Eastern Virginia Medical School

SCHOOL OF HEALTH PROFESSIONS &
Graduate Art Therapy and Counseling
Program
Student Handbook

August 21, 2018
The policies and procedures contained in this handbook are subject to change at any time by the appropriate authorities. Current information is available through the Art Therapy & Counseling Program Office, the Office of Student Affairs, and the School of Health Professions. In addition, current policies and procedures will be located on the EVMS Intranet at 
http://info.evms.edu/students.

EVMS does not discriminate on the basis of race, color, national origin, gender, religion, age, sexual orientation, or disability in its programs, activities, or employment practices as required by Title VI, Title IX, and Section 504. Inquiries may be directed to the Title IX and Section 504 Coordinator.
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Claywork Assistant
Gallery Assistant
Studio Assistant
Research Assistant(s)
Student Employment

Degree Requirements

Awards, Scholarships & Honors
Paul Fink Outstanding Art Therapist Award
Academic Honors
Capstone Honors
James J. Consoli Art Therapy Scholarship
Scholarship Criteria
Scholarship Award Process and Criteria
Student Awards
Altruism
Leadership

Graduation

ETHICAL PRINCIPLES FOR ART THERAPISTS
School of Health Professions
Policies and Procedures

2018 - 2019

Effective July 1, 2018
Welcome to the EVMS School of Health Professions! The health professions programs offered by EVMS provide training at a progressive, nationally recognized graduate institution and in clinical and community facilities throughout Hampton Roads and the Commonwealth of Virginia. We are proud to offer a diverse mix of programs that use state-of-the-art classrooms and laboratories essential to the educational process. All programs in the School of Health Professions that are eligible have been individually accredited, and all adhere to the highest professional and ethical standards. EVMS has affiliations with many community partners, including rural and urban clinics, hospitals, and other health-care settings. Our faculty have advanced degrees in their area of expertise, supplemented by many years of professional experience in their respective disciplines. Our students are of the highest caliber, and consistently achieve highly competitive scores on licensing and related examinations.

I wish you the best of luck in achieving your professional and educational goals. Sincerely,

C. Donald Combs, PhD
Vice President and Dean of the School of Health Professions
Professor of Health Professions
BACKGROUND

The EVMS School of Health Professions (SHP) provides an administrative structure for the following academic degree programs:

- Art Therapy and Counseling, MS
- Biomedical Sciences, PhD
- Biomedical Sciences, MS (Medical Master’s), 1-year
- Biomedical Sciences, MS (Medical Master’s), 2-year
- Biomedical Sciences Research, MS
- Biotechnology, MS Clinical
- Psychology, PhD
- Contemporary Human Anatomy, MS
- Doctor of Health Sciences, DHSc Master
- of Healthcare Analytics, MHA Public
- Health, MPH
- Laboratory Animal Science, MS
- Master of Healthcare Delivery Science, MHDS Medical and Health Professions Education, MMHPE Medical and Health Professions Education, PhD/EdD Physician Assistant, MPA
- Pathologists’ Assistant, MS Reproductive Clinical Science, MS Reproductive Clinical Science, PhD Surgical Assisting, MSA

The SHP offers graduate certificates in:
- Contemporary Human Anatomy
- Public Health
  - Core
  - Epidemiology
  - Health Management
- Health Analytics
- Histology
- Implementing Change and Achieving High Performance in the Healthcare Environment
- Medical and Health Professions Education
  - Teaching
  - Leadership
  - Nutritional Science for Medical and Health Professionals
  - Scholarship
- Simulation Program Management

The SHP also offers two fellowship programs:

Physician Assistant Fellowship in Emergency Medicine  Physician Assistant Fellowship in Pediatric Urgent Care

EVMS serves as the school of record for all programs shown above except Clinical Psychology, which is administered by Old Dominion University. Other policies and procedures may be applicable for that program based on school of record responsibilities. In addition to the policies and procedures depicted below, each program may have additional grading or other essential requirements that are communicated to students in writing at the initiation of their first semester or at other times as deemed necessary.

GRADING POLICY

This section specifies the general grading policies and procedures used by all of the health professions programs. In addition to the policies listed here, each program may have additional requirements and communicated to students in writing at the initiation of their first semester.

Grades at the end of each term are assigned according to the EVMS School of Health Professions grading scale.
GRADE POINT AVERAGE SCALE

All SHP programs for which EVMS serves as the school of record will use the following grading scale for those courses in which grades affect the Grade Point Average (GPA).

<table>
<thead>
<tr>
<th>Grade</th>
<th>Grade Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>4.00</td>
</tr>
<tr>
<td>A–</td>
<td>3.67</td>
</tr>
<tr>
<td>B+</td>
<td>3.33</td>
</tr>
<tr>
<td>B</td>
<td>3.00</td>
</tr>
<tr>
<td>B–</td>
<td>2.67</td>
</tr>
<tr>
<td>C+</td>
<td>2.33</td>
</tr>
<tr>
<td>C</td>
<td>2.00</td>
</tr>
<tr>
<td>C–</td>
<td>1.67</td>
</tr>
<tr>
<td>D+</td>
<td>1.33</td>
</tr>
<tr>
<td>D</td>
<td>1.00</td>
</tr>
<tr>
<td>D–</td>
<td>0.67</td>
</tr>
<tr>
<td>F</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Grades not affecting GPA:
- AU = Audit
- I = Incomplete
- P = Pass
- W = Official Withdrawal
- WF = Unofficial Withdrawal

A grading structure that is consistent with program or departmental guidelines will be established for each class by the instructor. These requirements, along with the goals and requirements for each course, the nature of the course content, and the methods of evaluation, are communicated to students at the initiation of each course. Programs are responsible for sending grade reports to students at the end of each term.

Grade Point Calculation

The grade point average is calculated by dividing the accumulated number of grade points earned by the accumulated number of credit hours attempted. Grades of “F” and repeats are included, but official withdrawals, audits, and grades on non-credit courses, non-degree credit courses, and pass/fail courses are not. If a student is required to repeat a course or receives permission from a program director to repeat a course, the grade point average will be calculated using only the repeated course grade and the corresponding point value. However, the original grade assigned for that course will remain on the transcript. Grades in courses accepted for transfer credit are not counted in the computation of grade point average.
Students must have a cumulative grade point average of 3.00 or higher for graduation. Students falling below the minimum GPA requirement may be required to enter a remediation program, placed on probation or suspended in accordance with procedures established below and by each program.

Grading Scale

Unless an exception is approved by the Dean, courses offered in the School of Health Professions will use the following grading scale.

<table>
<thead>
<tr>
<th>Percentile</th>
<th>Grade</th>
</tr>
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<tbody>
<tr>
<td>100 - 94</td>
<td>A</td>
</tr>
<tr>
<td>93 - 90</td>
<td>A-</td>
</tr>
<tr>
<td>89 - 87</td>
<td>B+</td>
</tr>
<tr>
<td>86 - 84</td>
<td>B</td>
</tr>
<tr>
<td>83 - 80</td>
<td>B-</td>
</tr>
<tr>
<td>79 - 77</td>
<td>C+</td>
</tr>
<tr>
<td>76 - 74</td>
<td>C</td>
</tr>
<tr>
<td>73 - 70</td>
<td>C-</td>
</tr>
<tr>
<td>69 - 67</td>
<td>D+</td>
</tr>
<tr>
<td>66 - 64</td>
<td>D</td>
</tr>
<tr>
<td>63 - 60</td>
<td>D-</td>
</tr>
<tr>
<td>59 or less</td>
<td>F</td>
</tr>
</tbody>
</table>

Incomplete Grades

The grade “I” indicates assigned work yet to be completed in a given course or an approved absence from the final examination. When an instructor assigns a grade of “I,” a written agreement is prepared and signed by the instructor and student that specifies the work remaining to be completed and the time frame for doing so. The work should be completed as soon as possible, but not later than the mid-point of the following grading period/semester unless special written approval is granted by the Course Director and Program Director for extraordinary circumstances. The student must petition the Course Director and the Program Director for such an extension at least two weeks before the end of the agreed upon deadline. Unless an extension has been approved by the Course Director and the Program Director, the “I” will convert to either an “F” or the grade as specified in the written agreement after the mid-point of the semester. An “I” grade may not be changed to a “W” under any circumstances.

Withdrawals

A student can withdraw from a course up until the mid-point of the grading period/semester and receive a W grade. Withdrawal after the midterm is not permitted without special approval by the Program
Director. However, in the event of an illness or severe hardship beyond the student’s control, the student should submit a written petition for permission to withdraw from the course to the instructor and program director no later than the last day of classes. If permission is granted by the Program Director, a grade of W is recorded. If permission is not granted, then the student cannot withdraw from the class. A student who stops attending classes without withdrawing is assigned a WF grade unless the student’s performance was failing, in which case a grade of F will be assigned.

Progress Review

Regular assessment of students and feedback to them is essential to effective teaching and learning. All possible effort should be extended to identify students whose performance is unsatisfactory and to establish a remedial intervention plan. Course instructors and program directors will regularly review the academic progress of their designated students and evaluate the overall progress of each student at the conclusion of each grading term and academic year. Each program will establish policies and procedures for completing assessments, communicating results to students, and documenting outcomes. Procedures for addressing performance deficiencies or circumstances that may prohibit students from successfully completing a program are outlined in subsequent pages in the Performance Deficiencies and Probation Procedures. Programs may have additional remediation policies and procedures and students should contact the appropriate Program Director for this information. Program Directors shall provide periodic reports to the Dean of the School of Health Professions that summarize student progress issues for their respective programs, and their plans for improvement.

Additional information regarding policies and procedures not listed in this Handbook, including elective, pass/fail, and audit course options and procedures for evaluating, dropping a course, and reporting of grades vary for each program and will be communicated to students at the initiation of their first semester and other times as deemed necessary.

Grade Appeals

Students may appeal a final course grade by submitting a written request to the course instructor within seven days of the grade being issued. The appeal must state in detail the reasons for the appeal and the action the student requests. The course instructor must respond to the student in writing within seven days with a decision. If the issue is not satisfactorily resolved the student may appeal the decision in writing to the Program Director within seven days. The appeal must state in detail the reasons for the appeal and the action the student requests. If no appeal is lodged within seven days, the student’s grievance will be considered resolved. The Program Director must respond to the student in writing within seven days with a decision. If the issue is still not resolved the student may appeal the decision in writing to the Dean of the School of Health Professions within seven days. The appeal must state in detail the reasons for the appeal and the action the student requests. If no appeal is lodged within seven days, the student’s grievance will be considered resolved. The Dean will review all pertinent material and may meet with the student, the Program Director, the faculty member or other persons as
necessary. The Dean may constitute an advisory group to assist in this review. The Dean will render a written decision within ten days to the Program Director, the faculty member, and the student. The decision of the Dean is final.

**Satisfactory Academic Progress**

All students in the EVMS School of Health Professions are expected to attain a term Grade Point Average of at least 3.00 to be considered in good academic standing and a cumulative GPA of at least 3.00 to graduate. Students who do not meet these criteria are subject to formal warnings, probation and/or dismissal, and a requirement for a written remediation plan. Students who receive a warning or are placed on probation must demonstrate sufficient academic progress in the following term, as determined by the program director and faculty, to remain in the program. Students on probation who fail to demonstrate academic progress in the following term will be subject to dismissal. The Program Director should consider the extent to which a student is performing at a level necessary to attain the knowledge, skills, and competencies required to succeed in the program, including ability to meet the cumulative GPA and other graduation requirements. All programs must review the academic progress of their students on a regular basis and at such intervals deemed appropriate but not less than once at the end of each grading term.

**TRANSFER CREDITS**

Transfer of credit may be allowed for course work taken at a regionally accredited institution of higher learning, such as the Southern Association of Colleges and Schools, for courses in which a grade of B (3.00) or higher was received or a passing grade was achieved in a pass/fail course. Doctoral programs may accept a maximum of 12 transfer credits, and master’s programs may accept a maximum of 9 transfer credits. Course grades obtained from another institution will not be counted in the GPA. All applicants seeking to transfer credit(s) should contact the program for special application or credential requirements. Decisions regarding applicability of transfer courses/credits will be made by the Program Director in consultation with the faculty as deemed appropriate. EVMS assumes responsibility for the academic quality of all course work or credit recorded on the institution’s transcript. It is the responsibility of each program to determine a student’s comprehension of the requisite material and to ensure that the transferred course work and/or learning outcomes are comparable to the courses offered by the applicable EVMS program.
ASSIGNING CREDIT HOURS

SHP programs use the calculus in the table below to assign course credit hours for all courses, on-site or asynchronous.

