

# LICENSED MARRIAGE AND FAMILY THERAPIST WRITTEN CLINICAL EXAMINATION OUTLINE

Effective Date 2013

I. Clinical Evaluation (20%) – This area assesses the candidate’s ability to identify presenting problems and collect information to assess clinical issues and formulate a diagnostic impression.		
Section	Job Task	Associated Knowledge
IA. Clinical Assessment (11%)	T1. Identify presenting problems by exploring client’s initial concerns to determine purpose for seeking therapy.	K1. Knowledge of clinical interviewing techniques. K2. Knowledge of active listening techniques. K3. Knowledge of procedures used to gather intake information. K4. Knowledge of methods used to evaluate verbal and nonverbal cues.
	T2. Identify precipitating events related to client’s presenting problems to determine impact on current level of functioning.	K3. Knowledge of procedures used to gather intake information. K55. Knowledge of the impact of psychosocial stressors on presenting problems and current functioning.
	T3. Identify unit of treatment (e.g., individual, couple, family) to determine the plan for therapy.	K5. Knowledge of factors influencing the choice of unit of treatment (e.g., individual couple, family).
	T4. Identify the family/couple’s pattern(s) of interaction.	K18. Knowledge of the stages of the family life cycle. K19. Knowledge of the impact of disruption (e.g., divorce, loss) in the family life cycle. K20. Knowledge of patterns of interactions within couples. K21. Knowledge of patterns of interactions within families. K36. Knowledge of methods of collecting family history. K37. Knowledge of methods used to assess the impact of family history on family relationships.
	T5. Assess client’s motivation for therapy by discussing client’s expectations of therapeutic outcome.	K6. Knowledge of the role of client motivation in therapeutic outcome. K7. Knowledge of interventions used to facilitate engagement of involuntary clients in the therapeutic process. K33. Knowledge of methods used to gather information about client’s values and beliefs.
	T6. Identify client’s strengths to incorporate into the treatment plan.	K30. Knowledge of methods used to identify client’s strengths. K31. Knowledge of link between client’s strengths and coping skills.
	T7. Explore client’s previous therapy experience(s) to determine impact on current therapeutic process.	K8. Knowledge of the effects of previous therapy on current therapeutic process. K12. Knowledge of cultural beliefs about therapy and mental health.
	T8. Assess for past/present addiction to determine how to proceed with treatment.	K13. Knowledge of the impact of addiction on physical, behavioral, affective, and cognitive functioning. K15. Knowledge of the effects of addiction on psychosocial functioning and family relationships. K62. Knowledge of assessment methods used to diagnose addiction.
	T13. Explore impact of human diversity factors on client’s presenting problems and treatment.	K10. Knowledge of the effects of human diversity factors on client’s functioning. K11. Knowledge of the effects of level of acculturation on client’s functioning. K12. Knowledge of cultural beliefs about therapy and mental health. K33. Knowledge of methods used to gather information about client’s values and beliefs. K35. Knowledge of the implications of human diversity factors on client relationships. K39. Knowledge of the impact of diversity on family structure and values. K52. Knowledge of the impact of spirituality on the presenting problems and treatment.

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<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
IA. Clinical Assessment, Cont. (11%)	T15. Assess primary caregiver’s willingness and ability to support dependent adult/minor client’s treatment.	K43. Knowledge of methods used to identify the primary caregiver’s level of involvement in therapy. K44. Knowledge of methods used to identify levels of influence of significant others on client’s treatment. K45. Knowledge of methods used to identify support systems within social networks.
	T16. Assess influence of client’s significant others to determine impact on treatment.	K36. Knowledge of methods of collecting family history. K37. Knowledge of methods used to assess the impact of family history on family relationships. K38. Knowledge of the effects of family structure and dynamics on the development of identity. K39. Knowledge of the impact of the cultural context on family structure and values. K44. Knowledge of methods used to identify levels of influence of significant others on client’s treatment. K45. Knowledge of methods used to identify support systems within social networks.
	T17. Explore impact of the economic, educational, political, social, and work environment on client’s presenting problems and treatment.	K45. Knowledge of methods used to identify support systems within social networks. K50. Knowledge of the impact of economic stressors on presenting problems and treatment. K51. Knowledge of the impact of sociopolitical climate on the therapeutic process. K55. Knowledge of the impact of psychosocial stressors on presenting problems and current functioning.
IB. Referral Services (2%)	T9. Evaluate client’s medical history and current complaints to determine need for medical referral.	K24. Knowledge of the effects of physical condition on psychosocial functioning. K60. Knowledge of the impact of medication on physical and psychological functioning. K25. Knowledge of the relationship between medical conditions and psychosocial functioning. K26. Knowledge of factors or symptoms that indicate need for a medical evaluation.
	T10. Evaluate client’s thought processes and behaviors that indicate a need for psychiatric referral.	K27. Knowledge of elements of a mental status examination. K29. Knowledge of application of mental status examinations. K32. Knowledge of psychological features or behaviors that indicate need for a psychiatric evaluation. K34. Knowledge of affective, behavioral, and cognitive factors that indicate the need for supplemental testing.

