DISCLAIMER:
The content of this handbook does not constitute a contract between the Family Therapy Training Institute (FTTI) and any applicant, student, faculty or staff member. FTTI reserves the right to change and update the policies, procedures, rules, and information in this handbook at any time. Changes will become effective at the time determined by administration. This handbook is to provide general information and is not intended nor does it contain all rules and regulations that relate to students.

Revised March 2024
TABLE OF CONTENTS

GENERAL INFORMATION
Definitions
System-wide Policies
Caregiver Connect Resources

INTRODUCTION
Advocate Aurora Mission
FTTI Program Mission
Key Contacts
FTTI Guiding Principles

PROGRAM OVERVIEW
Competency Pyramid
FTTI Commitment to Promoting Diversity, Equity, and Inclusion
Program Goals
Program Outcomes
Program History
Accreditation
Licensure
Learning and Working Environment

PROGRAM SPECIFICS
Onboarding Process
Final Competency Portfolio
Academic Calendar
Course Descriptions
Certificate Completion Requirements
FTTI Clinical Hours Definitions
Certificate Completion Timelines
Tuition and fees

COMMUNICATION EXPECTATIONS
Language Requirements
Computer Access
Email
Use of Technology in Class
Writing Standards
Student Information Updates
Textbooks and Course Materials
Addressing Concerns

BEYOND GRADUATION
Letters of Recommendation
AAMFT Membership
State MFT Licensing
Transferability of the Certificate
Taking the Exam
Caution: WI Temporary License
Continuing Education
Types of Employment to Seek Prior to Licensure

DESCRIPTION OF STUDENTS

DESCRIPTION OF FACULTY

DESCRIPTION OF SUPERVISORS

POLICIES & PROCEDURES
Advocate Aurora Health Team Member Behaviors
Student Status Designations
Learning Environment Policies
Admission Policies
Academic Policies
Clinical Policies
Student Record Retention

FORMS
Application for Admission
Appeal of Admissions Decision Form
Scholarship Application
Forms for submitting hours
Electronic Funds Transfer
Student Status Forms
Request for Reinstatement
Request for Withdrawal
Offboarding of Student Clinical Practice Checklist
GENERAL INFORMATION

This handbook has been developed as a guide to provide information on the policies, procedures, and resources related to the Family Therapy Training Institute (FTTI) and students enrolled in the program. Policies and procedures may be modified as needed. Please review this handbook and refer to it as needed. Questions may be directed to the program director, program coordinator, or director of operations for Aurora Family Service (see Key Contacts below).

Definitions

Advocate Health is one of the top 12 not-for-profit health systems in the country. Advocate Health Care is part of Advocate Health. Aurora Family Service (AFS) is part of Aurora Health Care and is the sponsoring institution for the Family Therapy Training Institute.

System-wide Policies

Up-to-date policies can be found in Caregiver Connect under Policy Tech. Some main policies to note include:

Advocate Aurora Health’s Code of Conduct
Attendance
Caregiver Appearance
Gifts and Business Courtesies
Social Media

Caregiver Connect Resources

All items can be found under the Places tab. Save the “Places” listed below to your My Quick Links.

- Diversity and Inclusion
- Employee Assistance Program
- Policy Tech
- CME/Clinical Events
- Library (Aurora Libraries)
  If you can’t find the article you’re looking for, email aurora.libraries@aha.org
INTRODUCTION

Mission
Advocate Aurora Health Statement of Purpose
We help people live well. We value:
• Excellence: We are a top performing health system continually looking for ways to improve.
• Compassion: We unselfishly care for others.
• Respect: We treat people in a way that values their unique needs and preferences.
Team member behaviors:
• Engage (collaborate, communicates effectively); Empower (value differences, fosters resilience); Execute (ensures accountability); and Transform (exhibits courage)

FTTI Program Mission
The Family Therapy Training Institute is a community of learners dedicated to serving the broader community by preparing people to become highly competent marriage and family therapists.

Key Contacts

<table>
<thead>
<tr>
<th>Role</th>
<th>Team Member</th>
<th>Current Support</th>
<th>Home Site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director of FTTI</td>
<td>Linn Visscher, MA, LPC, LMFT</td>
<td>Cheryl Robinson</td>
<td>Aurora Sinai Medical Center</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:Linn.visscher@aah.org">Linn.visscher@aah.org</a></td>
<td><a href="mailto:Cheryl.robinson@aah.org">Cheryl.robinson@aah.org</a></td>
<td></td>
</tr>
<tr>
<td>Family Therapy Professional Development Specialist</td>
<td>Sharon Hempel, LMFT</td>
<td><a href="mailto:Sharon.Hempel@aah.org">Sharon.Hempel@aah.org</a></td>
<td>Aurora Sinai Medical Center</td>
</tr>
<tr>
<td>Director of Operations for Aurora Family Service</td>
<td>Robert Marrs, MS, LMFT</td>
<td><a href="mailto:Robert.marrs@aah.org">Robert.marrs@aah.org</a></td>
<td>Aurora Sinai Medical Center</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:Robert.marrs@aah.org">Robert.marrs@aah.org</a></td>
<td><a href="mailto:Cheryl.robinson@aah.org">Cheryl.robinson@aah.org</a></td>
<td></td>
</tr>
<tr>
<td>FTTI Clinical Supervisor</td>
<td>Jorena Lewandowski,</td>
<td></td>
<td>Aurora Sinai Medical Center</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:Jorena.lewandowski@aah.org">Jorena.lewandowski@aah.org</a></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FTTI Clinical Supervisor</td>
<td>David Low</td>
<td></td>
<td>Aurora Sinai Medical Center</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:David.low@aah.org">David.low@aah.org</a></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical Education Coordinator, Behavioral Health</td>
<td>Jenni Binon</td>
<td></td>
<td>Aurora Psychiatric Hospital</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:Jenni.binon@aah.org">Jenni.binon@aah.org</a></td>
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FTTI Guiding Principles

FTTI is a competency-based postgraduate training program designed to partner with students towards the development of mastery in the provision of systemic psychotherapy (Couple, Marriage and Family Therapy) for individuals, couples, families, and the larger systems within which families exist. As such we promote an approach to therapy that is person-focused, family-centered, and community-based simultaneously. The importance of high levels of ethical and professional behavior is emphasized throughout the program.

Competency-based training at FTTI uses an outcome-based education model that focuses on and measures student demonstration of skills identified in the American Association of Marriage and Family Therapy (AAMFT) core competencies, including the conceptual, executive, perceptual, evaluative and professional skills necessary for effective service for a variety of presenting concerns. In addition, the FTTI competency-bases training focuses the refinement of the specific competencies associated with the development of the person of the therapist (POTT).

FTTI uses Aponte's broad definition of a Person of the Therapist approach to education, helping students to: 1) become aware of their relevant personal themes that may have a bearing on their work as a therapist (both positively and negatively); 2) be able to monitor the presence of these themes in their work so as to minimize potential negative impact on the therapeutic process; and 3) to eventually be able to utilize these themes to enhance the therapeutic process, along with therapist creativity and resilience.

The intensive, team-based supervised practicum experience is the core learning method of FTTI. The 11 core courses, which align with the coursework requirements of the State of Wisconsin MFT licensure statute MPSW 16.02, are designed to interact with and support the student's practicum experience. The student's relationships with their supervisors, course faculty, fellow students and clients provide the primary context of learning and growth for students.

FTTI prioritizes training students to practice competently within a culturally pluralistic society. Students are expected to provide compassionate, ethical and competent therapy to clients from broadly diverse backgrounds with an emphasis on the promotion of socially just family and community interactions and structures.

FTTI utilizes a generalist approach to teaching models of MFT in order to prepare students to use a variety of systemic approaches in their work with individuals, couples and families, as well as to prepare them for successful completion of the national licensing exam.

FTTI supports students towards integration and mastery as a therapist by emphasizing the following throughout all classroom and clinical experiences: 1) the ongoing development of their personal theory of change and therapy, interacting with 2) the ongoing development of their ability to be self-aware and self-regulating in their professional relationships (POTT or Use of Self), and 3) exposure to broadly diverse students, faculty and clinical clients.
PROGRAM OVERVIEW

FTTI’s postgraduate certificate in MFT is a 45-credit program of study, which includes 12 credits of clinical internship. Students complete a minimum of 500 clinical hours with couples, families, and individuals, plus a minimum of 100 hours of supervision over minimum of 12 months of clinical practice. Students practice with a range of clients from the community in a variety of approved community clinical sites. All FTTI courses and supervision currently are conducted remotely using online synchronous video meetings over Zoom or Microsoft Teams.

Competency Pyramid
The FTTI Guiding Principles can be visualized according to the FTTI MFT Competency Pyramid (below).

- The base of the pyramid, Values, Principles, and Core Beliefs is reflected in the program’s emphasis on professionalism, cultural competence, ethical practice and person of the therapist.

- High Quality Relationships is demonstrated in the program’s focus on the development of strong relationships between therapists and clients, students and faculty, student peers, and faculty and staff.

- Students are expected to enter FTTI with a strong foundation in Core Psychotherapy Competencies that will continue to improve throughout the program as they apply those competencies within the relational context of couple and family work.

- The main concentration of the program is on the development of Systemic Psychotherapy Competencies, the fourth level of the pyramid. A variety of approaches to assessment, conceptualization, treatment planning and intervention from a systemic perspective is taught, practiced, and assessed throughout all courses and practicum experiences.

- Students have opportunities to cultivate Problem & Problem-Specific Competencies by applying the competencies developed throughout the pyramid to special populations, topics, and problem areas. Students can explore these interests during the program, and further define specialty areas once they graduate. Students are encouraged to participate in ongoing professional development activities offered through the FTTI Alumni and Friends network and the FTTI continuing education series.
FTTI’s Commitment to Promoting Equity, Diversity, and Inclusion

Diversity can be defined as the sum of the ways that people are both alike and different. The primary dimensions of diversity include race, ethnicity, gender, age, sexual orientation, language, culture, religion, mental and physical ability, class, and immigration status, though this list is not exhaustive.

While diversity itself is not a value-laden term, the way that people react to diversity is driven by values, attitudes, beliefs, and so on. These reactions are shaped by our lived experience, especially experiences from our family- and community-of-origin.

Full acceptance of diversity is a major principle of social justice. As such, inclusion is a core practice that must be combined with diversity for the program, its faculty, supervisors and students to be fully successful in achieving its mission. Inclusion involves creating learning environments that are safe, engaging, and respectful to harness the full potential of individual and group differences in ways that are mutually beneficial.
FTTI has valued and promoted the diversification of the profession of Marriage and Family Therapy throughout its more than 40 years of operation. The Program has utilized its central location within the Milwaukee community to both attract and maintain a diverse student body and faculty.

FTTI fully endorses Aurora Family Service’s and Advocate Aurora Health Care’s bedrock policy prohibiting all forms of discrimination and goes well beyond by promoting cross-cultural understanding throughout each course offered in the program. In particular, the Use of Self course embedded in the Clinical Practicum, allows students to explore their own personal and family themes related to their development as therapists within a safe context that promotes shared learning between students as well.

The majority of FTTI students learn of the program through a colleague, so our diverse alumni become the main driving force beyond our ability to continue to attract applicants from diverse professionals interested in pursuing Marriage and Family Therapy.

FTTI has had the David Hoffman Scholarship that was instituted over 20 years ago to help attract and support the next generation of MFTs to serve the underserved families of our community. The Scholarship Committee established a Scholarship Application that prioritizes financial need and the promise of serving diverse and underserved communities.

**Program Goals**

FTTI is a community of learners dedicated to serving our greater community by preparing people to become highly competent MFTs. We will prepare postgraduate students who become skilled in conceptualizing cases from a variety of relational / systemic models, meet clinical competency to standards that prepare them to enter independently licensed practice, are ethical practitioners, demonstrate the ability to respond actively and compassionately to a wide variety of cultural contexts (ethnicity, gender, class, sexual orientation, religion, etc.), and are informed consumers of the MFT research.

