Medical Family Therapy Program
Faculty Meeting Minutes (Fall 2015-Fall 2020)
Review of All Action Items

(Major Action Items in Highlight)

2015

August 19 – Max Zubatsky went over the student program handbook and proposes some revisions. He asked to put in a flow chart that shows when students (first and second year) begin clinical training and what requirements must be met (each semester) because establishing a timeline will be beneficial. All faculty agreed this is a great addition. Max will present draft at next meeting for proposed inclusion.

Program Goals 1 and 2/ SLO’s I.A.1, I.B.1 and II.A.1: PhD students should be completing theory skills, assessment, diagnosis and medft skills from the end of the first year into the second year. Research-informed practice skills would need to improve to meet program goal number 2 for the doctoral program. The faculty also reviewed the timeline for clinical transitioning into the SLUCare clinics.

September 16 – Max Zubatsky presented his clinical training flowchart. Suggestions were made for revision. Max Zubatsky will present the chart again at another meeting.

Program Goals 1 and 3/ I.A.1, I.B.1, I.C.1, III.A.1: Both the MA and PhD programs had proposed flowcharts of the timeline of clinical work and the skills that students would learn along the way. The flowchart will be added to the handbook for students to see what benchmarks they are meeting on the program regarding clinical, theory and multicultural work and competencies.

Please note, there are no meeting minutes from October and November 2015 because administrative secretary was on maternity leave.

December 9 - Doug Pettinelli made a motion that the practicum supervisor will visit each site once during the semester and they will fill out the clinical skills evaluation as well as the off-site supervisor. Everyone agreed this is a good plan. Moved, seconded, approved. This will start the spring 2016 semester.

December 9 - It was also determined that students must keep a case load in the CCFT during internship. It was decided that students must maintain an average of 3 cases throughout their internship semesters. Moved, seconded, approved. (This was added to the student handbook.) This action item met Program Goals 1 and V / SLO’s I.A.1, I.B.1 and V.A.1: Where students must keep not only professional skills in their caseload in the program, but also develop clinical skills in seeing relational hours in CCFT.

December 9 – Max Zubatsky presented his clinical training flowchart and faculty voted to include it in the student handbook. (Program Goals I.A.1, I.B.1, I.C.1, III.A.1)
February 3 (this was first faculty meeting of the year due to lack of agenda items and inclement weather) - Update: Max Zubatsky and Doug Pettinelli are still in collaboration, pulling different evaluation scales and compiling them together for off-site supervisors to evaluate our students during internship. Craig Smith noted that we had said we would have students evaluated midway through the spring semester, so we need to get the form completed and uploaded to Task Stream within the next few weeks to make that deadline. Max Zubatsky said that he will send a rough draft out to everyone for input once it is completed. (Evaluations of off-site supervisors for clinical work of both programs covered program goals 1, 3 and 5/ SLO’s I.A.1, I.B.1, III.A.1, and V.A.1)

February 3 - Max Zubatsky moved to change the grading system for research practicum courses (MFT 6730) to pass/fail. Katie Heiden-Rootes seconded. All approved the vote. (This was put into effect for the current – spring 2016 – semester.) The research practicum courses and benchmarks for students correspond with Program Goal 2/ SLO II.A.1, II.B.1 and II.B.2)

March 2 – Doug Pettinelli has been working on an unpaid internship in the CCFT for undergraduates at the University. Faculty voted and approved to accept applications. (This new initiative corresponded with program goals 1 and V/ SLO’s I.A.1, I.B.1 and V.I.A. Current students have the opportunity in their professional development to help mentor undergraduate students in this role, where undergrads can also shadow students to learn more about theory and MFT skills in practice)

April 6 – Doug Pettinelli and Max Zubatsky presented their proposed clinical skills evaluation rubric/evaluation form. There were some modifications by Katie Heiden Rootes and Dixie Meyer. With these changes in place, faculty voted to accept and adopt the new evaluation for students in practicum, effective immediately. (Meeting Programs Goals 1, 3 and 4/ SLOs I.A.1, I.B.1, III.A.1 and IV.A.1).

April 27 – Doug Pettinelli has received multiple applications for the undergraduate internship position. Faculty reviewed the applications and two students were selected for this position. They will help with desk duty at the clinic, observe therapy during practicum, and can join faculty research projects.

May 11 – 2016 Yearly Faculty retreat meeting – How do we integrate our courses into Family and Community Medicine/School of Medicine course of study? Third year is focused on clerkship. Clerkships are broken down into 6 modules of 8 weeks. Two of these 8-week modules (OB and FCM) are 6-week clinical experience and two weeks’ exploration electives. It is feasible that students could sit in on MedFT courses during this time, if they wished. This was approved by faculty. Katie is working with Dr. Zoberi to structure her summer Human Sexuality course so that it can accommodate School of Medicine residents. (This initiative for cross training of courses between MedFT students and medical students corresponds with
program goals 1, 3 and 5/ SLO’s I.A.1, I.B.1, III.A.1 and V.A. This addresses one of the program’s main missions to collaborate with divisions within the department and to

Max brought up the idea of an integrative course – not an additional course – if it is consistent and built into an existing course, pairing a MedFT student with a resident or medical student would be very beneficial. But to find the time outside of a twelve-credit hour course load, full time job, and internship is challenging. Note: This idea for an integrative clinical experience became the MA MedFT Concentration rotation in SLUCare for MA MedFT concentration track students.

