



Table of Contents

Section 1 – Program Mission & Educational Objectives.....	2
Section 2 – Program Description & History.....	3
Program History	3
Program Location: Klamath Falls Campus Only.....	4
Program Enrollment & Program Graduates	4
Employment Rates & Salaries.....	5
Board and Licensure Exam Results	6
Industry Relationships	6
Success Stories.....	8
Program Changes.....	9
Section 3 – Program Student Learning Outcomes	11
Section 4 – Curriculum Map	13
Section 5 – Assessment Cycle.....	14
Section 6 – Assessment Activity	20
Section 7 – Data-driven Action Plans.....	26
Section 8 – Closing the Loop.....	28
Appendix.....	29

Section 1 – Program Mission and Educational Objectives

Program Mission

Oregon Tech’s Master of Science (MS) in Marriage and Family Therapy (MFT) Program prepares graduates to become skilled Marriage and Family Therapists with multicultural competence, expertise in rural mental health care, and advanced specialty training in medical family therapy and substance use disorder treatment.

In strong collaboration with local child and family service organizations, health care and mental health care providers, the MFT Program supports and strengthens mental health care and child and family services in rural southern Oregon .

Graduates of the MFT Program work in mental health, substance use disorder treatment, or integrative behavioral health care settings directly following graduation and upon becoming Licensed MFT Registered Interns, who will work under supervision to complete their full licensure requirements. Mental health and substance use disorder treatment settings in which our students will work include, but are not limited to, the following: community mental health centers, private practice clinics, residential substance use disorder treatment centers, correctional facilities, hospitals and medical centers, churches and religious institutions, and government agencies. In five to ten years following graduation, it is anticipated that students will be fully licensed MFTs, working as clinicians, supervisors, managers, and/or continuing their education as students in a mental health related doctoral program.

Mission Alignment

The MFT Program’s mission aligns well with the Oregon Institute of Technology’s mission for the following reasons:

- Students in the program complete work throughout the curriculum that is directly applicable to their future practice as Marriage and Family Therapists. For example:
 - Students practice therapeutic skills within their classes and receive feedback on this from well-trained faculty.
 - Students complete shadowing experiences with experts in the community, thus getting exposure to the myriad of possible work settings following graduation.
- Students complete a hands-on practicum experience during the last four quarters of the program. This gives students the opportunity to perform clinical work and other related duties in a community agency. The practicum experience is the culmination of all the preparation students have received in the MFT Program. Completing the practicum experience gives students the real-life experience of working in a clinical setting, which enables them to be extremely marketable upon graduation. All of our graduates are practicing in the mental health field in the state of Oregon.

Section 2 – Program Description and History

Program History

Dr. Maria Lynn Kessler championed the MFT Program at the Oregon Institute of Technology beginning in 2009. She laid the groundwork for the development and approval of the program with great support from Dr. Mark Neupert, Chair of the Humanities and Social Sciences Department. After much research, Dr. Kessler decided that the master's level program offering should specifically be Marriage and Family Therapy (MFT), as opposed to a master's in counseling or social work, because there are no other MFT Programs in southern Oregon. This makes the MFT Program at the Oregon Institute of Technology unique due to its geographic locale.

After a search for a Program Director of the MFT Program, Dr. Kathleen Adams was hired in the spring of 2014 and began at the Oregon Institute of Technology in the fall term of 2015. During her first year at the Oregon Institute of Technology (fall 2015 – summer 2016), Dr. Adams met with and listened to multiple community partners in designing and building the MFT Program's curriculum. It was important that the community's needs were central in the development of MFT Program.

After garnering community feedback and due to its unique geographic position in southern Oregon, Dr. Adams built the MFT Program at Oregon Tech around a heavy emphasis on rural mental healthcare. This rural emphasis is embedded within the curriculum and taught throughout the program. Additionally, after continually gathering community needs and feedback since the MFT Program's start, MFT faculty have developed and embedded advanced specialty trainings in Medical Family Therapy and Substance Misuse and Disorder Treatment in the curriculum. These specialties within the program set the MFT Program apart from regional competitors who do not offer this advanced training in their curricula, which make students marketable upon graduating from the program.

In the summer of 2020, Dr. Adams accepted a clinical director position in the community and stepped down as Program Director of the MFT Program. Dr. Chelsey Torgerson took over as Program Director. In the summer of 2021, Dr. Torgerson accepted a faculty position in another MFT program in Oregon and left Oregon Tech. Dr. Kevin Garrett took over as Program Director and Clinical Director in the summer of 2021 after Dr. Torgerson left.

The MFT Program's first group of students, or cohort*, started in the fall term of 2016 and graduated in June 2019. This cohort was the first to graduate from the MFT Program. The second cohort of students recently graduated in June 2020. The third cohort graduated in June of 2021, and the fourth cohort will graduate in June 2022, and so on.

**The program operates on a "cohort" model wherein a group of full-time students start together each fall and continue together through the three-year program, until they graduate. The program is now offering a part-time track for those interested in this option. Also, some*

circumstances warrant students taking courses over or later in the program. When this happens, students become part-time status and may finish when another cohort does.

Program Location

The MFT Program is offered on the Oregon Institute of Technology campus in Klamath Falls, Oregon. Given the COVID-19 pandemic, MFT courses have been taught primarily through synchronous virtual and online platforms starting with the spring 2020 term. Prior to COVID-19, classes were offered via face-to-face and blended (i.e., hybrid) formats. When COVID-19 restrictions are relaxed or removed, the program plans to return to teaching courses via various delivery methods (like before the COVID-19 pandemic). Near the end of the program, students complete a hands-on practicum experience at agencies within the community or surrounding areas, while meeting for practicum supervision group weekly and completing their remaining coursework in the MFT Program.

Program Enrollment & Program Graduates

The following table depicts enrollment within the MFT Program since the first group of students started in the fall term of 2016.