*See Educational Outcomes Table Below*
2022-2023 FTTI Mission, Goals, and Outcomes Chart

Advocate Aurora Health - We help people live well
Aurora Family Service - We help families live well

FTTI - A community of learners dedicated to serving our greater community by preparing people to become highly competent MFTs

FTTI will prepare postgraduate students who:

FTTI will prepare postgraduate trainees who are competent in a variety of relational / systemic models in preparation for independently licensed practice.

SLO #1:
Target: Trainees will demonstrate competency in conceptualizing cases for a variety of systemic / relational models by achieving a minimum combined aggregate grading rubric score of 3.0 in MFT 711, 712, 770, 820, and 825.

Benchmark: 90%

SLO #2:
Target: Trainees will demonstrate clinical competence at completion of the program through the achievement of an aggregated rating of 3.0 or higher on the 16 Condensed MFT Core Competencies (MFT-CC) listed on the learning Plan & Deliberate Practice form (MFT 700-801).

Benchmark: 90%
2021-2022 FTTI Mission, Goals, and Outcomes Chart

COAMFTE Mission, Goals, and Outcomes Template

Advocate Aurora Health - We help people live well
Aurora Family Service - We help families live well

FTTI - A community of learners dedicated to serving our greater community by preparing people to become highly competent MFTs

FTTI will prepare postgraduate students who:

FTTI will prepare postgraduate trainees who are ethical practitioners

Goal 2 (ethics)

FTTI will prepare postgraduate trainees who demonstrate the ability to respond actively and compassionately to a wide variety of cultural contexts

Goal 3 (diversity)

FTTI will prepare postgraduate trainees who are informed consumers of the MFT research

Goal 4 (research)

SLO #3:
Target: Trainees will demonstrate competence in the ethical decision-making process by achieving a minimum aggregate grading rubric score of 3.5 on the MFT 850 Ethical Decision-Making Assignment.

Benchmark: 90%

SLO #4:
Target: Trainees will demonstrate competence in ethical therapeutic practice at completion of the program through the achievement of a minimum aggregate rating of 3.5 on the MFT-CC 12 “Law and Ethics” listed on the Learning Plan and Deliberate Practice form (MFT 700-801).

Benchmark: 95%

SLO #5:
Target: Trainees will demonstrate the ability to respond effectively to a wide variety of cultural contexts (including ethnicity, gender, class, sexual orientation, religion, age, etc.) by achieving a minimum aggregate rating of 3.0 on MFT-CC 3 “Cultural and Contextual Awareness” listed on the Learning Plan & Deliberate Practice form (MFT 700-801).

Benchmark: 90%

SLO #6:
Target: Trainees will demonstrate the ability to apply theory effectively to different cultural contexts by achieving a minimum aggregate average grading rubric score of 3.5 in MFT 730.

Benchmark: 90%

SLO #7:
Target: Trainees will demonstrate the ability to apply MFT research to their practice by achieving a minimum aggregate rating of 3.5 on the Evaluating Research with Presentation assignment in MFT 850.

Benchmark: 90%
Program Outcomes

The Family Therapy Training Institute is accredited by the Council on Accreditation in Marriage and Family Therapy Education (COAMFTE). This rigorous process ensures that we are engaged in continually improving the quality of education offered to our students. COAMFTE provides up-to-date information about the core educational outcomes of all accredited MFT training programs, including FTTI. These student achievement outcomes include the rates of graduation, passage of the national exam, and State licensure.

<table>
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<tr>
<th>Year Entered Program</th>
<th># of Students in Program</th>
<th>Advertised Graduation Rate (%)</th>
<th>Maximum Graduation Rate (%)</th>
<th>National Exam Pass Rate (%)</th>
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<tr>
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<td>2005–06</td>
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<td>In process</td>
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</tbody>
</table>

*Graduation Rate* is the percentage of enrolled students in each entering year who graduate within the advertised length of completion of the program.

*National Exam Pass Rate* is the percentage of students who take and pass the American Marital and Family Therapy Regulatory Board (AMFTRB) National Exam required for licensure in the State of Wisconsin. “NA” is indicated in the table above to reflect that zero students have sat for the exam.

*Licensure Rate* is the percentage of students in each entering year who pass the AMFTRB National Exam and go on to become licensed as a Marriage and Family Therapist in the State of Wisconsin.
Program History
Wisconsin's premier postgraduate professional school for marriage and family therapists, FTTI pioneered the apprenticeship approach. Since its establishment in 1972, FTTI has provided mental health professionals the advanced skills they need to remain at the forefront of family systems therapy, with a two- to three-year program leading to eligibility for clinical membership in the American Association for Marriage and Family Therapy (AAMFT). FTTI has been continuously accredited by the Council on Accreditation in Marriage and Family Therapy Education (COAMFTE) since 1974, making it one of the longest operating COAMFTE approved programs in the country.

Accreditation
The Family Therapy Training Institute is one of three Post-Degree Institutes (PDI) accredited by the Commission of Accreditation for Marriage and Family Therapy Education (COAMFTE) – the accrediting body for the American Association for Marriage and Family Therapy. Accreditation ensures the quality of higher education by reviewing each program’s ability to meet or exceed a wide variety of standard areas. You can learn more about accreditation in Marriage and Family Therapy by visiting the COAMFTE website at www.coamfte.org.

Licensure
Accreditation establishes the basis for the training provided by FTTI to prepare people for licensure in Marriage and Family Therapy in the State of Wisconsin and Illinois. Each state has its own regulations related to what is needed to become fully licensed in marriage and family therapy in that state. It is important that you review license requirements in the state(s) where you are intending to practice so you have a full understanding of what is and is not accepted. As a resource, AAMFT has a dedicated page for all states’ requirements: MFT State Resources (aamft.org), and AMFTRB maintains a list of and links to regulatory boards in other states and jurisdictions (https://amftrb.org/state-requirements).

The Wisconsin legislature created licensure for Clinical Social Workers, Professional Counselors and Marriage and Family Therapists through MPSW 16. Information regarding licensure as a Marriage and Family Therapist in the state of Illinois can be found in Part 1283 Marriage and Family Therapy Licensing Act.

These laws regulate the practice of Marriage and Family Therapy and protects the practice of MFT and the title of Marriage and Family Therapist. When students begin the FTTI program, they immediately apply for a training license in MFT. This training license is essentially equivalent to a full license in terms of privileges and responsibilities, with the primary exception of a requirement that students maintain 1 hour of supervision for every 10 hours of face-to-face practice.

To graduate from the program, students are required to complete 500 (250 of those must be relational) out of the 1,000 direct contact hours required for Wisconsin State licensure; this is to say that FTTI prepares students to be on the path towards full licensure. Requirements vary from state to state, province, or location and students are encouraged to educate themselves regarding the requirements in the state(s), province(s), or location(s) in which they intend to practice.
Dual Licensure Supervision
There may be students who are pursuing hours for another license, such as an LPC or LCSW, concurrently with pursuit of hours towards LMFT licensure. If a student needs supervised practice for one of these licenses, they can request supervision at the onset of their time in the program. Requests for supervised practice of a license other than the LMFT are to be made in writing to program administration; these requests may be honored as program capacity allows. Approved requests will be made in writing to the student and will be monitored on a quarterly basis. Students are ultimately responsible for monitoring state rules and regulations as it relates to supervised practice and ensuring they are adhering to the requirements for full licensure.

The Learning and Working Environment
Well-Being
As a mental health training program, the Family Therapy Training Institute is committed to encouraging positive mental health for all our faculty, supervisors, residents, and staff. We strive to create an environment that accepts and normalizes the use of mental health services and that responds quickly to support colleagues in distress. Please contact program administration, faculty, staff, or supervisors for ideas and recommendations related to customized support for you.

Times of Distress
Various factors can contribute to mental health challenges, such as life transitions, trauma, burnout, academic struggles, attention issues, grief, family difficulties, etc. Particularly those in the helping professions can take on an added layer of stress when sitting with and holding space for client stories that are intense in nature and/or trigger personal experiences. Please know there are the following options to help you:

- Employee Assistance Program (EAP): Contact EAP at 1-800-236-3231 for intake. This will entitle you to three free counseling sessions with an EAP counselor. If more than three sessions are needed, you will be referred to a behavioral health provider to pursue longer-term counseling. Sessions through a non-EAP behavioral health provider may incur co-pays and fees depending on your insurance plan.
- Aurora Behavioral Health: If you have an Aurora Healthcare primary care provider who has made a referral for behavioral health services, contact Aurora Behavioral Health at 414-773-4312 for intake. Representatives will assist you with verifying your insurance benefits, finding a preferred location and counselor, and scheduling. The call center is open from 8:00 AM to 8:00 PM but will route to the emergency intake line after hours. These counseling sessions may incur co-pays and fees depending on your insurance plan.
- Community Agencies and Partners: If you need assistance with finding a therapist outside of AAH, you are welcome to connect with program staff for recommendations if you feel comfortable. You are also encouraged to search on Psychology Today for therapists that fit your needs and your insurance carrier.

Personal Therapy
Though not required, the program strongly encourages students to consider working with a therapist for their own personal benefit and mental health. It is not uncommon that training in this program creates multiple opportunities for students to reflect upon and consider who they are
as a person, professional, and what experiences and/or events have contributed to who they are. Additionally, asking clients to engage with a therapist and trust them is often a request that many do not take lightly; having the experience of sitting in “the other chair” will ultimately provide students with information and insight into what it is like to be the client.

*Crisis Intervention/Suicidality*
Contact Aurora Behavioral Health at 414-773-4312 for intake 24 hours a day. Hospitalization can also be provided immediately if needed. For immediate crisis intervention or if you are wondering if you can keep yourself safe, call 988 for the Suicide and Crisis Lifeline.

**PROGRAM SPECIFICS**

**Onboarding Process**

*Background check required*
Upon acceptance, each student is required to complete a caregiver background check; this will be facilitated by Volunteer Services of Advocate Aurora Health.

Students are required to complete all identified health checks (physical, TB test, vaccination records, etc.) and system orientations and trainings. Lastly, as noted above, students will need to complete all paperwork required to obtain a training license in Marriage and Family Therapy.

**Final Competency Portfolio**
FTTI’s emphasis on MFT competencies, strong systemic case conceptualization skills, and development of the person of the therapist culminate in a final student portfolio presentation.

This presentation takes place in the months leading up to graduation. First, you will meet with several staff and the program director to showcase your clinical thinking, specific MFT competencies and evolving practice perspective by sharing two case studies of your work to your supervision team. Next, you will present your Theory of Change Paper to fellow graduating students, faculty, and supervisors. In this presentation, students share how they have integrated theories, approaches and skills into a personal model that reflects their personal style and shapes their ability to work with individuals, couples, and families. Finally, at the graduation ceremony itself, graduates will share their journey into and through the FTTI program as a part of the presentation of certificates and student reflections program.

All coursework and practicum experience contribute to and lead up to this three-part portfolio presentation highlighting your confidence and competence as a Marriage and Family Therapist. The involvement of the FTTI learning community highlights the essential nature of a strong network of relationships in continuously supporting and challenging us along our professional journey.

**Academic Calendar**
FTTI’s calendar follows a typical academic year, with coursework running from August through the following June. Courses range from one to six post-degree credits and vary from six to eight classes per course. Typically, courses are scheduled Monday evenings (4 hours) and Saturdays (6
hours). Courses and schedules are subject to change to fit the needs of the program and to meet the requirements of the accreditation body.

It is important to note that FTTI credits are NOT transferrable as graduate credits within college or university programs.

Course Descriptions

First Year
All courses include discussion and integration of Personal of the Therapist Themes and Use of Self in the process of therapy. In addition, students and faculty incorporate discussion of the intersection of course content with social location, diversity, equity, and inclusion.

MFT711 Models of Family Therapy I
- 3 credits
This course provides the foundations of family systems theory including first and second order cybernetics, structural and strategic therapies, contextual and transgenerational family therapies.

MFT712 Models of Family Therapy II
- 3 credits
This course is a continuation from Models of Family Therapy I and emphasizes post-modern/post-structural family therapy theories including Collaborative Language Systems, Solution-Focused and Narrative Therapies, and attachment-based therapies.