May 11 – Upon reviewing the low number of responses to the exit survey, Craig Smith asked Mary to put together a form/checklist to be used before a student’s defense/exam for their advisor to complete that specifies they have all their hours completed, exit survey completed, etc. Note: This form became the graduation checklist, which was approved by vote at the July 20 faculty meeting. (This action item meets Program Goal 2/ SLO II.A.1 and II.B.1- improving research skills for students for PhD students).

May 11 – Spring faculty retreat – MA Program Review

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Made a timeline (pictured above) of what we want our students to know at the beginning of their studies through the end/graduation.
We have two main topics to implement:

1. We want to do more in terms of early support as they transition into the program (Corresponding with Program Goal I and III/ SLO’s I.A.1, I.B.1 and III.A.1- Adapting more theory, MFT skills, intro counseling skills and multicultural skills earlier in the program for students).

2. We want to do more in terms of research development for MA students. (Corresponding with Program Goal II/ SLO II.A.1, II.B.1- Students are needing to improve research skills at the master’s level to inform their clinical skills)

All faculty agreed that taking one introductory course down to 2 credit hours and developing a one credit hour Personal and Professional Development Course is needed for MA students. (Moved, seconded, and voted.) Note: This credit hour change was not made, but instead, the professional development topics were integrated into MFT 5210. (This course would address SLO’s I.A.1, I.B.1 and V.A.1 in developing MFT skills and addressing professional development of student learning).

May 11 — Katie Heiden-Rootes and Dixie Meyer said they would draft up a memo for Craig about switching when a course each of them teaches to different semesters to start research and statistics sooner. (Meeting Program Goal II/ SLO II.A.1 and II.B.1- emphasis of research skills development.)

Fiscal Resource Review – Craig Smith went over program budget and CME budgets with faculty; no changes were made were the following year with budget.

Technological Resources Review – New computers have been purchased to upgrade the student workroom and CCFT reception (6 devices total)- This is to address SLO’s I.A.1, I.B.1, II.A.1, II.B.1 and V.A.1. The new computer will address clinical, research and professional development skills for both MA and PhD programs.

Evaluations- Faculty reviewed the exit and alumni surveys from this year. Students discussed the need for more clinical development and opportunities earlier in both programs. PhD Program also addressed SLO’s II.A.1 and II.B.1 about having more research emphasis in the program.

July 20 – In this meeting, the Graduation Checklist was approved and put into student handbook effective immediately. The faculty felt that this checklist would help prepare students in their timely progress from year to year. This checklist corresponds with all program goals and SLO’s for both programs to help achieve benchmarks in the program.

August 17 – Kickoff Faculty Meeting: To help students retain information from Kick-Off and have it be more interactive, each faculty volunteered to speak on one topic. Fees need to be collected more consistently in the clinic. Doug Pettinelli will reinforce this policy during CCFT training at Kick-Off day for students. This reinforcement will be
addressing SLO V.A.1, about professional responsibility for both programs to have students collect fees for therapy in the clinic.

Craig Smith noted that as part of supervision, along with collecting fees, the faculty, as supervisors, need to hold students more accountable about keeping case notes up to date. Katie Heiden-Rootes suggested that we employ a document she created: a supervisory log where students enter the number of sessions per week, number of session summaries, treatment plans, and case notes completed. There is also a column where students indicate if a fee was collected. She said students bring it to supervision and then there is a tool to help bring fee collecting a case notes into the conversation in supervision.

September 7 – Katie Heiden-Rootes presented her supervisory log to the faculty and it was accepted and adopted into the program handbook, for MA students, effective immediately. Note: This is the Monthly Client Contact Sheet we have available for students, which meets SLO’s I.A.1, I.B.1, V.A.1. Students need to keep track of client hours and the ongoing skills they use for individual and family sessions in their training.

September 7 – Craig Smith updated everyone on the website – SLU is switching to a new platform/program for all websites, so our temporary solution (until our University site switches automatically to Google) is for the program to direct students to the Google Site. There is a link on the homepage. The new website will include areas that cover all program goals and SLO’s in the MA and PhD programs. The website will be an additional technological resource for students to pull information from.

