

# PEPPERDINE UNIVERSITY

Graduate School of Education and Psychology

## ***LMFT/LPCC Handbook 2014-2015***

**Master of Arts in Clinical Psychology  
with an Emphasis in Marriage and Family Therapy  
(MACLP Degree)**

**Evening Format Program**

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# Pepperdine University

*GRADUATE SCHOOL OF EDUCATION AND PSYCHOLOGY*

Master of Arts in Clinical Psychology  
with an Emphasis in Marriage and Family Therapy  
(MACLP Degree or LMFT/LPCC Program)

## LMFT/LPCC Handbook

### INTRODUCTION

Welcome to Pepperdine and to the Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy (MACLP) degree program, also known as the LMFT/LPCC Program. Here you will have an opportunity to learn clinical psychology, marriage and family therapy and clinical counseling. With the MACLP degree, and 3,000 hours of approved supervised clinical experience, you will be eligible to sit for the license exam to practice independently as a **Licensed Marriage and Family Therapist (LMFT)** and/or a **Licensed Professional Clinical Counselor (LPCC)** in California.

#### **What Do LMFTs Do?**

Marriage and Family Therapists are mental health practitioners who are specifically trained to help individuals, couples and families improve and maintain healthy relationships. With the LMFT license, you can help children, adolescents and adults with a variety of problems. You can treat individuals, couples, families, groups and larger systems; work in private practice by yourself or with a group; work in community clinics, residential treatment centers and hospitals or you can consult, develop and manage programs. As an LMFT, you will be a psychotherapist by law and may be paid for your services directly.

#### **Licensed Professional Clinical Counselors (LPCC) and the MACLP Program**

In October of 2009, Governor Schwarzenegger signed California legislation creating another psychotherapy profession in this state – Licensed Professional Clinical Counselor (California is the last state in the nation to approve this professional category). The bill went into effect on January 1, 2010 and is regulated by the Board of Behavioral Sciences (BBS). According to the legislation, “Professional clinical counseling” means the application of counseling interventions and psychotherapeutic techniques to identify and remediate cognitive, mental, and emotional issues, including personal growth, adjustment to disability, crisis intervention and psychosocial and environmental problems. Professional clinical counseling includes conducting assessments for the purpose of establishing counseling goals and objectives to empower individuals to deal adequately with life situations, reduce stress, experience growth,

change behavior and make well-informed rational decisions". [Business and Professions Code (BPC) 4999.20].

The legislation suggests that the scope of practice may permit greater individually-oriented mental health practices as well as specialized qualifications as career development counselors, rehabilitation counselors, art and dance therapists, couple and family counselors, etc. There may also be the promise of greater inter-state portability with this license.

As the Pepperdine GSEP Administration gathers more clarity about this new license, its full requirements and the advantages to pursuing the LPCC degree, we will keep all students informed via the GSEP website, email blasts and community meetings.

**Important: As of August 1, 2012, Pepperdine University's MACLP Program enables students to simultaneously satisfy the curriculum requirements for both the LMFT and LPCC professional licenses in the State of California.**

**In addition, the specialized training in couple and family counseling will permit LPCC's to provide family counseling services.**

### **The MACLP Program at Pepperdine**

In the MACLP program, you will learn how to use a variety of psychotherapeutic and counseling theories in the assessment, diagnosis and treatment of individuals and their relationships. You will also learn models of individual and family therapy including, but not limited to, psychodynamic, object-relations, humanistic, cognitive-behavioral, strategic, structural, narrative, solution-focused models and models emphasizing recovery-oriented mental healthcare. Courses will be didactic, experiential and practical, including both theory and technique. In your three-term clinical practicum Traineeship, you will see clients under the supervision of licensed professionals at approved sites while concurrently enrolled in a clinical practicum class (PSY 662). The clinical site experience, in conjunction with the clinical practicum class, provides the opportunity to integrate theory and therapy skills and earn hours towards the LMFT license. **Note: For students intending to qualify for the LPCC license as well, practicum hours earned as a graduate student satisfy Pepperdine's and the BBS' requirements for graduation but do not apply to the 3,000 hour requirement . Hours fulfilling LPCC pre-license requirement can only be accrued after graduation.**

## **THE LMFT/LPCC HANDBOOK**

The **LMFT/LPCC** Handbook contains the policies and procedures for the MACLP degree program and is a contract for your performance in the program. It will also guide you through the academic and experiential requirements for the MFT license and will address questions you may have about the exam process. **READ THIS HANDBOOK THOROUGHLY** and become familiar with its contents.

In addition, please read these publications that contain useful information for your success in the graduate program:

1. The GSEP Catalog for your year of entry or transfer to the MACLP Program (available on the Pepperdine website);
2. *Psychology Division Policies & Procedures* handbook, distributed at New Student Orientation.

3. *Focus on Clinical Training*, a newsletter published by the Clinical Training and Professional Development Department (found online at <http://gsep.pepperdine.edu/psychology/professional-development-workshops/>).
4. *Laws and Regulations Relating to the Practice of Marriage and Family Therapy*, published by the Board of Behavioral Sciences (see page 5).
5. *CAMFT Code of Ethics – Part I (2010)*.

### **Program Administration**

The MACLP Program is administered by the MACLP Committee. This committee is currently chaired by the MACLP Evening Format Director and consists of faculty, the Directors of the Irvine Graduate Campus and Encino Graduate Campus Community Counseling Centers, the clinical training staff and program administrators. The Associate Dean of Psychology sits *ex officio*.

### **Where Do Program Requirements Originate?**

Some of the requirements for your MACLP degree have been designed by Pepperdine Graduate School of Education and Psychology; others originate in state law. The Board of Behavioral Sciences (BBS), a division of the California Department of Consumer Affairs, regulates the LMFT and LPCC licenses. The Board provides forms, verifies applicants' educational and clinical experiences, administers the licensing exams and issues the LMFT and LPCC license.

### **MACLP Program Accreditation Status**

Pepperdine University is accredited by the Western Association of Schools and Colleges (WASC), the regional accrediting agency for higher education. The Pepperdine PsyD program is accredited by the American Psychological Association; APA does not accredit master's degrees. The MACLP Program is not accredited by AAMFT through its Commission on Accreditation of Marriage and Family Therapy Education (COAMFTE).

## **LEGAL NOTIFICATION**

Applicants seeking the LMFT or the LPCC license must graduate with a *qualifying degree* that has been approved by the BBS. At Pepperdine, that program is the MACLP degree. **We are required by law to notify you that:**

The Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy (MACLP) degree is designed to meet the education requirements of Sections 4980.36 of the Business and Professions Code of the State of California, leading to licensure as a Licensed Marriage and Family Therapist. In addition, the MACLP degree is designed to meet the education requirements of Sections 4999.33, 34, 36 of the Business and Professions Code of the State of California for licensure as a Licensed Professional Clinical Counselor.

Please note: The LMFT/LPCC Handbook is designed to supplement the information distributed by the BBS. As licensing requirements change, academic requirements follow suit.



Pepperdine makes every effort to inform students of changes that impact their programs. However, it is ultimately the student's responsibility to understand the effects of legal and regulatory changes on license eligibility as well as to keep original BBS and Practicum documents safe and secure after graduation (to stay informed, join CAMFT - see page 7).

## GENERAL REQUIREMENTS FOR LICENSURE

To obtain licensure as an LMFT or an LPCC, applicants must fulfill specific educational and experiential requirements, in addition to passing written exams. In general, applicants must have completed an appropriate graduate degree and 3,000 hours of experience under the direct supervision of qualified supervisors. To qualify for licensure as an LMFT up to 1,300 hours may be completed while enrolled in the master's program. All 3,000 hours must be completed in the six years immediately preceding the filing date for the exam, although up to 500 hours gained during practicum are exempt from this time limit (and are secure to be used toward licensure). As stated previously, to qualify for licensure as an LPCC, all 3,000 hours of experience must be earned after graduation with the master's degree.

Applicants are eligible to take the written exams when all academic and experiential requirements have been completed. In order for hours to be counted as supervised experience, students in master's programs must comply with the specifications of their educational institutions for appropriate experience. To earn ANY hours in private practice, one must have already graduated and registered with the BBS as an MFT Intern or an LPCC Intern and have received an Intern Registration Number from the Board (the **LMFT/LPCC Handbook** provides a full discussion of these and other requirements).

### Questions about this Document: Resources

The LMFT/LPCC Handbook was written for the specific purpose of providing information about the LMFT/LPCC program. We are happy to answer questions, but we have a favor to ask:

**PLEASE READ THIS HANDBOOK BEFORE YOU CONTACT US!**

### M.A. Clinical Training and Professional Development (CTPD) Staff

*Your first resource!* - **Kathleen Wenger, Manager of Clinical Training and Professional Development**, oversees the clinical training for the MACLP program and professional development for both the MAP and the MACLP program. She also plans, develops and implements special services and events for students such as the bi-weekly E newsletter, Clinical Connections and alumni private practice tours. Her office is at the Irvine Graduate Campus.

**Rebecca Reed** is the CTPD Coordinator for students at the West Los Angeles Graduate Campus and **Alice Richardson** is the CTPD Coordinator for students at the Encino Graduate Campus. Kathleen, Rebecca and Alice provide program assistance to the MACLP Program Directors and can answer questions about practicum, counting hours, supervision, practicum sites, obtaining an MFT Intern number, and much, much more. They conduct new LMFT/LPCC student meetings, meetings to help students prepare for practicum, and meetings to assist prospective graduates in registering for their intern numbers; in addition, they organize practicum fairs and other MACLP student events as well as professional development events.

<b>Kathleen Wenger</b>	(Irvine Grad. Campus) (949) 223-2580	<a href="mailto:kathleen.wenger@pepperdine.edu">kathleen.wenger@pepperdine.edu</a>
<b>Rebecca Reed</b>	(WLA Grad. Campus) (310) 568-5776	<a href="mailto:rebecca.reed@pepperdine.edu">rebecca.reed@pepperdine.edu</a>
<b>Alice Richardson</b>	(SFV Grad. Campus) (818) 501-1619	<a href="mailto:alice.richardson@pepperdine.edu">alice.richardson@pepperdine.edu</a>

Note: For the sake of simplicity, Kathleen, Rebecca and Alice are referred to as “Clinical Training Staff.”

## **Program Administrators**

The MACLP Program has *three* Program Administrators: **Deanna Lazaro** (Admissions Manager - Psychology), **Tinnie Taylor** (Senior Academic Advisor - Psychology) and **Marissa Spruiell**, (Academic Advisor – Psychology). Deanna works with prospective students and handles the initial transcript evaluation for course waivers and transfers. She conducts information meetings for prospective students and assists the MFT Committee faculty regarding admissions to the master’s programs. Tinnie and ~~Bernadette~~ **Marissa** work with enrolled students and handles questions about classes, enrollment, registration, add/drop, challenge exams, enrolled student course waivers and other academic matters, including transfers between the MAP and MACLP programs. Tinnie also has office hours at the Irvine Graduate Campus, usually on Wednesdays and at the Encino Graduate Campus, usually on Mondays. You may contact either of them by phone or email:

Deanna Lazaro	(310) 568-5777	<a href="mailto:deanna.lazaro@pepperdine.edu">deanna.lazaro@pepperdine.edu</a>
Tinnie Taylor	(310) 568-5618	<a href="mailto:tinnie.taylor@pepperdine.edu">tinnie.taylor@pepperdine.edu</a>
Marissa Spruiell	(310) 568-5503	<a href="mailto:marissa.spruiell@pepperdine.edu">marissa.spruiell@pepperdine.edu</a>

*Note: For questions about Program Certifications (not transcripts) please contact Rebecca Reed. For questions about academic verifications (not transcripts), please contact Tinnie Taylor or Marissa Spruiell. For questions about transcripts, please call the Malibu Registrar’s Office (310) 506-7999.*

## **Program Director**

The Clinical Training/Professional Development staff and Program Administrators work directly with **Duncan Wigg, PhD**, MACLP Program Evening Format Director. If further consultation is needed, you may reach him at (949) 223-2522, or [duncan.wigg@pepperdine.edu](mailto:duncan.wigg@pepperdine.edu)

## **Deviation from Policy**

Even if they’d like to, the friendly staff of the BBS has no discretionary authority to deviate from the statutes and regulations governing the LMFT/LPCC license. Therefore, they can make no exceptions to LMFT or LPCC requirements. We have a bit more flexibility at Pepperdine, but would like to request that you follow the policies and procedures for successful completion of your degree program. We hold firmly to the MACLP clinical training procedures as these policies adhere to state regulations and have refined our program over time to ensure, to the best of our ability, that our MACLP students receive the most meaningful practicum experience possible.

## **Legal and Professional Boards and Associations**

## Statutes and Regulations

As therapists licensed to practice independently, LMFTs and LPCCs must know the legal parameters of their profession. **Statutes** typically originate with the legislators or their lobbyists and go through the standard legislative channels. The legal code most relevant to the LMFT and LPCC license is the Business and Professions Code. **Regulations** carry out the law and, in the case of the LMFT and LPCC licenses, are written by the Board of Behavioral Sciences and adopted after public hearings. The Board of Behavioral Sciences issues the “Laws and Regulations Relating to the Practice of Professional Clinical Counseling, Marriage and Family Therapy, Licensed Clinical Social Work, and Licensed Educational Psychology.” Instructions on how to obtain the laws and regulations are distributed to students enrolled in PSY 623, *Ethics and Law for Mental Health Professionals*.

## Board of Behavioral Sciences (BBS)

The Board of Behavioral Sciences (BBS) is a group of licensed professionals and members of the public who are charged by the Department of Consumer Affairs to protect the consumer by carrying out the statutes and regulations which assure minimum standards for education and training as well as ethical practice by the professionals under its jurisdiction. Members of the Board are appointed by the governor to represent the licenses that it regulates: Licensed Marriage and Family Therapists (LMFTs), Licensed Clinical Social Workers (LCSWs), Licensed Educational Psychologists (LEPs), and Licensed Professional Clinical Counselors (LPCCs). Two public members also serve on the Board. (For more Board history visit their website, [www.bbs.ca.gov](http://www.bbs.ca.gov)).

The Executive Officer of the BBS assists the Board in carrying out its motions, as well as overseeing the evaluative and research functions of the license analysts (BBS staff members who determine eligibility for the various licenses and registered positions). Board meetings are held in both Northern and Southern California and are attended regularly by a few hardy souls from the academic community as well as by members of CAMFT, AAMFT and other organizations. We encourage you to attend a meeting—you’ll learn about the legislative body that oversees your professional activities and you may even have an opportunity to influence the direction of the LMFT and/or LPCC profession through your testimony.

The BBS’s voicemail system handles many questions. For recorded messages, call (916) 574-7830. The board may also be reached through e-mail at [BBSWebMaster@bbs.ca.gov](mailto:BBSWebMaster@bbs.ca.gov) or on its homepage [www.bbs.ca.gov](http://www.bbs.ca.gov) **BBS forms** are available through the BBS homepage’s forms and publications link, although you will receive most of what you need from the Clinical Training Coordinators when you go through the preparing for practicum and information meetings.

There are TWO state professional organizations that licensed LMFTs frequently join. One is CAMFT, the *California Association of Marriage and Family Therapists*, a free-standing organization that claims a membership of about 29,000 combined licensed and pre-licensed MFTs and functions more or less as a “professional union” for LMFTs in the state. AAMFT-CA, the state division of the *American Association for Marriage and Family Therapy*, is smaller but is nationally affiliated.

The professional advocacy group for LPCC’s in California is the California Association for Licensed Professional Clinical Counselors (CALPCC). They can be contacted at [www.calpcc.org](http://www.calpcc.org). The national organization for professional counselors is the American Counseling Association (ACA) which has been established since 1952. They can be contacted at [www.counseling.org](http://www.counseling.org).

Each of these organizations offers student-members the opportunity to learn about the field of marriage and family therapy and professional clinical counseling and to receive certain professional benefits. CAMFT, AAMFT and CALPCC offer impressive annual conferences and have an active interest in the training and professional development of their members.

### **The California Association of Marriage and Family Therapists (CAMFT)**

CAMFT has been a long-standing advocate for LMFTs in California, working tirelessly with legislators and with the BBS to ensure professional parity for LMFTs. We highly recommend that you join CAMFT now, as a pre-licensed member. You will receive CAMFT's bi-monthly magazine, ***The Therapist***, the pages of which are full of information about such topics as the latest BBS actions, new statutes and regulations and their effects on LMFTs, ethical and practical issues, insurance information, workshops on professional issues and exam preparation, a classified section, information on disciplinary actions against licensed and pre-licensed practitioners, job listings and much, much more. CAMFT members get an added bonus—the advice of CAMFT's legal counsel. If you ever have legal or ethical concerns regarding your clinical work as a student/intern or a licensed MFT, CAMFT legal staff is available for consultation. To be able to speak with them, however, you'll need to be a CAMFT member.

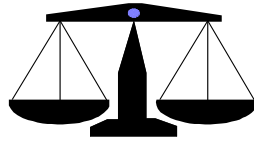
CAMFT publishes a two-part pamphlet on professional ethics for LMFTs that is required reading for students in PSY 623, *Ethics and Law for Mental Health Professionals*. Students enrolled in PSY 623 will need to acquire this free pamphlet through CAMFT.

While you're in school, we will inform you of changes in BBS requirements. Once you graduate, however, it will be more difficult to stay informed. Joining CAMFT is an excellent way to learn about changes in the statutes or regulations that might affect your practice as both an intern and as a licensed LMFT. You may request an application for membership from CAMFT by calling and requesting an application packet or by using the application on CAMFT's homepage. You are a *Pre-licensed Member* and your current status is "Student enrolled in a degree program leading toward licensure." CAMFT's address is:

California Association of Marriage and Family Therapists  
7901 Raytheon Road  
San Diego, CA 92111-1606  
(858) 29-CAMFT (292-2638)  
<http://www.camft.org>

CAMFT has a number of local chapters that welcome student members. By affiliating with established professionals in your geographical area, you can develop valuable contacts and learn from those who are more experienced. For information on local chapters and their contact persons, check CAMFT's website, email or call CAMFT.

**IMPORTANT: Those who work in clinical settings should carry professional liability insurance – this includes student MFT and PCC Trainees, LMFT and LPCC Interns and licensed LMFTs and LPCCs!**



By joining CAMFT, you can purchase a policy at student rates. Contact CAMFT directly for information on insurance policies. Again, CAMFT's discounts are for its members (CAMFT and AAMFT-CA have joined forces to offer professional liability insurance as a group.)

### **The American Association for Marriage and Family Therapy (AAMFT)**

AAMFT is the *national* professional organization for marriage and family therapists, equivalent to the American Psychological Association for psychologists, except that it is multidisciplinary in membership. AAMFT puts on an excellent annual conference and provides its members with considerable information on the practice of marriage and family therapy as well as the research upon which it is based. AAMFT is also working to create parity for LMFTs with other mental health professionals on the national level, as well as to educate the public about the value of marriage and family therapy. *The Journal of Marital and Family Therapy* and its other publications are excellent; we encourage you to join this excellent organization for both professional benefits and for continuing knowledge about the practice of therapy.

Once you are a member of AAMFT, you are eligible to join AAMFT-CA. To request an application for AAMFT membership, write or call AAMFT at:

American Association for Marriage and Family Therapy 112 S. Alfred St. Alexandria, VA 22134 Tel: (703) 838-9808 Fax: (703) 838-9805 <b>1-800-66AAMFT</b> (Toll Free) Website: <a href="http://www.aamft.org">http://www.aamft.org</a>
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### **The California Association of Licensed Professional Clinical Counselors (CALPCC)**

As stated previously, Licensed Professional Clinical Counselors became a legal profession in California in 2010. Under the guidance of CALPCC, this relatively new profession in California is working hard to establish itself as a viable addition to other master's-level clinical profession. In theory, the professional status of LPCC's should have a broader scope of practice, comparable to other states. Again, there is the possibility of greater inter-state portability of this license.

CALPCC is a relatively new organization, and is striving to provide visibility and political viability of the profession in this state.

CALPCC is eager to encourage student membership and participation in the organization. Students and Interns can become members for \$30./year.

For further information, contact CALPCC at [calpcc.org](http://calpcc.org).

## QUESTIONS ABOUT LMFTs and LPCCs

### What's in a Name? - "Licensed Marriage and Family Therapist"

As used by family therapists, the term "family" is generic; it includes individuals, couples (unmarried, married or divorced), children, adolescents, siblings, single parents and children, adults and older parents, blended families, step-families or any social unit where there is a relationship by blood, marriage or domestic partnership.

Where does helping children fit in? To an MFT, it is understood that family therapy includes children. And if a child is presented as the troubled member of the family, it is understood that the parents, guardians or caretakers will be somehow involved in the assessment and treatment of the child's problems. In fact, many family therapists believe that the best way to help troubled children is to increase the competence of their parents. This is often best accomplished by seeing parents and children together, whenever possible.

Why "therapist"? Family therapists have an eclectic heritage that includes psychiatrists, psychologists, counselors, social workers, engineers and anthropologists. Because therapists work with clinical populations and are required to be trained in the assessment and diagnosis of mental disorders, it is appropriate that LMFTs refer to their work as therapy. LMFTs are defined in the California Evidence Code as "psychotherapists" and are governed by the same laws as psychologists and other mental health professionals in the state.

The Business and Professions Code applying to LMFT's states, "...the practice of marriage and family therapy shall mean that service performed with individuals, couples or groups wherein interpersonal relationships are examined for the purpose of achieving more adequate, satisfying and productive marriage and family adjustments." While the regulations emphasize the improvement of relationships, the actual practice of Marriage and Family Therapy has been broadly defined, permitting any number of emotional and psychological difficulties to be approached from a relational perspective.

### What's in a Name? – "Licensed Professional Clinical Counselor"

It has proven to be a most challenging task to differentiate the clinical practices between LMFTs and LPCC's. Some clarity can be achieved by describing what clinical practices LPCC's are not permitted to do under current regulations. According to Business and Professions Code applicable to LPCC's, "Professional clinical counseling' does not include the assessment or treatment of couples or families unless the professional clinical counselor has completed...additional training and education, beyond the minimum training and education required for licensure." (**Note: Current Pepperdine MACLP education provides the additional education qualifying for this specialization**). Furthermore, the Business and Professions Code states that "professional counseling does not include the provision of clinical

social work services". In addition, the administration of assessment services, "...shall not include the use of projective techniques in the assessment of personality, individually administered intelligence tests, neuropsychological testing, or utilization of a battery of three or more tests to determine the presence of psychosis, dementia, amnesia, cognitive impairment, or criminal behavior" – apparently this is the domain of clinical psychology".

### Are LMFTs or LPCC's Psychologists?

Only those who have passed the licensing exam for psychology may call themselves psychologists. LMFTs and LPCCs may NOT call themselves "psychologists," may not refer to their services in any form as "psychological," nor advertise in any medium holding themselves out to be "psychologists."

You may refer to your practice as "psychotherapy" or "counseling" and refer to yourself as a "psychotherapist" or a "counselor" on business cards and written materials as long as you also write out the full name of your license status – e.g. Marriage and Family Therapist Trainee, Intern or Therapist or Professional Clinical Counselor Trainee, Intern - at the same time. (See also the discussion about the use of psychological tests, page 17). The Board of Behavioral Science's main interest is the protection of the consumer, and in this case, the consumer must not be confused into thinking that the LMFT or the LPCC holds a different license.

### Becoming Licensed in another State

As of 2010, all 50 states currently regulate LMFTs and LPCCs, either by license or certification. Requirements are not identical across states, but there are some similar requirements for education and training.

Historically, Pepperdine University LMFT graduates have been very successful in acquiring licensure in other states. MACLP program administrators will be glad to assist those who desire to seek out-of-state licensure. Due to the fact that we are only beginning to provide curriculum satisfying LPCC educational requirements, we have limited familiarity regarding other states' recognition of Pepperdine's curriculum for LPCCs.

To find out about out-of-state requirements for licensure or certification, contact the appropriate state licensing board for the requirements to practice at the master's level. CAMFT and AAMFT list the various state regulatory agency contact information on their websites. Although you will need to complete the required forms on your own, we will do our best to help you in your efforts.

### SUMMARY AND ACTION ITEMS

Review of the terms:

- The title of my **profession** is Marriage and Family Therapy and/or Professional Clinical Counselor.
- The title of my **license** is Licensed Marriage and Family Therapist and/or Licensed Professional Clinical Counselor.
- The title of my **degree** is Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy.