MFT700/701 Clinical Internship and Supervision I
- 6 credits
Clinical internship provides clinical experience working with individuals, couples, and families across diverse populations, communities, and practice settings. Clinical internship utilizes a variety of teaching methods including live observation, competence coaching, and case presentation in both individual and group supervision formats. Clinical internship runs from mid-September to mid-August every year. Students are expected to obtain a minimum of 200 hours of direct client contact in year one.

MFT740 Working with Diverse Families and Communities
- 3 credits
This course provides a foundational understanding of diversity, equity, and inclusion in family therapy practice. It also focuses on systemic approaches to working with marginalized families and communities including LGBTQ+, low-income families, families and communities of color, and families at-risk due to social and environmental stress. Self-examination of cultural assumptions. Development of awareness, knowledge and skills for culturally responsive family therapy. Introduction to health equity and community-centered practice.

MFT770 Relational Assessment, Diagnosis, and Treatment Planning
- 3 credits
Students are required to transfer in a psychopathology and diagnosis course. This course will cover methods of relational assessment and diagnosis, and how to utilize systemic thinking in the process of interviewing, case conceptualization, and collaborative treatment planning.

MFT775 Systemic Treatment of Trauma
- 3 credits
This course provides an introduction to trauma-informed care and the integration of family systems models when it comes to healing from traumatic events, as well as the nuances of the impact of trauma on the family unit at various stages of the lifespan.
**Summer Course**

MFT790 Family Therapy in Healthcare Settings 3 credits

This course provides an introduction to medical family therapy (medMFT). This includes an understanding of the impact of illness and disability on family functioning and health and teaches students how to provide family therapy within a healthcare setting.

**Second Year**

MFT800/801 Clinical Internship and Supervision II 6 credits

Clinical internship provides clinical experience working with individuals, couples, and families across diverse populations, communities, and practice settings. Clinical internship utilizes a variety of teaching methods including live observation, competence coaching, and case presentation in both individual and group supervision formats. Clinical internship runs from mid-September to mid-August every year. Students are expected to obtain a minimum of 300 hours of direct client contact in year two.

MFT820 Couples Therapy 3 credits

This course provides an introduction to the theories and methods used in couple’s therapy from a systemic perspective. Major theoretical approaches will be examined to develop a framework within which the student can understand the nature of intimate relationships and the dynamics of couple’s therapy. It also involves consideration of race and ethnicity, gender identity, sexual orientation, and other cultural factors.

MFT825 Advanced MFT Theory Integration 3 credits

In this capstone course, students will synthesize their learning throughout the program to develop a professional theory of change. Special emphasis will be placed on theory integration and development, person-of-the-therapist (use of self), and post-graduation career development.

MFT850 Ethical, Legal, and Professional Issues in MFT 3 credits

This course prepares students for independent clinical practice as a licensed family therapist. Special emphasis will be on the AAMFT Code of Ethics, models of ethical decision-making, compliance with regulatory standards and expectations, managing professional safety and risk, and clinical documentation.

MFT860 Integrating Youth into Family Therapy 3 credits

This course provides an introduction to the theories and methods of child-focused family therapy. This will include an understanding of interviewing children in a family context, family play therapy methods, and the development of a playful approach to problem solving.

MFT870 Family Therapy with Addictions 3 credits

This course covers substance use as an embedded component of the cycles of interaction within families. How to utilize family systems approaches to support the family unit in developing new skills within their relationships, within the context of substance use treatment.
Third Year (optional)
MFT900 Clinical Internship and Supervision III
Students have the option to purchase an additional year of internship to continue accumulating supervision and hours towards graduation and licensure.

Certificate Completion Requirements
To meet the eligibility criteria for graduation, students must satisfy the following requirements:

1. 360 class hours in six specified areas of marriage and family therapy studies. Occasional classes may be transferred from former graduate studies.
2. 500 clinical hours* – face-to-face, direct contact with clients
   1. 250 of these hours must be relational, meaning with couples, families, or dyads
   2. 200 of these must be done “onsite” at any of the approved Clinical Affiliate sites
3. 100 hours of individual and group supervision, 50 of which must include observable data, such as live reflecting group when the student is the primary therapist or presentation of recorded therapy sessions.
4. Demonstrate outlined level of competency across AAMFT’s competencies for MFTs.
5. Completion of final competency-based portfolio assessment.

*Please note: A total of 1,000 face-to-face hours is required for WI MFT license. Some students complete all 1,000 hours for licensure while completing the program, while others plan for outside employment, practice experience and supervision to complete the full 1,000 hours.

FTTI Clinical Contact Hours, Alternative Clinical Contact Hours, and Additional Clinical Activity Hours Definitions

Clinical Hours (Can be counted towards 500 graduation and 1,000 total face-to-face licensure hours)
- Individual, couple, family or group psychotherapy
- Mental Health Consultation (case specific, provided to another professional including a client / family member)
- Clinical Case Coordination with client / family present
- 250 of the 500 hours must be relational
- 200 of the 500 hours must take place “onsite” at an approved Clinical Affiliate site.

Alternative Clinical Hours (100 maximum hours over the course of the program can be counted towards 500 hours needed for graduation)
- Group facilitation (interactive psychoeducational or supportive group, such as Changing Families)
- Co-therapy
- Reflecting Team participation with a live case (includes participation in a reflective conversation with client / system)
Additional Clinical Hours (Maximum 10 hours over the course of the program can be counted towards 500 graduation and 1,000 total face-to-face licensure hours)

- Observing cases behind the mirror (no reflecting team) - hours must be accompanied by documentation of case conceptualization, treatment plan or progress note as assigned by supervisor
- Psychoeducational presentation (limited interactivity, such as a presentation out in the community)
- Clinical Case Coordination without client / family present (ex. Speaking with a client’s teacher)

Clinical Activity in a Clinical / Professional Setting (Can be counted towards 2,000 of the 3,000 total hours required for licensure)

- Documentation of case work
- Attending classes, trainings, workshops, etc.
- Supervision and consultation, including peer consultation
- Engaging in reading and / or watching clinically instructive material

Certificate Completion Timeline

Upon completion of this intensive two-year program, graduates meet the academic requirements for Marriage and Family Therapy Licensure (LMFT) and have accumulated at least one half (500) of the required supervised hours (1,000) for licensure. This program is designed to accommodate those working full-time. Enrolled students have the option to complete the program on a full- or part-time basis. For students enrolled in FTTI full-time, completion of the program typically takes a minimum of two years, with a maximum time of enrollment of seven years. For those enrolled on a part-time basis, the minimum is four years and the maximum seven.

Tuition and Fees

FTTI: Estimated Monthly Tuition Expense

<table>
<thead>
<tr>
<th>2-Year Program</th>
<th>3-Year Program</th>
<th>4-Year Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Based on a current cost of $12,150* over 24 monthly payments</td>
<td>Based on a current cost of $12,150* over 36 monthly payments</td>
<td>Based on a current cost of $12,150* over 48 monthly payments</td>
</tr>
<tr>
<td>$506.25/month</td>
<td>$337.50/month</td>
<td>$253.13/month</td>
</tr>
</tbody>
</table>

*Tuition rates are not guaranteed and are subject to change to account for the increasing costs of the program. Students can expect an increase in tuition rates each year. FTTI recognizes the importance of affordable education and therefore makes every attempt to minimize cost to students. Tuition includes costs for course materials and program fees (see Tuition Policy for
Electronic Funds Transfer
At the onset of enrollment, students are required to put down a deposit of $200 (that will be applied to tuition balance for that first year), and to establish an Electronic Funds Transfer (EFT) for monthly payments.

Late Fees for Incomplete Courses: In accordance with the program’s “learning to competency” policy, students are given 30 days after the last day of class to continue to rework deficient assignments. After 30 days from the last class students may continue to work with an instructor to rwerk assignments but will be assessed a $50 fee to do so.

COMMUNICATION EXPECTATIONS

Language Requirements for non-native English Speakers
All coursework lecture and reading material is delivered in English. It is expected that students are proficient in reading, writing, and speaking in English. If an applicant received their master’s degree from a non-English speaking institution, they will be required to demonstrate proficiency in reading, writing, and speaking via the completion of the Test of English as a Foreign Language (TOEFL).

Additionally, due to the nature of the field containing its own nuances and language, it is imperative that students demonstrate competency in the use of clinical / therapeutic language, both in reading, writing, and speaking. At the discretion of the Program Director, a student who is non-native English speaking and received their master’s degree from an English–speaking institution may be required to complete the TOEFL.

TOEFL: The minimum TOEFL score accepted by FTII is 80 (online) or 550 (paper-based). Scores are good for two years from the date of the test.

For more information and to register, please visit: https://www.ets.org/toefl/ibt/register/

Students are responsible for the cost of completion of the TOEFL.

Computer Access
Students have access to agency computers and printing in the Computer Hotel on site at the Aurora Family Service offices. Due to the limited number of computers in that area, it is not guaranteed that students will be able to access a computer when they are in the building, so bringing a personal device is an option as well. The agency computers have word processing software (MS Word). Students must be diligent about not leaving confidential information on the computer and making sure to properly sign out. Keep in mind that printing while in the building is only accessible while logged into the computers in the Computer Hotel area. Advocate Aurora does not allow wireless printing from a personal laptop or tablet, thus students will need to plan accordingly when needing to print documents.
Because all classes and supervision currently is conducted remotely, it is imperative that students have access to a working computer and internet access to effectively operate virtually. Students may need to update their router or equipment to ensure proper use of video and audio capabilities for sessions and courses.

**Email**
FTTI relies heavily on communicating with students via email. It is essential that students review their email daily to ensure effective communication with faculty and staff. Upon gaining access to the Advocate Aurora System, you will be assigned an email. Due to the exchange of PHI (Protected Health Information) via email, it is required that you utilize this email throughout the course of the program, as Advocate Aurora automatically encrypts all emails. Additionally, responsiveness to tasks and updates communicated via email are part of each student’s overall evaluation each year in terms of performance in the program.

**Use of Technology in Class**
Though the use of technology often can complement learning, it is expected that students are using technology appropriately during class times. Each instructor reserves the right to extend specific expectations for their course. However, as a rule, the program expects that students limit use of cell phones during class time, with the exception being in cases of emergencies. If a student needs to respond to a call or text, they are encouraged to excuse themselves for a brief time. Computers are generally used to participate in courses virtually, take notes, show educational videos, etc. The use of social media, email, or other programs not related to class activities is prohibited while participating in FTTI coursework.

**Writing Standards**
Written assignments must reflect professionalism, critical thinking, and postgraduate writing skills. Each student is expected to proofread their work before submitting it for grading, making sure that the writing contains proper grammar and minimal spelling errors. Assignments should be typed, not hand-written. If an assignment does not meet these standards, a student will be asked to review, revise, and re-submit the assignment.

**Student Information Updates**
Students must keep FTTI staff updated with current address, email, home, work, and placement phone numbers (if offsite). It is important in the event of class cancellation or other pertinent communications that staff can establish contact with students in a timely manner. Any changes to this information should be given to FTTI staff as soon as possible.

**Textbooks and Course Materials**
The program will distribute textbooks and course materials to students for each course. Tuition fees include a fee for course materials. See Tuition Policy for details.

**Addressing Concerns**
It is expected that tension, concerns, and conflicts may arise among students, or between students and faculty, supervisors, or program administration staff. In fact, a moderate level of tension likely reflects the healthy exploration of differences that is necessary for growth to occur. This is particularly true in the intensely personal process of becoming a marriage and family therapist.
When this occurs, students are encouraged to use the same direct communication skills that are
so beneficial to positive outcomes in the therapeutic process itself. This includes the following:
speak directly to the person with whom you are having a difference, disagreement, or difficulty
(including faculty, supervisors, or staff); assume positive intent; seek clarification, speak
honestly about your thoughts, feelings and experiences; make clear requests; and attempt to work
through conflicts in respectful ways.

Instructors will attempt to address any concerns that arise within the group process within the
context of the whole class, but may need to limit discussion time, or redirect to a later time, in
the interest of continuing to adequately cover the course material as mapped out in the syllabus.

