Clinical Training staff, who have judged that the agency and its supervisors provide an experience consistent with Pepperdine's philosophy of training, BBS law, and level of student skills. Students can access their Handshake account through Wavenet.

### PRACTICUM SITE RESOURCES

For a clear explanation of what the Office of MACLP Clinical Training and Professional Development can do for you, visit:. <a href="https://gsep.pepperdine.edu/degrees-programs/workshops/professional-development-workshops/contact/">https://gsep.pepperdine.edu/degrees-programs/workshops/professional-development-workshops/contact/</a>. You will find links to the required Clinical Practicum paperwork and the Practicum resources and events available to MFT students, as well as a list of important events (from Quick Meets to Practicum Mentor Fairs) that you will need to attend throughout the program. Additionally, the BBS website has necessary forms (www.bbs.ca.gov).

Students are eligible for Practicum credit and *Pepperdine* approval of hours when they are working in sites that have been evaluated by the Clinical Training staff. It is possible to gain hours in a setting that is <u>not yet listed</u> in Handshake, but the site must first be evaluated.

### "Un-approved" Sites — How To Get Them Evaluated

To gain hours at an agency that is not listed in Handshake, you will first need to get it evaluated. Before going through the time and trouble to fill out the necessary forms, interview at the site or accept a position, please discuss the potential site with the Clinical Training staff! There may be a good reason why the site does not appear in Handshake. It may have never been included because of some aspect of the site that would make it ineligible for our trainees.

If there are no problems with the potential site that we are aware of, you will be given the following site approval forms with instructions:

- "New Practicum Site Affiliation Agreement"
- "Supervisor Responsibility Statement"

To allow for adequate time to review the site, return the completed forms to your CT staff no later than **4 weeks** before the start of the term in which you wish to enroll in practicum. The process of approving a site may take several weeks and does not guarantee that the site will be approved. Note: **Hours worked at a non-approved site will not count toward BBS requirements, nor will they fulfill the requirement for <b>Practicum course credit**.

### **Out-Of-State Sites**

To date, our attempts to accommodate students who have moved out of state <u>before</u> finishing their degrees have largely failed. One requirement of the BBS is that a student graduate from a single "integrated" program, not a program that has been pieced together between two or more programs. However, the BBS has recently cleared the way for students to gain their practicum experience outside of California. But challenges remain. The BBS will evaluate hours earned out of state, but it has been difficult for students to find approved sites as well as supervisors who would agree to supervise them and sign the required paperwork for both California and Pepperdine. Until recently, it has been impossible to find a university that would allow an out-of- state student to enroll in a practicum class. All things considered, it's probably more prudent to wait until you have completed your practicum requirement to relocate.

### HOW TO LOCATE AN APPROPRIATE PRACTICUM SITE

Although the prospect of locating a practicum site may seem intimidating, in actuality the steps to follow are relatively straight-forward. They are as follows:

### STEP 1: Learn about the process

- Begin your search for a site before enrolling in PSY 661, Clinical Practicum by researching
  possible practicum sites on Handshake, seeking volunteer experience and attending Clinical
  Training and Professional Development events. Inquire with CT Staff for specific "Handshake
  Student Instructions" to lead you right to the approved MACLP practicum settings to ensure
  that you are accessing the correct list of sites. (Remember that all practicum prerequisites
  must be completed before enrolling in PSY 662).
- Please note that we do not "place" you at a clinical site, rather, as a graduate student, you are expected to research the information about approved clinical settings and consider which sites may be the "best fit" for your clinical interests.

The CT staff will discuss important steps you should take to secure your practicum site and will answer questions on meeting practicum and BBS requirements via individual appointments and during Psy 661 presentations. At these informative sessions, you will receive up-to-date BBS forms that you will need during your practicum experience. You will be using these forms to document your 3,000 hours, so make multiple copies.

The "Practicum Tips" presentation, Practicum Site Powerpoint presentations and the Practicum Mentor Fairs will be held during your PSY 661 course (Preparation for Practicum). You are also encouraged to attend the Professional Development events offered each semester, such as field trips, Alumni Panels and Clinical Connections events as offered. These events are useful to identify clinical training interest areas and available agencies. Network with your fellow students via our "Practicum Mentor Program", as they are often the best sources of feedback on the Clinical Practicum settings. Additionally, each Handshake site profile lists sites' "Strengths and Challenges", compiled from anonymous students' feedback on their practicum experiences.

Career/Practicum Fairs are held in the spring term at the WLA, EGC, and IGC campuses, and in collaboration with OC and Long Beach CAMFT Chapters.

### STEP 2: Select and gather data on practicum sites (before and/or during PSY 661)

- Look through the Handshake MACLP database and select at least five (5) potential sites. It is often useful to hear what other students have said about a particular site. Drawing from our database of site-specific evaluative comments made by Pepperdine Trainees over the years, we can suggest practicum sites that are a good match for your personal training needs. For example, sites that offer considerable structure may be ideal for beginning Trainees, while sites that tend to provide more Trainee autonomy may be better for Trainees in their third term of practicum. (Keep in mind, however, that the majority of students stay at the same site throughout their Traineeship.)
- Review site strengths and weaknesses of various training sites on Handshake under the subheading "Student Feedback", or make an appointment with Kathleen, Rebecca, Alice or their Graduate Assistants depending on the geographical area in which the sites are located. Find out how students have reviewed the sites that interest you, as well as hear the recommendations of the CT staff for your practicum experience.
- Many sites have a web page, so you can learn more about a site by reviewing the information available online.

CAUTION: If you are interested in a particular site but don't see it listed in the directory, don't assume that we don't know about it and go for an interview! Our CT staff is aware of just about every appropriate practicum site in the greater Southern California area. **Before contacting a site that is not listed in Handshake, please consult the CT staff first!** 

To continue your search for a practicum site you will need the name of the contact person and the email address and/or telephone number of the agency. You will find that the initial steps for almost all of the sites are to email or telephone the contact person, send a résumé, and arrange an interview. It also helps expedite the possible approval of a new setting when the student facilitates the paperwork process with the CTC and the prospective site.

### STEP 3: Prepare a résumé and cover letter that are personalized for each site.

A résumé is a summary of your professional and educational history. The headings suggested on the next page represent a composite from a sample résumé. If you need assistance with your résumé or cover letter, please contact our Psychology Career Services Department at (310) 568- 5780 or <a href="mailto:GSEP.CareerServices@pepperdine.edu">GSEP.CareerServices@pepperdine.edu</a>. As a person entering the mental health field, your background should indicate interpersonal skills and potential strengths as a therapist. (On to the next page for a "sample" outline of a résumé ...)

# NAME ADDRESS, CITY/STATE ADDRESS OPTIONAL, JUST PUT CITY AND STATE PHONE NUMBER, EMAIL

**CAREER PROFILE:** One sentence stating your skills and what you want. Start with attributes that describe your skills, such as the ability to multitask and/or experience working with a diverse population.

Example: "Experienced professional with strong communication skills and an understanding of conflict resolution seeks to obtain supervised experience in marriage and family therapy that will meet BBS requirements for MFT licensure".

**EDUCATION:** List educational degrees in reverse chronological order, most recent first. Write out degree. Example:

**Pepperdine University, Graduate School of Education & Psychology,** Los Angeles, CA. Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy, Anticipated date of graduation (month/year).

**Any University,** Los Angeles, CA Bachelor of Arts in Psychology, (date is optional – month/year)

Graduated with Honors"

LANGUAGE: If bilingual or conversational...also include Sign-Language (if applicable)

**EXPERIENCE**: (can be full-time, part-time, research, or volunteer)...include title, agency name, city/state and dates of employment (month/year)

Example:

#### "MFT Trainee

ABC Agency, Los Angeles, CA"

- Use bullets to describe your job responsibilities
- Write each in the "Action+Results" format (for description, see below)
- Write current position in present tense and former positions in past tense

- Under recent or related position, list 4-5 bullets. Use 2-3 bullets for older jobs and jobs not related to the position you are seeking
- Be concise and to the point
- Write a paraphrase; do not end each phrase with a period.

#### **PROFESSIONAL AFFILIATIONS:**

Related to the job you are seeking (such as CAMFT or Psi Chi)

#### SKILLS:

Computer skills or other special skills (such as CPR or PART Trained)

References available upon request

(Optional, list references on a separate sheet of paper)

#### "Action + Results"

- Begin with an action verb to describe the type of work you did. Include a word that
  describes the results or intended results of your work.

  Example: "Coached parents on discipline techniques, communication, and boundary setting to
  foster responsibility in home, academic and social settings"
- Sample "results" words "resulting in", "to foster", "in order to...", "to ensure"
- "Action" words "facilitated", "coordinated", "assessed" (go to the Career Services website: http://gsep.pepperdine.edu/career-services/students-alumni/psychology/)
- Include verbiage in your resume to highlight your "people skills"



## REMEMBER TO EDIT YOUR WORK! CHECK FOR MISTAKES IN SPELLING, TYPING AND GRAMMAR! GIVE YOUR WORK A PROFESSIONAL APPEARANCE! NEATNESS IS PARAMOUNT!

#### STEP 4: Create a cover letter.

Taking the time to craft a cover letter now will definitely pay off. A cover letter shows the agency directors and employers that you have the skills and characteristics they are looking for. The cover letter should have the same heading as the résumé and reference page and should be about 3/4 of a page long. Guidelines in creating a cover letter follow:

- In the first paragraph, you should let the employer know specifically for which job/traineeship you are applying. Also, it is helpful to the employer if you reveal how you heard about this traineeship.
- In the second paragraph, you should detail your skills, qualifications and responsibilities that
  are directly related to the LMFT/LPCC traineeship you are seeking. In a modest, yet assertive
  way, you may continue to point out the reasons why you are qualified for this agency's
  traineeship.
- In the third paragraph, respectfully and cautiously show your appreciation for the opportunity
  to interview and let the employer know that you are flexible in your schedule and are available
  to meet him or her at his or her convenience. Also, include your phone number before
  closing.

It helps the prospective employer if your résumé, cover letter and reference match in color, style and heading.

#### STEP 5: Arrange for an interview.

Email your résumé and cover letter to the site contact person listed on Handshake. The contact person will then contact you to arrange an interview, if a position is open. Ask this person what you should bring to the interview and follow her or his instructions *exactly*. Be aware that some agencies conduct the initial interview over the phone.

#### STEP 6: Follow-up with your contacts.

Be diligent and follow through after your first contact. After sending your résumé, call sites back and make and keep your appointment for an interview, as needed.

#### STEP 7: Go to your interview.

During the interview, the agency contact person will attempt to assess your potential as a trainee therapist and to determine the match between your interests and abilities and those needed by the agency. Some agencies need Trainees with some prior clinical experience; others are quite satisfied to use therapists who are just starting out. In addition to seeing clients, some sites want Trainees to work the desk and help with clinic management. Others want Trainees to have had personal therapy; still others require Trainees to pay for supervision.

Look at Handshake MACLP Practicum Site information and agency websites to find out what an agency requires and/or prefers in terms of Trainee skills, availability and requirements. Whenever possible, demonstrate your interest in a particular site by showing your knowledge of its requirements for Trainees, its clinical orientations, populations served, and so forth. Be prepared to describe a therapeutic approach you would use in a clinical setting. Feel free to ask the CT staff about agency interviews: we have excellent resource material and can share with you our experiences—for example, some agencies screen their applicants more intensely than others. After each interview, follow up with a "Thank You" note.

\*You should set a goal to interview with at least 3 sites. Should a site offer you a traineeship at your first interview, and you have other sites that you are considering, ask when you can let them know you can accept their offer. Once you have accepted an offer at a site it is unprofessional to not follow through with an offer. You will be at your practicum site from 9 months to one year. You will want to ensure that you have selected the best site to match your needs.

#### Questions to ask during your interview:

Inquire about PROFESSIONAL LIABILITY INSURANCE.

Insurance companies who underwrite professional liability coverage to mental health agencies usually sell an umbrella policy that covers both licensed and unlicensed personnel. Ask your potential supervisor or the director of the agency about its coverage of trainees.

In addition to agency coverage, students in practicum should obtain their own professional liability policies. Remember that graduate student membership in CAMFT or AAMFT entitles students to *free* professional liability insurance!

- Inquire about your supervisor's experience and approach to supervision. Good clinical
  supervision is of the utmost importance for your clinical training experience. We ask that you meet
  with your clinical supervisor prior to accepting a Traineeship.
- Excellent articles on clinical supervision can be found on our professional associations' websites: <a href="https://www.aamft.org">www.aamft.org</a> and <a href="https://www.camft.org">www.camft.org</a>.
- Inquire about your supervisor's completion of mandated training in supervision (see discussion, pg. 52.
- Inquire about matching your personal weekly schedule with their weekly training schedule in the best interest of the agency and their clientele.
- Inquire about start and end dates that will need to be included on page 7 of your 4-Way Agreement

#### STEP 8: Considerations in deciding to work at a site.

By offering a large number of sites, we hope to provide a variety of experiences for our students. But each site is different in its ability to fit your interests and needs. If you get an offer from a site, you might want to consider these factors in your decision to accept:

• Don't Limit Your Experience. Ideally, the 3,000 hours of pre-licensed experience should contain both breadth and depth. Even if you plan to specialize, learning to work with a variety of clients and problems and using a variety of therapeutic modalities may enhance your versatility and your therapeutic effectiveness. If your caseload is restricted by the specificity of one site or one population, we encourage you to find additional sites before taking the licensing exam, as long as you are not breaking any contractual agreements by doing so.

The MFT license is a generalist license, and the BBS needs to know that your knowledge, skills and abilities apply to a general clinical population, not just to people with one particular clinical problem or syndrome.

Don't Do Therapy in the Dark. Another thing to consider prior to accepting a position is whether
or not you will have access to enough information about your clients. In the Practicum course,
students are encouraged to conceptualize clients systemically, considering biological,
psychological, relationship, social, cultural and other systems in which clients are living and which
give meaning to their experience. Clearly, this contextual information is relevant even for clients
who present individually.

Gathering this information may be a difficult task if your contact with a client's family is either limited or forbidden or occurs outside the therapeutic context. Assessing relationships may be difficult or impossible if you are not allowed to interview the couple or family and observe their interaction. Before you agree to work at a site, find out if you will have the freedom and flexibility to work with the members of the relationship conjointly. Can you see children and parents together? Can you see spouses or domestic partners together? And how about adults— can you invite their families to therapy?