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IB. Referral Services, Cont. (2%)	T11. Evaluate client’s affective, behavioral, and cognitive functioning that indicate a need for referral for testing.	K17. Knowledge of behavioral and psychological indicators of developmental disorders. K29. Knowledge of application of mental status examinations. K34. Knowledge of affective, behavioral, and cognitive factors that indicate need for supplemental testing.
	T12. Explore client’s need for community resource referrals based on presenting problems and treatment.	K9. Knowledge of the effects of socioeconomic status on client’s functioning. K46. Knowledge of community resources available to clients. K47. Knowledge of assessment methods used to identify client’s need for community resources.
IC. Diagnosis (7%)	T18. Gather information from client about physical/psychosocial history to formulate a diagnostic impression.	K22. Knowledge of the stages of child/adolescent development. K23. Knowledge of the stages of adult development. K24. Knowledge of the effects of physical condition on psychosocial functioning. K25. Knowledge of the relationship between medical conditions and psychosocial functioning. K40. Knowledge of the impact of dynamics between the client and the work environment on presenting problem. K41. Knowledge of the impact of dynamics between the client and educational settings on presenting problem. K53. Knowledge of Diagnostic and Statistical Manual criteria used to identify diagnoses. K55. Knowledge of the impact of psychosocial stressors on presenting problems and current functioning. K61. Knowledge of criteria used to identify differential diagnoses.
	T19. Gather information from collateral sources about client to formulate a diagnostic impression.	K42. Knowledge of procedures used to gather information from professionals and other involved parties. K53. Knowledge of Diagnostic and Statistical Manual criteria used to identify diagnoses.
	T20. Administer standardized assessment instruments (e.g., depression/anxiety inventories, Mental Status Exam) to obtain diagnostic information.	K27. Knowledge of elements of a mental status examination. K28. Knowledge of methods used to administer a mental status examination. K29. Knowledge of the application of mental status examinations. K57. Knowledge of purposes of standardized assessment instruments. K58. Knowledge of methods of administration of standardized assessment instruments.

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<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
IC. Diagnosis, Cont. (7%)	T21. Formulate a diagnosis based on assessment information to use as a basis for treatment planning.	K53. Knowledge of Diagnostic and Statistical Manual criteria used to identify diagnoses. K54. Knowledge of procedures used to integrate assessment information with diagnostic categories. K55. Knowledge of the impact of psychosocial stressors on presenting problems and current functioning. K56. Knowledge of the influence of onset, frequency, intensity, and duration of symptoms to formulate a diagnosis. K61. Knowledge of criteria used to identify differential diagnoses.
	T22. Assess impact of addiction on client to develop a diagnostic impression.	K14. Knowledge of criteria used for differentiating addiction. K62. Knowledge of assessment methods used to diagnose addiction. K61. Knowledge of criteria used to identify differential diagnoses.
	T23. Assess impact of medication or physical condition to develop a diagnostic impression.	K25. Knowledge of the relationship between medical conditions and psychosocial functioning. K60. Knowledge of the impact of medication on physical and psychological functioning.

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II. Crisis Management (12%) – This area assesses the candidate’s ability to identify, evaluate, and manage crisis situations.