Admission Year	Number of Students Who Accepted Admission & Enrolled in Courses	Attrition	Number of Students Still Enrolled in the Program	Number of Students Who Graduated	Employed as Marriage & Family Therapist Associate (formerly Intern)
Fall 2016	9	3	0	6	6
Fall 2017	13	8	1	4	4
Fall 2018	6	3	3	3	2*
Fall 2019	5	2	3	N/A	N/A
Fall 2020	5	1	4	N/A	N/A
Fall 2021	4	0	4	N/A	N/A

**One graduate is not actively seeking to become a Marriage & Family Therapist Associate nor seeking employment at this time due to family obligations. They plan to do this in the future.*

Employment Rates and Salaries

Employment rates. The table below shows the current employment status (rates, part- or full-time) and work settings of the first cohort of MFT graduates.

Graduation Year	Rate of MFT graduates working in a mental health related job (actively seeking employment)	Work Status		Work setting (community mental health, private practice, corrections, medical facility)
		Full Time	Part Time	
2019	100% (6 of 6)	5	1	Private Practice: 2 Community Mental Health Agency: 3
2020	100% (4 of 4)	2	2	Private Practice: 2 Community Mental Health Agency: 2
2021	100% (2 of 2)	2*	0	Private Practice: 0 Community Mental Health Agency: 2

**While there were 3 graduates in June 2021, one is not actively seeking employment related to their degree, due to family obligations. They plan to do this in the future.*

Employment salaries. According to the Bureau of Labor Statistics (2017)*, MFTs across the U.S. have a mean annual salary of \$53,860 and MFTs in Oregon have an average annual salary of \$50,350.

It is important to note that, to become a fully licensed MFT (i.e., LMFT) in the state of Oregon, graduates need to first become Marriage and Family Therapist Associates (formerly “Licensed Marriage and Family Therapy Interns”). Marriage and Family Therapist Associates work under the supervision of a state-approved supervisor while accruing a total of 2,400 hours of direct client contact. In addition to completing the required clinical hours and prior to becoming fully licensed, Marriage and Family Therapist Associates must also take and successfully pass the National MFT Exam, as well as take and successfully pass the Oregon State Laws and Rules Exam.

Marriage and Family Therapist Associates are typically paid less than fully licensed MFTs (LMFTs). All but two graduates of the MFT Program currently hold Marriage and Family Therapist Associate status. One student recently graduated and will be applying for this status soon; another student is taking care of family obligations and has placed seeking this status on hold for the time being. This is important information to consider when comparing the mean annual salary of recent graduates to the national average of fully licensed MFTs.

Although not fully licensed, the salary data from 2019, 2020, and 2021 Oregon Tech MFT graduates shows that, on average, they are making a salary above the Oregon annual mean for

MFTs. The average annual salaries of those working part-time are also above the Oregon annual mean for MFTs. Please refer to the table below for additional information.

Cohort graduation year	Estimated average annual salary for graduates working in mental health related position part- (PT) and full time (FT)	Oregon average annual salary*	U.S. average annual salary*
2019	FT = \$54,740 PT = Unknown	\$50,350	\$53,860
2020	FT = \$78,000 PT = \$78,000 (Based upon data from 4 out of 4 graduates)	\$50,350	\$53,860
2021	FT = \$53,338** PT = N/A (Based upon data from 2 of 2 graduates actively working)	\$50,350	\$53,860

*According to the Bureau of Labor Statistics (2017).

**While there were 3 graduates in June 2021, one is not actively seeking employment related to their degree, due to family obligations. They plan to do this in the future.

Board and Licensure Exam Results

Of those who have responded to post-graduation follow up, one of the MFT Program’s graduates (who graduated in 2019) has taken and passed the National MFT Exam (AMFTRB) on her first attempt. It is anticipated that she will become a fully licensed LMFT in November 2021. The program has not been able to reach two 2019 graduates for approximately one year, so it is possible that more than one graduate has taken and passed the national exam. The majority of graduates who have regular contact with MFT Program faculty report planning to do so within the next calendar year. The AMFTRB needs to be taken and passed prior to application to become fully licensed. Graduates may take the exam up to two years after they have completed accruing hours towards licensure. This means that graduates may not sit for the exam until 2023, 2024, or 2025.

Industry Relationships

Current practicum sites and community partners. Since the beginning of the MFT Program, MFT faculty have worked diligently to develop and foster relationships with industry partners within

the community and in surrounding areas. MFT students are placed at mental health agencies and with private practitioners throughout the county for the practicum experience.

MFT faculty have worked closely with the Klamath Tribes. It is a priority for graduates of the MFT Program to be well-informed about the experiences and history of Klamath Tribes members. Students are provided opportunities to learn from professionals working at the Klamath Tribal Health and Family Guidance Center through guest lectures and agency tours and discussions. Moreover, MFT faculty invite providers from KBBH, LCS, TWC, and BestCare into classes for students to hear about services and treatment approaches. Medical providers and professionals are also invited into the classroom to provide guest lectures about mental health in medical settings. The MFT Program relies on local professionals to teach in the program as adjuncts, which allows students to learn from full-time mental health providers directly serving in the community.

Faculty in the MFT Program greatly value the services provided to students by practicum supervisors in the community. This is why, prior to the COVID-19 pandemic, faculty provided monthly trainings to practicum supervisors, as well as to other mental health and addictions counselors, in the community. Additionally, when program-wide webinar trainings are shown to MFT students, MFT faculty open these trainings up to practicum supervisors and community partners. This provides industry partners with free trainings, free continuing education units, and an opportunity to be trained alongside students.

MFT faculty are expected to be involved in fostering industry partnerships in the community. As illustrated above, MFT faculty are involved in outward facing service and outreach to community partners. Additionally, one (1) MFT faculty currently provides supervision in the community to those working toward full licensure as LMFTs and LPCs. Faculty who previously taught in the MFT Program (1) provided part-time clinical services at a local mental health agency and (2) provided clinical supervision at Klamath Tribal Health.

