



**2023-24**  
**M.S. Marriage & Family Therapy**  
**Assessment Report**  
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## **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 MFT Associates, 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, corrections 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 our graduates are practicing in the mental health field in the state of Oregon.

## Section 2 – 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 because 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.

## Section 3 – Curriculum Map

MS Marriage and Family Therapy Program 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 3: Curriculum Map (Cont'd)***

#### 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 of the OBLPCT, though the MFT Program has not been accredited yet. As of the fall of 2024, we are revisiting this process. All graduates of the MFT program have been able to continue onto becoming MFT Associates and, for those who completed the necessary requirements, fully licensed MFTs in Oregon.

#### 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 2024-25 academic year and subsequent evaluative periods.

## Section 4 – 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.

### ***Revision to program curriculum.***

The 2020 cohort, who started the MFT program in the fall of 2020 and graduated in the spring of 2023, completed a series of three (3) Capstone classes -- MFT 592: Self of the Therapist (formerly Capstone I), MFT 593: Theories of Change in MFT (formerly Capstone II), and MFT 594: Capstone (Formerly Capstone III) – during the last three quarters in the program. In MFT 592, students first learned about self-of-the-therapist work as it directly and indirectly relates to clinical work and client outcomes. In MFT 593, 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 MFT 594, students completed an in-depth literature review, clinical application paper, and presentation where they demonstrated mastery of the PSLOs. Two (2) MFT faculty evaluated the paper and presentation using rubrics. Successful completion of the project indicated approval to graduate. This same process has continued to subsequent cohorts and students preparing to graduate from the MFT Program.

### ***Direct measures.***

The 2020 cohort, and subsequent cohorts, developed their preferred Theory of Change in the MFT 593: Theories of Change course, articulating how they integrate primary models of therapy and clinical interventions when working therapeutically with individuals and families. One MFT faculty member who taught this course evaluated the Theory of Change using a rubric.

The 2020 cohort, and subsequent cohorts, completed the Healthy Couple Interview Assignment within the MFT 522: Couple’s Therapy course. The Healthy Couple Interview entails students interviewing two couples in different stages of the family life cycle to enhance students’ knowledge of family systems. One MFT faculty member who taught the course evaluated the Interview using a rubric.

The 2020 cohort, and subsequent cohorts, completed the Professional Identity and Ethics Reflection Paper within the MFT 593: Theories of Change in MFT course. The Professional Identity and Ethics Reflection entails students outlining their professional identity as a Marriage and Family Therapist. One MFT faculty member who taught this course evaluated the Reflection using a rubric.

The 2020 cohort, and subsequent cohorts, completed the Multiple Relationships in Rural Communities Assignment Ethical Dilemma #2. This activity requires students to demonstrate appropriate ethical reasoning for a real-life clinical quagmire that students might encounter in their clinical practice. One MFT faculty member who taught this course evaluated this measure using a rubric.

The assignments related to the Capstone classes were revised. Students now take a Using Self in Therapy (SOTT) course and an 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, 2021, 2022, 2023, and 2024 all completed a Clinical Capstone Portfolio necessary 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 8, which link specific assignments/artifacts with corresponding PSLOs. This 2023-24 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 at the end of their time in the MFT program. 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.

*PLEASE REFER TO TABLE STARTING ON PAGE 8.*

### 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	2023-24	2024-25	2025-26
One: Theoretical Knowledge			<u>Direct Measures:</u> <ol style="list-style-type: none"> <li>1. Succinct Theory of Change Paper (MFT Capstone course; 3<sup>rd</sup> year)</li> <li>2. Healthy Couple Interview Assignment (MFT 522: Couples Therapy course; 3<sup>rd</sup> year)</li> </ol> <u>Indirect Measures:</u> <ol style="list-style-type: none"> <li>1. Graduate Exit Survey Item (3<sup>rd</sup> year)</li> <li>2. Learning Objectives/Reflection Paper (Applicable MFT courses; 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> years)</li> </ol>
Two: Clinical Knowledge		<u>Direct Measures:</u> <ol style="list-style-type: none"> <li>1. Clinical Knowledge Development Paper (MFT Capstone course; 3<sup>rd</sup> year)</li> <li>2. Clinical Competence Evaluation (MFT 574: Practicum IV course; 3<sup>rd</sup> year)</li> </ol> <u>Indirect Measures:</u> <ol style="list-style-type: none"> <li>1. Graduate Exit Survey Item (3<sup>rd</sup> year)</li> </ol>	