<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
IIA. Crisis Assessment (6%)	T24. Assess severity of client’s crisis to determine what immediate interventions are needed.	K63. Knowledge of methods used to identify crisis situations. K71. Knowledge of methods used to evaluate severity of client’s symptoms. K83. Knowledge of the impact of previous trauma on current functioning. K85. Knowledge of the effects of current trauma on client’s functioning.
	T25. Assess severity of client’s addiction on the crisis to determine level of impairment.	K99. Knowledge of the indicators of being under the influence. K100. Knowledge of methods used to evaluate severity of client’s addiction.
	T26. Evaluate client’s potential for self-destructive and self-injurious behavior to determine level of intervention.	K63. Knowledge of methods used to identify crisis situations. K70. Knowledge of methods used to assess client’s strengths and coping skills. K81. Knowledge of physical and psychological indicators of self-destructive and/or self-injurious behavior. K82. Knowledge of risk factors that indicate potential for self-destructive behavior.
	T27. Assess for suicide potential by evaluating client’s lethality to determine level of intervention.	K65. Knowledge of risk factors that indicate potential for suicide within age, gender, and cultural groups. K66. Knowledge of physical and psychological indicators of suicidality. K67. Knowledge of the effects of precipitating events on suicide potential. K81. Knowledge of physical and psychological indicators of self-destructive and/or self-injurious behavior. K82. Knowledge of risk factors that indicate potential for self-destructive behavior.
	T28. Evaluate severity of crisis situation by assessing the level of impairment to client’s life.	K63. Knowledge of methods used to identify crisis situations. K64. Knowledge of crisis management protocols. K84. Knowledge of the impact of psychosocial stressors on client’s functioning. K87. Knowledge of methods used to determine whether a client is gravely disabled.
	T29. Identify indicators of abuse/neglect by exploring client’s situation to determine level of intervention.	K72. Knowledge of criteria used to determine situations that constitute high risk for abuse. K73. Knowledge of indicators of abuse. K77. Knowledge of indicators of neglect. K78. Knowledge of indicators of endangerment. K92. Knowledge of strategies used to address safety in situations of abuse.
	T30. Assess for domestic violence to determine level of intervention.	K63. Knowledge of methods used to identify crisis situations. K72. Knowledge of criteria used to determine situations that constitute high risk for abuse. K78. Knowledge of indicators of endangerment. K79. Knowledge of indicators of domestic violence. K92. Knowledge of strategies used to address safety in situations of abuse.
	T31. Evaluate level of danger client presents to others to determine need for immediate intervention.	K64. Knowledge of crisis management protocols. K80. Knowledge of risk factors that indicate client’s potential for causing harm to others. K90. Knowledge of strategies used to deal with dangerous clients.

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<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
IIA. Crisis Assessment, Cont. (6%)	T32. Explore client’s trauma history to determine impact on current crisis.	K83. Knowledge of the impact of previous trauma on current functioning. K84. Knowledge of the impact of psychosocial stressors on client’s functioning. K85. Knowledge of the effects of current trauma on client’s functioning.
	T33. Explore the impact of human diversity factors on client’s current crisis.	K97. Knowledge of the effects of human diversity factors on crises. K98. Knowledge of the effects of acculturation factors on crises.
IIB. Crisis Management (6%)	T35. Develop an intervention strategy to reduce potential for harm with/for client who has indicated thoughts of causing danger to self.	K86. Knowledge of strategies used to manage psychosocial stressors. K88. Knowledge of strategies used to reduce incidence of self-destructive/self-injurious behavior. K89. Knowledge of methods used to manage suicidality.
	T36. Develop an intervention strategy to reduce potential for harm with/for client who has indicated thoughts of causing danger to others.	K90. Knowledge of strategies used to deal with dangerous clients. K91. Knowledge of strategies used for anger management. K93. Knowledge of strategies used to manage situations dangerous to therapist. K95. Knowledge of referral sources used to manage crises.
	T37. Develop an intervention strategy with/for a client in a potentially abusive situation to provide for safety of client and family members.	K92. Knowledge of strategies used to address safety in situations of abuse. K96. Knowledge of methods used to coordinate collateral services to manage crisis. K149. Knowledge of intervention methods used for treating abuse within families. K150. Knowledge of intervention methods used for treating the impact of violence.
	T60. Develop strategies to address the impact of crisis issues/psychosocial stressors on client’s treatment.	K149. Knowledge of intervention methods used for treating abuse within families. K150. Knowledge of intervention methods used for treating the impact of violence. K151. Knowledge of interventions used for treating the impact of psychosocial stressors. K152. Knowledge of interventions used for treating the impact of trauma.
	T38. Provide referrals of viable resources to augment management of client’s crisis.	K94. Knowledge of support systems used to manage crises. K95. Knowledge of referral sources used to manage crises. K96. Knowledge of methods used to coordinate collateral services to manage crisis.
	T39. Collaborate with involved parties to augment management of client’s crisis.	K89. Knowledge of methods used to manage suicidality. K94. Knowledge of support systems used to manage crises. K95. Knowledge of referral sources used to manage crises. K96. Knowledge of methods used to coordinate collateral services to manage crisis.