Former practicum site feedback. In an effort to continually evaluate the effectiveness of its preparation of well-trained MFTs, the MFT Program developed and sends an annual survey to practicum supervisors to provide feedback on their most recent practicum student. This survey question reads, “As an employer, rate your level of satisfaction with recent Oregon Tech MFT graduates on a scale of 1 to 10.” The scale operates from 1 (not satisfied) to 10 (very satisfied

Feedback from supervisors is provided below:

Graduation Year	5 Average	6	7	8	9	10 Very Satisfied
2021				1		2*
2020	1			1	2	
2019	1			3		2

**One student completed their practicum experience at the same agency; however, had a change in their practicum site supervisor about half-way through. Both supervisors rated their satisfaction with this student at a 10.*

This data stands as evidence that supervisors were overwhelmingly impressed with the quality of practicum students in the MFT Program at Oregon Tech.

Success Stories

It is important to reiterate that all MFT graduates seeking employment have successfully procured employment related to their MFT education within four (4) months of graduation.

Several graduates across the 2019, 2020, and 2021 graduating classes shared what they appreciated most about their education and training within the MFT Program at Oregon Tech.

Here is what they shared:

- *“The program has done an excellent job of preparing me to enter the field of marriage and family therapy as a competent and effective clinician...I truly appreciate everything that I have gained from this valuable program and all of the growth that I was able to make with the help of my fantastic professors.”*
- *“[It] provided the basic fundamentals of counseling/therapy but most importantly, I have found that my education and increased awareness of family systems and how that plays a huge role in our emotions, thoughts, and behaviors has been instrumental in working with clients.”*
- *“The program provides knowledge of basic and advanced MFT models and theories with hands on application through mock counseling sessions and weekly feedback and clinical advice on cases during the practicum year.”*
- *“The MFT Program helped me by teaching me the importance and value of working with individuals. It also helped me by providing the opportunity for my cohort and I to intern in the field for a whole year prior to graduation.”*
- *[I am] very grateful to have had the assessment, diagnosis, and treatment planning component to our coursework as it is a vital and central part of helping individuals and families.”*
- *“The OIT MFT Program has helped me in multiple ways, one of which is gaining the confidence to sit with a client and engage in tested and proven therapeutic techniques to better help the client with their presenting problems. Another way the program has helped me is that it has instilled in me a sense of importance and seriousness of the field and also providing me with the tools necessary to professionally execute my duties.”*
- *“I feel that learning the different therapeutic models provides me the opportunity to work specifically with each individual client depending on their needs. Additionally, having the hands-*

on learning in play therapy has helped me feel comfortable implementing sand tray, art, and play [techniques] with individual clients...Facilitating groups also has been extremely comfortable because we facilitated 'mock' groups in [instructor's] class. The assignment of creating a group in the class has prepared me for establishing a new group at [agency] for families of addiction."

Program Changes

Faculty. Dr. Adams was the Program Director of the MFT Program since its inception in the Fall of 2015 – Summer 2020. She stopped serving as Program Director after accepting a full-time position with Klamath Tribal Health. Dr. Anne Prouty was brought on as the Clinical Director of the MFT Program in 2016 but left after one year. Dr. Kevin Garrett joined the faculty as Clinical Director in the Fall of 2017. He helped to establish practicum sites in the community and supervised the first cohort of practicum students. In the summer of 2019, Dr. Adams took on Clinical Director responsibilities, allowing Dr. Garrett time to focus on curriculum development, program assessment, and program accreditation. Dr. Garrett has worked on developing and strengthening the program's Medical Family Therapy (MedFT) advanced specialty training. Dr. Torgerson was hired to work predominantly in the MFT Program and started in the Fall of 2018. She was recently asked to serve as the Program and Clinical Directors and started in this capacity in the Fall of 2020. Dr. Torgerson has helped with the development and inclusion of coursework related to the addiction and recovery field in the MFT Program's curriculum. She worked closely with other MFT faculty to make necessary changes to the existing MFT curriculum and, as a result, students who graduate from the MFT Program will now complete the educational coursework needed to obtain the Certified Alcohol and Drug Counselor (CADC) III credential. In the Summer of 2021, Dr. Torgerson left the Oregon Tech MFT Program and university to accept a position at another university in Oregon. After Dr. Torgerson left and stepped down as Program Director and Clinical Director, Dr. Garrett stepped up to fill these positions, so he is now the Acting Program Director and Clinical Director.

Curriculum changes. In response to community needs, the curriculum was revised to include the necessary coursework requirements for the CADC III designation. This sets the MFT Program at the Oregon Institute of Technology apart from other programs, as we are the only program in the state of Oregon to include all coursework for CADC credentialing in combination with the coursework necessary to be a licensed marriage and family therapist.

Other important adjustments have been made to existing Medical Family Therapy, human development, and rural mental health care courses. The revised curriculum still meets the rigorous standards of the Oregon Board of Licensed Professional Counselors and Therapists (OBLPCT) and the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE). The Graduate Council at Oregon Tech approved these needed changes to the MFT curriculum in the Spring of 2020.

Ongoing assessment and future changes. Since the first group of MFT students started, MFT faculty have made indicated changes to courses and the curriculum based upon feedback from students, community partners, and program faculty experiences. Since Graduate Council approved of the most recent MFT Program curriculum changes in the Winter of 2019, MFT faculty do not plan to make any changes in the near future. However, faculty are currently in the process of ensuring that course numbers and titles are appropriately recorded and reported at the university. It is also important to note that, given current movements related to social injustice and systemic oppression, MFT faculty are meeting once a quarter with MFT students to have program-wide “Critical Culture Conversations”, to discuss topics of relevance at program-wide level to signify the importance of culture and cultural humility in the practice of MFT.

Section 3 – Program Student Learning Outcomes

Program Student Learning Outcomes (PSLOs)

Students who graduate from the MFT Program at Oregon Tech will have attained the following six (6) PSLOs, as a result of their education and hands-on training:

Outcome One: Theoretical Knowledge

Apply principles and constructs of various human development and systems theories to marriage and family practice.

