

MFT Supervisor Newsletter

September 2022

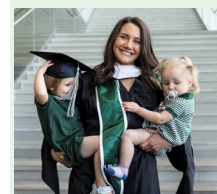
Thank you

We are grateful to you for the supervision you provide the MFT students. They feel supported and are making progress toward graduation. What you do is such an important part of their professional training and clinical growth.



MFT Program Highlights from 2022

- ♦ March: Supervisor Meet & Greet. Thank you to those who attended! Thank you also to Dr. Peterson and Lori for coordinating and arranging such a fantastic event!
- ♦ March: Dr. Spencer received a Dean's Excellence award for research. Dr. Fawcett received a Dean's Excellence award for teaching. Dr. Fawcett was also chosen to receive a UVU faculty excellence award.
- ♦ April: The program submitted Eligibility Criteria to start the accreditation process, all were found to be sufficient and the program received approval to submit a self-study in April 2023.
- ♦ May: We graduated 21 students. Thank you to Dr. Springer for offering our keynote address at the MFT program's first hooding ceremony. Thank you to our supervisors who attended! One graduate moved to England. All other graduates are licensed as Associate MFTs in Utah. Three alums from that cohort have let us know that they already passed the national licensing exam.
- ♦ May: Ten MFT students attended the UAMFT conference. One of our program alums, Whitney Sanchez, is the new UAMFT executive director and one of our current students, Thomas Y is a student rep.
- ♦ June: Dr. Story Chavez received a grant from UVU to pay for Level-1 Gottman training for all 2nd year students
- ♦ July: Thomas Y was chosen for the AAMFT minority fellowship
- ♦ August: We admitted a new cohort of 22 students. They are a terrific group!



T2T Evaluation Data from Spring 2022

Average scores from 14 supervisors

Practicum IV Competencies	Supervisor evaluations of students
Completes case documentation in a timely manner and in accordance with relevant laws and policies (Professional, 1.5.2)	4.5
Delivers 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) (Executive, 4.3.2)	4.5
Matches treatment modalities and techniques to clients' needs, goals, and values (Executive, 4.3.1)	4.5
Empowers clients and their relational systems to establish effective relationships with each other and larger systems (Executive, 4.3.8)	4.4
Practices within defined scope of practice and competence (Executive, 5.3.7)	4.5
Applies effective and systemic interviewing techniques and strategies (Executive, 2.3.3)	4.4
Integrates supervisor/team communications into treatment (Executive, 4.3.12)	4.5
Monitors personal reactions to clients and treatment process, especially in terms of therapeutic behavior, relationship with clients, process for explaining procedures, and outcomes (Professional, 3.4.5)	4.4
Demonstrates competent treatment with a variety of clinical cases (Student Learning Outcome #3)	4.5

- 4 = Trainee is right on target with expectations in this area
- 5 = Trainee is exceeding expectations in this area

Comments from Supervisors

- ◆ Once again, UVUs MFT program has trained an exemplary new therapist. The program faculty and staff should be commended.
- ◆ Jeremy is a valued member of our clinical team! His case conceptualization is fantastic, he's open to feedback, he applies feedback and has great rapport with clients.
- ◆ Cassidy is a valued member of our clinical team! She's open to feedback and applies it well. Cassidy has good rapport with her clients and a passion for furthering her own knowledge and growth
- ◆ Shannon is a valued member of our clinical team! She has great rapport with her clients, is able to conceptualize systemically, applies feedback, and uses supervision effectively.
- ◆ Oh my gosh. Mitch! He is perhaps one of the most inspirational supervisees I have had the privilege working with. Mitch is an expert at life, a fun human being, and puts people above himself despite the reality he has so much wisdom. The MFT field is lucky to have Mitch in its ranks.