Have I done the following?

1. \_\_\_\_ Read the remainder of the **MFT Handbook**.
2. \_\_\_\_ Read the **GSEP Catalog**.
2. \_\_\_\_ Read the Psychology Division "**Policies & Procedures**"

## JOB DESCRIPTIONS

### MFT/PCC Trainee, MFT/PCC Intern, Licensed MFT & PCC

The following definitions are taken from the California Business and Professions Code specifying the legal parameters and scope of practice, both before and after licensure as an LMFT (see Chapter 13, Sections 4980.02, 4980.03, 4980.43 and 4980.44). The legal parameters and scope both before and after licensure as an LPCC are designated in Sections 4999.12-51.

#### “MFT Trainee” & “PCC Trainee”

An unlicensed person who is currently enrolled in a state-approved graduate degree program, has completed at least 12 semester units of coursework in that program, fulfilled practicum course prerequisites and who performs MFT and PCC services under supervision and who has a written “4-Way Agreement” on file in the Clinical Training Department. (See page 37 for details about gaining hours.)

#### *What this means:*

- You are still in school and have completed 12 units of coursework at Pepperdine.
- You have signed the “Acknowledgment of BBS Requirements.”
- You may NOT gain any hours in private practice, *even as a volunteer* (see below).
- You may be paid a salary by a non-profit or charitable corporation, school, college or university, government entity or licensed health facility but you may NOT be paid directly by your clients.
- You may also work in additional settings in the manner defined by law and as defined in *Business and Professions Code*:
  - A. Lawfully and regularly provides mental health counseling or psychotherapy.
  - B. Provides oversight to ensure that the trainee’s work at the setting meets the experience and supervision requirements set forth in this chapter and is within the scope of practice for the professions.
  - C. Is not a private practice owned by a licensed marriage and family therapist, a licensed professional clinical counselor, a licensed psychologist, a licensed clinical social worker, a licensed physician and surgeon, or a professional corporation of any of those licensed professions.
- You must inform your clients before starting therapy that you are unlicensed and are working under the supervision of (your supervisor’s name).
- As an MFT Trainee, you may count up to 1,300 hours of pre-degree experience. As a PCC Trainee you must complete at least 280 hours of face-to-face counseling with clients to graduate, but no counseling hours gained as a Trainee count towards licensure.
- As an MFT Trainee, you may count up to 750 hours of counseling and supervision + 250 hours of workshops and seminars + 100 hours of personal therapy (1 hour of personal therapy counts as 3 hours of credit) = 1,300 possible hours towards licensure.



- **The office of Clinical Training must approve the practicum experience for every MACLP student.**

### **No Private Practice for Trainees?**

The regulations that restrict MFT and PCC Trainees from working in private practice were adopted to protect Trainees. It is believed that a private practice is vulnerable to economic and other pressures that a public, non-profit agency is not. Although it is an obvious generalization, private practitioners are responsible only to themselves and have the freedom to move about more or less at will. The Board is concerned that a Trainee in private practice could be left “high and dry” if the supervisor were to suddenly abandon his or her office. In addition, the Board is concerned that the economic pressures upon a private, for-profit venture might be placed upon the Trainee, who would then be required to perform duties beyond those appropriate for his or her level of education and ability. LMFT and LPCC Interns, with their M.A. degrees and practicum experience, are thought to be more knowledgeable about the possibility of exploitation.

### **“MFT and PCC Intern”**

An unlicensed person, who has earned a qualifying masters or doctoral degree, is registered with the BBS and performs MFT or PCC services under supervision.

#### *What this means:*

- You have graduated with your M.A. in Clinical Psychology (MACLP degree).
- You have registered with the BBS as an **MFT or PCC Intern** (see page 52 for instructions).
- You may work, *under supervision*, either in private practice or in a non-profit venue.
- You may be paid by your supervisor or employer, but NOT paid directly by your clients.
- You must inform your clients before starting therapy that you are “unlicensed and are working under the supervision of (your supervisor’s name).”
- You must earn at least 1,700 hours post-M.A. as an MFT Intern and at least 3,000 hours post-degree as a PCC Intern.
- While working on intern hours, you must renew your registration annually. Five renewals are allowed, for a total of six years in which to gain hours as an Intern.
- You must furnish your new supervisor with your previous supervisor’s name and address.

***Important: Upon graduation, you may register with the BBS as either a MFT Intern or PCC Intern or both if you have satisfied the practicum requirements of the respective professions.***

### **“Licensed Marriage and Family Therapist” (LMFT) or “Licensed Professional Clinical Counselor (LPCC)**

#### *.What it means to be a licensed LMFT or LPCC:*

- You have fulfilled all of the academic and experiential requirements for the license, and have passed all required examinations for Licensure.
- You may work independently in private practice.
- You may get paid directly by your clients or their health care providers.
- You may call yourself a Licensed Marriage and Family Therapist or a Licensed Professional Clinical Counselor.
- After two years of practice, you may begin to supervise your own Trainees and Interns, following the requirements for supervisors in effect at the time.

- You are eligible to join CAMFT and AAMFT as full Clinical Members. As an LPCC you are eligible to join CALPCC as a full Clinical Member.

## **SUMMARY AND ACTION ITEMS**

### **MFT or PCC TRAINEE:**

- still in school
- no private practice
- must be supervised

### **REGISTERED MFT or PCC INTERN:**

- completed qualifying MA degree
- can work in private practice
- must be supervised

### **LICENSED LMFT or LPCC:**

- completed M.A. + 3,000 hours + passed licensing exams
- can work independently

1. \_\_\_ Read, sign and file "Acknowledgment of BBS Requirements" with your CTC staff.
2. \_\_\_ Follow your academic degree program.

## THE MACLP CURRICULUM: 60-66 UNITS

### Program Levels

The MACLP curriculum has **two** levels: **foundation** and **core**.

***Effective Fall of 2014, students who have an undergraduate degree in psychology or a closely-related field, will not have to take foundation courses.***

Since many of our students have not had academic backgrounds in psychology, we offer courses at the graduate level that are usually part of an undergraduate degree in Psychology. These *foundation courses* prepare you for advanced study and should be taken first in your program. However, you are encouraged to enroll in a *core* course, PSY 606 *Interpersonal Skills and Group Therapy*, early in your course of study. The experiential nature of this course can provide a good introduction to your graduate program.

Some students delay the inevitable by waiting until the end of their programs to take courses that they think will be difficult (perhaps they are saving the best for last!). Don't be tempted; it is wise to take the foundation courses first as they will better prepare you for the core courses.

### Length of Time to Complete the Program

How long it takes to complete the master's degree depends on a variety of factors. Even with an undergraduate background in psychology, students rarely finish the required 60 units in fewer than two years. To complete all foundation, core, and practicum courses, a total of 66 units, will probably take more than two years.

The BBS doesn't care how long you take to complete your degree, but Pepperdine does: The GSEP Catalog gives a *seven-year limit* for finishing a master's degree. If you need an extension on this limit, please put your request in writing to Robert de Mayo, PhD, Associate Dean, Psychology.

### Continuous Enrollment and Leave of Absence

Students who temporarily drop out of school may find that degree requirements have changed during their absence. To keep curricular modifications to a minimum, it is a good idea to remain continuously enrolled until you graduate. This means that you must enroll in at least one course during each of the Fall and Spring semesters. (Enrollment in the Summer Sessions is optional, although students in practicum settings may need to take Practicum during the summer.) Students who are *absent for two or more years* must reapply to the program and comply with admissions and program requirements in effect at the time.

The above notwithstanding, we understand that choice and chance do not always create manageable situations. If there are circumstances in your life that require you to suspend your academic progress temporarily, please do not hesitate to contact us. We want you to succeed and will do our best to assist you in maintaining continuity in your program.

**IMPORTANT:** If you are going to take a temporary break from school, including the summer sessions, please call or email Senior Academic Advisor – Psychology, Tinnie Taylor, at (310) 568-5618. She needs to make sure that you receive the necessary paperwork for pre-registration upon your return.

## THE MACLP CURRICULUM: REQUIRED COURSES

### ***FOUNDATION LEVEL (eligible for waiver or transfer):***

PSY	TITLE	UNITS
657	Psychopathology	3
659	Principles and Theories of Learning	3

**MAXIMUM UNITS = 6**

(IMPORTANT: Foundation courses should be completed before core courses.)

### ***CORE CURRICULUM (eligible for transfer only):***

PSY	TITLE	UNITS	PREREQUISITES
600	Diagnosis and Treatment of Mental Health Disorders	3	657
603*	Assessment of Individuals, Couples and Families	3	626
606	Interpersonal Skills and Group Therapy	3	
612	Theories of Counseling and Psychotherapy	3	
622	Multicultural Counseling	3	
623	Ethics and Law for Mental Health Professionals	3	606, 612
624	Individual and Family Treatment of Substance Abuse	3	600, 606, 612
626	Research and Evaluation Methods for Mental Health Professionals	3	
627	Psychopharmacology for Mental Health Professionals	3	600, <del>656</del>
628	Human Sexuality and Intimacy	1	
637	Techniques of Counseling and Psychotherapy	3	600, 606, 612
639	Couple and Family Therapy I	3	600, 606, 612
640	Couple and Family Therapy II	3	639
642	Mental Health Systems, Practice and Advocacy	3	622, 639, 640 +1 semester 662
658	Individual, Couple & Family Development: A Life Cycle Approach	3	
661	Preparation for Practicum	2	600, 606, 612, 623
662	Clinical Practicum	2	600, 606, 612, 623, 637, 639, 661
662	Clinical Practicum	2	same as above + 662
662	Clinical Practicum	2	same as above + 662
668	Clinical Interventions with Children & Adolescents	3	658
669	Trauma in Diverse Populations	3	600
671	Career Development Theories and Techniques	3	

**MINIMUM UNITS = 60**

\*Although they are not prerequisites, PSY 600, 612 and 639 are useful courses to take before PSY 603.

## Prerequisites and Course Scheduling

Prerequisites represent the faculty's attempts to ensure student readiness for new course content. In planning your schedule, ***you must attend to prerequisites***. Attempts to enroll in a class without having taken its prerequisite will be blocked by the computer registration. ***(Please note that concurrent enrollment in a course and its prerequisite is not allowed.)***

## PREVIOUS COURSEWORK

If you have taken psychology courses *before* entering Pepperdine, you may be able to waive, transfer, or challenge a required course.

### Waiving a Course

If you have taken one or more courses at the undergraduate or graduate level that are equivalent to courses in the foundation level, you may be able to use them *in lieu of* foundation courses. (Note that you must still complete a minimum of **60** units to graduate). Courses used as waivers must be recent (taken within the past seven years), must have been earned at an accredited college or university and must have a grade of "B" or better on your transcript.

The curriculum sheet that you received at admission will inform you of any foundation courses that have been waived based on your previous coursework. If it is not clear whether or not a course is equivalent, you will be asked to provide supporting documentation such as syllabi, texts, exams, and class notes. Only foundation level courses can be waived; in the MACLP program these are: PSY 657 and 659.

### Transferring a Course

If you have previously taken a *graduate-level* course that is equivalent to either a foundation level or core course, you may petition to have that course transferred, rather than take the equivalent course at Pepperdine. Up to six (6) semester units may be transferred and/or challenged. (See discussion under "Total Unit Limits" below.) Courses eligible for transfer credit must be recent (taken within the past seven years), must have been earned at an accredited college or university and must have a grade of "B" or better on transcript.

If you believe that a previous graduate course is equivalent to an existing MACLP course, you may file a "Petition to Transfer Coursework" with the program administrator for admissions and provide supporting documentation as requested. A transferred course becomes part of your Pepperdine transcript and counts toward degree requirements. The grade recorded on the transcript will be "CR" for credit; letter grades are not awarded for transfers.

Again, whenever possible, verify with specific out-of-state licensing boards that a transferred course will be acceptable to them.

### Semester vs. Quarter Units

Schools offer courses in semester or quarter units, depending on contact hours and number of weeks of class. A semester is 15 weeks long and a quarter is 10 weeks long. The difference in course length means that the units differ in value: 5 quarter units = 3 semester units. Pepperdine

courses are offered in semester units. Courses that are used for waiver or transfer must not only be equivalent in content, but they must also have equivalent unit value.

### **Challenging a Course**

If previous coursework is unsuitable for waiver or transfer but you think that you know the subject matter well enough to take an exam, you might want to *challenge* the Pepperdine course in question. To challenge a course, file a petition with the Senior Academic Advisor - Psychology, Tinnie Taylor, who will forward it to the appropriate faculty. If the petition is approved and if the exam is passed, credit for that course ("CR") appears on the Pepperdine transcript. Please note that there must be evidence of prior study; challenge exams and course credits are NOT given for life experience.

### **Transfer/Challenge Limits**

Although you may waive as many of the foundation courses for which you are eligible, the number of units you may challenge and/or transfer is limited to six (6) units *total*. Limits on transfers and challenges function as a residency requirement, in which schools maintain control of the quality of most of the academic experience required for their degrees (accrediting bodies prefer this). Please refer to the Psychology Division's ***Policies and Procedures*** for more information.

### **Need Additional Units for the Degree?**

The MACLP degree must contain at least 60 units. Transferred/challenged courses (see above) count toward this total. If additional units are needed to fulfill the 60-unit requirement for graduation, students may enroll in seminars, electives or independent study. Check the course schedules or see Tinnie Taylor, Senior Academic Advisor - Psychology, for assistance.

## **THE MASTER OF ARTS IN PSYCHOLOGY (MAP DEGREE) AND THE MFT LICENSE**

### **MACLP Degree Needed for the LMFT and LPCC License**

Students in the **Master of Arts in Psychology (MAP)** program often plan to enter a doctoral program or work in the field when they graduate. If these plans don't work out, MAP program graduates may decide to pursue the LMFT or LPCC license instead. Unfortunately, it is not possible to add MACLP courses to the MAP degree. California law specifies that all coursework must be taken *within a single degree program* that is approved by the BBS and meets state regulation for licensure. The MAP degree is not acceptable for the LMFT or LPCC license.

### **MAP Program Graduates**

MAP graduates may *transfer up to 15 units of common coursework* toward the MACLP degree, as long as the MAP degree was awarded within the seven years preceding application to the MACLP program. (The common courses are PSY 600, 606, 612, 637 and 658.)

## MAP Student Transfers to the MACLP Program

Students in the Master of Arts in Psychology (MAP) program who wish to transfer to the MACLP program must file a formal request. The application will be evaluated by the MACLP Admissions Committee; admission is not guaranteed. Here is the procedure to follow:

1. Submit a "Change of Program Request," available from Tinnie Taylor, Senior Academic Advisor - Psychology. Include the fee.
2. Follow the admission procedures described on the form. (An updated personal statement describing the applicant's reasons for changing programs is required.)
3. Upon acceptance into the MACLP program, read the **LMFT/LPCC Handbook** in its entirety.
4. Complete and sign an "Acknowledgment of BBS Requirements." (See pages 10 and 12).
5. Follow the curriculum listed for the MACLP program, page 14. (See also the discussion of PSY 603, Assessment for Marriage and Family Therapists, below.)
6. Be sure NOT to graduate until you have completed all MACLP degree requirements. If you have already applied to graduate, notify the Manager of Records and enrollment at the West Los Angeles Campus that you have changed programs and wish to postpone graduation. **Once issued, a degree cannot be rescinded.**

## THE ASSESSMENT REQUIREMENT

### MAP Transfer Students DO take PSY 603

The instruments covered in PSY 601, *Assessment of Intelligence*, and PSY 602, *Personality Assessment*, focus on the individual, not the relationship. The emphasis of PSY 603 is on the assessment of *relationships*, although individual testing is covered as well. (See description that follows.) To avoid repetition of material already studied (and to save money), students who have already taken both PSY 601 and 602 may, with program approval and consent of the instructor, enroll in PSY 680, a one-unit Independent Study in "Assessment of Relationships." The student fulfills this course by attending the PSY 603 classes as required by the instructor and by completing required class assignments and exams. The combination of PSY 601, 602 and PSY 680 fulfills the requirement for PSY 603. For further information, please consult Tinnie Taylor.

### Can MFTs Conduct Psychological Testing?

This is a controversial and often misunderstood area involving arguments of restriction of trade, scope of practice, competence, and similar issues. Under the licensing act, an LMFT or LPCC may administer, score and interpret tests of *intelligence, aptitude, and personality* (traditionally referred to as "psychological tests") ONLY if each of the following conditions is met:

- The LMFT or LPCC has received adequate training in the instruments used for assessment and is competent in their use. (Competence is defined by general standards for the profession, based on education and supervised training.)
- The tests are used *for the purpose of assessment and treatment of the licensee's own clients*. MFTs cannot hire out their services to test people who are not their clients.
- The activity is **not** called psychological testing.

## CAREER AND PROFESSIONAL ISSUES

Do you have questions regarding your future as a professional and the opportunities that exist in professional practice? (Who doesn't?) Do you wonder how to work within the current health services environment? Where are the jobs for LMFTs and LPCCs. These and similar questions are addressed in **PSY 642, Mental Health Systems, Practice and Advocacy**.

The results of CAMFT's **2010 Member Practice Demographic Survey** available from CAMFT in the July/August 2010 issue of *The Therapist* lends empirical support for an optimistic view of practice patterns. Here is one important highlight: 20% of licensed therapists surveyed earned more than \$80,000 annually. Appendix II of this MFT Handbook and the July/August 2010 issue of *The Therapist* lists a sampling of findings from the CAMFT survey.

## CAREER DEVELOPMENT SERVICES AND RESOURCES FOR PSYCHOLOGY STUDENTS

The office of Career Development offers support services and resources to help students and alumni of the Graduate School of Education and Psychology (GSEP) explore career possibilities, develop skills for successful employment searches and secure full-time employment. The focus of the Career Development staff is on individual consultation and interactive workshops designed to provide students and alumni with the strategies necessary to market their skills in a competitive environment and establish themselves as competent professionals. Career services include career counseling and assessment, resume and curriculum vitae writing, job search tips, interview preparation, and employment listings on monstertrak.com. For an overview of services offered, please visit the Career Services Website at <http://gsep.careerservices@pepperdine.edu>., or call directly to (310) 568-5666.

## CONTINUATION IN THE PROGRAM

The MACLP program is designed to prepare students to become entry-level psychotherapists who are licensed as MFTs. The assessment, diagnosis and treatment of people in crisis or with ongoing problems require considerable knowledge and skill. But in addition to competence, the practice of psychotherapy (as well as BBS regulations!) requires the personal qualities of maturity, integrity, judgment, compassion and flexibility on the part of the therapist. Thus, there are two sets of criteria for continuation in the MACLP program: academic and behavioral.

### Grade Point Average

Students must maintain a 3.0 grade point average. If the G.P.A. falls below 3.0, the student has only one term to raise it to 3.0. Grades of "C" or lower will lead to a review of the student's academic record and possible remediation.

### Incomplete (I) and In Progress (IP)

Life's emergencies do not respect final exams; at times, they seem perversely drawn to the end of the term! A grade of "**Incomplete**" is a temporary grade that is given to a student who is passing the course and who, at the end of the term, cannot complete all course requirements due



to factors beyond their control. A grade of **“In Progress”** is used for students enrolled in PSY 662, Clinical Practicum, who cannot complete all course requirements by the end of the term. “Incompletes” are not to be used to “buy” extra time to bring up a low grade. **Please be aware that if it is not completed by the end of the following term, an “Incomplete” grade will automatically convert to an “F.”** If you are having difficulty in your academic program and/or personal life and cannot finish your coursework on time, please speak with your instructor. If you find that you must temporarily suspend your education, you may apply for a temporary withdrawal (Leave of Absence). In most cases, if you re-enroll within six months, your financial aid repayment schedule will not be affected. Call Financial Aid for details.

### **Academic/Grading Standards**

Many students feel that they **MUST** get an “A” in each course. For these students, an “A-” will not do and a grade of “B” or “B+” is considered “failing.” We wish to encourage you to do excellent work, to study very hard and to learn all that you can — the profession of marriage and family therapy is difficult and demands your level best. Please don’t let the pursuit of a letter grade become more important than the level of knowledge that it implies.

A grade of “A” should indicate exemplary accomplishment in a course. A grade of “B” should indicate satisfactory class work. A grade of “C” should indicate substandard work, and is to alert the student to deficiencies in academic performance. Plus and minus grades may be assigned for intermediate grade achievement.

### **Behavioral Standards**

The *GSEP Catalog* addresses nonacademic matters, thus:

In addition to meeting academic standards for graduation, students are expected to meet generally accepted behavioral criteria for a mental health professional. Relevant areas include following appropriate ethical-legal standards, demonstrating reasonable maturity in professional interpersonal contacts, and remaining relatively free of personal-emotional behaviors that could constitute a potential threat to the welfare of the public to be served. A faculty panel will review feedback from professors concerning individual students and initiate remedial interventions where deemed necessary. Whereas every attempt will be made to resolve problems, it is possible that these procedures could lead to dismissal from the program (*GSEP Catalog*, 2014-15, page 158).

### **Evaluation of Students’ Suitability to Become Therapists**

The BBS has given the educational institutions the responsibility to ensure that their graduates demonstrate personal characteristics and interpersonal skills appropriate to the practice of psychotherapy. Supervisors, agency directors and the BBS strongly request that the schools screen their students for obvious psychopathology, severe emotional immaturity or questionable ethics and they not send these students on to clinical sites.

Please note that on an ongoing basis or by request of the MACLP Program Director (either Daytime or Evening Format), faculty who teach MACLP students are asked to communicate with the MACLP Program Director and Clinical Training staff about any student whose behavior in or around class or practicum sites may lead them to question the student’s suitability to work with the public as a psychotherapist. Program and GSEP staff are also asked to provide their impressions of students based on their interactions with them.

Because it is the goal of the MACLP Program faculty and staff to maintain the integrity of the program, aspire to ensure the well-being of mental health consumers receiving services from their students and facilitate students' successful completion of their program, evaluations of student conduct and academic performance are taken very seriously. The MACLP Program Director, in concert with Clinical Training staff and/or faculty members, may require discussions with a student who has presented significant behavioral or academic concerns to the faculty and staff. These discussions may result in requirements of student rehabilitation to include faculty or peer-mentoring and specific evidence of rehabilitation in order for the student to continue in the program. There may also be requirements for ongoing monitoring of the student's rehabilitation to ensure the successful resolution of the problems.

The student may choose to concur with these requirements or decide that they do not agree with the decisions. If there is not consensus between the Program Director, staff or faculty and the student, the matter can be referred to the MACLP Faculty Panel.

### **MACLP Faculty Panel**

The MACLP Faculty Panel, a sub-committee of the MACLP Committee, will request information about the situation from faculty, staff, clinical supervisors and other professionals, where relevant. The student will also be invited to share his or her own experience. The Faculty Panel will assess the situation and make its recommendations to the Associate Dean and to the student. If it is decided that there is a problem that should be addressed, a variety of remediation plans are possible. In extreme cases of an ethical or legal violation, a student may be put on probation or dismissed from school.

**\*Note:** Information disclosed during the "group therapy" portion of **PSY 606, Interpersonal Skills and Group Therapy**, is *confidential*. Faculty who teach this course may not reveal this information to the MACLP Program, but are encouraged to discuss their concerns directly with the student.

### **Personal Therapy: Should You Become a Client?**

The BBS encourages those who apply for an LMFT or LPCC license to undergo their own personal therapy. You may accrue psychotherapy hours towards licensure, but your therapist must be licensed (i.e., not an LMFT or LPCC Intern or Psychological Assistant). Hours of therapy received either as a student trainee and/or registered intern are *triple-counted*, up to a 300-hour maximum. You can receive individual, couple, family and/or group therapy.

Pepperdine does not require its MACLP students to undergo personal therapy, but we solidly recommend it. Page 158 of the 2014-2015 GSEP Catalog states:

*The psychology faculty and administration recommend personal therapy for all students training to be psychotherapists since it is believed that personal therapy is a vital component of the training and growth of the psychotherapist, and that it is the professional responsibility of every therapist to identify, address and work through personal and relational issues which may have an impact on clinical interactions with future clients.*

Personal therapy may increase your chances of securing a practicum site when it comes time to find a site for practicum and/or your post-degree internship. There are some top-notch agencies that will *only* consider applicants of their trainee or intern positions who have already been in therapy or who are currently involved in psychotherapy. If you are planning on continued study in a doctoral program, or even if you are not, personal therapy may demonstrate your sensitivity to the issues of being a client in therapy.

