COAMFTE
Commission on Accreditation for
Marriage and Family Therapy Education

January 5, 2024

Alan Kadish, MD, President
Roy Finaly, DMgt, MBA, Interim Chief Executive Officer
Sheila Lewis, PhD, Provost
Masha Godkin, PsyD, MFT Program Director
Marriage and Family Therapy Program
Touro University Worldwide (MA)

Dear President Kadish, CEO Finaly, Provost Lewis and Dr. Godkin:

The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE or Commission) reviewed three student complaints, one from thirteen students received on August 28, 2023 and two complaints each from individual students received on September 1 and October 31, 2023, against the Marriage and Family Therapy (MA) program at Touro University Worldwide (TUW). The Commission also reviewed the program's responses to each of those complaints. As discussed in more detail in this letter, the Commision found that the allegations raised in the complaints, as well as information provided by the program in its responses, point to a pattern of non-compliance with COAMFTE's Standards and Key Elements, especially with respect to the implementation of the program's internal complaint and grievance process, a lack of responsiveness to expressed student concerns and inadequacies in the "*processes and procedures used to monitor and ensure student progress and completion of requirements in the curriculum and practice components" of the program*.[1] Specifically, the Commission is concerned about the qualifications of those providing the relational systemic supervision during the clinical training component and how supervision takes place using observable data.

Consistent with the COAMFTE's Complaint Procedure which appears on pages 46-49 of the *COAMFTE Accreditation Manual: Policies and Procedures*, the Commission met on December 7, 2023, and voted to require the program to show cause why the program's accreditation should not be revoked.

The program is directed to host a focused interim site visit which will take place in a hybrid format, in Spring of 2024. A staff member is required to accompany the team. The specific dates will be determined by COAMFTE in consultation with the program. COAMFTE will inform the program of the specific requirements for the visit in advance and requires the program's full cooperation in scheduling and hosting the hybrid site visit within the timeframes established in this letter. The Site Visit will be at the program's expense. Failure to host the site visit within the directed timeline may result in revocation of accreditation.

[1] *See* Key Elements II-B, III-A, and III-C.

The purpose of the focused site visit is to gain a more complete understanding of the program's compliance with COAMFTE's Standards Version 12.5. The Site Visit Team will meet virtually with current students, recent graduates, faculty, and supervisors in the MFT clinical degree track. The Site Visit Team will also meet with program leadership and university administrators in-person on campus. To assist Site Visitors in preparing for the Site Visit and on-site review, COAMFTE requires the program to provide additional information for areas noted as deficient. This additional information must be provided to COAMFTE at coa@aamft.org on or before **March 1, 2024 and must be organized as one document, in PDF format with bookmarks linking to each component of the document**. **COAMFTE expects concise narratives that are directly responsive to the area of deficiency and supported with relevant documentation.**

Based on this review and as explained in more detail below, the Commission determined that the program is required to demonstrate compliance with the following Eligibility Criterion and Key Elements in the COAMFTE Accreditation Standards Version 12.5:

Eligibility Criterion E
Key Element I-C
Key Element II-A
Key Element II-B
Key Element II-C
Key Element III-A
Key Element III-C
Key Element III-F
Key Element IV-D

The Commission's review of the program materials and required information is described below. **In all instances, the program should provide evidence and information that pertains to the COAMFTE-accredited clinical degree program (referred to by the institution as "clinical track")**.

ELIGIBILITY CRITERIA

Eligibility Criterion E: Accuracy and Program Transparency in Policies and Publications

Published and/or promotional materials accurately describe the program to students and the public. The program has accessible published policies that are readily available to applicants, students, faculty, and the public.

- *Published materials include but are not limited to:*
  - *Descriptions of the program's guidelines, mission, goals, and student learning outcomes*
  - *Graduate achievement data*
  - *Academic calendar*
  - *Tuition and fees*
  - *Degree completion requirements*
  - *Degree completion timeframes including percentage of students graduating withinadvertised timelines*
- *Accessible published policies include but are not limited to policies concerning:*
  - *Student complaints and grievances*
  - *Grading and assessment*

Commission's Response:
The program does not meet this Criterion. The program did not provide evidence of transparent policies and procedures that outline clinical training and supervision requirements for students, supervisors, and the public. The program explained how students track curricular requirements through advising and the online system; however, the specific allegations that changes in curricular requirements are neither transparent to stakeholders nor communicated to students during their time in the program were not directly addressed.