- And You Have to Conduct Therapy. Please keep in mind that the hours countable as
   "counseling performed by you" refers to the use of applied psychotherapeutic techniques to
   achieve therapeutic goals. A site that only allows you to do intakes, for example, would not be
   an appropriate practicum site for Practicum. (Please let us know if this is all that you are being
   offered from a prospective site.)
- Family Members in the Same Room. Before you apply for the LMFT license exam, you will need a minimum of 500 hours counseling couples, families, and children. These hours can be gained either as a Trainee or Associate or both. A Trainee who works at an agency that restricts the practice of Trainees to individuals (adults or children) would need an Associateship that would *guarantee* work with couples and families. To keep your options open, discuss whether or not you can treat couples, families, and children at your potential site.
- Countertransference? Please also consider the population with whom you would be working and the presenting problems. A therapist's life experiences can greatly influence her or his ability to be objective with certain clients. Students may find themselves drawn to clients who present similar problems to those of their parents or families of origin. However, unless they have also had the opportunity to resolve their family of origin issues, students may find it difficult to view these clients impartially.

What to do? Be very honest with yourself about your motivation for selecting a particular site and clientele. Be honest with your potential supervisor about your motivation. Most importantly, consider entering therapy yourself, so that you can use the "training" you received growing up in your family of origin to *help*, rather than hinder your abilities as a therapist.

STEP 9: You did it!

As soon as you have secured an appropriate practicum site, take all completed documents (Acknowledgement Statement, 4-Way Agreement and Supervisor Responsibility Statement) to Kathleen Wenger, Rebecca Reed, or Alice Richardson for signature. Students keep all original documentation while CTC's only keep a copy. Practicum hours towards graduation do not begin accruing until the start of practicum class. You may begin earlier at your site for training purposes; however, hours towards licensure or graduation requirements will not count.

#### PROBLEMS AT THE SITE?

Note: Most students will sail through their practicum sequence with relatively few, if any, problems. The selection below is provided FYI, in the unlikely event that problems do arise.

Pepperdine's initial approval of your clinical practicum site is based on both verbal and written information provided to us by the site's director and/or the prospective supervisor(s) during the site screening process. The continuing approval of students at practicum sites is largely based on the end-of-term site evaluations that we receive from students at the sites, as well as our own ongoing assessment.

Although we do our best to select sites that meet BBS and Pepperdine requirements, challenges occasionally occur. Changes at the site, such as changes in management, loss of operating license, changes in supervisors, supervision practices, clients and operating policies may affect either the quality of training or the legality of trainee hours. Although we may notice problems ourselves, we often rely upon student feedback to identify problematic situations.

If you have concerns about your practicum, supervisor or site, please let us know sooner rather than later. If we can get involved early on, the chances of correcting the situation are usually much better. Please discuss the situation with your practicum instructor and with your CT staff.

Please note that you may not terminate at a site without seeking consultation with your PSY662 – Clinical Practicum instructor and the Clinical Training staff. You must have a Supervisor's Evaluation (available from your CTC) completed by your clinical supervisor, whenever you terminate at a practicum site. If you were dismissed from a practicum site or choose to leave a site, you must meet with the LMFT/LPCC Program Director before searching for another site and/or continuing in the MACLP Program. You cannot begin earning hours at another site until you have received approval from your Clinical Training Coordinator and signed a new 4-Way Agreement.

#### Procedure for Investigating Problems at the Site

We attempt to conduct a fair and even handed inquiry into the situation, making a preliminary assessment of the potential problem's nature and severity from the trainee(s) involved. Depending upon the circumstances, the Clinical Training staff may recommend one of the following actions:

1. If the problem appears to be one of a minor misunderstanding or miscommunication between the Trainee and the Supervisor or Site Director, we may encourage the Trainee to go to the person(s) in question and attempt to resolve the problem *without* the direct intervention of the Practicum

Instructor. If requested, we can help the Trainee identify relevant interpersonal issues and provide coaching on how to approach the situation. This procedure can be useful for enhancing students' sense of personal competence and often resolves the problem.

2. If the above procedure fails, or if the problem appears to be one that is seriously questionable in terms of legal or ethical practice, we may contact the supervisor or site director ourselves with the assistance of the student, who will provide data on the situation. This is sometimes a deterrent to students, since they believe that if they remain anonymous, the problem will be handled and they won't need to get involved. However, it is very difficult to promise anonymity to students—even if we don't mention names, supervisors usually can figure out which trainee raised the concern. More important, anonymous complaints tend to be disrespectful to all parties concerned. We will support Trainees who have legitimate complaints but in the spirit of fairness, will seek to determine the facts on all sides before taking action, and will share those facts only with those who need to know.

#### "Losing Hours": The Trainee's Nightmare

Although schools approve students at practicum sites, the persons legally responsible for the practice of pre-licensed therapists are the *supervisors*. Under penalty of perjury, supervisors attest that they are both suitable to supervise LMFT/LPCC Trainees and those they will ensure that their Trainees practice within the law. The supervisor is responsible for making sure all of the conditions are met that would allow the Trainee's hours to be approved by the Board.

Supervisors are required to complete training as part of their legal and ethical responsibilities to Trainees and Associates. Even so, we want to empower our students to take responsibility for becoming informed about the elements of both the site and their supervisors that are critical to legal practice and to the acceptability of hours by the Board. These elements are spelled out in considerable detail in the "4-Way Agreement" that we use to coordinate students' clinical experience.

If your supervisor's license is not current, you will lose hours worked during its lapse. Also, if you do not have supervisor sign your "Weekly Logs" you are at risk of losing hours.

Given the large number of students that have gained clinical experience in training sites over the years, we have had surprisingly few situations in which supervisors or agency directors have not been in compliance with the law and Trainee hours have been lost. We do our best to make sure that all aspects of the practicum site are appropriate for our students.

#### **LEGAL NOTICE:**

Be aware that if Pepperdine, in good faith, has approved you to earn clinical hours at a site in which hours counted by the Trainee and signed by the supervisor are subsequently denied by the Board due to misrepresentation of qualifications on the part of the supervisor and/or agency director, Pepperdine cannot be held liable for loss of hours or income or for expenses incurred by the student or in any other way held liable. This makes it especially important that you consult with your Clinical Practicum instructor and/or the Clinical Training staff if you have any questions about your site, your supervision, or issues regarding the earning of hours.

#### **PSY 662 – CLINICAL PRACTICUM**

#### **Legal Definition of Practicum**

The scope of clinical experience sanctioned by the BBS for LMFT pre-Associates is quite broad. According to Section 4980.37(c) of the BPC, the master's degree must contain not less than six semester units of supervised practicum in applied psychotherapeutic techniques, assessment, diagnosis, prognosis, and treatment of premarital, couple, family, and child relationships, including dysfunctions, healthy functioning, health promotion, and illness prevention, in a supervised clinical placement that provides supervised fieldwork experience within the scope of practice of a marriage and family therapist.

PCC Trainees can fulfill practicum requirements in the same settings and the hours can be "double-counted". However, these hours do not count towards licensure.

#### Training in Diversity Encouraged by BBS

As you can see, the law permits Trainees to learn, under supervision, a wide variety of skills with a wide variety of client populations and issues. MACLP students are to become familiar with the "wide range of racial and ethnic backgrounds common among California's population". Educational institutions are required by the BBS to design practica that will "include marriage and family therapy experience in low-income and multicultural mental health settings". Practicum provides an ideal opportunity for students to appreciate, first-hand, how factors of diversity such as age, gender, culture, ethnicity, racial background, religion, sexual orientation, SES and other similar factors contribute to an individual's uniqueness and identity.

#### What is Practicum at Pepperdine?

First and foremost, *Practicum is a COURSE – PSY 662*. It has unit value (2 units per course taken over three terms), an instructor, required attendance, requirements for number of hours worked at the practicum site, in-class activities and "homework" (seeing clients). Students may have assigned and/or recommended readings and present their cases orally in class. Typically, instructors require written and/or oral reports and many require assigned reading. Students are evaluated both by their supervisors and their practicum instructors.



Note: Students are required to complete two 15-week semester practicum courses and one Summer Session I practicum course (p. 39). Please note that Clinical Practicum is NOT offered in Summer Session II.

Students receive *dual* credit for their practicum activities: academic and experiential. The Practicum courses count for 6 of the total units needed for the MACLP degree. For LMFT licensure, the hours earned in sites count toward Practicum credit, the graduation requirement, and the 3,000 hours needed for the license. For those students who may be seeking licensure as an LPCC, hours gained do not count towards licensure but do fulfill graduation requirements. Consistent attendance and participation are key in receiving a credit in each section of practicum, and will be outlined in the professor's course syllabus.

#### **Practicum Course Objectives**

The primary goals of the Practicum course are twofold: (1) to help students learn to integrate theory and practice, and 2) to develop interpersonal skills that are associated with effective therapy. At the clinical practicum sites, Trainees provide therapeutic services under supervision. In the Practicum class, students present cases, share assessment and treatment strategies, and discuss problems and issues relevant to case management.

In their presentation of cases, students are expected to examine and evaluate clients using models of family therapy, individual counseling models and recovery oriented healthcare models. The instructor assists students in conceptualizing the problems from both individual and relational points of view. Students are encouraged to reflect upon their preferred therapeutic models and modalities and the rationale for their use, and to develop the skills of critical thinking.

The Board of Behavioral Sciences [B & P Code, Section 4980.37(4) expects degree programs to "encourage students to develop those personal qualities that are intimately related to the counseling situation such as integrity, sensitivity, flexibility, insight, compassion, and personal presence." The three-term Practicum course sequence at Pepperdine gives us the opportunity to assist students in the development of these personal qualities through feedback from fieldwork supervisors, practicum instructors, the Clinical Training staff, and the MACLP faculty.

#### REQUIREMENTS FOR PRACTICUM COURSE CREDIT

#### **Overview of Requirements for Hours**

- When it is time to apply for the LMFT license exam, you may submit to the Board for evaluation ALL
  of the hours that you gained while enrolled in Practicum, including direct client contact, supervision,
  workshops, paperwork hours, and client-centered advocacy.
- For Practicum course credit at Pepperdine, we will evaluate only HOURS of DIRECT CLIENT CONTACT, WEEKS OF SUPERVISION and CLIENT CENTERED ADVOCACY.
- HOURS of DIRECT CLIENT CONTACT: The <u>minimum</u> hours of **direct client contact** required for 6 units of practicum is **225** of which a minimum of **150** hours must be direct client contact. PCC Trainees are required to complete a minimum of **280** hours of direct client contact (These hours fulfill graduation requirements but do not count towards the 3,000-hour requirement for licensure). For both MFT and PCC Trainees these hours must be supervised during the week they are gained and must fall within the **5:1** ratio. <u>This ratio is averaged over the duration of the traineeship.</u>
- MINIMUM CLIENT CONTACT PER COURSE: Students need cases to present. Given the
  increase in requirements for hours of clinical experience, the <u>minimum</u> number of client contact
  hours for the Fall, Spring and Summer terms is 30, 30, and 14. If these minimums are *not* met,
  the student receives a grade of "In Progress" (or, IP) until the client contact hour requirement is
  fulfilled.
  - Further information provided later on this issue.
- FLEXIBLE HOURS: As long as 150 client contact plus 75 client centered advocacy hours for LMFT licensure and 280 hours of direct client contact for LPCC licensure are gained by the end of the three practicum courses, and as long as the course minimums for supervision are met, students may accumulate hours in a flexible pattern that suits both their experience and the specifics of their sites. Students pursuing PCC licensure can earn hours after completing 3 terms of practicum and NOT need to enroll in a 4th practicum for 280 hours to count for graduation.
- WEEKS OF SUPERVISION: The <u>minimum</u> number of weeks of supervision is 10 weeks for the Fall and Spring semesters and 5 weeks in the 7-week Summer terms. These limits allow for a variety of non-scheduled events involving supervisor vacations, client no-shows, illnesses, and so forth. (Even though these are fairly relaxed standards, please recall that no hours will count during any week in which there was no supervision.)

#### **Grades for Practicum**

Practicum is graded on a "Credit/No Credit" basis. "CREDIT" is given if ALL of the following criteria are met. The student:

- attended class regularly and to the standards of the instructor.
- performed in class satisfactorily (for example: made accurate and effective case presentations, contributed to discussions, showed knowledge and understanding of MFT theory and techniques, demonstrated critical thinking, was flexible and open to instructor feedback, showed knowledge of clinical issues, interacted appropriately with peers).
- earned the minimum number of direct client contact hours for the term
- by the end of their final practicum, students are required to have earned a minimum total of 225 hours for LMFT Trainees and a minimum total of 280 hours for LPCC Trainees.
- received the minimum number of weeks of supervision for the term (10/5)
- received a satisfactory evaluation from the clinical supervisor and brought the signed supervisor evaluation to the practicum class.
- received a satisfactory evaluation from the Practicum instructor.
- demonstrated competence as a training therapist,
- did not show any signs of behavioral or emotional issues that would affect his or her clinical judgment and performance,
- showed understanding of and compliance with legal and ethical issues, and
- was directly observed (direct supervision of an actual session, or video, or audio-taped session) by the supervisor at least twice during the fall, spring and once during the summer term.
- Student Evaluation of Site, Supervisor Evaluation, and Practicum Instructor Evaluation need to be submitted in a timely fashion each semester.
- Reminder: you will need to enroll in a 4<sup>th</sup> practicum class if you have not completed the minimum 225 MFT hour requirements for graduation.

"NO CREDIT" may be given if ANY of the following conditions occur.

#### The student:

- did not file an approved "4-Way Agreement" with the Clinical Training staff.
- failed to comply with the terms of the "4-Way Agreement."
- attended class sporadically with unexplained or unexcused absences.
- performed in class poorly or did not meet instructor standards for adequate performance.
- saw no clients.
- received an unsatisfactory evaluation from the clinical supervisor.
- received an unsatisfactory evaluation from the Practicum instructor.
- demonstrated gross incompetence as a training therapist.
- showed behavioral or emotional issues that raised questions about his or her clinical judgment and performance and/or violated ethical principles or legal standards in work with clients.
- · was dismissed from the practicum site.
- failed to complete requirements of a previous semester's "In-Progress" grade.

#### "IN PROGRESS" Grade in Practicum:

A grade of "In Progress" (IP) is given to a student who successfully meets all of the requirements for credit but does not have enough hours of direct client contact, enough weeks of supervision or direct observations for credit at the end of the term. To be eligible to receive a grade of IP, the student is still required to submit the supervisor evaluation and weekly logs to the instructor. The student must discuss plans for submitting any missing paperwork or making up missing hours with both the Practicum instructor and the Clinical Training staff. Otherwise, a student is at-risk for receiving a "No-Credit" grade for that semester. Just a reminder that a grade of "IP" is not a permanent "stain" on your record.

#### Were you at your site faithfully every week but still didn't get enough hours?

#### **Making up Hours**

The student who does not have enough direct client contact or weeks of supervision may use those gained during breaks in the academic schedule to count for the <u>previous</u> term's IP. If there is not sufficient time during the break to clear the IP, the student applies the additional clinical experience of the next Practicum course toward the IP grade. If, after enrolling in Practicum for a minimum of 6 semester units and the student lacks hours towards the minimum practicum hour requirements (225 for LMFT Trainees or 280 for LPCC Trainees) the degree will be posted once the student demonstrates completion of the hours. **Note: degree posting occurs only once at the end of. fall, spring, summer session I and II.** 

Reminder: you will need to enroll in a 4th practicum class if you have not completed the minimum MFT clinical hours requirements for graduation.