The members of the Clinical Training staff have a list and of Pepperdine graduates who are licensed therapists and offering to see students at lower fees. Or, ask your fellow students or faculty for referrals. Just remember that your therapist cannot be your clinical supervisor - now, in the past, or in the future.

### **When to Receive Therapy**

To count personal therapy hours toward your 3,000 LMFT and/or LPCC hours, you must be enrolled in a qualifying degree program; in this case, the MACLP degree. You may enter therapy and count hours as soon as you are enrolled, but be aware that the hours will only count towards licensing if they fall within the six-year window of time preceding your application for licensure. Also, please be aware that the regulations specify that the trainee must be *enrolled* in the qualifying degree program for any hours to be eligible for evaluation. Thus, therapy received during a Leave of Absence would not count. [For additional details, please read the information under "Marriage and Family Therapist (or Professional Clinical Counselor) Psychotherapy Verification, page 46.)]

## **CLINICAL PRACTICUM EXPERIENCE**

In addition to earning a qualifying master's degree, applicants for the LMFT/LPCC license must learn how to do therapy. This training occurs when pre-licensed individuals, both trainees and interns, see clients and receive supervision on therapy performed with those clients. For LMFTs a complete list of requirements may be found in BPC Section 4980.36. For LPCCs, a complete list of requirements may be found in BPC Section 4999.30-64.

### **Collecting BBS LMFT Hours: Required and Allowed Activities**

*Throughout your 3,000 hours, including both pre-degree and post-degree experience: for a breakdown of hours, please refer to Appendix III, page 59. Note: Pay particular attention to "Changes to LMFT Experience Requirements effective January 1, 2012".*

### **Collecting BBS/LMFT Hours: Overview of the Process**

- You must take at least two years (104 weeks) to gain your hours; 52 weeks must occur post degree.
- You may credit no more than 40 hours of experience (except for "workshop hours) for any week. This includes categories: client contact, supervision, workshops, progress notes and personal therapy.
- For any week in which you wish to count experience (other than personal therapy), you must have at least one (1) hour of individual or two (2) hours of group supervision. *No supervision, no hours!*

- For every five (5) hours of client contact you gain as a trainee, you need either one hour of individual or two hours of group supervision. (As an intern, you may work ten client hours for the same amount of supervision). Note: see “How to Calculate Supervision Ratios” on page 48.
- During practicum, you must gain a minimum of 225 supervised hours of which 150 **must be** direct client contact hours. The 75 additional hours can be credited for direct client contact and/or client centered advocacy.
- Practicum class time is NOT counted as part of your supervised experience; it is counted as part of your 60 academic units.
- You may count up to 1,300 hours before graduation.
- After graduation you must gain at least 1,700 hours.
- All hours that you wish the board to evaluate for license requirements must have been earned within the six (6) years preceding the date you apply for the exam. (See “LMFT Clock,” page 51). However, the Board will evaluate up to 500 hours gained during practicum (excluding personal therapy), even if they were earned more than six years before filing for the exam.
- **LMFT/LPCC student Trainees can fulfill practicum requirements for training at sites only after Pepperdine GSEP, Office of Clinical Training and Professional Development, has approved the site and signed a 4-Way Agreement with the site.**

### Collecting BBS/LPCC Hours: Overview of the Process

The requirements for LPCC licensure are the same for LMFT licensure, ***therefore, for students interested in qualifying for both the LPCC license and the LMFT license, hours gained can be “double-counted”***, except for the following:

1. The 280 hours of PCC Traineeship do not count toward licensure, therefore
2. All 3,000 hours must be gained as an PCC Intern (post degree).
3. There is no credit for client centered advocacy for PCC Trainees
4. PCC Interns need to accrue at least 150 hours of clinical experience in a hospital or community mental health setting.

(See additional information on the BBS website regarding PCCI hours, [http://www.bbs.ca.gov/lpcc\\_program/](http://www.bbs.ca.gov/lpcc_program/))

### Clinical Practicum Experience: Pepperdine’s Legal Responsibility

Students are often curious about how soon they can begin to earn their 3,000 hours. For LMFT students, personal therapy may be started and counted as soon as the student has enrolled in the MACLP program, but for clinical hours to count, the LMFT/LPCC student must have Pepperdine’s *formal approval* of the supervised experience, as follows:

On and after **January 1, 1995**, all hours of experience gained as a trainee shall be coordinated between the school and the site where the hours are being accrued. **The school shall approve each site** and shall have a *written agreement* with each site that details each party’s responsibilities, including the methods by which supervision shall be provided. The agreement shall provide for regular process reports and evaluations of the student’s performance at the site.

— Section 4980.42 (b) of Business and Professions Code

For an LPCC Clinical Counselor Trainee, BPC 4999.34: “A clinical counselor trainee may be credited with pre-degree supervised practicum and field study experience completed in a setting that meets all of the following requirements:  
 (a) Lawfully and regularly provides mental health counseling and psychotherapy.

- (b) Provides oversight to ensure that the clinical counselor trainee's work at the setting meets the practicum and field study experience and requirements set forth in this chapter and is within the scope of practice for licensed professional clinical counselors.
- (c) Is not a private practice
- (d) Experience may be gained by the clinical counselor trainee solely as part of the position for which the clinical counselor trainee volunteers or is employed."

4999.36. (a) A clinical counselor trainee may perform activities and services provided that the activities and services constitute part of the clinical counselor trainee's supervised course of study and that the person is designated by the title "clinical counselor trainee."

(b) All practicum and field study hours gained as a clinical counselor trainee shall be coordinated between the school and the site where hours are being accrued. The school shall approve each site and shall have a written agreement with each site that details each party's responsibilities, including the methods by which supervision shall be provided. The agreement shall provide for regular progress reports and evaluations of the student's performance at the site.

(c) If an applicant has gained practicum and field study hours while enrolled in an institution other than the one that confers the qualifying degree, it shall be the applicant's responsibility to provide to the board satisfactory evidence that those practicum and field study hours were gained in compliance with this section.

(d) A clinical counselor trainee shall inform each client or patient, prior to performing any professional services, that he or she is unlicensed and under supervision.

(e) No hours earned while a clinical counselor trainee may count toward the 3,000 hours of post-degree internship hours.

(f) A clinical counselor trainee shall receive an average of at least one hour of direct supervisor contact for every five hours of client contact in each setting. For purposes of this subdivision, "one hour of direct supervisor contact" means one hour of face-to-face contact on an individual basis or two hours of face-to-face contact in a group of not more than eight persons in segments lasting no less than one continuous hour.

4999.40. (a) Each educational institution preparing applicants to qualify for licensure shall notify each of its students by means of its public documents or otherwise in writing that its degree program is designed to meet the requirements of Section 4999.32 or 4999.33 and shall certify to the board that it has so notified its students.

(b) An applicant trained at an educational institution outside the United States shall demonstrate to the satisfaction of the board that he or she possesses a qualifying degree that is equivalent to a degree earned from an institution of higher education that is accredited or approved. These applicants shall provide the board with a comprehensive evaluation of the degree performed by a foreign credential evaluation service that is a member of the National Association of Credential Evaluation Services and shall provide any other documentation the board deems necessary.

Before these laws were passed, Trainees were pretty much on their own in finding good supervision and reputable sites. LMFT/LPCC programs could either take a great deal of interest in their students' training or none at all. Although most agencies employed conscientious supervisors, there were far too many examples of trainees with considerable responsibility for client welfare working under inadequate supervision. Understandably,

Trainees may be reluctant to challenge the *status quo* with their sites or supervisors; the schools are in a far better position to ensure quality training by approving the practicum experience of each student. Clearly, this law benefits both student and consumer alike.

**Get the “scoop” on your hours with our “journalist’s questions”:**

<b>WHO?</b>	Students in the MACLP program,
<b>WHAT?</b>	Gain supervised hours,
<b>WHEN?</b>	While enrolled in Clinical Practicum (PSY 662),
<b>WHERE?</b>	At a site which meets the BBS requirements
<b>HOW?</b>	With a written agreement (the “4-Way Agreement”),
<b>WHY?</b>	To comply with state law.

### **What is Clinical Practicum?**

Clinical Practicum is a structured **three-course sequence** in which students gain clinical hours by working under supervision at approved clinical sites, while attending a practicum class concurrently. Students have on-site supervisors who assume both legal and ethical responsibility for students’ clinical work; the practicum class is similar to a case management seminar during which students discuss their clinical cases and receive feedback from both the practicum instructor and their classmates regarding clinical issues and treatment.

Practicum also allows us to “encourage students to develop those personal qualities that are intimately related to the counseling situation such as integrity, sensitivity, flexibility, insight, compassion, and personal presence.” —Business & Professions Code, Section 4980.37(4).

### **Why Must You Be Enrolled in PSY 662 – Clinical Practicum, to Have Your Experience Approved?**

Students are legally defined as “Trainees” after completing 12 semester units in the MACLP program and have a written agreement (4-Way Agreement) on file in the Clinical Training Department. Pepperdine does not sanction the acquisition of clinical experience until students have enrolled in PSY 662 – Clinical Practicum. The MACLP Committee believes that the most effective way to carry out the coordination and approval function mandated by state law is to use the Clinical Practicum class to monitor the clinical training experience of our students and to encourage their growth as therapists. The course structure also allows us to collect evaluations from supervisors, students and practicum instructors, serving as the “regular progress reports” required by law.

**As of August 1, 2012, the BBS requires that LMFT and LPCC students are concurrently enrolled in Clinical Practicum (PSY 662) while earning clinical hours. Therefore, if you**

**have additional practicum requirements to complete beyond your third practicum class, you may either enroll in an additional practicum course or be aware that your hours of experience may not count after 90 days beyond your third practicum class.**

Most malpractice insurance carriers will enroll pre-licensed persons only when their work in clinical settings is part of their educational requirements. You are not required to work in a clinical setting until you take Clinical Practicum. Thus, you may not be able to get insurance if you are not formally enrolled in this course (see page 7 and 32 for additional details on insurance.)

### **Does Pepperdine Actually Approve Hours?**

By law, only the Board of Behavioral Sciences has the authority to approve hours and does so at the time you file your application for the license exam. However, the board has given considerable responsibility to both supervisors and schools for guiding and evaluating students' clinical experience. Supervisors verify the hours of their interns and trainees by signing both weekly logs and Experience Verification forms. Schools attempt to ensure that their students' clinical sites will provide supervision and clinical experience that is consistent with statutes and regulations.

Thus, Pepperdine approves each trainee's clinical experience in general, but not his or her hours per se. However, only those hours gained in an approved site with a written agreement between the school and the site will count toward LMFT licensing requirements and/or practicum class. Again, the 280 hours of direct client contact required for LPCC Practicum are not counted towards the 3000 hours. It is imperative that your 4-Way Agreement is turned into the Clinical Training Department at your campus, for hours to begin accruing.

NOTE: For a detailed discussion of Practicum, please see page 36.

### **When to Take Practicum: It Depends**

Students may receive conflicting advice about when to take Practicum - as soon as humanly possible or during their final three terms. Each plan has its relative merits. Students who first take all practicum prerequisites may start gaining hours sooner but they will probably have "leftover" academic classes. In addition, if they wish to keep gaining hours at their clinical sites after completing their third practicum course, they must be concurrently enrolled in a 4<sup>th</sup> or 5<sup>th</sup> practicum.

On the other hand, students who wait until the last year of their program to take Practicum may be better prepared academically but they won't get exposure to clinical issues as soon. Given these considerations, we recommend that students take practicum during their final three terms.

As a reminder, the LMFT requirement for pre-degree client hours is a minimum 150 client contact hours plus 75 additional contact hours and/or client centered advocacy hours. The LPCC requirement for pre-degree hours is 280 client contact hours (client centered advocacy hours do not count).

***You may enroll in clinical practicum in either the Fall, Spring or Summer terms!***

### **Practicum Prerequisites**

We also want to give our students a head start when they go out into the field. Prerequisite courses for Practicum help make the first clinical experience a positive one. From most reports, Pepperdine LMFT Trainees have a very good reputation throughout the training sites and are academically well prepared when they go out into the field. Competence at the student level is

important for client welfare and for the maintenance of good professional relationships with our supervisors and agency directors.

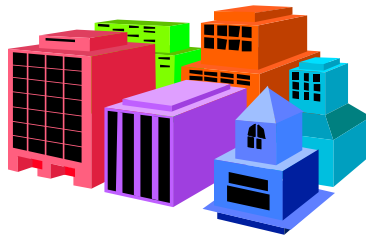
**Before taking Practicum, students must have completed the following prerequisite courses in assessment, diagnosis, case management, law and ethics, interpersonal communication and therapy with individuals, couples and families that provide the foundation for competent practice as a training therapist:**

PSY 600	(Diagnosis and Treatment of Mental Health Disorders)
PSY 606	(Interpersonal Skills and Group Therapy)
PSY 612	(Theories of Counseling and Psychotherapy)
PSY 623	(Ethics and Law for Mental Health Professionals)
PSY 637	(Techniques of Counseling and Psychotherapy)
PSY 639	(Couple and Family Therapy I)
PSY 661	(Preparation for Practicum)

***Students must have secured an “approved” practicum site and have a 4-Way Agreement signed and submitted to your CTC by the end of the first week of their practicum class.***

### **Where to Find a Clinical Practicum Site**

To gain countable hours, students must be approved to work in sites that have been screened by the MFT Clinical Training staff. Information on sites where students have earned LMFT/LPCC Trainee hours is accessible on PepPro, the web based **Practicum Site Directory**. By searching PepPro, LMFT and LPCC students can view descriptions of sites throughout Pepperdine’s four campuses – WLA, IGC, EGC and Malibu. Sites listed in the PepPro Site Directory have been visited by phone and/or in person by the Clinical Training staff, who have judged that the agency and its supervisors provide an experience consistent with Pepperdine’s philosophy of training, BBS law, and level of student skills. For LMFT/LPCC Student PepPro Instructions, please visit the Practicum Preparation website at <http://services.pepperdine.edu/gsep/practicum/>. You can also access PepPro through your Wavenet account.



## **PRACTICUM SITE RESOURCES**

For a clear explanation of what the Office of MACLP Clinical Training and Professional Development can do for you, visit: <http://gsep.pepperdine.edu/masters-clinical-psychology-mft-evening/>. You will find links to the required Clinical Practicum paperwork and the Practicum resources and events available to MFT students, as well as a list of important



events (from Quick Meets to Practicum Fairs) that you will need to attend throughout the program.

Students are eligible for Practicum credit and *Pepperdine* approval of hours when they are working in sites that have been evaluated and approved by the Clinical Training staff. It is possible to gain hours in a setting that is not as yet listed in the Practicum Directory, but the site must first be approved.

### **“Un-approved” Sites — How To Get Them Approved**

To gain hours at an agency that is not listed in the Practicum Site Directory, you will first need to get it “approved” for you. Before going through the time and trouble to fill out the necessary forms, interview at the site or accept a position, *please discuss the potential site with the Clinical Training staff!* There may be a good reason why the site does not appear in PepPro. It may have never been included because of some aspect of the site that would make it ineligible for our trainees.

If there are no problems with the potential site that we are aware of, you will be given the following forms with instructions:

- “Petition to Gain Approval for a Site”
- “Agency Information Sheet”
- “Agency and Supervisor Responsibility Statements”

To allow for adequate time to review the site, return the completed forms to your CT staff no later than **4 weeks** before the start of the term in which you wish to enroll in practicum. The process of approving a site may take several weeks and does not guarantee that the site will be approved. Note: ***Hours worked at a non-approved site will not count toward BBS requirements, nor will they fulfill the requirement for Practicum course credit.***

### **Out-Of-State Sites**

To date, our attempts to accommodate students who have moved out of state before finishing their degrees have largely failed. One requirement of the BBS is that a student graduate from a single “integrated” program, not a program that has been pieced together between two or more programs. However, the BBS has recently cleared the way for students to gain their **practicum experience** outside of California. But challenges remain. The BBS will evaluate hours earned out of state, but it has been difficult for students to find approved sites as well as supervisors who would agree to supervise them and sign the required paperwork for both California and Pepperdine. Until recently, it has been impossible to find a university that would allow an out-of-state student to enroll in a practicum class. All things considered, it’s probably more prudent to wait until you have completed your practicum requirement to relocate.

### **How to Use the Written Agreement**

To comply with the BBS requirement for a written agreement between the school and the site, Pepperdine uses a document called the “**4-Way Agreement.**” In it, the criteria for approval of the

student's clinical experience are described and those responsible for the student's training sign the agreement to indicate their willingness to meet the provisions therein. Those signing are:

- (1) The MACLP student/Trainee,
- (2) The Supervisor(s),
- (3) The representative of the clinical site (frequently the Agency Director),
- (4) The Pepperdine Clinical Training staff for your campus.

The Clinical Training staff will give you a "4-Way Agreement" and explain its use during the information meeting that is held each semester called "Preparing for Practicum." Because we want to be sure that your clinical experience meets BBS specifications, *your Clinical Training staff (Kathleen Wenger, Rebecca Reed, or Alice Richardson) must sign your "4-Way Agreement" before your hours will count.*

## HOW TO LOCATE AN APPROPRIATE PRACTICUM SITE

Although the prospect of locating a practicum site may seem intimidating, in actuality the steps to follow are relatively straight-forward. They are as follows:

### STEP 1: Learn about the process

- Begin your search for a site *before* enrolling in PSY 661, Clinical Practicum by researching possible practicum sites on PepPro, seeking volunteer experience and attending Clinical Training and Professional Development events (***Remember that all practicum prerequisites must be completed before enrolling in PSY 662.***)
- **There are several important meetings held each semester by the Clinical Training Staff. The "Preparing for Practicum" information meeting** is given mid-term by the Clinical Training staff at your campus. This meeting is an exceptional opportunity to discover the intricacies and details about gaining clinical hours, including such topics as: what is good supervision, what documentation - if lacking - will cause the BBS to reject your hours, what kinds of clinical experiences to seek, and other essential information, including sites that have current openings for MACLP Trainees.
- ***Please note that we do not "place" you at a clinical site, rather, as a graduate student, you are expected to research the information about approved clinical settings and consider which sites may be the "best fit" for your clinical interests.***

The CT staff will discuss important steps you should take to secure your practicum site and will answer questions on meeting practicum and BBS requirements. At this event, you will receive up-to-date BBS forms that you will need during your practicum experience. You will be using these forms to document your 3,000 hours, so make multiple copies.

**"Practicum Tips"** meeting will be held during your PSY 661 course (Preparation for Practicum). Also attend the guest speaker events, Practicum Fairs, Practicum Information Meetings and Field Trips, Alumni Panels, Practicum Site Agency Information Meetings and Site Power Point presentations as offered. These events are useful to identify clinical training interest areas and available agencies. Network with your fellow students via our "Practicum Mentor Program", as they are often the best sources of feedback on the Clinical Practicum settings. Additionally, each campus keeps a copy of our sites' "Strengths and Challenges", compiled from anonymous students' feedback on their practicum experiences.

You will also want to attend the “Practicum Site PPT Meeting” where you will learn about the various agencies and their requirements where our students are earning LMFT and LPCC trainee hours. The dates and times for these meetings are found on our Practicum website, <http://community.pepperdine.edu/gsep/student-services/mft-practicum> and on our MACLP semester PD and CT Events Calendar, available in the MA CT/PD department at your campus.

The Career and Practicum Fairs are held in the spring term at the WLA and IGC campuses

### **STEP 2: Select and gather data on practicum sites (before and/or during PSY 661)**

- Look through the PepPro MACLP database and select at least five (5) potential sites. It is often useful to hear what other students have said about a particular site. Drawing from our database of site-specific evaluative comments made by Pepperdine Trainees over the years, we can suggest practicum sites that are a good match for your personal training needs. For example, sites that offer considerable structure may be ideal for beginning Trainees, while sites that tend to provide more Trainee autonomy may be better for Trainees in their third term of practicum. (Keep in mind, however, that the majority of students stay at the same site throughout their Traineeship.)
- To review our database of strengths and weaknesses of various training sites, make an appointment with Kathleen, Rebecca, or Alice depending on the geographical area in which the sites are located. Find out how students have reviewed the sites that interest you, as well as hear the recommendations of the CT staff for your practicum experience.
- Many sites have a web page, so you can learn more about a site by reviewing the information available online.

**CAUTION:** If you are interested in a particular site but don't see it listed in the directory, don't assume that we don't know about it and go for an interview! Our CT staff is aware of just about every appropriate practicum site in the greater Southern California area. ***Before contacting a site that is not listed in the Practicum Site Directory, please consult the CT staff first!***

To continue your search for a practicum site you will need the name of the contact person and the telephone number of the agency. You will find that the initial steps for almost all of the sites are to telephone the contact person, send a résumé, and arrange an interview. It also helps expedite the possible approval of a new setting when the student facilitates the paperwork process with the CTC and the prospective site.

### **STEP 3: Prepare a résumé and cover letter that are personalized for each site.**

A résumé is a summary of your professional and educational history. The headings suggested on the next page represent a composite from a sample résumé. If you need assistance with your resume or cover letter, please contact our Psychology Career Services Department at (310) 568-5780 or [psycareer@pepperdine.edu](mailto:psycareer@pepperdine.edu). As a person entering the mental health field, your background should indicate interpersonal skills and potential strengths as a therapist. **(On to the next page for a “sample” outline of a resume...)**



**NAME  
ADDRESS, CITY/STATE  
PHONE NUMBER, EMAIL ADDRESS**

**CAREER PROFILE:** One sentence stating your skills and what you want. Start with attributes that describe your skills, such as the ability to multitask and/or experience working with a diverse population.

*Example:* “Experienced professional with strong communication skills and an understanding of conflict resolution seeks to obtain supervised experience in marriage and family therapy that will meet BBS requirements for MFT licensure”.

**EDUCATION:** List educational degrees in reverse chronological order, most recent first. Write out degree. Example:

**Pepperdine University, Graduate School of Education & Psychology**, Los Angeles, CA.  
Master of Arts in Clinical Psychology with an Emphasis in Marriage and Family Therapy,  
Anticipated date of graduation (month/year).

**Any University**, Los Angeles, CA

Bachelor of Arts in Psychology, (date is optional – month/year)  
Graduated with Honors”

**LANGUAGE:** If bilingual...also include Sign-Language (if applicable)

**EXPERIENCE:** (can be full-time, part-time, research, or volunteer)...include title, agency name, city/state and dates of employment (month/year)

*Example:*

**“MFT Trainee**

*ABC Agency*, Los Angeles, CA”

- Use bullets to describe your job responsibilities
- Write each in the **“Action+Results” format** (for description, see below)
- Write current position in present tense and former positions in past tense
- Under recent or related position, list 4-5 bullets. Use 2-3 bullets for older jobs and jobs not related to the position you are seeking
- Be concise and to the point
- Write a paraphrase; do not end each with a period.

**PROFESSIONAL AFFILIATIONS:**

Related to job you are seeking (such as CAMFT or Psi Chi)

**SKILLS:**

Computer skills or other special skills (such as CPR or PART Trained)

*References available upon request*  
(Optional, list references on a separate sheet of paper)

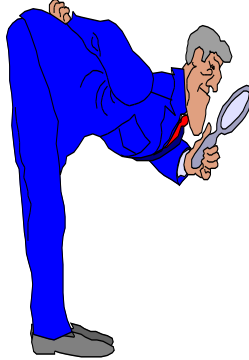
**“Action + Results” format**

- Begin with an action verb to describe the type of work you did. Include a word that describes the results or intended results of your work.