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

Six: Interpersonal Effectiveness	<u>Direct Measures:</u> 1. Select items on the Basic Skills Evaluation Device related to interpersonal effectiveness (MFT 599: Clinical Practicum; 3 <sup>rd</sup> year)  <u>Indirect Measures:</u> 1. Graduate Exit Survey Item (3 <sup>rd</sup> year)		
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## Section 5 – Assessment Data Collection Processes

### Performance Targets & Activities (Assessments)

#### 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	80% achieve a passing score	Applicable Items on BSED
	80% achieve a rate of 3 or 4	Graduate Exit Survey Item

## Samples, Reliability, & Rubrics

The below table highlights the PSLO, samples (% of students who completed the assessment/activity), reliability of each activity, and provides information about the rubrics – if any – utilized for that activity during this evaluative period.

PSLO	Performance Target	Activity (assessment)	Samples (% of students who complete activity)	Accountability or Reliability	Representation	Rubrics (if any used/needed)
One: Theoretical Knowledge	80% achieve a passing score	Theory of Change Paper (direct)	100%	Dr. Garrett was the only instructor to grade this activity.	Course completed through asynchronous Zoom for all students.	Please see rubric in the Appendix section.
	80% achieve a grade of A or B	Healthy Couple Interview (direct)	100%	Dr. Garrett was the only instructor to grade this activity.	Course completed through synchronous Zoom for all students.	Please see rubric in the Appendix section.
	80% achieve a rate of 3 or 4	Graduate Exit Survey Item (indirect)	100%	Graduating students complete the exit survey and answer questions specific to this indirect activity.	An online survey completed by alumni of the program.	N/A
	N/A	Learning Objectives Reflection Paper (indirect) <b>*Note:</b> this activity was proposed as an assessment tool for the 2022-23 year but was not implemented.	N/A	N/A	N/A	N/A

Three: Professional Identity & Ethics	80% achieve a passing score	Professional Identity Statement (direct)	100%	Dr. Garrett was the only instructor to grade this activity.	Course completed through asynchronous Zoom for all students.	Please see rubric in the Appendix section.
	80% achieve a grade of A or B	Multiple Relationships in Rural Communities: Ethical Dilemma #2 (direct)	93% *Note: one student did not complete this activity.	Dr. Garrett was the only instructor to grade this activity.	Course completed through synchronous Zoom for all students.	Please see rubric in the Appendix section.
	80% achieve a rate of 3 or 4	Graduate Exit Survey (indirect)	100%	Graduating students complete the exit survey and answer questions specific to this indirect activity.	An online survey completed by alumni of the program.	N/A
	N/A	Learning Objectives Reflection Paper (indirect) <b>*Note:</b> this activity was proposed as an assessment tool for the 2022-23 year but was not implemented.	N/A	N/A	N/A	N/A

## Section 6 – Assessment Activity

Performance Criteria	Assessment Methods/Activities	Performance Target	Results	Interpretation	Equity Gap?
<u>PSLO Four:</u> Cultural Competency	Cultural Roots Paper (direct)	80% achieve a grade of A or B	100% (5 out of 5 students) passed the Cultural Roots Paper.	Yes	No
	Rural Mental Health Care Paper (direct)	80% achieve a grade of A or B	As there was a new instructor for this course who wanted some autonomy in the assignments, this direct measure was not used during this evaluation period. This will be used in future courses, even those taught by new instructors.	N/A	N/A
	Graduate Exit Survey Item (indirect)	80% achieve a rate of 3 or 4	100% (3 out of 3 students who completed the survey) achieved a rating of 3 or 4.	Yes	N/A Not linked to curriculum
<u>PSLO Six:</u> Interpersonal effectiveness	Items on Basic Skills Evaluation Device (direct)	80% achieve a passing score	100% (4 out of 4 students) passed the items on the Basic Skills Evaluation Device.	Yes	No
	Graduate Exit Survey Item (indirect)	80% achieve a rate of 3 or 4	100% (3 out of 3 students who completed the survey) achieved a rate of 3 or 4.	Yes	N/A Not linked to curriculum