The program must provide:

- Evidence that the changes in curricular requirements for students during their time in the program are transparent in publications and policies to students, faculty and supervisors.
- Evidence of published degree completion requirements that clearly align with the COAMFTE required supervision in Key Element III-C.
- Evidence of published clinical training policies and procedures that clearly identify which clinical supervisors provide the required MFT relational systemic supervision according to COAMFTE standards.
- Evidence that the program is in compliance with the COAMFTE Policy on Program Disclosure in that "all representations of accredited programs are adequate and accurate." The MFT degree program that leads to licensure in the MFT profession must be clearly distinguished from the non-clinical and LPCC "tracks." Information on the program's website must clearly reflect that only the MFT clinical degree track meets the regulatory requirements toward MFT licensure and is COAMFTE accredited.[2]

STANDARD I: OUTCOME-BASED EDUCATION FRAMEWORK AND ENVIRONMENTAL SUPPORT

Key Element I-C: Plan for Assessing Environmental Supports

Environmental supports are institutional and program resources that contribute to successful student achievement, program quality and an inclusive and diverse learning environment. The program has a plan for maintaining effective environmental supports through a process of review that includes collection of feedback from identified communities of interest, program review, focused corrective action/advocacy where needed, and input to and from institutional leaders.

The plan for reviewing environmental supports includes the following areas:

- *How the program promotes an inclusive and diverse learning environment.*
- *How the program follows published policies for receiving, reviewing, and responding to complaints and grievances, and student concerns.*
- *How the program monitors other environmental supports including:*
  - *fiscal and physical resources*
  - *technological resources*
  - *instructional and clinical resources*
  - *academic resources and student support services*
- *How the program complies with institutional policies and procedures concerning the use or technology, including policies on disaster planning and recovery of information, and responses to illegal or inappropriate uses of technology systems and resources.*

[2] COAMFTE *Accreditation Manual*: Policies and Procedures, Program Disclosure policy, p. 42.

- *How the program ensures the reliability of technology systems, the integrity and security of data, and safeguards student and client information in accordance with applicable regulations and guidelines.*

Commission's Response:

1. The program does not meet the requirements of this Key Element. The program indicated that it has a University Student Voice System for gathering feedback that allows students to submit compliments, complaints, or general comments. This system appears to be an intake system. The program did not provide complete evidence of how it follows a published policy for receiving, reviewing, and responding to complaints and grievances, and student concerns. Additionally, the Commission found a consistent pattern in the student complaints submitted to COAMFTE and the program's responses that the program does not address student concerns/complaints in a timely manner, certainly not within the 48 hours described as part of the Student Voice System procedure.

   The program must provide:
   - Evidence of timely responses to student complaints, grievances and concerns.
   - Evidence of notification of such complaints, grievances and concerns to appropriate department(s) and personnel, evidence of responsive follow up including written notification to students of actions taken with respect to their grievances.
   - Evidence of curative actions responding to each of the multiple complaints that were submitted to COAMFTE, specifically including:
     - Documentation showing that the second complainant 1) has changed to the non-clinical MFT degree track that is not accredited by COAMFTE and 2) received advisement from the MFT program advisors that led to this change.
     - Evidence of completed audit demonstrating that the MA MFT clinical degree has been officially awarded to the third complainant.
   - Evidence that the program has developed preventative measures to decrease the number concerns that have been raised in the complaints.

2. The Commission found that the program did not demonstrate how it assesses for sufficient processes and personnel to support the foundational practice application component in the program's curriculum.

   The program must provide:
   - Evidence that the program monitors environmental supports of clinical resources.