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III. Treatment Planning (20%) – This area assesses the candidate’s ability to develop a comprehensive treatment plan and prioritize treatment goals based on assessment, diagnoses, and theoretical model.		
<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
IIIA. Therapeutic Goals (2%)	T40. Establish collaborative treatment goals by integrating therapist and client perspectives about the presenting problems.	K101. Knowledge of strategies used to integrate client and therapist’s understanding of the goals into treatment planning. K109. Knowledge of third party specifications (e.g., managed care, court-mandated, EAP) that impact treatment planning.
	T41. Prioritize treatment goals to develop course of treatment.	K102. Knowledge of factors that influence the frequency of therapy sessions. K103. Knowledge of strategies used to prioritize treatment goals. K104. Knowledge of methods used to formulate short-and long-term treatment goals.
	T57. Identify methods to monitor client’s progress toward treatment goals and outcomes.	K105. Knowledge of criteria used to monitor therapeutic effectiveness. K106. Knowledge of procedures to measure therapeutic outcomes.
IIIB. Treatment Plan Development (8%)	T42. Formulate a treatment plan incorporating client’s diversity to provide therapy sensitive to client’s values, beliefs, and social environment.	K107. Knowledge of methods used to formulate a treatment plan within diverse populations. K108. Knowledge of theoretical modalities used to formulate a treatment plan. K111. Knowledge of adjunctive services within community/culture used to augment therapy.
	T52. Determine need for referral for adjunctive services to augment client’s treatment.	K110. Knowledge of methods used to identify need for adjunctive services. K111. Knowledge of adjunctive services within community/culture used to augment therapy.
	T53. Integrate community resources into treatment plan to support client’s therapeutic goals.	K111. Knowledge of adjunctive services within community used to augment therapy. K112. Knowledge of methods used to integrate available community resources into treatment planning. K127. Knowledge of strategies to develop professional and community contacts to facilitate treatment.
	T54. Integrate information obtained from medical/mental health providers to formulate treatment plan.	K113. Knowledge of methods used to integrate information obtained from medical/mental health providers into treatment planning.
	T55. Integrate information obtained from involved parties to formulate a treatment plan.	K112. Knowledge of methods used to integrate available community resources into treatment planning. K114. Knowledge of methods used to integrate information obtained from collateral sources into treatment planning.
	T48. Formulate a treatment plan within a group therapy setting to provide a framework for client’s therapy.	K122. Knowledge of the assumptions, concepts, and methodology associated with group therapy.
	T49. Formulate a treatment plan within a child/adolescent therapy context to provide a framework for client’s therapy.	K123. Knowledge of the assumptions, concepts, and methodology associated with child/adolescent therapy.
	T50. Formulate a treatment plan with an evidence-based context to provide a framework for client’s therapy.	K125. Knowledge of the assumptions, concepts, and methodology associated with evidence-based approaches.

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<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
IIIB. Treatment Plan Development, Cont. (8%)	T51. Formulate a treatment plan with consideration of third party provisions (e.g., managed care, court mandated, EAP) to meet client’s needs.	K109. Knowledge of third party specifications (e.g., managed care, court-mandated, EAP) that impact treatment planning.
	T56. Coordinate a treatment plan by collaborating with a multidisciplinary team.	K113. Knowledge of methods used to integrate information obtained from medical/mental health providers into treatment planning. K114. Knowledge of methods used to integrate information obtained from collateral sources into treatment planning. K115. Knowledge of factors associated with the use of a multidisciplinary team approach to treatment. K116. Knowledge of the impact of combining treatment modalities in treating problems or disorders.
IIIC. Theoretical Orientation (10%)	T43. Formulate a treatment plan within a cognitive-behavioral (e.g., REBT, CT) orientation to provide a framework for client’s therapy.	K117. Knowledge of the assumptions, concepts, and methodology associated with a cognitive-behavioral approach.
	T44. Formulate a treatment plan within a humanistic/existential (e.g., gestalt, client-centered, experiential) orientation to provide a framework for client’s therapy.	K118. Knowledge of the assumptions, concepts, and methodology associated with a humanistic-existential approach.
	T45. Formulate a treatment plan within a postmodern (e.g., narrative, solution-focused) orientation to provide a framework for client’s therapy.	K119. Knowledge of the assumptions, concepts, and methodology associated with a postmodern approach.
	T46. Formulate a treatment plan within a psychodynamic (e.g., attachment, depth psychology, object relations, self-psychology) orientation to provide a framework for client’s therapy.	K120. Knowledge of the assumptions, concepts, and methodology associated with a psychodynamic approach.
	T47. Formulate a treatment plan within a systems (e.g., structural, strategic, multigenerational, communications) orientation to provide a framework for client’s therapy.	K121. Knowledge of the assumptions, concepts, and methodology associated with a systems approach.



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IV. Treatment (20%) – This area assesses the candidate’s ability to implement, evaluate, and modify clinical interventions consistent with the treatment plan and theoretical orientation, including treatment outcomes and diversity factors.