Performance Criteria	Previous Action Plan	Previous Data	Current Data	Interpretation
PLSO 3: Cultural Competency	<u>Only Action Item Indicated</u> Emailing students to remind them to complete the MFT Graduation Exit Survey as they prepare to graduate to enhance completion rate (indirect)	100% passed with an A or B the Cultural Roots Paper (direct)  25% for the Exit Survey (indirect)	100% passed with an A or B the Cultural Roots Paper (direct)  100% for the Exit Survey items (indirect)	Students continue to meet the performance targets on the direct assessment activity.  The Exit Survey completion rate improved (3 out of 4 graduates completed this).
PLSO 6: Interpersonal Effectiveness	<u>Only Action Item Indicated</u> Emailing students to remind them to complete the MFT Graduation Exit Survey as they prepare to graduate to enhance completion rate (indirect)	100% passed the selected items on the Basic Skills Evaluation Device (direct)  25% for the Exit Survey (indirect)	100% passed the selected items on the Basic Skills Evaluation Device (direct)  100% for the Exit Survey (indirect)	Students continue to meet the performance targets on the direct assessment activities.  The Exit Survey completion rate improved (3 out of 4 graduates completed this).
Graduation Rate	University Dashboard	---	See note about Graduation Rates below.	N/A
Retention	University Dashboard	---	See note about Retention below.	N/A
Certification	Accreditor's Report	The MS MFT program had to place seeking accreditation on hold due to only having one core MFT faculty member. COAMFTE (MFT's accreditation body) said that at least 2 core MFT faculty are needed.	See note about this to the left.	N/A
DFWI	University Dashboard	MFT program <12% 2.3% (2021-22 evaluative	See note about DFWI below.	N/A

		period)		
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## Evidence of Improvements in Student Learning PSLOs

This is the second time these 2 PSLOs were assessed/measured in the MFT program. The MFT program's previous assessment period and report were for these PSLOs was during the 2020-21 academic year. In comparing these two assessment periods, students have continued to meet performance targets for the direct measures (MFT 560: Cultural Roots Paper, MFT 562: Rural Mental Health Care Paper, and MFT 599: Select Items on the Basic Skills Evaluation Device). The completion rate of the Graduate Exit Survey (indirect measure) has improved to a 75% completion rate compared to the 25% seen in the 2020-21 assessment period.

## Graduation Rates

The university has not yet collected or reported this data for the 2023-24 academic year. Therefore, MFT faculty are unable to provide data on graduation rates for this evaluative period. If a student needs to withdraw (or stop out of) from the MFT program, this is something that the MFT Program Director and the student discuss at length. Other options are also discussed (i.e., the student may take only 1 or 2 classes in a term instead of 3). Usually, students need to withdraw from the program (or stop taking classes for a time) due to family and life stressors, which prevent them from keeping up with the required, rigorous coursework. This academic year (2024-25), I am happy to report that 2 students who previously withdrew from the program have returned. So, students who have to leave the program due to family or life stressors often leave the program with positive feelings and having had positive experiences, so they want to return when they can. A strong relationship with students is something emphasized within the MFT Program, which also appears to have an influence on the majority of students staying in the MFT program and graduating.

## Retention

The university has not yet collected or reported retention data for the 2023-24 academic year. Therefore, we are unable to provide data on retention rates for this evaluation period. At the time of completing the Assessment Report for the 2022-23 academic year, there was no data available for retention. However, I am now able to view retention rates data from the 2022-23 academic year. The MFT Program's Graduation Rate for 2022-23 was 73.7%.

## Certification

The MS MFT program had to place seeking accreditation on hold due to only having one core MFT faculty member. COAMFTE (MFT's accreditation body) said that at least 2 core MFT faculty are needed prior to the accreditation process being initiated. As the MFT Program has grown so much recently and the program is experiencing the highest enrollment numbers since it started, we will likely need 3 core (or full-time) faculty for accreditation. As of the fall of 2024, I am happy to report that HSS Interim Dean Nate Bickford is strongly advocating for administration to higher



at least 1 more core faculty member, and Nate is wanting the MFT Program to seek accreditation soon.