#### **Earning Hours during Academic Breaks:**

Once a student has enrolled in and started Practicum, hours earned during semester and summer breaks <u>will</u> count toward the Practicum requirement, but minimum client contact hours are still required for each Practicum course. The student should check the box on the Weekly Logs that says "Trainee." These hours must be earned during breaks between Practicum courses, <u>on the condition that the break does not exceed 90 days.</u>

#### Planning to Graduate? A Word of Caution

Students in their final term of the program should be aware that an Incomplete ("I" or "IP") received in **any** course will not be changed on their transcripts until the <u>end</u> of the following term, even if a grade change has been submitted early in the term. This delay in the posting of the degree may *delay the student's application for the MFT Associate registration number*. (See page 56). If this situation applies to you, consult your CT staff. Please note that if you are short just one clinical hour at the end of your 3rd practicum class, and plan to earn it the following week, your degree posting will be at the end of the next semester. All 225/280 hours must be earned prior to your degree posting date.

#### **HELPFUL HINTS**

#### Terminology: What's in a Name?

The term "practicum" is used in several ways. One usage refers to the <u>course</u> or courses taken by the MACLP students, as in, "I'm in my second term of practicum." Another use refers to the <u>experience</u> gained, as in, "How many practicum hours do I need to get credit for the course?" Still another use refers to the <u>site</u> itself, as in, "I'm doing my practicum at the Community Counseling Clinic at the graduate campus in Irvine. How about you?" Each of these uses is acceptable. A student will sometimes refer to his or her practicum experience as an "Associateship," which legally, it is not. Some agencies, however, may refer to Trainees as Associates and to their work there as Associateships. Don't worry about it – <u>you</u> know who you are! Students are "Trainees" while in school; they become Associates after graduation, but only if they register with the BBS. (See discussion, page 56).

### Effective January 1, 2018, the titles for Marriage and Family Therapist Interns and Professional Clinical Counselor Interns changed, as follows:

- Marriage and family therapist registrants must use the title "Associate Marriage and Family Therapist" or "Registered Associate Marriage and Family Therapist."
- Professional clinical counselor registrants must use the title "Associate Professional Clinical Counselor" or "Registered Associate Professional Clinical Counselor."

#### **Consecutive Terms**

We recommend that you gain your practicum hours over three consecutive terms. If this is not possible, you may skip a term of PSY 662/Clinical Practicum and résumé the following term, as long as all other requirements are met and it is acceptable with the agency. Recall that students sign an agreement that delineates the time commitment of the student to the agency. Breaking this commitment should only be done for serious reasons. It is imperative that you consult your CT staff if you want to skip a term of practicum. If you are taking a leave of absence from the University for a semester or longer, it is your responsibility to notify the GSEP Registrar.

#### **Sequential Terms**

Practicum courses are to be taken one at a time, in sequence, allowing for a learning experience of nine months to a year. They may not be taken simultaneously. Please note that Practicum (PSY 662) is offered during the first summer session only and that it is required that you complete two 15-week and one 7-week practicum semesters to graduate.

#### **Number of Sites**

The majority of our Clinical Practicum students gain all their required experience at one practicum site. However, some students gain hours at additional sites. <u>Remember that you cannot count more than 750 hours of client contact and supervision as an MFT Trainee</u>. Consult your CT staff for recommendations. **Note:** To change practicum sites, you must first gain the approval of your Practicum Instructor and the Clinical Training Coordinator at your campus.

#### **How Many Practicum Instructors to Take?**

We strongly encourage a varied Practicum <u>course</u> experience. What occurs in class is more or less standardized, but each instructor offers something unique to the process. To take advantage of our faculty's diversity, consider taking at least two different instructors for your three courses.

#### **Practicum and Financial Aid**

Financial Aid views Practicum as an Associateship, a special status in the academic program. Students whose only course is a 2-unit practicum are therefore considered to be half-time and may continue to defer payment on student loans and remain eligible for certain types of financial support.

#### Reminder—Practicum Requires <u>Two Activities</u>

To get credit for the Practicum course, students must both attend class for the entire length of the course AND must work concurrently at an approved clinical site, doing psychotherapy under supervision. Note: <u>During the period of time that the student is enrolled in PSY 662, class attendance without client hours will not earn Practicum credit. Conversely, acquiring hours at a practicum site, but not attending or participating in the practicum class to the standards of the instructor will not earn practicum credit.</u>

#### Working at a Site after Completing 6 Units

Some students have successfully completed 6 units of practicum and wish to continue working at their approved clinical sites while they take the final courses needed for the degree. The BBS requires a 4-Way Agreement as well as written feedback to the school. Again, as a reminder, you must be enrolled in a practicum course to count your MFT clinical hours! If you need additional hours beyond your 225 hours and you have completed 3 terms of practicum, you do not need to enroll in a 4th practicum to count the balance of the 280 client contact hours for PCC Associate Registration, but keep in mind MFT hours cannot be counted unless you are enrolled in practicum.

#### Concerns? See your Clinical Practicum Instructor First

Your faculty instructor has the responsibility of monitoring the academic course in which you are enrolled. For Clinical Practicum, this includes not only case conceptualization and training, but also those elements of the practicum experience that may be problematic or potentially so. If you think that you may not earn enough hours or if you have any practicum-related concerns regarding your supervisor, practicum site, or other training matters, *please consult your Clinical Practicum instructor as soon as possible*. If you need further assistance, your instructor will refer you to the CT staff. Please don't wait for problems to get out of hand, especially those that may involve ethical or legal issues – consult your instructor, ASAP.

#### **SUMMARY AND ACTION ITEMS FOR PRACTICUM**

Comple	ete ALL Seven prerequisites prior to enrolling in PSY 662, Clinical Practicum:
	PSY 600 (Diagnosis and Treatment of Mental Health Disorders) PSY 606 (Interpersonal Skills and Group Therapy) PSY 612 (Theories of Counseling and Psychotherapy), PSY 623 (Ethics and Law for Mental Health Professionals) PSY 637 (Techniques of Counseling and Psychotherapy) PSY 639 (Couple and Family Therapy I) PSY 661 (Preparation for Practicum)
	1. Attend the "Tips for Practicum" meeting at your campus or in your PSY 661 class.
	2. Examine the MFT Agency Information online via Handshake. Please note that there is important student feedback to be reviewed on Handshake.
	<ol><li>Please review Student Mentor Program whereby you can connect with other students working at the sites you are interested in.</li></ol>
	<ol> <li>Attend all Practicum Fairs, Practicum Mentor Fairs, and Agency Visits which are Offered at each Campus.</li> </ol>
	5. One-on-one meetings are available with the Clinical Training Department, via Zoom or in person. Consult your Clinical Training staff for suggestions about the match between your interests and abilities and the training experience offered by the site you are pursuing.
	<ol> <li>Contact Psychology Career Services in preparing your résumé (including cover letter) and preparing for interviews: <u>GSEP.careerservices@Pepperdine.edu</u></li> </ol>
	5. Locate the correct contact person at each site and email your résumé, Cover Letter and any other documents requested by the site.
	6. Be diligent about follow-through after sending your résumé.
	8. Review the considerations listed on pages 35-36 in agreeing to work at a site.
	<ol><li>Plan to take Practicum in the fall, spring and first summer session I. Reminder: Practicum class is not offered in Summer Session II.</li></ol>

#### FORMS, FORMS, FORMS!

#### Overview

Each time a student takes Clinical Practicum (PSY 662), changes sites, changes supervisors or changes status from Trainee to Associate, his or her progress is accompanied by a paper trail of substantial proportions. Some forms keep track of clinical hours and supervision; others are used to evaluate the student's progress as a therapist in training. Some forms go directly to the BBS once 3,000 hours are accrued, others are completed and returned to the Practicum instructor to be subsequently evaluated by and filed with the Clinical Training staff. The grade for the Practicum course is based, in part, upon the data contained in these forms.

Here is a partial list of the forms and documents that we provide for our students' convenience:

- BBS Responsibility Statement for Supervisor of an LMFT Trainee or Associate
- BBS Weekly Summary of Hours of Experience
- BBS Experience Verification
- BBS Associate Registration Application and Instructions
- BBS Program Certification and Instructions
- Pepperdine 4-Way Agreement
- Pepperdine Acknowledgment of BBS Requirements
- Pepperdine Practicum Evaluation Forms (Student, Supervisor, Practicum Instructor)

#### **Pepperdine Forms Used in Practicum**

Pepperdine is required by law to oversee the evaluation of students enrolled in Practicum and to "provide for regular progress reports and evaluations of the student's performance at the site" [BPC, Section 4980.42(b)]. Toward the end of each term, practicum students receive a "Supervisor's Evaluation of MFT Trainee" to give to their supervisors and an "MFT Student's Evaluation of Supervision and Agency" to fill out themselves (See *Appendix V* pages 64-74).

The clinical supervisor's evaluation is discussed with the student and is signed by the student. The student's evaluation of supervision/site is reviewed by the practicum instructor and by the CT staff. The Practicum instructor provides feedback to each student regarding class performance.

All evaluations are to be returned to the Practicum instructor during the last week of classes. Evaluations of Trainees are kept in students' clinical training files. Evaluations of supervision and sites are kept in site files and are used to make recommendations about the appropriateness of practicum settings for potential trainees. Students are not identified if and when we make recommendations to the agency.

Note: Both evaluations of you and your supervisor are required for a grade. If they are not completed and turned in at the appropriate time, the student will receive an "In Progress" (IP) until both evaluations are received.

#### **BBS FORMS: DESCRIPTION AND GUIDELINES FOR USE**

Most of the forms that you'll need are available through Pepperdine. You may also download BBS forms from the BBS homepage, <a href="www.bbs.ca.gov">www.bbs.ca.gov</a>. (Note: While descriptions of forms in this section specify LMFT's, the BBS has comparable forms for LPCCs).

CAUTION: All forms that accompany applications (for both the Associate number and license exam) must have original signatures, with *no "whiteout."* If you make a mistake on a form, you'll need to have your supervisor re-sign it. You are allowed to photocopy any form used by the Board. Make plenty of copies of blank forms.

The following forms are required to document your experience. They are distributed to students during the "Preparing for Practicum" meeting and are also available from the CTPD staff.

1. "Responsibility Statement for Supervisors of a Marriage and Family Therapist Trainee or Associate" also known as the "Supervisor's Responsibility Statement" (SRS):

According to the BPC Section 1821 (b), any person who supervises a Trainee or Associate is required to sign under penalty of perjury the "Responsibility Statement for Supervisors of a Marriage and Family Therapist Trainee or Associate," prior to the commencement of such supervision. This form specifies the conditions that must be met for a person to supervise according to regulation and for a Trainee's or Associate's hours to count.

How to use the SRS form: Ask your supervisor to sign the SRS before supervision begins. If you have more than one supervisor, each must sign a separate SRS. At this time, you can request that your supervisor read and sign the "4-Way Agreement". You may verify the status of his/her license through Online License Verification on the BBS homepage: <a href="https://www.bbs.ca.gov">www.bbs.ca.gov</a>

Note: Write down the supervisor's license expiration date in your appointment book so that you will have a reminder to check on whether or not the supervisor renewed her/his license. Do this for your own protection; any hours you earn under a supervisor whose license has expired will not count.

File a *copy* of the SRS for each of your supervisors with your Clinical Training staff. Send your *originals* to the BBS upon completion of your 3000 hours with your Application for Licensure and Examination

#### 2. "Weekly Summary of Hours of Experience," a.k.a. the "Weekly Log":

You are required by law to maintain weekly logs of all experience gained toward licensure. Although some supervisors prefer to sign several weeks at a time, the regulations specify that the logs "shall be signed by the supervisor on a weekly basis." [B&P Code Section 1833 (e)]. This requirement is set up in your best interest. If a supervisor leaves or becomes otherwise unavailable, weekly signatures can prevent the loss of hard-earned hours. When you terminate at a clinical facility, change supervisors, or

become an Associate at the same site, your *supervisor* will transfer the hours from your weekly logs to the "LMFT Experience Verification" form (described in #3, below).

How to use the Weekly Logs: Enter into each week the number of hours - not minutes - of supervised experience that you gained at your clinical site. Also enter the number of hours of supervision: group and/or individual. After the first unit of supervision, partial hours may be entered. Client hours may be partial numbers. Total your hours each week. If you have questions, please ask the Clinical Training staff. Ask your supervisor to sign your log each week. If you make a mistake, have your supervisor initial the correction (Remember: NO whiteout!).

Students and Associates have found that <a href="https://www.trackyourhours.com/">https://www.trackyourhours.com/</a> is an easy and safe way to record weekly clinical and nonclinical hours.

At the final class session of each term, Practicum students bring to class a copy of their Weekly Log with totals entered and with appropriate supervisor signatures. Students show their logs to their instructors and to the Clinical Training staff person, who may attend the class. The logs are examined for clerical accuracy and to verify that the student has completed the required number of hours for practicum credit. Original weekly logs are <u>not</u> handed in but are kept by the student for the supervisor's use, as described next.

Retain all weekly logs until you are licensed. The BBS may require you to submit all or portions of your logs to verify hours of experience. Note: *Do NOT send your weekly logs to the BBS unless requested to do so.* 

#### 3. "Marriage and Family Therapist Experience Verification," (or Experience Verification Form):

This form is used to document your supervised clinical experience. No corrections or erasures are allowed. You may need to make many photocopies of this form.

<u>How to use the Experience Verification form</u>: Bring this form and your Weekly Logs to your **supervisor** when you:

- get ready to leave a practicum site,
- change supervisors at the same site,
- graduate and change your status from Trainee to Associate (even if you stay at a site and have the same supervisor)

You and Your supervisor transfers the total hours in each category from the Weekly Logs to the Experience Verification form, completes the appropriate sections, and signs the form. Keep your signed verification forms until you have collected your 3,000 hours. When you submit your hours to the BBS for approval, submit all original/signed Experience Verifications to document your 3,000 hours with all of your Supervisors Responsibility Statements along with the Application for Licensure and Examination.

\*A separate form should be used for pre-degree and post-degree hours for LMFT Trainees and Associates.

**Don't Forget This!** Experience Verification forms call for certain documentation to be attached. The BBS tells us that this item is most often overlooked:

For volunteer supervisors who are not employed by the agency at which you work, a **Volunteer Letter of Agreement** completed by the agency must be attached.

**Workshops Attended** are documented both on the Weekly Logs and the Experience Verification form as Non-Clinical Experience, <u>with the prior approval of your supervisor</u>. To count these hours while you are in your master's program, you need to be enrolled in Practicum or have a 4-Way Agreement signed and on file at the CT Department and receive the minimum supervision at your site.