Faculty, supervisors, and staff are available to assist in reflecting upon and planning for effective
resolution of concerns. Please reach out to your faculty, supervisor, Family Therapy Professional
Development Specialist, or the Program Director if your efforts to resolve concerns directly with
another person have been unsuccessful. If concerns remain unresolved, students can request to
meet with a Human Resources Representative to assist in facilitating a resolution process.

Lastly, the program follows the [Aurora Family Service Complaints and Grievance Policy](#) that
students can file. This aligns with the Advocate Aurora [Conflict Resolution Policy (#2519)](#).

**BEYOND GRADUATION**

**Letters of Recommendation**
Students and graduates may request letters of recommendation directly from Faculty,
Supervisors or the program Director and Supervisor. When providing a letter of reference,
faculty and staff will consider the level of professionalism displayed by the person requesting the
letter of recommendation, in addition to academic and clinical competence.

Faculty and staff will notify the program Director and Supervisor of any requests for letters of
recommendation, obtain written informed consent to share information (from the requestor), and
a copy of the letter will be kept in the student file.

**Requests for Transcripts**
Following graduation from the program, students will receive an official copy of their
transcripts. Beyond that, requests for transcripts can be directed to the Program Administrative
Assistant for processing for a fee of $15 per copy. Requests will be completed within seven
business days from the initial date of contact.

**AAMFT Membership**
Because membership in AAMFT increases the likelihood of marriage and family therapists being
well-trained and ethical, the faculty strongly encourages all students to become members and to
maintain membership throughout their careers. The benefits of membership, applications, and
other information about AAMFT can be obtained by contacting the website at [www.aamft.org](http://www.aamft.org).
As stated on the site, the American Association for Marriage & Family Therapy is the professional association for the field of marital and family therapy. Since 1942, AAMFT has been involved with the problems, needs and changing patterns of marital and family relationships. The Association promotes increased understanding, research, and education in the field of marital and family therapy. In addition, it ensures that the public needs are met by having practitioners of the highest quality. AAMFT believes that therapists with specific education and training in marital and family therapy provide the most effective mental health care to couples and families.

**State MFT Licensing**

_Note: Any individual who wishes to practice MFT or use the title “Marriage and Family Therapist” must be licensed as a marriage and family therapist or hold a marriage and family therapist training license._ As with many bureaucratic processes, meeting the requirements for credentialing can be confusing. The drawbacks are the time, money and energy needed to meet the requirements. The advantage is consumer protection and legitimacy in the eyes of consumers and third-party payers, such as managed care and insurance. Fully licensed MFTs can practice independently. Becoming licensed is a prerequisite to many postgraduate employment opportunities and better pay. For example, in Wisconsin, to be employed at an outpatient mental health clinic, it is necessary to hold a training or full license.

**Becoming an LMFT in WI: A brief overview:**

For the most accurate, detailed, and current information, go to: [https://dps.wi.gov/pages/Professions/MFT/Default.aspx](https://dps.wi.gov/pages/Professions/MFT/Default.aspx)

- Apply for an _MFT Training License_ through the Department of Safety and Professional Services (form 1973).
- Complete required master’s level MFT academic work.
- Apply through DSPS to take the National MFT exam (assesses knowledge of MFT theory/practice) when applying for a training license or before applying for full license (form #1973). This exam can be taken at any point during training.
- Gather 3,000 hours of supervised postgraduate clinical experience (1,000 of the 3,000 must be face-to-face client contact).
- Gather 100 hours of clinical supervision by any of the following: AAMFT Approved Supervisor; Licensed Doctoral level MFT; Licensed Master’s level MFT with five years clinical experience; a doctoral level licensed Psychologist or a Psychiatrist with MFT competence; or someone pre-approved by the MFT section of the DRL.
- Apply for _MFT License_ upon completion of postgraduate experience requirements. (Do not apply for Temporary License. It is only good for 90 days and provides NO advantage to you. Instead, renew the Training License if you need more time to pass exam.)
- Pay all fees. (Do not pay for exam fees again if previously passed exams).

**Transferability (Portability) of the Certificate**

COAMFTE accreditation is intended to help ensure that graduation for COAMFTE accredited programs, including post-degree institutes like FTTI, are transferrable between states. FTTI is set up to prepare people for licensure as an MFT in the State of Wisconsin. While we are not aware of graduates of FTTI who have been denied licensure in other states, we cannot guarantee that other states will grant reciprocity of a license obtained in Wisconsin, or accept the training and
supervision achieved through FTTI. We encourage students who may want to practice in another state to contact the licensing board of that state directly. The key questions to ask include: 1) do you accept COMAFTE accredited post-degree certificates as meeting the expectation for education? And 2) what are the minimum number of supervision and face-to-face hours required for licensure in your state?

A note about MN/WI Reciprocity: (a) MN exceeds WI postgraduate requirements for licensure in all areas. Thus, if you are licensed in MN you will qualify when applying for licensure in WI. (b) WI license holders who wish to become licensed in MN must go beyond the WI supervised client contact hours requirements by documenting that they meet the required MN supervision and client contact hours (see the website for the Minnesota licensing board).

Taking the Exam: the AMFTRB Exam (i.e.: the “National Exam”)
In Wisconsin, license applicants must pass a national exam related to the theory and practice of MFT. The state licensing process authorizes the applicant to take the exams. The Wisconsin Training License allows the applicant the option of taking the exam immediately upon receipt of the Training License or waiting until applying for the full license. A full MFT license will not be granted until all postgraduate requirements are satisfied (i.e.: pass exam; acquire supervised practice hours; complete coursework). See the state websites listed above for exam dates, links, etc. Also, the most recent information about the national exam is available at https://amftrb.org/your-exam-roadmap/.

Caution: WI Temporary License
In Wisconsin, an applicant who completes all the requirements for licensure except for passing the national exam may obtain a temporary license valid for up to nine months. Like the Training License, the Temporary License allows the holder to use the title "Marriage and Family Therapist." A Temporary License has a short lifespan and may be renewed only once. You don’t want to be in this time-constrained position. The Training License can be renewed for a longer period, and training license holders can apply directly for the full MFT license once the exam is passed, and they have accumulated their postgraduate hours.

Continuing Education
Once a license is obtained, each practitioner must meet state Continuing Education requirements in order to maintain the license. For example, Wisconsin currently requires 30 hours of CEUs every two years, this includes 15 hours specific to MFT and 4 hours in the area of “Ethics and Boundaries.” These are reasonable expectations, and the details can be found on each state’s website as listed above. This is consistent with expectations for the other psychotherapy licenses. See Chapter MPSW 19 for more information.

Types of Employment to Seek Prior to Licensure
FTTI encourages students to search for employment where the hours qualify toward state licensure to accumulate hours in a timely manner. In general, the chances of getting hired as a therapist in a mental health clinic increases -- as does salary potential -- once a person is fully state licensed and better able to bill/collect from third parties, such as managed care, insurance, governments, etc. Again, this is true of other master’s level therapists such as Professional Counselors and Social Workers. Accumulating the required 100 hours of supervision, 1,000
hours of face-to-face practice, and 3,000 total hours typically takes a minimum of two years in Wisconsin.

People with training licenses, working towards their full licensure, are often employed in settings (often nonprofit) that depend on other sources of funding such as state money, private funding, grants, and donations. Common examples include such positions as in-home family therapist/family preservation, day-treatment therapist, residential care provider (e.g.: adolescent treatment settings, drug treatment centers, psychiatric settings, etc.), county social worker, therapist in a religious setting, therapist in an alternative school, domestic violence therapist, case manager, family psychoeducator, military mental health provider, and some mix of therapist/administrator. Salaries and benefits vary widely depending on the type of job, geographic area, and current market. Some graduates step quickly into high-paying jobs while others work part-time as therapists and part-time at another job until they become fully licensed and can pursue a higher paying therapy job. Not all job advertisements will include “MFT” in the title or description. Apply to any job that seems appropriate for your skills/training, including those advertising for a “social worker”. Employers often do not know they are looking for an MFT until they see your resume/qualifications on their desk!

DESCRIPTION OF STUDENTS

Family Therapy Training Institute (FTTI) attracts students from a variety of experiences and backgrounds. All students have completed a master’s degree in counseling or a related field of study. FTTI coursework is created to accommodate to the needs of the working professional, making the program more accessible to those who may not otherwise be able to pursue a postgraduate degree.

FTTI students tend to be represented by three main groups of professionals: 1) professionals who have a license in psychotherapy other than LMFT who want to develop their confidence and competence in systemic practice with couples and families; 2) professionals newly graduated from a counselling or social work program who recognize the need for additional training in systemic psychotherapy competencies and who need access to a practice location; and 3) professionals who are transitioning from a career in a related profession (social work, school psychology, nursing, etc.). What unites our students is the recognition that the best way to learn systemic psychotherapy is within a diverse network of relationships, utilizing intensive supervision and interactive inquiry to grow in confidence and competence.

Our students come from a variety of social locations as well: currently, 17% identify as Middle Eastern, 17% as African American, 67% Caucasian. There are 17% male students, and 83% female students. The vast majority of FTTI students come from within and around the Greater Milwaukee area. The diversity in professional background, ethnicity, age, and other factors provides FTTI students a special opportunity to build their network of professional relationships that mirrors the diversity of the broader Milwaukee community.

DESCRIPTION OF FACULTY
Brandon understands how the body responds to trauma between partners. His primary focus is Brother family and friends. she enjoys vacationing, reading a good book, watching movies, and spending valuable time with her family and friends.

Lisa Anderson, LPC, CSW, has been in the Human Services field for 25 years, with a bachelor’s degree in Social Work and a Master’s Degree in Community Counseling as her educational foundation. Now, as a Licensed Professional Counselor, she works with children, adolescents, adults, couples, and families (ages 4 to adult) to help them become healthy and happy. Whatever the age, she wants her clients to not just survive but thrive. Lisa specializes in Mindfulness, Positive Psychology, Cognitive Behavioral Therapy, Dr. John Gottman Couples Therapy, Play Therapy and BrainSpotting. She is also a certified Adoption Therapist, which means to assist birth and adoptive parents transition smoothly into their new reality. She covers many areas of trauma, life stressors and mental health disorders, such as childhood abuse (sexual, physical or verbal abuse), domestic violence, grief, life transitions, divorce, couples therapy and chronic illness. Additionally, she works jointly with individuals diagnosed with Post Traumatic Stress Disorder, Hoarding Disorder, Anxiety Disorder (including OCD), and Depression.

Natalie Anderson, LMFT, LPC, is a licensed Marriage and Family Therapist, a licensed Professional School Counselor, and a licensed School Administrator. Her areas of expertise are helping students and families realize their visions, strengths, and support in cultivating their positive future endeavors, as well as providing training to students and other professionals in counseling. Natalie sincerely believes when systems function well, people can flourish. She is an advocate for counseling, and educational activities that are focused on improving social and emotional growth, student achievements, and constructive future outcomes.

With over two decades in education, Natalie has taught and counseled within the Milwaukee area, operated her privately owned practice, currently serves as an Administrator for Milwaukee Public Schools (MPS), and an Adjunct Professor. Natalie has received recognition in education and community advocacy and is an active member of several professional organizations including WSCA, ASCA, and AAMFT. In addition, Natalie has sat on several state boards, including WAMFT and WI ACT State Council.

Natalie is a married professional and mom of three wonderful children. When she is not working, she enjoys vacationing, reading a good book, watching movies, and spending valuable time with her family and friends.

Brandon Arbuckle, LMFT, is a licensed marriage and family therapist with more than two decades of experience in private practice and has taught for over a decade in higher education. His primary focus is working with couples on conflict resolution and emotional dysregulation between partners. With a background in the intersection of neuroscience and change in couples, Brandon understands how the body responds to trauma and emotional distress as well as the effect this can have on the lives of those in intimate relationships. He works to help couples
develop greater and more secure emotional connections, as well as identify opportunities for growth in their relationships. Brandon is a certified facilitator of Prepare/Enrich™, as well as a supervisor approved by the American Association for Marriage and Family Therapy. He regularly supervises and consults with those seeking to become an LMFT in Illinois. He is currently pursuing his Ph.D. in Pastoral Theology, Personality and Culture with a focus in Neuroscience at Garrett Seminary on the campus of Northwestern University. In his free time, Brandon enjoys movies, art, baseball, hiking, camping, and exploring varied cuisines.