*Example:*

“Coach parents on discipline techniques, communication, and boundary setting to foster responsibility in home, academic and social settings”

- Sample “results” words – “resulting in”, “to foster”, “in order to...”, “to ensure”
- “Action” words – (go to the Career Services website: <http://gsep.pepperdine.edu/career-services/students-alumni/psychology/>)



**REMEMBER TO EDIT YOUR WORK! CHECK FOR MISTAKES IN SPELLING, TYPING AND GRAMMAR! GIVE YOUR WORK A PROFESSIONAL APPEARANCE! NEATNESS IS PARAMOUNT!**

**STEP 4: Create a cover letter.**

Taking the time to craft a cover letter now will definitely pay off. A cover letter shows the agency directors and employers that you have the skills and characteristics they are looking for. The cover letter should have the same heading as the résumé and reference page and should be about 3/4 of a page long. Guidelines in creating a cover letter follow:

- In the first paragraph, you should let the employer know specifically for which job/traineeship you are applying. Also, it is helpful to the employer if you reveal how you heard about this traineeship.
- In the second paragraph, you should detail your skills, qualifications and responsibilities that are directly related to the LMFT/LPCC traineeship you are seeking. In a modest, yet assertive way, you may continue to point out the reasons why you are qualified for this agency’s traineeship.
- In the third paragraph, respectfully and cautiously show your appreciation for the opportunity to interview and let the employer know that you are flexible in your schedule and are available to meet him or her at his or her convenience. Also, include your phone number before closing.

It helps the prospective employer if your résumé, cover letter and reference match in color, style and heading. Remember to use a clear printing font that is easily transmittable by facsimile transfer (FAX), in case you need to send your résumé package by FAX.

**STEP 5: Arrange for an interview.**

Telephone the contact person listed on the site information form and arrange for an interview. Ask this person what you should bring to the interview and follow her or his instructions *exactly*.

Be aware that some agencies conduct the initial interview over the phone. FAX or email your résumé to the contact person, if requested.

## **STEP 6: Follow-up with your contacts.**

Be diligent and follow through after your first contact. After sending your résumé, call sites back and make and keep your appointment for an interview, as needed.

## **STEP 7: Go to your interview.**

During the interview, the agency contact person will attempt to assess your potential as a trainee therapist and to determine the match between your interests and abilities and those needed by the agency. Some agencies need Trainees with some prior clinical experience; others are quite satisfied to use therapists who are just starting out. In addition to seeing clients, some sites want Trainees to work the desk and help with clinic management. Others want Trainees to have had personal therapy; still others require Trainees to pay for supervision.

Look at PepPro MACLP Practicum Site information and agency websites to find out what an agency requires and/or prefers in terms of Trainee skills, availability and requirements. Whenever possible, demonstrate your interest in a particular site by showing your knowledge of its requirements for Trainees, its clinical orientations, populations served, and so forth. Be prepared to describe a therapeutic approach you would use in a clinical setting. Feel free to ask the CT staff about agency interviews: we have excellent resource material and can share with you our experiences—for example, some agencies screen their applicants more intensely than others. After each interview, follow up with a “Thank You” note.

### ***Questions to ask during your interview:***

- Inquire about **PROFESSIONAL LIABILITY INSURANCE.**

Insurance companies who underwrite professional liability coverage to mental health agencies usually sell an umbrella policy that covers both licensed and unlicensed personnel. Ask your potential supervisor or the director of the agency about its coverage of trainees.

In addition to agency coverage, students in practicum should obtain their own professional liability policies. An application for such coverage can be obtained online . CAMFT's publication, *“The Therapist,”* also contains advertisements for insurance. Note that the professional liability carriers only cover students who are required to complete practicum hours as part of their university programs. This refers only to MACLP students who are formally enrolled in the practicum course. The coverage requires membership in either CAMFT or AAMFT and costs as low as \$45.00 a year for a one- million-dollar policy.

- Inquire about your supervisor’s **experience** and **approach to supervision.** Good clinical supervision is of the utmost importance for your clinical training experience. We ask that you meet with your clinical supervisor prior to accepting a Traineeship.
- Excellent articles on clinical supervision can be found on our professional associations’ websites: [www.aamft.org](http://www.aamft.org) and [www.camft.org](http://www.camft.org).
- Inquire about your supervisor’s completion of **mandated training in supervision** (see discussion, pg. 49).
- Inquire about matching your personal weekly schedule with their weekly training schedule in the best interest of the agency and their clientele.



## **STEP 8: Considerations in deciding to work at a site.**

By offering a large number of sites, we hope to provide a variety of experiences for our students. But each site is different in its ability to fit your interests and needs. If you get an offer from a site, you might want to consider these factors in your decision to accept:

- **Don't Limit Your Experience Too Much.** Ideally, the 3,000 hours of pre-licensed experience should contain both breadth and depth. Even if you plan to specialize, learning to work with a variety of clients and problems and using a variety of therapeutic modalities may enhance your versatility and your therapeutic effectiveness. If your caseload is restricted by the specificity of one site or one population, we encourage you to find additional sites before taking the license exam, as long as you are not breaking any contractual agreements by so doing.

One of the more common reasons why people may not do well on the MFT Clinical Written Vignette Exam is that their pre-licensed clinical experience has been too narrowly focused. The MFT license is a generalist license, and the BBS needs to know that your knowledge, skills and abilities apply to a general clinical population, not just to people with one particular clinical problem or syndrome. We have no history regarding the LPCC licensing exam to date as this is a new profession in California.

- **Don't Do Therapy in the Dark.** Another thing to consider prior to accepting a position is whether or not you will have access to enough information about your clients. In the Practicum course, students are encouraged to conceptualize clients systemically, considering biological, psychological, relationship, social, cultural and other systems in which clients are living and which give meaning to their experience. Clearly, this contextual information is relevant even for clients who present individually.

Gathering this information may be a difficult task if your contact with a client's family is either limited or forbidden or occurs outside the therapeutic context. Assessing relationships may be difficult or impossible if you are not allowed to interview the couple or family and observe their interaction. Before you agree to work at a site, find out if you will have the freedom and flexibility to work with the members of the relationship conjointly. Can you see children and parents together? Can you see spouses or domestic partners together? And how about adults— can you invite their families to therapy?

- **And You Have to Conduct Therapy.** Please keep in mind that the hours countable as "counseling performed by you" refers to the use of applied psychotherapeutic techniques to achieve therapeutic goals. A site that only allows you to do intakes, for example, would not be an appropriate practicum site for Practicum. (Please let us know if this is all that you are being offered from a prospective site.)
- **With Family Members in the Same Room.** Before you apply for the LMFT license exam, you will need a minimum of 500 hours counseling couples, families, and children. These hours can be gained either as a Trainee or Intern or both. A Trainee who works at an agency that restricts the practice of Trainees to individuals (adults or children) would need an internship that would *guarantee* work with couples and families. To keep your options open, discuss whether or not you can treat couples, families, and children at your potential site. \* On or after 1/1/2010, up to the first 150 hours of conjoint couples and family hours will be double counted to a maximum of 300 hours. Please contact CTC of supervisor for instructions on how to log/get credit for these conjoint couples and family incentive hours. The BBS allows LMFT Trainees and Interns to double count the first 150

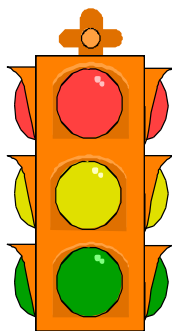
hours spend counseling families/couples, however, you must earn a minimum of 150 hours of face-to-face contact for practicum credit.

- **Countertransference?** Please also consider the population with whom you would be working and its problems. A therapist's life experiences can greatly influence her or his ability to be objective with certain clients. Students may find themselves drawn to clients who present similar problems to those of their parents or families of origin. However, unless they have also had the opportunity to resolve their family of origin issues, students may find it difficult to view these clients impartially.

What to do? Be very honest with yourself about your motivation for selecting a particular site and clientele. Be honest with your potential supervisor about your motivation. Most importantly, consider entering therapy yourself, so that you can use the "training" you received growing up in your family of origin to *help*, rather than hinder your abilities as a therapist.

### **STEP 9. You did it!**

As soon as you have secured an appropriate practicum site, take all completed documents (Acknowledgement Statement, 4-Way Agreement and Supervisor Responsibility Statement) to Kathleen Wenger, Rebecca Reed, or Alice Richardson for signature. Practicum hours towards graduation do not begin accruing until the start of practicum class.



### **PROBLEMS AT THE SITE?**

**Note: Most students will sail through their practicum sequence with relatively few, if any, problems. The selection below is provided FYI, in the unlikely event that problems do arise.**

Pepperdine's initial approval of your clinical practicum site is based on both verbal and written information provided to us by the site's director and/or the prospective supervisor(s) during the site screening process. The continuing approval of students at practicum sites is largely based on the end-of-term site evaluations that we receive from students at the sites, as well as our own ongoing assessment.

Although we do our best to select sites that meet BBS and Pepperdine requirements, problems occasionally occur. Changes at the site, such as changes in management, loss of operating license, changes in supervisors, supervision practices, clients and operating policies may affect either the quality of training or the legality of trainee hours. Although we may notice problems ourselves, we often rely upon student feedback to identify problematic situations.

If you have concerns about your practicum, supervisor or site, please let us know sooner rather than later. If we can get involved early on, the chances of correcting the situation are usually much better. Please discuss the situation with your practicum instructor and with your CT staff.

***Please note that you may not terminate at a site without seeking consultation with your PSY662 – Clinical Practicum instructor and the Clinical Training staff. You must have a Supervisor’s Evaluation completed by your clinical supervisor, whenever you terminate at a practicum site. If you were dismissed from a practicum site or choose to leave a site, you must meet with the LMFT/LPCC Program Director before searching for another site and/or continuing in the MACLP Program. You cannot begin earning hours at another site until you have received approval from your Clinical Training Coordinator and signed a new 4-Way Agreement.***

### **Procedure for Investigating Problems at the Site**

We attempt to conduct a fair and evenhanded inquiry into the situation, making a preliminary assessment of the potential problem’s nature and severity from the trainee(s) involved. Depending upon the circumstances, the Clinical Training staff may recommend one of the following actions:

1. If the problem appears to be one of a minor misunderstanding or miscommunication between the Trainee and the Supervisor or Site Director, we may encourage the Trainee to go to the person(s) in question and attempt to resolve the problem *without* the direct intervention of the Practicum Instructor. If requested, we can help the Trainee identify relevant interpersonal issues and provide coaching on how to approach the situation. This procedure can be useful for enhancing students’ sense of personal competence and often resolves the problem.
2. If the above procedure fails, or if the problem appears to be one that is seriously questionable in terms of legal or ethical practice, we may contact the supervisor or site director ourselves with the assistance of the student, who will provide data on the situation. This is sometimes a deterrent to students, since they believe that if they remain anonymous, the problem will be handled and they won’t need to get involved. However, it is very difficult to promise anonymity to students—even if we don’t mention names, supervisors usually can figure out which trainee raised the concern. More important, anonymous complaints tend to be disrespectful to all parties concerned. We will support Trainees who have legitimate complaints but in the spirit of fairness, will seek to determine the facts on all sides before taking action, and will share those facts only with those who need to know.

### **“Losing Hours”: The Trainee’s Nightmare**

Although schools approve students at practicum sites, the persons legally responsible for the practice of pre-licensed therapists are the *supervisors*. Under penalty of perjury, supervisors attest that they are both suitable to supervise LMFT/LPCC Trainees and that they will ensure that their Trainees practice within the law. The supervisor is responsible for making sure all of the conditions are met that would allow the Trainee’s hours to be approved by the Board.

Supervisors are required to complete training as part of their legal and ethical responsibilities to Trainees and Interns. Even so, we want to empower our students to take responsibility for becoming informed about the elements of both the site and their supervisors that are critical to legal practice and to the acceptability of hours by the Board. These elements are spelled out in considerable detail in the “4-Way Agreement” that we use to coordinate students’ clinical experience.

Given the large number of students that have gained clinical experience in training sites over the years, we have had surprisingly few situations in which supervisors or agency directors have not been in compliance with the law and Trainee hours have been lost. We do our best to make sure that all aspects of the practicum site are appropriate for our students.

### **LEGAL NOTICE:**

***Be aware that if Pepperdine, in good faith, has approved you to earn clinical hours at a site in which hours counted by the Trainee and signed by the supervisor are subsequently denied by the Board due to misrepresentation of qualifications on the part of the supervisor and/or agency director, Pepperdine cannot be held liable for loss of hours or income or for expenses incurred by the student or in any other way held liable. This makes it especially important that you consult with your Clinical Practicum instructor and/or the Clinical Training staff if you have any questions about your site, your supervision, or issues regarding the earning of hours.***

## **PSY 662 – CLINICAL PRACTICUM**

### **Legal Definition of Practicum**

The scope of clinical experience sanctioned by the BBS for LMFT pre-interns is quite broad. According to Section 4980.37(c) of the BPC, the master's degree must contain "not less than six semester units... of supervised practicum... in applied psychotherapeutic techniques, assessment, diagnosis, prognosis, and treatment of premarital, couple, family, and child relationships, including dysfunctions, healthy functioning, health promotion, and illness prevention, in a supervised clinical placement that provides supervised fieldwork experience within the scope of practice of a marriage and family therapist." PCC Trainees can fulfill practicum requirements in the same settings and the hours can be "double-counted".

### **Training in Diversity Encouraged by BBS**

As you can see, the law permits Trainees to learn, under supervision, a wide variety of skills with a wide variety of client populations and issues. MACLP students are to become familiar with the "wide range of racial and ethnic backgrounds common among California's population". Educational institutions are required by the BBS to design practica that will "include marriage and family therapy experience in low-income and multicultural mental health settings". Practicum provides an ideal opportunity for students to appreciate, first-hand, how factors of diversity such as age, gender, culture, ethnicity, racial background, religion, sexual orientation, SES and other similar factors contribute to an individual's uniqueness and identity.

### **What is Practicum at Pepperdine?**

First and foremost, ***Practicum is a COURSE – PSY 662***. It has unit value (2 units per course taken over three terms), an instructor, required attendance, requirements for number of hours worked at the practicum site, in-class activities and “homework” (seeing clients). Students may have assigned and/or recommended readings and present their cases orally in class. Typically, instructors require written and/or oral reports and many require assigned reading. Students are evaluated both by their supervisors and their practicum instructors.



***Note: Students are required to complete two 15-week semester practicum courses and one Summer Session I practicum course (p. 40).***

Students receive *dual* credit for their practicum activities: academic and experiential. The Practicum courses count for 6 of the total units needed for the MACLP degree; for LMFT licensure, the hours earned in sites count toward both Practicum credit and the 3,000 hours needed for the license. For those students who may be seeking licensure as an LPCC, hours gained do not count towards licensure but do fulfill graduation requirements. Consistent attendance and participation are key in receiving a credit in each section of practicum.

### **Practicum Course Objectives**

The primary goals of the Practicum course are twofold: (1) to help students learn to integrate theory and practice, and 2) to develop interpersonal skills that are associated with effective therapy. At the clinical practicum sites, student Trainees provide therapeutic services under supervision. In the Practicum class, students present cases, share assessment and treatment strategies, and discuss problems and issues relevant to case management.

In their presentation of cases, students are expected to examine and evaluate clients using models of family therapy, individual counseling models and recovery oriented healthcare models. The instructor assists students in conceptualizing the problems from both individual and relational points of view. Students are encouraged to reflect upon their preferred therapeutic models and modalities and the rationale for their use, and to develop the skills of critical thinking.

The Board of Behavioral Sciences [B & P Code, Section 4980.37(4) expects degree programs to “*encourage students to develop those personal qualities that are intimately related to the counseling situation such as integrity, sensitivity, flexibility, insight, compassion, and personal presence.*” The three-term Practicum course sequence at Pepperdine gives us the opportunity to assist students in the development of these personal qualities through feedback from fieldwork supervisors, practicum instructors, the Clinical Training staff, and the MACLP faculty.

## **REQUIREMENTS FOR PRACTICUM COURSE CREDIT**

### **Overview of Requirements for Hours**

- When it is time to apply for the LMFT license exam, you may submit to the Board for evaluation ALL of the hours that you gained while enrolled in Practicum, including direct client contact, supervision, workshops, paperwork hours, client-centered advocacy, and personal psychotherapy.
- For **Practicum course credit at Pepperdine**, we will evaluate only HOURS of DIRECT CLIENT CONTACT, WEEKS OF SUPERVISION and CLIENT CENTERED ADVOCACY.
- HOURS of DIRECT CLIENT CONTACT: The minimum hours of **direct client contact** required for 6 units of practicum is **225** of which a minimum of **150** hours must be direct client contact. PCC Trainees are required to complete a minimum of **280** hours of direct client contact (These hours fulfill graduation requirements but do not count towards the 3,000 hour requirement for licensure). For both MFT and PCC Trainees these hours must be supervised during the week they are gained and must fall within the **5:1 ratio**. ***This ratio is averaged over the duration of the traineeship.***
- MINIMUM CLIENT CONTACT PER COURSE: Students need cases to present. Given the increase in requirements for hours of clinical experience, the minimum number of client contact hours for the Fall, Spring and Summer terms is 30, 30, and 14. If these minimums are *not* met, the student receives a grade of “In Progress” (or, IP) until the client contact hour requirement is fulfilled. Further information provided later on this issue.
- FLEXIBLE HOURS: As long as 150 client contact plus 75 client centered advocacy hours for LMFT licensure and 280 hours of direct client contact for LPCC licensure are gained by the end of the three practicum courses, and as long as the course minimums for supervision are met, students may accumulate hours in a flexible pattern that suits both their experience and the specifics of their sites.
- WEEKS OF SUPERVISION: The minimum number of weeks of supervision is **10 weeks** for the Fall and Spring semesters and **5 weeks** in the 7-week Summer terms. These limits allow for a variety of nonscheduled events involving supervisor vacations, client no-shows, illnesses, and so forth. (Even though these are fairly relaxed standards, please recall that no hours will count during any week in which there was no supervision.)

### Grades for Practicum

Practicum is graded on a “Credit/No Credit” basis.

“**Credit**” is given if **ALL** of the following criteria are met.

The student:

- attended class regularly and to the standards of the instructor,
- performed in class satisfactorily (for example: made accurate and effective case presentations, contributed to discussions, showed knowledge and understanding of MFT theory and techniques, demonstrated critical thinking, was flexible and open to instructor feedback, showed knowledge of clinical issues, interacted appropriately with peers),
- earned the minimum number of direct client contact hours for the term
- students in their final practicum are required to have earned 225 hours for LMFT Trainees and a minimum of 280 hours for LPCC Trainees.
- received the minimum number of weeks of supervision for the term (10/5)
- received a satisfactory evaluation from the clinical supervisor and brought the signed supervisor evaluation to the practicum class.
- received a satisfactory evaluation from the Practicum instructor,
- demonstrated competence as a training therapist,

- did not show any signs of behavioral or emotional issues that would affect his or her clinical judgment and performance,
- showed understanding of and compliance with legal and ethical issues, and
- *was directly observed (“live”-supervision or video or audio-tape) by the supervisor at least twice during the fall, spring and once during the summer term.*
- **Reminder: you will need to enroll in a 4<sup>th</sup> practicum class if you have not completed the minimum clinical hour requirements for graduation.**

“No Credit” may be given if **ANY** of the following conditions occur.

The student:

- did not file an approved “4-Way Agreement” with the Clinical Training staff.
- failed to comply with the terms of the “4-Way Agreement.”
- attended class sporadically with unexplained or unexcused absences.
- performed in class poorly or did not meet instructor standards for adequate performance.
- saw no clients.
- received an unsatisfactory evaluation from the clinical supervisor.
- received an unsatisfactory evaluation from the Practicum instructor.
- demonstrated gross incompetence as a training therapist.
- showed behavioral or emotional issues that raised questions about his or her clinical judgment and performance and/or violated ethical principles or legal standards in work with clients.
- was dismissed from the practicum site.
- failed to complete requirements of a previous semester’s “In-Progress” grade.

#### “In Progress” Grade in Practicum:

A grade of “In Progress” (IP) is given to a student who successfully meets all of the requirements for credit but does not have enough hours of direct client contact, enough weeks of supervision or direct observations for credit at the end of the term. To be eligible to receive a grade of IP, the student is still required to submit the supervisor evaluation and weekly logs to the instructor. The student must discuss plans for submitting any missing paperwork or making up missing hours with both the Practicum instructor and the Clinical Training staff. **Otherwise, a student is at-risk for receiving a “No-Credit” grade for that semester.** *Just a reminder that a grade of “IP” is not a permanent “stain” on your record.*

***Were you at your site faithfully every week but still didn’t get enough hours?***

## MAKING UP HOURS

The student who does not have enough direct client contact or weeks of supervision may use those gained during breaks in the academic schedule to count for the previous term’s IP. If there is not sufficient time during the break to clear the IP, the student applies the additional clinical experience of the next Practicum course toward the IP grade. If, after enrolling in Practicum for a minimum of 6 semester units and the student lacks hours towards the minimum practicum hour

requirements (225 for LMFT Trainees or 280 for LPCC Trainees) the degree will be posted once the student demonstrates completion of the hours. **Note: degree posting occurs only once at the end of each semester.**

### **Earning Hours during Academic Breaks:**

Once a student has enrolled in and started Practicum, hours earned during semester and summer breaks will count toward the Practicum requirement, but minimum client contact hours are still required for each Practicum course. *The student should check the box on the Weekly Logs that says “Trainee in Practicum.” These hours must be earned during breaks between Practicum courses, **on the condition that the break does not exceed 90 days.***

### **Planning to Graduate? A Word of Caution**

Students in their final term of the program should be aware that an Incomplete (“I” or “IP”) received in **any** course will not be changed on their transcripts until the end of the following term, even if a grade change has been submitted early in the term. This delay in the posting of the degree may *delay the student’s application for the MFT Intern registration number.* (See page 52). If this situation applies to you, consult your CT staff.

## **HELPFUL HINTS**

### **Terminology: What’s in a Name?**

The term “practicum” is used in several ways. One usage refers to the course or courses taken by the MACLP students, as in, “I’m in my second term of practicum.” Another use refers to the experience gained, as in, “How many practicum hours do I need to get credit for the course?” Still another use refers to the site itself, as in, “I’m doing my practicum at the Community Counseling Clinic at the graduate campus in Irvine. How about you?” Each of these uses is acceptable. A student will sometimes refer to his or her practicum experience as an “Internship,” which legally, it is not. Some agencies, however, may refer to Trainees as Interns and to their work there as internships. Don’t worry about it – you know who you are! Students are “Trainees” while in school; they become Interns after graduation, but only if they register with the BBS. (See discussion, page 52).

### **Consecutive Terms**

We recommend that you gain your practicum hours over three consecutive terms. If this is not possible, you may skip a term of PSY 662/Clinical Practicum and resume the following term, as long as all other requirements are met and it is acceptable with the agency. Recall that students sign an agreement that delineates the time commitment of the student to the agency. Breaking this commitment should only be done for serious reasons. It is imperative that you consult your CT staff if you want to skip a term of practicum. If you are taking a leave of absence from the University for a semester or longer, it is your responsibility to notify the GSEP Registrar.

### **Sequential Terms**



***Practicum courses are to be taken one at a time, in sequence, allowing for a learning experience of nine months to a year. They may not be taken simultaneously. Please note that Practicum (PSY 662) is offered during the first summer session only and that it is required that you complete two 15-week and one 7-week practicum semesters to graduate.***

### **Number of Sites**

The majority of our Clinical Practicum students gain all their required experience at one practicum site. However, some students gain hours at additional sites. *Remember that you cannot count more than 750 hours of client contact and supervision as an MFT Trainee.* Consult your CT staff for recommendations. **Note: To change practicum sites, you must first gain approval of your Practicum Instructor and the Clinical Training Coordinator at your campus.**

### **How Many Practicum Instructors to Take?**

We strongly encourage a varied Practicum course experience. What occurs in class is more or less standardized, but each instructor offers something unique to the process. To take advantage of our faculty's diversity, consider taking at least two different instructors for your three courses.

### **Practicum and Financial Aid**

Financial Aid views Practicum as an Internship, a special status in the academic program. Students whose only course is a 2-unit practicum are therefore considered to be half-time and may continue to defer payment on student loans and remain eligible for certain types of financial support.