<u>How to count workshops</u>: On your Weekly Logs, under Non-Clinical Experience, enter the number of hours spent at approved workshops on the date(s) you attended them. Have your Clinical Supervisor sign for workshop hours at supervision that week.

<u>Note</u>: The Board does NOT require that you submit flyers, brochures or notices of workshops. Many students find it helpful to keep an ongoing list of all workshops they attend. This list then becomes a valuable attachment to the résumé!

Your BBS Files: Who Maintains Them?



Students should maintain their own BBS files, including their Weekly Logs, LMFT Experience Verifications and *original* Supervisor Responsibility Statements. Also, it is a good idea to make a copy of your "Supervisor's Evaluation of the Student". The documents that are regularly filed by the CTC include:

- Acknowledgements of BBS Requirements
- 4-Way Agreements
- Photocopies of Supervisor Responsibility Statements
- Supervisor, student, and instructor evaluations from the practicum course.

Practicum instructors verify hours differently: some request to see your original weekly logs while others require that you make copies to be submitted. **Do not leave original weekly logs with your practicum instructor or with CT staff.** 

<u>Pepperdine is not required by the BBS to hold onto MFT/Practicum student forms post-graduation. You are responsible for the safe-keeping of all your BBS forms!</u>

#### SUPERVISION AND SUPERVISORS

#### **Supervision Defined**

Section 1833 (b) of the BPC defines supervision as "ensuring that the extent, kind and quality of counseling performed is consistent with the education, training and experience of the person being supervised; reviewing client/patient records, monitoring and evaluating assessment, diagnosis and treatment decisions of the Associate or trainee; monitoring and evaluating the ability of the associate or trainee to provide services at the site(s) where he or she will be practicing and to the particular clientele being served; and ensuring compliance with laws and regulations governing the practice of marriage and family therapy. Supervision shall include that amount of direct observation or review of audio or video tapes of therapy, as deemed appropriate by the supervisor."

#### Specific Requirements for Receiving Supervision

You, the supervisee, must meet ALL of the following criteria:

- For every week that you claim hours and at each setting you work (if more than one at a time), you must have a *minimum* of one (1) hour of individual/triadic or two (2) hours of group supervision.
- No more than eight (8) supervisees may attend group supervision.
- A SUPERVISION UNIT is either one (1) hour of individual/triadic or two (2) hours of group supervision.
- 1 hour of supervision must be 60 minutes of supervision
- For every five (5) hours of client contact, Trainees must receive on average over the length of time at the site ONE UNIT of supervision. This is called the "five-to-one ratio" and is discussed in greater detail below.
- Post-degree Associates shall receive at least one hour of direct supervisor contact for the first ten hours of client contact in each setting and one additional hour for any hours over ten in a working week.
- No more than 6 total clock hours of supervision may be counted in any one week (Be sure to record all supervision hours on your logs for ratio purposes).
- You must receive individual/triadic face-to-face supervision for at least 52 weeks of your total pre-licensed experience. Weeks do not have to be consecutive.
- Your supervisor at the clinical practicum site, not the Pepperdine Clinical Training staff, decides whether or not workshops, seminars and other training may be counted on the weekly logs.

• No supervision during a particular week? No hours may be counted for that week!

#### **How to Calculate Supervision Ratios**

Both supervised experience and supervision itself are recorded on the Weekly Summary of Hours of Experience, also known as the "Weekly Logs." However, when you document your hours to the BBS with your license application, you will submit your Experience Verification forms. These forms contain a summary of all hours recorded on the "Weekly Logs." On these forms, Trainees must be able to show at least one hour of individual/triadic supervision or two hours of group supervision for every **five** hours of direct client counseling.

The BBS calculates allowable hours of client contact based on the total supervision received *at each setting* in which the Trainee or Associate gained hours. The time period involved could be as little as one week or as long as six years. For Pepperdine's purposes, the ratio of client contact to supervision will be calculated after 6 units of practicum <u>and</u> when the student has earned a minimum of 225 (a combination of 150 of direct client contact combined with 75 client centered advocacy) hours client contact with appropriate supervision. To determine your allowable client contact hours per setting, first look to see that you have at least the minimum "unit" of supervision each week (one hour of individual/triadic or two hours of group). Add any partial units of supervision to the sum. Then, multiply the number of "supervision units" by five. "The product is the maximum number of client contact hours the BBS will count for that particular setting.

This system is not so bad, once you understand the principles involved. Study these examples to see how the ratios work in practice (Please note: these examples are intended for students who choose to earn the minimum 225 hours of direct client contact by the LMFT Trainee. Please make sure that **all** client contact is within the 5 to 1 supervision ratio):

**Example 1**: If you have 6 weeks of individual/triadic supervision (one hour) and 9 weeks of group supervision (two hours), you have 15 "units" of supervision. Multiply 15 times 5 and you get how many hours of client contact the board will allow, in this case 75 hours. If you had recorded 80 hours of client contact on your experience verification form, the BBS would "lop off" 5 of those hours.

**Example 2**: If you have 15 weeks of individual/triadic supervision (one hour) and 15 weeks of group supervision (2 hours), you have 30 units of supervision and are allowed to count up to 150 hours of client contact (30 X 5) for that setting. If you had recorded 120 hours, of client contact on your experience verification form, the BBS would count them all.

**Example 3**: If you have 15 weeks of individual/triadic supervision and during the same period of time receive 30 hours of group supervision (2 hours/week), then you would have 30 units of supervision, but still only 15 weeks. This distinction is important on the Experience Verification form, where Item #11 asks how many weeks of supervised experience are being claimed.

As you can see, the actual number of countable client hours is limited by the maximum number of allowable supervision hours. A maximum of five (6) clock hours of supervision may be credited during any one week. Note that this is not "units" of supervision, but actual time spent, in either individual/triadic or group supervision. If you need *more* than five hours of supervision to cover your hours of client contact using the 5:1 ratio, be sure to obtain and record it. Otherwise, both you and your supervisor will be acting in noncompliance with the regulations.

#### **Specific Requirements of Supervisors**

The BBS requires that supervisors sign a "Responsibility Statement for Supervisors of a Marriage and Family Therapist Trainee or Associate" <a href="beginning-supervision">before</a> beginning supervision with a Trainee or Associate. This form assures the Board, the school, and the Trainee/Associate that the supervisor meets certain standards of experience, and knows and will follow BBS laws and regulations.

For Trainee hours to count toward BBS and practicum requirements, each supervisor:

- must sign the "4-Way Agreement" and be approved to supervise the student by the CT staff.
- must be a California-licensed LMFT, licensed LPCC, Clinical Psychologist, LCSW, or Board Certified Psychiatrist who has held a valid, *unexpired* California license for at least <u>two</u> years prior to commencing supervision. (Note that Educational Psychologists do not qualify as clinical supervisors at this time).

Make sure that the supervisor's license is current. To verify that your LMFT or LCSW supervisor's license is current, you may visit the BBS website at <a href="www.bbs.ca.gov">www.bbs.ca.gov</a>. Click on "Online License Verification". For supervisors who are Psychologists, you may call (916) 263-2699 or check on the Board of Psychology website at <a href="www.psychboard.ca.gov/">www.psychboard.ca.gov/</a>. Licensed Educational Psychologists (LEP's) do not qualify as supervisors for pre-licensed LMFTs at this time.

- may not be your spouse or relative by blood, marriage, domestic partnership or anyone with whom you have or had a personal or business relationship that undermines the authority or effectiveness of the supervisor.
- must keep informed of developments in marriage, family and child counseling, as well as the California laws and regulations governing Trainees and Associates.
- shall ensure that the extent, kind, and quality of counseling performed is consistent with the education, training and experience of the Trainee or Associate.
- shall evaluate the site where a Trainee or Trainee will be gaining hours and shall make sure that
  the site provides experience that is within the scope of marriage and family therapy and in
  compliance with the specific regulations for supervision.
- must notify the Trainee immediately of any event that affects the supervisor's ability to supervise.
- must give at least one (1) week's written notice to a Trainee or Associate of the intent not to certify any further hours of experience.
- shall obtain from a future Trainee or Associate the name, address and phone number of the Trainee's/Associate's most recent supervisor and employer.
- Additional requirements may be found in Pepperdine's "4-Way Agreement" and in Section 1833.1 of the BBS regulations.

#### **Supervisor Training**

BBS-licensed supervisors (LMFT, LPCC or LCSW) must complete <u>6 hours of training in supervision methods every two years</u>. This training may be included in the 36 hours of continuing education required for license renewal every two years. Both AAMFT and CAMFT offer courses in supervision.

The regulations allow the supervisor to begin a supervisory relationship as long as the supervisor meets the training requirement within 60 days of starting supervision.

Note: It is important that you ask your supervisor if he or she has taken this mandated training or plans to take it in the time allotted.

Please note that the BBS is proposing supervision requirement changes so stay tuned...

#### "Interim" Supervisor

If your regular supervisor is on vacation, ill, or cannot supervise you during a particular week, you will need a substitute in order to count your hours for that week. According to the BBS, if the interim supervisor is supervising *you less than 3 weeks*, this interim supervisor must only:

- sign a separate Supervisor Responsibility Statement prior to supervising you, and
- sign your weekly log.

If the interim supervisor is supervising you for more than 3 weeks, the interim supervisor must:

- sign a separate Supervisor Responsibility Statement prior to supervising you,
- sign a separate weekly log, and
- sign a separate Experience Verification form for the number of hours they supervised.

#### **Paying for Supervision**

BBS regulations apply to both Trainees and Associates—paying for supervision is allowable. However, this may change and we will keep you posted.



Associates who work in nonprofit settings follow the same recommendation as that described for Trainees. Associates working in private practice may not pay for supervision. Be careful how the accounting is set up. You need a W-2 from your supervisor, who is your employer. Please be aware that if the accounting is set up so that you give your supervisor/ agency a percentage of your "fees," this arrangement is actually illegal, since Associates cannot be paid directly for their services.

\*According to the Department of Labor it is unlawful for an LMFT Associate or Trainee to pay his or her employer for supervision. An associate or trainee may lawfully pay for off-site supervision at any setting other than private practice. This may only be done where an appropriately executed letter of agreement exists.

#### **Problems with Sites/Supervisors**

We do our best to cultivate a database of sites and supervisors who are competent and effective and have found that problems with sites and supervisors are, fortunately, few and far between. Those that do occur can usually be resolved fairly easily.

In general, unless it is one of those rare situations that requires our immediate intervention, we encourage students to talk with their supervisors directly and honestly about problems and to find solutions together. Most complaints are remediable with open and respectful discussion.

Students may use the Practicum class to discuss the situation with the instructor and even role- play ways in which to approach the supervisor. Students with site or supervisor problems should also consult the CT staff, who may have background information on the site that would change the course of action required (for more information, see the section entitled, **Problems at the Site?**, pages 36-37).

#### TIME LIMITS FOR GAINING HOURS

#### The "Six-Year" Rule

Two different regulations provide parameters for LMFT pre-license experience. The first ensures that applicants' hours are **recent** and the second limits the length of time one may work as an **Associate**. In actuality, the time period affected by these regulations may overlap.

1. Recent hours: Spreading supervised experience over too long a period of time dilutes the learning experience; with the exception of up to 500 hours gained during practicum, all hours must be gained during the six (6) years immediately preceding the date of filing for the license exam. When you send in your Application for Licensure and Examination, send the BBS your Experience Verifications for all 3,000 hours, The LMFT analyst counts back six years from the date your application is received and evaluates only those hours gained during that time, as well as the maximum of 500 practicum hours, which may be older than six years.



**2. The "LMFT Clock"** starts whenever you log your first countable hour. However, you are not required to submit to the board all of the hours that you have actually logged. You can simply hold back your earliest hours, thus delaying the start of the "clock."

**3. Associate Renewal:** An Associate may renew <u>five times</u>. This gives Associates six (6) years in which to gain all of the hours they need for the exam, excluding up to 500 LMFT hours gained during Practicum. Associates who have not gained all of their hours (less practicum) within six years need to apply for a subsequent registration number. Only hours beyond the "six year maximum" will be deducted. The subsequent Associate *may not* work in private practice and will need to qualify under the academic requirements in effect at the time. Clearly, the Board wants Associates to finish their hours within the allotted six years!

The story behind the time limits is this: as usual, some people were abusing the system. It came to the attention of the Board that Associates working in private practice would renew their registrations year after year, either never taking the exam or taking and failing it repeatedly. But that didn't matter: before supervision ratios, Associates could see up to 39 clients per week with only one hour of supervision and could renew their Associate numbers indefinitely. It was a decent living for Associates and their unscrupulous supervisors, but it wasn't the intent of the law. This evasion of the license exam not only took away income for legitimately licensed practitioners, but it also put clients at risk.

### Important: Should you register as an Associate if you don't want to gain hours immediately?

Don't start your Associate clock until you are ready. If, after graduation, you plan to step temporarily away from your career path for that ocean cruise or to have a family, we suggest that you delay your Associate registration until you can be reasonably sure that you can earn the required number of hours within six years.

## ASSOCIATE REGISTRATION NUMBER: HOW TO APPLY (Applies to both LMFT and/or LPCC)

To count hours gained after you finish your degree, you must register with the BBS as an LMFT and/or LPCC Associate. The Board requests that you allow up to 60 days for your application to be processed. (Instructions for completing the LiveScan fingerprinting will be included in the LMFT/LPCC Associate Registration Packet found on the BBS website). You may count hours worked during the time period between graduation and receiving your Associate Registration (AR) number as long as you:

- Apply for an AR number within 90 days of the date the degree was posted on transcript, and
- Work in a setting defined by law for Trainees. To work in private practice, even as a volunteer, you must have your AR number in hand.

NOTE: If you miss the 90-day window, don't panic. The only result is that you won't be able to count post-MA hours until you receive your Associate Registration number.

#### Steps to Register as an Associate

Attend the **Associate Registration Meeting** held by the Clinical Training staff during your Psy 642 ~ Professional Practices class.

- 1. About 4 6 weeks *after* the end of the term, you will receive another letter ("Dear Recent Graduate") that includes your personalized **Program Certification**. This document is a required part of your Associate application and is completed by the MACLP Program Director to verify to the BBS that you have fulfilled the academic requirements stipulated by law.
- 2. Complete and sign the Associate application. Include a 2"x2" passport quality photo of yourself, the second copy of the Request for Live Scan Service Applicant Submission form, the fee and the two sealed envelopes containing your official transcript and your Program Certification and send them to the Board. **NOTE: Do not open envelopes. They must remain sealed.** For additional instructions, refer to "How to submit documents to the BBS", on the next page.
- 3. Be patient. The BBS takes from one to three months to issue an Associate number. As long as you have applied for your AR number within 90 days of your degree posting date and are working in a non-profit or agency otherwise approvable for *Trainees*, these hours count as post-degree hours, any paperwork hours may now count and your supervision ratio is 10:1.