September 7 - Faculty agreed that all advisors will make sure they check in, more than informally, with their students during internship – beyond the annual evaluation. All advisors should use this check-in as the way they assign a grade for internship each semester. In the materials around internship, there needs to be some statement around each student checking in with their advisor so we can have some accountability. There are designated contact people, and the advisor will check in with them and the student. We need to do this to make sure we support the students as well, on top of accountability. We need to be conscious of that as advisors. Note: This would become a function of the Integrated Care Skills Evaluation (This evaluation covers SLO’s I.A.1, I.B.1, I.B.2, III.A.1, and V.A.1 in the PhD program. Covers areas of theory development, MFT skills, cultural areas of practice, and professional development for students)

October 5 – PRN, Data Collection Decisions

There are four data collection packets. There is also the standard packet, which happens at intake, as well as an intersession packet and therapeutic alliance packet that happens at the beginning of every session. The four packets will be given every 4, 8, 12 sessions. We need to decide what we want to put in the four packets – aside from intake, intersession packet, and therapeutic alliance.
Craig Smith asked Mary Donjon to create a worksheet for the faculty to pick the four measures they want to add to each packet (this was emailed to faculty later in the day). Faculty will fill that out and bring it to the next faculty meeting so we can choose which PRN measures to use. It was also noted and agreed that we should revisit this again a few months after implementation, once we have an idea of how this will change functioning in the clinic and we’ve seen the PRN in action. The collection of data in the CCFT covers SLO’s I.A.1, I.B.1, II.A.1, II.B.1, III.A.1 and V.A.1. The collection of data will help track research outcomes in the program and will be able to encourage more development in assessments and questionnaires for students.

October 19 – PRN, Data Collection Measures (SLO’s I.A.1, I.B.1, II.A.1, II.B.1, III.A.1 and V.A.1.)

Katie Heiden-Rootes made a motion to adopt these. Craig Smith seconded, faculty unanimously voted to adopt measures in CCFT. These measures will help in student learning outcomes around theory development, clinical skills and multicultural assessment:

At intake:
Demographics, which includes
- CTS-2 Short Form
- ACES
- Pressure to Come to Therapy
Issues that brought you to therapy
- Responsibility of Problems that brought you to therapy
Quality and Quantity of Exercise
- Height
- Weight
- Item # unknown

Every session:
- Intersession Report 13 items
- Therapeutic Alliance 13 items

MDI – Depression
Ohio – Problem Severity and Functioning
CTS-V – Violence
SBQ-R – Suicide Behaviors Questionnaire

December 7 –

Faculty went over the PRN Training for the tracking of data for CCFT: In CCFT, the meeting is scheduled for January 26, 2017, 7:00pm – Mary reserved room MOR002. This training will help faculty address SLO’s I.A.1, I.B.1, II.A.1, II.B.1, and V.A.1. Faculty will learn how to help track areas of diagnosis, assessment, theory development, and research data of client outcomes in therapy.

2017

January 18 – Faculty discussed areas of Recruitment Strategy: SLU has new tool, PROSPECT, which compiles prospective student names, emails, and requests for information about our program. We will have training on Feb 1 to learn more about the tool. The recruitment areas
address all program goals and SLO’s to promote to prospective students of the programs. This is an additional technological resource that the programs can use for student recruitment.

March 1 – Upon review of Katie Heiden Rootes and Dixie Meyer’s memo of rearranging statistics and research courses, it was decided no changes would be made now. (This proposal was to address SLO’s II.A.1 in the MA program, for more development of research skills for students)

March 15 – The faculty reviewed the MA Oral Exam policy. It was reviewed, updated, and approved for immediate inclusion in the handbook. This policy will now be that students must defend the oral in the final semester of their course of study. The outline of the topics of oral exam were revised, addressing SLO’s I.A.1, I.B.1, III.A.1 and IV.A.1. Areas of theory, diagnosis, assessment, treatment plan, ethics, self of the therapist, and cultural issues were laid out clearly in the handbook.

April 19 – MA and PhD Student Annual Review document was reviewed by all faculty for any updates. No updates for the handbook or course adjustments were needed at this time.

May 19 – 2017 Yearly faculty retreat meeting

Expanding Interprofessional Education and Collaborative Practice: We will develop learning outcomes/competencies for MA students that we can measure during internship. SLU model of integrated care our students must learn: huddles and handoffs, 20 or 50-minute visit, brief/huddle/debrief for each patient. Students must use transferrable skills. (This IPE initiative was to help advance SLO’s I.A.1, I.B.1, V.A.1, where student learn more theory, assessment, clinical skills, and professional areas in their clinical work in the community clinics)

Students need to be in sites either one full day or two half days (preferable) a month starting July as part of MedFT training through coursework. 1. A faculty member should also be at the sites for one full day each week. Students will begin placement in sites in Dixie’s Behavioral Medicine and Integrative Care class starting in June on Tuesday and Thursday. We will reserve a room at those sites for her to lecture. Max will be at the sites on Fridays.

Technological Resources Review

Task Stream is confusing for students. We see negative comments about TaskStream on every student resources survey. There are continual deficiencies in completing evaluations on time. As courses change over semesters, we cannot easily add/change assignments in the program. Task Stream will start being phased out and FolioTek integrated in. The faculty unanimously approved using Foliotek as the main software for assignments and benchmarks in the program.

Resources Review- The faculty reviewed the resources in the program and student use of tools on the SLU page. No changed needed at this time.
Exit survey results - PhD students are happy with the program but wish there was more interaction with mentors during the dissertation writing process. Mentors will check-in with their advisees more regularly during the dissertation phase of their program of study. The area of mentorship was corresponding with SLO’s II.A.1 and V.A.1, where students receive research skills in their training and development as a competent professional in their all-around skills.