### **Reminder—Practicum Requires Two Activities**

To get credit for the Practicum course, students must both attend class for the entire length of the course AND must work concurrently at an approved clinical site, doing psychotherapy under supervision. Note: *During the period of time that the student is enrolled in PSY 662, class attendance without client hours will not earn Practicum credit. Conversely, acquiring hours at a practicum site, but not attending or participating in the practicum class to the standards of the instructor will not earn practicum credit.*

### **Working at a Site after Completing 6 Units**

Some students have successfully completed 6 units of practicum and wish to continue working at their approved clinical sites while they take the final courses needed for the degree. The BBS requires a **4-Way Agreement** as well as written feedback to the school. **Again, as a reminder, you must be enrolled in a practicum course to count your clinical hours!**

### **Concerns? See your Clinical Practicum Instructor First**

Your faculty instructor has the responsibility of monitoring the academic course in which you are enrolled. For Clinical Practicum, this includes not only case conceptualization and training, but also those elements of the practicum experience that may be problematic or potentially so. If you think that you may not earn enough hours or if you have any practicum-related concerns

regarding your supervisor, practicum site, or other training matters, *please consult your Clinical Practicum instructor as soon as possible*. If you need further assistance, your instructor will refer you to the CT staff. Please don't wait for problems to get out of hand, especially those that may involve ethical or legal issues – consult your instructor, ASAP.

## SUMMARY AND ACTION ITEMS FOR PRACTICUM

### Complete *ALL Seven* prerequisites prior to enrolling in PSY 662, Clinical Practicum:

- \_\_\_\_\_ PSY 600 (Diagnosis and Treatment of Mental Health Disorders)
- \_\_\_\_\_ PSY 606 (Interpersonal Skills and Group Therapy)
- \_\_\_\_\_ PSY 612 (Theories of Counseling and Psychotherapy),
- \_\_\_\_\_ PSY 623 (Ethics and Law for Mental Health Professionals)
- \_\_\_\_\_ PSY 637 (Techniques of Counseling and Psychotherapy)
- \_\_\_\_\_ PSY 639 (Couple and Family Therapy I)
- \_\_\_\_\_ PSY 661 (Preparation for Practicum)

- \_\_\_\_\_ 1. Attend the "Tips for Practicum" meeting at your campus or in your PSY 661 class
  
- \_\_\_\_\_ 2. Examine the MFT Agency Information online via GSEP Career Services website (<http://gsep.pepperdine.edu/career-services/>)
  
- \_\_\_\_\_ 3. Consult your Clinical Training staff for suggestions about the match between your interests and abilities and the training experience offered by the site you are pursuing
  
- \_\_\_\_\_ 4. Contact Psychology Career Services in preparing your résumé (including cover letter) for interviews: (310) 568-1580.
  
- \_\_\_\_\_ 5. Telephone the contact person at each site and email/fax your résumé.
  
- \_\_\_\_\_ 6. Be diligent about follow-through after sending your résumé.
  
- \_\_\_\_\_ 7. Be prepared for interviews by working with the Psychology Career Services.
  
- \_\_\_\_\_ 8. Review the considerations listed on pages 32-33 in agreeing to work at a site.
  
- \_\_\_\_\_ 9. Plan to take Practicum in the fall, spring and first summer session

\_\_\_\_\_ Term #1: From \_\_\_\_\_ / / \_\_\_\_\_ to \_\_\_\_\_ / / \_\_\_\_\_  
\_\_\_\_\_ Term #2: From \_\_\_\_\_ / / \_\_\_\_\_ to \_\_\_\_\_ / / \_\_\_\_\_  
\_\_\_\_\_ Term #3: From \_\_\_\_\_ / / \_\_\_\_\_ to \_\_\_\_\_ / / \_\_\_\_\_

### Notes:

## FORMS, FORMS, FORMS!

### Overview

Each time a student takes Clinical Practicum, changes sites, changes supervisors or changes status from Trainee to Intern, his or her progress is accompanied by a paper trail of substantial proportions. Some forms keep track of clinical hours and supervision; others are used to evaluate the student's progress as a therapist in training. Some forms go directly to the BBS once 3,000 hours are accrued, others are completed and returned to the Practicum instructor to be subsequently evaluated by and filed with the Clinical Training staff. The grade for the Practicum course is based, in part, upon the data contained in these forms.

An application to join CAMFT can be found on their website: [www.camft.org](http://www.camft.org). BBS and Pepperdine forms are distributed at LMFT and LPCC program information meetings, in Practicum and other classes and by the CT staff. BBS and Practicum forms are also available from the Practicum Prep website <http://services.pepperdine.edu/GSEP/practicum>

Here is a partial list of the forms and documents that we provide for our students' convenience:

- BBS Responsibility Statement for Supervisor of an LMFT Trainee or Intern
- BBS Weekly Summary of Hours of Experience
- BBS Experience Verification
- BBS Intern Registration Application and Instructions
- BBS Program Certification and Instructions
- Pepperdine 4-Way Agreement
- Pepperdine Acknowledgment of BBS Requirements
- Pepperdine Practicum Evaluation Forms (Student, Supervisor, Practicum Instructor)

### Pepperdine Forms Used in Practicum

Pepperdine is required by law to oversee the evaluation of students enrolled in Practicum and to "provide for regular progress reports and evaluations of the student's performance at the site" [BPC, Section 4980.42(b)]. Toward the end of each term, practicum students receive a "**Supervisor's Evaluation of MFT Trainee**" to give to their supervisors and an "**MFT Student's Evaluation of Supervision and Agency**" to fill out themselves (See Appendix VII- IX pages 64-76).

The clinical supervisor's evaluation is discussed with the student and is signed by the student. The student's evaluation of supervision/site is reviewed by the practicum instructor and by the CT staff. The Practicum instructor provides feedback to each student regarding class performance.

All evaluations are to be returned to the Practicum instructor during the last week of classes. Evaluations of Trainees are kept in students' clinical training files. Evaluations of supervision and sites are kept in site files and are used to make recommendations about the appropriateness of practicum settings for potential trainees.

*Note: Both evaluations of you and your supervisor are required for a grade. If they are not completed and turned in at the appropriate time, the student will receive an "In Progress" (IP) until both evaluations are received.*

## BBS FORMS: DESCRIPTION AND GUIDELINES FOR USE

Most of the forms that you'll need are available through Pepperdine. You may also download BBS forms from the BBS homepage (**Note: While descriptions of forms in this section specify LMFT's, the BBS has comparable forms for LPCCs**). Or, you may request them in writing from the BBS, and include a self-addressed, UN-stamped, postcard with your request. The Board will use your postcard as a mailing label, so be sure that your name and address are legible.

CAUTION: All forms that accompany applications (for both the intern number and license exam) must have original signatures, with **no "whiteout."** If you make a mistake on a form, you'll need to have your supervisor re-sign it. You are allowed to photocopy any form used by the Board. Make plenty of copies of blank forms.

The following forms are required to document your experience. They are distributed to students during the "Preparing for Practicum" meeting and are also available from the CTPD staff.

### 1. "Responsibility Statement for Supervisors of a Marriage and Family Therapist Trainee or Intern" also known as the "Supervisor's Responsibility Statement" (SRS):

According to the BPC Section 1821 (b), any person who supervises a Trainee or Intern is required to sign under penalty of perjury the "Responsibility Statement for Supervisors of a Marriage and Family Therapist Trainee or Intern," prior to the commencement of such supervision. This form specifies the conditions that must be met for a person to supervise according to regulation and for a Trainee's or Intern's hours to count.

How to use the SRS form: Ask your supervisor to sign the SRS *before* supervision begins. If you have more than one supervisor, each must sign a separate SRS. At this time, you can request that your supervisor read and sign the "4-Way Agreement". You may verify the status of his/her license through Online License Verification on the BBS homepage: [www.bbs.ca.gov](http://www.bbs.ca.gov) or by calling the BBS at (916) 574-7830.

Note: Write down the supervisor's license expiration date in your appointment book so that you will have a reminder to check on whether or not the supervisor renewed her/his license. Do this for your own protection; any hours you earn under a supervisor whose license has expired will not count.

File a *copy* of the SRS for each of your supervisors with your Clinical Training staff. Send your *originals* to the BBS with your application for the license exam. Please note that your supervisor will need to complete a new SRS at the end of your LMFT Traineeship, should you decide to remain at the same site.

### 2. "Weekly Summary of Hours of Experience," a.k.a. the "Weekly Log":

You are required by law to maintain weekly logs of all experience gained toward licensure. Although some supervisors prefer to sign several weeks at a time, the regulations specify that the logs “shall be signed by the supervisor on a weekly basis.” [B & P Code Section 1833 (e)]. This requirement is set up in your best interest. If a supervisor leaves or becomes otherwise unavailable, weekly signatures can prevent the loss of hard-earned hours. When you terminate at a clinical facility, change supervisors, or become an Intern at the same site, your *supervisor* will transfer the hours from your weekly logs to the “LMFT Experience Verification” form (described in #3, below).

How to use the Weekly Logs: Enter into each week the number of hours - not minutes - of supervised experience that you gained at your clinical site. Also enter the number of hours of supervision: group and/or individual. After the first unit of supervision, partial hours may be entered. Client hours may be partial numbers. Total your hours each week. If you have questions, please ask the Clinical Training staff. Ask your supervisor to sign your log each week. If you make a mistake, have your supervisor initial the correction.

At the final class session of each term, Practicum students bring to class a copy of their Weekly Log with totals entered and with appropriate supervisor signatures. Students show their logs to their instructors and to the Clinical Training staff person, who may attend the class. The logs are examined for clerical accuracy and to verify that the student has completed the required number of hours for practicum credit. Original weekly logs are not handed in but are kept by the student for the supervisor’s use, as described next.

Retain all weekly logs until you are licensed. The BBS may require you to submit all or portions of your logs to verify hours of experience. Note: *Do NOT send your weekly logs to the BBS unless requested to do so.*

### **3. “Marriage and Family Therapist Experience Verification,” (or Experience Verification Form):**

This form is used to document your supervised clinical experience. No corrections or erasures are allowed. You may need to make many photocopies of this form.

How to use the Experience Verification form: Bring this form and your Weekly Logs to your **supervisor** when you:

- get ready to leave a practicum site,
- change supervisors at the same site,
- graduate and change your status from Trainee to Intern (even if you stay at a site and have the same supervisor)

Your supervisor transfers the total hours in each category from the Weekly Logs to the Experience Verification form, completes the appropriate sections, and signs the form. Keep your signed verification forms until you have collected your 3,000 hours. When you apply for the license exam, submit all Experience Verifications to document your 3,000 hours.

**\*A separate form should be used for pre-degree and post-degree hours for LMFT Trainees and Interns.**

**Don’t Forget This!** Experience Verification forms call for certain documentation to be attached. The BBS tells us that this item is most often overlooked:

For volunteer supervisors who are not employed by the agency at which you work, a **Volunteer Letter of Agreement** completed by the agency must be attached.

**Workshops Attended** are documented both on the Weekly Logs and the Experience Verification form. With the prior approval of your supervisor, you may count as Professional Enrichment a maximum of 250 hours for attendance at workshops, seminars, training sessions or conferences directly related to marriage, family and child counseling. To count these hours while you are in your master's program, you need to be enrolled in Practicum or have a 4-Way Agreement signed and on file at the CT Department and receive the minimum supervision at your site.

How to count workshops: On your Weekly Logs, enter the number of hours spent at approved workshops on the date(s) you attended them. Have your Clinical Supervisor sign for workshop hours at supervision that week.

Note: The Board does NOT require that you submit flyers, brochures or notices of workshops. Many students find it helpful to keep an ongoing list of all workshops they attend. This list then becomes a valuable attachment to the resume!

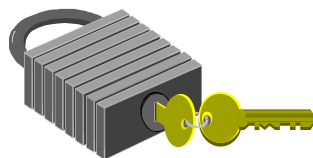
#### 4. "Marriage and Family Therapist Psychotherapy Verification":

Although the Board no longer requires them, we recommend that you complete the two forms that are used to document psychotherapy received: a psychotherapy weekly log and a psychotherapy summary form, both signed by the treating therapist. Students may begin counting personal therapy received toward their 3,000 hours as soon as they enter the master's program—it is not necessary to be in practicum. **It is important that you keep records of personal psychotherapy dates until you apply for licensure.**

If you want to apply your personal therapy hours toward the 3,000 required for licensure, please be aware of the six-year rule (see page 51). However, you don't have to submit these hours if you need a later start date, and you can always get more therapy closer to your exam filing date. The message: to count therapy hours, be sure that you have received them within 6 years of filing for the license exam.

The license application includes a section in which to record personal psychotherapy hours. You will need to include the name and license number of the therapist, together with the total hours of therapy received. Up to 100 personal psychotherapy hours can be triple-counted on the license application.

#### Your BBS Files: Who Maintains Them?



Students should maintain their own BBS files, including their Weekly Logs, LMFT Experience Verifications and *original* Supervisor Responsibility Statements. Also, it is a good idea to make a

copy of your “Supervisor’s Evaluation of the Student”. The documents that are regularly filed by the CTC include:

- Acknowledgements of BBS Requirements
- 4-Way Agreements
- *Photocopies* of Supervisor Responsibility Statements
- Supervisor, student, and instructor evaluations from the practicum course.

Practicum instructors verify hours differently: some request to see your original weekly logs while others require that you make copies to be submitted. **Do not leave original weekly logs with your practicum instructor or with CT staff.**

**Pepperdine is not required by the BBS to hold onto MFT/Practicum student forms post-graduation. You are responsible for the safe-keeping of all your BBS forms!**

## **SUPERVISION AND SUPERVISORS**

### **Supervision Defined**

Section 1833 (b) of the BPC defines supervision as “ensuring that the extent, kind and quality of counseling performed is consistent with the education, training and experience of the person being supervised; reviewing client/patient records, monitoring and evaluating assessment, diagnosis and treatment decisions of the intern or trainee; monitoring and evaluating the ability of the intern or trainee to provide services at the site(s) where he or she will be practicing and to the particular clientele being served; and ensuring compliance with laws and regulations governing the practice of marriage and family therapy. Supervision shall include that amount of direct observation or review of audio or video tapes of therapy, as deemed appropriate by the supervisor.”

### **Specific Requirements for Receiving Supervision**

You, the supervisee, must meet ALL of the following criteria:

- For every week you claim hours and at each setting you work (if more than one at a time), you must have a *minimum* of one (1) hour of individual or two (2) hours of group supervision.
- No more than eight (8) supervisees may attend group supervision.
- A SUPERVISION UNIT is either one (1) hour of individual or two (2) hours of group supervision.
- 1 hour of supervision must be 60 minutes of supervision
- For every five (5) hours of client contact, Trainees must receive on average over the length of time at the site ONE UNIT of supervision. This is called the “five-to-one ratio” and is discussed in greater detail below.



- Post-degree Interns shall receive at least one hour of direct supervisor contact for the first ten hours of client contact in each setting and one additional hour for any hours over ten in a working week.
- No more than 5 total clock hours of supervision may be counted in any one week (Be sure to record all supervision hours on your logs for ratio purposes).
- You must receive *individual*, face-to-face supervision for at least 52 weeks of your total pre-licensed experience. Weeks do not have to be consecutive.
- Your supervisor at the clinical practicum site, **not** the Pepperdine Clinical Training staff, decides whether or not workshops, seminars and other training may be counted on the weekly logs.
- **No supervision during a particular week? No hours may be counted for that week!**

### How to Calculate Supervision Ratios

Both supervised experience and supervision itself are recorded on the Weekly Summary of Hours of Experience, also known as the “Weekly Logs.” However, when you document your hours to the BBS with your license application, you will submit your Experience Verification forms. These forms contain a summary of all hours recorded on the “Weekly Logs.” On these forms, Trainees must be able to show at least one hour of individual supervision or two hours of group supervision for every **five** hours of direct client counseling.

The BBS calculates allowable hours of client contact based on the total supervision received *at each setting* in which the Trainee or Intern gained hours. The time period involved could be as little as one week or as long as six years. For Pepperdine’s purposes, the ratio of client contact to supervision will be calculated after 6 units of practicum and when the student has earned a minimum of 150 hours of direct client contact with appropriate supervision. To determine your allowable client contact hours per setting, first look to see that you have at least the minimum “unit” of supervision each week (one hour of individual or two hours of group). Add any partial units of supervision to the sum. Then, multiply the number of “supervision units” by five. “The product is the maximum number of client contact hours the BBS will count for that particular setting.

This system is not so bad, once you understand the principles involved. Study these examples to see how the ratios work in practice (Please note: these examples are intended for students who choose to earn the minimum 150 hours of direct client contact by the LMFT Trainee. Please make sure that **all** client contact is within the 5 to 1 supervision ratio):

**Example 1:** If you have 6 weeks of individual supervision (one hour) and 9 weeks of group supervision (two hours), you have 15 “units” of supervision. Multiply 15 times 5 and you get how many hours of client contact the board will allow, in this case 75 hours. If you had recorded 80 hours of client contact on your experience verification form, the BBS would “lop off” 5 of those hours.

**Example 2:** If you have 15 weeks of individual supervision (one hour) and 15 weeks of group supervision (2 hours), you have 30 units of supervision and are allowed to count up to 150 hours of client contact (30 X 5) for that setting. If you had recorded 120 hours, of client contact on your experience verification form, the BBS would count them all.

**Example 3:** If you have 15 weeks of individual supervision and during the same period of time receive 30 hours of group supervision (2 hours/week), then you would have 30 units of supervision, but still only 15 weeks. This distinction is important on the Experience Verification form, where Item #11 asks how many weeks of supervised experience are being claimed.

As you can see, the actual number of countable client hours is limited by the maximum number of allowable supervision hours. **A maximum of five (5) clock hours of supervision may be credited during any one week.** Note that this is not “units” of supervision, but actual time spent, in either individual or group supervision. If you need *more* than five hours of supervision to cover your hours of client contact using the 5:1 ratio, be sure to obtain and record it. Otherwise, both you and your supervisor will be acting in noncompliance with the regulations.

### Specific Requirements of Supervisors

The BBS requires that supervisors sign a “**Responsibility Statement for Supervisors of a Marriage and Family Therapist Trainee or Intern**” before beginning supervision with a Trainee or Intern. This form assures the Board, the school, and the Trainee/Intern that the supervisor meets certain standards of experience, and knows and will follow BBS laws and regulations.

For Trainee hours to count toward BBS and practicum requirements, each supervisor:

- must sign the “4-Way Agreement” and be approved to supervise the student by the CT staff.
- must be a California-licensed LMFT, licensed LPCC, Clinical Psychologist, LCSW, or Board Certified Psychiatrist who has held a valid, *unexpired* California license for at least two years prior to commencing supervision. (Note that Educational Psychologists do not qualify as clinical supervisors).

*Make sure that the supervisor’s license is current. To verify that your LMFT or LCSW supervisor’s license is current, you may visit the BBS website at [www.bbs.ca.gov](http://www.bbs.ca.gov). Click on “Online License Verification”. For supervisors who are Psychologists, you may call (916) 263-2699 or check on the Board of Psychology website at [www.psychboard.ca.gov/](http://www.psychboard.ca.gov/). Licensed Educational Psychologists (LEP’s) do not qualify as supervisors for pre-licensed LMFTs.*

- may not be your spouse or relative by blood, marriage, domestic partnership or anyone with whom you have or had a personal or business relationship that undermines the authority or effectiveness of the supervisor.
- must keep informed of developments in marriage, family and child counseling, as well as the California laws and regulations governing Trainees and Interns.
- shall ensure that the extent, kind, and quality of counseling performed is consistent with the education, training and experience of the Intern or Trainee.
- shall evaluate the site where an Intern or Trainee will be gaining hours and shall make sure that the site provides experience that is within the scope of marriage and family therapy and in compliance with the specific regulations for supervision.
- must notify the Trainee immediately of any event that affects the supervisor’s ability to supervise.

- must give at least one (1) week’s written notice to an Intern or Trainee of the intent not to certify any further hours of experience.
- shall obtain from a future Trainee or Intern the name, address and phone number of the Trainee’s/Intern’s most recent supervisor and employer.
- Additional requirements may be found in Pepperdine’s “4-Way Agreement” and in Section 1833.1 of the BBS regulations.

### **Supervisor Training**

BBS-licensed supervisors (LMFT or LCSW) must complete 6 hours of training in supervision methods every two years. This training may be included in the 36 hours of continuing education required for license renewal every two years. Both AAMFT and CAMFT offer courses in supervision.

The regulations allow the supervisor to begin a supervisory relationship as long as the supervisor meets the training requirement within 60 days of starting supervision.

Note: It is important that you ask your supervisor if he or she has taken this mandated training or plans to take it in the time allotted—otherwise, your hours won’t count.

### **“Interim” Supervisor**

If your regular supervisor is on vacation, ill, or cannot supervise you during a particular week, you will need a substitute in order to count your hours for that week. According to the BBS, if the interim supervisor is supervising *you less than 3 weeks*, this interim supervisor must only:

- sign a separate Supervisor Responsibility Statement prior to supervising you, and
- sign your weekly log..

If the interim supervisor is supervising you for *more than 3 weeks*, the interim supervisor must:

- sign a separate Supervisor Responsibility Statement prior to supervising you,
- sign a separate weekly log, and
- sign a separate Experience Verification form for the number of hours they supervised.

### **Paying for Supervision**

BBS regulations apply to both Trainees and Interns—paying for supervision is allowable. However, this may change and we will keep you posted.



Interns who work in nonprofit settings follow the same recommendation as that described for Trainees. Interns working in private practice may pay for supervision. Be careful how the accounting is set up. You need a W-2 from your supervisor, who is your employer. Please be aware that if the accounting is set up so that you give your supervisor/ agency a percentage of your “fees,” this arrangement is actually illegal, since Interns cannot be paid directly for their services.

\*According to the Department of Labor it is unlawful for an LMFT Intern or Trainee to pay his or her employer for supervision. An intern or trainee may lawfully pay for offsite supervision at any setting other than private practice. This may only be done where an appropriately executed letter of agreement exists.

### **Problems with Sites/Supervisors**

We do our best to cultivate a database of sites and supervisors who are competent and effective and have found that problems with sites and supervisors are, fortunately, few and far between. Those that do occur can usually be resolved fairly easily.

In general, unless it is one of those rare situations that requires our immediate intervention, we encourage students to talk with their supervisors directly and honestly about problems and to find solutions together. Most complaints are remediable with open and respectful discussion.

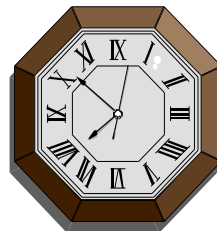
Students may use the Practicum class to discuss the situation with the instructor and even role-play ways in which to approach the supervisor. Students with site or supervisor problems should also consult the CT staff, who may have background information on the site that would change the course of action required (for more information, see the section entitled, **Problems at the Site?**, page 34).

## **TIME LIMITS FOR GAINING HOURS**

### **The “Six-Year” Rule**

Two different regulations provide parameters for LMFT pre-license experience. The first ensures that applicants’ hours are **recent** and the second limits the length of time one may work as an **Intern**. In actuality, the time period affected by these regulations may overlap.

**1. Recent hours:** Spreading supervised experience over too long a period of time dilutes the learning experience; with the exception of up to 500 hours gained during practicum, all hours must be gained during the six (6) years immediately preceding the date of filing for the license exam. When you send in your application for the license exam, send the BBS your Experience Verifications for **all 3,000 hours**. The LMFT analyst counts back six years from the date your application is received and evaluates only those hours gained during that time, as well as the maximum of 500 practicum hours, which may be older than six years.



**2. The “LMFT Clock”** starts whenever you log your first countable hour. This includes therapy received. However, you are not required to submit to the board all of the hours that you have actually logged. You can simply hold back your earliest hours, thus delaying the start of the “clock.”

**3. Intern Renewal:** An Intern may renew five times. This gives Interns six (6) years in which to gain all of the hours they need for the exam, excluding up to LMFT hours gained during Practicum. Interns who have not gained all of their hours (less practicum) within six years need to apply for a

new registration number. Only hours beyond the “six year maximum” will be deducted. The Intern *may not* work in private practice and will need to qualify under the academic requirements in effect at the time. Clearly, the Board wants Interns to finish their hours within the allotted six years!

The story behind the time limits is this: as usual, some people were abusing the system. It came to the attention of the Board that Interns working in private practice would renew their registrations year after year, either never taking the exam or taking and failing it repeatedly. But that didn’t matter: before supervision ratios, Interns could see up to 39 clients per week with only one hour of supervision and could renew their intern numbers indefinitely. It was a decent living for Interns and their unscrupulous supervisors, but it wasn’t the intent of the law. This evasion of the license exam not only took away income for legitimately licensed practitioners, but it also put clients at risk.