Outcome Two: Clinical Knowledge

Apply family therapy skills and techniques to assess, structure and direct therapy, help clients to find solutions, identify strengths, and stay engaged in the therapeutic process.

Outcome Three: Professional Identity and Ethics

Develop professional identity consistent with professional attitudes and behaviors outlined in the AAMFT Code of Ethics and applicable laws and regulations, with particular attention to cultural competence

Outcome Four: Cultural Competency

Demonstrate knowledge about systemically and culturally contextualized experiences of members of socio-cultural majority and minority groups, integrating that knowledge into ethical practice as marriage and family therapists.

Outcome Five: Research

Analyze research, and translate research findings for improvement of family therapy services using statistics and program evaluation methods.

Outcome Six: Interpersonal Effectiveness

Achieve personal development and demonstrate positive relationship skills via effective communication, respect for others, and awareness of their impact on others.

Essential Student Learning Outcomes (ESLOs)

NOTE: It is important to mention that, as a graduate program, the MFT Program is not required to collect data on ESLOs as part of the program's assessment process. However, the MFT Program will be collecting data on direct and direct measures that meet the MFT state (i.e., OBLPCT) requirements and discipline-specific (i.e., COAMFTE) requirements. The MFT PSLOs are specifically linked to corresponding COAMFTE standards, and this document is found in the Appendix section.

Origin and External Validation

The above six (6) PSLOs were established in 2015 and were developed in accordance with the Oregon Board of Licensed Professional Counselors and Therapists (OBLPCT) competencies and the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) standards. The OBLPCT is the professional board that licenses Marriage and Family Therapists in the state of Oregon. COAMFTE is the national accreditation body for Marriage and Family Therapy education programs. Oregon Tech's MFT Program meets the curriculum standards and has been approved by the OBLPCT.

Changes

There have been no changes made to the MFT Program's PSLOs since they were originally developed in accordance with state and national standards. There are no indications that such changes need to be made to the PSLOs. However, future changes may be made based upon indicative assessment data collected during the 2021-22 academic year and subsequent evaluative periods.

Section 4 – Curriculum Map

MS Marriage and Family Therapy Student Learning Outcomes Table

F = Foundation (Introduction/Core)

P = Practice (Application)

C = Capstone (Synthesis)

Course	Outcome One: Theoretical Knowledge	Outcome Two: Clinical Knowledge	Outcome Three: Professional Identity & Ethics	Outcome Four: Cultural Competency	Outcome Five: Research	Outcome Six: Interpersonal Effectiveness
Couples Therapy	F/P					
Theory of Change	C					
Practicum		P			P	P
Ethics			F			
Culture				F		F
Rural Considerations in SUDs Treatment & Prevention				F/P		
Research Methods					F	
Self of Therapist						C
Lifespan Development					F/P	
MFT Capstone	C	C	C			C

Section 5 – Assessment Cycle

NOTE: It is important to mention that, as a graduate program, the MFT Program is not required to collect data on ESLOs as part of the program’s assessment. However, the MFT Program collects data on direct and direct measures that meet the MFT state (i.e., OBLPCT) requirements and discipline-specific (i.e., COAMFTE) requirements, as explained below.

Direct measures. The first cohort to graduate in June 2019 completed a series of three (3) Capstone classes (Capstone I, Capstone II, and Capstone III) during the last three quarters in the program. In Capstone I, students first learned about self-of-the-therapist work as it directly and indirectly relates to clinical work and client outcomes. In Capstone II, students developed their preferred theory of change, articulating how they integrate primary models of therapy and clinical interventions when working therapeutically with individuals and families. Finally, in Capstone III, students completed an in-depth literature review, clinical application paper, and presentation where they demonstrated mastery of the PSLOs. MFT Faculty evaluated the paper and presentation using rubrics. Successful completion of the project indicated approval to graduate.

The assignments related to the Capstone classes were revised. Students now take a Using Self in Therapy course and a MFT Theories of Change course before taking their Clinical Capstone course. Revisions of the Capstone process occurred based upon student and faculty experiences and feedback. The cohorts which graduated in 2020 and 2021 completed a Clinical Capstone Portfolio in order to graduate, wherein they demonstrated mastery of PSLOs through capstone assignments and the inclusion of identified assignments (i.e., supportive artifacts/evidence) from previous courses. Many of the supportive artifact assignments for the Clinical Capstone class are being used as direct measures for students’ achievements of PSLOs. These direct measures are found in the table below starting on page 16, which link specific assignments/artifacts with corresponding PSLOs. This 2020-21 assessment cycle’s direct measures (which are reported on within this report) are listed first, followed by the next assessment cycle’s measures, and so on, within the Appendix section.

Indirect measures. Graduating students complete a university-level exit interview survey. Included on this Exit Survey are specific questions asking them about their learning of the six program outcomes below. The questions on the Exit Survey are found in the Appendix section at the end of this assessment report on page 29. Another indirect measure was used by Dr. Adams when she taught in the program in some of her MFT classes. For this indirect measure, students were asked to choose and write about three (3) of the course outcomes they attained in that class. Specifically, here are the instructions for completing this indirect measure in Dr. Adams’s classes:

Final: Learning Objectives / Reflection Paper

Students will choose 3 of the Student Learning Outcomes (from page 1 of this syllabus), and will write a paper no longer than five (5) pages, APA style, describing specifically how the course addressed the identified outcomes, what the student learned about the identified outcomes, and how the student learned the identified information (i.e. readings, practice sessions, discussions, etc.)

Grading:

10 points for completing this assignments

30 points for thoroughness, APA referencing, clarity, for each SLO chosen

Attached is an exemplar Learning Objectives/Reflection Paper completed by a student in the MFT Program (with their name and identifying information removed), which is found in the Appendix section of this assessment report titled, "Student Learning Outcomes," on page 50.

PLEASE SEE TABLE STARTING ON PAGE 16.