Exit survey and student resources survey review - CTTL certificate will no longer be required for the teaching component of PHD students’ portfolio. We will expand the options for students to gain experience in teaching through adjunct teaching, teaching practicum and alternatives designed by the student and their mentor. (This corresponds with II.B.2 for teaching skills of students in the PhD program).

Exit survey results – MA students are not satisfied with duplicate information presented during course of study and lack of clinical opportunity. We will update courses of study (with practicum and internship, sessions at SLUCare sites, and MA changes). Note: New course of study adopted, effective fall 2017. Current first-year MA students will change to this course of study. (Changes in the course of study were to address all program goals and SLO’s in the course of study).

Fiscal Resource Review – Program budget and CME budgets reviewed with faculty; no changes were requested by the PD or faculty.

September 20 – Students have suggested they need more mentorship for writing. Katie Heiden-Rootes will plan and host a writing day with the student success center. The faculty supported this initiative would meet SLO II.A.1 and V.A.1, in helping specifically PhD students develop better research and scholarship skills.

October 4 – Fall Retreat Meeting – The faculty discussed an overview of the SLOs, program goals, faculty outcomes and benchmarks. SLO, FO, Assessment Benchmark, and Evaluation Method changes reviewed and adopted by all faculty. The PD will implement these changes in the assessment calendar for the program.
I. To train sound clinicians who are equipped to work with a wide variety of presenting problems and a diverse array of families.

<table>
<thead>
<tr>
<th>Program, Student Learning and Faculty Outcomes</th>
<th>Assessment Benchmarks</th>
<th>Evaluation Method (Eval. Point)</th>
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<tr>
<td><strong>MA Program</strong></td>
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<td>[Review Point]</td>
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<tr>
<td>I.A.: Ground students in multiple theoretical orientations related to the field of MFT.</td>
<td>70% of graduating students will rank the program above average or excellent in meeting their educational needs.</td>
<td>Exit Survey (One week prior to Oral Exam/Diss. Defense) [Prog. Meeting 1 month post Commencement]</td>
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<td>I.B.: Teach students the basic clinical skills and competencies for entry into the field.</td>
<td>50% of alumni will be active in the profession. 70% of alumni will rank the program above average or excellent in preparing them for their profession.</td>
<td>Alumni Survey (June) [Fall Program Retreat]</td>
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<tr>
<td><strong>PhD Program</strong></td>
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<td>I.C.: Provide more in-depth knowledge and training in major MFT theoretical models.</td>
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<td>Advisory Council Annual Meeting (June) [Fall Program Retreat]</td>
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<td>I.D.: Expand students understanding and ability to apply advanced clinical skills.</td>
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Results and Recommendations:

A review of the exit survey report and alumni placement report (see attached) indicated that overall the program was accomplishing the established outcomes. The area of concern where ratings and open response questions indicated the need to improve was in the area of faculty accessibility and responsiveness to communications. After recognizing that students vary greatly in expectations, personal initiative and autonomy the following policies were approved:

- **Syllabi** will include faculty policies on how and when to contact them. Specifically:
  - The program’s Use of SLU Email Policy (viz., personal email addresses are not used for university business).
  - If the student has not received a response within 3 days they are encouraged to send a reminder and the faculty welcomes such courtesies.
  - Students should not expect a reply to electronic communications outside of university business hours.
  - Drafts of papers, manuscripts, theses/dissertations require two weeks turn-around unless previously arranged with the faculty.
- **Efforts** will be made at the Fall Kickoff and in classes to educate students about collegial etiquette and the need for both faculty and students to openly discuss accessibility and boundaries.

III. Students will be trained to be adept at understanding and working with clients from a variety of multicultural backgrounds, with a specific emphasis on the concerns of poor and underserved populations.

<table>
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<tr>
<th>Program Outcomes:</th>
<th>The MFT Program Advisory Council will review the Student Learning Outcomes Report, Faculty Outcomes Report and the CCFT Demographic Report and evaluate the program’s fulfillment of expected outcomes.</th>
<th>Advisory Council Annual Meeting (June) [Fall Program Retreat]</th>
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<tr>
<td>III.A.</td>
<td>Increase students’ knowledge, awareness and sensitivity of cultural injustices that occur in our local, national, and global community.</td>
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Results and Recommendations:

The Advisory Council provided no additional recommendations to the program’s current activities and initiatives.

IV. To educate professionals who are knowledgeable and skilled clinicians and leaders in their profession and community; and promote social justice among all people.