<table>
<thead>
<tr>
<th>Type of Course</th>
<th>Credit/Contact Hours</th>
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<tbody>
<tr>
<td>Lecture, Seminar, Independent Study</td>
<td>1 credit = 15 contact hours</td>
</tr>
<tr>
<td>Laboratory</td>
<td>1 credit = 30 contact hours</td>
</tr>
<tr>
<td>Clinical Rotations, Internship</td>
<td>1 credit = 80 contact hours</td>
</tr>
</tbody>
</table>

Student contact hour workload equivalency for asynchronous courses shall be determined using the following calculus, with hours adjusted proportionately up or down based on the credits awarded and course length:

<table>
<thead>
<tr>
<th>Semester Format</th>
<th>Credit Hours</th>
<th>Total Hour Commitment</th>
<th>Weekly Course Time Commitment</th>
</tr>
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<tbody>
<tr>
<td>16-week</td>
<td>3</td>
<td>135</td>
<td>8.4 hours</td>
</tr>
<tr>
<td>15-week</td>
<td>3</td>
<td>135</td>
<td>9 hours</td>
</tr>
<tr>
<td>13-week</td>
<td>3</td>
<td>135</td>
<td>10.4 hours</td>
</tr>
<tr>
<td>12-week</td>
<td>3</td>
<td>135</td>
<td>11.3 hours</td>
</tr>
<tr>
<td>10-week</td>
<td>3</td>
<td>135</td>
<td>13.5 hours</td>
</tr>
<tr>
<td>9-week</td>
<td>3</td>
<td>135</td>
<td>15 hours</td>
</tr>
<tr>
<td>8-week</td>
<td>3</td>
<td>135</td>
<td>16.9 hours</td>
</tr>
<tr>
<td>6-week</td>
<td>3</td>
<td>135</td>
<td>22.5 hours</td>
</tr>
</tbody>
</table>

ACADEMIC AND NON-ACADEMIC DEFICIENCIES

Procedures for addressing academic and non-academic deficiencies that may impede student progress or prohibit students from successfully completing a program are defined below, including student appeals to ensure appropriate due process. These procedures apply to programs in which EVMS is the school of record.

Deficiencies

Deficiencies, which may result in probation or dismissal/termination of a student, include both academic and non-academic areas. The Dean of the School of Health Professions or designee may intervene to address academic and non-academic deficiencies and may impose such remedies as are determined to be in the best interests of EVMS.

a) Academic Deficiencies include but are not limited to an inadequate knowledge base; a lack of information gathering ability, problem solving difficulties, poor clinical and technical skills; or errors in judgment.
b) **Non-Academic Deficiencies** include but are not limited to any action or behavior that is considered unacceptable to the training program faculty; poor professional relationships; moral and ethical values unacceptable to the profession; failure to comply with the standards of student behavior including the Code of Student Conduct, the rules, regulations and bylaws of EVMS and/or affiliated practicum sites or the laws which govern the healing arts in the Commonwealth of Virginia; and/or a lack of abilities and talents that are necessary for the performance of expected duties for that health profession.

Each academic program has its own criteria for determining when and how to intervene on matters of academic and non-academic deficiencies. Some may require a written or verbal notification and/or warning from an instructor, advisor, or Program Director to convey concern about student performance and/or to inform the student of the risk of probation unless performance improves. In all programs, a student placed on probation will be informed in writing and his/her performance will be monitored. The written notification must specify if termination in the educational program is a potential outcome of the probationary status. Interventions typically follow the progressive hierarchy of warning, probation, and dismissal.

Probationary status will be defined by the program's faculty, and the terms of probation must be signed by the Program Director and the student. While on probation, the student will be provided close faculty supervision and may or may not be given credit for the time period during which the probationary status is in effect. If the probationary period is not creditable toward the required time for the educational program, an extension of training time (within timeliness for the degree) may be considered at the discretion of the Program Director.

If a student’s conduct compromises acceptable standards of patient care or jeopardizes the welfare of patients under his/her care, the Program Director has the option of immediately suspending the student from clinical duties until such time as an appropriate investigation of the allegations can occur. The Dean of the School of Health Professions, the Associate Dean for Student Affairs, the Director of Financial Aid, and the Registrar must all be notified when a student is placed on probation.
Identification and Remediation of Deficiencies

Faculty and other professional staff will promptly notify the Program Director of areas of concern regarding a student’s academic progress, professional behavior and development. Upon notification of a potential problem, the Program Director or designee will investigate the report and develop a remediation plan if warranted. The Program Director or designee will meet with the student to discuss areas of concern, including development of a remediation plan with clear goals and objectives, a specific time frame for completing the plan, and potential outcomes. The plan will be signed by the Program Director and the student. Follow-up meetings will occur with the student, key program faculty, and the Program Director. Program faculty and Program Directors should use their reasonable judgment in documenting academic and non-academic student issues including remediation plans, progress reports, and supervision meetings. Written documentation is required if a student receives a warning, is placed on probation, or is dismissed from the program.

ACADEMIC AND NON-ACADEMIC GRIEVANCE AND APPEAL PROCEDURES

Students in the School of Health Professions have the right to due process involving grievances and appeals:

The student should discuss the grievance with his or her Program Director. If the grievance is not resolved, a student may file a written appeal to the Dean of the School of Health Professions within seven days of the student’s notification of the Program Director’s decision. Upon receipt of the appeal, the Dean will notify the Registrar accordingly. The Dean or a designee will review all pertinent material and meet with the student. The Dean may convene a Grievance/Appeals Committee composed of Program Directors, faculty, students, and/or chairs of departments not directly involved in the grievance. All testimony, evidence, and witnesses relevant to the appeal shall be made available to this committee. The student has the right to appear before the committee, present testimony and such witnesses or evidence as is deemed relevant by the committee. The student shall not have the right to be represented by counsel at these committee meetings. The Committee will submit its recommendations to the Dean after the review is completed.

The Dean will notify the student within ten days of his/her decision. The decision may include reinstatement, retention, probation, termination, suspension, special academic assignments, or other interventions deemed appropriate to the situation. The judgment of the Dean concerning the grievance shall be final and binding on all parties with the exception of recommending the termination of a student’s participation in an academic program.

In the case of termination from an academic program, the student may file a written appeal to the EVMS President/Provost within five days of the student’s notification from the Dean of the School of Health Professions. The President/Provost will review all pertinent material and notify the student within ten days of receipt of the appeal of his/her decision. The decision of the President/Provost is final.
TUITION CHARGES IF GRADUATION REQUIREMENTS ARE NOT COMPLETED ON TIME

Students who do not complete graduation requirements on time may be charged prevailing tuition rates if they retake a course or if a new course is necessary to finish their program of study. In general, students will not incur additional tuition charges if they complete courses or clinical rotations within approximately 90 days of the original anticipated graduation date.

POLICY FOR STUDENT IDENTITY VERIFICATION IN DISTANCE EDUCATION

EVMS requires its distance education courses and programs to have a process to ensure that a student who registers in a distance or correspondence education course is the same student who participates in and completes the course or program and receives the credits.

The EVMS School of Health Professions requires students to create a special password and to validate their identity using this password at different points during a distance education course or program. Student participation is mandatory. This process is over and above the use of credentials (i.e., user name and password) issued by EVMS to each student as part of matriculation, and thus provides an additional layer of security and ensures academic integrity.

Methods used to verify student identity in distance education protect the privacy of student information. Any data collected will be for the sole purpose of identity verification and will not be used for any other purpose.

Any attempt to circumvent identity verification will be a violation of the Code of Student Conduct and subject to disciplinary action up to and including termination from the course or program.

Students will be notified at the time of registration or enrollment of any charges associated with the verification of student identity.
Graduate Art Therapy and Counseling Program

Policies and Procedures

2018-2019

Last updated August 21, 2018

Updates for CAAHEP Accreditation Standards January 14, 2019
Description of the Graduate Art Therapy and Counseling Program

Program Overview

The Graduate Art Therapy and Counseling Program is a founding program of Eastern Virginia Medical School and the School of Health Professions. The program was founded in 1973 at the opening of EVMS with our first graduating class in 1975. The program evolved from a certificate program to one that offers a Master of Science in Art Therapy and Counseling, with the first master’s degree students graduating in 1982.

Located on the campus of EVMS, the Graduate Art Therapy and Counseling Program utilizes innovative instructional methods in conjunction with our community’s diverse resources to provide students with outstanding educational opportunities. The curriculum provides graduates with the knowledge and skills needed to participate in the delivery of mental health care as art therapists and leaders in a changing healthcare industry.

The EVMS Graduate Art Therapy and Counseling Program is a rigorous academic program based in growth oriented and reflective classroom, studio, community and clinical experiences. EVMS’ program is unique in its balance in clinical practice, art making, and research. Our nationally and internationally renowned faculty have been preparing world class art therapists who are culturally responsive, community-involved, and ethical professionals with successful careers for over 40 years.

- The EVMS Graduate Art Therapy and Counseling Program is a rigorous academic program based in growth oriented and reflective classroom, studio, community and clinical experiences. EVMS’ program is unique in its balance in clinical practice, art making, and research. Our nationally and internationally renowned faculty have been preparing world class art therapists who are culturally responsive, community-involved, and ethical professionals with successful careers for over 40 years. Students are encouraged to develop their own informed theoretical approach to the practice of art therapy.
- Pre-internship clinical practice in assessment and basic skills with simulated patients.
- Internships provide students with three semesters (child, adolescent and adult) of hands-on experience in over 50 choices of settings throughout Hampton Roads.
- The completion of a master's Capstone Project allows students to apply knowledge in the continuum of practice in art therapy, specialty areas of focus and research.
- Areas of specialty include art therapy in the schools and medical art therapy.
- Personal art making is required and supported by our fully-stocked, 2,000 square foot art-making studio which is conveniently located on campus and open to students around the clock.

Employment after Graduation

The GATCP supports the employment search of graduates through specific training in professionalism, resume writing, interviewing, and support with managing job search
resources. The GATCP advertises job openings through emails to alumni and postings on social media. Art Therapists are employed throughout the Hampton Roads region. Because we have a long standing reputation in the community many graduates over the past 40 years have been hired in a variety of mental health, school, and hospital settings. The region in Hampton Roads is receptive to hiring art therapists in many mental health settings, however, the area receives much support from art therapy interns which may pose some limitations in obtaining employment. The GATCP does not guarantee employment because multiple factors contribute to an individual’s preparedness for employment.

**Registered Art Therapist Credential**

As a program that is approved by the American Art Therapy Association Education Program Approval Board, our graduates have an advantage over non-approved programs as they pursue professional credentials through the Art Therapy Credentials Board. The Graduate Art Therapy and Counseling program prepares graduates for seeking the Registered Art Therapist (ATR) credential and Board Certification (BC). We do not guarantee individuals will attain ATR or ATR-BC because pursuit of the professional credentials begins after graduation.

**Licensure**

The EVMS Graduate Art Therapy Program prepares graduates to apply for licensure as professional counselors in Virginia and other states. We do not guarantee individuals will attain licensure because there are additional requirements beyond the scope of the program in order to attain licensure and the requirements vary by state. The field is evolving and there is currently a national initiative for stand-alone Professional Art Therapist licensure. Some states have achieved this license, but currently it does not exist in Virginia.

Graduates often secure employment in positions that do not require credentials or licensure throughout the U.S.
Program Creed and Touchstone

EVMS Art Therapy

Community Focus. World Impact.

We are committed, prepared, and driven towards excellence.

We learn, create, grow, and serve others with compassion.

We engage in reflective practices to develop depth and complexity.

We embrace collaboration.

We honor diversity.

We invest in our profession.

We trust the creative process and accept the challenge of change!
Mission

As passionate, creative, and highly skilled educators, our mission is to provide comprehensive, engaging, and in-depth art therapy education. Our students develop strong artist-therapist identities through growth-oriented and reflective classroom, studio, community, and clinical experience. We prepare world class art therapists who are culturally responsive, community-involved, ethical professionals with successful careers.

Vision

The Graduate Art Therapy and Counseling Program will be recognized for excellence, integrity, and innovation in art therapy education.

Core Values

**Integrity**

We adhere to high standards in which we accept responsibility for conducting ourselves as moral, rational professionals who are accountable stewards and ethical in our practices as art therapists and art therapy educators.

**Creativity**

We foster a climate of energy and openness to explore using the creative process which brings new knowledge and new connections to self, others, and our world.

**Self-Awareness**

We value self-awareness and the capacity for reflection as intrinsic to effective art therapy practice and professional identity development. We strive to maintain these attributes within ourselves and to instill them in our students.

**Humanity**

We dedicate ourselves to cultivating a learning environment that embraces diverse perspectives and lived experiences, developing capacity for empathic understanding, and providing compassionate service to individuals, the community and our world.

**Collaboration**

We embrace collaboration as a fundamental practice to build a professional community based on support and encouragement of individual and collective expression of ideas for learning, best practice, and growth.

**Depth**

We value a richness and intensity in developing ourselves to be competent in breadth of understanding about the complexity of the human experience which includes the unconscious, passion for healing, and connections to soul.
Goals and Objectives

- Prepare competent entry-level Art Therapists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.