<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
IVA. Therapeutic Intervention (8%)	T58. Maintain a therapeutic relationship with client to facilitate treatment.	K128. Knowledge of the components needed to maintain the therapeutic relationship. K129. Knowledge of strategies used to maintain a therapeutic relationship. K130. Knowledge of the impact of value differences between therapist and client on the therapeutic process. K201. Knowledge of strategies to promote client’s autonomy within the therapeutic relationship.
	T59. Provide psychoeducation as it relates to client’s treatment needs.	K167. Knowledge of use of psychoeducation as it relates to client’s treatment needs.
	T64. Implement interventions consistent with child/adolescent therapy theories to facilitate client’s treatment.	K144. Knowledge of the use of interventions associated with child/adolescent therapy. K145. Knowledge of the role of the therapist in child/adolescent therapy approach.
	T67. Implement interventions consistent with developmental stages to facilitate client’s treatment.	K153. Knowledge of the use of interventions associated with developmental stages. K154. Knowledge of methods used to assist client to adjust to cognitive, emotional, physical, and spiritual changes associated with the life cycle. K155. Knowledge of methods used to address variations in the family life cycle process. K159. Knowledge of methods to address end of life issues. K160. Knowledge of methods used to address elder issues.
	T68. Implement interventions sensitive to client’s diversity to enhance treatment outcomes.	K130. Knowledge of the impact of value differences between therapist and client on the therapeutic process. K156. Knowledge of approaches used to address diversity issues. K157. Knowledge of approaches used to address acculturation issues.
	T70. Implement interventions consistent with addiction models to facilitate client’s treatment.	K148. Knowledge of intervention methods used for treating addiction.
	T71. Implement interventions consistent with group therapy theories to facilitate client’s treatment.	K142. Knowledge of the use of interventions associated with group therapy. K143. Knowledge of the role of therapist from a group therapy approach.
	T72. Implement interventions consistent with evidence-based outcomes to measure therapeutic effectiveness.	K168. Knowledge of methods used to measure therapeutic outcomes.
	T73. Evaluate therapeutic effectiveness by monitoring client’s progress to determine need for treatment plan revision.	K131. Knowledge of strategies used to monitor treatment progress. K168. Knowledge of methods used to measure therapeutic outcomes.
	T118. Develop strategies to address the impact of issues/psychosocial stressors in treatment.	K151. Knowledge of interventions used for treating the impact of psychosocial stressors. K152. Knowledge of interventions used for treating psychosocial stressors.

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<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
IVB. Theoretical Orientation Interventions (7%)	T61. Implement interventions consistent with cognitive-behavioral theories (e.g., REBT, CT) to facilitate client’s treatment.	K132. Knowledge of the role of therapist from a cognitive-behavioral approach. K133. Knowledge of the use of interventions associated with cognitive-behavioral theories.
	T62. Implement interventions consistent with humanistic-existential theories (e.g., gestalt, client-centered, experiential) to facilitate client’s treatment.	K134. Knowledge of the role of therapist from a humanistic-existential approach. K135. Knowledge of the use of interventions associated with humanistic-existential theories.
	T63. Implement interventions consistent with postmodern theories (e.g., narrative, solution-focused) to facilitate client’s treatment.	K136. Knowledge of the role of therapist from a postmodern approach. K137. Knowledge of the use of interventions associated with postmodern theories.
	T65. Implement interventions consistent with psychodynamic theories (e.g., attachment, depth, object relations, self-psychology) to facilitate client’s treatment.	K138. Knowledge of the role of therapist from a psychodynamic approach. K139. Knowledge of the use of interventions associated with psychodynamic theories.
	T66. Implement interventions consistent with systems theories (e.g., structural, strategic, multigenerational, communications) to facilitate client’s treatment.	K140. Knowledge of the role of therapist from a systems approach. K141. Knowledge of the use of interventions associated with systems theories.
IVC. Adjunctive Services (2%)	T74. Implement referral for adjunctive services to augment client’s treatment.	K169. Knowledge of referrals for adjunctive services.
	T75. Provide client with case management services (e.g., linkage to resources, monitor progress, advocate to reduce barriers to treatment) to enhance treatment results.	K170. Knowledge of the components of case management.
	T76. Advocate on behalf of the client for community resources to improve client’s level of functioning.	K169. Knowledge of referrals for adjunctive services. K171. Knowledge of the principles of the Mental Health Services Act as related to the practice of therapy. K172. Knowledge of the application of the Mental Health Services Act principles as related to client treatment. K173. Knowledge of when consultation with other professionals is necessary to manage client’s treatment.

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IVD. Termination (3%)	T77. Determine client’s readiness for termination by evaluating whether treatment goals have been met.	K161. Knowledge of changes in functioning that indicate readiness to terminate therapy. K162. Knowledge of issues related to the process of termination. K164. Knowledge of interventions used to initiate termination.
	T78. Develop a termination plan by assessing client’s needs within framework of third-party specifications (e.g., managed care, court-mandated, EAP).	K165. Knowledge of the impact of third-party specifications (e.g., managed care, court-mandated, EAP) on termination.
	T79. Develop a termination plan with client to maintain therapeutic gains after treatment has ended.	K164. Knowledge of interventions used to initiate termination. K166. Knowledge of methods used to maintain therapeutic gains. K169. Knowledge of referrals for adjunctive services.
	T80. Integrate community resources to provide ongoing support to client following termination of treatment.	K162. Knowledge of issues related to the process of termination. K166. Knowledge of methods used to maintain therapeutic gains.