**DFWI**

The DFWI data for the MFT Program during the 2023-24 academic year shows that the program has zero (0). All students have passed their courses with an A or B (passing grade in a graduate program). From this data, it also appears that zero (0) students have withdrawn or been given incompletes in any MFT courses during the 2023-24 evaluation period. This data illustrates that students are succeeding in their MFT courses and academically.

## **Section 7 – Data-driven Action Plans**

### **Action To Be Taken**

**Action specifics.** Based upon the 2023-24 assessment cycle data collected and reported above, students continue to meet the minimum allowable targets on direct measures, so no changes to instruction or assessment appear indicated. Also, the number of students who completed the Graduate Exit Survey improved to 3 out of 4 (whereas only 25% of students completed this during the 2020-21 assessment period). Additionally, to improve accountability or reliability of evaluation for course assignments used as direct assessment activities, more than one faculty member needs to be involved in the evaluation process. As the MS MFT program only has one core faculty member, it needs to be determined if the Visiting Instructor or Adjunct Instructors will be involved in the evaluation of course assignments used as assessment activities for the 2024-25 assessment cycle.

## **Section 8 – Closing the Loop**

### **Improvements & Faculty Discussions**

First, when comparing whether students continued to meet the performance targets from the 2020-2021 assessment cycle (the last time PSLOs 4 and 6 were assessed), the data indicates performance targets have continued to be achieved. The 2020-21 assessment report indicated a specific action plan to improve the completion rate of the Graduate Exit Survey. As is demonstrated in the data, the completion rate improved from 25% to 75%. Thus, the program's efforts to email students and ask them to complete the survey as they are graduating as well as after they graduate have led to a vast improvement in the Survey completion rate. These efforts will be continued for future assessment cycles.

Second, the 2020-2021 assessment report indicated an action plan to include other Faculty in the evaluation process of assessment measures to improve reliability. This has not yet been implemented. For the 2024-2025 assessment cycle, the 1 core MFT faculty will work to include other Instructors in the evaluation process. As the MS MFT Program only has one core faculty member, it was challenging to coordinate with Adjunct Instructors to fulfill this previous action plan for this assessment cycle.

## APPENDIX

### Direct Measures

Cultural Roots Paper Rubric .....	21
Select Items (Highlighted in Yellow) on Basic Skills Evaluation Device .....	22
MFT Graduate Exit Survey .....	30
PLSOs and Corresponding COAMFTE Standards – Titled “Program Learning Outcomes and COAMTE Core Competencies” .....	32