MS Marriage and Family Therapy Program Student Learning Outcomes: Cycle, Direct & Indirect Measures, & Assessment Periods

The table below shows the direct and indirect measures that will be used to assess student learning of the following program outcomes (PSLOs) during each assessment period. All measures will be collected annually by the MFT Program, but data will be reported for the following direct and indirect measures, as indicated below, during each evaluative period every three (3) years.

Outcome	2020-21	2021-22	2022-23
One: Theoretical Knowledge			<p><u>Direct Measures:</u></p> <ol style="list-style-type: none"> 1. Succinct Theory of Change Paper (MFT Capstone course; 3rd year) 2. Healthy Couple Interview Assignment (MFT 522: Couples Therapy course; 3rd year) <p><u>Indirect Measures:</u></p> <ol style="list-style-type: none"> 1. Graduate Exit Survey Item (3rd year) 2. Learning Objectives/Reflection Paper (Applicable MFT courses; 1st, 2nd, 3rd years)
Two: Clinical Knowledge		<p><u>Direct Measures:</u></p> <ol style="list-style-type: none"> 1. Clinical Knowledge Development Paper (MFT Capstone course; 3rd year) 2. Clinical Competence Evaluation (MFT 574: Practicum IV course; 3rd year) <p><u>Indirect Measures:</u></p> <ol style="list-style-type: none"> 1. Graduate Exit Survey Item (3rd year) 	

<p>Three: Professional Identity & Ethics</p>			<p><u>Direct Measures:</u></p> <ol style="list-style-type: none"> 1. Professional Identity Statement (MFT Capstone course; 3rd year) 2. Multiple Relationships in Rural Communities Assignment Ethical Dilemma #2 (MFT 550: Ethics course; 1st year) <p><u>Indirect Measures:</u></p> <ol style="list-style-type: none"> 1. Graduate Exit Survey Item (3rd year) 2. Learning Objectives/ Reflection Paper (Applicable MFT courses; 1st, 2nd, 3rd years)
<p>Four: Cultural Competency</p>	<p><u>Direct Measures:</u></p> <ol style="list-style-type: none"> 1. Cultural Roots Paper (MFT 560: Cultural Competence course; 2nd year) 2. Rural Mental Health Care Paper (MFT 562: Rural Considerations in SUDs Tx & Prevention course; 1st year) <p><u>Indirect Measures:</u></p> <ol style="list-style-type: none"> 1. Applicable Graduate Exit Survey Item (3rd year) 		
<p>Five: Research</p>		<p><u>Direct Measures:</u></p> <ol style="list-style-type: none"> 1. Literature Review Assignment (MFT 502: Lifespan Development course; 1st year) 2. Clinical Competence Evaluation Literature Review (MFT 574: Practicum IV course; 3rd year) <p><u>Indirect Measures:</u></p> <ol style="list-style-type: none"> 1. Graduate Exit Survey Item (3rd year) 	

<p>Six: Interpersonal Effectiveness</p>	<p><u>Direct Measures:</u></p> <ol style="list-style-type: none"> 1. Three (3) Letters of Professional Reference (Prior to MFT Capstone course; 3rd year) 2. Applicable Items on BSED (Practicum courses; 3rd year) <p><u>Indirect Measures:</u></p> <ol style="list-style-type: none"> 1. Applicable Graduate Exit Survey Item (3rd year) 		
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MS Marriage and Family Therapy Program Student Learning Outcomes: Targets & Measures

Program Outcomes (PSLOs)	Minimal Acceptable Performance	Assessment
One: Theoretical Knowledge	80% achieve a grade of A or B, or passing score	Succinct Theory of Change Paper
	80% achieve a grade of A or B, or passing score	Healthy Couple Interview Assignment
	80% achieve a rate of 3 or 4	Graduate Exit Survey Item
Two: Clinical Knowledge	80% achieve a grade of A or B, or passing score	Clinical Knowledge Development Paper
	80% achieve a grade of A or B, or passing score	Clinical Competence Evaluation
	80% achieve a rate of 3 or 4	Graduate Exit Survey Item
Three: Professional Identity & Ethics	80% achieve a grade of A or B, or passing score	Professional Identity Statement
	80% achieve a grade of A or B, or passing score	Multiple Relationships in Rural Communities Assignment
	80% achieve a rate of 3 or 4	Graduate Exit Survey Item
Four: Cultural Competency	80% achieve a grade of A or B, or passing score	Cultural Roots Paper
	80% achieve a grade of A or B, or passing score	Rural Mental Health Care Paper
	80% achieve a rate of 3 or 4	Graduate Exit Survey Item
Five: Research	80% achieve a grade of A or B, or passing score	Literature Review Assignment
	80% achieve a grade of A or B, or passing score	Clinical Competence Evaluation Literature Review
	80% achieve a rate of 3 or 4	Graduate Exit Survey Item
Six: Interpersonal Effectiveness	100% submitted and all achieve ratings of Superior or Satisfactory	Three (3) Letters of Professional Reference (Prior to MFT Capstone course)
	80% achieve a passing score	Applicable Items on BSED
	80% achieve a rate of 3 or 4	Graduate Exit Survey Item

Section 6 – Assessment Activity

During the 2020-21 assessment cycle, MFT faculty collected data on the following direct and indirect measures for the corresponding program outcomes (as found in the Section 5 table starting on page 16). Please note that each measure is listed separately beneath its related program outcome below.