STANDARD II: PROGRAM LEADERSHIP, PROGRAM FACULTY, AND PROGRAM CLINICAL SUPERVISORS

Key Element II-A: Program Leadership Qualifications and Effectiveness

Direction and oversight of the program occurs continuously throughout the year (12 months). Program leadership is qualified, assigned ultimate responsibility for the administration of the program, and meets the following criteria:

- *Is a core faculty member who demonstrates professional identity as a Marriage and Family Therapist.*

- *Is responsible for oversight of the outcome-based education framework, assessment activities, curriculum, clinical training program, facilities, services, and the maintenance and enhancement of the program's quality.*
- *In master's degree programs, has or shares leadership responsibilities for the foundational curriculum and foundational practice component and is an AAMFT Approved Supervisor or AAMFT Supervisor Candidate (Supervisor Candidate who assumes this role must become an AAMFT Approved Supervisor within three years.).*
- *Participates in an established effectiveness review that includes input from communities of interest and as needed, plans to support further leadership development and enhanced effectiveness.*

Commission's Response:

The program does not meet the requirements of this Key Element. The program indicated that the "primary supervisors" at the clinical site placements are responsible for the clinical training of students enrolled at Touro University Worldwide instead of the program director providing oversight of clinical training for students that ensures the required relational systemic supervision.

The program must provide:

- Evidence that the program director is responsible for oversight of the outcome-based education framework, assessment activities, curriculum, clinical training program, facilities, services, and the maintenance and enhancement of the program's quality.
- Evidence that the program director has or shares leadership responsibilities for the foundational curriculum and foundational practice component. More specifically, the program must provide evidence that the program director has oversight of the establishment of policies, curriculum and clinical training program and dissemination of those policies.
- Evidence that the program director is an AAMFT approved supervisor or candidate.
- Evidence that the program director participates in an established effectiveness review that includes input from communities of interest, plans to support further leadership development, and plans to enhance program clinical effectiveness.

Key Element II-B: Qualifications of Program Faculty and Program Clinical Supervisors

Program faculty and program clinical supervisors who contribute to the program's curriculum and application components are qualified to fulfill their specific roles. Qualifications and roles are identified in the context of the program's institution and congruent with the program's goals.

- *All program faculty members and program clinical supervisors are academically, professionally, and experientially qualified to fulfill their specific program responsibilities.*
- *Program faculty and program clinical supervisors have expertise in their area(s) of teaching and/or supervisory responsibility and knowledge of their instructional modality (e.g., distance learning) or method of MFT relational/systemic supervision (e.g., teletherapy, live observation).*
- *Program clinical supervisor roles are distinguished from instructional faculty roles and consistent with the program's application component.*
- *All program faculty receive position descriptions describing their responsibilities, required qualifications and institutional and program expectations for scholarship, teaching, research, MFT relational/systemic supervision, practice, and/or service.*
- *Fifty percent or more of core faculty, including the program leader(s) are qualified to provide MFT relational/systemic supervision as a program clinical supervisor.*

Commission's Response:

The program does not meet the requirements of this Key Element. The program provided evidence of some, but not all faculty meeting core faculty qualifications (some having MFT licensure and some who have the MFT identity for Program Clinical Supervisors). The program did not provide evidence of program clinical supervisors meeting the required qualifications to fulfill the clinical training responsibilities necessary to support the Foundation Application Component required in Key Element III-C.

The program must provide:

- Evidence that core faculty have expertise and qualifications to fulfill their program roles.
- Evidence that core faculty meet the systemic supervision training and training in specific required modalities of supervision delivery.
- Evidence of how the program identifies and distinguishes between instructional faculty and program clinical supervisors' roles and clarification of the statement that the practicum instructors provide "curriculum completion, enhancing development, cultural sensitivity therapy" in addition to supervision.
- Evidence that faculty and program clinical supervisors receive detailed descriptions of their role, responsibilities, required qualifications and institutional/program expectations for scholarship, teaching, research, MFT relational/systemic supervision, clinical practice, and/or service.

Key Element II-C: Core Faculty and Program Clinical Supervisor Sufficiency

The core faculty and program clinical supervisors must be sufficient to implement the program's outcome-based education framework (Standard I), curriculum instruction, and application component.