- Prepare art therapists with clinical competence in assessment, diagnosis, and treatment planning, which includes fostering skills in therapeutic use of a broad range of art processes and materials, integrative theoretical approaches, and requisite education needed for counseling licensure.

- Prepare art therapists to speak and write professionally about art therapy.

- Encourage students to develop an innovative, professional, ethical, research minded, and culturally responsive approach to art therapy through academic inquiry and personal art making and self-reflection for self-awareness.

Accomplishment of our goals will serve the:

- **Student**, by fostering personal and professional discovery and development with the skills to become life-long learners.

- **Client/patient**, through student preparation to provide competent client/patient-centered primary and specialty care.

- **Institution**, by contributing to a seamless learning environment which fosters the development of competent and compassionate mental healthcare professionals.

- **Community**, by graduating professionals who understand the importance of community service, forging community alliances, and having an understanding of culturally appropriate care.

- **World**, by graduating culturally competent professionals who practice across the globe and contribute to research and social action.

CAAHEP Student Learning Outcomes

Student learning outcomes highlight knowledge, skills and affective/behaviors critical to successful entry-level job performance of an Art Therapy program graduate. Achievement of learning outcomes upon completion of the program is demonstrated by a graduate’s knowledge and ability to:
a. Understand the historical development of Art Therapy as a profession, Art Therapy theories and techniques, as a foundation for contemporary Art Therapy professional practice.
b. Distinguish among the therapeutic benefits of a variety of art processes and media, strategies and interventions, and their applicability to the treatment process for individuals, groups, and families.
c. Recognize that Art Therapy, from a multicultural perspective, takes into consideration the specific values, beliefs, and actions influenced by a client’s race, ethnicity, nationality, gender, religion, socioeconomic status, political views, sexual orientation, geographic region, physical capacity or disability, and historical or current experiences within the dominant culture.
d. Select culturally and developmentally appropriate assessment and evaluation methods and administer and interpret results to identify challenges, strengths, resilience, and resources for Art Therapy treatment planning.
e. Develop culturally appropriate, collaborative, and productive therapeutic relationships with clients.
f. Know federal and state laws and professional ethics as they apply to the practice of Art Therapy.
g. Recognize and respond appropriately to ethical and legal dilemmas using ethical decision-making models, supervision, and professional and legal consultation when necessary.
h. Recognize clients’ use of imagery, creativity, symbolism, and metaphor as a valuable means for communicating challenges and strengths and support clients’ use of art-making for promoting growth and well-being.
i. Recognize the legal, ethical, and cultural considerations necessary when conducting Art Therapy research.
j. Apply principles of human development, artistic and creative development, human sexuality, gender identity development, family life cycle, and psychopathology, to the assessment and treatment of clients.
k. Understand professional role and responsibility to engage in advocacy endeavors as they relate to involvement in professional organizations and advancement of the profession.
l. Continuously deepen self-understanding through personal growth experiences, reflective practice, and personal art-making to strengthen a personal connection to the creative process, assist in self-awareness, promote well-being, and guide professional practice.
m. Pursue professional development through supervision, accessing current Art Therapy literature, research, best practices, and continuing educational activities to inform clinical practice.
n. Recognize the impact of oppression, prejudice, discrimination, and privilege on access to mental health care, and develop responsive practices that include collaboration, empowerment, advocacy, and social justice action.
o. Understand the basic diagnostic process and the major categories and criteria of mental disorders, corresponding treatments, and commonly prescribed psychopharmacological medications.
Curriculum and Course Sequence

Course Pre-requisites, Co-requisites, and/or Other Restrictions

Students are expected to complete the designated curriculum in the sequence specified. Each semester's course work is to be considered prerequisite to the next semester. Students may not enter the program with advanced standing, regardless of education or work experience, and no accelerated curriculum or course waivers are offered. Students may not continue to Internship and Practicum courses if the first semester coursework results in failing grades or below a 2.80 GPA.

Course Sequence

**SEMESTER 1**
AT 516 Clinical Case Conference I (1)
AT 521 Individual Counseling & Psychotherapy (3)
AT 524 Processes & Materials of Art Psychotherapy I (4)
AT 528 Theories of Human Psychological Development (3)
AT 530 Psychopathology (3)
AT 534 Introduction of the History & Theory of Art Therapy (1) (7 weeks)
AT 548 Assessment (3)
AT 550 Practicum Fieldwork (1)

**SEMESTER 2**
AT 520 Group Counseling & Psychotherapy (3)
AT 529 Case Presentation Skills (1)
AT 547 Individual Supervision I (1)
AT 549 Processes & Materials of Art Psychotherapy II (4)
AT 551 Practicum I (.5)
AT 555 Internship I (2.5)
AT 561 Child Counseling & Psychotherapy Skills (1) or
AT 563 Adolescent Counseling & Psychotherapy Skills (1) or
AT 565 Adult Counseling & Psychotherapy Skills (1)
AT 567 Group Supervision Counseling & Psychotherapy w/Children (1.5) or
AT 670 Group Supervision Counseling & Psychotherapy w/Adolescents (1.5) or
AT 667 Group Supervision Counseling & Psychotherapy w/Adults (1.5)
AT 655 Trauma Informed Art Therapy (1)

**SEMESTER 3 (Summer 1st Year)**
AT 513 Research Methods (3)
Electives
### SEMESTER 4
- AT 607  Capstone Project (1)
- AT 616  Clinical Case Conference II (1)
- AT 636  Cultural Competency (3)
- AT 646  Individual Supervision II (1)
- AT 650  Practicum II (.5)
- AT 656  Internship II (2.5)
- AT 660  Child Counseling & Psychotherapy Skills (1) or
- AT 662  Adolescent Counseling & Psychotherapy Skills (1) or
- AT 664  Adult Counseling & Psychotherapy Skills (1)
- AT 670  Group Supervision of Counseling and Psychotherapy with Children (1.5) or
- AT 672  Group Supervision of Counseling and Psychotherapy with Adolescents (1.5) or
- AT 674  Group Supervision of Counseling and Psychotherapy with Adults (1.5)

### SEMESTER 5
- AT 607  Capstone Project (1)
- AT 617  Ethics & Professionalism (3)
- AT 649  Creativity, Symbolism, & Metaphor (3)
- AT 647  Individual Supervision III (1)
- AT 651  Practicum III (.5)
- AT 657  Internship III (2.5)
- AT 661  Child Counseling & Psychotherapy Skills (1) OR
- AT 663  Adolescent Counseling & Psychotherapy Skills (1) OR
- AT 665  Adult Counseling & Psychotherapy Skills (1)
- AT 667  Group Supervision of Counseling and Psychotherapy with Children (1.5) or
- AT 669  Group Supervision of Counseling and Psychotherapy with Adolescents (1.5) or
- AT 673  Group Supervision of Counseling and Psychotherapy with Adults (1.5)

### SEMESTER 6 (Summer 2nd Year)
- AT 607  Capstone Project (1)
- AT 647  Individual Supervision I, II, or III (1)
- AT 651  Practicum I, II, or III (.5)
- AT 657  Internship I, II, or III (2.5)

^ Semester 6 is only for 2nd years students who need to complete any of the above listed graduation requirements, all other outstanding coursework must be completed as offered.

### ELECTIVES**
- AT 615  Family Counseling & Psychotherapy** (3)
- AT 632  Addictions (3)**
- AT 634  Career Counseling (3)**
- AT 639  Exploration of the Psyche (1)
- AT 638  Countertransference/Jung (1)
- AT 535/635  Art Therapy in the Schools (1)
- AT 562/652  Medical Art Therapy (1)
ATxxx Geriatric Art Therapy (1)
AT 658 Internship (1)
AT 533/633 Clinical Specialties (various)

*Number in parentheses designates number of credits
**Electives are optional coursework and are NOT requirements for graduation, therefore additional tuition and fees may apply. Electives that are designated as specializations and become part of your degree requirements once designated will be a part of your tuition and fee schedule and may be eligible for federal financial aid.

Course Descriptions

**AT 513: Research Methods (3)**
This course introduces the student to basic tenets of planning, conducting, and evaluating research. Aspects of research which are specific and unique to art therapy are introduced and discussed. Basic designs and components of research methods are explored.

**AT 516: Clinical Case Conference I (1)**
First year, first semester students attend the 616 Clinical Case Conference II, in which second year students present case material. The goal for the first year student is to become acquainted with organization and presentation of clinical material

**AT 520: Group Counseling & Psychotherapy (3)**
This course includes the study of group counseling and psychotherapy techniques and practice. Emphasis is on use of group dynamics, process illumination, and stages of group development. Cultural and ethical issues are explored.

**AT 521: Individual Counseling & Psychotherapy (3)**
This course explores various theoretical approaches to individual psychotherapy and their relation to art psychotherapy approaches. The therapist’s values and ethics are addressed. The goal of the course is to provide the student with an opportunity to continue the development of an approach to individual psychotherapy.

**AT 524: Processes & Materials of Art Psychotherapy I (4)**
This course is designed so that the student will directly experience the therapeutic usefulness and understand the psychological implications of a variety of materials and processes. Students become familiar with the language of art and the range of possible therapeutic responses. Students learn the theory and application of the Expressive Therapies Continuum (ETC).

**AT 528: Theories of Human Psychological Development (3)**
Following a family life cycle perspective, students explore human psychological development from birth to death. Students are exposed to various theories of personality development. Cultural and environmental influences are addressed.
AT 530: Psychopathology (3)
Students learn descriptive criteria for psychiatric diagnoses, the use of the DSM V, and theories of psychopathology. A goal of the course is for students to develop an ability to recognize behavioral and art indicators of functional and organic disorders.

AT 534: Introduction to the History & Theory of Art Therapy (1)
This course offers an overview of the history and growth of art therapy as a discipline, along with an overview of theoretical approaches that have evolved from the founding practitioners in the field. Students develop a specific definition of art therapy that conveys a personal approach, as well as a clear understanding of the role of art therapists in various work settings. Current developments and future directions within the field are also explored.

AT 535/635: Art Therapy in the Schools (1)
This elective course introduces principles underlying comprehensive school art therapy service delivery. Topics explored include special and alternative education settings, program development, and research supporting art therapy in schools. Permission of program director is required.

AT 538: Countertransference/Jung (1)
This elective course facilitates through reading and discussion the exploration of the impact of transference and countertransference in work with patients. The impact on the therapist is explored with depth and implications for informing work with patients is explored. Permission of program director is required.

AT 539: Exploration of the Psyche (1)
These elective courses aims to enliven the students' understanding of the psyche and its processes, and to increase their understanding of the psychic processes both in the therapeutic process and in their own lives. Permission of program director is required.

AT 561/660/661: Child Counseling & Psychotherapy Skills (1)
AT 563/662/663: Adolescent Counseling & Psychotherapy Skills (1)
AT 565/664/665: Adult Counseling & Psychotherapy Skills (1)
Students attend academic skills discussion and topic presentations related to the treatment of children/adolescents/adults in various settings. Students demonstrate in depth knowledge of strengths and psychopathology related to the population. Students demonstrate knowledge in assessment, treatment planning, case formation, genograms, theoretical orientation, cultural competency, and ethical practices.

AT567/670/671: Group Supervision: Child Internship (1.5)
AT569/672/669: Group Supervision: Adolescent Internship (1.5)
AT571/674/673: Group Supervision: Adult Internship (1.5)
Students meet in a supervision group (no more than 1:8 for 1.5 hours), with a registered art therapist, to discuss clinical topics related to the treatment of children/adolescents/adults and couples and their families in various settings. Students use case examples from their internship sites to explore art expression, assessments, treatment planning, treatment approaches, relationship dynamics, and treatment team interactions.

AT 547: Individual Supervision I (1)
AT 646: Individual Supervision II (1)
AT 647: Individual Supervision III (1)
The student receives one hour of individual supervision per week from a registered art therapist. Supervision provides opportunities for integration of didactic information with clinical experience. Through supervision, students explore verbal, behavioral, and artistic communication along with assessment and treatment dynamics.

AT 548: Assessment (3)
Students explore the fundamentals of psychological testing and art therapy assessment and become familiar with a variety of specific instruments and procedures used in appraisal and evaluation. Students learn to administer and document Art Therapy-Projective Imagery Assessments and to formulate treatment goals and objectives based upon assessment findings.

AT 529 Case Presentation Skills (1)
Students develop presentation skills and learn to effectively communicate clinical case material. This course is designed to prepare the student for the case conference course in the second year.

AT 549: Processes & Materials of Art Psychotherapy II (4)
This course is a continuation of 524 Processes and Materials of Art Psychotherapy I.

AT 551: Practicum I (.5)
AT 650: Practicum II (.5)
AT 651: Practicum III (.5)
Three days per week (16 hours) are spent at the site for two weeks to enable the student to prepare for the internship through observation and practice.