***Important: Should you register as an Intern if you don’t want to gain hours immediately?***

Don’t start your intern clock until you are ready. If, after graduation, you plan to step temporarily away from your career path for that ocean cruise or to have a family, we suggest that you delay your Intern registration until you can be reasonably sure that you can earn the required number of hours within six years.

## **INTERN REGISTRATION NUMBER: HOW TO APPLY**

To count hours gained after you finish your degree, you must register with the BBS as an LMFT and/or LPCC Intern. The Board requests that you allow up to 60 days for your application to be processed. (Instructions for completing the LiveScan fingerprinting will be included in the LMFT/LPCC Intern Registration Packet found on the BBS website). You may count hours worked during the time period between graduation and receiving your Intern Registration (IR) number as long as you:

- Apply for an IR number within 90 days the date the degree was posted on transcript, *and*
- Work in a setting defined by law for Trainees. To work in private practice, even as a volunteer, you must have your IR number *in hand*.

NOTE: If you miss the 90-day window, don’t panic. The only result is that you won’t be able to count post-MA hours until you receive your Intern Registration number.



### **Steps to Register as an Intern**

1. Midway through your final term in school, you will receive a letter via email (“Dear Prospective Graduate”) from the MACLP Program Director to remind you to apply for an Intern Registration number. This letter will include an overview of the MFT Intern application process, information

about ordering an **official transcript** to include with your application and instructions for completing these forms.

2. Attend the **Intern Registration Meeting** held by the Clinical Training staff during your Psy 642 ~ Professional Practices class. (Dates for alternate meetings may be found in flyers that are included in school registration packets and/or on the internet at:

<http://services.pepperdine.edu/gsep/practicum/>

3. About 4 - 6 weeks *after* the end of the term, you will receive another letter (“Dear Recent Graduate”) that includes your personalized **Program Certification**. This document is a required part of your Intern application and is completed by the MACLP Program Director to verify to the BBS that you have fulfilled the academic requirements stipulated by law.

4. Complete and sign the Intern application. Include a 2”x2” passport quality photo of yourself, the second copy of the Request for Live Scan Service Applicant Submission form, the fee and the two sealed envelopes containing your official transcript and your Program Certification and send them to the Board. **NOTE: Do not open envelopes. They must remain sealed.** For additional instructions, refer to “How to submit documents to the BBS”, on the next page.

5. Be patient. The BBS takes from one to three months to issue an Intern number. As long as you have applied for your IR number within 90 days of your degree posting date and are working in a nonprofit or agency otherwise approvable for *Trainees*, these hours count as post-degree hours, any paperwork hours may now count and your supervision ratio is 10:1.

#### **How to Submit Documents to the BBS:**

The Board requires TWO applications—one for the Intern registration and the other for the licensing exam. Each of these applications requires additional paperwork, such as transcripts, program certifications, experience verification forms, documentation of sites and copies of forms related to tax status. We recommend that you:

- Always make photocopies of anything you send. Also, it’s a good idea to make your application packet appear neat and professional: if possible, *type* the information required.
- Never send any back-up materials such as transcripts by themselves to the BBS.
- Whether you apply for an Intern Registration Number or for the exam, send everything required in the same application packet. **DO NOT submit materials under separate cover.**
- Any document for which no application has been filed will be returned to the sender *after 90 days of its receipt*.

The Board requests that you use the following procedure to verify that your documents have been received:

Whenever you send documents to the BBS, include a self-addressed, stamped postcard with the names of the documents identified in writing. When BBS staff open the daily mail, they will note the documents received, date-stamp your postcard, and mail it back to you. This can be especially helpful if you are applying for a position (post degree) that requires you to be a registered Intern. You can show your potential employer that the Board has received your registration information and application by showing the postcard that the BBS has verified for you.

## THE LMFT LICENSE EXAM

*Test Ethics Disclaimer: The following information has been drawn from general knowledge of licensing exams for psychotherapists, together with information about the LMFT exam published by the BBS. Nothing written here has been gained from direct or indirect knowledge of any actual exam used for the LMFT license.*

Currently, the license exam has two written parts – Standard Written Exam and the Written Clinical Vignette Exam – and is designed to assess the candidate’s readiness to practice *independently* as a marriage and family therapist. (NOTE: The BBS is currently considering revising the MFT exam process. We will keep you apprised of their decision and recommend that you bookmark the BBS webpage for easy reference on important updates regarding the LMFT profession.) This means that on her/his own, the therapist can be expected to handle critical situations and emergencies – those “red flags” you learn about in your law and ethics class. It also means that the therapist can be relied upon to be generally helpful to clients, with sufficient skills in the diagnosis, assessment and treatment of problems.

The content of the exams is based upon an occupational analysis that was conducted by the Board in 2002. An Occupational Analysis is to be conducted every five years, however, the most recent Occupational Analysis has yet to be released. In an occupational analysis, a survey is constructed and sent out to a random sample of those in the occupation. Items on the survey typically ask the respondent to indicate the frequency with which a certain activity is performed and to rate the activity’s importance. (For example, a therapist may not need to arrange for the hospitalization of clients very often, but it is essential that she or he know how to do so.)

The survey that went out to the sample of licensed LMFTs contained many items of a generic nature and a minority of items specific to marriage and family therapy. Not surprisingly, the picture that emerged was that LMFTs have a generic practice and do not do much work with couples and families. (This is actually more often true than not.) As a result, the newly-standardized and revised LMFT license exam tests for a generic, master’s-level psychotherapist, who may or may not necessarily use systemic models of conceptualizing and treating clients. However, since the regulations specify that the academic degree must contain at least 12 semester units in marriage and family therapy, one would expect that the Board would examine this area in some fashion.

The BBS will send you instructions when you apply for the exam. But, why wait??? Request it be sent to you now or download it from their website ([www.bbs.ca.gov](http://www.bbs.ca.gov)). In our opinion, those who use the BBS Handbook throughout their Internships will be better prepared for the exams!

The **Standard Written Exam** contains objective items that are drawn from both the content areas mandated by law and from the occupational analysis. Computerized written exams are given on a continuous basis throughout the year in five Southern California locations. Allow a maximum of **6-8 months** for your application to be processed. Note: Once you receive clearance from the BBS, you have a period of one year in which to take the written exam.

The **Written Clinical Vignette Exam** consists of a variety of clinical vignettes and a series of multiple-choice questions related to each vignette. Each multiple-choice question requires the candidate to select the correct answer from among the four options provided. The possible answers are longer and more complex than a standard multiple-choice question and list a sequence of actions or describe a process of clinically applying knowledge. For more information and a sample vignette, go to the BBS website: [www.bbs.ca.gov](http://www.bbs.ca.gov).

Apply for the exam after you have completed your academic requirements and your 3,000 hours of supervised experience. You do not need another Program Certification if one is already on file with the BBS (presumably with your Intern application), unless the form has been changed while you were an Intern. In this case, you will be instructed by the board to submit a new Program Certification. If this situation applies to you, call Rebecca Reed for assistance.

## The LPCC License Exam

**\*\*Please check the BBS website for the latest licensing exam information\*\***

**Currently, the BBS is requiring two exams: (1) California Law and Ethics Exam and (2) National Clinical Counselor Mental Health Examination**

### ACTION ITEMS

#### How to Determine When to Apply for the Exam

**Use the following guide to determine when you should aim to have your hours completed and when you should file for the MFT licensing exam:**

Write down here the date you logged your first hour of experience: \_\_\_\_/\_\_\_\_/\_\_\_\_.

If this experience was personal therapy, your 6-year clock has started, if you want it to. Assuming you want to count these hours, you have six years from this date\* to file for the exam.  
(Note to myself: *I must file for the license exam by: \_\_\_\_/\_\_\_\_/\_\_\_\_.*)

If you need more time, you can start your clock when you see clients as an Intern, although you may lose those personal psychotherapy hours.

**OR**, if this experience was gained as part of your practicum experience, your 6-year clock has not yet started. Wait until after you graduate, then:

Write down the date you logged your first **Intern** hour: \_\_\_\_/\_\_\_\_/\_\_\_\_.

You have six years from this date\* to file for the MFT licensing exam.

(Note to myself: *I must file for the licensing exam by: \_\_\_\_/\_\_\_\_/\_\_\_\_.*)

Write the date you received your Intern Registration Number: \_\_\_\_/\_\_\_\_/\_\_\_\_.

Mark off each time you have *renewed* your Intern Registration: 01 02 03 04 05



**\*Computerized written exams are given year-round. As soon as you have all of your 3,000 hours completed, you should file your exam application (see p. 52).**

**Dear Student:**

We hope that this handbook has been helpful to you. If you have any comments or questions about the handbook or about the MACLP program, please let us know — we would enjoy hearing from you. Thank you very much for your attention and diligence in reading this document completely.

We wish you the best in both your academic program and in your professional career.

Yours sincerely,

***Duncan Wigg, Kathleen Wenger, Rebecca Reed and Alice Richardson***

August, 2013

***Appendix I***

**QUIZ: LMFTs, LPCCs, LCSWs, PSYCHOLOGISTS - WHAT'S THE DIFFERENCE?**

Sometimes students are curious about the differences between Licensed Marriage and Family Therapists, Licensed Clinical Social Workers, and Psychologists (licensed generically, not as Clinical Psychologists). Can you match the definition with the license? The following are from the California Business and Professions Code:

1. “The practice of \_\_\_\_\_ is defined as a service in which a special knowledge of social resources, human capabilities, and the part that unconscious motivation plays in determining behavior, is directed at helping people to achieve more adequate, satisfying, and productive social adjustments.

The application of \_\_\_\_\_ principles and methods includes, but is not restricted to, counseling and using applied psychotherapy of a non-medical nature with individuals, families or groups; providing information and referral services; providing or arranging for the provision of social services; explaining or interpreting the psychosocial aspects in the situations of individuals, families, or groups; helping communities to organize, to provide, or to improve social or health services, or doing research related to \_\_\_\_\_.” —**Section 4996.9**

2. “The practice of \_\_\_\_\_ is defined as rendering or offering to render for a fee to individuals, groups, organizations or the public any \_\_\_\_\_ service involving the application of \_\_\_\_\_ principles, methods, and procedures of understanding, predicting, and influencing behavior, such as the principles pertaining to learning, perception, motivation, emotions, and interpersonal relationships; and the methods and procedures of interviewing,

counseling, psychotherapy, behavior modification and hypnosis; and of constructing, administering, and interpreting tests of mental abilities, aptitudes, interests, attitudes, personality characteristics, emotions, and motivations.

The application of such principles and methods includes, but is not restricted to: diagnosis, prevention, treatment and amelioration of \_\_\_\_\_ problems and emotional and mental disorders of individuals and groups. Psychotherapy . . . means the use of \_\_\_\_\_ methods in a professional relationship to assist a person or persons to acquire greater human effectiveness or to modify feelings, conditions, attitudes and behavior which are emotionally, intellectually, or socially ineffectual or maladjusted.” —**Section 2903**

3. “The practice of \_\_\_\_\_ shall mean that service performed with individuals, couples or groups wherein interpersonal relationships are examined for the purpose of achieving more adequate, satisfying, and productive marriage and family adjustments. This practice includes relationship and pre-marriage counseling.

The applications of \_\_\_\_\_ principles and methods includes, but is not limited to, the use of applied psychotherapeutic techniques, to enable individuals to mature and grow within marriage and the family, and the provision of explanations and interpretations of the psychosexual and psychosocial aspects of relationships.” —**Section 4980.02**

4. The practice of “\_\_\_\_\_” means the application of counseling interventions and psychotherapeutic techniques to identify and remediate cognitive, mental, and emotional issues, including personal growth, adjustment to disability, crisis intervention, and psychosocial and environmental problems. “Professional clinical counseling” includes conducting assessments for the purpose of establishing counseling goals and objectives to empower individuals to deal adequately with life situations, reduce stress, experience growth, change behavior, and make well-informed rational decisions.

“\_\_\_\_\_” is focused exclusively on the application of counseling interventions and psychotherapeutic techniques for the purposes of improving mental health, and is not intended to capture other, nonclinical forms of counseling for the purposes of licensure. For the purposes of this paragraph, “nonclinical” means nonmental health.

“\_\_\_\_\_” does not include the assessment or treatment of couples or families unless the professional clinical counselor has completed all of the training and education, beyond the minimum training and education required for licensure: -- **Section 4999.20 (a) (b) (c)**

4) The practice of “\_\_\_\_\_” means the application of counseling interventions and psychotherapeutic techniques to identify and remediate cognitive, mental, and emotional issues, including personal growth, adjustment to disability, crisis intervention, and psychosocial and environmental problems. “Professional clinical counseling” includes conducting assessments for the purpose of establishing counseling goals and objectives to empower individuals to deal adequately with life situations, reduce stress, experience growth, change behavior, and make well-informed rational decisions.

“\_\_\_\_\_” is focused exclusively on the application of counseling interventions and psychotherapeutic techniques for the purposes of improving mental health, and is not intended to capture other, nonclinical forms of counseling for the purposes of licensure. For the purposes of this paragraph, “nonclinical” means nonmental health.

“\_\_\_\_\_” does not include the assessment or treatment of couples or families unless the professional clinical counselor has completed all of the training and education, beyond the minimum training and education required for licensure: -- **Section 4999.20 (a) (b) (c)**

*Answers, end of Appendix IV*

## ***Appendix II***

### **MFTs IN CALIFORNIA: DEMOGRAPHICS**

In 2010, CAMFT conducted a survey to compile demographic data on its licensed clinical members. Of approximately 4,200 surveys mailed, 668 surveys were returned, for a response rate of approximately 16%. The following generalizations can be made from their results:

#### **The typical MFT in California:**

- Practices in Los Angeles County (23%), Orange County (7.0%)
- Is female
- Is Caucasian
- Is self-employed in full time or part time practice
- Regularly participates in professional activities not related to counseling or therapy
- Is 56.4 years old
- Sees, on average, 11 patients each week
- Has a master's degree granted by an accredited school in marriage, family, and child counseling or marital and family therapy
- Has been licensed for 10 or more years
- Participates in 18 hours of continuing education each year and
- Carries a professional liability insurance policy with coverage of at least \$1,000,000 per occurrence
- Does some pro bono work
- Has an annual average income before taxes of \$51,174 (21% earn more than \$80,000)
- Uses a computer for some purposes
- Has access to email
- Uses a fax machine
- Has a usual and customary fee of approximately \$104.81 per hour (in reality, however, collects \$85 per hour)
- Provides patients with a written agreement for services/HIPAA Notice of Practices, which patients are required to sign
- Has a 24-hour or 48-hour cancellation policy
- Retains patient records seven or more years beyond termination
- Spends five hours weekly doing treatment planning, report writing, insurance billing and maintaining progress notes.
- Sees a client somewhere between 13 and 52 times

In order of priority, MFTs work primarily with the following **client issues**:

Depression; anxiety, self-esteem/personal growth, couples/relationship issues, life transitions, including divorce, remarriage, step-parenting and post-traumatic stress; child/adolescents; grief/loss/death/dying; parenting; families; addictions/co-dependency/ACA; child abuse; affective disorders; job satisfaction; domestic violence; suicide/crisis; gay/lesbian issues; aggression; cultural/social problems; serious emotional disturbances of children; personality disorders; eating disorders; and catastrophic or chronic illness.

In order of priority, **client referrals** come to LMFTs primarily from the following sources:

Patients/clients; colleagues; managed care companies; families/friends/neighbors, EAP's; psychiatrists; schools; other professionals; community agencies; courts/probation; advertising/marketing; and internet searches/therapist locators.

\*For further details, please see ***THE THERAPIST***, July/August 2011.



(Special Instructions)

- INSERT attachment “Changes to MFT Supervision/Experience Requirements for Hours Gained on or after January 1, 2010”



**MFT EXPERIENCE CATEGORIES**  
**SUMMARY OF HOURS PERMITTED/REQUIRED**  
**For Hours Gained on or After January 1, 2010**

Categories	Minimum/Maximum Hours	Changes Effective 01/01/2010
<b>1. Psychotherapy with Individuals</b>	No maximum or minimum	No change
<b>2. Psychotherapy with Couples, Families and Children</b>	<ul style="list-style-type: none"> <li>• 500 hours <b>minimum</b> (no maximum)</li> <li>• Up to 150 hours of conjoint family and couples therapy are double-counted</li> </ul>	NEW: 150 hours double-counted
<b>3. Group Therapy or Counseling</b>	500 hours <b>maximum</b> (no minimum)	No change
<b>4. Telemedicine Counseling</b>	375 hours <b>maximum</b> (no minimum)	WAS: <ul style="list-style-type: none"> <li>• Telephone Counseling - 250 hours maximum</li> <li>• Telemedicine - 125 hours maximum</li> </ul>
<b>5. Psychological Testing, Report Writing &amp; Writing Notes</b>	250 hours <b>maximum</b> (no minimum)	NEW: May now be counted pre-degree
<b>6. Individual Supervision</b>	52 weekly hours <b>minimum</b> (no maximum)	No change
<b>7. Group Supervision</b>	No minimum or maximum	No change
<b>8. Workshops and Training*</b>	250 hours <b>maximum</b> (no minimum)	No change
<b>9. Personal Psychotherapy*</b>	<ul style="list-style-type: none"> <li>• 300 hours <b>maximum</b> (no minimum)</li> <li>• Up to 100 hours are triple-counted</li> </ul>	No change
<b>10. Direct Supervisor Contact Professional Enrichment Activities Client Centered Advocacy Personal Psychotherapy* Workshops &amp; Training*</b>	1,250 hours combined <b>maximum</b> (no minimum)	WAS: Direct Supervisor Contact & Professional Enrichment Activities combined maximum of 1,000 hrs.  NEW: Client centered advocacy can be counted

\*Categories 8 and 9 also have a combined maximum related to Category 10

10/21/09

*Answers to definitions, Appendix I (in order of appearance):*

1. *Clinical Social Worker*
2. *Psychologist*
3. *Licensed Marriage and Family Therapist*
4. *Licensed Professional Clinical Counselor*

(Special Instructions)

- After “MFT Experience Categories Summary of Hours Permitted/Required for Hours gain on or After January 1, 2010”, insert attachment, “Board of Behavioral Sciences Changes to LMFT Experience Requirements effective January 1, 2012.



Trainee		Applicant		Registered Intern	Applicant	Licensed
Enter Masters degree program	12 Semester 18 Quarter Units required to collect hours	Complete Masters degree program	Must apply for Intern Registration within 90 days to be able to collect hours during this time. Employment in private practice not permitted.	Maximum of six years as a Registered Intern however may reapply for a new intern number and hours roll forward. Private practice employment not permitted in subsequent six year intern registration periods.	Application pending or hours approved and in examination process or passed exams and awaiting receipt of license.	<i>Congratulations!</i> License granted as a Marriage and Family Therapist.
Supervision Ratios 5 to 1 individual or 5 to 2 group		Requirements for hours are the same as for Interns. Supervision for first 10 hours of experience one hour individual or two hours group plus one additional individual hour or two additional group supervision hours for hours over 10			When application approved, one hour of individual or two hours of group supervision required in each work setting.	

Trainee Limitations		Applicant		Registered Intern	Applicant	Licensed
Masters Program (Maximum of 1300 total hours gained as a trainee)		Masters Program (Maximum of 1300 total hours gained as a trainee)		Maximum of six years as a Registered Intern however may reapply for a new intern number and hours roll forward. Private practice employment not permitted in subsequent six year intern registration periods.	Application pending or hours approved and in examination process or passed exams and awaiting receipt of license.	<i>Congratulations!</i> License granted as a Marriage and Family Therapist.
Must complete 12 semester or 18 quarter units of study to collect hours.	750 Hours Maximum client contact and supervision	Minimum of six semester or nine quarter units of practicum	Those beginning Graduate Study after August 1, 2012 or who are meeting the requirement of the new law	Workshops, seminars, training sessions, and conferences approved by supervisor	Administering and evaluating psychological tests of counselees, writing clinical reports, writing progress notes, or writing process notes	300 Hours Maximum 300 hours maximum personal psychotherapy received (100 x 3 = 300) do not require supervision
Exception: hours for personal psychotherapy	MINIMUM OF 150 HOURS of client contact in practicum	MINIMUM OF 225 HOURS of client contact in practicum although 75 hours may be in client centered advocacy	Up to 500 of the practicum hours of experience (depending on the number actually gained) are exempt from the "six year rule."			

HOURS OF EXPERIENCE REQUIREMENTS AND LIMITATIONS AT A GLANCE						
3,000 Hours Total		1,750 Hours Minimum				
250 HOURS MAXIMUM	300 HOURS MAXIMUM	250 HOURS MAXIMUM	375 HOURS MAXIMUM	500 HOURS MAXIMUM	500 HOURS MAXIMUM	HOURS REMAINING
Workshops, seminars, training sessions, and conferences approved by supervisor	Personal psychotherapy received (100 x 3 = 300 hours) do not require supervision	MAXIMUM LIMITED BY 1250 TOTAL HOURS Individual and Group Supervision (no more than five hours per week)	MAXIMUM LIMITED BY 1250 TOTAL HOURS Client centered advocacy	Administering and evaluating psych tests, writing clinical reports, writing process or progress notes	Diagnosing and treating couples, families, and children. (First 150 hours with couples and families may be double-counted.)	Psychotherapy, crisis counseling, or other counseling by telemedicine (telephone or Internet)
		500 HOURS MINIMUM	250 HOURS MAXIMUM	375 HOURS MAXIMUM	500 HOURS MAXIMUM	500 HOURS MAXIMUM
		Diagnosing and treating couples, families, and children. (First 150 hours with couples and families may be double-counted.)	Administering and evaluating psych tests, writing clinical reports, writing process or progress notes	Psychotherapy, crisis counseling, or other counseling by telemedicine (telephone or Internet)	Group counseling or therapy	May be individual, or couples, families, and children

## Pepperdine University Supervisor Evaluation of MFT Trainee Form

Student Name: \_\_\_\_\_

Academic Program: \_\_\_\_\_

Evaluation Period:     Fall 20\_\_\_\_     Spring 20\_\_\_\_     Summer 20\_\_\_\_     Other \_\_\_\_\_

Agency Name: \_\_\_\_\_

City: \_\_\_\_\_

Clinical Supervisor's Name: \_\_\_\_\_

Phone: \_\_\_\_\_

<p><b>How Competency was Assessed.</b> Check all that apply.</p> <p>A. <input type="checkbox"/> Direct Observation                      B. <input type="checkbox"/> Video  C. <input type="checkbox"/> Audio    D. <input type="checkbox"/> Supervisory Discussion  E. <input type="checkbox"/> Review of Written Reports              F. <input type="checkbox"/> Feedback from others  G. <input type="checkbox"/> Other (specify):  _____</p>	<p>3: Meets standard appropriate to current level of training and experience.</p> <p>4: Meets Standard, appropriate to current level of training and experience.</p> <p>5: Meets standard, exceeds in some competencies</p> <p>6: Exceeds performance standard in most competencies.</p> <p>Note: If student Fails to Meet Standard or Needs Improvement, provide explanation in the Comment box for that Competency.</p>
<p><b>Performance Levels:</b>  <i>Check all boxes that apply within each Competency area and rank student 1 thru 6 based on where majority of boxes are checked for that competency.</i></p> <p>1: Fails to meet standard, requires further training  2: Meets minimum standard, would benefit from further training</p>	

<b>COMPETENCY 1: Clinical Evaluation</b>			
<p>Needs much guidance in <input type="checkbox"/> identifying presenting problems, <input type="checkbox"/> identifying client strengths, and <input type="checkbox"/> identifying possible substance abuse, and <input type="checkbox"/> in connecting presenting problem to DSM diagnoses.</p>	<p><input type="checkbox"/> Can identify treatment unit, presenting problems, and patterns of behavior with guidance. <input type="checkbox"/> Does not always identify risks and self-destructive behaviors. <input type="checkbox"/> Sometimes misses client strengths and needs to be reminded to identify such strengths. <input type="checkbox"/> Does not always assess for substance abuse. <input type="checkbox"/> Needs help connecting DSM criteria to presenting problems. <input type="checkbox"/> Has little understanding of prognostic indicators.</p>	<p><input type="checkbox"/> Generally good at identifying unit of treatment, presenting problems, and patterns of behavior. <input type="checkbox"/> Identifies risks and self-destructive behaviors and implements prevention techniques and identifies appropriate intervention resources. <input type="checkbox"/> Routinely assesses client strengths and coping skills, and possible substance use. <input type="checkbox"/> Generally sufficient in using the DSM but sometimes needs help in identifying appropriate diagnoses. <input type="checkbox"/> Beginning to understand prognostic indicators.</p>	<p><input type="checkbox"/> Consistently good at identifying unit of treatment, presenting problems, and patterns of behavior. <input type="checkbox"/> Identifies risks and self-destructive behaviors and implements prevention techniques and identifies appropriate intervention resources. <input type="checkbox"/> Routinely assesses client strengths and coping skills, and possible substance use. <input type="checkbox"/> Connects presenting problem with DSM diagnosis and identifies possible comorbid disorders. <input type="checkbox"/> Can identify elements relevant to making proper prognosis.</p>
<p>1 Fails to Meet Standard</p>	<p>2                      3 Meets Minimum Standard</p>	<p>4                      5 Meets Standard</p>	<p>6 Exceeds Standard</p>
<p><b>Comments required if student ranks 1 or 2:</b></p>			