- *Core faculty sufficiency is demonstrated by*
  - *a core faculty-to-student FTE ratio of 1:15, OR*
  - *as an alternative, the program may designate and meet a core faculty-to-student FTE ratio that the program demonstrates to be sufficient to support core faculty responsibilities and institutional and program expectations as reported in Key Element II-B. The program must define sufficiency criteria that support the alternative ratio and demonstrate how these criteria are evaluated, reviewed, and revised as needed. Noncore faculty may be included in this alternative ratio if the program demonstrates defined and ongoing non-core faculty contributions that support core faculty areas of responsibility beyond course instruction and/or clinical supervision.*
- *The program must have a sufficient number of program clinical supervisors to support the program's application component in Key Element III-C, as demonstrated by a ratio the program determines to be sufficient to meet program responsibilities and expectations for program clinical supervisors.*

Commission's Response:

The program does not meet the requirements of this Key Element. In the program's response to the complaints, the program did not outline a process for determining sufficiency of program clinical supervisors and did not provide evidence that it has sufficient program clinical supervisors to deliver the Foundation Application Component found in Key Element III-C. Instead, the program indicated the following:

- The program utilizes 21 "practicum instructors" and that all practicum instructors are licensed as MFTs and are either AAMFT Approved Supervisors or Candidates. However, the program

did not identify these practicum instructors as program clinical supervisors.
- The practicum instructors provide "curriculum completion, enhancing development, cultural sensitivity therapy" in addition to supervision.
- The program identified its "practicum instructors" as "secondary supervisors" and the external site supervisors as "primary supervisors."
- The external site supervisors provide the COAMFTE required supervision (including observable data supervision), but the program did not provide evidence that the external site supervisors meet the MFT identity and relational systemic supervision educational requirements to be program clinical supervisors.

The program must provide:

- Evidence of core faculty sufficiency in either 1) evidence of an FTE ratio of 1:15 core faculty-to-student, OR 2) an alternative ratio with definition of sufficiency criteria and how sufficiency criteria is evaluated, reviewed, by whom, and revised.
- Evidence that it has sufficient program clinical supervisors to support the Foundation Application Component found in COAMFTE Standard, Key Element III-C.
- Evidence of submission of substantive change(s) notifying COAMFTE of the recent number of core faculty changes.
- Evidence that program clinical supervisors meet the qualifications in Key Element II-B, including a list of all program clinical supervisors and evidence of each supervisor's qualifications.
- Evidence that program clinical supervisors are vetted and evidence that they satisfy the supervision hours requirement found in Key Element III-C.

STANDARD III: CURRICULUM

Key Element III-A: Curriculum Alignment and Monitoring

The program must provide descriptions of:

- *How the curriculum and practice components support the program attainment of student learning outcomes and aligns with the COAMFTE Developmental Competency Components.*
- *Logical sequencing of the curriculum and practice components.*
- *Processes and procedures used to monitor and ensure student progress and completion of requirements in the curriculum and practice components.*
- *Governance processes and procedures for designing, approving, implementing, reviewing, and changing the curriculum*

Commission's Response:

The program does not meet the requirements of this Key Element. The program described processes that assess student clinical readiness before they enter Practicum. The program pointed to the curriculum alignment and sequencing, the monitoring of students, and the governance components of the program as they were described in the program's Self-Study submitted under version 12.0 Standards in 2018/2019. The program did not demonstrate how it follows procedures for monitoring and ensuring student progress during the Foundational Practice Component as required in the version 12.5 Standards.

The program must provide:

- Evidence of how the Practicum Team monitors and ensures student progress toward the achievement of the program's clinical completion/graduation requirements throughout the clinical practice components.
- Evidence of its tracking to monitor student progress according to the COAMFTE glossary definition of "observable hours" and "case report" that aligns with the required supervision needed to support the clinical training.
- Evidence that the program has implemented the processes and procedures used to monitor and ensure student progress and completion of requirements in the practice components within the program's advertised credits and time to complete the program.

Key Element III-C: Foundational and Advanced Application Components

The program must demonstrate it offers an application component with appropriate placement in the curriculum, duration, focus, and intensity consistent with the program's mission, goals, and student learning outcomes.