#### How to Submit Documents to the BBS:

The Board requires TWO applications—one for the Associate registration and the other for the licensing exam. Each of these applications requires additional paperwork, such as transcripts, program certifications, experience verification forms, documentation of sites and copies of forms related to tax status. We recommend that you:

- Always make photocopies of anything you send. Also, it's a good idea to make your application packet appear neat and professional: if possible, *type* the information required.
- Never send any back-up materials such as transcripts by themselves to the BBS.
- Whether you apply for an Associate Registration Number or for the exam, send everything required in the same application packet. **DO NOT submit materials under separate cover.**
- Any document for which no application has been filed will be returned to the sender after 90 days of its receipt.

The Board requests that you use the following procedure to verify that your documents have been received:

Whenever you send documents to the BBS, include a self-addressed, stamped postcard with the names of the documents identified in writing. When BBS staff open the daily mail, they will note the documents received, date-stamp your postcard, and mail it back to you. This can be especially helpful if you are applying for a position (post degree) that requires you to be a registered Associate.

You can show your potential employer that the Board has received your registration information and application by showing the postcard that the BBS has verified for you.

#### THE LMFT LICENSE EXAM

Test Ethics Disclaimer: The following information has been drawn from general knowledge of licensing exams for psychotherapists, together with information about the LMFT exam published by the BBS. Nothing written here has been gained from direct or indirect knowledge of any actual exam used for the LMFT license.

Currently, the license exam has two parts – California Law and Ethics Exam and the Clinical Exam – and is designed to assess the candidate's readiness to practice *independently* as a marriage and family therapist. This means that on her/his own, the therapist can be expected to handle critical situations and emergencies – those "red flags" you learn about in your law and ethics class. It also means that the therapist can be relied upon to be generally helpful to clients, with sufficient skills in the diagnosis, assessment and treatment of problems.

The content of the exams is based upon an occupational analysis that was conducted by the Board. An Occupational Analysis is to be conducted every five years, however, the most recent Occupational Analysis has yet to be released. In an occupational analysis, a survey is constructed and sent out to a random sample of those in the occupation. Items on the survey typically ask the respondent to indicate the frequency with which a certain activity is performed and to rate the activity's importance. (For example, a therapist may not need to arrange for the hospitalization of clients very often, but it is essential that she or he know how to do so.)

The survey that went out to the sample of licensed LMFTs contained many items of a generic nature and a minority of items specific to marriage and family therapy. Not surprisingly, the picture that emerged was that LMFTs have a generic practice and do not do much work with couples and families. (This is actually more often true than not.) As a result, the newly- standardized and revised LMFT license exam tests for a generic, master's-level psychotherapist, who may or may not necessarily use systemic models of conceptualizing and treating clients. However, since the regulations specify that the academic degree must contain at least 12 semester

some fashion.

The BBS will send you instructions when you apply for the exam. But, why wait??? Request it be sent to you <u>now</u> or download it from their website (www.bbs.ca.gov). In our opinion, those who use the BBS Handbook throughout their Associateships will be better prepared for the exams!

units in marriage and family therapy, one would expect that the Board would examine this area in

#### **CA Law and Ethics Exam & CA Clinical Exam**

- California Law and Ethics Exam must be taken within the first year of registration. It is designed to assess the applicant's knowledge of the ability to apply legal and ethical standards relating to clinical practice.
- California Clinical Exam will be taken upon completion of supervised experience
  hours. It is designed to assess an applicant's knowledge of psychotherapeutic
  principles and methods in treatment and their application and the ability to make
  judgments about appropriate techniques, methods and objectives as applicable to
  the profession's scope of practice.

Additionally, "...Registrants must take the California Law and Ethics Exam within their first year as an Associate, and before renewing their Associate number if not passed the first time. If a registrant does not take the Law and Ethics Exam during a renewal period, he or she will not be permitted to renew the registration until the exam has been taken. If a registrant does

not pass the Law and Ethics Exam during a renewal period, he or she will be required to take a 12-hour continuing education course on California Law and Ethics in order to be eligible to retake the Law and Ethics Exam..." (California BBS).

Apply for the clinical exam after you have completed your academic requirements and your 3,000 hours of supervised experience. You do not need another Program Certification if one is already on file with the BBS (presumably with your Associate application), unless the form has been changed while you were an Associate. In this case, you will be instructed by the board to submit a new Program Certification. If this situation applies to you, contact Terrance Cao at the WLA Campus for assistance.

#### The LPCC License Exam

\*\*Please check the BBS website for the latest licensing exam information\*\*

Currently, the BBS is requiring two exams: (1) California Law and Ethics Exam and (2)

National Clinical Counselor Mental Health Examination. Information about LPCC exams can be found at the following two links:

https://candidate.psiexams.com/bulletin/display bulletin.jsp?ro=yes&actionname=83&bulletinid=523&bulletinurl=.pdf

https://www.nbcc.org/Assets/StateLicensure/NCMHCE.pdf

#### **Dear Student:**

We hope that this handbook has been helpful to you. If you have any comments or questions about the handbook or about the MACLP program, please let us know — we would enjoy hearing from you. Thank you very much for your attention and diligence in reading this document completely.

We wish you the best in both your academic program and in your professional career.

Yours sincerely,

Carrie Castañeda-Sound, Kathleen Wenger, Rebecca Reed and Alice Richardson June, 2019

#### Appendix I

#### MFTs IN CALIFORNIA: DEMOGRAPHICS

In 2015, CAMFT conducted a survey to compile demographic data on its licensed clinical members. There were 15,464 clinical and 10,930 pre-licensed surveys sent with a 16% composite return rate. The following is a summary of the survey highlights in both categories of membership.

#### A Snapshot of the Typical California MFT:

- Over 50% of LMFT's and Pre-Licensed LMFT's live in LA or the greater Bay areas
- 80.7% Licensed and 83.2% Pre-Licensees are female
- The average age of LMFT's is 57.6 years, the average pre-licensed age is 41
- 75.8% of LMFT's have had a prior career
- · 78% of LMFT's are in Private Practice either full- or part-time
- 66.1% consider Private Practice to be their primary source of income
- Only 16.7% of pre-licensees work in a private practice setting
- · Individuals and adults are the most commonly treated populations
- Most common disorders treated: Anxiety disorders (66%) and Depressive disorders (62%)
- The most commonly modality used is CBT (76%)
- · LMFT's spend between 13-24 sessions with a client before concluding treatment
- · 86% of LMFTs identified 50-60 minutes as the average length of sessions
- 85% of LMFT's have a 24-48 hour cancellation policy
- 77% of LMFT's devote time to volunteer or pro bono therapy
- The average annual income earned in private practice is \$50,948
- The average usual and customary fee *charged* by LMFTs is \$146.86 per session
- The average fee paid is \$108.05
- · 20% of LMFTs are paid for services by a third party
- Approximately 40% of LMFTs are affiliated by a PPO, HMO, EAP or other managed care
- 55% of pre-licensees have paid Associateships, ranging from \$15-\$25/hour.
- Marketing: Almost 83% of LMFTs and 73% of pre-licensees use professional or client referrals as their primary marketing tool. 53.5% of LMFTs and 76% of pre-licensees use *Psychology Today* to promote their services. The majority of LMFTs spend less than one hour per week marketing/promoting their services.
- CAMFT: In order of popularity, legal consultation, professional liability insurance, *The Therapist* magazine, and CAMFT advocacy efforts were indicated as the most beneficial member benefits by both clinical and pre-licensed members. Pre-licensees were almost twice as likely to cite the CAMFT Community as a valuable member benefit: 32% of pre-licensees did, compared to only 18% of LMFT's.

<sup>\*</sup>For further details, please see *THE THERAPIST*, September/October 2015.

## Appendix II ALIENTO PROGRAM

#### Aliento Requirements For Practicum:

- -If students enrolled in the ALIENTO program will be providing services in Spanish, then it is a requirement that the student receives clinical supervision in Spanish.
- -If students enrolled in the ALIENTO program will be providing services to Latina/o community and the services will be provided entirely in English then there is no requirement for clinical supervision in Spanish. (Only English clinical supervision will be required)
- -Students enrolled in the ALIENTO program must have 50% of their total client contact hours met by serving Latina/o communities.

Therapy services can be given in English or Spanish.

For students in the M.A. in Clinical Psychology Program with Latinas/os (ALIENTO) the following prerequisite courses must be completed before enrolling in PSY 662 or 663:

PSY 606	Interpersonal Skills and Group Therapy
PSY 623	Ethics and Law for Mental Health Professionals
PSY 639	Couple and Family Therapy I
PSY 661	Preparation for Practicum
PSY 674	Diagnosis and Treatment of Mental Health Disorders (Latina/o Emphasis)
PSY 676	Theories of Counseling and Psychotherapy (Latina/o Emphasis)
PSY 678	Techniques of Counseling and Psychotherapy (Latina/o Emphasis)

#### PSY 663 – BILINGUAL CLINICAL PRACTICUM (For ALIENTO students)

Students enrolled in the ALIENTO program must enroll for PSY 663 if providing services in Spanish.

- -If students enrolled in the ALIENTO program will be providing services to Latina/o communities and the services will be provided entirely in English, then the student can choose to enroll in the PSY 662 Clinical Practicum course **OR** the PSY 663
- -Bilingual Clinical Practicum course.
- -Enrollment in PSY 663 is based on availability, with priority given to students who provide services in Spanish.
- -PSY 663 is Intermediate/Advanced for students who are at an intermediate or proficient level of Spanish.
- Why Must You Be Enrolled in PSY 662 Clinical Practicum or PSY 663 Bilingual Clinical Practicum: Latina/o Emphasis for (ALIENTO program), to Have Your Experience Approved? Students are legally defined as "Trainees" after completing 12 semester units in the MACLP program and have a written agreement (4-Way Agreement) on file in the Clinical Training Department. Pepperdine does not sanction the acquisition of clinical experience until students have enrolled in PSY 662 Clinical Practicum or PSY 663 Bilingual Practicum (ALIENTO program only).

#### FAQS:

1. True or False- Does every student in the Aliento program need to be enrolled in 663 at some point in the program?

False: Only students providing Spanish-speaking services need to enroll in the Bilingual practicum.

2. Do I have to have my supervision in Spanish?

False: You only need supervision in Spanish if you are providing Spanish-speaking services.

3. What if I have 16 clients, 1 client that speaks Spanish and 15 speak English, do I have to have Spanish supervision?

If you have 15-16 clients and only 1 or 2 clients speak Spanish, then your supervision can be in English, but it would be preferred that you have someone on site who you can consult with about these cases who is Spanish speaking, if possible.

4. True or False: Aliento program students need to have 40% of their hours with clients from the Latina/o community.

False: 50 % of a student's total client contact hours must be from serving Latina/o communities

True or False: Aliento program student don't need to have a Spanish speaking Supervisor, even while working with Latina/o clientele IF that student is enrolled in Psy 663, Bilingual Practicum.

False: If a student is providing services in Spanish in the community, then they must receive Spanish supervision at their site AND be enrolled in the bilingual practicum class.

#### Appendix III

#### Pepperdine University

#### **Graduate School of Education & Psychology**

Acknowledgment of BBS/MACLP Requirements For Students Enrolling during or after Fall 2012

Students who intend to pursue licensure as an LMFT/LPCC should know that certain conditions set by the Board of Behavioral Sciences (BBS) may impact their eligibility to sit for the LMFT/LPCC license exams. These and other conditions specific to the Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy (MACLP) Program appear below.

**INSTRUCTIONS:** Please complete and return this form to the Clinical Training Coordinator at your educational center as soon as possible.

Name:					
Last	First			Middle Initial	
Address:					_
	Apt. No.		City	Zip	
Phone (Daytime):	Student ID#		-	_	
Pepperdine E-Mail:	Personal E-Mail:			_	
Date first enrolled in (or transferred to) the MACLP Program:					
Educational Center Attending (check one):	□ WLA	□ EGC	□ IGC	□ MAL	

#### By signing below, I acknowledge that I have read and understood the following:

- A. The Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy (MACLP) degree that I will obtain through Pepperdine University is designed to meet the requirements of Sections 4980.37, 4980.40, and subdivisions (a) and (d) of Section 4980.41 of the Business and Professions Code of the State of California for the Marriage and Family Therapist license.
- B. The Master of Arts in Clinical Psychology (MACLP) degree is the only Pepperdine degree that offers the academic preparation for the LMFT/LPCC licenses. If I graduate with the general Masters (MAP) degree in psychology I will not be eligible to take the LMFT or LPCC license exams.
- C. My hours toward LMFT Licensure may begin accruing upon submission and approval of the 4-Way Agreement. I have been informed that I must complete all seven prerequisite classes and attend the "Tips for a Successful Practicum" that is offered within the Preparing for Practicum Class (Psy 661) prior to recording LMFT licensure hours. The state-required 4-Way Agreement is used by Pepperdine's LMFT/LPCC Clinical Training Department to coordinate each MACLP student's practicum experience. An MACLP student is not allowed to be a 1099 Independent Contractor or train in a private practice setting. Even private types of settings put the MACLP student at risk of being exploited and/or losing valuable graduation/licensure hours. Pepperdine assumes no responsibility for the loss of hours caused by misstatements, incorrect information and/or negligence on the part of a supervisor and/or agency director. Approval of hours is, and always has been, the purview of the state Board of Behavioral Sciences. LMFT licensure hours will begin accruing once an MACLP student is enrolled in and attending their first practicum class (Psy 662 or Psy 663).
- D. I am responsible for reading and abiding by the relevant BBS Laws and Regulations, the LMFT/LPCC Handbook, the GSEP catalog, and the Psychology Division Policies & Procedures.
- E. If I intend to pursue licensure outside of the State of California, I will correspond with out-of-state licensing boards to ensure that the requirements of Pepperdine's MACLP program are consistent with theirs.
- F. I may not be able to qualify for state licensure if I have been convicted of, or pled guilty or *nolo contendre* to, any misdemeanor or felony. I will need to disclose convictions dismissed under Section 1203.4 of the Penal Code. I will not need to disclose offenses prior to my 18th birthday or any traffic violations for which a fine of \$500 or less was imposed. If this section applies to me, I will contact the BBS at once to determine my eligibility for the L MFT/LPCC license.
- G. I will need to disclose if I have ever been denied a professional license, or if my license privileges have ever been suspended, revoked, or otherwise disciplined, or if I have ever voluntarily surrendered any such license.