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<tr>
<th>Program Outcomes:</th>
<th>The Center for Counseling &amp; Family Therapy will consistently provide services to a diverse population.</th>
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<tr>
<td>IV.A. The Program will foster leadership and service through the exercise of personal and professional skills that promote social justice.</td>
<td>50% of alumni will be active in the profession. 70% of alumni will rank the program above average or excellent in preparing them for their profession.</td>
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<tr>
<td>Review of CCFT Demographic Report (July)</td>
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<td>[Fall Program Retreat]</td>
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<tr>
<td>Alumni Survey</td>
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<td>Employer Survey (June)</td>
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<td>[Fall Program Retreat]</td>
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Results and Recommendations:

The faculty reviewed the CCFT Demographic Report and *Clinic Feedback Survey (see attached). The report confirmed continued effectiveness in providing services to a diverse community. The preponderance of responses to the clinic survey rated the CCFT as above average to excellent. The only dissatisfaction expressed (rated “average”, 40% of respondents) was in CCFT procedures with open responses focused on desk duty—although respondents also expressed appreciation for the experience.

- “I did not enjoy working the desk. It was spun that it would be good experience for us to know how all aspects of the clinic but I really think they did not want to pay someone to work the desk.”
- “Desk service is an essential opportunity that needs to continue. Why? Because it’s humbling, informative, offers service to our clinic community, and forces people to be in the clinic. I like the clinic forms and our procedure for intakes.”

The faculty discussed improving the accounting procedures in the clinic in order to better track accounts receivable and provide clients with clearer information on their accounts. The clinic director will prepare a plan for implementing the accounting module of Carepaths in order to fulfill this need and present it at the next faculty meeting.

Of 55 respondents to the alumni career placement survey (see attached) only two were not active in MFT-related careers (97%).

A particular concern was the fact that the alumni survey distributed in the spring of 2016 had a 0 response rate.

*The Clinic Feedback Survey was completed by current and former students in the program in order to gather information on the functioning of the CCFT.

V. To prepare reflective practitioners who understand themselves in relation to those they serve and who incorporate spiritual, moral, and ethical principles into their personal and professional lives.

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<tr>
<th>Program Outcomes:</th>
<th>70% of graduating students will rank the program above average or excellent in fostering the incorporation of spiritual, moral, and ethical principles into their practice and conduct.</th>
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<tr>
<td>V.A. The program will create a context that incorporates spiritual, moral, and ethical principles into its curriculum and clinical experiences thus enabling students to safely explore/understand themselves and their values.</td>
<td>Exit Survey (One week prior to Oral Exam/Diss. Defense) [Prog. Meeting 1 month post Commencement]</td>
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<td>Exit Survey (One week prior to Oral Exam/Diss. Defense) [Prog. Meeting 1 month post Commencement]</td>
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Results and Recommendations:

A review of the exit survey indicated that 100% (n=3) of graduating students ranked the program above average or excellent in preparing them for ethical practice. It was noted that the exit survey should be revised to reflect changes in the program outcomes statements.

Based on previous feedback from students and the desire of the faculty to offer opportunities for students’ personal and professional growth a reflective practice process group was organized for the students. The program contracted with an MFT in practice in the community to facilitate a weekly group for students to use. The first week the group met the facilitator clarified that the group was not mandatory but established for their use with no communication or reporting to the program. For the next three weeks the facilitator was the only attendee. The group has been suspended by popular non-demand.

Program Resources and Operations

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<tr>
<th>Curriculum</th>
<th>Course Evaluations</th>
<th>Exit Survey</th>
<th>Alumni Survey</th>
<th>Taskstream DRF</th>
<th>[Fall Program Retreat]</th>
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Results and Recommendations:

The remainder of the retreat was spent in reviewing course-specific Taskstream requirements and revising the Masters program DRF to reflect current curriculum offerings. Based on the significant curriculum revisions implemented over the last two academic years there were no major changes to the curriculum. Actions implemented, based on student evaluations and faculty input included:

- The M.A. oral examination will consist of a Personal Theory of Therapy/Clinical Case Presentation. Dr. Zubatsky will revise the oral examination policy to reflect this change.
- Procedures for MA students completing the Clinical Skills Evaluation self-assessment and submitting it to their supervisor were clarified and should be included in all practicum and internship courses. Syllabi will specify the due date for self-assessments and faculty will conduct a draft evaluation in Taskstream within 72 hours of submission, arrange an interview with the student and submit the final evaluation after the interview.
- PHD students will complete the Clinical Case Presentation requirement as part of third semester doctoral practicum. The requirement that students obtain 200 clinical contact hours within the program before completing the presentation was removed.
- Course-specific Taskstream requirements will be identified as such in Taskstream in order to assist students in identifying when requirements are due. All requirements in Taskstream will include an approximate due date in the description/instructions in order to assist students in maintaining their progress in the program.
- Dr. Eric Westus of the SLU Center for Outcomes Research will be consulted in order to establish a listing of recommended research methods/statistics courses.
- A revision of the course evaluation instrument was reviewed and faculty agreed to move to online administration of course evaluations in preparation of SLU’s implementation of eXplorance Blue, an online evaluation application. A PowerPoint presentation from the Kathleen Thatcher, SLU Assessment Coordinator, that provided an overview of online course evaluation and effective strategies for engaging students in their completion was reviewed and discussed.