T2T Evaluation Data from Summer 2022

Average scores from 15 supervisors and 10 students

Practicum II Competencies	Supervisor evaluations of students	Student evaluations of supervisors	Student evaluations of practitioners
Completes case documentation in a timely manner and in accordance with relevant laws and policies (Professional, 1.5.2)	4.1	4.6	4.5
Applies effective and systemic interviewing techniques and strategies (Executive, 2.3.3)	3.8	4.5	4.6
Utilizes consultation and supervision effectively (Professional, 2.5.1)	3.9	—	—
Uses current MFT and other research to inform clinical practice (Executive, 6.3.2)	3.8	4.1	4.6
Delivers 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) (Executive, 4.3.2)	4.0	4.5	4.5
Practices within defined scope of practice and competence (Executive, 5.3.7)	3.9	4.6	4.6
Obtains knowledge of advances and theory regarding effective clinical practice (Executive, 5.3.8)	3.8	4.3	4.5
Utilizes published MFT literature to provide research-informed therapy (Student Learning Outcome #4)	3.8	4.4	4.6

- 3 = Trainee is approaching expectations in this area (i.e., Trainee will soon be on target. They are improving. I have no serious concerns)
- 4 = Trainee is right on target with expectations in this area

Comments from Students

- ◆ My off-campus Clinical Site Supervisor has helped me develop competence in treatment and assessment but not so much diagnosis.
- ◆ Brad is great!
- ◆ Tammy is committed to helping me develop myself as a therapist and to making sure I can get my clients what they need. Very available for instruction, conversations, etc.
- ◆ Jeremy has been specifically helpful with conceptualizing how/when to intervene in systems.
- ◆ Tammy is wonderful! We get plenty of dyadic supervision... She's knowledgeable on systemic therapy models and so encouraging as a supervisor. ... Tammy herself could not be more qualified or attentive. She's amazing to work with!
- ◆ Dr. P has been very helpful. Very insightful when watching raw data and gives practical help, often accompanied by good materials. I'm a fan.
- ◆ Megan has been very helpful with providing resources to client presenting problems and in identifying therapist strengths.

Therapy Hours in T2T: UVU MFT Program Definitions

Relational Direct

Couples Therapy The student completed a therapy session with a client system that involves two individuals who were both present. The clients share an ongoing relationship outside of therapy (e.g., intimate couple system)

Family Therapy The student completed a therapy session with a client system that involves two or more individuals, who were all present. The clients share an ongoing relationship outside of therapy (e.g., family system)

Group Family Therapy The student completed a group therapy session. The client units in the group have a relationship outside of the group itself (e.g., group therapy with sibling pairs).

Group Couples Therapy The student completed a group therapy session. The dyadic client units in the group have a relationship outside of the group itself (e.g., group therapy with pre-marital couples).

Individual Direct

Individual Therapy The student completed a therapy session with an individual client. They may discuss relational issues, and the client may attend therapy with another person at another point, but if there is only one person present for this session, it is counted as an individual therapy

Group Therapy—Individual The student completed a group therapy session. The client unit in the group is an individual person (e.g., group therapy for people struggling with an eating disorder).



All of these categories begin with the statement -- The student completed a therapy session...

If the student didn't complete a therapy session, it is not a therapy hour.

If the client no-showed, it is NOT a therapy hour.

We do not count "preparation time." Those are *indirect* hours, which count for Associate MFTs accruing hours toward licensure, but they do not count before graduation.

We ask students to "Tag" all sessions that involve therapy with *Diverse, Marginalized, and/or Underserved Communities*: "groups from non-majority populations currently discriminated against and underrepresented with regard to their race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religious and spiritual practices, nation of origin or other social categories, immigration status, and/or language" (COAMFTE Glossary).

Supervision Hours in T2T: UVU MFT Program Definitions

Individual Supervision

Individual Case Report	1-2 students in supervision. You talked about student cases. If one or both students didn't share a video/audio recording, they should record this time as case report.
Individual Raw Data – Live	1-2 students in supervision. You watch the student's session in real time (i.e., behind a mirror, or as a co-therapist in session with you).
Individual Raw Data – Video	1-2 students in supervision. You watched a recording of a student's therapy session. That student can count the hour of supervision as raw data-video.
Individual Raw Data – Audio	1-2 students in supervision. You listened to an audio recording of a student's therapy session. That student can count the hour of supervision as raw data-audio.

Students should be receiving at least **one hour of individual supervision each week** at off-campus placements.



Students only count as raw data the time **they showed and discussed their own video/audio recordings** – usually about an hour.

Students do **not** record raw data supervision when someone else shares video/audio of a session.

If the student is not the therapist, they count the time as case report.