- H. My continuation in the program is based on maintaining both academic and behavioral standards (including the misuse of chemicals, substances, medications, etc.). My suitability for the psychotherapy profession will be evaluated by faculty, clinical training staff, practicum instructors, and clinical supervisors.
- I am aware that it is my responsibility to retain important original practicum documentation (i.e. Weekly Summary of Hours, Supervisor Responsibility Statements, etc.) for future verification of my clinical practicum experience by licensing agencies or state boards.
- J. I am aware that the majority of my clinical practicum experience is coordinated off campus, often requiring daytime commitments and not evenings or weekends exclusively.

contact hours pro	e for meeting requirements necessary for LMFT/LPCC licensing. I need to accrue 280 face-to-face client re-degree if I am going to pursue the LPCC license.				
Date Student's Signature					

## Appendix IV Pepperdine University Supervisor Evaluation of LMFT/LPCC Trainee Form

Student Name:			Academic Program:		
Evaluation Peri	od:   Fall 20   Spring 2	0	□ Summer 20 □	Other	
Agency Name:			City:		
Clinical Superv	risor's Name:		Phone:		
How Competency was Assesse	d. Check all that apply.				
How Competency was Assessed. Check all that apply.  A. □ Direct Observation B. □ Video C. □ Audio D. □ Supervisory Discussion E. □ Review of Written Reports F. □ Feedback from others G. □ Other (specify):  —————			3: Meets standard appropriate to current level of training and experience.  4: Meets Standard, appropriate to current level of training and experience.  5: Meets standard, exceeds in some competencies  6: Exceeds performance standard in most competencies.		
Performance Levels: Check all boxes that apply within each Competency area and rank student 1 thru 6 based on where majority of boxes are checked for that competency.			Note: If student Fails to Meet Standard or Needs Improvement, provide explanation in the Comment box for that Competency.		
<ol> <li>Fails to meet standard, requir</li> <li>Meets minimum standard, wo</li> </ol>	es further training ould benefit from further training				
	COMPETEN	ICY 1:	Clinical Evaluation		
Needs much guidance in didentifying presenting problems, didentifying client strengths, and didentifying possible substance abuse, and din in connecting presenting problem to DSM diagnoses.	☐ Can identify treatment unit, presenting problems, and patterns of behavior with guidance. ☐ Does not always identify risks and self-destructive behaviors. ☐ Sometimes misses client strengths and needs to be reminded to identify such strengths. ☐ Does not always assess for substance abuse. ☐ Needs help connecting DSM criteria to presenting problems. ☐ Has little understanding of prognostic indicators.	treatr of be destr preve appro Rout copin Gene some appro	enerally good at identifying unit of ment, presenting problems, and patterns thavior.   Identifies risks and self-uctive behaviors and implements ention techniques and identifies opriate intervention resources.  inely assesses client strengths and ag skills, and possible substance use.  erally sufficient in using the DSM but stimes needs help in identifying opriate diagnoses.   Beginning to rstand prognostic indicators.	☐ Consistently good at identifying unit of treatment, presenting problems, and patterns of behavior. ☐ Identifies risks and self-destructive behaviors and implements prevention techniques and identifies appropriate intervention resources. ☐ Routinely assesses client strengths and coping skills, and possible substance use. ☐ Connects presenting problem with DSM diagnosis and identifies possible comorbid disorders. ☐ Can identify elements relevant to making proper prognosis.	
1 Fails to Meet Standard	2 3 Meets Minimum Standard		4 5 Meets Standard	6 Exceeds Standard	
COMPETENCY 2: Crisis Ma					

☐ Is inadequate in identifying indicators of abuse, danger to self, or danger to others. ☐ Sometimes disputes supervisor's identifications of such indicators. ☐ Inadequate in issues dealing with trauma. ☐ Completely relies upon supervisor to develop and implement a plan to reduce the potential for danger and to report these incidents. Requires Comment.	☐ Sometimes misses indicators of abuse, danger to self, or danger to others, but understands these signs after discussion with supervisor. ☐ Mostly relies upon supervisor to develop and implement a plan to reduce the potential for danger. ☐ Is uncertain in identifying and treating trauma. ☐ Feels less confident in reporting such crises and defers to supervisor to complete reporting requirements.	☐ Generally good at observing and assessing for indicators of abuse, danger to self, or danger to others with support from supervisor. ☐ Helps in the development and implementation of a plan to reduce the potential for danger. ☐ Generally good at identifying and treating trauma with assistance from supervisor. ☐ Manages reporting requirements with assistance from supervisor.	☐ Consistently observes and assesses for indications of abuse, danger to self, or danger to others. ☐ Develops/implements a plan to reduce the potential for danger with appropriate input from supervisor. ☐ Excellent at identifying and treating trauma. ☐ Manages reporting requirements appropriately.		
1 Fails to Meet Standard Comments required if student rank	2 3 Meets Minimum Standard	4 5 Meets Standard	6 Exceeds Standard		
Comments required it student runn	2 01 2				
COMPETENCY 3: Treatment Plan	nning				
☐ Inadequate knowledge of principles of systems theory and/or a clinically appropriate theory. ☐ Difficulty in identifying stages of treatment and imposes treatment goals. ☐ Does not understand the differences between short- and long-term treatment goals. ☐ Does not recognize the need for referral and is not aware of appropriate referrals. Requires Comment.	☐ Often needs help demonstrating knowledge of principles of systems theory and/or a clinically appropriate theory. ☐ Needs help in identifying stages of treatment and developing mutually agreed upon, appropriate shortand long-term goals. ☐ Often needs help recognizing the need for referral for appropriate services and resources.	☐ Generally good demonstration of awareness of principles of systems theory and/or a clinically appropriate theory. ☐ Acceptable identification of stages of treatment and mutually agreed upon, appropriate short- and long-term treatment goals. ☐ Sometimes needs guidance on recognizing the need for referral for appropriate services and resources.	☐ Consistent demonstration of awareness of principles of systems theory and/or a clinically appropriate theory. ☐ Identifies stages of treatment and sets mutually agreed upon, appropriate short- and long-term goals for treatment. ☐ Recognizes the need for referral and identifies appropriate services and resources.		
1 Fails to Meet Standard	2 3 Meets Minimum Standard	4 5 Meets Standard	6 Exceeds Standard		
Comments required if student rank	s 1 or 2:				
COMPETENCY 4: Rapport Buildi	ing				
☐ Inadequate in developing empathy and sometimes is not aware of empathy's importance. ☐ Does not create a safe environment. ☐ Is unaware of how one's own biases affect treatment outcomes.  Requires Comment.	☐ Often does not develop empathy. ☐ Needs help in creating a safe environment and understanding the problem from the client's perspective. ☐ Difficulty developing trust with clients and often imposes one's own biases. ☐ Is not always aware of one's emotions and imposes treatment without much regard to therapeutic working alliance. ☐ Is not aware of impact of self on clients.	☐ Generally good at developing empathy. ☐ Is adequate in creating a safe environment and attempts to understand the problem from the client's perspective. ☐ Is adequate in developing trust with clients but sometimes needs to keep biases in check. ☐ Is developing the ability to control one's emotions. ☐ Sometimes proceeds to treatment before trust is fully developed. ☐ Is appropriately aware of impact of self on clients.	☐ Consistent demonstration of empathy. ☐ Creates a safe environment by understanding the problem from the client's perspective. ☐ Consistently in control of one's emotions and assesses for trust. ☐ Is aware and uses impact of self on clients in treatment.		
1 Fails to Meet Standard	2 3 Meets Minimum Standard	4 5 Meets Standard	6 Exceeds Standard		

Comments required if student ranks 1 or 2:					
COMPETENCY 5: Treatment	<b>3</b> 5 1 11 61 3 1	<b>17</b> 0 11 11 6	<b>3</b> 5		
☐ Unable to apply any therapeutic principles.	☐ Poor knowledge of theoretically appropriate, evidence based treatment,	☐ Generally good knowledge of theoretically appropriate, evidence based	☐ Demonstrates consistent knowledge of theoretically appropriate, evidence based		
principles.	and client-specific clinical interventions.	treatment, and client-specific clinical	treatment, and client-specific clinical		
Requires Comment.	☐ Needs help in evaluating client's	interventions.   Is adequate at	interventions.  Very good skills in		
_	coping skills to determine timing of	explaining treatments to clients.	explaining treatments in ways clients can		
	interventions.   Needs guidance in	Good in evaluating client's coping skills	understand. ☐ Consistent in evaluating		
	modifying the treatment process based	to determine timing of interventions. $\Box$	client's coping skills to determine timing		
	upon therapeutic progress. ☐ Needs	Good in modifying the treatment process	of interventions.   Consistent in		
	assistance in understanding transference	by monitoring therapeutic progress.   Is	modifying the treatment process by		
	and countertransference issues.   Poor	gaining awareness of transference and	monitoring therapeutic progress. ☐ Has good awareness of transference and		
	at case management-related issues.   Needs help in identifying appropriate	countertransference issues.   Adequate	countertransference issues.   Good at		
	termination and transition from	at case management-related issues. ☐ Good in developing a plan for	case management-related issues.		
	treatment.	termination with client to provide a	Consistent in developing a plan for		
		transition from treatment.	termination with client to provide a		
			transition from treatment.		
	2 3	4 5	6		
1	Meets Minimum Standard	Meets Standard	Exceeds Standard		
Fails to Meet Standard					
Comments required if student rank	s 1 or 2:				
COMPETENCY 6: Human Divers	, <del>*</del>				
☐ Unable to understand the	☐ Needs help in identifying issues of	☐ Generally good at identifying issues	☐ Consistent at identifying issues of		
	☐ Needs help in identifying issues of diversity which impact the therapeutic	of diversity which impact the therapeutic	diversity which impact the therapeutic		
☐ Unable to understand the importance of issues of diversity.	☐ Needs help in identifying issues of diversity which impact the therapeutic environment. ☐ Sometimes is unable to	of diversity which impact the therapeutic environment. □ Is able to provide an			
☐ Unable to understand the	☐ Needs help in identifying issues of diversity which impact the therapeutic	of diversity which impact the therapeutic	diversity which impact the therapeutic environment, including issues of gender,		
☐ Unable to understand the importance of issues of diversity.	☐ Needs help in identifying issues of diversity which impact the therapeutic environment. ☐ Sometimes is unable to disentangle one's own values from	of diversity which impact the therapeutic environment. ☐ Is able to provide an unbiased therapeutic environment when	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at		
☐ Unable to understand the importance of issues of diversity.	☐ Needs help in identifying issues of diversity which impact the therapeutic environment. ☐ Sometimes is unable to disentangle one's own values from client's values, which sometimes	of diversity which impact the therapeutic environment. ☐ Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views. ☐ Can apply treatment strategies consistent with	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic		
☐ Unable to understand the importance of issues of diversity.	☐ Needs help in identifying issues of diversity which impact the therapeutic environment. ☐ Sometimes is unable to disentangle one's own values from client's values, which sometimes	of diversity which impact the therapeutic environment. ☐ Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views. ☐ Can apply treatment strategies consistent with client's values, beliefs, and/or	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic environment when client's values, beliefs,		
☐ Unable to understand the importance of issues of diversity.	☐ Needs help in identifying issues of diversity which impact the therapeutic environment. ☐ Sometimes is unable to disentangle one's own values from client's values, which sometimes	of diversity which impact the therapeutic environment. ☐ Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views. ☐ Can apply treatment strategies consistent with	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic		
☐ Unable to understand the importance of issues of diversity.	☐ Needs help in identifying issues of diversity which impact the therapeutic environment. ☐ Sometimes is unable to disentangle one's own values from client's values, which sometimes	of diversity which impact the therapeutic environment. ☐ Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views. ☐ Can apply treatment strategies consistent with client's values, beliefs, and/or	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's		
☐ Unable to understand the importance of issues of diversity.  Requires Comment.	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process. ☐ Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.		
☐ Unable to understand the importance of issues of diversity.  Requires Comment.	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.	of diversity which impact the therapeutic environment. ☐ Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views. ☐ Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process. ☐ Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.		
☐ Unable to understand the importance of issues of diversity.  Requires Comment.	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process. ☐ Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process. ☐ Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process. ☐ Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process. ☐ Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process. ☐ Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard  Comments required if student rank	Needs help in identifying issues of diversity which impact the therapeutic environment. ☐ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.  2 3 Meets Minimum Standard  s 1 or 2:	of diversity which impact the therapeutic environment. □ Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views. □ Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.  4 5 Meets Standard	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.  6 Exceeds Standard		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard  Comments required if student rank  COMPETENCY 7: Law  Poor understanding of legal issues relevant to this clinical	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.  2 3 Meets Minimum Standard  s 1 or 2:  □ Needs help in recognizing legal issues, managing mandated reporting	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.  4 5  Meets Standard	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.  6 Exceeds Standard		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard  Comments required if student rank  COMPETENCY 7: Law  Poor understanding of legal	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.  2 3 Meets Minimum Standard  s 1 or 2:  □ Needs help in recognizing legal issues, managing mandated reporting requirements, and obtaining client's (or	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.  4 5  Meets Standard	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.  6 Exceeds Standard		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard  Comments required if student rank  COMPETENCY 7: Law  Poor understanding of legal issues relevant to this clinical setting.	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.  2 3 Meets Minimum Standard  s 1 or 2:  □ Needs help in recognizing legal issues, managing mandated reporting requirements, and obtaining client's (or legal guardian's) authorization for	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.  4 5  Meets Standard	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.  6 Exceeds Standard		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard  Comments required if student rank  COMPETENCY 7: Law  Poor understanding of legal issues relevant to this clinical	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.  2 3 Meets Minimum Standard  s 1 or 2:  □ Needs help in recognizing legal issues, managing mandated reporting requirements, and obtaining client's (or legal guardian's) authorization for release to disclose or obtain confidential	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.  4 5  Meets Standard	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.  6 Exceeds Standard		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard  Comments required if student rank  COMPETENCY 7: Law  Poor understanding of legal issues relevant to this clinical setting.	Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.  2 3 Meets Minimum Standard  s 1 or 2:  □ Needs help in recognizing legal issues, managing mandated reporting requirements, and obtaining client's (or legal guardian's) authorization for release to disclose or obtain confidential information. □ Does not always	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.  4 5  Meets Standard	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.  6 Exceeds Standard  Consistent knowledge of legal issues relevant to this clinical setting.  Adheres to legal statutes, and understands and appropriately manages mandated reporting requirements.  Obtains and understands the need for client's (or		
Unable to understand the importance of issues of diversity.  Requires Comment.  1 Fails to Meet Standard  Comments required if student rank  COMPETENCY 7: Law  Poor understanding of legal issues relevant to this clinical setting.	□ Needs help in identifying issues of diversity which impact the therapeutic environment. □ Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.  2 3 Meets Minimum Standard  s 1 or 2:  □ Needs help in recognizing legal issues, managing mandated reporting requirements, and obtaining client's (or legal guardian's) authorization for release to disclose or obtain confidential	of diversity which impact the therapeutic environment.   Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views.   Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.  4 5  Meets Standard	diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process.   Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.  6 Exceeds Standard		