## **APPENDIX SECTION**

### Grading Rubric for Cultural Roots Paper

Criteria	Superior 8 Points	Satisfactory 6 Points	Needs Improvement 4 Points	Unacceptable 0 Points
<b>Depth of Reflection – Four Reflection Questions</b>	Assignment demonstrates an in-depth reflection on, and personalization of, self of the therapist/person of the therapist related issues as it relates to cultural roots presentation. Viewpoints and interpretations are insightful and well supported. Clear, detailed examples are provided.	Assignment demonstrates a general reflection on, and personalization of, self of the therapist/person of the therapist related issues as it relates to cultural roots presentation. Viewpoints and interpretations are supported. Appropriate examples are provided.	Assignment demonstrates minimal reflection on, and personalization of, self of the therapist/person of the therapist related issues as it relates to cultural roots presentation. Viewpoints and interpretations are unsupported or supported with flawed arguments. Examples, when applicable, are not provided or are irrelevant to the assignment.	Assignment demonstrates a lack of reflection on, and personalization of, self of the therapist/person of the therapist related issues as it relates to cultural roots presentation. Viewpoints and interpretations missing, inappropriate, and/or unsupported. Examples, when applicable, are not provided.
<b>Required Components – Four Reflection Questions</b>	7 Points Assignment includes all components and meets or exceeds all requirements in the instructions. Each question or part of the assignment is addressed thoroughly. All attachments and/or additional documents are included, as required.	6 Points Assignment includes all components and meets all requirements in the instructions. Each question or part of the assignment is addressed. All attachments and/or additional documents are included, as required.	4 Points Assignment is missing some components and/or does not fully meet the requirements indicated in the instructions. Some questions or parts of the assignment are not addressed. Some attachments and additional documents, if required, are missing or unsuitable for the purpose of the assignment.	0 Points Assignment excludes essential components and/or does not address the requirements indicated in the instructions. Many parts of the assignment are addressed minimally, inadequately or not all.
<b>Genogram</b>	10 Points A genogram is included that highlights the cultural and spiritual components of student's family of origin.			0 Points A genogram is not included.
<b>Depth of Reflection – Integration</b>	8 Points Assignment demonstrates an in-depth reflection on, and personalization of, self of the therapist/person of the therapist related issues as it relates to the integration of cultural roots presentation and the cultures represented in the course. Viewpoints and interpretations are insightful and well supported. Clear, detailed examples are provided.	6 Points Assignment demonstrates a general reflection on, and personalization of, self of the therapist/person of the therapist related issues as it relates to the integration of cultural roots presentation and the culture represented in in the course. Viewpoints and interpretations are supported. Appropriate examples are provided.	4 Points Assignment demonstrates minimal reflection on, and personalization of, self of the therapist/person of the therapist related issues as it relates to the integration of cultural roots presentation and the culture represented in in the course. Viewpoints and interpretations are unsupported or supported with flawed arguments. Examples, when applicable, are not provided or are irrelevant to the assignment.	0 Points Assignment demonstrates a lack of reflection on, and personalization of, self of the therapist/person of the therapist related issues as it relates to the integration of cultural roots presentation and the culture represented in in the course. Viewpoints and interpretations missing, inappropriate, and/or unsupported. Examples, when applicable, are not provided.
<b>Required Components – Integration</b>	7 Points Assignment includes all components and meets or exceeds all requirements in the instructions. Each question or part of the assignment is addressed thoroughly. All attachments and/or additional documents are included, as required.	6 Points Assignment includes all components and meets all requirements in the instructions. Each question or part of the assignment is addressed. All attachments and/or additional documents are included, as required.	4 Points Assignment is missing some components and/or does not fully meet the requirements indicated in the instructions. Some questions or parts of the assignment are not addressed. Some attachments and additional documents, if required, are missing or unsuitable for the purpose of the assignment.	0 Points Assignment excludes essential components and/or does not address the requirements indicated in the instructions. Many parts of the assignment are addressed minimally, inadequately or not all.
<b>Overall Structure/Organization/APA Formatting</b>	10 Points Writing is clear, concise, and well organized with excellent sentence/paragraph construction. Thoughts are expressed in a coherent and logical manner. There are no more than three spelling, grammar, or syntax errors per page of writing. APA formatting is used accurately and consistently in the paper.	8 Points Writing is mostly clear, concise, and well organized with good sentence/paragraph construction. Thoughts are expressed in a coherent and logical manner. There are no more than five spelling, grammar, or syntax errors per page of writing. APA formatting is used with no more than 5 errors per page.	6 Points Writing is unclear and/or disorganized. Thoughts are not expressed in a logical manner. There are more than five spelling, grammar or syntax errors per page of writing. APA formatting is used with several errors per page.	0 Points Writing is unclear and disorganized. Thoughts ramble and make little sense. There are numerous spelling, grammar, or syntax errors throughout the response. APA formatting has not been used on the assignment.



## Marriage and Family Therapy Program

Humanities and Social Sciences Department

Oregon Institute of Technology

### Basic Skills Evaluation Device (BSED)

**Instructions.** The practicum site supervisor will complete this form based upon their observations of the practicum student's skills and behaviors. The site supervisor and student will review this form together when it is completed and will both sign it at the end of the form. Brief descriptions of each evaluation criterion are listed below the specific evaluation skill's matrix. For more detailed explanations of each criterion (i.e., specific skill) and for practicum student developmental levels, please refer to the Nelson and Johnson (1999) journal article on pages 23-28. The full reference for this article is also found at the end of this evaluation.