Group Supervision

Group Case Report	3-8 students in supervision. You talked about student cases. All students who did not share their own video/audio recording, should record this time as group case report.
Group Raw Data – Live	3-8 students in supervision. You watched a session in real time (i.e., behind the mirror, or as a co-therapist). The therapist counts this time as group raw-data live. All other students count this hour as group case report.
Group Raw Data – Video	3-8 students in supervision. You watched a recording of a student's session. That student can count the hour of supervision as group raw data-video. All other students count this hour as group case report.
Group Raw Data – Audio	3-8 students in supervision. You listened to an audio recording of a student's session. That student can count the hour of supervision as group raw data-audio. All other students count this hour as group case report.

Student Learning Outcomes : Theory, Skill, Inclusion, Ethics

SLO 1: STUDENTS WILL **DEMONSTRATE** UNDERSTANDING OF MFT MODELS

Assessment: Practice Exam (total score)

Data: Average score = 70.41

Target: 80% pass (66) on 1st attempt

18/22 students met target = 82%

SLO 2: STUDENTS WILL **APPLY** SYSTEMIC & DEVELOPMENTAL THEORIES IN THEIR CONCEPTUALIZATION OF CLINICAL CASES

Assessment: Clinical Demo (theory competencies)

Data: Average score = 4.2

Target: 80% score 4+ on 1st attempt

20/22 students met target = 91%

SLO 3: STUDENTS WILL **DEMONSTRATE** COMPETENT ASSESSMENT, DIAGNOSIS, AND TREATMENT WITH A VARIETY OF CLINICAL CASES

Assessment: Clinical Assessment Paper

Data: Average score = 7.05

Target: 80% pass w/83+ points

20/22 students met target = 91%

SLO 4: STUDENTS WILL **UTILIZE** PUBLISHED MFT LITERATURE TO PROVIDE RESEARCH-INFORMED THERAPY

Assessment: Clinical Demo (research competencies)

Data: Average score = 4.1

Target: 80% score 4+ on 1st attempt

18/22 students met target = 82%

SLO 5: STUDENTS WILL **DEMONSTRATE** AWARENESS OF THEIR POWER AND PRIVILEGE AS INDIVIDUALS AND AS CLINICIANS

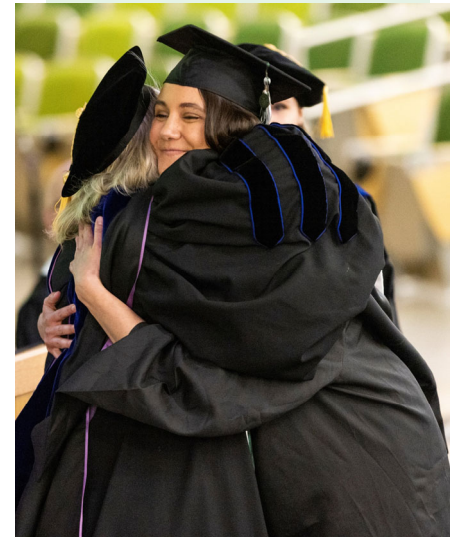
Assessment: OSCE

Data: Average score = 6.8

Target: 80% score 6+ on 1st attempt

20/22 students met target = 91%





SLO 6: STUDENT **WORK WITH MARGINALIZE, DIVERSE, AND UNDERSERVED COMMUNITIES WILL BE MULTICULTURALLY-INFORMED**

Assessment: Clinical Tx paper

Data: Average score = 4.3

Target: 80% score 4+ on 1st attempt

22/22 students met target = 100%

SLO 7: STUDENTS WILL **DEMONSTRATE RECOGNITION OF THE AAMFT CODE OF ETHICS' APPLICATION TO CLINICAL SCENARIOS AND CASES**

Assessment: Business Portfolio

Data: Average score = 95

Target: 80% pass w/83%+ points

21/22 students met target = 95%

SLO 8: STUDENTS **APPLY AN ETHICAL DECISION-MAKING FRAMEWORK IN CLINICAL PRACTICE AND SUPERVISION**

Assessment: Clinical Demo (ethics competencies)

Data: Average score = 4.2

Target: 80% score 4+ on 1st attempt

21/22 students met target = 95%

SLO 9: GRADUATES OF THE PROGRAM WILL **BECOME LICENSED AS A/MFTS**

Summative Assessment: AMFT/LMFT

Data: 21/22 licensed as AMFT

Target: 80% LMFT within 3 years

21/22 students met target = 95%

SLO 10: GRADUATES OF THE PROGRAM WILL **BECOME EMPLOYED AS MFTS**

Assessment: Employment as MFT

Data: 21/22 offered job from prac site after graduation

Target: 80% employed as MFT

21/22 students met target = 95%

PROGRAM RESOURCES

The program considers its fiscal, physical, technological, instructional, clinical, and academic resources, and student support services sufficient to achieve the program's mission, goals and outcomes when 80% of student responses agree with the majority of questions in the resource category listed.