	security of therapy records. ☐ Is not very knowledgeable of laws relevant to	Maintains security of clinical records.	client therapy records.   Aware of and follows law in clinical practice.	
	practice.	Is developing knowledge of and follows law in clinical practice.	and follows law in clinical practice.	
	2 3	4 5	6	
1 Falls to Mant Standard	Meets Minimum Standard	Meets Standard	Exceeds Standard	
Fails to Meet Standard  Comments required if student rank	s 1 or 2.			
Comments required it student rank	5 1 01 2.			
COMPETENCY 8: Ethics				
☐ Poor understanding of ethical issues relevant to this clinical	☐ Needs help in recognizing ethical issues arising in this clinical setting.	☐ Generally good knowledge of ethical issues arising in this clinical setting.	☐ Demonstrates excellent knowledge of ethical issues arising in this clinical	
setting.	☐ Needs reminders to inform clients of parameters of confidentiality and	☐ Is able to inform clients of parameters of confidentiality and conditions of	setting.   Consistently informs clients of parameters of confidentiality and	
Requires Comment.	conditions of mandated reporting. ☐ Is	mandated reporting.   Maintains	conditions of mandated reporting.	
	not aware of one's scope of practice and	appropriate therapeutic boundaries. ☐ Is	Maintains appropriate therapeutic boundaries. □ Consistent at staying within	
	attempts to treat all problems.   Needs reminders of appropriate	not always aware of one's scope of practice.   Sometimes needs help in	scope of practice.  Consistent at staying within scope of practice.	
	therapeutic boundaries.   Has difficulty	identifying personal	identify personal	
	in identifying personal	reactions/countertransference issues that	reactions/countertransference issues that	
	reactions/countertransference issues that could interfere with the therapeutic	could interfere with the therapeutic process, but can easily correct oversights	could interfere with the therapeutic process, and identifies personal limitations	
	process and sometimes denies or	in this area.   Together with	that require outside consultation.	
	disputes these issues when pointed out	supervisor, identifies personal		
	by supervisor.	limitations that require outside consultation.		
		construction.		
	2 3	4 5	6	
1 Fails to Meet Standard	2 3 Meets Minimum Standard	4 5 Meets Standard	6 Exceeds Standard	
1 Fails to Meet Standard Comments required if student rank	Meets Minimum Standard		I -	
Fails to Meet Standard	Meets Minimum Standard		I -	
Fails to Meet Standard	Meets Minimum Standard		I -	
Fails to Meet Standard	Meets Minimum Standard s 1 or 2:		I -	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in	Meets Minimum Standard s 1 or 2:  ties  Needs improvement in demonstrating	Meets Standard	I -	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-	Meets Minimum Standard s 1 or 2:  ties  Needs improvement in demonstrating initiative, motivation, attitude, self-	Meets Standard  Generally acceptable demonstration of initiative, motivation, attitude, self-	□ Consistent demonstration of initiative, motivation, attitude, self-awareness. □	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness.  Has demonstrated	Meets Minimum Standard s 1 or 2:  ties  Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. Needs improvement in	☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable	☐ Consistent demonstration of initiative, motivation, attitude, self-awareness. ☐ Consistent demonstration of integrity,	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-	Meets Minimum Standard  s 1 or 2:  ties  □ Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. □ Needs improvement in integrity, sensitivity, flexibility, insight,	Meets Standard  Generally acceptable demonstration of initiative, motivation, attitude, self-	☐ Consistent demonstration of initiative, motivation, attitude, self-awareness. ☐ Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has	Meets Minimum Standard  s 1 or 2:  ties  □ Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. □ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Needs improvement in oral and written	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally	□ Consistent demonstration of initiative, motivation, attitude, self-awareness. □ Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Consistently demonstrated good oral and written	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has demonstrated lapses in oral and	Meets Minimum Standard  s 1 or 2:  ties  □ Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. □ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. □	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written	□ Consistent demonstration of initiative, motivation, attitude, self-awareness. □ Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Consistently	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has	Meets Minimum Standard  s 1 or 2:  ties  □ Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. □ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Needs improvement in oral and written	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally	□ Consistent demonstration of initiative, motivation, attitude, self-awareness. □ Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Consistently demonstrated good oral and written	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has demonstrated lapses in oral and written communication skills.	Meets Minimum Standard  s 1 or 2:  ties  □ Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. □ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Needs improvement in oral and written communication skills.	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written communication skills.	□ Consistent demonstration of initiative, motivation, attitude, self-awareness. □ Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Consistently demonstrated good oral and written communication skills.	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has demonstrated lapses in oral and written communication skills.  Requires Comment.	Meets Minimum Standard  s 1 or 2:  ties  □ Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. □ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Needs improvement in oral and written communication skills.	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written communication skills.	Consistent demonstration of initiative, motivation, attitude, self-awareness.  Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence.  Consistently demonstrated good oral and written communication skills.	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has demonstrated lapses in oral and written communication skills.	Meets Minimum Standard  s 1 or 2:  ties  □ Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. □ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Needs improvement in oral and written communication skills.	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written communication skills.	□ Consistent demonstration of initiative, motivation, attitude, self-awareness. □ Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Consistently demonstrated good oral and written communication skills.	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has demonstrated lapses in oral and written communication skills.  Requires Comment.	Meets Minimum Standard  s 1 or 2:  Ties  Needs improvement in demonstrating initiative, motivation, attitude, selfawareness. ☐ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Needs improvement in oral and written communication skills.	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written communication skills.	Consistent demonstration of initiative, motivation, attitude, self-awareness.  Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence.  Consistently demonstrated good oral and written communication skills.	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has demonstrated lapses in oral and written communication skills. Requires Comment.	Meets Minimum Standard  s 1 or 2:  Ties  Needs improvement in demonstrating initiative, motivation, attitude, selfawareness. ☐ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Needs improvement in oral and written communication skills.	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written communication skills.	Consistent demonstration of initiative, motivation, attitude, self-awareness.  Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence.  Consistently demonstrated good oral and written communication skills.	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has demonstrated lapses in oral and written communication skills.  Requires Comment.	Meets Minimum Standard  s 1 or 2:  Ties  Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. □ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Needs improvement in oral and written communication skills.  2 3  Meets Minimum Standard  s 1 or 2:	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written communication skills.	Consistent demonstration of initiative, motivation, attitude, self-awareness.  Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence.  Consistently demonstrated good oral and written communication skills.	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has demonstrated lapses in oral and written communication skills.  Requires Comment.  Fails to Meet Standard  Comments required if student rank  COMPETENCY 10: Professional I	Meets Minimum Standard  s 1 or 2:  Ties  Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. □ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Needs improvement in oral and written communication skills.  2 3  Meets Minimum Standard  s 1 or 2:	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written communication skills.  4 5 Meets Standard	□ Consistent demonstration of initiative, motivation, attitude, self-awareness. □ Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Consistently demonstrated good oral and written communication skills.  6 Exceeds Standard	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  ☐ Has demonstrated lapses in initiative, motivation, attitude, self-awareness. ☐ Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Has demonstrated lapses in oral and written communication skills.  Requires Comment.  1 Fails to Meet Standard  Comments required if student rank  COMPETENCY 10: Professional I  ☐ Does not adhere to deadlines and	ties  ☐ Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. ☐ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Needs improvement in oral and written communication skills.  2 3 Meets Minimum Standard  s 1 or 2:  Documentation ☐ Does not always maintain timely and	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written communication skills.  4 5 Meets Standard	□ Consistent demonstration of initiative, motivation, attitude, self-awareness. □ Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Consistently demonstrated good oral and written communication skills.  6 Exceeds Standard	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has demonstrated lapses in oral and written communication skills.  Requires Comment.  Therefore, the standard comments required if student rank  COMPETENCY 10: Professional I  Does not adhere to deadlines and professional documentation standards.	Meets Minimum Standard  s 1 or 2:  Ties  Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. □ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Needs improvement in oral and written communication skills.  2 3  Meets Minimum Standard  s 1 or 2:	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written communication skills.  4 5 Meets Standard	□ Consistent demonstration of initiative, motivation, attitude, self-awareness. □ Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. □ Consistently demonstrated good oral and written communication skills.  6 Exceeds Standard	
Fails to Meet Standard  Comments required if student rank  COMPETENCY 9: Personal Quali  Has demonstrated lapses in initiative, motivation, attitude, self-awareness. Has demonstrated lapses in integrity, sensitivity, flexibility, insight, compassion and personal presence. Has demonstrated lapses in oral and written communication skills.  Requires Comment.  1 Fails to Meet Standard  Comments required if student rank  COMPETENCY 10: Professional I  Does not adhere to deadlines and professional documentation	ties  ☐ Needs improvement in demonstrating initiative, motivation, attitude, self-awareness. ☐ Needs improvement in integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Needs improvement in oral and written communication skills.  2 3 Meets Minimum Standard  s 1 or 2:  Documentation  ☐ Does not always maintain timely and orderly paperwork and sometimes skirts	Meets Standard  ☐ Generally acceptable demonstration of initiative, motivation, attitude, self-awareness. ☐ Generally acceptable demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. ☐ Generally acceptable oral and written communication skills.  4 5 Meets Standard	Consistent demonstration of initiative, motivation, attitude, self-awareness. Consistent demonstration of integrity, sensitivity, flexibility, insight, compassion and personal presence. Consistently demonstrated good oral and written communication skills.  6 Exceeds Standard	

		1	1					
1 Fails to Meet Standard	2 3 Meets Minimum Standard	4 5 Meets Standard	6 Exceeds Standard					
Comments required if student rank	a 1 an 3.							
Comments required it student ranks 1 of 2.								
COMPETENCY 11: Professionalis	m							
☐ Does not demonstrate	☐ Appearance and attire is frequently	☐ Appearance appropriate to agency	☐ Consistently demonstrates proper					
professionalism in the work setting.	inappropriate for agency setting.	setting.   Acceptable demonstration of	appearance appropriate to agency setting.					
	☐ Is inconsistent in punctuality and in	punctuality and in meeting	☐ Consistently demonstrates punctuality					
Requires Comment.	meeting responsibilities to agency and to	responsibilities to agency and to	and responsibilities to agency and to					
	relationships with professional	relationships with professional	relationships with professional colleagues.					
	colleagues. ☐ Is not very aware of the	colleagues. ☐ Is developing the	☐ Has the ability to understand the need					
	need for self care.	understanding of the importance of self	for self care as it relates to effective					
		care.	clinical practice.					
1	2 3	4 5	6					
Fails to Meet Standard	Meets Minimum Standard	Meets Standard	Exceeds Standard					
Comments required if student rank	s 1 or 2:							
Comments required it student rank	5 1 01 2.							
COMPETENCY 11: Professionalis	m							
☐ Does not demonstrate	☐ Appearance and attire is frequently	☐ Appearance appropriate to agency	☐ Consistently demonstrates proper					
professionalism in the work setting.	inappropriate for agency setting.	setting.   Acceptable demonstration of	appearance appropriate to agency setting.					
5	☐ Is inconsistent in punctuality and in	punctuality and in meeting	☐ Consistently demonstrates punctuality					
Requires Comment.	meeting responsibilities to agency and to	responsibilities to agency and to	and responsibilities to agency and to					
	relationships with professional	relationships with professional	relationships with professional colleagues.					
	colleagues. ☐ Is not very aware of the	colleagues. ☐ Is developing the	☐ Has the ability to understand the need					
	need for self care.	understanding of the importance of self	for self care as it relates to effective					
		care.	clinical practice.					
	2 3	4 5	6					
1	Meets Minimum Standard	Meets Standard	Exceeds Standard					
Fails to Meet Standard								
Comments required if student rank	s 1 or 2:							
•								
OVER AND A GORGON PROVIDE								
OVERALL ASSESSMENT								
	2 3	4 5	6					
1	Meets Minimum Standard	Meets Standard	Exceeds Standard					
Fails to Meet Standard								
Comments required if student rank	s 1 or 2:							
A 864 3								
Areas of Strength:								

Areas in Need of Further Development:		
Plans for Development or Remediation:		
Consultation with school requested by clin	ical supervisor: No 🗖	Yes  Best day/time:
Supervisor's Comments (optional):		
Student's Comments (optional):		
Hours of Supervised Experience During T	his Evaluation Period	
		mmary of Hours:/ to/
Total hours of clinical services provided du		
Individual Thera	py:	Hours
Couple, Family	& Child Therapy:	Hours*
Group Therapy/0	Counseling: _	Hours
Total Face-to-F	ace Client _	Hours
Contact:	(	(Minimum of 30 hours)
*Do not double co	unt conjoint couples and j	family therapy hours.
Total hours of supervision and t Individual Super		is academic term: Hours
Group Supervisi	on:	Hours
Were direct observations completed (two of Yes ☐ No ☐	lirect observations for fall a	and spring semesters, one for summer term)
Did the student meet for clinical supervision	on at least 10 weeks during t	the time stated above Yes □ No □
state state in the control of the control o		

The clinical supervisor met, reviewed and discussed this evaluation with the student.  Yes   If No, please explain:	No 🗆
Signatures:	
Student's Signature	Date
Supervisor's Signature	Date
Pepperdine University Practicum Instructor Signature	Date

# Appendix V <u>Pepperdine University</u> <u>MFT Clinical Training Program</u>

#### LMFT/LPCC STUDENT'S EVALUATION OF SUPERVISION AND AGENCY

Note: Please return this evaluation to your practicum instructor by the last week of class. Should you have more than one practicum site or supervisor, please contact your Clinical Training Coordinator to discuss the evaluation procedures. Please know that this evaluation (with your private information blocked out) will be anonymously shared with other MFT students. This information will not be shared with your practicum site or supervisor.

tudent name:		Date:	
Student's phone number: ()	Eı	nail:	
Primary Supervisor:(Name)	(Dagraa/Titla)	(Licanca)	
Practicum Site:	(Degree/Title)	(License)	
Address:			
Agency Telephone: ()			
In which semester of Practicum are you	enrolled? 1st 2n	d 3rd	
Please note: If this is your third or firmust have received the following minimenrollment: For those enrolled prior to Se For LMFT/LPCC students enrolled after contact and up to 75 client centered adversarial your description of "credit" in order for your degree to possible the property of the propert	num hours of client content eptember of 2012, 15 9/1/2012, a minimum vocacy hours) are requisional epitember of the student des in Practicum, you	ontact coinciding with your of hours of client contact is red of 225 hours (150 minimum uired. If a student is enrolle will need 280 hours of direct	date of quired. In client d after t client
PART I: GI	ENERAL INFORMA	ATION	
Type and amount of supervision recei     a hours per week o     b hours per week o     less)	of individual supervisi		s or

Observations for the term, however, they may be earned by completing one at each site

2. Supervision approach: (Check all that apply) Please note: You will need 2 Direct

(preferable) or if one site does not pare allowable at the same site.  a Case Report  b Audio Tape  c Video Tape  d One-way Mirro  e Supervisor in re-	or	Observati	on, then bo	th Direct	Observatio	ons
3. Did your supervisor utilize fam	ily therapy mo	dels in d	iscussing cl	ients? (C	heck One)	)
always most of t	he time	_sometin	ness	seldom _	neve	r
Please specify which systems orient 4. Approximately what percentage  Children Couples  5. What types of client issues did  6. Does this agency specialize in a second part of the part of t	e of counseling Families you work with a specific type (Specify:	g did you  s I  at this si  of client  F SUPE	do at this sometimes and/or prob	ite? Gro	oup 	
	Outstanding	Good	<u>Average</u>	Below	<u>Poor</u>	
Was open to my ideas & opinions	5	4	3	2	1	
Related well to me interpersonally	5	4	3	2	1	
Helped me better understand my 5 4 3 2 1 theoretical model(s)						
Helped me better understand and use <b>family therapy models</b>	5	4	3	2	1	
Assisted me in assessing interaction more skillfully	as 5	4	3	2	1	

1.