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V. Ethics (16%) – This area assesses the candidate’s ability to identify, apply, and manage ethical standards and principles in clinical practice.		
Section	Job Task	Associated Knowledge
VA. Informed Consent/ Confidentiality (4%)	T81. Address client’s expectations about therapy to promote understanding of the therapeutic process.	K174. Knowledge of ethical standards used to address expectations of the therapeutic process.
	T82. Evaluate client’s ability to benefit from therapy to determine appropriateness of treatment.	K175. Knowledge of methods and ethical standards used to evaluate the client’s ability to benefit from therapy.
	T83. Discuss management of fees and office policies to promote client’s understanding of the treatment process.	K176. Knowledge of methods used to explain management of fees and office policies.
	T84. Inform client of parameters of confidentiality to facilitate client’s understanding of therapist’s responsibility.	K177. Knowledge of methods used to explain parameters of confidentiality. K178. Knowledge of methods used to explain mandated reporting. K180. Knowledge of confidentiality issues in therapy. K195. Knowledge of confidentiality issues related to couple/family therapy. K196. Knowledge of confidentiality issues related to group therapy. K202. Knowledge of the potential impact of the dissemination of client information through electronic media.
	T85. Inform parent/legal guardian and minor client about confidentiality issues and exceptions.	K179. Knowledge of minor client’s right to confidentiality. K180. Knowledge of confidentiality issues in therapy.
	T88. Manage the impact of legal mandates (e.g., mandated reporting) on the therapeutic process.	K210. Knowledge of processes used to manage impact of mandated reporting.
	T94. Manage confidentiality issues to maintain integrity of the therapeutic relationship.	K179. Knowledge of minor client’s right to confidentiality. K180. Knowledge of confidentiality issues in therapy. K181. Knowledge of strategies used to manage therapeutic relationship.
VB. Therapeutic Boundaries (4%)	T89. Assess for client’s concurrent therapeutic relationships with other providers (e.g., counselors, therapists, psychologists, physicians) to evaluate impact on treatment.	K182. Knowledge of effects of concurrent therapeutic relationships on treatment.
	T95. Manage countertransference reaction to maintain integrity of the therapeutic relationship.	K181. Knowledge of strategies used to manage therapeutic relationship. K186. Knowledge of the impact of transference on countertransference dynamics. K192. Knowledge of strategies necessary to maintain therapeutic boundaries.
	T96. Manage potential dual relationships to avoid loss of therapist objectivity or exploitation of client.	K189. Knowledge of business, personal, professional, and social relationships that create a conflict of interest within the therapeutic relationship. K192. Knowledge of strategies necessary to maintain therapeutic boundaries.
	T97. Manage overt/covert sexual feelings within the therapeutic relationship to maintain integrity of treatment.	K181. Knowledge of strategies used to manage therapeutic relationship. K190. Knowledge of the implications of sexual feelings/contact within the context of therapy. K191. Knowledge of the impact of physical contact on the therapeutic process.

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V. Ethics (16%) – This area assesses the candidate’s ability to identify, apply, and manage ethical standards and principles in clinical practice.		
<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
VC. Competency (3%)	T90. Manage clinical issues outside the therapist’s scope of competence to meet client needs.	K184. Knowledge of criteria used to identify limits of therapist’s scope of competence. K199. Knowledge of referrals used to provide continuity of treatment if the therapist is unable to continue therapeutic relationship. K200. Knowledge of methods used to facilitate transfer of client for continuity of treatment.
	T91. Determine therapist’s scope of competence regarding treatment factors in client diversity.	K184. Knowledge of criteria used to identify limits of therapist’s scope of competence. K185. Knowledge of areas of practice requiring specialized training.
	T92. Determine competency to provide professional services to client by assessing therapist’s own cognitive, emotional, or physical impairment.	K187. Knowledge of effects of therapist’s own cognitive, emotional, or physical impairments on the therapeutic process. K188. Knowledge of strategies used to manage therapist’s own cognitive, emotional, or physical impairments on the therapeutic process.
VD. Therapeutic Relationship (5%)	T87. Manage therapist’s own potential biases regarding human diversity factors.	K183. Knowledge of diversity factors that may affect the therapeutic relationship. K206. Knowledge of implications of the therapist’s potential biases toward clients based on diversity. K207. Knowledge of the impact of diversity on client’s functioning. K208. Knowledge of methods to manage therapist’s feelings about client’s treatment objectives that are outside the therapist’s value system, beliefs, and attitudes.
	T86. Manage client’s safety by evaluating risk factors.	K204. Knowledge of risk factors that indicate potential harm to self or others. K205. Knowledge of methods used to assess the severity of client’s risk factors.
	T93. Manage the impact of ethical responsibilities on the therapeutic relationship.	K181. Knowledge of strategies used to manage therapeutic relationship(s). K193. Knowledge of the impact of ethical responsibilities on the therapeutic relationship.
	T98. Document treatment in client records according to standard of practice to facilitate continuity of care.	K194. Knowledge of standards of practice regarding content of client records.
	T99. Assist client in obtaining further treatment when therapist is unable to continue therapeutic relationship.	K198. Knowledge of ethical considerations for interrupting or terminating therapy. K199. Knowledge of referrals used to provide continuity of treatment if the therapist is unable to continue therapeutic relationship. K200. Knowledge of methods used to facilitate transfer of client for continuity of treatment.
	T100. Manage the termination process to maintain client’s safety.	K203. Knowledge of ethical issues related to client abandonment.