Student:	Date:
Supervisor:	Placement Site:
Student Developmental Level:	

Conceptual Skills	Inadequate Information	Deficient	Below Expectations	Meets Expectations	Exceeds Expectations	Exceptional Skills
1. Knowledge Base <sup>1</sup>						
2. Systems Perspective <sup>2</sup>						
3. Familiarity with Therapy Model <sup>3</sup>						
4. Self as Therapist <sup>4</sup>						

Comments:

<sup>1</sup> **Knowledge Base** – The trainee: (1) has a basic understanding of systems theory; (2) is able to articulate principles of human and family development, and family life cycle issues pertaining to the case; (3) communicates an understanding of human interaction and normal family processes; (4) can articulate how gender, culture, and class have an impact on the client and on therapeutic issues (including interaction with one's own gender, culture, and class); (5) is able to work within clients' own worldviews; (6) has an understanding of human sexuality; and (7) has a knowledge of various assessment strategies (e.g., interviewing skills, various assessment devices, DSM-5).

<sup>2</sup> **Systems Perspective** – The trainee: (1) understands and can articulate basic systems concepts; (2) is able to show that they are thinking in systemic and contextual terms; (3) formulates hypotheses and conceptualizes the case in a systemic manner; (4) can articulate between content vs. process issues; and (5) can recognize hierarchy issues.

<sup>3</sup> **Familiarity with Therapy Models** – The trainee: (1) has a basic knowledge of family therapy theories/models; (2) links goals, hypotheses, session plans, interventions, and evaluation methods for terminating treatment to a specific employed and articulated therapy model/theory (or an integration of models/theories); and (3) recognizes their own perceptions, client resources, and links between problems and attempted solutions.

<sup>4</sup> **Self as Therapist** – The trainee: (1) can articulate their own preferred model of therapy; (2) is aware of how their communication style impacts therapy and is curious in learning about themselves; (3) is aware of and able to manage their own anxiety in therapy; (4) has an understanding of how to use a sense of humor in therapy; (5) recognizes their ability to be flexible and curious and to think critically and analytically, and is open to feedback; and (6) is able to recognize how their own development and/or other issues may interact in therapy.

Perceptual Skills	Inadequate Information	Deficient	Below Expectation	Meets Expectation	Exceeds Expectations	Exceptional Skills
1. Recognition Skills <sup>1</sup>						
2. Hypothesizing <sup>2</sup>						
3. Integration of Theory Practice <sup>3</sup>						

Comments:

<sup>1</sup> **Recognition Skills** – The trainee: (1) shows the ability to recognize hierarchies, boundaries, dynamics of triangulation, family interaction, and family behavioral patterns; (2) can recognize gender, ethnic, cultural, and class issues in client dynamics and in therapy; (3) is able to recognize clients' coping skills and strengths and can understand dynamics and patterns in presenting problems; (4) recognizes how patterns associated with the presenting problems may be similar to other patterns of interaction in clients' lives; and (5) recognizes and can articulate their impact as part of the client/therapy system.

<sup>2</sup> **Hypothesizing** – The trainee: (1) can formulate a systemic hypothesis and can generate hypotheses as well as theory-, or model, specific hypotheses; (2) can formulate long- and short-term treatment plans based on hypotheses; (3) is able to distinguish process from content at an appropriate level and include process issues in hypotheses; and (4) reframes patterns and problems appropriately.

<sup>3</sup> **Integration of Theory Practice** – The trainee: (1) is able to articulate theory as it is applied in practice, utilizing concepts appropriately, and describing interventions that fit with the theory and hypotheses; (2) is able to differentiate concepts and provide rationale for choices of hypotheses and/or intervention (if using an integrated theory); and (3) is able to evaluate the appropriateness (positives and negatives) for a theory or integrated theory using concrete data from therapy cases.



Executive Skills	Inadequate Information – Can't evaluate	Deficient	Below Expectations	Meets Expectations	Exceeds Expectations	Exceptional Skills
1. Joining <sup>1</sup>						
2. Assessment <sup>2</sup>						
3. Hypothesizing <sup>3</sup>						
4. Interventions <sup>4</sup>						
5. Communication Skills <sup>5</sup>						
6. Personal skills <sup>6</sup>						
7. Session Management <sup>7</sup>						
Comments:						

<sup>1</sup> **Joining** – The trainee: (1) is able engage each family member in a therapeutic alliance by establishing rapport through clear communication that conveys a sense of competency, authority, and trustworthiness while at the same time demonstrating warmth, empathy, caring, and respect; (2) is capable of gathering information without making the client feel interrogated, laying down ground rules for therapy, and setting up a workable treatment contract by exploring the client's expectations, point of view, and preparedness to make changes; (3) and is able to balance setting the treatment contract while setting appropriate boundaries and avoiding triangulation.