Program Outcomes (PSLOs), Associated Measures, and Resultant Data

Outcome Four: Cultural Competency (2020-21 Assessment Cycle)

Type of Measure (#)	Artifact/Measure/Activity (Course/Timing in Program)	Minimal Acceptable Performance (Target Previously Set)	2020-21 Data* (Target met/not met)
Direct Measure #1	Cultural Roots Paper (MFT 560: Cultural Competencies course; 2 nd Year)	80% achieve a grade of A or B, or passing score	100% (4 of 4) earned an A or B. Target met.
Direct Measure #2	Rural Mental Health Care Paper (MFT 562: Rural Considerations in SUDs Tx & Prevention course; 1 st Year)	80% achieve a grade of A or B, or passing score	100% (4 of 4) earned an A or B. Target met.
Indirect Measure #1	Graduate Exit Survey [Corresponding] Item (3 rd Year)	80% achieve a rate of 3 or 4	Only 33% (1 of 3) of graduating students completed this survey. With such a low completion rate, no data are being reported for this indirect measure. Poor completion rate.

Outcome Four: Cultural Competency – Assessment Activity Narratives

Direct Measure #1 – Cultural Roots Paper. This artifact specifically requires students to explore their own cultural identity development and its roots. The *rubric* for this measure is found within the Appendix.

Direct Measure #2 – Rural Mental Health Care Paper. This measure requires students to write a paper specific to the challenges and barriers inherent in rural communities related to providing mental health services, as well as the ways in which these barriers can be overcome to provide necessary treatment to those in need. Refer to the **rubric** for this as found in the Appendix.

Indirect Measure #1 - Graduate Exit Survey [Corresponding] Item. This specific indirect measure is an item on the MFT Exit Survey. This item specifically seeks input from those about to graduate about their learning of the core MFT theories. There is **not a rubric** for this measure, but the Graduate Exit Survey and corresponding items are found within the Appendix section. Please refer to the comment in the table above about receiving poor completion rates for this item.

Outcome Four: Cultural Competency – Reliability, Performance Targets, Performance Levels, History of Results, Faculty Discussion, and Interpretation

Reliability. During the 2020-21 assessment cycle, each instructor scored the direct measure completed in their respective class. As this does not aid in reliability (i.e., interrater), at least two (2) instructors in the MFT Program in the future will independently score each direct measure, then will compare scores. If scores are different, faculty will discuss the rationale for why each direct measure was scored as it was and a decision will be made about the final score assigned to that measure. As students complete the indirect measure on their graduate exit survey, there is no reliability to improve upon. However, if 100% of students complete the graduate exit survey in the future, this will provide more accurate data to the MFT Program faculty.

Performance targets. Target performance levels were set to 80% of students earning an A or B on the measure, 80% earning a passing grade on the measure, or 80% specifically earning a 3 or 4 on the Exit Survey item. This minimal target was set as this is typically at, or slightly above, what the national licensing exam (AMFTRB) and the State of Oregon (OBLPCT) uses for a passing score. Additionally, students must pass each course within the M.S. MFT Program with a minimum grade of B.

Performance levels. With the exception of the Exit Survey Item due to a poor completion rate, all other direct measures and the other indirect measure met the minimal acceptable level set by MFT faculty.

History of results. This is the first data collected by MFT faculty regarding the above direct and indirect measures related to Outcome Three. Therefore, there is no previous data to compare to the data reported above, and no trends can be seen at this time.

Faculty discussions. MFT student achievement and related program assessment data are typically discussed by faculty in weekly or biweekly program meetings. This writer plans to continue to ask for specific assessment data closer to when the measures have been completed.

Interpretation. The data collected and reported above illustrates that the majority of MFT students are meeting or exceeding the minimally accepted scores on the aforementioned direct measures. However, MFT instructors will start scoring each other's applicable direct measure rubrics to ensure reliability of data.

SEE OUTCOME THREE TABLE AND COLLECTED DATA ON NEXT PAGE.

Outcome Six: Interpersonal Effectiveness (2020-21 Assessment Cycle)

Type of Measure (#)	Artifact/Measure/Activity (Course/Timing in Program)	Minimal Acceptable Performance (Target Previously Set)	2019-20 Data** (Target met/not met)
Direct Measure #1	Three (3) Letters of Professional Reference (Prior to MFT Capstone course; 3 rd Year)	80% achieve a grade of A or B, or passing score	This indirect measure is no longer being used in the MFT Capstone course; therefore, there are no professional letters of reference to report on. Target no longer applicable.
Direct Measure #2	Applicable items on BSED (Practicum courses; 3 rd year)	80% achieve a grade of A or B, or passing score	100% (3 of 3) of students earned a passing score (i.e., meets or exceeds). Target met.
Indirect Measure #1	Graduate Exit Survey [Corresponding] Item (3 rd Year)	80% achieve a rate of 3 or 4	Only 33% (1 of 3) of graduating students completed this survey. With such a low completion rate, no data are being reported for this indirect measure. Poor completion rate.

Outcome Six: Interpersonal Effectiveness – Assessment Activity Narratives

Direct Measure #1 – Three (3) Letters of Professional Reference. This artifact specifically required students to request and provide three letters of professional reference from other professionals or supervisors. However, this direct measure was discontinued during the 2020-21 assessment period and not required of students finishing the MFT Program, as MFT faculty agreed that this requirement was only extra work for students and did not necessarily capture what we wanted from those finishing the MFT Program. MFT faculty will decide upon another direct measure to assess Outcome Six: Interpersonal Effectiveness the next time this measure is assessed.

Direct Measure #2 – Applicable items on BSED. This specific direct measure is a category (titled “Interpersonal Effectiveness”) of survey items on the Basic Skills Evaluation Device (BSED), which is a standardized assessment tool completed by practicum site supervisors near the end of each quarter of the Practicum experience. Practicum site supervisors rate students on their interpersonal effectiveness. This particular direct measure is used across the four

quarters of the practicum experience (which spans 12 months) and students must score an average, meets expectations, or exceeds expectations score for each quarter this is completed by their practicum site supervisor. There is **not a rubric**, per se, for this measure, but the Interpersonal Effectiveness category and accompanying BSED survey items are found within the Appendix section.

Indirect Measure #1 - Graduate Exit Survey [Corresponding] Item. This specific indirect measure is an item on the MFT Exit Survey. This item specifically seeks input from those about to graduate about their learning of the core MFT theories. There is **not a rubric** for this measure, but the Graduate Exit Survey and corresponding items are found within the Appendix section. Please refer to the comment in the table above about receiving poor completion rates for this item. Please refer to the comment in the table above about receiving poor completion rates for this item.