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Effective Date 2013

VI. Law (12%) – This area assesses the candidate’s ability to identify, apply, and manage legal standards and mandates in clinical practice.		
<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
VIA. Confidentiality, Privilege, and Exceptions (7%)	T102. Obtain client’s written authorization to exchange confidential information.	K211. Knowledge of conditions and requirements for disclosing or obtaining confidential information.
	T104. Maintain limits of client confidentiality as required by law.	K211. Knowledge of conditions and requirements for disclosing or obtaining confidential information. K212. Knowledge of laws pertaining to mandated reporting of suspected or known abuse. K214. Knowledge of exceptions to confidentiality pertaining to mandated reporting requirements. K218. Knowledge of laws pertaining to mandated reporting of client’s intent to harm others.
	T105. Initiate evaluation (e.g., involuntary hospitalization) after determining that the client is gravely disabled or a danger to self or others.	K226. Knowledge of legal criteria for initiating involuntary hospitalization.
	T106. Report client’s intent to harm others as defined by mandated reporting requirements.	K218. Knowledge of laws pertaining to mandated reporting of client’s intent to harm others.
	T107. Report cases of abuse as defined by mandated reporting requirements.	K212. Knowledge of laws pertaining to mandated reporting of suspected or known abuse. K197. Knowledge of the impact of exploitation of the client.
	T108. Comply with legal standards pertaining to treatment of minors.	K222. Knowledge of laws regarding consent to treat a minor. K223. Knowledge of methods used to ascertain who can consent to treat a minor when parental custody is in question. K224. Knowledge of laws pertaining to minor’s rights to confidentiality.
	T109. Respond to client’s requests for records as mandated by law.	K227. Knowledge of laws regarding client’s requests for records.
	T110. Maintain security of client records as mandated by law.	K215. Knowledge of laws regarding security of client records.
	T111. Maintain treatment records as required by law.	K211. Knowledge of conditions and requirements for disclosing or obtaining confidential information. K213. Knowledge of laws regarding documentation of clinical services. K215. Knowledge of laws regarding to security of client records.
	T112. Assert client privilege about requests for confidential information as mandated by law.	K219. Knowledge of laws regarding holder of privilege. K220. Knowledge of laws regarding exceptions to privilege. K221. Knowledge of laws regarding privileged communication. K228. Knowledge of laws regarding therapist’s response to subpoenas. K229. Knowledge of laws regarding therapist’s response to court orders for confidential information.

# LICENSED MARRIAGE AND FAMILY THERAPIST WRITTEN CLINICAL EXAMINATION OUTLINE

Effective Date 2013

VI. Law (12%) – This area assesses the candidate’s ability to apply and manage legal standards and mandates in clinical practice.

<i>Section</i>	<i>Job Task</i>	<i>Associated Knowledge</i>
VIB. Professional Conduct (5%)	T101. Disclose fee structure for professional services to client as mandated by law.	K225. Knowledge of laws pertaining to disclosing fees for professional services.
	T103. Comply with legal standards pertaining to scope of practice to promote client’s safety and welfare.	K217. Knowledge of laws that define scope of practice. K239. Knowledge of methods to maintain scope of practice when participating on a multidisciplinary team.
	T113. Comply with legal standards about sexual contact, conduct, and relations with client.	K216. Knowledge of laws regarding sexual conduct between therapist and client. K231. Knowledge of situations requiring distribution of the State of California, Department of Consumer Affairs’ pamphlet entitled, <i>Therapy Never Includes Sexual Behavior</i> .
	T114. Comply with legal standards regarding advertising when informing the public of therapist’s qualifications and services.	K230. Knowledge of laws regarding advertisement and dissemination of information pertaining to professional qualifications and services.
	T115. Comply with legal standards related to the Health Information Portability and Accountability Act (HIPAA).	K232. Knowledge of the application of HIPAA requirements. K202. Knowledge of the potential impact of the dissemination of client information through electronic media.
	T116. Comply with legal standards related to the practice of telemedicine.	K233. Knowledge of laws related to confidentiality of telemedicine. K234. Knowledge of methods to obtain informed consent prior to engaging in telemedicine. K235. Knowledge of laws related to the practice of telemedicine.
	T117. Comply with legal standards related to intern practice.	K236. Knowledge of disclosure requirements for interns. K237. Knowledge of legal requirements for supervisors of interns. K238. Knowledge of laws regarding payment for services related to interns.