**Brooke Corlynne Briscoe, LMFT**, is a licensed marriage and family therapist with extensive experience providing mental health counseling services to the entire family system, including children, adolescents, and adults. In addition to family systems, generally, Brooke has worked with a wide range of family systems and client groups, including children in the foster system, individuals court ordered to treatment, and juvenile sex offenders. Brooke provides evidence-based, trauma informed treatment and engages community and contextual systems in her treatment approach. Brooke currently is a Mental and Behavioral Health Manager at Children’s Hospital of Wisconsin, providing operational and clinical leadership to oversee the program operations, clinical services, development and supervision of her staff of mental health therapists.

**Sharon Hempel, LMFT**, is a licensed marriage and family therapist. She completed her Master of Science in health psychology at the University of Wisconsin – Milwaukee, in addition to completing a post degree training program at the Family Therapy Training Institute (FTTI). Sharon has worked at Advocate Aurora Health since 2005, within oncology, neonatal intensive care, and behavioral health. She currently provides psychotherapy services using a strength based, solution focused approach with individuals, couples, and families, ages 6 years old – 65 years old. She is currently a professional member of the American Association for Marriage and Family Therapy and has been a member since 2009.

**Mark Hirschmann, Ph.D., LMFT**, is a licensed marriage and family therapist with over 40 years of clinical practice. Mark is one of a handful of mental health practitioners in Wisconsin with a Ph.D. in Marriage and Family Therapy (Purdue University.) In addition to his clinical practice, Mark has demonstrated a long-term commitment to the growth of the marriage and family therapy profession by teaching at various institutions, including the University of Wisconsin – Milwaukee, the Family Therapy Training Institute, and the Wisconsin Association for Marriage and Family Therapy (WAMFT,) serving as past president of WAMFT, and serving on the State of Wisconsin Examining Board for Marriage and Family Therapists.

**Jorena Lewandowski, LMFT, LCSW**, is a licensed marriage and family therapist providing clinical services at Aurora Family Service. Jorena is a graduate of the Aurora Leadership Academy; graduate of the Family Therapy Training Institute and is currently an AAMFT Approved Supervisor who is supervising FTTI postgraduate MFT trainees. She is co-creator of Changing Families: The Impact of Divorce on Children from an African American Perspective, a psychoeducation program mandated by Milwaukee County Courts. Her practice specialties include mental health issues impacting African Americans, trauma counseling, families experiencing domestic violence, impact of chronic medical health illness on mental health with individuals, couples, and families.
Jorena Lewandowski is a mental health professional with 23 years of psychotherapy experience. Jorena specializes in Marriage & Family Therapy and the Training of post graduate Marriage & Family Therapy candidates. Jorena works with primarily African American clients experiencing Post Traumatic Stress Disorder related to the impact of racism and community violence. Jorena also works with clients experiencing marital difficulties, relationship difficulties, parent-child relationship difficulties and family conflicts.

David Low, LPC, LMFT, is a licensed Marriage and Family Therapist providing clinical and consultation services at Aurora Family Service. He has trained extensively in Solution Focused Brief Therapy by the developers of the model at the Brief Family Therapy Center, Milwaukee. Practicing in England between 2000 and 2014, David completed a second clinical masters in MFT at the Tavistock Centre, University of East London. He then qualified as a MFT and MFT Supervisor in the UK. While working as a child and family therapist and Clinical Team Supervisor/Manager, David trained as a trainer in Feedback Informed Treatment at the International Center for Clinical Excellence in Chicago. Went on to developed guidance manuals and training videos on the use of the Outcome Rating Scale (ORS) and Session Rating Scale for the National Health Service in UK to help family therapist integrate the use of session by session measures to enhance feedback to inform treatment and significantly improve clinical outcomes. David is currently a LMFT, an AAMFT Clinical Fellow and Approved Supervisor.

Corey M. Robak-Klein, LPC, LMFT is a bilingual/bicultural marriage and family therapist, AAMFT Clinical Fellow and Approved Supervisor Candidate. Corey completed graduate work at the University of Denver in International Disaster Psychology, and has areas of expertise in working with refugees, survivors of interpersonal violence, and Latinx populations.

Paul Zenisek, LCSW, CSAC has over thirty years of experience in the psychiatric field as a Licensed Clinical Social Worker and Certified Substance Abuse Counselor. Paul has conducted workshops at both state and regional conferences, as well as provides clinical supervision. In addition to teaching at FTII, Paul is an adjunct instructor at Gateway Technical College and the Helen Bader School of Social Work at UWM.

DESCRIPTION OF SUPERVISORS

Jorena Lewandowski, LMFT, LCSW, is a licensed marriage and family therapist providing clinical services at Aurora Family Service. Jorena is a graduate of the Aurora Leadership Academy; graduate of the Family Therapy Training Institute and is currently an AAMFT Approved Supervisor who is supervising FTII postgraduate MFT trainees. She is co-creator of Changing Families: The Impact of Divorce on Children from an African American Perspective, a psychoeducation program mandated by Milwaukee County Courts. Her practice specialties include mental health issues impacting African Americans, trauma counseling, families experiencing domestic violence, impact of chronic medical health illness on mental health with individuals, couples, and families.

Jorena Lewandowski is a mental health professional with 23 years of psychotherapy experience. Jorena specializes in Marriage & Family Therapy and the Training of post graduate Marriage & Family Therapy candidates. Jorena works with primarily African American clients experiencing
Post Traumatic Stress Disorder related to the impact of racism and community violence. Jorena also works with clients experiencing marital difficulties, relationship difficulties, parent-child relationship difficulties and family conflicts.

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**POLICIES AND PROCEDURES**

**FAMILY THERAPY TRAINING INSTITUTE
POLICIES AND PROCEDURES MANUAL**

**LEARNING ENVIRONMENT POLICIES**

**Agency Policies and Procedures**
The Family Therapy Training Institute operates within Aurora Family Service, Aurora Health, and Advocate Health. As such, FTII students, faculty, supervisors, and administrators are expected to adhere to all Advocate Health, Aurora Health, Aurora Family Service, and FTII policies, procedures, and **Team Member/Leader Behaviors**. All AAH policies are available through [PolicyTech](#) in [Caregiver Connect](#). All staff and trainees have access to copies of Aurora Family Service’s Counseling Policies and Procedures Manual and the FTII Policies and Procedures Manual when they join the Family Therapy Training Institute.

**Research Policy and Procedures**
Research conducted and coordinated at the Family Therapy Training Institute of Aurora Family Service will follow the Policy on [Research (Designation and Responsibility of Research Principal Investigator, #2433)](#) protocol of Aurora Family Service and Advocate Aurora Health.

**Professional Conduct**

**Advocate Aurora Team Member Behaviors**
Team Member Behaviors are vital to living out Advocate Aurora’s Purpose of “We help people live well” as well as Values of Excellence, Compassion, and Respect.
What are the Team Member Behaviors?
Our Behaviors are a specific set of expectations about how we work together to achieve our shared purpose. Additionally, the Behaviors represent the knowledge and skills that team members should develop throughout their careers to be successful. The Behaviors are organized into four categories - Engage, Empower, Execute, and Transform – key concepts that will contribute to our transformation.

We set clear expectations to help support our purpose of helping people live well and we will continue to anchor and inspire the way in which will achieve this through our values of compassion, excellence, and respect.

Behaviors:
1. Engage
   a. Collaborates
   b. Communicates Effectively
2. Empower
   a. Values Differences
   b. Fosters Resilience
3. Execute
   a. Ensures Accountability
4. Transform
   a. Exhibits Courage

FTTI Training Philosophy
The Family Therapy Training Institute emphasizes concepts and interventions that positively affect family relationships within a social context. Training is guided by a model that sensitizes therapists to the many factors that affect individuals, couples, families, and the community context throughout the family life cycle. Training focuses on teaching ways of assessing, understanding, and intervening to facilitate change in dysfunctional patterns and to recognize the strengths of individual, couple, family, and societal systems through appropriate therapeutic interventions. Training strengthens therapeutic skills through intensive individual and group supervision which enables the therapist to integrate academic materials and clinical experiences.

Training Objectives
The Family Therapy Training Institute emphasizes concepts and interventions that positively affect family relationships within a social context through the provision of advanced comprehensive academic classes and clinical supervision. FTTI will develop mental health professionals who are highly competent marriage and family therapists who:
1. can accurately assess and diagnose mental and emotional disorders in a systemic and relational manner.
2. are skilled in systemic therapy models.
3. are ethical practitioners, knowledgeable of AAMFT Code of Ethics, Wisconsin statutes that govern licensing, mental health, and care of children.
4. are knowledgeable about their individual therapeutic style, their strengths, and weaknesses.
5. can develop collegial relationships and work collaboratively to support and enhance their clinical practice; and
6. qualify within two years of graduation for Clinical Fellowship in the American Association for Marriage and Family Therapy and for the State of Wisconsin Licensed Marriage and Family Therapist (LMFT) credential.

As part of orientation, new trainees will be given FTTI’s program objectives and available courses.

All academic courses are comprehensive and advanced for postgraduate trainees and include:
1. systemic theory and clinical techniques in marital and family therapy.
2. ethical and legal issues related to professional practice.
3. systemic and relational assessment, diagnosis and treatment of individuals, couples, and families.
4. contemporary and socially significant issues related to the practice of marital and family therapy; and
5. culturally competent practice.

Along with academic courses, FTTI will provide clinical supervision that:
1. is delivered by experienced, practicing AAMFT Approved Supervisors or Supervisors in Training.
2. is comprehensive in scope, providing supervision in a variety of systemic models.
3. regularly uses all methods of supervision including live, videotapes and case review.
4. is challenging, supportive and tailored to the individual needs of each trainee.
5. provides experience that enhances culturally competent practice.
6. meets COAMFTE accreditation, AAMFT Clinical Membership requirements and the Department of Regulation and Licensing, State of Wisconsin licensing requirements; and
7. assesses and measures acquisition of clinical competencies as identified by the American Association for Marriage and Family Therapy practice competencies to a minimum standard defined by the program.

Student Status Designations
Upon admission to FTTI, each student will begin in an active status. Status changes occur when students withdraw from the program, are on academic or clinical probation, or are dismissed from the program. Designations are listed below; any changes in status must be approved by the Program Director.

1) Active – In Good Standing
   a) Part-time (academic only)
   b) Full-time (academic and clinical)

2) Inactive – Temporary Withdrawal (Inactive status is granted for a maximum of two years)
   Students are eligible for reinstatement to the program by paying a $50 non-refundable processing fee and must complete a Request for Reinstatement Form.
Students who remain on Temporary Withdrawal for longer than two years will be automatically changed to Permanently Withdrawn and must be re-admitted to the program through the application process, which includes payment of a $50 non-refundable application fee.

Students who fail to return by their anticipated return date and have not submitted a request for an extension will be automatically changed to Permanently Withdrawn and must be re-admitted to the program.

3) **Withdrawn – Permanent Withdrawal**
   Student is eligible for re-admission by going through the application process. This includes a $50 processing fee and all onboarding fees.

4) **Active – Academic Probation**
   Students that receive a formal corrective action plan will be placed on academic probation until their academic performance (including clinical performance) has been improved and the student is returned to good standing. Students who withdraw from the program while on academic probation will be considered dismissed and are therefore ineligible for re-admission.

5) **Dismissed – Involuntary Separation**
   Students that have been dismissed from the FTTI program are ineligible for re-admission to the program.

**Diversity and Anti-discrimination**

The Family Therapy Training Institute (FTTI) program prepares students for a variety of roles and areas of practice within the community. Inherent in the relational and systemic perspective for competent clinical practice is being multi-culturally informed. It is FTTI’s goal that both the curriculum and the learning environment will reflect the diversity of the community in which students will practice. This will include critical conversations between faculty, supervisors, and students in respectful and curious manners, to increase cross-cultural humility and understanding, as well as identify areas of growth.

FTTI will promote a diverse culture among its student body as well as faculty. Toward this end, FTTI is committed to not discriminating in its admission or hiring practices based on race, age, gender, ethnicity, sexual orientation, gender identity, socio-economic status, disability or health status, religion and spiritual practices, nation of origin or language. This is in alignment with AAH’s policies, as outlined in the [AAH Code of Conduct](#).