AT 555: Internship I (2.5)
AT 656: Internship II (2.5)
AT 657: Internship III (2.5)
Three days per week (18 hours) are spent at the site, for 13 weeks. Students provide Art Therapy-Projective Imagery Assessments, individual, group and/or family art therapy for 9 hours per week. The other hours on site are for students to attend team meetings, in-service conferences, and all related milieu activities, and to complete documentation. Students rotate through one site per semester in order to obtain experience with children, adolescents, and adults. A minimum of one placement in a
mental health facility is required. Students within the specialty tracks of art therapy in the schools, medical art therapy, or family art therapy are afforded that placement focus.

**AT 607: Capstone Project (1) (repeated for 2 semesters or until completion) (minimum 3 credits)**
In this course the student develops the Capstone proposal. The student finalizes and implements the Capstone proposal. The student completes, defends, and submits the Capstone Project.

**AT 615: Family Counseling & Psychotherapy (3)**
In this elective course, students develop a thorough understanding of current family systems theory, the family life cycle, evaluation, and practice. Students improve their objectivity as family psychotherapists as they develop insights about their own families of origin. This course prepares the students to administer verbal and projective imagery family evaluations and to conceptualize family dynamics from various theoretical perspectives. Permission of program director is required.

**AT 616: Clinical Case Conference II (1)**
Students demonstrate the ability to effectively communicate clinical material and integrate theory and practice through structured case presentations.

**AT 617: Ethics & Professionalism (3)**
This course addresses professional identity, professional ethics, and the ethical practice of art psychotherapy. Students prepare to enter the job market and review the requirements for professional credentialing.

**AT 649: Creativity, Symbolism & Metaphor (3)**
This course reviews various theories regarding the types, formation and roles of symbolism and its relation to psychopathology and mental health. Students explore the function and interpretation of symbols in dreams and artwork and examine the role of symbolism in assessment and art therapy. Students develop a deeper understanding of symbolic language in order to enhance their understanding of inner experiences. Students develop an understanding of the nature of creativity, creativity research, and the impact of mental illness upon the creative process.

**AT 632 Additions (3)**
This three-credit elective course provides an overview of the field of Addiction Studies. Topics that will be covered include drugs and society, substance and process addictions, evidence-based best practices for the substance abuse counselor, assessment, the recovery process, addiction and the family, and prevention strategies. This course covers diagnosis and treatment of addictive disorders and includes an overview of the philosophies and evidenced-based best practices, policies, and outcomes of the most generally accepted models of treatment, recovery, relapse prevention, and continuing care for addictions and other substance abuse related problems. Students also gain awareness of the impact of
drug abuse on society and an appreciation of the cultural context within which
addiction and recovery occurs.

AT 634 Career Counseling (3)
This elective course includes the study of theory and process of career counseling. Students will acquire skills to incorporate career development theory into the practice of counseling. Students will be introduced to career assessment tools and occupational methods.

AT 636: Cultural Competency (3)
This course addresses the competencies essential for a culturally responsive therapist. Through self-assessment and exploration of culture, students will gain the awareness, skill, and respect necessary to think critically, to establish rapport, and to work effectively with diverse individuals and groups.

AT 652: Medical Art Therapy (1)
This elective course provides an introduction to the use of art therapy in a medical setting. Topics explored include developmental perceptions of illness, death and dying, hospitalization, and body image throughout the life span as well as research supporting art therapy as a treatment modality for persons with medical illnesses. Permission of program director is required.

AT 655: Trauma Informed Art Therapy (1)
This elective course will review and engage students in the current literature of Trauma Informed Art Therapy Practices and additional materials. The objective is for the student to build skills an understanding how to treat survivors of trauma, understand the etiology of behaviors, emotions, and functioning related to trauma, and develop age-appropriate treatment plans based in best art therapy practice. Permission of program director is required.

AT 6XX: Geriatric Art Therapy (2)
The elective course will review and engage students in the current literature of Geriatric Art Therapy Practices and additional materials. The objective is for the student to build skills in understanding geriatric or aging adults in the later stages of life, understand the etiology of behaviors, emotions, and functioning related to aging, and develop age-appropriate treatment plans based in best art therapy practice. Permission of program director is required.

AT 533/633 Clinical Specialties (varied)
Clinical Specialties are clinical and professional development topics that you attend outside of your regularly scheduled coursework. Clinical Specialties are credits earned for attending additional education offerings, clinical case presentations, psychiatry department grand rounds, educational seminars, workshops, symposiums, trainings, and other educational experiences offered by the GATCP, EVMS, professional trainings, seminars, or other professionally documented trainings. The course is designed to encourage participation in ongoing education beyond the
required curriculum of the GATCP. The clinical specialties course intends to offer and award credit for student initiative in expanding his/her knowledge to become a well-rounded art therapist.

**Post-graduate electives:**
The below electives are designed to provide continuing education opportunities to non-degree seeking students. These courses meet the requirements for licensure for Licensed Professional Counselor (LPC) in many states. These courses are not required by EPAB and not degree requirements.

**AT 615: Family Counseling & Psychotherapy (3)**
Students develop a thorough understanding of current family systems theory, the family life cycle, evaluation, and practice. Students improve their objectivity as family psychotherapists as they develop insights about their own families of origin. This course prepares the students to administer verbal and projective imagery family evaluations and to conceptualize family dynamics from various theoretical perspectives.

**AT 632 Addictions (3)**
This three-credit course provides an overview of the field of Addiction Studies. Topics that will be covered include drugs and society, substance and process addictions, evidence-based best practices for the substance abuse counselor, assessment, the recovery process, addiction and the family, and prevention strategies. This course covers diagnosis and treatment of addictive disorders and includes an overview of the philosophies and evidenced-based best practices, policies, and outcomes of the most generally accepted models of treatment, recovery, relapse prevention, and continuing care for addictions and other substance abuse related problems. Students also gain awareness of the impact of drug abuse on society and an appreciation of the cultural context within which addiction and recovery occurs.

**AT 634 Career Counseling (3)**
This course includes the study of theory and process of career counseling. Students will acquire skills to incorporate career development theory into the practice of counseling. Students will be introduced to career assessment tools and occupational methods.

**Specializations**
Any student may earn a Specialty designation on her/his degree by taking the combination of elective coursework and/or designated internship and with Program Director approval as stated in the electives policies. Specialty areas of study are recommended by the Education Program Approval Board (AATA) revised standards “Specializations.” The GATCP supports specializations to build comprehensive and specialty skills in multiple areas of practice and study. A credentialed Art Therapy Faculty and/or credentialed specialist in counseling or
other subject area may teach specializations. A student may designate and earn any or no specializations.

Electives which are designated as Specializations will become a degree requirement^ if the student follows policies and procedures (subject to continued satisfactory academic progress, eligible enrollment, and Program Director approval). Some space per specialization may be limited based on internship availability and approval of specializations is at the discretion of the program director. Application Due Dates: Spring (Oct. 15) Summer (Mar. 15) Fall (Jun. 15). *Coursework is a part of the regular course sequence; coursework is paired with elective(s) for specialization. ^Contact Financial Aid for more information.

Areas of Specialization:

**School Art Therapy**
Requirements:
- AT 535/635 Art Therapy in the Schools (1)
- School Practicum & Internship Placement*

**Medical Art Therapy**
Requirements:
- AT 562/652 Medical Art Therapy (1)
- Medical Practicum & Internship Placement*

**Geriatric Art Therapy**
Requirements:
- Coursework or Independent Study (1)
- Geriatric Practicum & Internship Placement*
  - Independent study at a partnering facility (1)

**Trauma Informed Art Therapy**
Requirements:
- AT 655 Trauma Informed Art Therapy (1)
- Residential Practicum & Internship Placement*

**Depth Psychology**
Requirements:
- AT 638 Countertransference (1)
- AT 639 Exploration of the Psyche (1)
- Self-Study Capstone Project* or Depth Psychology Paper

**Advanced Research**
Requirements:
- Independent Study (1) Research project, work on faculty research or existing research protocol developing a new skill set differentiated from Capstone work
Independent Study (1) Prepare Manuscript to submit for publication

Leadership in Art Therapy
Requirements:
Independent Study (1) AATA Internship or VATA Internship
Independent Study (1) Leadership in Promoting Art Therapy Profession

Licensure Prepared*
Requirements:
AT 615 Family Counseling & Psychotherapy (3)
AT 632 Addictions (3)
AT 634 Career Counseling (3)

Admissions
Students are admitted to the program after completing the admissions process. Students are matriculated as a cohort each August.

Registration
All courses in the course sequence are required, except elective courses. Registration is completed through the Student Portal.

Steps for Registration
Step 1: Login to Student Portal
Step 2: Select the Visual Zen Registration link
Step 3: Select courses for registration
Step 4: Select Submit button

Required Courses
At registration, matriculated students are automatically enrolled in the required courses for that academic year. All courses are required in sequence and are considered prerequisites and co-requisites for each semester.

Electives
Students in good academic standing are permitted to take elective courses. Students may enroll in offered electives at the discretion of the Program Director. The Program Director in coordination with the Program Coordinator distributes memorandum to students announcing elective(s) and deadline(s) for requesting registration and designating specializations. Students interested in taking elective courses must request permission from the Program Director, who is authorized to approve the request and notify the Program...
Coordinator. The Program Coordinator registers students and notifies students of course dates, times, tuition, fees, and meeting place.

Students must meet all deadlines with the program regarding designating electives towards specialization. Students who timely complete the process may be eligible for federal financial aid subject to federal regulations and institutional policies and procedures. Contact Financial Aid for more information.

*Electives are billed at the current per credit hour tuition rate except for electives towards licensure preparation. Electives towards licensure preparation are a reduced rate to promote professional credentials and licensure. AT 615, 632, & 634 are currently $1200 ($400 per credit hour). Tuition and fees are subject to change.

**Dropping a Course**

1. A student who wishes to drop an elective course must present a written request to do so to the course director and to the Program Director. The request must state the reason for dropping the course and any plans for retaking the course. In order for the request to be accepted, it must be approved by both the course director and the Program Director.

2. If a student drops an elective course after the semester begins, the notation of withdrawal (W) will be placed on the transcript. No indication will appear as to whether the individual withdrew passing or withdrew failing.

3. No student may drop an elective course after the eighth week of the semester, except at the discretion of the Program Director.

4. A student may not drop more than one elective course in an academic year, except at the discretion of the Program Director.

5. A student who wishes to remove a Specialization from her/his degree requirements must submit a written request to the Program Director. The Program Director will review the request, approve/disapprove the request, and notify the Program Coordinator, the registrar, financial services, and financial aid when applicable.

**Withdrawal from a Required Course**

All courses, except elective courses, are required.

Students may be required to withdraw from a course based on the Professional Performance Review, Academic Probation status, Leave of Absence, or at the discretion of the Program Director. Students withdrawing from a course will be required to retake the course to meet degree requirements. Students who withdraw from a course will be responsible for tuition and fees for repeating the course. Due to the sequential nature of the curriculum, students must wait until the course is offered again to retake it.
When a student misses 3 or more classes of any 15 week or less course, the student may be withdrawn from the course, fail the course, asked to repeat the course, or other remedial work as approved by the Program Director. The student will be responsible for tuition and fees for repeating the course or completing additional coursework.

Evaluation

General Principles and Purposes of Evaluation

The Program Director and course directors will regularly review the academic achievement of each student. The purpose of this review is to identify any student whose academic progress is marginal or unsatisfactory before a course is actually failed, so that the faculty and student together can develop an appropriate plan to address academic difficulties.

Candidates for the Master of Science degree in Art Therapy & Counseling must exhibit the requisite knowledge, skills, and behaviors to complete the prescribed course of study and must demonstrate the personal qualifications and attributes deemed necessary to perform the duties of an art therapist. All students are expected to adhere to the “Ethical Principles for Art Therapists” and the EVMS Honor Code. The Professional Performance Review is an ongoing process that includes weekly monitoring and discussion of students by the faculty. A written evaluation is performed each semester (more frequently if necessary).

1. All students are expected to exhibit unimpaired judgment and behavior consistent with the responsibilities of the art therapy profession including respect for ethnic and cultural diversity. Thus, in addition to the usual academic evaluations for each course, students are evaluated with regard to professional demeanor, professional conduct, concern for the welfare and dignity of clients, concern for the rights of others, responsibility to duty, trustworthiness, ethical conduct, and any general or specific conduct meriting concern. These include, but are not limited to, professional behaviors, substance abuse, sexual assault, and sexual harassment.

2. The evaluation of student progress through the curriculum is the responsibility of the faculty. The overall evaluation of student progress is supervised by the Program Director. Evaluation of performance in each course is the responsibility of the course faculty and Program Director acting within the institutional policies and procedures described herein.