Foundational Practice Component

Master's degree programs and post-degree programs that teach the foundational curriculum must offer the foundational practice component (practicum and/or internship) with the following requirements:

- *Direct clinical contact hours: Students must acquire a minimum of 300 direct clinical contact hours with individuals, couples, families, or other systems, at least 100 of which must be relational hours that occur over a minimum of twelve months of clinical practice.*
    - *Programs including teletherapy for required direct clinical contact hours must have policies and procedures in place to support student teletherapy practice and its MFT relational/systemic supervision by program clinical supervisors including attention to applicable legal and ethical requirements and current/emerging professional guidelines.*
- *MFT relational/systemic supervision: Students must receive at least 100 hours of MFT relational/systemic supervision from a program clinical supervisor on a regular and consistent basis while seeing clients. When the supervision schedule is interrupted for any reason, the program must have a plan to assure student access to supervisory support. MFT relational/systemic supervision can be individual MFT relational/systemic supervision (one supervisor with one or two supervisees) or group MFT relational/systemic supervision (one supervisor and eight or fewer students) and must include a minimum of 50 hours of MFT relational/systemic supervision utilizing observable data.*
- *Published procedures and agreements with practice sites: Programs must have formal agreements in place that outline the responsibilities of the institution, practice sites and students, and policy in place for managing any difficulties with sites, program clinical supervisors, or students.*

Commission's Response:

The program does not meet the requirements of this Key Element. The program provided information of the direct clinical hours requirements. The program explained that the MFT relational/systemic supervision requirements occur with the site supervisor ("primary supervisor") but did not demonstrate how "primary supervisors" have an MFT identity and MFT supervision training information/credentials. The program also did not provide a process for verifying that the site supervisors meet the requirements to be a program clinical supervisor. The program responses provided the program Memorandum of Agreement (MOA), which outlines the responsibilities of the

institution and the affiliate site. The program response provided the supervisor addendum page, which outlines the responsibilities of the site supervisor.

The program must provide:

- Evidence of contracts or MOAs with training sites that include and clearly address 1) the role of program clinical supervision, 2) required supervision hours that the program must provide, 3) the students' responsibilities, 4) the program's responsibilities, and 5) the site's responsibilities.
- Evidence that each program clinical supervisor, both site supervisor (primary supervisor) and secondary supervisor, meet both the MFT professional identity and MFT relational/systemic supervision qualifications and requirements.

Key Element III-F: Curriculum/Practice Alignment with Communities of Interest

The program demonstrates that it considers the needs and expectations of identified communities of interest in developing and revising its curriculum and application component.

Commission's Response:

The program does not meet the requirements of this Key Element. The program indicated that student feedback is received via the MFT advisory board meeting and via email correspondence. The program response provided evidence of implementation of changes based on feedback to support student understanding of the curriculum and application components.

The program must provide:

- Evidence of the process for considering feedback in the development of and revisions to its curriculum and application components.
- Evidence of the process for considering Communities of Interest feedback in developing and revising the Foundational Application Component found in Key Element III-C.

STANDARD IV: PROGRAM ACHIEVEMENT AND IMPROVEMENT

Key Element IV-D: Communication with Communities of Interest

The program demonstrates that it communicates results of assessment data compiled according to the program's assessment plan (outlined in Standard I) and any resulting program changes to relevant communities of interest.

Commission's Response:

The program does not meet the requirements of this Key Element.

The program must provide:

- Evidence that the results of assessment data compiled according to the program's assessment plan (outlined in Standard I) and any resulting program changes are communicated to relevant Communities of Interest.

Preparation for the Focused Site Visit:

The Accreditation staff will contact the program regarding the site visit dates, agenda and logistics for a hybrid site visit. To prepare for the focused site visit, the program is required to:

- Provide updated conflict of interest forms and notification to the Accreditation Office prior to the selection of the team of any existing conflicts of interest with potential Site Visitors by February 1, 2024.
- Give notice from the Program Director to the faculty, administrators, students, and all others who will participate in the site visit of the nature and purpose of the site visit and an explanation of their involvement in the process.
- Provide all documents requested by the Site Visit Team prior to and during the visit.

Please feel free to contact the Accreditation Office by e-mail at coa@aamft.org or by phone at (703) 253-0448 if you have further questions or if you would like any additional information.

Sincerely,

David VanDyke, PhD
2023 COAMFTE Chair

Jill Fogolin
Director of Accreditation