Items identified for future attention included:

- Further development of behavioral consultation curriculum
- Identifying and modifying courses that would benefit medical students and residents
- Exploring the implementation of 1 credit course intensives to better integrate the curriculum with the medical school curriculum format.
October 17 – At this meeting, the faculty addressed issues of safety on campus. Students have expressed a feeling of not being safe at the clinic/University. Considering these feelings, we scheduled MedFT/DPS Safety Meeting: November 14, 12:00-12:30pm, MOR 1105. This decision was to address SLO V.A.1, where students are taking safety and consideration of clients’ well-being in our clinic and coming to campus.

2018

January 17 – Fiscal Resources Review – Faculty reviewed graduate assistantship applications and assistantship/scholarship budget. Scholarship guidelines adopted for all students receiving a tuition scholarship through the program. These will be added as a second page to the offer letter, which must be signed, when offering any student a tuition scholarship.

February 7 - Integration of Interprofessional Team Seminars in masters and doctoral curriculum. Based on feedback from students and faculty that attended, it was moved, seconded, and voted that students will be required to take the seminars effective fall 2018 to increase clinical and MedFT training skills in the program. (These seminars address SLO’s I.A.1, I.B.1, III.A.1 and V.A.1. Students will develop advanced theoretical orientations, MFT skills, team-based work around cultural issues, and further collaborative professional skills with other disciplines)

February 21 – We will create a focus group yearly feedback meeting from students in place of an exit survey upon completion of BHWET grant. This focus group format will be conducted in July of every year from both programs around feedback of SLO’s resources and other areas. This focus group will help cover not only all program goals and SLO’s, but also address technological, fiscal and instructional resource review.

Max suggested rebranding the MA program for recruitment purposes. The faculty will discuss the options of re-naming the program outside of “Family Therapy.” This was to differentiate the master’s program name from the Medical Family Therapy doctoral program name.

March 7 – Katie would like to host a training for students on transsexual individuals. Note: This training was eventually held at Fall Kick-Off.

March 7 – Faculty voted to add to handbook that any student presentation, poster, etc. must be reviewed and approved by a faculty member.

April 4 – Technological Resources Review - After multiple issues with PRN, Katie is meeting with BYU in June – we will decide if we want to switch to a new system after that meeting. Katie will also give flyers to our therapists – will hand out to clients for a voluntary interview with Katie about technology.

April 4 – Faculty voted to adopt policy that MA students must be enrolled in internship until they complete all their hours. Once they have completed their hours, then the student may defend thesis/complete oral exam. Handbook updated to reflect that policy. (This addresses all SLO’s and program goals in the MA program for student benchmarks).
April 4 – Faculty discussed the need to address more research courses in the PhD program. The II.A.1 SLO has not been reached as much and to prepare more qualitative dissertations. The faculty voted to include Phenomenology course. Katie and Mary worked with registrar to create course and add to program of study.

April 18 – The faculty discussed some concerns that PhD students have had around clinical sites and the research mentorship. Based on PhD feedback, we will have a Town Hall meeting with the doc students before faculty retreat. Date TBD. This meeting will address SLO’s I.A.1, I.B.1, II.A.1 and II.B.1, covering areas of clinical and research training and skill development.

April 18 – Mary will create an updated Master Calendar of due dates and deadlines for both courses which we will make available for students on our website > Student Resources Page. The calendar will be listed in outlook, where specific dates will broadcast evaluations needed by either students or faculty. This calendar will address deadlines, benchmarks and assignments for students in both programs that address all goals and SLO’s for both PhD and MA students.

May 2 – Program faculty discussed incorporating the three paper dissertation into the program. Multi-paper Dissertation Policy Confirmed (3 papers). Doug will contact Chris Harper about official policy in Grad Education and follow up with Dr. Samson about this as well.

July 11 - VOTE UNANIMOUS to put PRN on hiatus until new website is up. Katie and Doug will work on developing a new system to roll out to students by Kick-Off.

October 3 - Final focus group data from the BHWET grant: Feedback honest and positive. We will take curriculum feedback under consideration for future curriculum development. We will continue these focus groups for future graduating cohorts to use as quality improvement. Katie will develop a new set of questions for these groups and present at a future faculty meeting.

October 3 - Doug and Katie will develop a proposal with relevant measures and present usable package and implementation plan at future faculty meeting. Need to find balance between gathering clinically relevant data to inform treatment and use for research.

December 5 – CCFT Intake Forms and Assessment packet reviewed and faculty voted unanimously to adopt.

2019

January 16 – The faculty addressed the Student Association bylaws. Faculty reviewed and voted to accept. These will be distributed to students.