3. The purpose of evaluation is to certify the art therapy student for graduation by documenting his/her competence. Evaluation serves to:

   a. Assure essential competence of the student in knowledge, skills, and attitudes.

   b. Provide for early detection of unsatisfactory or marginal performance in order to help the student:
i. meet acceptable standards as defined by the institution and the program, or
ii. redefine educational and career goals.

c. Document superior performance in a manner that benefits the student's further education and career planning.

d. Document didactic and clinical progress toward short and long range educational goals and objectives; provide information necessary to modify the curriculum in terms of those goals and objectives.

4. Evaluation is based upon measurable goals and objectives of the curriculum, including broad institutional goals and specific objectives for each course.

5. Evaluation is based upon a mastery of fundamental concepts and principles and the ability to integrate the material into clinical practice.

6. The evaluation system defines the individual student's strengths and weaknesses in order to give students an opportunity to build on strengths and correct weaknesses.

7. Evaluation includes and is not limited to academic performance, internship performance, and professional performance. Other areas of non-academic performance may impact a student’s standing in the program if it is below expectations, violates EVMS Student Code of Conduct and/or the Student Handbook Policies and Procedures, places patients/client at risk, or places the faculty or program at risk for liability claims.

**Student Responsibilities**

Each student is responsible for:

1. Complying with evaluation requirements of each course.

2. Completing the comprehensive examination requirements established by the program.

3. Ascertaining his/her own evaluation results.

4. Seeking faculty assistance in correcting unsatisfactory or marginal performance.

5. Initiating the program appeals process if the student objects to the program's response to his/her failure to meet the program's academic and professional standards.

6. Completing an evaluation of each course and course director(s) (each faculty in team taught courses), supervisor, and internship.
7. Attending all scheduled class meetings as noted on course syllabi.

8. Attending mandatory program meetings as announced by the program.

Class Attendance and Participation

Attendance Policy
Evaluation of student performance in each course is the responsibility of the course faculty and the Program Director. The purpose of this evaluation is to document student competence.

1. Due to the sequential format and fast pace of each course, students are expected to attend all classes.

2. The student who misses class due to unavoidable circumstances is responsible for making up classwork in order to be eligible for the full range of grades.

3. Students may work with the Course Director to fulfill course objectives.

4. After 15 minutes late, a student will be considered absent and the following (5.b.) deductions will be implemented at the time of a second tardy.

5. Students who miss classes (missed class sessions or scheduled meetings) will receive points deductions from the final course grade as follows:
   a. 1st missed class = 0-5 pts deducted from final grade
      i. 0 pts will be deducted for documented emergent situations and adequate notification directly from the student to the Course Instructor before the class begins.
      ii. 0 pts will be deducted for program approved absences such as: internship orientation or other assigned coursework. Communication in advance must document approval from both the Course Instructor and the Program Director.
      iii. 5 pts will be deducted for missed classes with no communication directly from the student
   b. 2nd missed class = 5 pts deducted from final grade
      i. 0 pts will be deducted for program approved absences such as: internship orientation or other assigned coursework. Communication in advance must document approval from both the Course Instructor and the Program Director.
      ii. 5 pts will be deducted for missed classes
   c. 3rd missed class = 5 pts deducted from final grade
      i. 0 pts will be deducted for program approved absences such as: internship orientation or other assigned coursework. Communication in advance must document approval from both the Course Instructor and the Program Director.
ii. 5 pts will be deducted for missed classes

6. Students who miss 3 classes or more (without written approval from the Program Director) may be withdrawn from the course, fail the course, asked to repeat the course, or other remedial work as assigned by the Course Instructor and approved by the Program Director. The student will be responsible for tuition and fees for repeating the course or completing additional coursework.

Class Participation
Evaluation serves to:

- Assure minimum competence of the student in knowledge, skills, and attitudes considered essential for the master’s degree in art therapy and counseling,

- Provide for early detection of unsatisfactory or marginal performance,

- Document superior performance,

- Document academic and clinical progress.

Class participation provides the faculty with a means of assessing student mastering in an ongoing fashion, apart from other evaluation methodology such as papers, tests, presentations, and projects. Each course may value the percentage weight of class participation differently and adjust the participation expectations based on the competencies of the course.

Self-Awareness and Disclosure
A core value of the EVMS Graduate Art Therapy and Counseling program faculty is self-awareness. We value self-awareness and the capacity for reflection as intrinsic to effective art therapy practice and professional identity development. We strive to maintain these attributes within ourselves and to instill them in our students. Therefore, through the course of study in the program, students will engage in a variety of education exercises that may result in personal disclosure of life events including: successes, meeting milestones, experiences of challenge, trauma, and growth, family dynamics, and personal beliefs and values. Students are encouraged to disclose when appropriate and with professional boundaries. Students are responsible for their own disclosure. Because evaluation is a part of training, it is imperative that faculty are able to evaluate a student’s capacity for and application of self-awareness. Understanding one’s self is a valued part of art therapist identity and ethical treatment of clients which promotes appropriate therapeutic alliances with clients. Sometimes disclosure causes discomfort. However, the faculty are not
responsible for the mental wellness of students and do not provide therapy to students. The faculty will refer students to student affairs academic support and/or mental health services as appropriate.

**Course Deadlines**

1. All assignments are due by the class time and date indicated on course syllabi and as notified by any designee of the GATCP.

2. Assignments turned in after the due date (paper, projects, art form, etc.)
   a. drop 4 points for each day late
      i. For example: an earned 100 paper which is 1 day late receives a 96; same paper 3 days late receives an 88; same paper 7 days late receives a 72.
      ii. Another example: an earned 88 project is 3 days late receives a 76; same project 5 days late receives a 68.
   b. The Course Instructor with approval from the Program Director may offer remedial work or additional assignments congruent with late behaviors or coursework missed not to exceed a passing grade of 84 for the assignment.
   c. Multiple late assignments may result in course failure.
   d. It is at the discretion of the Student Progress Review Committee and approved by the Program Director to offer remedial work or additional assignments congruent with late behaviors for multiple assignments such that a student may earn a grade for the course not to exceed an 80 (B-).
   e. Assignments not completed and turned in during orientation may result in a Notification of Warning.

3. Class presentations are due to be presented at class time indicated on course syllabi. Lack of preparedness earns a 0 (F) grade.
   a. Remediation of a failed grade due to a lack of preparedness is at the discretion of the course director and availability of time remaining in the course to accommodate such remediation needs. It is not mandatory for the course director to accommodate remediation in cases of lack of preparation.

4. Examination dates are indicated on course syllabi. Students are expected to take examinations on the scheduled day and hour(s) of the class.
a. Permission to take an examination at a time other than scheduled will be granted only for extremely pressing and urgent reasons (e.g. documented hospitalization, serious illness, or death in the immediate family). Such permission will not be granted merely for the student’s convenience or because of conflict with the student’s external schedule (e.g. social event, work schedule).

b. The student must request in writing at least 2 weeks in advance and be granted permission from the course director and the program director to take an examination at other than the scheduled time. If both approve the request, the course director will notify the student when the examination is to be taken.

c. Students who fail to take an examination and have not obtained approval from the Course Director and Program Director for a delay will receive a zero (0), (F) for the examination. Exceptions to this policy may be urgent and/or unavoidable circumstances and only reviewed and approved by faculty and the program director.

d. Missed examinations may be given only at a time which will not conflict with other scheduled responsibilities for both the student and the course director.

9. Capstone Project
a. All assignments related to the Capstone Project are due in compliance with the course syllabus and as negotiated and established by the student and the Capstone Chair.

b. The Capstone Chairperson is responsible for due diligence in managing the project to completion with the student.

c. Ultimately, it is the student’s responsibility to complete the Capstone Project, a requirement of graduation, and complete each segment of the project as suggested by the Capstone Project Manual.

d. Students not completing each segment of the Capstone Project as described in the manual and in compliance with the Capstone Chair will be evaluated for the work completed when work is due. The Capstone Chair may assign a grade for the quality and quantity of the work completed.

e. In rare cases, students may have insufficient quantity of work completed to assign a grade. If due to unusual circumstances (i.e. medical or health concerns) and the Capstone Chair after Student Progress Committee review with other faculty and Program Director, deems it applicable, an “I” incomplete may be assigned. The student and the Capstone Chair will then follow procedures for assigning “I” incomplete grades.
Student Challenge of Evaluation Methodology or Evaluation Grade

1. A student may comment or challenge any examination question in writing at the time of an examination.

2. Students may follow up the challenge of any evaluation item or evaluation grade within one week after notification of grades. Challenges should be made in writing to the course director.

Course Director Responsibilities

In the GATCP, the Course Director is the primary Instructor for the course except as noted in the listing after the course director responsibilities. The course director is responsible for developing and overseeing the curriculum and evaluation process of students for that course. Course director’s responsibilities include:

1. Develop and revise the Course Syllabus using the EVMS SHP template annually or each semester the course is taught.

2. Course Director will submit and/or post any and all revisions to course syllabi to the Program Director, to the Program Coordinator, and on Blackboard. When major changes occur, the course syllabus may be submitted to the EVMS SHP Curriculum Committee for approval.

3. Document standard of learning and student outcomes in compliance with CAAHEP accreditation standards.

4. Developing written objectives and methods of grading which are communicated in writing to students in the course syllabus and upon which all evaluation is based.

5. Predetermining and communicating in writing the relative weight of each method of grading (e.g., examination, quiz, paper, presentation, special project) used to determine the final grade for the course and documented on course syllabus.

6. Create rubrics for all course assignments using the GATC program template that includes growth oriented language.

7. Inform any student in writing when marginal performance is recognized, giving him/her an opportunity to respond to identified deficiencies, and developing with the student a plan for improving performance.

8. Documenting student attendance and notifying the Program Director if/when a student misses 2 or more classes within 24 hours of the missed class.
9. Documenting student progress, which is reported to the Program Director and student within one week of the end of the course.

10. Providing course faculty in team-taught courses with rubrics and the results of the course evaluation.

11. Consulting with the Program Director in developing, administering, and interpreting evaluation procedures and results.

12. Post all course syllabi, course rubrics, required materials, assignments, feedback to students, and grades for assignments and course in Blackboard.

13. Obtain signatures from all students that they have read the course syllabus, it has been reviewed with them, and they have had the opportunity to ask questions.

The following degree requirements may have Course Directors and Instructors:

Practicum & Internship: The Practicum & Internship Course Director coordinates internship placements and maintains positive relationships with internship partners. The Internship Course Director will mediate any concerns not resolved by the student under supervision of the individual ATR Supervisor and On-site Supervisor.

Individual Supervision: The Individual Supervision Course Director assigns students to Individual ATR Supervisors (Instructors) and reports results of evaluations to the Program Director and Program Coordinator for documentation of completion of Internships.

Clinical Specialties: The Clinical Specialties Course Director coordinates dates, times, and presenter’s (Instructors) for Clinical Specialties documented in a course syllabus and reviews and awards credits for student’s earning Clinical Specialties credit.

Capstone Project: The Capstone Project Course Director’s roles and responsibilities are described in the Capstone Project Manual. Capstone Chairpersons are considered Course Instructors.

Preparation of Evaluation Methods

1. Course format, objectives, and method of grading are communicated to students at the beginning of each course and posted on Blackboard.

2. Examinations, papers, presentations, and projects address achievement of stated course objectives and
a. are constructed according to recognized principles of evaluation design.

b. are consistent with program standards for length and difficulty.

c. meet reasonable criteria for reliability and validity.

d. are reviewed by course director and Program Director prior to and immediately following administration.

3. Examinations may cover any material included in the course and may be derived from lectures, discussion, and required readings. The number of questions will be based roughly on the course director’s assessment of the relative importance of the material covered.

4. Guidelines for papers, presentations, and projects are designed as additional methods of evaluation of student knowledge and skills related to course content.

5. Examination questions and directives for papers, presentations, and projects are composed by the course director and reviewed by the Program Director for: appropriateness of content and types and levels of skills tested (e.g., problem solving, synthesis, analysis, critical thinking, attitudes, and growth throughout the course).

6. Methods of evaluation and due dates are identified on course syllabi, reviewed the first day of each course, and posted on Blackboard.

7. Evaluation criteria for each practicum and internship placement are distributed to students at the beginning of the practicum and internship.

Administration of Examinations

The course director is responsible for the administration and scoring of the examination.

Review of Evaluation Results

1. Students will be notified of scores by the course director within one week after the examination or due date.

2. Each course director will make Opportunity for students to review examinations available.

3. Graded projects and presentation feedback will be available one week after the due date.

4. Graded papers will be returned within two weeks after the due date.
5. Comprehensive examination scores will be made available by the Program Director within one week of examination.

6. The Program Director reviews the overall evaluation results.

**Program Director Responsibilities**

1. The Program Director coordinates, reviews, and administers evaluation policies and practices and recommends or makes changes as necessary.

2. The Program Director:
   a. Provides assistance to the faculty in developing, administering, and interpreting evaluation procedures and results.
   b. Provides a program to orient the faculty to evaluation policy and procedures.
   c. Disseminates the results of course evaluations to the course directors.
   d. Disseminates the results of student evaluations to the art therapy supervisors.
   e. Disseminates the results of practicum and on-site evaluations to internship placements and on-site supervisors.
Grading Policy
Grading System

1. Course education format, method of grading, and objectives are communicated in writing on the course syllabus to students at the initiation of each course.