Outcome Six: Interpersonal Effectiveness – Reliability, Performance Targets, Performance Levels, History of Results, Faculty Discussion, and Interpretation

Reliability. MFT faculty recognize that reliability is important in the use of direct measures. During practicum site supervisor trainings and orientation provided by MFT faculty, the BSED and accompanying scoring items are discussed and all supervisors are trained on this using this instrument. The exit survey for students is an indirect measure and is completed by students.

Performance Targets. Target performance levels were set to 80% of students earning an A or B on the measure, 80% earning a passing grade on the measure, or 80% specifically earning a 3 or 4 on the Exit Survey item. On the BSED, students must earn an average, meets expectations, or exceeds expectations as this is the standard set by MFT faculty. This minimal target was set as this is typically at, or slightly above, what the national licensing exam (AMFTRB) and the State of Oregon (OBLPCT) uses for a passing score. Additionally, students must pass each course within the M.S. MFT Program with a minimum grade of B.

Performance Levels. With the exception of the Exit Survey Item due to a poor completion rate, all other direct measures and the other indirect measure met the minimal acceptable level set by MFT faculty.

History of results. This is the first data collected by MFT faculty regarding the above direct and indirect measures related to Outcome Three. Therefore, there is no previous data to compare to the data reported above, and no trends can be seen at this time.

Faculty discussions. MFT student achievement and related program assessment data are typically discussed by faculty in weekly or biweekly program meetings. This writer plans to continue to ask for specific assessment data closer to when the measures have been completed.

Interpretation. The data collected and reported above illustrates that MFT students are at least meeting or exceeding the minimally accepted scores on the BSED direct measure. MFT faculty need to find another way to incentivize graduating students to complete the exit survey, so this data can be collected and subsequently reported.

Section 7 – Data-driven Action Plans: Changes Resulting from Assessment

Action Drivers

Exit survey items. Low completion rates for students completing the Exit Survey indirect measure is something that MFT faculty will continue to discuss. Emails to students who are preparing to graduate may help to improve Exit Survey completion, which will give the MFT Program more representative data on the program outcomes being measured.

Three letters of professional reference. As mentioned above, MFT faculty discontinued using this direct assessment tool as it was decided this is “busy work” for students and does not capture what we were hoping to measure regarding students’ achievements. MFT faculty will be discussing and deciding upon another indirect measure to replace this direct measure the next time Outcome Six is measured.

Action Specifics

Based upon the 2020-21 assessment cycle data collected and reported above, as students met the minimum allowable targets on direct measures, no changes to instruction or assessment appear indicated. However, poor completion rate for the Exit Survey Items is something MFT faculty will focus on remedying. MFT faculty will also decide upon another direct measure for Outcome Six to replace the discontinued Three Letters of Professional Reference instrument.

Accountability

Dr. Garrett, this writer, will be responsible for raising the direct and indirect measures for discussion in future MFT Program meetings during the Winter 2022 term. Finding an alternative to the Three Letters of Professional Reference will be discussed and decided upon during the Winter 2022 term at MFT Program meetings. Dr. Garrett will also be responsible for following up on and collecting data from direct and indirect measures administered during the 2020-21 assessment cycle. MFT faculty will also discuss ways to improve response rates for graduates completing the Exit Survey.

Planning & Budgeting, Improvements in Assessment, & Reassessment

Planning & budgeting. No additional budgeting resources are needed as assessments are already being used, or will be revised and used, in MFT classes. MFT faculty already meet weekly or biweekly to discuss program- and data-related matters. However, Dr. Garrett will be sure to plan accordingly, so these changes are discussed and made as part of future MFT Program meetings.

Improvements in assessment. As Dr. Garrett collects data for direct and indirect measures closer to when they are completed, it will be easier than waiting to finish collecting data when compiling future assessment reports. Moreover, as data is collected earlier, Dr. Garrett can ascertain what else may still need to be asked for, to ensure assessment reports are completed in full. No other changes in the assessment process appear indicated, other than those already detailed above.

Reassessment. An alternative to the Three Letters of Professional Reference direct measure will be decided upon in MFT Program meetings and implemented no later than the Winter 2022 term. This direct measure will be used and reported on across other assessment cycles, so it is imperative that it is changed during the 2021-22 assessment cycle. Moreover, MFT faculty will discuss ways to improve Exit Survey response rates, so they can gather more indirect data on program outcomes.

Section 8 – Closing the Loop

The data reported in this 2020-21 assessment report is the first measured and collected for Outcomes Three and Six in the MFT Program's history. Therefore, there are no previous action plans to report on, nor are there any previous outcomes to assess or compare to the current data.

APPENDIX

Indirect Measure.....	30
PLSOs and Corresponding COAMFTE Standards – Titled “Program Learning Outcomes and COAMTE Core Competencies”	33

**2020-21
INDIRECT
MEASURES**

Marriage and Family Therapy, M.S.

Department Chair: Maria Lynn
Kessler

Program Director: Kevin Garrett
Assessment Coordinator: Kevin Garrett

MM FT- PROGRAM QUESTIONS (4 QUESTIONS)

Q1

Please rate your proficiency in the following areas.

High Proficiency Proficiency Some Proficiency No Proficiency

Q1

How much has your experience at Oregon Tech contributed to your knowledge, skills, and personal development in the following areas.

Very much (4) Quite a bit (3) Somewhat (2) Very little (1) .

Theoretical Knowledge:

Applying principles and constructs of various human development and systems theories to marriage and family practice.

Clinical Knowledge:

Applying family therapy skills and techniques to assess, structure and direct therapy, help clients to find solutions, identify strengths, and stay engaged in the therapeutic process.

Professional Identity and Ethics:

Developing a professional identity consistent with professional attitudes and behaviors outlined in the AAMFT Code of Ethics and applicable laws and regulations, with particular attention to cultural competence.