February 20 – Craig Smith and Mary Donjon worked with MARCOM to move our Google Website to a University standard website. Faculty were asked if there were any additional pages or updates they would like to see/add. Professional affiliations were added to the Student
Resources page. **This resource covers all goals and SLO’s in both programs, related to all program information.**

February 20 – Mary compiled a list of licensure requirements for multiple states with high MFT employment and faculty compared those with the requirements of Missouri and our program requirements. The goal of this was to ensure that our program is up-to-date with licensure requirements so that MA students can get their license more easily once they graduate. Katie is working with the Missouri board on some experience hour issues that several of our graduates are facing. The comparison found that our program is on track with licensure requirements; however, faculty feel that we need to place more focus on licensure and provisional licensure in the program which would benefit our students as the process can be lengthy. **The licensure areas covers SLO V.A.1 and I.A.1/I.B.1.**

Max Zubatsky proposed we have a “brown bag” type of weekly seminar in the fall semester of 1st year to cover these types of topics for new students. Moved, seconded, voted to start this effective fall 2020 (2nd year students can attend as well and we will have guest speakers). – **This seminar would address SLOs I.A.1, I.B.1, II.A.1 and V.A.1. This would be available to both programs. It would nbe a “First Year Orientation” course.**

March 20 – **MA Internship Policy update was approved. This was added into the handbook and posted on the program website on the Student Resources page. This policy addressed SLO V.A.1, where students have to rank order their sites, as well as interview at sites to develop their professional skills.**

May 15 – **MA Internship Site Supervisors Meeting at faculty retreat. The site supervisors noted that they would like to know more from us about what we expected our students to be doing and experiencing while they are on site – what are the outcomes we are looking for? Katie and Max will email each site supervisor a copy of our learning outcomes for their review. The supervisors will also provide us with feedback of things our students need to be prepared for or have exposure to before they work at specific sites. Everyone agreed this was a very productive meeting and that we are all “on the same page” now. Site supervisors will have regular check-ins with faculty.**

May 15 – **Yearly Faculty Retreat Meeting**

MA and PhD curriculum were reviewed. Faculty reviewed the programs of study. Max Zubatsky took notes of some of the rearranging of courses that was suggested.

Faculty moved, seconded, and voted to remove MFT6650: Adv. Couple & Family Therapy from the PhD program of study and replace with an additional research course. This was based on multiple years of student feedback that the course was repetitive and that our doc students would like to have more personalized/elective research topics covered during their program. Max will begin work on updating the programs of study, which we will review in the fall so that, if adopted, the new programs can be sent to registrar and effective fall 2020. (This change would address SLO’s I.A.1, I.B.1, III.A.1- where students in this course for MA students only would fit master’s level theory and mft skills)
Fiscal Resource Review – Program budget and CME budgets reviewed with faculty; no changes were made at this time.

Different faculty (Dr. Jacobs, Dr. Rottnek, Dr. Everard, Dr. Scherrer, and supervisors) came throughout the afternoon to address all program goals and SLO’s in both programs. This was part of the yearly COI meeting, reflected in the COI meeting minutes.

June 12 – More faculty discussion around PhD research courses/degree planning. Max is developing new courses of study which he will present at the fall faculty retreat.

June 12 – Revenue sharing policy and procedures were reviewed and approved.

September 4 – Faculty voted to have application deadline moved up to January 3 and have interviews Jan 31/Feb 3. Mary will update website with this info and change deadline in application portal.

November 6 – Faculty reviewed the proposed new courses of study for both MA and PhD. For MA program faculty voted to remove the MedFT Concentration course requirements for the following year. Students will still have the option to have an integrated care experience and take additional courses but the concentration is eliminated. Max and Mary will work with the registrar to update the programs of study – effective fall 2020. Student handbook and website will be updated with the new programs of study.

December 4 – FolioTek was reviewed. Faculty voted and approved that the Clinical Case Presentation will be replaced with Comprehensive Portfolio Examination. The current 2nd-year PhD students will meet this requirement in the spring.

2020

January 15 – Faculty discussed changing the restroom signs to be gender inclusive but that was decided against because of the cost and Memory Clinic clients who are confused by the non-binary signs. This proposal would address SLO/s III.A.1 and IV.A.1, where the program is sensitive to multicultural and social justice issues for clients in the Family Clinic.

February 5 – Proposed Doctoral Internship syllabi and Doctoral Dissertation syllabi were reviewed. Suggestions were given, which Megan Ferriby Ferber will incorporate into the next revision. Megan Ferriby Ferber made a motion and approved that doctoral dissertation syllabi were developed.

March 4 – Program’s diversity plan was reviewed and accepted. Will be put into the handbook effective immediately.

March 18 – First remote faculty meeting. Faculty will work to compile list of resources to share with students via email and during program-wide conference call. The PD will be conducting this call to the program as a response to the COVID-19 pandemic. Courses will be moved to online platform in both program.
Transfer to teleheath will be within the next two weeks as we complete onboarding and license purchasing. Students MUST have phone meeting with supervisor within the next week – before starting telehealth – and MUST keep in contact with their supervisors throughout remote access period.

**Telehealth:**

1. All telehealth sessions MUST BE HIPPA compliant. *(These requirements are covering SLO I.B.1 and V.A.1, where students must have professional and ethical decision making virtually working with clients.)*
2. Recording sessions is REQUIRED – via phone and/or Zoom and/or other platforms.
3. Therapists MUST continue to complete tasks in Carepaths.
4. Students must collect additional information from clients like email, revised inform consent, etc. to begin telehealth process.