2. The requirements for grades are based on course policy and institutional guidelines. These requirements are communicated to students at the initiation of each course as documented on the course syllabus.

3. Grades affecting Grade Point Average (GPA)

<table>
<thead>
<tr>
<th>Number Grade</th>
<th>Letter Grade</th>
<th>GPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>100-94</td>
<td>A</td>
<td>4.00</td>
</tr>
<tr>
<td>93-90</td>
<td>A-</td>
<td>3.67</td>
</tr>
<tr>
<td>89-87</td>
<td>B+</td>
<td>3.33</td>
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<tr>
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<td>73-70</td>
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<tr>
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</tr>
<tr>
<td>63-60</td>
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<td>0.67</td>
</tr>
<tr>
<td>Below 60</td>
<td>F</td>
<td>0.00</td>
</tr>
</tbody>
</table>

*Bold grades are considered passing

4. Grades not affecting GPA

W = Official Withdrawal
P = Pass
I = Incomplete
Au = Audit

Reporting of Grades

1. The course instructor(s) document grades and provides constructive feedback in Blackboard.

2. The course director reviews and approves final grades in Blackboard and submits these to the Program Coordinator.

3. The grades are entered into the grade data base and transferred onto student transcripts.
4. An Incomplete may be recorded for any graded or pass/fail course following the policies and procedures for “Incomplete” with an included Action Plan.

5. The standard for successful completion of this graduate program is a GPA of 3.00 or better.

Progress Review
The Program Director and course directors will regularly review the academic achievement of each student. The purpose of this review is to identify any student whose academic progress is marginal or unsatisfactory, so that the faculty and student together can develop an appropriate written action plan to address academic difficulties. Another purpose is to identify students whose academic progress is excellent and may require more challenge.

Student progress for those excelling and challenged will be reviewed during faculty meetings. A Student Progress Review Committee may be convened to review and document student progress or standing in the program.

Evaluation of Student Professional Performance
The Professional Performance Review (PPR) will be completed at the minimum, one time each fall and spring semester on every student in the Art Therapy & Counseling Program.

If deficiencies in student performance are noted on the Professional Performance Review the students may receive a written notification of warning, be placed on academic warning or probation, or be dismissed from the program. If a student’s conduct compromises unacceptable standards of patient care or jeopardizes the welfare of patients under his/her care, the Program Director has the option of immediately suspending the student from clinical duties until such time as an appropriate investigation of the allegations can occur. The Dean of the School of Health Professions, the Associate Dean of the School of Health Professions, the Associate Dean for Student Affairs, and the Registrar must all be notified when a student is placed on probation.

Notification and Warning occurs when deficiencies are noted does not meet expectations by the Professional Performance Review standards as evaluated by the Faculty Advisor or Program Director. The faculty advisor will refer the student and concerns to the Program Director. The student will meet with the Program Director (in consultation with other faculty) to discuss the deficiencies and concerns noted. There will also be a written action plan outlining the stipulations for remediation and the timeline for review. The action plan will be placed in the student file. (Depending upon the level of deficiencies the student could immediately be placed on Academic Probation or an Administrative Leave of Absence at the discretion of the Program Director and Associate Dean for Student Affairs).
Probation may occur when the deficiencies noted continue, there is failure to meet the Stage 1 action plan for remediation requirements, or when deficiencies negatively impact the academic climate, student welfare, or patient welfare. Written documentation will be placed in the student file stating that further non-compliance or lack of change will result in dismissal. The student will be notified formally in writing of the action necessary to avoid dismissal from the program.

Continued deficiencies to meet the remediation requirements may result in dismissal from the program. Any student dismissed will be notified in writing and made aware of his/her right to appeal the decision.

Nonacademic Issues
Students are expected to comply with all EVMS policies at all times, including but not limited to the EVMS Code of Conduct, Code of Student Conduct, Standards of Conduct for the Teacher-Learner Relationship, Honor Code, and program technical standards. Disciplinary action related to nonacademic matters may include warning, counseling, corrective action plan, probation, or dismissal based on the circumstances and judgment of the Program Director. Nonacademic deficiencies may be documented in the Professional Performance Review or via emails from the Faculty Advisor and/or Program Director.

Individual Supervision, Practicum, & Internship Evaluation
Standard evaluations are used by the art therapy (A.T.R.) supervisor and the on-site supervisor in all placements to measure the achievement of clinical and professional performance.

Incompletes
When an instructor assigns a grade of “I”, a written agreement is prepared and signed by the instructor and student that specify the work remaining to be completed in a designated time frame. The work should be completed as soon as possible, but not later than the mid-point of the following grading period/semester unless special written approval is granted by the Course Director and Program Director for extraordinary circumstances. Unless the Course Director and the Program Director have approved an extension, the “I” will convert to either an “F” or the grade as specified by evaluation of the work completed per the written agreement.

Incompletes may be negotiated on an individual student basis when extenuating circumstances for incomplete work occur and in most cases, proactive notification has been given to the course instructor, director, and program director.

Failing Grades
1. Students may seek remediation of any grade of 69 or lower for any class evaluation criterion from the course director within one week of notification of the grade. The course director will designate the remedial work deadline.

   a. 80% of the grade earned for the remedial work will be substituted for the failed grade.

   b. Students may only remediate one (1) evaluation per course. If more than one failing grade is assigned, the student may initiate a meeting with the Course Director/Instructor to develop a Learning Improvement Plan (LIP) to ensure remediation of course content and competencies prior to the next evaluation.

   c. Once the student receives their exam grade, it is the student’s responsibility to seek out the course director to initiate the LIP.

      i. This process may take one of several forms: instructor and student may review exam questions to determine areas of misunderstanding and/or how to approach test questions, a group or individual oral presentation that demonstrates competence in the areas tested, OR some combination of the above the method(s) employed in the LIP will be selected based on the needs of the student and are at the discretion of the course director

   d. Students who turn in copied work, work that is not original, and in compliance with APA 6 guidelines for original work will receive a zero (0) for appropriate portions of the assignment that is copied.

   e. TIMING: Except in unusual circumstances, this process must be started and completed within five (5) school days after the grades of the test or assignment have been posted.

   f. FINAL EXAMS: Final Examinations are not subject to this policy as the material would have been covered in individual modules during the semester. However, a student who performs poorly on a cumulative final exam may request a meeting with the course director to review content.

   g. END OF FIRST SEMESTER: In the event a student has to participate in the LIP process at the end of the first semester, he/she may not start their clinical internships until the course director/instructor determines that the student has sufficient grasp of the tested material.

   h. APPEALS: Any student who does not agree with the assessment of the course director/instructor during the LIP process may appeal directly to Program Director.
i. COMPLIANCE: Failure to comply with the LIP requirement may be grounds for disciplinary action, up to and including, warning, academic probation, and/or dismissal from the program.

2. Remediation of a failed grade due to a lack of preparedness is at the discretion of the course director and based on availability of time remaining in the course to accommodate such remediation needs. It is not mandatory for the course director to accommodate remediation in cases of lack of preparation.

3. Students must complete all coursework with a “B” or better and an overall GPA 3.0 or above.

4. Students who failed a course by earning a C+ or below may be required to re-enroll in that same course at the discretion of the Program Director. Due to the course sequence, students who failed a course must wait to retake it until the next time the course is offered.
   a. Students may repeat a course only once.
   b. Students are responsible for all tuition and fees for a course that is repeated. The tuition and fees will be based on the current per credit hour rate (see also Degree Timelines).

5. Students who fail (earn a C+ or below) more than one course per semester may be expected to repeat up to the full semester of courses to ensure adequate retention of content and competencies. All tuition and fees will apply. Students repeating coursework will be on Academic Probation and have an Academic Probation Plan.

6. The grade earned for the repeated course will appear on the transcript with the previously failed course grade.

7. Students unable to improve a failing grade after re-taking a course may be dismissed from the Graduate Art Therapy and Counseling Program.

**Academic Probation**

1. Students may be placed on academic probation if their term or cumulative grade point average drops below 3.0.

2. Students who earn a C+ for any course will be placed on academic probation. Any course grade of D, F, or NP, may result in academic dismissal from the program.
3. Students may be placed on academic probation for non-academic concerns for student conduct, professional performance, or not meeting technical standards for the profession.

4. Students may be placed on academic probation for failure to comply with the attendance policy for required orientation, program events/meetings, and or class attendance.

5. Students who remediate Academic Probation must remain in good standing. Students who after remediation of Academic Probation fail a course (C+ or below) may be dismissed from the program.

6. When there are extenuating circumstances leading to the failure, the student may be invited to repeat the course in the following academic year, at the discretion of the faculty and Program Director.

7. The student progress committee can review and recommend one of the following options to the Program Director:
   a. Dismissal from the program
   b. Opportunity to return to restart the program or repeat coursework

8. If there are extenuating circumstances, the committee can recommend a remediation plan tailored to the student's individual weaknesses and, if successful in remediation, the student may be allowed to continue in a probationary status.

9. Students on probation or at risk for probation must meet frequently with their faculty advisor or student affairs academic development office to discuss academic progress, study habits, test-taking skills, and professional progress.

10. Students who have been found to be in violation of the Academic Integrity Standards or Honor Code during the didactic portion of the program may be placed on academic probation or academically dismissed from the program, depending on the results of the Honor Council investigation and/or trial. A conviction by the Honor Council will be handled in accordance with existing rules for any academic result of the conviction. In the case of a course failure related to an Honor Council conviction, the student may receive a suspension or be dismissed from the program, depending on the nature of the honor council findings and penalties.

11. Students who disclose protected health information are subject to consequences of partnering agencies in addition to academic consequences from the GATCP. Academic consequences may include and are not limited to: grade reductions, warnings, action plans, academic probation, and/or dismissal from the GATCP.
12. Students on academic warning or probation will meet with the Program Director to develop a written action plan.

13. Students who do not complete academic action plans (remediation, warning, or probation) may be dismissed from the program.

14. Students are responsible for all tuition and fees to retake courses for remediation and to fulfill requirements of academic action plans to satisfy degree requirements.

15. The student may be notified by the Program Director in writing at the end of the academic semester that he/she has one semester to increase the grade point average to 3.0 or above.

16. Students unable to increase their grade point average to 3.0 or above during the semester of academic probation may be dismissed from the Graduate Art Therapy & Counseling Program.

17. Students on Academic Probation for non-academic concerns may be dismissed from the program if they do not fulfill the requirements of the academic action plan.

**Academic Probation Due to Failed Grade for an Internship**

If a student receives a failed (F) grade for an internship, the following may occur:

1. The student may initially receive an incomplete (I) grade for the course pending an extension at the same internship site or repeat of the internship at a different site.

2. The student may immediately be placed on academic probation as a result of the non-pass for the internship.

3. The student may be dismissed from the program if the student has violated the EVMS Code of Student Conduct, performed below expectations on the Professional Performance Review, received an extension for a previous internship, and/or risked patient/client safety or faculty/program liability.

4. If the student chooses to challenge the grade received, follow the procedure outlined on page 41 above.

5. Additionally, a non-pass grade in the repeated internship or any subsequent internship may result in dismissal from the program.

**Remediated Progression to Succeeding Semesters in the GATCP**

Each semester is considered prerequisite for the following semester coursework. All of the practicum and internships are graded on a “pass – fail” system that awards Pass (P), of Fail
(F) for each course. As such, the grade point average for the entire program is established at the end of semester 5 of the program. The Program has traditionally required a cumulative grade point average (GPA) of 3.00 in order to graduate from the program (as is customary at most graduate training programs). Therefore, under normal circumstances, in order to continue after each semester of practicum and internship, the cumulative GPA must be 3.00 or higher at the conclusion of each semester.

The GATCP Program Student Progress Committee (Core Full-time faculty) may exercise limited discretion in this regard when they believe that extenuating circumstances affected a student’s ability to achieve the required cumulative GPA at the end of the each semester. Consideration for remediated progress to the next semester would require the following:

1. A cumulative GPA between 2.90 and 2.99 at the end of any semester of the program
2. Extenuating circumstances affecting the student’s achievement
3. A consensus of the Student Progress Committee that the student has the requisite skills and knowledge to progress in spite of their grades, after a period of remediation.

Note: Except in very rare circumstances, a student who has already been decelerated or who was on probation one time in 3 semesters, would not be eligible for this consideration.

The Student Progress Committee would meet at the end of the each semester to determine if the Student Progress Committee and Program Director should develop an individualized plan of remediation for a student or students.

Decision for remediation or dismissal from the program

Note: as always, GPAs will be calculated to 3 decimal places and rounded to 2 decimal places.