<sup>2</sup> **Assessment** – The trainee: (1) demonstrates the ability to assess clients through the use of genograms, family histories, suicide/depression interviews and inventories, and discussion of SES, employment, school, and developmental stages; (2) is familiar and skilled in basic interviewing strategies and techniques; (3) is able to clarify the presenting problem, explore previous solutions to the problem, gather information regarding sequences and patterns in the family, and determine the strengths and resources that families bring to therapy; and (4) uses assessment strategies that are sensitive to gender, race, class, and cultural issues.

<sup>3</sup> **Hypothesizing** – The trainee: (1) exhibits the ability to formulate multiple hypotheses about a case based on articulated principles of a theory of change; (2) can develop treatment plans which include a rationale for intervention based on hypotheses; set clear, reachable goals in consultation with the family; focus treatment toward a therapeutic goal; and modify the existing case plan when appropriate.

<sup>4</sup> **Interventions** – The trainee: (1) demonstrates an understanding of intervention techniques by structuring interventions that defuse violent or chaotic situations, deflect scapegoating and blaming, and interrupt negative patterns and destructive communication styles; and (2) is able to elicit family/client strengths and utilize them in both session discussions and homework assignments.

<sup>5</sup> **Communication Skills** – The trainee: (1) should convey body language that demonstrate active listening, and demonstrate communication skills which demonstrate active listening and reflecting, as well as the use of open-ended questions, and short, specific forms of oral communication; (2) should convey body language that is relaxed and matches the tone of the conversation; and (3) is able to coach clients in learning communication skills rather than merely "lecturing" and instructing.

<sup>6</sup> **Personal Skills** – The trainee: (1) should possess the followings: a desire to be a family therapist, intelligence, curiosity, common sense, self-direction, commitment, patience, empathy, sensitivity, flexibility, the ability to manage their own anxiety, authenticity, expression of a caring attitude, and acceptance of others; (2) should possess the following: exhibit warmth, a sense of humor, a non-defensive attitude, congruency, the ability to take responsibility for their own mistakes, the ability to apply their own personal mode of therapy, and possess no debilitating personal pathology; (3) demonstrates emotional maturity and ability to be self-reflexive; and (4) demonstrates an appropriate attitude of expertness toward clients, congruent with their own theory of change.

<sup>7</sup> **Session Management** – The trainee: (1) is able to manage the therapy process by effectively introducing clients to the therapy room, explaining equipment and setting, if necessary, and explaining the policies and procedures of the agency; (2) is able to engage the family in therapeutic conversation, controlling the flow of communication as per their therapy plan; (3) is able to manage intense interactions appropriately, knowing when to escalate and deescalate intensity; (4) is able to manage time, finishing sessions when scheduled, and is able to schedule further appointments, consultations, and referrals smoothly and effectively; and (5) is able to collect fees in an appropriate manner.

Professional Skills	Inadequate Information – Can't evaluate	Deficient	Below Expectations	Meets Expectations	Exceeds Expectations	Exceptional Skills
1. Supervision <sup>1</sup>						
2. Recognition of Ethical Issues <sup>2</sup>						
3. Paperwork <sup>3</sup>						
4. Professional Image <sup>4</sup>						
5. Professional Conduct <sup>5</sup>						
Comments:						

**<sup>1</sup> Supervision** – The trainee: (1) attends supervision meetings as scheduled and is prepared to discuss cases with colleagues, being prepared to share audio or video recordings, if indicated/required; (2) is respectful and positive about other trainees' cases and presentations, and is helpful and not demeaning about other trainees' skills; and (3) makes use of supervision by accepting and utilizing supervisory feedback.

**<sup>2</sup> Recognition of Ethical Issues** – The trainee: (1) knows and observes the state and national codes of ethics (national code of ethics of the American Association for Marriage & Family Therapy), including but not limited to the following: privileged communication, mandatory reporting, and duty-to-warn issues; (2) follows the supervisor's policies regarding reporting and consulting with the supervisor and/or authorities; (3) appropriately utilizes supervision and consultation regarding ethical issues; (4) avoids potentially exploitative relationships with clients and other trainees; and (5) appropriately deals with their own issues as they affect therapy and is willing to take responsibility for their own actions.