FTTI will strive for diversity and inclusion and treat all applicants, students, clients and faculty with respect and dignity in keeping with [AAMFT’s Code of Ethics](#).

FTTI prohibits discrimination on the basis of race, age, gender, ethnicity, sexual orientation, relationship status, gender identity, socioeconomic status, disability, health status, religion and spiritual beliefs and/or affiliation, and/or national origin with regard to the recruitment,
admission, codes of conduct, hiring, retention, or dismissal of students, faculty, and supervisors or other relevant educators and/or staff.

**Diversity and Anti-discrimination Procedure**

FTTI will make every effort possible to ensure a diverse student body and faculty by recruiting through a variety of sources within the community. A responsibility of the Continuous Quality Improvement committee as well as the Leadership Council will be to monitor diversity within the program to ensure an environment in which cultural competence is prevalent.

Recruiting and hiring faculty will follow all employment practice policies established by Advocate Aurora Health and Aurora Family Service.

Student admission and retention practices will follow FTTI policies and procedures to ensure non-discrimination and work toward inclusivity and diversity including, but not limited to:

- Eligibility Requirements
- Application Process
- Scholarship Policy
- Trainee Evaluation and Grading
- Dismissal Process

Students who feel they have been discriminated against have access to and may utilize the [Grievance Process](#) to have the matter reviewed and remedied if discrimination occurred.

**Privacy of Student Information**

The Family Therapy Training Institute (FTTI) collects necessary trainee information throughout the application process and during enrollment in the program. FTTI will ensure trainee privacy of personal information in accordance with the AAMFT Code of Ethics (4.7).

Sharing of information with faculty, supervising clinicians or program administrators will be on a “need-to-know” basis for the purpose of enhancing learning and evaluating progress.

Evaluations and letters of recommendation will be provided to others outside FTTI only upon the written request of the student.

Exceptions to maintaining privacy will occur only in the case of unethical behavior.

**Privacy of Student Information Procedure**

FTTI trainee records will be safeguarded in the same manner as Aurora Family Service employees. Demographic information used for reporting will not include any identifying information.

Personal student information will be shared among faculty, supervisory staff, or administration on a “need-to-know” basis for the purpose of enhancing learning and evaluating progress.

Students may have access to their official record by requesting it in writing to the FTTI Program Director; access will be provided within five (5) working days of the request.
Supportive Services
The Family Therapy Training Institute (FTTI) attempts to ensure that no qualified person, solely by reason of disability, be excluded from participation in the academic and clinical program offerings. FTTI makes every reasonable effort to accommodate the needs of students to reduce barriers to learning and to facilitate their successful completion of the program.

Given the intense nature of psychotherapy, all students are encouraged, but not required, to pursue personal therapy or coaching during their training years. No active faculty or supervisor will provide psychotherapy to enrolled trainees in accordance with the AAMFT Code of Ethics.

Supportive Services Procedure
Students are expected to identify any known disabilities or potential impairments to learning and successful completion of the program during the application and admission process, or as soon as is reasonably possible.

FTTI will develop a Support Services plan in cases in which a student prospectively identifies a disability and/or potential impairment to learning and successful completion of the program.

FTTI will develop a Remediation Plan if there are identified problems in learning and the development of minimal competency in achieving academic and clinical competence. The Remediation Plan will include a description of any recommended Supportive Services and include a definition of which Supportive Services FTTI will support financially or provide directly.

Student Retention
The Family Therapy Training Institute (FTTI) will develop and implement processes to promote the retention of students from the point of admission through graduation. FTTI will coordinate retention efforts with regular meetings with students to continuously align a student's program plan with their evolving professional development goals.

Student Retention Procedure
FTTI will develop a Program Plan with each student to cultivate alignment between student goals and priorities and the program offerings. These Program Plans will be reviewed and updated at least twice per year with each student.

FTTI will collaboratively monitor progress towards the successful completion of those plans with students. Monitoring will occur through regular review of student progress in coursework and clinical practice, utilizing formal and informal assessment data.

FTTI will encourage students to approach Faculty, Supervisors and Administrators with concerns about their progress. Opportunities for this include Practicum Teams, Student Meetings, quarterly meetings with the Program Director and Coordinator, as well as informal meetings. Students can request a meeting with faculty, supervisors, and administrators at any point during their time in the program.
FTTI Faculty, Supervisors and Administrators will actively address delays or disruptions in student progress. This will range from informal discussions to the utilization of the remediation processes identified in the Corrective Action and Dismissal Policies.

**Grievance Process**
The Family Therapy Training Institute and its staff are committed to serving the needs of its students. As part of this commitment, the staff encourages open, direct discussion of concerns, complaints, suggestions, or recommendations. The staff is committed to honest, open, and efficient resolution of student concerns. If a student feels that a policy has been applied in an unfair manner, or that student’s needs are not being adequately addressed, he/she should follow the procedure outlined in the Aurora Family Service Complaints and Grievances Policy (#75, See Appendix)

**ADMISSION POLICIES**

**Eligibility**
The Family Therapy Training Institute (FTTI) accepts applications for prospective students who meet eligibility requirements and demonstrate the potential to successfully complete the postgraduate training program and earn eventual licensure as a Marriage and Family Therapist.

In adhering to Advocate Aurora Health’s policies related to vaccinations (AAH Immunization Policy, Document Number 63888), trainees who are admitted to the program should expect to receive information from the organization that requires them to receive both the annual flu and COVID-19 vaccinations. There are processes in place to do so, as well as processes to apply for an exemption. Vaccination requirements apply to all trainees, faculty, supervisors, and staff regardless of location or status. Please see the links below for more information.

**Eligibility Procedure**
The Admissions Committee determines eligibility criteria for prospective students to FTTI.

Family Therapy Training Institute outlines eligibility requirements and applicable deadlines for potential students applying to the program on its website and below. These requirements are also communicated in print material and through the interview process.

To apply for the program, you must have:

- Completion of an accredited graduate degree program in clinical mental health including:
  - Clinical social work, marriage and family therapy, professional counseling, counselor education, clinical mental health counseling, psychology OR
  - Completion of an accredited graduate degree program in clinical health care including:
    - Nursing, medicine
    - Physician assistant
- Graduate education must include:
• Completion of at least three semester credits in each of the following areas: counseling theory, human development and family studies, psychopathology, and research methods
• A minimum of 300 hours of clinical internship
• A minimum 3.0 GPA during graduate school

• Desire and maturity to engage in family therapy
• Capacity for self-awareness and self-reflectiveness
• Eligibility for a Marriage and Family Therapy Training License

Applicants who meet eligibility requirements must apply and submit additional materials outlined in the Application Process to the FTTI Program Director to be considered for acceptance into the training program.

Meeting eligibility requirements does not guarantee acceptance into the training program. The Admissions Committee, in accordance with the Application and Admission Policy, will make admission decisions based upon a range of factors.

**Recruitment (Including Portability of Degree)**

The Family Therapy Training Institute (FTTI) recruit’s potential students from the general community of Master’s-prepared professionals with the goal of attracting a diverse group of highly qualified students that are prepared to succeed in the program.

**Recruitment Procedure**

FTTI utilizes a variety of print and electronic formats to attract potential students. The FTTI Director, with input from the Leadership Council and others, will develop and implement marketing strategies.

FTTI will provide enough information in published promotional material for potential students to make informed decisions about pursuing application to the program.

FTTI will maintain truth in advertising through regular review and updating of the marketing materials.

FTTI will clearly state in published material that it cannot guarantee the portability of the COAMFTE Accredited Post-Degree Certificate to other States, and direct potential students to contact the Licensing Boards of States they may be considering moving to for the most current information about policies related to portability of Certificate and / or Licensure from the State of Wisconsin.

A meeting with the FTTI Director (or designee) will be required for all potential students to allow students to clarify any questions they may have in determining the appropriateness of FTTI for their professional development goals.
Application and Admission
The Family Therapy Training Institute application process is designed to be a collaborative fact-finding process. To ensure that a proper match is made between the training experiences and the trainee's needs, documentation of past educational and relevant experiences is required.

The Family Therapy Training Institute is committed to a policy of equal opportunity in all its training activities and admissions. It does not discriminate based on race, color, national origin, religion, sex, sexual preference, age, physical handicap, or marital status.

Admission decisions are made based on a candidate’s demonstration of the entry-level competence necessary to successfully participate in a postgraduate training program in preparation for licensure as a Marriage and Family Therapist.

Application and Admission Procedure
To be considered for enrollment applicants must follow the application process designated by the Admissions Committee. The admissions process is available on the Family Therapy Training Institute website or by request to the Director or Coordinator. The Admissions Committee will establish criteria for admission.

The Admissions Committee will determine which students are admitted to the program based upon their demonstration of entry-level competence for participation in postgraduate training for Licensure in Marriage and Family Therapy.

If the Admissions Committee identifies any areas in which an admitted student may show potential liabilities that could significantly impair his or her ability to successfully complete the program, the student can be granted the status of Admitted on Probation. The plan for assessing and addressing potential liabilities, the time for review, and the consequences of failure to achieve enough progress within the probationary period will all be communicated in writing to the accepted student.

Admission Decision Appeal Policy
Any applicant for admission or readmission who has been denied, has the right to appeal the decision made by the Admissions Committee. The applicant must make known in writing of their intent and desire to appeal. Please note that this is different than filing a complaint or grievance as outlined on pages 32-33 of this handbook. An applicant is considered for admission into the program in alignment with the program’s anti-discrimination policy.

Applicants have 15 business days from the date of the admissions Denial Notice in which to submit their appeal. Applicants can submit one appeal per academic year.

Admission Decision Appeal Procedure
The applicant will be asked to email a completed Appeal of Admissions Decision Form to the Aurora Family Service Quality Specialist within 10 calendar days of their request, accompanied by a written request of the appeal via a formal letter.
Upon receipt of the documents, the Quality Specialist will convene a committee to review the content of the appeal.

The applicant will be provided with a written response as to whether the appeal is approved or denied within 10 business days of receipt of the written request.

**Financial Assistance: Grants and Scholarships**
The Family Therapy Training Institute (FTTI) has a system for providing financial assistance to eligible students. Scholarships will be awarded to fully enrolled students based upon a combination of need and merit as determined by the FTTI Scholarship Committee. Fully enrolled means that students have a full-time active status and are completing all required academic and clinical work for that year. All recipients must be in good academic standing, meaning they are not involved in any corrective action planning or probation, and follow AAH Team Member Behaviors as outlined in the Code of Conduct.

**Payment**
Scholarships are awarded to students on a yearly basis. The full amount of an awarded scholarship is immediately applied to reduce the overall total amount a student must pay to complete the program. Students’ total tuition amount is divided into equal monthly installments beginning in the first month they begin the program. Students are required to establish an Electronic Funds Transfer with the AFS Business Office at the onset of the academic year in which monthly payments automatically are transferred (usually on the 15th of each month) in the amount of their monthly installment.

If a student is experiencing financial hardship that impacts their ability make timely payments, they must notify the AFS Business Office prior to the next tuition due date (the 15th of the month). There may be specific hardship funds available to students through an application process.

Students who are employed are encouraged to explore benefits in which they can receive tuition reimbursement through their employer. If this is the case, students will be required to make timely payments on their tuition, and then work with their employer for reimbursement.

**Eligibility for Scholarships**
General criteria of eligibility for receiving scholarship funds are based upon financial need, academic achievement, and commitment to advancing the profession of marriage and family therapy.

**Other Criteria**
- Grants / Scholarships are not to exceed 50% of the total cost of tuition and fees.
- Grants / Scholarships as competitive programs. Students may not receive more than one grant / scholarship.
- The number of grants / scholarships available is limited. Applications will be reviewed and awarded by the Scholarship Committee according to eligibility and competitive ranking.
• Students are to complete a FASFA and turn it in with a most recent Federal tax return. Scholarships are based on financial need (using Expected Family Contribution), and not based on the Federal Poverty Level Guidelines.