1. Students whose cumulative GPA rounds to 2.89 or less would likely be dismissed from the program
2. Students whose cumulative GPA rounds to 2.90 to 2.99, would be considered for a remediated progression if the Progress Committee agrees that:
   a. Extenuating circumstances exist(ed) for the student
   b. The progress committee agrees that the student has (or will have) the requisite skills and knowledge to progress in spite of their grades, after a period of remediation.
   c. The student has taken advantage of opportunities for recommended student support services
3. Student academic records will be reviewed for efforts by faculty advisors to support the student during all four semesters.
4. Students who have documented referrals for tutoring, study and testing evaluations, or other student support services (i.e. academic support, student mental health, or counseling) will be evaluated by the progress committee in terms of whether they took advantage of available student support services.

5. Failure to follow through on recommendations may be viewed unfavorably by the committee when determining eligibility for remediation or continuation in the program.

Practicum and Internship Remediation through VARIABLE credit Independent Study

1. A remediating student will not progress to practicum and internship with their classmates. Up to one semester may be devoted to their remediation efforts. Independent Study variable credits will be subject to tuition and fees.

2. An individual remediation plan will be tailored to the needs of the student, based on evaluation of academic performance and Professional Performance Review throughout the previous semesters of the program.

3. The individual remediation plan will outline the following in detail:
   a. Content, knowledge, skills, behaviors, and attitudes to be remediated
   b. An instruction and study plan
   c. Method each component will be assessed
   d. A schedule for each activity
   e. A schedule for each assessment
   f. Evaluation criteria for each form of assessment, and
   g. What the result of unsatisfactory remediation would be (i.e. dismissal)

4. Students who successfully progress to the next semester by remediation will also enter the following semester on academic probation. This probationary status would be taken into consideration if the student were to receive a failing grade on a future practicum or internship.

5. Remediated Progression to the practicum and internship part of the Program is meant to be a rare occurrence based on the judgments of the GATCP Student Progress Committee’s best efforts to evaluate and acknowledge the strengths and weaknesses of individual students. It would not likely be offered to students who have struggled throughout their training, had one or more semesters on probation, or who had already been decelerated.

6. The GPA parameters outlined above would trigger a review of a student’s record and consideration for remediation. The standard of performance for students in this program is to maintain a 3.00 GPA or better.

7. Students will not be automatically offered an opportunity to remediate. There must be some individual circumstance that hindered satisfactory progress.
8. The effect of the grade from this VARIABLE credit course will be factored into the cumulative GPA.
   a. It is essential that the resulting cumulative GPA is 3.00 or higher in order to successfully progress to the next semester of the program.

Disclaimer: This process does not change the student’s ability to appeal academic decisions by the GATCP Student Progress Committee. A student may still appeal academic decisions to the Dean of Health Professions as indicated in the Student Handbook.

Degree Timelines
Students will automatically have one year from the time of their scheduled May graduation date to complete the degree requirements. For example, a student who registers in August, 2017, is anticipated to graduate in May, 2019, yet with the one year extension is eligible to graduate in May, 2020. Students must register for uncompleted or remedial coursework and pay all tuition and fees. Students should write a letter to petition for permission to continue taking coursework to meet degree requirements. Permission for an extension must be granted by the Program Director based on extenuating circumstances (e.g., financial problems, life crisis). All policies remain in effect during the extension, including 1 credit registration and tuition/fees until completion (for Capstone completion) during the fall, spring, and summer semesters.

Student Professional Performance Review

Purpose
All students are expected to exhibit unimpaired judgment and behavior consistent with the responsibilities of the art therapy and counseling professions and in accordance with the EVMS Student Code of Conduct. Thus, the purpose of this review is to identify any student whose professional performance (including but not limited to demeanor, attire, trustworthiness, respect for diversity, professionalism, behavior, maturity, interpersonal relationships, emotional regulation, and attitude) is marginal or needs remediation. The results of the review will be shared by the Program Director (in consultation with other faculty) with the student to address the difficulties and avoid warning, probation, or dismissal from the program. The education team, core faculty lead by the Program Director, will monitor student progress towards meeting all graduation requirements. Faculty will openly communicate about student progress and challenges for the purpose of monitoring and designing action plans to assist the student in meeting graduation requirements. Faculty will present student progress and challenges either during faculty meetings or in writing to the Program Director.

The Professional Performance Review (PPR) will be completed each spring and fall semester (and more frequently if necessary or in times of student challenges) on every student in the Graduate Art Therapy and Counseling Program. The categories considered for students displaying professional and personal capacity as an art therapist are:
   • Observation Skills
• Communication Skills
• Critical Reasoning Skills
• Motor and Sensory Function
• Academic
• Interpersonal
• Personal

**Student Responsibilities**

The student should be familiar with the expectations of an individual with the identity and role of an art therapist and counselor. The students should conduct herself/himself as a professional at all times in accordance with the EVMS Student Code of Conduct and the American Art Therapy Association Code of Ethics. The student should demonstrate proficiency in managing interpersonal conflicts, boundaries in relationships, ethical practices with mature sound judgment, and manage life stressors with positive coping strategies. The student as a professional in training should refrain from substance abuse.

The student should complete as a self-assessment a copy of the Professional Performance Review before meeting with the faculty advisor.

**Advisor Responsibilities**

Each student will have a faculty member assigned as her/his Advisor during program orientation.

1. **Initial Advisor/Student Meeting:** In Semester of the program, each student must schedule an initial meeting with their faculty advisor during weeks 1-4 of the program so that both the student and faculty member can become acquainted.

2. **Mid-term faculty/student meeting:** In all semesters (1 through 5) students MUST schedule an appointment with their assigned advisor during weeks 7-9 of each semester. This appointment should be made directly with the faculty advisor. The student should be prepared to discuss their grades and professional performance (self-assessment PPR) up to that point in the semester, as well as maintain a list of their grades to review with her/his advisor.

3. **Professionalism Performance Review evaluation:** the student should complete the PPR evaluation form prior to each mid-term meeting. It will be compared to an identical instrument completed by the faculty advisor with input from the entire faculty.

4. **The Professional Performance Review will be completed by a Graduate Art Therapy and Counseling Program Faculty member (Advisor), submitted to the Program Director, and kept on file. The student will meet no less than one time each fall and spring semester with the faculty member to complete the Professional Performance Review.**

5. **Students who are experiencing difficulties in their courses or who are experiencing life events that impact their progress or performance in the program may schedule an appointment with their advisor or the Program Director whenever the need arises.**
6. Students must be aware of the importance of self-monitoring their GPA and Professional Performance in order to ensure they will meet graduation requirements.

7. The Faculty Advisor will document in writing action steps with students to improve performance or receive assistance related to deficiencies noted in the Professional Performance Review.

8. The Faculty Advisor will communicate success and concerns with the Program Director.

**Program Director Responsibilities**

The Program Director will monitor student progress through regular contact with faculty advisors.

The Program Director will enforce policies and procedures to assist students to remediate performance to meet the competencies for the Professional Performance Review.

The Program Director will meet with a student requiring remediation to develop a formal action plan and monitor the action plan when the student and faculty advisor have completed at least one attempt for an action plan.

The Program Director will document in writing action steps for students to improve performance or receive assistance related to deficiencies noted in the Professional Performance Review.

The Program Director will monitor and evaluate progress towards remediation of deficiencies noted in the Professional Performance Review and action plan.

The Program Director will make appropriate referrals related to action plans to assist students in remediating deficiencies in Professional Performance.

**Comprehensive Examination Policies & Procedures**

1. Students must achieve an 84 (out of 100) or better on both the Oral Comprehensive Examination and the Written Comprehensive Examination.

2. The Oral Comprehensive Examination will be given at the end of the first semester to be eligible to proceed to internship.

3. The Written Comprehensive Examination will be given at the end of the second semester to be eligible to proceed to the second year.

4. Students who receive an 83 or less have one opportunity to increase their grade to 84 or better or to complete remedial work as assigned by the education team and Program Director.
5. Students retake only sections of the comprehensive examination that received a score of 83 or below. Students must retake the section(s) within one month of the original comprehensive examination date.

6. Students who are unable to achieve a grade of 84 or better after two attempts may be dismissed.

7. Final average of the Oral and Written Comprehensive examinations will appear on the transcript.

8. If a student is unable to take the comprehensive examination due to extenuating circumstances such as extreme illness or injury, the student must make a written request to the Program Director to reschedule the comprehensive examination.

9. Students withdrawing from the Graduate Art Therapy and Counseling Program after completion of the first year, yet prior to the comprehensive examination, will have a W (withdraw) notation on their transcript (i.e., Comprehensive Examination - W).

Internship Policies & Procedures

Student

Students are expected to attend the 234 hours of training (of which 117 hours are direct patient contact) and 15 hours of Individual Clinical A.T.R. supervision for each of the 3 assigned semesters. (702 hours total)

1. Students who are absent must call the internship’s on-site supervisor and the art therapy supervisor the morning of the internship and/or supervision day.

2. Students must have sufficient guarantee that the on-site supervisor will notify the assigned unit of the cancellation of assessments, individual, group and/or family art psychotherapy; otherwise the student additionally must call other unit staff at the facility to ensure proper notification.

3. Students who do not complete the required practicum and internship hours during the time frame of the semester may receive a failing grade, be referred to the Program Director for an action plan, and may be placed on academic probation.

4. Students must seek written approval from the Program Director to continue working in an internship beyond the designated timeframe of the semester.

5. Students must continue to receive individual ATR Supervision during the completion of any internship hours accrued beyond the last day of the semester.

6. Students must notify the ATR Supervisor of any personal mental health or medical concerns that may impact patient/client safety, including and not limited to: being treated for a mental or medical illness.
7. Students who are at risk of failing the internship and supervision will be extended if eligible. The art therapy supervisor and Program Director will make this decision with input from the on-site supervisor and the facility.

8. Reason for failing an internship may include and not be limited to the following:
   a. Unsatisfactory completion of required internship hours
   b. Unsatisfactory completion of direct client contact hours
   c. Unsatisfactory completion of individual art therapy supervision hours
   d. Unsatisfactory completion of progress notes, assessments, and/or treatment plans.
   e. Performing below the minimum score designated each semester based on the competencies as noted on the internship evaluation.
   f. Performing below the acceptable range on the Professional Performance Review
   g. Placing patients/clients at risk for harm or faculty/program at risk for liability claims.

9. If the failing performance occurs, the F will be recorded on the transcript and the student will be placed on Academic Probation until he/she is able to pass the internship and art therapy supervision performance evaluations.

10. If a failing performance occurs, students may be dismissed from the program.

11. The Pass grade earned for the repeated internship and/or supervision will appear on the transcript with the previously failed grade.

12. Students unable to achieve a passing evaluation after the prescribed remedial work will be dismissed from the Graduate Art Therapy and Counseling Program.

**On- Site supervisor**

Each internship experience includes a written mid-semester and end-of-semester evaluation by the individual ATR Supervisor, group ATR Supervisor, and on-site supervisor(s) which documents performance and identifies any improvements necessary to achieve satisfactory evaluation at the end of the practicum. These evaluations are reviewed with the student and the student receives a copy.

**ATR supervisor**

Art therapy (ATR) supervisors communicate periodically during the internship with the appropriate on-site supervisor to:

1. Discuss student progress
2. Document the progress of each student
3. Identify problem areas

4. Plan supplementary strategies, if necessary

5. Assess the effectiveness of supplementation

6. Ensure active student participation in the above process

The ATR supervisor must contact the on-site supervisor within the first three weeks of the internship placement to discuss the adjustment of the intern to the setting, expectations, and population.

The ATR supervisor must complete at least one site visit to observe the student intern in the act of providing art therapy services.

The ATR supervisor must monitor and provide for patient/client welfare and safety, including and not limited to supervision of the intern’s assessment, treatment planning, treatment implementation, termination, and documentation.

Program Director
The Program Director is the Internship Course Director and coordinator. The Program Director is responsible for securing and assigning interns to internship sites. The Program Director builds positive working relationships with external publics by responding to inquiries and concerns. The Program Director with the support of the Program Coordinator facilitates internship agreements.

Capstone Policies & Procedures
Primary Investigators: Primary Investigators are considered the designers of research. For our program, students conducting research as a part of their capstone projects are the primary investigators of their works. The designation in IRB manager of primary investigator is not the official designee of the capstone research project. The official designee/primary investigator is the student. Faculty or students may be primary investigators in IRB manager, which should be negotiated between the student and capstone chair and does not supersede program policy that students are the primary investigators of their works. This designation is in effect immediately and policies and procedures apply to current and past students.

Procedures:
All proposals will be reviewed by the Program Director before submission for faculty approval, IRB approval, or IRB determination.

All proposals are due to the Program Director as documented on the course syllabus and Blackboard.
The Program Director will respond via email to the student and capstone chair instructions for faculty approval, IRB approval, or IRB determination.

Proposals may be submitted in the IRB Manager for review by the EVMS IRB Faculty for letters of determination.