**<sup>3</sup> Paperwork** – The trainee: (1) maintains case files appropriately, follows confidentiality protocol, and follows agency procedures for completing paperwork in a timely manner.

**<sup>4</sup> Professional Image** – The trainee: (1) dresses appropriately according to the standards of the agency setting; (2) is able to present an aura of confidence without arrogance and presents themselves to other professionals in an appropriate manner; and (3) is on time for sessions and supervision and treats staff with respect.

**<sup>5</sup> Professional Conduct** – The trainee: (1) has the ability to initiate and maintain appropriate contact with other professionals along with maintaining a personal professional image; (2) does not publicly denigrate others or criticize colleagues; (3) consults with professionals and others involved with the cases appropriately, with appropriate signed releases, and in a professional manner, while keeping the client's welfare foremost; (4) shows the ability to handle unexpected and crisis situations with poise and skill, using consultation when appropriate; and (5) is punctual with therapy sessions and other professional meetings and follows agency policies in setting and collecting fees.

Evaluation Skills	Inadequate Information – Can't evaluate	Deficient	Below Expectations	Meets Expectations	Exceeds Expectations	Exceptional Skills
1. Evaluation of Therapy <sup>1</sup>						
2. Evaluation of Self <sup>2</sup>						

Comments:

<sup>1</sup> **Evaluation of Therapy** – The trainee: (1) is able to verbalize the thoroughness of assessment, the link between theory, assessment, and hypotheses/interventions, the effectiveness of interventions, and how well the objectives of therapy have been met in terms of both the clients' goals and therapist's perspectives and analysis; (2) can articulate aspects of clients' feedback in relation to assessment and intervention; and (3) is able to articulate links between conceptual, perceptual, interventive, and outcome data.

<sup>2</sup> **Evaluation of Self** – The trainee: (1) is skilled in evaluating themselves in terms of skills: conceptual, perceptual, executive, professional, and evaluative; (2) is able to recognize signs in themselves that contribute to an ongoing understanding and analysis of the case and is able to articulate personal issues that may be interacting in therapy; (3) is not unduly defensive about feedback, but is able to integrate multiple perspectives and incorporate them into a plan for enhancing their development as a family therapist; and (4) works with the supervisor in an ongoing evaluation of therapy skills and strives to improve areas that require it and, at the same time, clearly articulate strengths in behavioral terms.

Theory <sup>1</sup>	Inadequate Information – Can't Evaluate	Deficient	Below Expectations	Meets Expectations	Exceeds Expectations	Exceptional Skills
(Use Trainee's Preferred Model, or Integration of Models, Here)						
Knowledge of Theory						

Utilizes Theory in Practice						
Recognizes Strengths and Weaknesses of Theory						
Comments:						

<sup>1</sup> **Theory** – The evaluative criteria within Theory are fairly self-explanatory. Evaluate the trainee/student based upon these criteria using what you have observed. Please be sure to ask the trainee about their theory, or integrated theories, of choice when discussing cases and have them explain how they use this theory to inform their clinical work.

***Site supervisor and practicum student, please be sure to sign and date on the next page.***



Marriage and Family Therapy Program  
Humanities and Social Sciences Department  
Oregon Institute of Technology

### Basic Skills Evaluation Device (BSED) Signature Page

By signing below, the practicum site supervisor and practicum student indicate that they have reviewed this evaluation together, and that the practicum site supervisor has evaluated the student on the above criteria to the best of their knowledge.

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Student Signature

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Date

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Site Supervisor Signature

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Date

**IMPORTANT NOTE:** This Practicum Student Evaluation was developed and is based upon the Basic Skills Evaluation Device (BSED) and is being used by the Marriage & Family Therapy Program at the Oregon Institute of Technology with permission from Thorana S. Nelson, Ph.D. Some parts of the BSED have been modified (with permission) in this evaluation to fit the needs of students in the MS Marriage & Family Therapy Program. Full Reference: Nelson, T. S., & Johnson, L. N. (1999). The basic skills evaluation device. *Journal of Marital and Family Therapy*, 25(1), 15-30.

# MS MFT Graduate Exit Survey

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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?**

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## ***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 . 32	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.

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**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.