2.

3.

4.

5.

6. Helped me improve my therapy skills and techniques	5	4	3	2	1
7. Assisted me in learning how to develop better treatment plans	5	4	3	2	1
8. Made clear the expectations regarding supervision	5	4	3	2	1
9. Provided me with freedom to develop my own counseling style	5	4	3	2	1
10. Recognized & encouraged strengths	5	4	3	2	1
11. Recognized and assisted me with my areas of improvement	5	4	3	2	1
12. Was responsible in regards to supervision (on time, kept appointments, etc.)	5	4	3	2	1
13. Demonstrated appropriate ethical behavior	5	4	3	2	1
14. Was a positive role model	5	4	3	2	1
OVERALL EVALUATION OF THE QUALITY OF MY SUPERVISION	5	4	3	2	1

# PART III: EVALUATION OF PRACTICUM SITE

(Circle one response for each item)

		<u>Outstanding</u>	Good	<u>Average</u>	Below	<u>Poor</u>
1.	Knowledge and skill of Professionals (administration General staff, other supervisor		4	3	2	1
2.	Ability of professionals to relate to students	late 5	4	3	2	1

OVERALL RECOMMENDATION OF THIS SITE	5	4	3	2	1
4. Quality of training provided (other than regular supervision)	5	4	3	2	1
3. Amount of training provided	5	4	3	2	1

### PART IV: DESCRIPTION OF PRACTICUM SITE EXPERIENCE

Please describe what you believe are the major strengths and major challenges of your practicum site experience. This feedback is very important in the overall assessment of this site. Use the back of this form if additional space is needed.

Strengths:
------------

## **Challenges:**

## Appendix VI

# Pepperdine University VERIFICATION OF PRACTICUM HOURS FORM

This form must be signed by students who have completed 6 semester units of Psy 662.

- (A) You will need for MFT Associate eligibility: 225 (minimum) Direct Client Contact Hours for Degree Posting (75 can be Client Centered Advocacy)
  - a. If you do not meet the minimum 225 hour requirement, you will need to take a grade of IP to complete remaining hours and enroll in a  $4^{th}$  practicum.
- **(B)** You will need for PCC Associate eligibility: 280 (minimum) Direct Client Contact Hours needed for Degree Posting (Only Post-Degree Hours count toward LPCC Licensure)

(A)	(B)	(C)	(D)				
LMFT: You must have a minimum of 225 hours of Direct Client Contact (of which 75 can be Client Centered Advocacy) for degree posting.	LPCC: You must have a minimum of 280 hours of Direct Client Contact for degree posting.	Supervision: 1 unit of Supervision = 1 hour of individual/triadic supervision or 2 hours of group supervision	To determine your supervision ratio, divide your total direct client contact hours by 5. Your total supervision units (section C) should meet or exceed this number. If you do not have enough supervision units to meet the 5:1 client contact to supervision ratio, you will not be able to count excess				
Please complete the section below.	Please complete the section below.		client contact hours (for LMFT licensure.)				
What are your Total Clinical Hours (Direct Client Contact + Client Centered Advocacy) for MFT Associate eligibility?	What are your Total Direct Client Contact Hours for PCC Associate eligibility?:	What are your Total Supervision Units?:	Did you meet the 5:1 ratio for the minimum required 225/280 direct client contact hours?				
CC +CCA = Total Hours:	**Total Hours:	Supervision Units:	Yes No				
Do you intend on registering as an MFT Associate? YesNo							
Do you intend on registering	g as an PCC Associate?	_Yes No					
Ctudent Drinted Name .							

Do you intend on registering as an PCC Associate?	Yes No	
Student Printed Name :		
Student Signature:		
Student CWID:	Date:	
Practicum Instructor Printed Name:		
Practicum Instructor Signature:		

<sup>\*</sup>CTC may sign in lieu of Practicum Instructor.

# Appendix VII



#### **Board of Behavioral Sciences**

1625 North Market Blvd., Suite S200, Sacramento, CA 95834 (916) 574-7830 www.bbs.ca.gov



# IN-STATE EXPERIENCE VERIFICATION OPTION 1 –STREAMLINED METHOD

This form is to be completed by the applicant's California supervisor and submitted by the applicant with his or her *Application for Licensure and Examination*. All information on this form is subject to verification.

Use this "Option 1" form to report hours under the streamlined method

<ul> <li>Use separate forms for pre-degree and post-degree experience</li> <li>Use separate forms for each supervisor and each employment setting</li> <li>Ensure that the form is complete and correct prior to signing</li> <li>Provide an original signature and have the supervisor initial any changes</li> <li>Do not submit Weekly Summary forms unless specifically requested</li> </ul>							The hours reported on this form were earned (mark one): ☐ Pre-Degree ☐ Post-Degree		
APPLICANT NAME:									
Last		First	Middle				Associate Number AMF		
SUPERVISOR INFORMATION	DN:								
Supervisor's Last Na		F	First			Middle			
Business Phone	e Email Address (OPTIONAL)								
License Type	License Type License N					Date First Licensed*			
Physicians: Were you certife entire period of supervision?      LPCCs: Did you meet the quarter specified in California law?  *If licensed in California for less that APPLICANT'S EMPLOYER  Name of Applicant's Employer	N/A N/A N ualifications to t N/A N N/A N an two years on t	No Yes: Da	te Certifi d families ate qualifi	ed: during the er	Cer ntire peri met: e out-of-	t. #:od of sup	ervision, as  se information.		
Address Number and	Street			City		State	Zip Code		

Applicant: Last			First	Middle				
	ADLOVED INE	ODMATION (continued)	١-					
	IPLUTER INFO	ORMATION (continued)						
1.	Was this experience gained in a setting that lawfully and regularly provides mental health Yes No counseling or psychotherapy?							
2.	Was this experience gained in a private practice setting?							
3.	. Was this experience gained in a setting that provided oversight to ensure that the applicant's work meets the experience and supervision requirements and is within the scope of practice?							☐ No
4.	For hours gaine	ed as an Associate ONLY:	Wa	s the applicant receiving pa	ay?	[	Yes	☐ No
	If YES, attach a copy of the applicant's W-2 statement for each year experience is claimed. If a W-2 has not yet been issued for this year, attach a copy of the current paystub. If applicant volunteered, submit a letter from the employer verifying volunteer status.							•
EX	PERIENCE IN	FORMATION:						
1. Dates of experience being claimed: From: mm/dd/yyyy To: mm/d						n/dd/yyyy	<u>,                                      </u>	
How many weeks of supervised experience are being claimed? weeks								
3. Hours of Experience:						Logg	ed Hours	
a. Total Direct Counseling Experience (Minimum 1,750 hours)								
<ul> <li>Of the above hours, how many were gained diagnosing and treating Couples, Families and Children? (Minimum 500 of the 1,750 hours)</li> </ul>								
b.Total Non-Clinical Experience (Maximum 1,250 hours)								
	Of the at	pove hours, how many were	e Fa	ace-to-Face Supervision?	Hours	Per Week	Logg	ed Hours
	Individua	l or Triadic						
	Group (g	group contained no more tha	an 8	3 persons)				
NOTE: Knowingly providing false information or omitting pertinent information may be grounds for denial of the application. The Board may take disciplinary action on a licensee who helps an applicant obtain a license by fraud, deceit or misrepresentation.								
Supervisor Signature: Date:								



#### **Board of Behavioral Sciences**

1625 North Market Blvd., Suite S200, Sacramento, CA 95834 Telephone: (916) 574-7830 TTY: (800) 326-2297 www.bbs.ca.gov



# MARRIAGE AND FAMILY THERAPIST TRAINEE / ASSOCIATE WEEKLY SUMMARY OF EXPERIENCE HOURS OPTION 1 – NEW STREAMLINED METHOD

Name of Trainee/Associate: Last		First				Middle			
Supervisor Name			Date	e enro	lled in	grad	uate d	egree	program
Name of Work Setting (use a separate log for each	Name of Work Setting (use a separate log for each) Address of Work Setting								
Indicate your status when the hours below are logged:   Trainee  Post-Degree / Associate Application Pending - BBS File No (if known):   Registered Associate - AMFT Number:									
YEAR WEEK OF:									Total Hours
A. Direct Counseling with Individuals, Groups, Couples or Families*									
A1. Diagnosis and Treatment of Couples, Families, Children**									
B. Non-Clinical Experience***									
B1. Supervision, Individual or Triadic**									
B2. Supervision, Group**									
C. Total Hours Per Week  (A + B = C) (Maximum 40 hours / week)									
Supervisor Signature									

<sup>\*</sup> Includes telehealth counseling.

<sup>\*\* &</sup>lt;u>Line A1 is a sub-category of "A" and Lines B1 and B2 are subcategories of "B."</u> When totaling weekly hours do NOT include the subcategories - use the formula found in box "C."

<sup>\*\*\* &</sup>lt;u>Non-Clinical Experience includes:</u> Supervision, psychological testing, writing clinical reports, writing progress or process notes, client-centered advocacy, and workshops, seminars, training sessions or conferences.

## **Appendix IX**

### **Checklist for BBS and Pepperdine MFT Paperwork**

**Disclaimer:** As you prepare for practicum, use this checklist as a reference to guide you through the paperwork process. Your Clinical Training Coordinators are Kathleen Wenger at the Irvine Campus (x2580), Rebecca Reed at the WLA Campus (x5776), Alice Richardson (x1619) at the Encino Graduate Campus, and Elizabeth Duck at the Malibu Drescher Graduate Campus (x 4680).

	<b>Acknowledgement of BBS/MACLP Requirements*</b> : Required by Pepperdine University. Complete and return to your CTC by the first week of practicum class.
	<b>4-Way Agreement*</b> : Required by BBS and Pepperdine University. Have the complete document read and signed by all parties by the first week of practicum class. After CTC signs and copies for trainee file, pick up original and keep in personal file. Do not send 4-way to BBS unless requested.
	Responsibility Statement for Supervisors of a Marriage and Family Therapist Trainee or Intern (REV. 8/18). Required by BBS. Each clinical supervisor must complete. Turn in copy to CTC. Keep originals to send to BBS with application for licensure.
	Weekly summary of hours of Experience (REV 1/19): Required by BBS. Document hours and have supervisor sign weekly (Option 1). Bring a copy to practicum class the last night of class. Keep original in a safe place until you are licensed. Use this log to total hours for Experience Verification. Do not send to BBS unless Requested.
	<b>Supervisor's Evaluation of Student*</b> : Required by BBS and Pepperdine University. You will receive this in practicum class and then deliver it to your clinical supervisor the 10 <sup>th</sup> or 11 <sup>th</sup> week of practicum. Bring this evaluation the last night of practicum class. Make a copy for your records before handing in paperwork.
	<b>Student's Evaluation of Supervision*</b> : Required by Pepperdine University. You will receive this in practicum class. Complete and bring to practicum the last night of class. Or you can complete this evaluation in-class during finals week. Give to your Professor or Clinical Training Coordinator.
	Marriage and Family Therapist Experience Verification (REV 1/19): Required by the BBS. Document the total hours and get supervisor's signature when you 1) graduate, 2) leave a site, or 3) change supervisors. Submit Option 1 documents to the BBS with the application for licensure.
ver	te to Graduating MFT Students: It is very important you complete your 225/280 hours ification before you graduate. You submit this along with evaluations the last night of ir third practicum class to be filed in your trainee file at Pepperdine University.
N	eeded for Pepperdine Trainee File During the First Week of Practicum Class
ſ	☐ Original <b>Acknowledgement Form</b> * (one time)
-	☐ Copy of <b>4-way Agreement*</b> (one per site: Remember, CTC must sign
	and student keeps original)
j	☐ Copy of <b>Supervisor Responsibility Statement</b> (one per supervisor)

<sup>\*</sup>These are Pepperdine University generated documents that can NOT be obtained from the BBS.

# Needed by Practicum Instructor by the End of Practicum Class

	Copy of Weekly Summary Hours Log Supervisor's Evaluation of Student* Student's Evaluation of Site/Hours Tracking Form*					
	Needed for MFT Intern Registration					
	Completed Marriage and Family therapy Associate Registration Application Packet (REV 1/19). Obtain this at the Intern Registration Meeting in Psy 642 at Pepperdine University or the BBS Website.					
	Recent Graduate To Do List					
	Take the Marriage and Family Therapist Experience Verification (REV. 1/19) to your interview/orientation at a past degree interpolar to discuss questions					
	to your interview/orientation at a post-degree internship to discuss questions. If any of these items on the <b>MFT Experience Verification</b> do not check out, e-mail the BBS to get back an OK. (BBSWebMaster@bbs.ca.gov)					
	If supervisor is NOT paid by the agency, have <b>Letter of Agreement</b> (www.camft.org) in place.					
	Make sure your paycheck has the agency's name on it.					
	Verify your supervisor's name and license number via the BBS Website					
	(http://www.bbs.ca.gov) and check these 3 items.					
	<ul> <li>License is current and valid</li> </ul>					
	<ul> <li>No pending disciplinary actions</li> </ul>					
	<ul> <li>Licensed for at least 2 years</li> </ul>					
	Keep your hours on the <b>Weekly Summary of Hours of Experience</b> log. Check the "Post-Degree with Application Pending" box up to the point of receiving your intern number.					
П	Have any supervisors complete a new <b>Responsibility Statement for Supervisors</b>					
_	of a Marriage and Family Therapist Trainee or Associate even if staying with					
	the same supervisor.					
П	After each experience, have your supervisor complete the <b>MFT Experience</b>					
	Verification.					
	Needed for Your Ongoing Personal BBS File					
	Original 4-Way Agreements* (One per site during your traineeship only) Original Responsibility Statement for Supervisors (one per Supervisor) Original Weekly Summary of Hours of Experience Logs (one per Supervisor) Original MFT Experience Verification (One per Former Supervisor)					
	Submit to the BBS upon Application for Licensure					
	Complete application (Obtain from BBS) Original <b>Responsibility Statement for Supervisors</b> (Trainee and Associate) Original <b>MFT Experience Verifications</b> (Trainee and Associate)					

→ Keep all other originals (e.g. 4-Way Agreement & Weekly Logs) and copies of forms already sent to the BBS in a safe place until you receive your MFT License. Post-degree/LPCC licensure hours documents are similar to LMFT and can be found at <a href="www.bbs.ca.gov">www.bbs.ca.gov</a> under "Forms and Publications" for LPCC licensure.

<sup>\*</sup>These denote Pepperdine University generated documents that can NOT be obtain from the BBS website