<b>COMPETENCY 2: Crisis Management</b>			
<input type="checkbox"/> Is inadequate in identifying indicators of abuse, danger to self, or danger to others. <input type="checkbox"/> Sometimes disputes supervisor's identifications of such indicators. <input type="checkbox"/> Inadequate in issues dealing with trauma. <input type="checkbox"/> Completely relies upon supervisor to develop and implement a plan to reduce the potential for danger and to report these incidents. Requires Comment.	<input type="checkbox"/> Sometimes misses indicators of abuse, danger to self, or danger to others, but understands these signs after discussion with supervisor. <input type="checkbox"/> Mostly relies upon supervisor to develop and implement a plan to reduce the potential for danger. <input type="checkbox"/> Is uncertain in identifying and treating trauma. <input type="checkbox"/> Feels less confident in reporting such crises and defers to supervisor to complete reporting requirements.	<input type="checkbox"/> Generally good at observing and assessing for indicators of abuse, danger to self, or danger to others with support from supervisor. <input type="checkbox"/> Helps in the development and implementation of a plan to reduce the potential for danger. <input type="checkbox"/> Generally good at identifying and treating trauma with assistance from supervisor. <input type="checkbox"/> Manages reporting requirements with assistance from supervisor.	<input type="checkbox"/> Consistently observes and assesses for indications of abuse, danger to self, or danger to others. <input type="checkbox"/> Develops/implements a plan to reduce the potential for danger with appropriate input from supervisor. <input type="checkbox"/> Excellent at identifying and treating trauma. <input type="checkbox"/> Manages reporting requirements appropriately.
1 Fails to Meet Standard	2      3 Meets Minimum Standard	4      5 Meets Standard	6 Exceeds Standard
<b>Comments required if student ranks 1 or 2:</b>			

<b>COMPETENCY 3: Treatment Planning</b>			
<input type="checkbox"/> Inadequate knowledge of principles of systems theory and/or a clinically appropriate theory. <input type="checkbox"/> Difficulty in identifying stages of treatment and imposes treatment goals. <input type="checkbox"/> Does not understand the differences between short- and long-term treatment goals. <input type="checkbox"/> Does not recognize the need for referral and is not aware of appropriate referrals. Requires Comment.	<input type="checkbox"/> Often needs help demonstrating knowledge of principles of systems theory and/or a clinically appropriate theory. <input type="checkbox"/> Needs help in identifying stages of treatment and developing mutually agreed upon, appropriate short- and long-term goals. <input type="checkbox"/> Often needs help recognizing the need for referral for appropriate services and resources.	<input type="checkbox"/> Generally good demonstration of awareness of principles of systems theory and/or a clinically appropriate theory. <input type="checkbox"/> Acceptable identification of stages of treatment and mutually agreed upon, appropriate short- and long-term treatment goals. <input type="checkbox"/> Sometimes needs guidance on recognizing the need for referral for appropriate services and resources.	<input type="checkbox"/> Consistent demonstration of awareness of principles of systems theory and/or a clinically appropriate theory. <input type="checkbox"/> Identifies stages of treatment and sets mutually agreed upon, appropriate short- and long-term goals for treatment. <input type="checkbox"/> Recognizes the need for referral and identifies appropriate services and resources.
1 Fails to Meet Standard	2      3 Meets Minimum Standard	4      5 Meets Standard	6 Exceeds Standard
<b>Comments required if student ranks 1 or 2:</b>			

<b>COMPETENCY 4: Rapport Building</b>			
<input type="checkbox"/> Inadequate in developing empathy and sometimes is not aware of empathy's importance. <input type="checkbox"/> Does not create a safe environment. <input type="checkbox"/> Is unaware of how one's own biases affect treatment outcomes.  Requires Comment.	<input type="checkbox"/> Often does not develop empathy. <input type="checkbox"/> Needs help in creating a safe environment and understanding the problem from the client's perspective. <input type="checkbox"/> Difficulty developing trust with clients and often imposes one's own biases. <input type="checkbox"/> Is not always aware of one's emotions and imposes treatment without much regard to therapeutic working alliance. <input type="checkbox"/> Is not aware of impact of self on clients.	<input type="checkbox"/> Generally good at developing empathy. <input type="checkbox"/> Is adequate in creating a safe environment and attempts to understand the problem from the client's perspective. <input type="checkbox"/> Is adequate in developing trust with clients but sometimes needs to keep biases in check. <input type="checkbox"/> Is developing the ability to control one's emotions. <input type="checkbox"/> Sometimes proceeds to treatment before trust is fully developed. <input type="checkbox"/> Is appropriately aware of impact of self on clients.	<input type="checkbox"/> Consistent demonstration of empathy. <input type="checkbox"/> Creates a safe environment by understanding the problem from the client's perspective. <input type="checkbox"/> Consistently in control of one's emotions and assesses for trust. <input type="checkbox"/> Is aware and uses impact of self on clients in treatment.
1 Fails to Meet Standard	2 Meets Minimum Standard	4 Meets Standard	6 Exceeds Standard
<b>Comments required if student ranks 1 or 2:</b>			

<b>COMPETENCY 5: Treatment</b>			
<input type="checkbox"/> Unable to apply any therapeutic principles.  Requires Comment.	<input type="checkbox"/> Poor knowledge of theoretically appropriate, evidence based treatment, and client-specific clinical interventions. <input type="checkbox"/> Needs help in evaluating client's coping skills to determine timing of interventions. <input type="checkbox"/> Needs guidance in modifying the treatment process based upon therapeutic progress. <input type="checkbox"/> Needs assistance in understanding transference and countertransference issues. <input type="checkbox"/> Poor at case management-related issues. <input type="checkbox"/> Needs help in identifying appropriate termination and transition from treatment.	<input type="checkbox"/> Generally good knowledge of theoretically appropriate, evidence based treatment, and client-specific clinical interventions. <input type="checkbox"/> Is adequate at explaining treatments to clients. <input type="checkbox"/> Good in evaluating client's coping skills to determine timing of interventions. <input type="checkbox"/> Good in modifying the treatment process by monitoring therapeutic progress. <input type="checkbox"/> Is gaining awareness of transference and countertransference issues. <input type="checkbox"/> Adequate at case management-related issues. <input type="checkbox"/> Good in developing a plan for termination with client to provide a transition from treatment.	<input type="checkbox"/> Demonstrates consistent knowledge of theoretically appropriate, evidence based treatment, and client-specific clinical interventions. <input type="checkbox"/> Very good skills in explaining treatments in ways clients can understand. <input type="checkbox"/> Consistent in evaluating client's coping skills to determine timing of interventions. <input type="checkbox"/> Consistent in modifying the treatment process by monitoring therapeutic progress. <input type="checkbox"/> Has good awareness of transference and countertransference issues. <input type="checkbox"/> Good at case management-related issues. <input type="checkbox"/> Consistent in developing a plan for termination with client to provide a transition from treatment.
1 Fails to Meet Standard	2 Meets Minimum Standard	4 Meets Standard	6 Exceeds Standard
<b>Comments required if student ranks 1 or 2:</b>			

<b>COMPETENCY 6: Human Diversity</b>			
<input type="checkbox"/> Unable to understand the importance of issues of diversity.  Requires Comment.	<input type="checkbox"/> Needs help in identifying issues of diversity which impact the therapeutic environment. <input type="checkbox"/> Sometimes is unable to disentangle one's own values from client's values, which sometimes interferes with treatment strategies.	<input type="checkbox"/> Generally good at identifying issues of diversity which impact the therapeutic environment. <input type="checkbox"/> Is able to provide an unbiased therapeutic environment when client's values or beliefs are different from one's own views. <input type="checkbox"/> Can apply treatment strategies consistent with client's values, beliefs, and/or worldviews.	<input type="checkbox"/> Consistent at identifying issues of diversity which impact the therapeutic environment, including issues of gender, sexual orientation, culture, ethnicity, age, disability, and religious/faith beliefs on the therapeutic process. <input type="checkbox"/> Consistent at providing an unbiased therapeutic environment when client's values, beliefs, and/or worldviews are different from one's own views.
1 Fails to Meet Standard	2      3 Meets Minimum Standard	4      5 Meets Standard	6 Exceeds Standard

**Comments required if student ranks 1 or 2:**

<b>COMPETENCY 7: Law</b>			
<input type="checkbox"/> Poor understanding of legal issues relevant to this clinical setting.  Requires Comment.	<input type="checkbox"/> Needs help in recognizing legal issues, managing mandated reporting requirements, and obtaining client's (or legal guardian's) authorization for release to disclose or obtain confidential information. <input type="checkbox"/> Does not always understand the reasoning behind the need for legal requirements. <input type="checkbox"/> Needs to be reminded of issues surrounding security of therapy records. <input type="checkbox"/> Is not very knowledgeable of laws relevant to practice.	<input type="checkbox"/> Adequately knowledgeable of legal issues relevant to this clinical setting. <input type="checkbox"/> Adheres to legal statutes, and generally understands and appropriately manages mandated reporting requirements with some assistance from supervisor. <input type="checkbox"/> Obtains client's (or legal guardian's) authorization for release to disclose or obtain confidential information. <input type="checkbox"/> Maintains security of clinical records. <input type="checkbox"/> Is developing knowledge of and follows law in clinical practice.	<input type="checkbox"/> Consistent knowledge of legal issues relevant to this clinical setting. <input type="checkbox"/> Adheres to legal statutes, and understands and appropriately manages mandated reporting requirements. <input type="checkbox"/> Obtains and understands the need for client's (or legal guardian's) authorization for release to disclose or obtain confidential information. <input type="checkbox"/> Maintains security of client therapy records. <input type="checkbox"/> Aware of and follows law in clinical practice.
1 Fails to Meet Standard	2      3 Meets Minimum Standard	4      5 Meets Standard	6 Exceeds Standard

**Comments required if student ranks 1 or 2:**

<b>COMPETENCY 8: Ethics</b>			
<input type="checkbox"/> Poor understanding of ethical issues relevant to this clinical setting.  Requires Comment.	<input type="checkbox"/> Needs help in recognizing ethical issues arising in this clinical setting. <input type="checkbox"/> Needs reminders to inform clients of parameters of confidentiality and conditions of mandated reporting. <input type="checkbox"/> Is not aware of one's scope of practice and attempts to treat all problems. <input type="checkbox"/> Needs reminders of appropriate therapeutic boundaries. <input type="checkbox"/> Has difficulty in identifying personal reactions/countertransference issues that could interfere with the therapeutic process and sometimes denies or disputes these issues when pointed out by supervisor.	<input type="checkbox"/> Generally good knowledge of ethical issues arising in this clinical setting. <input type="checkbox"/> Is able to inform clients of parameters of confidentiality and conditions of mandated reporting. <input type="checkbox"/> Maintains appropriate therapeutic boundaries. <input type="checkbox"/> Is not always aware of one's scope of practice. <input type="checkbox"/> Sometimes needs help in identifying personal reactions/countertransference issues that could interfere with the therapeutic process, but can easily correct oversights in this area. <input type="checkbox"/> Together with supervisor, identifies personal limitations that require outside consultation.	<input type="checkbox"/> Demonstrates excellent knowledge of ethical issues arising in this clinical setting. <input type="checkbox"/> Consistently informs clients of parameters of confidentiality and conditions of mandated reporting. <input type="checkbox"/> Maintains appropriate therapeutic boundaries. <input type="checkbox"/> Consistent at staying within scope of practice. <input type="checkbox"/> Consistent ability to identify personal reactions/countertransference issues that could interfere with the therapeutic process, and identifies personal limitations that require outside consultation.
1 Fails to Meet Standard	2 Meets Minimum Standard	4 Meets Standard	6 Exceeds Standard
<b>Comments required if student ranks 1 or 2:</b>			

<b>COMPETENCY 9: Personal Qualities</b>			
<input type="checkbox"/> Has demonstrated lapses in integrity, initiative, motivation, attitude, self-awareness. <input type="checkbox"/> Has demonstrated lapses in oral and written communication skills. Requires Comment.	<input type="checkbox"/> Needs improvement in demonstrating integrity, initiative, motivation, attitude, self-awareness. <input type="checkbox"/> Needs improvement in oral and written communication skills.	<input type="checkbox"/> Generally acceptable demonstration of integrity, initiative, motivation, attitude, self-awareness. <input type="checkbox"/> Generally acceptable oral and written communication skills.	<input type="checkbox"/> Consistent demonstration of integrity, initiative, motivation, attitude, self-awareness. <input type="checkbox"/> Consistently demonstrated good oral and written communication skills.
1 Fails to Meet Standard	2 Meets Minimum Standard	4 Meets Standard	6 Exceeds Standard
<b>Comments required if student ranks 1 or 2:</b>			

<b>COMPETENCY 10: Professional Documentation</b>			
<input type="checkbox"/> Does not adhere to deadlines and professional documentation standards Requires Comment.	<input type="checkbox"/> Does not always maintain timely and orderly paperwork and sometimes skirts agency policies.	<input type="checkbox"/> Maintains timely and orderly paperwork and adheres to agency policies.	<input type="checkbox"/> Consistent maintenance of timely and orderly paperwork, and adherence to agency policies.
1 Fails to Meet Standard	2 Meets Minimum Standard	4 Meets Standard	6 Exceeds Standard
<b>Comments required if student ranks 1 or 2:</b>			

COMPETENCY 11: Professionalism			
<input type="checkbox"/> Does not demonstrate professionalism in the work setting.  Requires Comment.	<input type="checkbox"/> Appearance and attire is frequently inappropriate for agency setting. <input type="checkbox"/> Is inconsistent in punctuality and in meeting responsibilities to agency and to relationships with professional colleagues. <input type="checkbox"/> Is not very aware of the need for self care.	<input type="checkbox"/> Appearance appropriate to agency setting. <input type="checkbox"/> Acceptable demonstration of punctuality and in meeting responsibilities to agency and to relationships with professional colleagues. <input type="checkbox"/> Is developing the understanding of the importance of self care.	<input type="checkbox"/> Consistently demonstrates proper appearance appropriate to agency setting. <input type="checkbox"/> Consistently demonstrates punctuality and responsibilities to agency and to relationships with professional colleagues. <input type="checkbox"/> Has the ability to understand the need for self care as it relates to effective clinical practice.
1 Fails to Meet Standard	2 3 Meets Minimum Standard	4 5 Meets Standard	6 Exceeds Standard
Comments required if student ranks 1 or 2:			

COMPETENCY 12: Supervision			
<input type="checkbox"/> Resistant to supervision and does not make improvements after repeated input from supervisor.  Requires Comment.	<input type="checkbox"/> Needs to make better use of supervision. <input type="checkbox"/> Does not always come prepared to discuss cases or issues of concern. <input type="checkbox"/> Has difficulty in presenting full case conceptualizations. <input type="checkbox"/> Is somewhat resistant to supervisory input, and sometimes openly argues with supervisor's observations and/or suggestions.	<input type="checkbox"/> Does not always seek supervision when needed, preferring to wait until regularly scheduled supervisory sessions. <input type="checkbox"/> Comes prepared to supervision sessions, but sometimes needs prompting by supervisor to share concerns. <input type="checkbox"/> Is generally good at presenting full case conceptualizations but sometimes leaves relevant details out of presentation. <input type="checkbox"/> Is generally open to supervision and makes improvements when needed.	<input type="checkbox"/> Seeks supervision when needed, comes prepared for supervision sessions, and openly shares concerns and ideas with supervisor. <input type="checkbox"/> Can present full case conceptualizations. <input type="checkbox"/> Consistently demonstrates openness to feedback and uses supervisory suggestions to make improvements when needed.
1 Fails to Meet Standard	2 3 Meets Minimum Standard	4 5 Meets Standard	6 Exceeds Standard
Comments required if student ranks 1 or 2:			

OVERALL ASSESSMENT			
1 Fails to Meet Standard	2 3 Meets Minimum Standard	4 5 Meets Standard	6 Exceeds Standard
Comments required if student ranks 1 or 2:			

<b>Areas of Strength:</b>
<b>Areas in Need of Further Development:</b>
<b>Plans for Development or Remediation:</b>
<b>Consultation with school requested by clinical supervisor:</b> No <input type="checkbox"/> Yes <input type="checkbox"/> Best day/time: _____

<b>Signatures:</b>	
_____ Student's Signature	_____ Date
_____ Supervisor's Signature	_____ Date
_____ Pepperdine University Practicum Instructor Signature	_____ Date

<b>Supervisor's Comments (optional):</b>
<b>Student's Comments (optional):</b>



**Hours of Supervised Experience During This Evaluation Period**

Dates covered by this evaluation and reflected in the BBS Weekly Summary of Hours: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Total hours of clinical services provided during this academic term:

Individual Therapy: \_\_\_\_\_ Hours

Couple, Family & Child Therapy: \_\_\_\_\_ Hours\*

Group Therapy/Counseling: \_\_\_\_\_ Hours

**Total Face-to-Face Client Contact:** \_\_\_\_\_ Hours

*\*Do not double count conjoint couples and family therapy hours.*

Total hours of supervision and training received during this academic term:

Individual Supervision: \_\_\_\_\_ Hours

Group Supervision: \_\_\_\_\_ Hours

Were direct observations completed (**two direct observations** for fall and spring semesters, one for summer term)

Yes  No

Did the student meet for clinical supervision at least **10 weeks** during the time stated above Yes  No

The clinical supervisor met, reviewed and discussed this evaluation with the student. Yes  No

If No, please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Pepperdine University**  
**MFT Clinical Training Program**

**MFT STUDENT'S EVALUATION OF SUPERVISION AND AGENCY**

Note: Please return this evaluation to your practicum instructor by the last week of class. Should you have more than one practicum site or supervisor, please contact your Clinical Training Coordinator to discuss the evaluation procedures. Please know that a general evaluation of your site (including this form) will be anonymously shared with other MFT students.

Student name: \_\_\_\_\_ Date: \_\_\_\_\_

Student's phone number: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Primary Supervisor: \_\_\_\_\_  
(Name) (Degree/Title) (License)

Practicum Site: \_\_\_\_\_

Address: \_\_\_\_\_

Agency Telephone: (\_\_\_\_\_) \_\_\_\_\_

In which semester of Practicum are you enrolled? 1st \_\_\_ 2nd \_\_\_ 3rd \_\_\_

**Please note: If this is your third term of Practicum and you plan to graduate**, you must have received 150 hours of client contact. If you have received any IP grades in Practicum, you must have them changed to a grade of "credit" in order to graduate.

Dates covered by this evaluation: January 7th – April 19th to 2013

**PART I: GENERAL INFORMATION**

1. Type and amount of supervision received:
  - a. \_\_\_\_\_ hours per week of individual supervision
  - b. \_\_\_\_\_ hours per week of group supervision (with 8 unlicensed individuals or less)
  
2. Supervision approach: (Check all that apply) Please note: You will need 2 Direct Observations for the term, however, they may be earned by completing one at each site (preferable) or if one site does not permit Direct Observation, then both Direct Observations are allowable at the same site.
  - a. \_\_\_\_\_ Case Report
  - b. \_\_\_\_\_ Audio Tape
  - c. \_\_\_\_\_ Video Tape
  - d. \_\_\_\_\_ One-way Mirror
  - e. \_\_\_\_\_ Supervisor in room

3. Did your supervisor utilize family therapy models in discussing clients? (Check One)

always  most of the time  sometimes  seldom  never

Please specify which systems orientation (s) \_\_\_\_\_

4. Approximately what percentage of counseling did you do at this site?

Children  Couples  Families  Individuals  Group

5. What kinds of client problems did you work with at this site? \_\_\_\_\_

6. Does this agency specialize in a specific type of client and/or problem?

No  Yes (Specify: \_\_\_\_\_)

**PART II: EVALUATION OF SUPERVISOR**

(Circle one response for each item)

	<u>Outstanding</u>	<u>Good</u>	<u>Average</u>	<u>Below</u>	<u>Poor</u>
1. Was open to my ideas & opinions	5	4	3	2	1
2. Related well to me interpersonally	5	4	3	2	1
3. Helped me better understand my theoretical model(s)	5	4	3	2	1
4. Helped me better understand and use <b>family therapy models</b>	5	4	3	2	1
5. Assisted me in assessing interactions more skillfully	5	4	3	2	1
6. Helped me improve my therapy skills and techniques	5	4	3	2	1
7. Assisted me in learning how to develop better treatment plans	5	4	3	2	1
8. Made clear the expectations regarding supervision	5	4	3	2	1
9. Provided me with freedom to develop my own counseling style	5	4	3	2	1

10. Recognized & encouraged strengths	5	4	3	2	1
11. Recognized and assisted me with my areas of improvement	5	4	3	2	1
12. Was responsible in regards to supervision (on time, kept appointments, etc.)	5	4	3	2	1
13. Demonstrated appropriate ethical behavior	5	4	3	2	1
14. Was a positive role model	5	4	3	2	1
<b>OVERALL EVALUATION OF THE QUALITY OF MY SUPERVISION</b>	5	4	3	2	1

**PART III: EVALUATION OF PRACTICUM SITE**

(Circle one response for each item)

	<u>Outstanding</u>	<u>Good</u>	<u>Average</u>	<u>Below</u>	<u>Poor</u>
1. Knowledge and skill of Professionals (administration, General staff, other supervisors)	5	4	3	2	1
2. Ability of professionals to relate to students	5	4	3	2	1
3. Amount of training provided	5	4	3	2	1
4. Quality of training provided (other than regular supervision)	5	4	3	2	1
<b>OVERALL RECOMMENDATION OF THIS SITE FOR OTHER PEPPERDINE STUDENTS</b>	5	4	3	2	1

#### **PART IV: DESCRIPTION OF PRACTICUM SITE EXPERIENCE**

Please describe what you believe are the major strengths and major challenges of your practicum site experience. This feedback is very important in the overall assessment of this site. Use the back of this form if additional space is needed.

**Strengths:**

**Challenges:**

**IF YOU ARE A 3<sup>RD</sup> TERM PRACTICUM STUDENT PLEASE CONTINUE TO THE NEXT PAGE**

Pepperdine University  
MFT Clinical Training Program

**VERIFICATION OF 150 HOURS FORM**

**This section must be completed by third term practicum students only:**

(A) <b>TOTAL Direct Client Contact Hours accumulated over 6 Semester units of practicum</b> <b>Note:</b> You must have a minimum of 150 hours of direct client contact to graduate. (Do not include telephone client contact hours.)	(B) <b>Total Supervision Units Accumulated over 6 Semester units of practicum</b> <b>Note:</b> 1 supervision unit = 1 hour individual or 2 hours group)	(C) <b>Did you meet the 5:1 ratio for the minimum required 150 direct client contact hours?</b> <b>Note:</b> To determine your ratios divide your total direct client hours by 5. Your total supervision units (in section B) should meet or exceed this number. (i.e., if your total client contact hours = 250, you will divide this by 5 and 50 units of supervision will be required for all 250 to be counted toward licensure). If you do not have enough supervision units to meet the 5:1 client contact to supervision ratio, you will not be able to count excess client contact hours for licensure.
Total Direct Client Contact Hours _____	Total Supervision Units _____	Yes _____ No _____

**Student Name** \_\_\_\_\_

**Student Signature** \_\_\_\_\_

**Note to graduating students:** You should attend the MFT Intern Registration meeting that will be held during the Psy 642 class at any of the three evening campuses. If you missed the Intern Registration meeting, please set a time to meet with your CTC to review important MFT intern registration information.