**Student hours:** The program wanted to adjust the hours that students are being accommodated for. Increase alternative hours requirement during this period to up to 150 hours, 350 traditional hours. The faculty unanimously agreed due to limitations of this time period. *(This change corresponds with SLO’s I.A.1, I.B.1 and V.A.1. Students will be able to get more alternative hours as a result of COVID-19 pandemic. The PD will be sending a stipulation letter to COAMFTE)*

April 1 - Students have started telehealth trainings; will start taking clients soon. Katie Heien-Rootes and Stephanie Malzahn are working on intake for new clients/wait list. Payment system is working well – students will have conversations with clients if fees need to change.

April 15 – Faculty discussed the CCFT Undergrad Interns – narrowed down to 4 from 6; Katie Heiden-Rootes will make decision and pair each intern with a faculty member. *(This corresponds for Program Goals 1, 2 and 5 for both programs, mentoring undergraduate trainees to help work in the clinic)*

May 20 – **Virtual Spring Yearly Faculty Retreat**

The faculty talked about the dissertation process for doctoral students. *Dissertation courses and credits: Launching workshops to be held every other month, faculty will host on a rotating basis with guest speakers.* *(This will be a requirement for students in the doctoral program to meet SLO’s II.A.1 and II.B.1, having more training of research on a continual basis to help achieve benchmarks of program goal #2)* Dissertation syllabi is live – Starting fall 2020, students enrolled in dissertation MUST produce some output each semester to match the number of credits that they are taking.

Mary will find out process for changing grading system for MFT6990 from IP > S to S/US/I.

Mary and Megan will work with Grad Ed to see if there is a policy about works hrs. correlating to course credit hours. *Note:* There is no policy.
Fiscal Resource Review – Program budget and CME budgets reviewed with faculty; no changes.

Qualtrics survey about telehealth in progress. Katie and Megan will work together to make response analysis template. Grad student will help with data collection.

Technological Resources Review – FolioTek: Review required and suggested documents for MA and PhD portfolios due to course of study changes. Mary and Max will work with faculty to update.
- Include competencies and questions to respond to in reflection document – Add to handbook
- Update portfolio rubrics to include more detailed categories

PhD courses: Adding Policy class and Teaching Skills (starting 2022). Faculty who would teach these courses will work of developing syllabi to present at later meetings for approval.

Focus groups: Based on previous focus group data, Katie created an updated list of recommended sites for internship. A rank list for internships will be made in the handbook. We will have more focus groups in the future. Faculty voted and decided that focus groups should be conducted by someone in the FCM Research Division to encourage honesty and anonymity (this ended up being S Secrest). This feedback of internship sites addresses SLO’s I.A.1, I.B.1 and V.A.1, increasing opportunities for MFT skills, theory and prof development.

Communities of Interest Meeting July 21, 12:00-1:00pm. Faculty worked together to compile a list of contacts in the community and within the University. Max and Mary created the Zoom invitation and sent them out. (Minutes are in the COI Review Minutes)

July 15 – Focus Group Data Review – Students commented that Human Growth and Development should be taken sooner in course of study to better prepare for working with children and their families. MA Students commented we could include more multicultural topics like race and dealing with those issues in communities outside of St Louis/Missouri. PhD students mentioned the need for more research emphasis as well as more diversity training in clinical practice. (The feedback from the focus groups covered SLO’s I.A.1, I.B.1, II.A.1, II.B.1, III.A.1). Faculty mentioned that the first-year research PhD course would be implemented this year. Multicultural MA course has been moved to the first semester. And more clinical training sites that have options for MA internship have now been added to the internship list for students.

Fiscal/Technological Resources Review – WorkDay Finance is now live for the University. Mary will send the job aids to Katie and CCFT coordinators. Only payments will continue due to COVID.

COVID Response/Returning to Campus Updates/Policies: Following social distancing guidelines, we can fit 5-6 students in our classrooms

- Faculty can run their courses as they wish in terms of hybrid/full in-person/online but they need to be mindful or course enrollment numbers
- Max will email JH in registrar’s office for alternative rooms for courses with over 6 attendance
- Before courses start Max and Mary will mark the classrooms for social distancing
- Faculty and staff must be tested at University Employee Health; there is no set protocol for students

Overview of Technological Resources:
- **Tech updates from students** – Statistical packaging for doc students (SPSS)/What are the social distancing guidelines in terms of public/personal computers? Program licenses are only for computers in Morrissey Hall. Students can use revenue sharing funds to put SPSS on their personal computers
- **EPIC/EHR has been consistent in SLUCare sites.**
- **LearningSpace still used, renewed contract.**
- **Online teaching tools have been successful, will continue use.**

Overview of Fiscal Resources: The PD, Max Zubatsky, covered program budget information. CME reviewed, under budget for funding students for AY2021.

Resources Review - **Sufficiency of faculty/resource coverage for SLO’s:**
- Course coverage is good; supervision needs are covered.
- Number of internship sites is being increased for MA program which will aid in coverage for increased cohorts.
- Number of clinical sites could be increased if doc program cohorts increase.