## LICENSED MARRIAGE AND FAMILY THERAPIST WRITTEN CLINICAL EXAMINATION OUTLINE SAMPLE QUESTIONS

### Clinical Evaluation:

1. A 25-year-old client initiates therapy with complaints of chronic depression and lack of motivation. The client currently lives with his grandparents, does not have any money, and is attempting to finish graduate school. He discloses that his parents had a traumatic divorce several years ago and he fears he will become like his father, who had an emotional breakdown and abused his mother. The client currently has a girlfriend who lives in another state, and he says he feels alone without her. Which of the following actions should the therapist take to assess this client?
  - a. Gather family history, explore client's strengths, identify coping mechanisms
  - b. Gather family history, determine somatic symptoms, identify familial coping patterns
  - c. Explore substance use, determine somatic symptoms, identify coping mechanisms
  - d. Explore substance use, explore client's strengths, identify familial coping patterns

### Crisis Management:

2. A 36-year-old client initiates therapy and reports that the previous night she went on a date with a man she had met online. After dinner he raped her and then dropped her off at home as if nothing happened. She tells the therapist that she spent the night in the emergency room, and is afraid to go home because her assaulter knows where she lives. Which of the following actions should the therapist initially take in this crisis situation?
  - a. Re-establish the client's feelings of control to reduce her sense of victimization
  - b. Evaluate the client's support systems to identify a safe place for the client to stay
  - c. Develop the client's trauma narrative of the event to desensitize emotional impact
  - d. Encourage the client to file a police report to protect other women from the perpetrator

### Treatment Planning:

3. A 7-year-old client is brought to therapy by his mother, who states that the client has been moody and defiant at home and has been fighting with other children at school. She states that the client's change in behavior began four months ago, following a foreclosure of the house that the family had lived in for several years. She further states that the client's father did not move with them to the new apartment, and that despite the fact that he works constantly, they still face eviction so she is refusing to let him see the client. Which of the following goals should be included in the treatment plan for this case?
  - a. Decrease fighting at school and defiance at home  
Re-establish appropriate relationships between family members  
Refer the mother for financial assistance
  - b. Decrease fighting at school and defiance at home  
Re-establish appropriate relationships between family members  
Refer the mother for anger management
  - c. Enhance impulse-control and attention span  
Explore the marital relationship  
Refer the mother for financial assistance
  - d. Enhance impulse-control and attention span  
Explore the marital relationship  
Refer the mother for anger management



**Treatment:**

4. A 19-year-old college student is referred to therapy by her physician for symptoms of panic. Her physician declined to prescribe medication until the client has initiated therapy. The client, however, believes that only medication will control her symptoms and that therapy is a “waste of time.” Which of the following interventions would a cognitive-behavioral therapist use to address the client’s participation in therapy?
- Interpret the client’s distorted cognitions and identify their connection to her current symptoms of panic
  - Explore the client’s disappointment with her physician and validate her automatic thoughts as a logical consequence. Examine the client’s assumptions regarding treatment and collaborate with her to promote a shift in personal conclusions
  - Role-play with the client to increase her assertiveness and encourage her to communicate her concerns directly with her physician

**Ethics:**

5. A therapist is currently involved in a contentious divorce and perceives his spouse as aggressive and unreasonable. The therapist begins meeting weekly with a colleague for consultation to prevent his feelings from impacting therapy with his clients. Three weeks later, a client who has been in ongoing therapy for symptoms of depression begins describing relationship difficulties that are similar to what the therapist is experiencing. Which of the following actions should the therapist take to manage the ethical issues involved in this case?
- Provide continued treatment to the client and discuss the case with the colleague to monitor own feelings
  - Utilize limited self-disclosure and reassure the client of the therapist’s understanding to enhance therapeutic empathy
  - Explain the potential for bias on the part of the therapist and refer the client to an alternate therapist to provide ongoing treatment
  - Contain the therapist’s own feelings and focus discussions on the client’s depression to maintain consistency with established treatment goals

**Law:**

6. A 47-year-old client is referred for therapy by his pastor for complaints of problems in his marriage. The client wants to work on issues that involve only him, but mentions that he was in therapy with his wife several months ago. He wants to obtain the records from the previous therapist, but does not want his wife to know he has sought treatment alone. Which of the following actions should the therapist take in this situation?
- Have the client sign a release to obtain treatment records that pertain to him
  - Contact the previous therapist to request summary records of the client’s therapy
  - Inform the client that the couple must each sign a release for previous treatment records
  - Reassure the client that the records are not necessary because the treatment focus has changed

**Answers: 1-A; 2-B; 3-B; 4-C; 5-A; 6-C**