Additional Financing Options
The Family Therapy Training Institute is not affiliated with a university, so students enrolled in the program are not eligible to apply for federal grants or financial aid. However, students are highly encouraged to explore student loan assistance through their local banking institution. Additionally, students who are employed are encouraged to inquire about an employer education benefit. Students who are eligible for tuition reimbursement through their employer may apply their benefit as a credit towards their current academic year. If this is the case, students are expected to establish an Electronic Funds Transfer for consistent and timely payments, and then work with their employer for reimbursement.

Scholarships Procedure
The availability to scholarships will be communicated with students through the program website, email, and written communication, and / or through the interview process. Students interested in being considered for scholarships are expected to complete an application within the timeframe outlined by the program. Students are expected to reapply for scholarships on an annual basis.

Scholarships are awarded at the beginning of the academic year and are dispersed evenly throughout the courses a student intends to take in a given Academic Year. Students are made aware of scholarships awarded through a letter with a requirement of the student to sign a scholarship agreement or decline the scholarship in writing within (10) business days. If the program does not receive a response within the deadline, it will be interpreted that the student declines the scholarship award, and the funds will be awarded to someone else. After the scholarship agreement is signed, students will meet with a scholarship liaison and continue meetings on a quarterly basis to monitor progress through the program and adherence to terms of the scholarship award.

If a student withdraws from a course after the withdrawal deadline (prior to the second meeting of the course), or is unable to successfully pass the course, they become ineligible to receive the scholarship funds for the course and will be responsible for the full cost of the course.

Tuition Policy
Tuition is invoiced at the beginning of the month after the course begins and accrues throughout the year. Students are expected to adhere to their established payment plan and remain current on their monthly balance. An account becomes delinquent when a student fails to pay the balance when due. A student with a delinquent account is not entitled to receive verification of supervised hours, academic transcripts, or a diploma. In addition, a student may not register for a future course or continue with clinical internship until the account is made current.

Upon admission to the program, candidates are required to pay $500 non-refundable tuition deposit 30 days prior to the start of the academic year. The deposit will be applied to the candidate’s total tuition and fees.
Each admitted student will establish a monthly payment plan with the AFS Business Office. The payment plan will include total tuition and fees minus any applied tuition credits. Monthly payments are received using electronic funds transfer (EFT).

Students with an unpaid balance will not be allowed to enroll in subsequent courses or continue in clinical internship. Non-payment per the terms above or a failed payment plan will result in cancellation of enrollment and a change in the student’s status from “active” to “temporary withdrawn”. A failed payment plan is two missed payments and or two payments that have been returned unpaid.

If a student’s account remains unpaid, the program reserves the right to dismiss the student from the program, and withhold grades, transcripts, and diplomas. Student accounts that are delinquent 120+ days will be sent to collections. Students receiving scholarship(s) may be required to repay part or all the scholarship award for completed courses (see Scholarship Policy).

Changes in Student Status and Financial Accounts
A student must withdraw from a course prior to the withdrawal deadline (before the second meeting of the course) to be eligible for a full refund of that course fee. If the student withdraws from a course after the second meeting, they will be responsible for fulfilling the payment of the entire course. Should a student decide to withdraw from the program entirely, they will be responsible for paying the balance of the course(s) that they are enrolled in at the time of withdrawal in accordance with the guidelines listed above. If the student received financial assistance for their tuition, they may be required to return those funds (see Scholarship Policy).

Financial Hardship
Full-time students in good standing are eligible to apply for financial assistance. To be considered, the student must notify the AFS Business Office prior to the next tuition due date (see Financial Assistance Policy). Students must remain in good standing to continue receiving financial assistance.

The Center for Financial Wellness is a wonderful resource housed with Aurora Family Service for those in need of support when it comes to financial coaching. Students are encouraged to reach out to the Center to learn more about their services.

ACADEMIC POLICIES

Technology Requirements and Technical Training
Students have access to Aurora Family Service computers at the Computer Hotel at the Aurora Family Service offices while on-site. The Family Therapy Training Institute (FTTI) does not provide laptops or computers for individual use throughout the program, unless there is demonstration of financial need. It is expected that students have their own mechanism for accessing a computer or laptop to complete all coursework and clinical documentation within the specified timeframes of the program. Students are expected to have the necessary tools to fully participate in all the aspects of the remote program; this may include but is not limited to a private and confidential space with a clean and professional background, reliable internet
connection, updated router, headphones, and if warranted wide angle camera and speakers to attach to the computer for recording counseling sessions for later review with the their supervisor. FTTI will provide the camera and speakers to assist in recording counseling sessions if the student cannot supply their own. FTTI will inform students of any technological requirements before admission. Students, faculty, and supervisors will receive adequate training for any technological resources that are required for program and / or student success.

**Technology Requirements and Technical Training Procedure**

FTTI will inform students of any technological requirements (including necessary skills and / or access to hardware or software) prior to admission, as well as during the admissions process.

FTTI will make reasonable efforts to provide adequate training (initial and follow up) in any required technological resources to students, faculty, and supervisors. This includes the use of Zoom and Microsoft Teams. In addition, students, faculty, and supervisors can refer to these Zoom FAQs for trouble shooting Zoom meetings ([Troubleshooting Zoom Meetings - Zoom Support.](#)) Remediation efforts may be implemented for students who fail to make minimum necessary progress with initial and follow up training efforts. See the Remediation Policy for further details.

**Use of Advocate Health Issued Technology and Advocate Health Information Resources**

Technological hardware, software, and informational services provided by Advocate Health are for use in the furtherance of FTTI activities, such as coursework, FTTI related video conferencing, accessing the student’s Advocate Health email, and clinical practicum. Students are prohibited from using technology issued by Advocate Health for personal use and are not allowed to auto forward Advocate Health email to their personal email account. Only applications approved by Information Technology can be used on Advocate Health issued devices.

**Authenticity of Student Work**

The Family Therapy Training Institute (FTTI) will promote the authenticity and integrity of student work primarily by maintaining a culture that facilitates the acknowledgement of mistakes and difficulties as an important part of the learning process. FTTI will also integrate multiple means of student assessment to ensure that potential problems in student progress are identified and responded to in a timely manner. Expectations for the authenticity of student work will be posted in published materials. The Remediation and Dismissal Policies will be utilized if students are found to have falsified or plagiarized their completed work.

**Authenticity of Student Work Procedure**

FTTI holds students to the expectation of authenticity in their completed work in published materials. Students are expected to complete and submit their own work whether attending an in person or remote course.

FTTI promotes a supportive, learning culture that facilitates the utilization of mistakes and learning challenges in the growth process primarily through the “Learning to Competency” approach to assessment.
The Remediation and Dismissal Policy will be utilized if a student is found to have falsified or plagiarized their completed work.

**Attendance**
Regular attendance and active participation are required for all academic courses as well as supervision in order to meet program and legal requirements necessary for successful completion of training. While attending a remote course or supervision, students must keep their camera on throughout the event, unless given explicit permission by the instructor or observing in a reflecting team.

A student may be granted a leave from the program following a written request to the FTTI Director and receiving his/her prior approval. At the Director’s and faculty discretion, the student may be assigned additional learning experiences to complete necessary requirements for successful program completion.

**Attendance Procedure**
Attendance will be taken at each class and supervision meeting. Students must attend 75% of each class to be eligible to pass. Attendance alone does not guarantee passing.

Less than 75% attendance, even if excused absences, will result in the student not receiving credit for the course. Students who fail to meet attendance requirements must complete the course the next time that it is offered.

All planned absences from class or supervision must be discussed with the instructor or supervisor in advance.

Illness or planned absences that affect the student’s clinic schedule must follow the policy and procedures of the clinic.

**Evaluation and Grading**
In keeping with best practice standards, FTTI maintains a system of evaluation to ensure quality clinical services provided by mental health professionals. FTTI uses a “pass/fail” grading method for all coursework.

**Evaluation and Grading Procedure**
Academic:
Trainees are expected to read all assigned material and demonstrate an ability to integrate theory through class discussion, assignments and demonstrated clinical practice.

The course syllabi will describe the level of competency that must be demonstrated for each course.

Trainees will be provided the opportunity to rework deficient assignments in accordance with the “learning to competency” philosophy of FTTI.
Clinical:

Clinical evaluation is an ongoing process and FTTI encourages continuous dialog about progress.

Competencies and level of achievement necessary to progress toward graduation are defined in the Practicum Handbook.

Written evaluations are conducted in February and July of each training year with the trainee’s supervisor and are signed by both individuals.

Copies to the evaluation are made available to the trainee, the supervisor, next supervisor and Director of FTTI. Evaluations are placed in the trainee’s personal file as well.

Supervisor evaluations:

Trainees can evaluate their supervisors both in oral and written form. These evaluations are given to the Director of FTTI.

Graduation Requirements

To receive a certificate, each trainee must complete documentation of all required courses, supervision, and clinical contact hours. All fees must be paid; all books must be returned to the FTTI library; all clients must be transferred or terminated; all obligations to Aurora Family Service must be met. Offboarding from Student Clinical Practice Checklist must be completed in its entirety.

Graduation Requirements are established by FTTI Administration, primarily to align with the licensure requirements in Marriage and Family Therapy in the State of Wisconsin. A description of the Graduation Requirements will be made available in published material, including the program website and Program Handbook.

Transfer of Graduate Credits

Occasionally the Family Therapy Training Institute transfers earned credits from a student’s graduate degree. Only classes found to be substantially equivalent in content will be considered. Accepted transfer credits will be documented and placed as transfer credits on the FTTI transcript. A maximum of fifteen graduate credits may be transferred. Trainees must submit syllabi from courses that are transferred.

CLINICAL POLICIES

Clinical Practice

Upon acceptance into the Family Therapy Training Institute, trainees must obtain a State of Wisconsin Marriage and Family Therapy Training License. FTTI will work with the trainee in their efforts to obtain their training license. Following this, they must obtain a National Provider Identifier (NPI) number through the National Plan & Provider Enumeration System website. Trainees should look to their supervisor at their placement site for any issues associated with obtaining their NPI number.
Trainees must participate in required clinical supervision and complete a minimum of 500 face-to-face hours in order to graduate from the program. Trainees must also conduct their clinical practice in accordance with accepted ethical standards, State and Federal statutes, Aurora Family Service and Advocate Aurora Health policies and procedures, and the policies and procedures of the Clinical Affiliate at which the student is placed for practicum. This includes non-discrimination of clients based on race, religion and/or sexual orientation.

**Clinical Supervision**

FTTI maintains a system of clinical collaboration and clinical supervision consistent with COAMFTE MFT Educational Guidelines on Supervision (202-202.10) and best practice standards.

Trainees must complete a minimum of two (2) sections of the remote supervised internship class along with their practicum placement as part of their program that include both seeing clients and weekly supervision (live, videotape and case report). The supervised internship classes are 6 credits each, requiring students to complete a minimum of 200 hours of direct client contact during each year. Following the second year, students have the option to purchase an additional year of supervised internship if they wish; the advantage of this being additional training and supervision towards the 1,000 total hours of direct client contact needed for licensure.

Following the trainee’s ability to demonstrate minimal competency after completion of the first- and second-year supervised internship class, group supervision will be four hours two times per month using live sessions, video tape or case report.

**Clinical Supervision Procedure**

1. Supervision occurs from October to August the following year.
2. Trainees are assigned to groups of 3 or 4.
3. Groups meet on a weekly basis for four hours per meeting.
4. Attendance is mandatory; prior approval is necessary for absences, but the trainee must re-schedule missed supervision to ensure meeting minimum supervision hours for State licensing.
5. During the September break from the supervision course, Trainees must continue to meet with the supervisor at their clinical site if they see clients during that period.
6. Trainees are evaluated using the competency assessment to determine their readiness to advance to the next level of clinical competency.
7. Participation in any chart audits held by the agency or outside accreditation bodies is mandatory for all students.
8. Consistent and timely responses (within one business day) to all emails by Program Administrative team is required.
9. Any complaints or grievances with the trainee’s clinical site, their FTTI supervisor, or other students should be addressed using the complaints and grievance procedures in this handbook.