# Critical Reminders

## For Interns, Trainees, and Supervisors

Mary Riemersma, CAE (Former CAMFT Executive Director)

Updated April 2012 by Ann Tran-Lien, JD, Staff Attorney

The information that follows has been compiled to assist interns, trainees, and applicants in navigating the sometimes complicated intricacies of the licensing law and regulations while pursuing licensure. Understanding the law and regulations is critical to acquiring hours of experience and subsequently qualifying for the license as quickly and efficiently as possible. Use this resource as a guide to assure the protection of your hard-earned hours of experience. This information is likewise critical to supervisors to be able to provide the most accurate information and to not lead supervisees astray.

### **BBS' Current Address:**

Board of Behavioral Sciences 1625 North Market Blvd., Suite S-200, Sacramento, CA 95834; Phone (916) 574-7830; Fax: (916) 574-8625; Website: [www.bbs.ca.gov](http://www.bbs.ca.gov).

Requests for applications and forms can be printed from the BBS website, which is likely the most expeditious way to acquire the forms. Requests for BBS forms and applications may also be made in writing to the above address or by telephone. If you request by telephone or in writing, be sure to make your requests for forms early so that you are prepared with forms when you need them. Generally allow at least two weeks for requests by mail or phone to be processed.

### **Communicating with the BBS**

When communicating with the BBS, especially when submitting forms and applications, it is recommended that you mail "certified, return receipt requested." Likewise, keep photocopies of all that you submit to the Board and attach the "certified return receipt" to the copy you retain. It is to your advantage to keep accurate records, as you may need these should there be any question about your hours of experience or supervision.

### **Retain Copies of Application Materials**

On another note, be sure to keep copies of any applications in perpetuity. One never knows what direction life events will take. Your application may get lost in the mail. You may need the application many years later when you, because of life events, wish to relocate to another state and need to apply for licensure within the new jurisdiction. Expecting to acquire copies of the forms from the BBS, after many years have passed, may be difficult if not impossible.

### **Be Truthful on Applications (Even if it Hurts)**

Be careful, cautious, and truthful on applications. Do not fail to disclose a past conviction even if you believe it is no longer accessible, or has been expunged. Providing a letter describing what happened, what you have accomplished to assure rehabilitation, and enclosing a copy of any disposition would be worthwhile.

### **Intern Registration**

Allow at least 60 days for processing your application for Intern Registration. Processing may be more rapid, but it could also be delayed, especially if something is inadvertently omitted from the application or not clear in the application. Unreadable fingerprinting may also cause a delay and sometimes resubmissions are necessary, which could significantly delay the processing of applications. In other words, apply as early as possible. If one submits an application for intern registration within 90 days of being granted a degree (regardless of how long it takes to process the application), the hours of experience gained post-degree will count as long as lawfully employed and not employed in a private practice.

### **Intern/Post Degree Experience**

Applicants who are post-degree who did not apply for intern registration within 90 days of their degrees being granted will not be able to accrue any hours post degree until the intern registration numbers are actually granted. One should anticipate that application processing could take 60 days or in some cases even longer if there are unanswered questions, finger-printing difficulties, or other problems.

### **First-Time Examination Candidates**

The Exam Eligibility application is where you submit all hours of experience for the Board's review to qualify for the license. Currently, LMFT exam applicants should allow a minimum of five months for processing.

#### **Written Examinations**

Applicants for the LMFT exam must take written examinations that are administered continuously. When you are notified by the BBS of eligibility to take the written examination, you will need to schedule yourself with the entity with whom the Department of Consumer Affairs has contracted to administer the examinations.

#### **Re-Examinees**

Candidates who do not pass either the regular written exam or the clinical vignette written exam will need to sign-up to be reexamined. Candidates being re-examined will be required to pay an additional examination fee in a timely manner. Re-examinations are required to be at least 180 days following the candidates' most recent examination date. Re-examinees must wait until the next examination cycle to retake a "failed" examination in order to take a new form of the examination. This "waiting" period also provides ample time to study and further prepare for retaking the examination.

#### **Clinical Vignette Examination First Time Candidates**

Candidates are considered eligible for the clinical vignette examination after passing the written examination. Like the regular written examination, candidates schedule themselves to take the exams.

#### **Taking Exams When Offered is Important**

**Caution**—Generally speaking, a person who does not take an examination or re-examination within one year of eligibility of examination will have his/her application abandoned, which will require re-application. If you must reapply, you may possibly lose hours of experience that may be too old to be countable at the time of re-application.

**Recommendation**—Take exams whenever they are available to you even if you do not feel 100 percent prepared. There is no limit to the number of times one can take an exam.

**Please Note:** Effective January 1, 2013, applicants for the MFT licensure will be required to pass two new exams: a California law and ethics examination and a clinical examination (SB 704). These new exams would replace the standard written and the clinical vignette exams currently in place. The California law and ethics examination must be taken during the registration period while the applicant gains hours of experience. The registrant will take the clinical examination once all supervised work experience and education requirements have been completed, and the California law and ethics examination has been successfully taken.

#### **Information for Trainees, Interns, and Applicants**

A "trainee" is a person who is in his/her graduate degree program to qualify for the license and has completed 12 semester or 18 quarter units of study. An "intern" is a person who has been granted his/her degree to qualify for the license, has applied for and been granted his/her intern registration number from the BBS. A "post-degree applicant" is either a person who has been granted his/her degree and applies for intern registration within 90 days of being granted that degree or has applied for the license and/or is in the process of being examined to qualify for the license.

#### **Guidelines on Hours of Experience**

Following are requirements for collecting hours of experience for licensure as an LMFT in the State of California. These requirements are paraphrased from the licensing law and regulations governing the marriage and family therapist profession. A minimum of 3,000 hours of experience is required. Such experience may be gained in no less than 104 weeks, which spans the period from being a trainee through being a registered intern.

#### **Trainee Experience**

Not more than 750 hours of counseling and direct supervisor contact may be obtained prior to the granting of the qualifying degree (This limitation on hours does not include professional enrichment activities such as workshops and personal psychotherapy received). "Trainees" are unlicensed persons enrolled in qualifying master's or doctor's degree programs who have completed no less than 12 semester units or 18 quarter units of coursework. As a trainee, one can gain a maximum of 1,300 hours, including a maximum of 750 hours of counseling and direct supervisor contact. A minimum of 1,700 hours must be gained subsequent to the granting of the master's or doctor's degree. Trainees are not required to have completed 12 semester or 18 quarter units of study to receive personal psychotherapy for countable hours. These are the only hours that do not require supervision. Keep in mind, however, that such experience will only count if the psychotherapist is a licensed professional, but such licensee needs only a current and valid license and does not need to be two years licensed. The psychotherapist provides verification for



these hours that do not require supervision. There is no BBS-specific form to record these hours.

#### **Practicum Hours of Experience**

Hours of experience gained during the practicum, as required within the educational program, may be counted as hours of experience (i.e., hours of experience gained doing therapy, as opposed to classroom instruction). Further, up to 500 clinical hours of practicum experience is exempt from the “six-year-rule” (see page 46). Even though all practicum hours may be countable as hours of experience, only 500 hours may be older than six years. Additionally, hours of experience gained as a trainee must be coordinated between the school and the site where the hours are being accrued. The school must approve each site and must have a written agreement with each site. Hours gained during practicum, like all other hours of experience, must be accounted for on the BBS Weekly Summary of Hours Forms. Students who enter into a graduate program on or after August 1, 2012 or students who are currently enrolled in a graduate program that meets the requirements of the “new curriculum,” must complete a minimum of 225 hours of experience in supervised practicum, of which 75 hours may be in client-centered advocacy. Further, these students may only counsel clients and gain these hours toward licensure when enrolled in a practicum course, with the exception of a 90 day period, if the 90 day period is immediately preceded and proceeded by enrollment in a practicum course.<sup>1</sup>

#### **Maximum Hours Per Week for Interns and Trainees**

No more than 40 hours of experience may be credited for any seven consecutive days. These 40 hours are inclusive of all categories of experience (e.g., supervision, workshops, client contact hours, etc.).

#### **Minimum Hours for Couples, Families, and Children**

Not less than 500 total hours of experience shall have been gained in diagnosing and treating couples, families, and children. These hours may be in any combination, e.g., all children or a mix of couples, families, and children. The first 150 hours of treating couples and families the hours are double-counted.

#### **Psychological Testing, Process/Progress Notes and Client-Centered Advocacy**

Not more than 500 hours of experience will be credited for administering and evaluating psychological tests of counselees, writing clinical reports, writing progress notes, or writing process notes and client-centered advocacy. These hours are optional.

#### **Group Counseling or Therapy**

No more than 500 hours of experience will be credited for providing group therapy or group counseling. Group counseling hours are optional. When counseling groups of children, you may record the hours under “children.”

#### **Telehealth**

Not more than 375 hours of experience may be counted toward providing psychotherapy, crisis, or other counseling services via telehealth (Telephone and/or Internet therapy). These hours are optional.

#### **Hours of Supervision—Individual and Group**

During each week in which experience is claimed and for each work setting in which experience is gained, an applicant shall have at least one hour of direct supervisor contact or two hours of direct supervisor contact in a group of not more than eight persons receiving supervision. The intern/trainee shall have at least two hours of group supervision in every week in which group supervision is claimed. Group supervision is optional. Group supervision may be acceptable when gaining, for example, an hour on Monday and an hour on Wednesday, as long as the hours are both in the same seven day period making up the week. Supervision hours are actual 60 minute hours, not 45 to

50 minute therapy hours. Each hour of group supervision counts as an hour of experience. If less than two hours of group supervision are provided within the week, the supervision hours will not count and one’s hours of experience may be jeopardized. The intern/trainee shall receive at least one hour of direct supervisor contact per week for a minimum of 52 weeks. These weeks need not be consecutive. Individual supervision means one supervisor and one person being supervised.

*Note: In other words, there must be 52 separate weeks within which at least one hour of individual, face-to-face supervision has been provided.* Direct supervisor contact means face-to-face supervision, which also includes contact via two-way, real-time video conferencing for interns who work in a non-profit, governmental, or educational institution.

#### **Maximum Countable Supervision Per Week**

Not more than five hours of supervision, whether individual or group, shall be credited during any single week. Keep in mind, however, that it may be necessary to gain and record more than five hours of supervision in a week to be able to credit all hours of experience gained.

#### **Ratios for Interns, Trainees, and Applicants**

Trainees shall receive an average of at least one hour of direct supervisor contact for every five hours of client contact in each setting. While there must be supervision within each week, these ratios need not be

accounted for within each week, they are calculated based upon the average gained over the entire period of time one works in a given work-setting. Interns shall receive at least one hour of direct supervisor contact for the first ten hours of client contact in each setting and one additional hour for any hours over ten in a work setting. When the hours have been approved by the BBS (following the application to take the regular written examination), it is no longer necessary to meet the ratios of experience to supervision. However, at least one hour of individual supervision or two hours of group supervision continues to be required for each work setting until licensed.

#### **Supervision/Professional Enrichment Activities**

Not more than a combined total of 1,000 hours of experience for related professional enrichment activities will be counted. Such activities include:

- Not more than 250 hours of workshops, training sessions, seminars, and conferences while under supervision and as approved by supervisor. The maximum while as an intern, a trainee, or both is 250 hours. These hours are optional.
- Actual hours of supervision.
- Not more than 300 hours (when 100 hours are triple-counted) of personal psychotherapy received from a California licensed mental health professional. These hours do not require supervision. One may not get psychotherapy from one's supervisor. Psychotherapy hours include group, marital or conjoint, family, or individual psychotherapy received. The two year license requirement applicable to supervisors is not applicable to this experience. These hours are optional. There is no BBS form for these hours. Applicants will log these hours on the Exam Eligibility application. Have the mental health professional provide a letter or statement verifying hours.

#### **Weekly Summary of Hours**

Each trainee and intern shall maintain a weekly summary of all hours of experience gained toward licensure. The weekly summary shall be signed by the supervisor on a weekly basis. An applicant shall retain all such logs until such time as the applicant is licensed by the Board. The Board shall have the right to require an applicant to submit all or such portions of the weekly summary as it deems necessary to verify hours of experience. (These logs are generally not submitted to the Board with the application for licensure.)

*Note: Make sure your supervisor signs the logs each week. These documents provide verification that you actually gained experience during the periods indicated. Additionally, we would recommend that you retain these documents indefinitely. You never know when you might need them.*

#### **Experience Verification**

Each trainee and intern shall submit to the BBS a completed and signed Experience Verification form with his/her exam eligibility application. The supervisor must complete and sign the form. Any changes should be initiated by the supervisor and the Board may verify such changes. A separate form should be used for each supervisor verifying hours of supervised experience and for each employment setting. A separate form should be used for pre-degree and post degree hours.

#### **“Six-Year Rule”**

All 3,000 hours of experience, with the exception of the practicum hours described above, must have been gained in the six years immediately preceding the date the application for examination is filed. Thus, the maximum amount of time for which hours may be credited, with the exception of up to 500 qualifying practicum hours, is six years (This is affectionately known as the “six-year rule.”). This “six-year rule,” provides that all experience shall be gained within the six years immediately preceding the date the application for licensure was filed, except that up to 500 hours of clinical experience gained in the supervised practicum shall be exempt from this six-year requirement.

Another way to view the six-year rule is if you want to count the first hour you have gained and that hour is not an hour gained in practicum, you would have to apply for licensure/examination within six years of that first hour. For example, if you applied for licensure on January 1, 2020, all hours except for the 500 protected practicum hours would need to be completed between January 1, 2014 and December 31, 2019.

#### **The Other Six-Year Limit—Intern Registration**

Persons who do not complete their hours of experience within the initial six-year intern registration period must reapply for a new intern registration. Such persons may not work in private practice. Hours from one intern registration roll into another intern registration period; however, in no case may the hours submitted to qualify for licensure be older than six years, with the exception of up to the 500 exempt hours gained during the practicum.

*Note: The six-year intern registration and the six-year limitation on hours may totally or partially overlap, but they*

*are separate and distinct periods of time that should not be confused. These two six-year periods of time are critical for applicants to understand. If the initial six-year intern registration is exhausted, one must apply for and qualify for a new intern registration number. The hours now carry forward into the next intern registration period (which was, at one time, not the case).*

#### **Supervision Reminders Current Valid License**

Make sure your supervisor holds a current, valid license, which is not under suspension or probation by a licensing board. Sometimes licensees neglect to notify the BBS, or other licensing board, of a move—consequently, they may neglect to renew their licenses in a timely manner. Also, be certain that the supervisor has been California licensed for two years prior to commencing supervision. The following licensed professionals may be supervisors: licensed marriage and family therapists, physicians certified in psychiatry by the American Board of Psychiatry and Neurology, psychologists, licensed clinical social workers, and licensed professional clinical counselors (must complete additional training and education as specified in Business and Professions Code prelicences’ corner 4999.20(3)). Verify on the licensing boards’ website that the supervisor’s license is current, valid, and not under suspension or probation. Be sure to check again at the time of the supervisor’s next renewal to make sure that the license is subsequently renewed. A supervisor’s failure to renew his or her license will result in a loss of hours to the supervisee.

*Note: The only exception to the two-year license requirement is supervisors who provide supervision only to trainees at an academic institution that offers a qualifying degree program, where the supervisor has been licensed in California and in any other state, for a total of at least two years prior to commencing any supervision.*

#### **Supervisor Mandatory Continuing Education**

Supervisors, licensed by the Board of Behavioral Sciences who supervise MFT interns and trainees, are required to complete each license renewal period, six hours of continuing education in supervision. This coursework is to be taken either prior to or within 60 days after commencing the supervision of an intern or trainee. However, the supervisor’s negligence in failing to take the required coursework will not result in the loss of hours for the intern or trainee.

#### **Payment for Supervision**

According to the Department of Labor it is unlawful for an MFT intern or trainee to pay his or her employer for supervision. This restriction would also be applicable to volunteers who would likewise not be permitted to pay his/her volunteer setting for supervision. An intern or trainee may lawfully pay for offsite supervision in any setting other than private practice.

#### **Offsite Supervision or Supervision Not Paid for by the Employer**

It is permissible to get offsite supervision in any work setting other than private practice. It is also permissible for MFT interns, trainees, and applicants to pay for supervision to their offsite supervisors, but only where an appropriately executed letter of agreement exists. This letter of agreement (the original) must be filed by the applicant with his/her application to take the examinations for licensure. A Sample “Letter of Agreement For Offsite Supervision” can be found at the end of this article. This letter of agreement should be typed onto the letterhead of the employer as it is the employer who is permitting the “offsite supervision,” or permitting the supervisee to get supervision not provided by the employer.

#### **Who May Not Supervise**

Interns and trainees are not to gain any experience under the supervision of a spouse, relative, or domestic partner. Any experience obtained under the supervision of a supervisor with whom the applicant has had or currently has a personal or business relationship that undermines the authority or effectiveness of the supervisor shall not be credited toward the required hours of supervised experience. Additionally, interns and trainees cannot receive supervision from anyone who has ever been their therapist.

#### **Individual Supervision**

Individual supervision means one supervisor and one person being supervised. As regulation specifies, supervision is to be “one-on-one, individual, and face-to-face.” One hour of individual supervision means 60 minutes of supervision.

#### **Group Supervision**

Group supervision means a group of not more than eight persons being supervised by one supervisor. Again, the supervision, according to regulation, is to be “face-to-face.” Two supervisors for a group of sixteen supervisees would not be acceptable. Two hours of group supervision means one hundred twenty minutes of supervision. Each hour of supervision may occur on different days as long as it occurs within the same week in which the hours are being claimed.

#### **Exception to Face-to-Face Supervision**

An exception to face-to-face supervision is where an intern is working in a government entity, a school, college, or university, or an institution that is both nonprofit and charitable, and such intern may gain supervision by two way, real-time videoconferencing.

#### **Other Supervision Guidance**

Supervisees may have some weeks where they receive solely individual supervision and some weeks where they receive solely group supervision. Separate supervision is required for each work setting in which one is gaining hours of experience. For example, intern in setting one gains three hours of experience and is therefore required to have one hour of individual or two hours of group supervision in that setting, and in setting two sees five clients and is also required to have one hour of individual or two hours of group supervision for this setting. For hours of experience to count within a given week, supervision must occur within the same week that the hours are gained. However, for trainees the ratios are not necessarily required to be achieved within the same week as the hours of experience are gained. A supervisor may supervise an unlimited number of interns and trainees in any appropriate work setting other than private practice, but is limited to supervising three MFT interns when those interns are employed in private practice. Supervisors are limited to supervising groups of no more than eight persons under supervision. A supervisor shall give at least one week's written notice to an intern or trainee of the supervisor's intent not to sign for any further hours of experience for such person. A supervisor who has not provided such notice would be obligated to sign for hours of experience obtained in good faith where such supervisor actually provided the required supervision and the supervisee actually gained experience. The supervisor is required to have practiced psychotherapy or provided direct supervision for at least two years within the five year period immediately preceding any supervision. The supervisor is required to address with the intern or trainee the manner in which emergencies will be handled. The supervisor is required to obtain from the supervisee, the name, address, and telephone number of the prior supervisor and employer. The intent is that the supervisor will address with the prior supervisor and employer issues and concerns that will benefit the supervision of the intern or trainee. The supervisor is required to verify that the site is appropriate for gaining hours of experience.

#### **Miscellaneous Reminders Employment/Volunteer/Independent Contractor**

Interns, trainees, and applicants may only perform services as employees (IRS Form W-2) or as volunteers, and not as independent contractors (IRS Form 1099). Interns, trainees, and applicants who have been hired and paid on an independent contractor basis will have their hours denied. The BBS views independent contractor status as self-employment, which is the reason such hours are denied. One may only be self-employed following licensure. If employed, an applicant for the license shall provide the Board with copies of the corresponding W-2 tax forms for each year of experience claimed when applying for the license. If volunteering, an applicant shall provide the BBS with a letter from his or her employers verifying the intern's employment as a volunteer when applying for the license.

#### **Payment for Expenses**

Trainees, interns, and applicants who provide volunteered services or other services, and receive no more than a total, from all work settings, of \$500 per month as reimbursement for expenses actually incurred for services rendered in any lawful work setting other than private practice, shall be considered employees and not independent contractors. The Board may audit applicants who receive reimbursement for expenses, and applicants have the burden of demonstrating that the payments received were for reimbursement of expenses actually incurred.

#### **Disclosure**

Interns, trainees, and applicants are required to inform clients, prior to performing professional services that they are unlicensed and working under the supervision of licensed marriage and family therapists, licensed clinical social workers, licensed professional clinical counselors, licensed psychologists, or licensed physicians certified in psychiatry by the American Board of Psychiatry and Neurology.

#### **Remuneration from Patients/Clients**

Interns, trainees, and applicants shall not receive any remuneration from patients or clients, and shall only be paid by their employers.

#### **Where Services May Be Provided**

Trainees, interns, and applicants shall only perform services at the place where their employers regularly conduct business, which may include performing services at other locations, so long as the services are performed under the direction and control of their employers and supervisors and in compliance with the laws and regulations pertaining to supervision. For example, an intern working in private practice may see a patient in the hospital. Or, a trainee may see a patient who is homebound, on behalf of the agency that employs him/her, in the home of the patient.

### **Private Practice**

Interns must be “registered” at the time employment in a private practice begins. Interns must be in their initial six year intern registration period while gaining any hours of experience in private practice.

#### **Supervision in Private Practice by Someone Other Than Employer**

The supervising licensee in a private practice shall either be employed by and practice at the same site as the intern’s employer, or shall be an owner or shareholder in the private practice.

#### **Supervision when Supervisor is on Vacation or Sick Leave**

Alternative supervision may be arranged during a supervisor’s vacation or sick leave if the supervision otherwise meets the requirements of the licensing law.

#### **Lawful Employment Settings for Trainees**

A trainee may gain experience as an employee or volunteer in any setting that lawfully and regularly provides mental health counseling or psychotherapy; provides oversight to ensure that the trainee’s work at the setting meets the experience and supervision requirements required by law, is within the scope of practice for the profession, and is not a private practice. All hours of experience gained as a trainee must be coordinated between the school and the site where the hours are being accrued. The school must approve each site and must have a written agreement with each site.

#### **Lawful Employment Settings for Interns**

Registered interns may work in all of the settings in which trainees may work, and in addition, they may, during their initial six-year intern registration, be employed or volunteer in private practices.

#### **Lawful Employment Settings for Applicants for Intern Registration**

A person who is post degree, awaiting intern registration, may work in any setting appropriate for a trainee, and may not work in private practice. Persons who are in their second six-year intern registration period may likewise not work in private practice.

#### **Ownership of a Practice or Business**

Trainees and interns shall have no proprietary (ownership) interest in their employers’ businesses and shall not lease or rent space, pay for furnishings, equipment or supplies, or in any other way pay for the obligations of their employers. This means that interns and trainees will not be signers on joint checking accounts with employers, pay remodeling costs for office space, pay advertising costs, etc.

#### **Employee vs. Volunteer**

The requirements of law and regulation are applicable equally to persons who are employees and persons who are volunteers. Do not presume that if you are a volunteer and law or regulation says “employee,” that it does not apply to you. You are bound by the same requirements whether you are an employee or a volunteer.

#### **Responsibility Statement for Supervisors**

This statement is to be signed by the supervisor prior to commencing supervision with an intern, trainee, or applicant. These forms are on the BBS website at [www.bbs.ca.gov](http://www.bbs.ca.gov). Interns are to submit Supervisor Responsibility Statements to the Board for all supervisors upon application to take the examinations for licensure.

#### **Notification of Change of Address**

Licensees, registered interns, and applicants are required to notify the BBS within 30 days of a change of address. The form can be found on the BBS website.

#### **Endnote**

<sup>1</sup> The original intent of SB 363 (students must be enrolled in practicum to gain hours of experience requirement) was to apply only to those students who are affected by SB 33 (students who enter a degree program on or after August 1, 2012 and students who enroll in a degree program that meets the requirement of the new curriculum requirements). SB 363 unintentionally affects all students regardless of date of enrollment in graduate study. SB 632 “urgency legislation” would clarify the language in SB 363 and apply the new practicum requirements only to those trainees that were intended to be affected by SB 363. Thus, if SB 632 passes, students who are not affected by SB 33 would be able to counsel clients outside of a practicum course if the school approves and has a written agreement with the work site.