Cultural Competency;

Demonstrating knowledge about systemically and culturally contextualized experiences of members of socio-cultural majority and minority groups, integrating that knowledge into ethical practice as marriage and family therapists.

Research Analyzing;

research, and translating research findings for improvement of family therapy services using statistics and program evaluation methods.

Interpersonal effectiveness:

Achieving personal development and demonstrate positive relationship skills via effective communication, respect for others, and awareness of their impact on others.

Q2

What is your overall rating of the quality of education you received?

Program Learning Outcomes (SLOs) and COAMFTE Core Competencies

Program Learning Outcomes are statements that clearly articulate what students should be able to do, achieve, demonstrate, or know, including statements of student/graduate achievement. Includes program aggregate data on SLOs at the program level.

MS MFT Program Outcomes

1. Theoretical Knowledge

Competency: Apply principles and constructs of various human development and systems theories to marriage and family practice.

2. Clinical Knowledge

Competency: Apply family therapy skills and techniques to assess, structure and direct therapy, help clients to find solutions, identify strengths, and stay engaged in the therapeutic process.

3. Professional Identity and Ethics

Competency: Develop professional identity consistent with professional attitudes and behaviors outlined in the AAMFT Code of Ethics and applicable laws and regulations, with particular attention to practicing with cultural competence

4. Cultural Competency

Competency: Demonstrate knowledge about systemically and culturally contextualized experiences of members of socio-cultural majority and minority groups, integrating that knowledge into ethical practice as marriage and family therapists.

5. Research

Competency: Analyze research, and translate research findings for improvement of family therapy services using statistics and program evaluation methods.

6. Interpersonal Effectiveness

Competency: Achieve personal development and demonstrate positive relationship skills via effective communication, respect for others, and awareness of their impact on others.

1. Theory: Graduates will demonstrate understanding of theories of human development and theories of individual, couple, family and, and will use theoretical knowledge to guide assessment and treatment. Formal assessments document that graduates demonstrate the following AAMFT core competencies.

1.1.1	Conceptual	Understand systems concepts, theories, and techniques that are foundational to the practice of marriage and family therapy
2.1.1	Conceptual	Understand principles of human development; human sexuality; gender development; psychopathology; psychopharmacology; couple processes; and family development and processes (e.g., family, relational, and system dynamics).
3.1.1	Conceptual	Know which models, modalities, and/or techniques are most effective for presenting problems.

2. Clinical Skill: Graduates will demonstrate mastery of individual, family, and group therapy skills. Formal assessments document that graduates demonstrate the following AAMFT Core Competencies.

2.3.1	Executive	Diagnose and assess client behavioral and relational health problems systemically and contextually.
2.3.5	Executive	Screen and develop adequate safety plans for substance abuse, child and elder maltreatment, domestic violence, physical violence, suicide potential, and dangerousness to self and others.
2.3.6	Executive	Assess family history and dynamics using a genogram or other assessment instruments.
3.3.1	Executive	Develop, with client input, measurable outcomes, treatment goals, treatment plans, and after-care plans with clients utilizing a systemic perspective.
4.4.1	Evaluative	Evaluate interventions for consistency, congruency with model of therapy and theory of change, cultural and contextual relevance, and goals of the treatment plan.

3. Cultural Awareness and Cultural Humility: Graduates will understand systemically and culturally contextualized experiences of members of socio-cultural majority and minority groups; and will integrate that understanding into ethical practice as marriage and family therapists. Formal assessments document that graduates demonstrate the following AAMFT core competencies.

2.16	Conceptual	Understand the strengths and limitations of the models of assessment and diagnosis, especially as they relate to different cultural, economic, and ethnic groups.
4.3.2	Executive	Deliver interventions in a way that is sensitive to special needs of clients (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, disability, personal history, larger systems issues of the client).
4.4.1	Evaluative	Evaluate interventions for consistency, congruency with model of therapy and theory of change, cultural and contextual relevance, and goals of the treatment plan.

4. Research and Program Evaluation: Graduates are able to critically analyze research and its applications to clinical practice and program evaluation. Formal assessments document that graduates demonstrate the following AAMFT core competencies.

6.1.2	Conceptual	Understand research and program evaluation methodologies, quantitative and qualitative, relevant to MFT and mental health services.
6.3	Executive	Use current MFT and other research to inform clinical practice.
6.3.4	Executive	Determine the effectiveness of clinical practice and techniques.

5. Ethics and Professional Development : Graduates will demonstrate understanding of the laws and codes of ethics pertaining to professional practice as Marriage and Family Therapists, with commitment to ongoing personal and professional development. Formal assessments document that graduates demonstrate the following AAMFT core competencies.

5.1.2	Conceptual	Know professional ethics and standards of practice that apply to the practice of marriage and family therapy.
5.1.4	Conceptual	Understand the process of making an ethical decision
5.2.2	Perceptual	Recognize ethical dilemmas in practice setting.
5.31	Executive	Monitor issues related to ethics, laws, regulations, and professional standards.

6. Interpersonal Effectiveness: Graduates will demonstrate a commitment to ongoing personal and professional development as Marriage and Family Therapists. Formal assessments document that graduates demonstrate the following AAMFT Core Competencies.

5.1.2	Conceptual	Know professional ethics and standards of practice that apply to the practice of marriage and family therapy.
5.2.2	Perceptual	Recognize ethical dilemmas in practice setting.
5.3.10	Executive	Implement a personal program to maintain professional competence.
5.4.2	Evaluative	Monitor attitudes, personal well-being, personal issues, and personal problems to insure they do not impact the therapy process adversely or create vulnerability for misconduct.
5.5.2	Professional	Consult with peers and/or supervisors if personal issues, attitudes, or beliefs threaten to adversely impact clinical work.
5.5.3	Professional	Pursue professional development through self-supervision, collegial consultation, professional reading, and continuing educational activities.