**Remote Supervision Policy and Procedure**

Students and supervisors are required to use the process below for all virtual live and taped supervisions to ensure safe, consistent, and HIPAA-compliant learning.
environments. All remote supervision other than live reflection team observations will be conducted through the HIPAA-compliant Zoom account provided by the FTTI supervisor. This will include live discussion of the trainees’ caseload and may include review of videotaped sessions. Reflecting teams observing a live session will be conducted over the telehealth delivery platform of the presenting trainee’s practicum site that is compliant with both HIPAA and rules and regulations of the State of Wisconsin.

**Corrective Action Policy**
The Family Therapy Training Institute is dedicated to both student success and to protection of the public in relation to the practice of psychotherapy of the FTTI students. Potential barriers to learning and to the development of competent psychotherapy practice will be monitored, identified, and responded to in systematic ways that both increase the probability of successful student learning outcomes as well as provide basic protection for the clients served by students.

When barriers to learning potentially impair a student’s ability to successfully complete the program and/or provide minimally competent service to clients, a remediation plan will be implemented.

FTTI will provide supportive services to ensure the successful completion of the remediation plan within reasonable financial limits and may ask the student to engage in some supportive services at their own expense.

If a student is unable or unwilling to comply with, or make sufficient progress towards, successful completion of the remediation plan, the FTTI Director, with input from the FTTI Leadership Council, may consider dismissal of the student from the program.

Any student who is not meeting the performance and behavioral expectations of the program will be given written warnings with the potential of being placed on a Performance Improvement Plan. If the student does not adhere to the Performance Improvement Plan, this could progress towards Involuntary Separation from the program without eligibility for readmission.

1. Levels of Corrective Action

a. Level 1 Written Warning – The first level in the corrective action process that may be given for a rule or policy violation, behavior, or for failing to meet job performance expectations.

b. Level 2 Written Warning – A warning that is given for a rule or policy violation, behavior issues, or due to failure to meet job performance expectations, either for the same issue that had previously resulted in a Level 1 Written Warning or for a different issue or may be initiated due to the circumstances and/or seriousness of a situation.

c. Level 3 Written Warning – A last and final warning given for violating a rule or policy, behavior issues, or due to failure to meet job performance expectations, either for the same issue that had previously resulted in a Level 2 Written Warning or for a different issue or may be initiated due to the circumstances and/or seriousness of a situation.
d. Involuntary Separation of Employment – Occurs as the result of rule or policy violation, behavior issues, or due to failure to meet job performance expectations, either the same issue that had previously resulted in a Level 3 Final Written Warning or for a different issue or may be initiated without prior warning due to the circumstances and/or seriousness of a situation.

2. Active Corrective Action – Progression

a. For Level 1 & 2 Written Warnings, team members remain in the status of “active” corrective action for a period of 6 months, during which time a repeated violation of a rule or policy, behavior issue, or due to failure to meet job expectations, either the same issue that previously resulted in a corrective action or a different rule issue, will result in advancing to a higher level of corrective action. If a team member successfully completes his/her 6 months of active corrective action, but shortly thereafter demonstrates a repeated pattern of rule or policy violation, behavior, or failure to meet job performance expectations, he/she is subject to advancing to the next level in the corrective action progression.

b. For Level 3 Final Written Warning, team members remain in the status of “active” corrective action for a period of 12 months, during which time a repeated violation of a rule or policy, behavior issues, or failure to meet job performance expectations, either for the same issue or a different issue, will be subject to involuntary separation of employment.

**Corrective Action Procedure**

Standards for basic academic and clinical competency are identified at the beginning of each course.

FTTI faculty, supervisors, the Clinical Services Director, the FTTI Director and Coordinator will coordinate efforts to monitor and work with students to address minor delays or problems in developing expected levels of academic and clinical competence. Written tracking of attempts to address performance issues will be recorded in the student’s file.

In alignment with Advocate Aurora Health’s Team Member Behaviors, Corrective Action Policies, students will be notified of warnings in writing.

Potential corrective action may include the following: temporary suspension of clinical practice; completion of required documentation; increased supervision; mentoring and coaching on a specific issue; additional reading or study; re-taking a course; taking a new course; further assessment of the nature of the student’s learning and communication abilities; referral to personal therapy; and / or other experiences developed by the staff and student.

The Performance Improvement Plan will be developed collaboratively with the student where possible and communicated with the student in writing and through a meeting with the student. The plan will include timelines for completion and a mechanism for monitoring successful completion. A copy of the plan will be given to the student; any personnel involved in facilitating the implementation of the plan and will be filed in the student’s record.
A. Violation of Rules, Policy, or Failure to Meet Advocate Aurora’s Values, or Failure to Meet Job Performance Expectations

1. FTTI Administrators are responsible for addressing student performance issues in a timely manner as they are identified, and for the documentation of actions taken.

2. Situations subject to corrective action are to be investigated in a fair and unbiased manner, with conclusions that are factually based and supported by the findings of the investigation.

3. The level of corrective action initiated is determined based on the circumstance and/or seriousness of the violation. Leaders are encouraged to use their discretion in the application of this policy, so long as they are consistent in their approach.

4. The Administration team is to meet with the student to present and discuss the corrective action.

5. Administrators are encouraged to inform team members of the availability of Advocate Aurora EAP services and provide contact information.

6. Team members will be asked to sign the corrective action and will be given the opportunity to add their comments to the warning document. Should a team member refuse to sign the warning, the Admin is to make a note on the warning that the warning was presented to and discussed with the team member, and the team member refused to sign.

7. The completed corrective action warning is to be placed in the student’s FTTI file.

Dismissal Policy
The Family Therapy Training Institute reserves the right to dismiss any student from the training program at any time if there is a violation of legal or ethical standards of practice.

Academic Dismissal: Students who fail to meet the requirements of the program including official basis for admissions, minimum grade requirements, and satisfactory academic progress of study are subject to academic dismissal. Failure to comply with AAH, Aurora Family Service policies or procedures or the tuition and training agreement are also grounds for dismissal from the program. Prior to dismissal, every effort will be made to assist the student to make appropriate corrective action (see policies for “Corrective Action”, “Support Services” and “Remediation”).

Administrative Dismissal: Students who violate AAMFT Code of Ethics, AAH, Aurora Family Service, FTTI policies and standards, including but not limited to the Code of Conduct, Team Member Behaviors, may be subject to immediate administrative dismissal.

Dismissal Procedure
If a student’s performance places him/her at risk for dismissal from the program, the student, his/her supervisor(s) and FTTI Director will meet. Meetings and correspondence will be
documented and placed in the student’s file. Official notice of dismissal will be sent to the student in writing along with the appeal procedure.

**Appeal Policy**

If a student has been notified of suspension or dismissal from the program, they are able to request a formal review of the decision. The purposes of the appeal are to allow a student to challenge the information which contributed to the decision of dismissal, and/or challenge the actual suspension or dismissal.

**Appeal Procedure**

When a student requests an appeal, they are to do so in writing within 10 business days of the date of the suspension or dismissal and direct the request to the Aurora Family Service Client Rights Specialist. When writing this request, please explain why you are appealing, and be sure to include the specific circumstances that have prevented you from meeting requirements and any supporting documentation. Retain a copy of the appeal and documentation for your records.

A review will be held, and a decision made regarding the appeal within 30 days of the date of the request to appeal. The review will include convening a committee to review the events that led to the suspension or dismissal; committee members will include: AFS Director of Operations, Director of FTTI, AFS Compliance Officer, FTTI Program Coordinator, and AFS Client Rights Specialist. Following the review, the student will receive notice of the decision in writing within those 30 days. The decision of the committee is final.

If the committee decides to reverse the student’s dismissal, the student may be allowed to remain in the program with specific conditions related to their performance.

**STUDENT RECORDS POLICIES**

FTTI follows the transcript policy for WI (Chapter SPS 407): [Wisconsin Legislature: SPS 407.03](#)
2023-2024 FTTI Student Handbook
Student acknowledgement

I acknowledge that I have received a copy of the 2022-2023 Student Handbook. I understand that it is my responsibility to review, understand and abide by these policies and procedures, and will approach the FTTI Director if I need clarification. I acknowledge that I have been informed of the licensing regulations for marriage in family therapy in the state of Wisconsin, Illinois, and am aware that regulations differ across states. I acknowledge and understand that FTTI is designed to meet the licensure requirements in the state of Wisconsin and Illinois, and the that this program may not meet MFT licensing requirements in other states.

Student’s Name (Print):

Student Signature:  Date:
# Complaints and Grievances

<table>
<thead>
<tr>
<th>Date Issued:</th>
<th>07/2003</th>
<th>Date Revised:</th>
<th>07/2011</th>
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<tbody>
<tr>
<td>Issued by:</td>
<td>Jane Pirsig</td>
<td>Interfacing Department:</td>
<td>All</td>
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## Policy

Aurora Family Service (AFS) has a system for receiving and investigating client complaints and grievances for the purposes of protecting the rights of the client and promoting best practices in the delivery of services.

Complaint – A complaint is defined as a client’s expression of dissatisfaction in response to a real or perceived breakdown in service and/or an allegation of wrongdoing.

Grievance – A grievance is defined as a statement by a client that alleges a violation of their client’s rights.

- **A.** All Aurora Family Service caregivers have the responsibility of handling complaints and grievances responsibly and competently.
- **B.** The submission of a complaint or grievance by a client, family member, or significant other will not compromise any client’s present or future service.
- **C.** The complaint or grievance shall be discussed only with appropriate members of the program or agency staff. Confidentiality of information and sources shall be maintained.
- **D.** All clients shall be informed of their right to submit a complaint or grievance and the procedure for how to do so.
- **E.** Every complaint or grievance must receive a response that substantively addresses the concern.
- **F.** Complaints may be resolved informally by the program or its staff. Grievances shall be received and reviewed by the AFS Client Rights Officer and Executive Director, and the Aurora Health Care Chief Compliance Officer.

## Procedure

Clients shall be instructed that any complaints should be directed to their service provider or program manager/supervisor. In the event that this is unsatisfactory, the program manager or executive director shall serve as the client advocate in resolution of the problem. For those issues that cannot be resolved in this manner, the client shall be referred to the AFS Client Rights Officer and instructed on how to file a formal grievance. The following steps should be followed in handling complaint’s:
1. Listen carefully to the complaint, accept, and acknowledge the client’s point of view, frustration, or inconvenience.
2. Obtain additional information: ask questions to clarify the problem.
3. Summarize your understanding of the complaint.
4. Find out what the client wants as an outcome.
5. Discuss alternatives, solutions, and options with the client.
6. Build goodwill by demonstrating compassion and caring. Thank the client for bringing the concern to your attention.
7. Apologize for what the client experienced, but do not admit liability. Determinations of liability shall be made by those in legal and risk management roles.
8. Act promptly and follow up with the client.
9. Seek supervision as needed.
10. Complaints regarding the potential violation of a client’s rights shall be immediately referred to the AFS Client Rights Officer or Executive Director.

11. If a formal grievance is received from a client, the following steps shall be taken:
   a. Within 3 days of receipt of the grievance, the program manager shall notify the AFS Client Rights Officer and AFS Risk Management Team and present the grievance.
   b. The Risk Management Team shall review the grievance and provide the client with a written report of findings within 30 days of receipt of the grievance.
   c. If the grievance is determined to be “founded,” then it means that there has been a violation of the client’s rights, and the Aurora Health Care Chief Compliance Officer shall immediately be notified with specific recommendations for resolving the problem.
   d. If the grievance is determined to be “unfounded,” then it means that no violation of the client’s rights has occurred. If through the process of review and investigation the Risk Management Team identifies issues affecting the quality of services being provided, then the report will include informal suggestions for improving the situation and/or delivery of services.
   e. If the client feels that their grievance has not been resolved to his/her satisfaction, the client may request an administrative review by the Aurora Health Care Chief Compliance Officer.

12. All complaints and grievances, including reports and outcomes, shall be documented in the client record and in any other tracking system identified by Aurora Family Service.
<table>
<thead>
<tr>
<th>Approved By:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Jane Pirsig</td>
<td>07-01-2011</td>
</tr>
<tr>
<td>Executive Director</td>
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<tr>
<td>Aurora Family Service</td>
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