PROGRAM INCLUSIVITY

1. The UVU MFT program strives for a diverse student body and faculty, including instructors, supervisors, other relevant educators, and professional staff.

90% responded "yes"

2. The UVU MFT program does not discriminate on the basis of race, age, gender, ethnicity, sexual orientation, relationship status, gender identity, socioeconomic status, disability, health status, religious or spiritual belief, religious or spiritual affiliation or national origin in any of its activities or policies relating to students, faculty, including instructors, supervisors, other relevant educators and professional staff.

90% responded "yes"

3. The UVU MFT program encourages an academic climate that fosters respectful communication

90% responded "yes"

4. The UVU MFT program demonstrates a climate of safety, respect and appreciation for all learners including those from diverse, marginalized, and/or underserved communities*.

90% responded "yes"

5. As a student in the MFT program, I have had an opportunity to provide therapy to diverse, marginalized and/or underserved communities*.

90% responded "yes"



Area	80% of students agree with:
FISCAL RESOURCES	3/3 questions
PHYSICAL RESOURCES	7/9 questions
TECHNOLOGICAL RESOURCES	5/7 questions
INSTRUCTIONAL & CLINICAL RESOURCES	10/11 questions
ACADEMIC RESOURCES	9/9 questions
STUDENT SUPPORT SERVICES	10/11 questions
FACULTY EFFECTIVENESS	9/9 questions
PRACTICUM SUPERVISORS	10/10 questions
OFF-CAMPUS SUPERVISORS	10/10 questions
CURRICULUM	3/3 questions

Repeated Concerns/Requests for Resources:

- Workroom w/laptops for case notes
 - Not enough laptops
 - **Program response:** Clinic director & program directors are working with potential donors whom we hope will help with clinic resources in the future.
- UVU Clinic
 - Need a way to record and access recordings
 - Need electronic health record system
 - Not enough relational clients
 - **Program response:** UVU clinic director is aware of these needs and has outlined these requests to the department chair and dean.
- Resources in Box aren't helpful
 - **Program response:** everything is moving out of Box. We will review resources when we move into shared folders, and we will add to the resources there. Please let us know if you have requests!
- Confusion about program meetings
 - **Program response:** they are paused during the summer, and continue in fall and spring semesters. Look for a Teams calendar invite from Lori. They are always the 1st Friday of the month from 12-1. They focus on clinical skill (e.g., trauma) and info needed for progression in the MFT program (e.g., telehealth, T2T).
- Climate of safety and respect
 - One student expressed repeated concerns about respectful communication and climate of safety. Possible interaction w/students based on diversity markers.
 - **Program response:** As faculty and administrators, we do our best. We are human and sometimes we make mistakes. We try to apologize and mend relationships, and to model humility. If you ever want to talk about a concern, please email me and we'll find a time and to talk on campus or Teams (Liz): efawcett@uvu.edu

Positive Comments about Program Resources:

- Working at free UVU clinic is wonderful opportunity to see diverse clients
- Program has worked hard to help students see clients on campus
- Helpful curriculum and handbook
- Time2Track is awesome
- Lori is amazing.
- Dr. P is always willing to help, grateful for off-campus site approval
- Dr. Story Chavez gives great feedback
- Derek is helpful and available
- Great supervisors, supportive supervision

Demographic Information:

STUDENTS			SUPERVISORS										FACULTY								
A	Age & Generation	Which range of years describes your current age?																			
		20-24		25-34		35-44		45-54		55-64		65-74		75+		Prefer not to say					
		5	22	2	1	7	3	2	3	4	1	2	3	X		1	1				
	Family Lifecycle Stage	Which option best describes your current Family Lifecycle Stage?																			
		independent/unattached adult	newly married adult	childbearing adult	school-age children	teenage/adolescent children	launching stage	middle-aged/empty nest	Caring for elderly parents	retired adults	Prefer not to say										
		11	X	10	X	2	1	1	5	2	1	4	2	1	5	5	1	1	2	X	1
Parental Status	Which options best describe your current Parental status? (*multiple answers possible)																				
	Not a parent		biological parent		step-parent		adoptive parent		Guardian/custodian of a minor		foster parent		Prefer not to say								
	22	X	16	13	5	2	X	1	1	1	1	1	1	1	1	1	1	1	1	1	1
D	Developmental Disability	Have you been diagnosed with a developmental disability?																			
		Definition: An impairment in physical, learning, language, or behavior areas present at birth and impacting early childhood development. Examples: ADHD, Autism spectrum disorder, cerebral palsy, intellectual and disabilities, hearing, speech, or vision impairment.																			
		Yes									No										
	2	2	1	36	11	4															
	Disability Acquired	Have you been diagnosed with an acquired disability?																			
Definition: Impairment that limits activity or restricts participation in normal daily activities. Developed after birth as result of environment, accident, or illness. Results in loss of previously acquired skills. Examples: mobility and physical impairment, spinal cord disability, head injury/TBI, cognitive or learning disabilities, loss of hearing or vision.																					
Yes									No												
2	1	1	36	12	4																
R	Religion/Spiritual Orientation	Which option best describes your religion or spiritual philosophy?																			
		Agnostic	Atheistic	Buddhist	Catholic	Church of Jesus Christ of LDS Saints	Hindu	Jehovah's Witnesses	Jewish	Muslim	Orthodox Christianity	Protestant	Spiritual, not affiliated with a particular religion	Between Faiths	Prefer not to say						
		5	2	1	1	27	12	2						1	2	1	1	1			

E	Ethnicity & Race	Are you of Hispanic, Latino, or of Spanish origin?										
		Yes						No				
		5			X		33		13		4	
	Ethnicity & Race*	How would you describe yourself? (*multiple answers possible)										
		American Indian or Alaska Native		Asian	Black or African-American		Native Hawaiian or Other Pacific Islander		White (Euro- American)			Not listed
3		1	2	1	1	1		33	12	3	1	

S	SES	Which option best describes your current SES?											
		Definition: SES categories are usually defined by education, occupation, and income (security/stability/development)											
		According to a US News article published Dec 16, 2021, this is an income group distribution for a family of three:											
		Poor or near-poor \$32,048 or less											
		Lower middle class \$32,048-53,413											
		Middle class \$53,413-106,827											
		Upper-middle class \$106,827-373,894											
		Rich \$373,894 or more											
		Poor or near-poor		Lower Middle Class		Middle Class		Upper Middle Class		Rich		Prefer not to say	
		17		7		8 3 2		6 8 1		1 X		1 2	
1 st Gen Student	Are you a First-Generation College Student?												
	Definition: a person whose parents did not complete a 4-year college/university degree, regardless of other family member's level of education												
	Yes						No						
	16		6		2		22		7		3		
	Military/Veteran	Are you a veteran or military service member?											
Yes						No							
1						38		13		4			
Is anyone in your immediate family, other than yourself, a veteran or military service member?													
Yes						No							
9		6		2		29		7		3			

S	Sexual Orientation	Which option best describes your current Sexual Orientation?									
		Asexual	Bisexual	Gay	Heterosexual		Hetero-flexible	Lesbian	Pansexual	Unsure	Prefer not to say
			1	1	34	12	5	1		1	1
	Relationship Status	Which option best describes your current Relationship Status? (*multiple answers possible)									
		Single (never married)		Married or in a domestic partnership			Widowed	Divorced		Separated	Prefer not to say
		10	X	24	13	5		4	X		

I	Indigenous Peoples	Are you a member of an Indigenous population (e.g., Native Hawaiian, American Indian or First Nations, Alaska Native)?					
		Yes			No		
		3	2	35	13	3	

N	Which option best describes your nationality?										
	National Origin			US born		Immigrant	International Student	Refugee	Naturalized Citizen	US citizen born abroad	Prefer not to say
	36	12	5	2				1			
	Is English your first language?										
	Language			Yes			No		1 st language		
	36		13		5	2		Spanish			

G	Gender	Which option best describes your current gender identity?							
		Man		Nonbinary/ third gender	Trans man	Trans woman	Woman		Prefer not to say
		8	7	2			30	6	3