Self-studies- n=1 is not generalizable and will be reviewed by the Program Director for safety to the student, meeting the requirements for a project of excellence, and academic integrity.

Self-studies may be considered a data source and if one is to study self-studies another party should de-identify them before meta-analysis occurs by the primary investigator/student. This de-identification procedure should be documented in the proposal. A review of self-studies is considered human subjects research data already collected and should be submitted to the IRB for determination or approval.

IRB Manager- studies are to be named with the student name and then title of the study in IRB manager if/when the faculty is the primary investigator in IRB Manager.

Students who do not obtain the desired number of participants by the deadlines for data collection completion will report the exact results in Chapter 4 and critically analyze the protocol, including recruitment procedures, benefits, and limitations for Chapter 5.

Student
The student will demonstrate her/his ability to integrate concepts, theories, and current literature, design and execute a project of excellence, and extrapolate conclusions and implications for further study with art therapy as a focus through completion of a Capstone Project.

The student will follow the guidelines and deadlines in the Capstone Project Manual including completion of the document, editing, producing copies, and turning in all raw data and study related materials.

Students receiving an (I) Incomplete in 607 Capstone Project may be ineligible to enroll in elective courses, and must meet with their Capstone Chair and the Capstone Course Director to develop a remediation plan.

Capstone Chair
The Capstone Chair or the student may actively assume the responsibilities as the principal investigator. Students in the role of primary investigator may earn 1 additional credit for the IRB process for the Capstone Project. The Capstone Chair coordinates with the Capstone Committee to monitor the progress of the project. The Capstone Chair complies with and mentors the student to comply with the EVMS policies and procedures for research. The Capstone Chair follows procedures established by the Capstone Course Director and Program Director.
Students are always the primary investigators of their works, therefore, the following is required:

1. Faculty are to obtain written permission from the Program Director to publish students’ or alumni’s works.
2. Once approved, any final article should be submitted to the Program Director for review before submitting to a journal to insure the integrity and quality of the work represents the standards of the GATC program, SHP, and EVMS.
3. Faculty are to obtain written permission from students and alumni when publishing their works. Ideally, based on principles of professionalism, faculty would mentor students and alumni to publish their works as sole authors or primary authors, with the faculty being a second or third author, commensurate with editing versus conducting the research.
4. Faculty are to obtain written permission from the Program Director to keep students’ IRB studies open.
5. It is recommended that studies be replicated and not remain open to maintain professionalism and integrity of research.
6. Faculty are to obtain written permission from students and alumni to keep IRB studies open and submit to Program Director to keep on file.
7. In general, all students’ IRB studies should be closed at the conclusion of the studies and no later than students’ graduation dates.

**Capstone Course Director**
The Capstone Course Director in collaboration with the Program Director assigns Chairpersons to students during the spring semester of the first year. The Capstone Course Director monitors compliance and student progress in capstone project completion. The Capstone Course Director reports progress and concerns to the Program Director. The Capstone Course Director mentors Capstone Chairpersons and Capstone Committee Members to comply with the procedures in the Capstone Manual. The Capstone Course Director is the liaison to the EVMS IRB for part-time faculty in the role of Capstone Chairpersons.

**Program Director**
The Program Director supports and enforces policies and procedures in the Capstone Project Manual. The Program Director arbitrates conflicts that may arise between a student and the Capstone Committee. The Program Director complies with the procedures in the Capstone Manual.

The Program Director will review proposals for appropriate alignment with the capstone requirements for graduation, focus on art therapy, and academic integrity.

The Program Director will review and approve all amendments that request a change in PI.
Accommodations for testing

Students who need a reasonable accommodation for testing must consult with the EVMS Disability Compliance Officer. Currently this is: Michael Solhaug, MD; 757 - 446- 5638; solhaumj@evms.edu

1. The Disability Compliance Officer will review any documents supporting your request for accommodation and issue a letter outlining the approved accommodations to the Program Director.
2. Please note that the Disability Compliance Officer does not reveal the reason for the accommodation to program personnel.
3. The Program Director and/or their designee will ensure that conditions of each student's accommodation are met.
4. Students with an approved request for Accommodation:
5. The program will ensure that students with an accommodation will have a quiet and secure space for testing and that the conditions of the approved accommodation are met.
6. Students with accommodations will be instructed when and where they are to go at their designated testing time. The time of testing may be different that the scheduled testing time depending on the nature of the accommodation.
7. The staff or faculty member who accompanies the student to their designated test location will ensure that the student is settled. Then the staff or faculty member will remain at least long enough to ensure that the student starts the computer based exam at the designated time.
8. Accommodated testing may be monitored or proctored at the discretion of the course director.
9. If a student elects not to take advantage of their approved accommodations for a specific examination, the student MUST inform the course director prior to the test.

Professional Behavior Expectations

1. Students will be required to demonstrate full compliance with the technical standards to the degree students attested to on their admission statements.
2. Students will engage in their didactic training and supervised practice in a professional manner with behavior that is patient-centered and reflective of the Ethical Principles for Art Therapists and in keeping with standards for professional conduct set by the state licensing board.
3. Students are expected to attend all classes and program required events.
4. Students are required to treat their classmates and all EVMS faculty, students, and staff with respect.
5. Students with concerns regarding classroom activities should first endeavor to resolve the issue with the instructor and/or advisor.
6. If concerns are not addressed or resolved by the instructor, the student should then address the issue with the Program Director as appropriate.

Scholarly Expectations

Writing style (APA)
In general the style requirement for formal writing assignments will be: APA Style, 6th Edition as outlined in:

Plagiarism
Students are expected to do their own work. Turning in a written assignment that is believed to be another person’s work, collaboration, or self-plagiarism will be considered cheating or plagiarism. The student will be referred to the EVMS Honor Council.

PowerPoint Presentations, other electronic or printed materials, in the classroom and on Blackboard Printed matter, videos, and other electronic materials to include all PowerPoint presentations viewed on Blackboard or in the classroom are copyrighted materials owned by the author(s) and/or Eastern Virginia Medical School. These materials are never to be copied or transferred electronically outside of the program or the school for any reason without the written permission of the author of the presentation(s). Doing so, risks violation of US copyright laws with resulting legal action or other reasonable sanctions from the program or school.

Student Participation in Evaluation of the Program
The GATCP Program is committed to delivering a curriculum that will prepare the student to deliver optimal mental health care in an ever-changing environment. In our commitment to the process of continuous quality improvement, students are involved in course evaluations, supervised clinical practice evaluations, and faculty evaluations at the closure of each semester. As a future health care provider, the evaluation process will be a part of every continuing education course in which the practitioner participates to maintain her credentials.

1. Students are required to complete these evaluations for didactic courses and Supervised Clinical Practice experiences.
2. Semester or clinical rotation grade reports may be withheld pending completion of course evaluations.
Studio Policies and Procedures

Student

Students are expected to use the studio responsibly. The space is shared with the entire art therapy student body and faculty; consideration should be given to others. The studio is also part of a community of artists; students should be aware of proper etiquette for communal space.

1. Loud music and inappropriate language are inconsiderate of others who may be working in the building.

2. Supplies are purchased for student use and are not to be used for internship. Students may remove supplies only for use on personal art projects. No tools or equipment are to be taken from the studio.

3. Students may consult the Studio Director for recommendations for supplies and use of special items.

Limited storage space is available in the hall lockers for works in progress. Students must purchase their own padlocks for the lockers.

1. Completed work should be removed from the studio as frequently as possible. All unclaimed work will be recycled at the end of each semester.

2. Permission from the course director of Processes and Materials should be sought before adding found materials to the supplies available.

Safety precautions are to be maintained at all times. Sprays and fixatives must be used in approved areas.

Misuse of furnishings and tools, sloppy use of materials, failure to clean work areas, abandonment of dirty brushes and clay tools, inappropriate storage of paper and other supplies, flagrant waste, misuse of recycling containers, and any unsafe practices will not be tolerated and considered a violation of the EVMS Student Code of Conduct.

Studio access will end for graduating students at the end of the final semester. All artwork and personal art making items should be removed from the studio and drawers and documented on the Graduation Checklist.

Studio Director

The Studio Director is a faculty member responsible for managing the art therapy studio.

1. The Studio Director in collaboration with the Program Director may identify student(s) to manage various aspects of maintaining the studio.
2. The Studio Director manages the supply of materials, space, and organization of the studio.

3. The Studio Director reports concerns to the Program Director.

4. The Studio Director provides assignments for student assistants and notifies the Program Coordinator.

5. The Studio Director monitors the alignment of task completed with hours worked.

**Program Director**

The Program Director monitors the use of and access to the studio through the report of the Studio Director. The Program Director allocates the budget to support the maintenance of the studio.

**Exhibition of Artwork Policies & Procedures**

**Exhibition Areas**

1. Lewis Hall

2. Lester Hall
   a. Lobby outside Health Professions
   b. Hallway adjacent to the Graduate Art Therapy and Counseling Program offices and classroom

3. Other areas approved by Student Affairs and/or the GATCP Program Director

**Students Exhibiting Artwork**

**Criteria for Exhibition**

1. In order to be considered for display, students must submit a release for exhibition.

2. Submitted artwork should be accompanied by the student exhibit form and the one-page statement provided to the course director.

3. Works on paper must be properly framed. The program will provide frames for the poster assignments. Students may inquire about availability of frames owned by the program.

4. Space for 3-D art pieces is limited.

5. The Gallery Director reserves the right to decide which pieces will be exhibited, where they are placed, and how long they remain on display.
6. Inquiries regarding purchase will be referred to the student.

7. A student may be employed in the role of Gallery Assistant at the discretion of the Gallery Director and the Program Director. The Gallery Assistant reports directly to and receives assignments from the Program Coordinator.

**Gallery Director**

1. The Gallery Director will be responsible for the layout and methods of installation.

2. The Gallery Director monitors and facilitates the display of artwork in designated areas at EVMS.

3. The Gallery Director provides assignments for student assistants and notifies the Program Coordinator.

4. The Gallery Director monitors the alignment of task completed with hours worked.

**Program Director**

The Program Director approves budget requests for items necessary to implement the mission of displaying artwork throughout the buildings at Eastern Virginia Medical School. The Program Director provides mentorship and monitoring to the Program Coordinator for managing the Gallery Assistant.

The Program Director enforces policies and procedures related to the display and ownership of artwork.

1. Program will not be held responsible for damage or loss for any artwork.

2. All unclaimed artwork will become the property of the program.

**Facilities Use**

Students must request to use any EVMS or GATCP facilities and space. Students may reserve EVMS and GATCP facilities for student activities, academic assignments, and capstone project work (workshops, groups, individual clinical work).

1. Submit letter describing need for space, dates, and times to the Program Director

2. Once approval is given in writing from the Program Director, students may request assistance in reserving space from the Program Coordinator.

**Student E-mail Accounts**
All students will be assigned an EVMS e-mail account upon matriculation to the GATCP. These email accounts are used by all school departments for timely communication with students (not just the program). These accounts are essential to facilitate this communication. Students are required to check their EVMS email accounts at least three times a week, with daily review recommended, and are responsible for knowledge of all school or program information contained in the e-mails. All students must use EVMS e-mail for correspondence or the EVMS.sendit link on the EVMS website to send larger files.
Class Officers

President

The class president is the main contact person for the class and acts as a liaison to the faculty, officials in the School of Health Professions, and Eastern Virginia Medical School. (S)he links with all the other class presidents regarding information that needs to be communicated to the class related to EVMS community events (community care day, haunted hallway, health professions health fair, the retreat). (S)he is in direct contact with the PAN student council representative. The president organizes the monthly class meetings to discuss class business and communicate class concerns to the program director and faculty as needed. (S)he attends any necessary committee meetings to represent the art therapy class, is in contact with the EVMS media, and keeps current on events at EVMS, in the community, and other benefits to students.

Secretary

The secretary communicates with the class and president to create the agenda for the class meetings. (S)he takes meeting minutes and sends the meeting minutes to classmates. The secretary may communicate with faculty and staff as needed.

Treasurer

The treasurer is responsible for maintaining an accurate balance of the funds allotted annually to each class from student fees. These funds are deposited into a Bank of Hampton Roads account. The money is typically used for the class graduation party. The funds may be accessed for other events (e.g. The AT students are hosting a meeting for PAN Student Council and decide to provide food). The treasurer would also collect and record any funds raised and/or donated by the class. The treasurer would make payments to class designated vendors. The treasurer works closely with the Office of Student Affairs, the class president, and the graduation representative.

Honor Council Representative

The Student Body of EVMS conducts its affairs by means of an honor system. This is done in the belief that responsible professional behavior in the Health Professions is developed and nurtured in a maturing process of student self-government. In the spirit of human values in healthcare philosophy, and implicit in such an honor system, is the fostering of a sense of trust in the EVMS community. Each student subscribes to the honor system by signifying in writing his/her support at the time of matriculation. On entering EVMS, each student shall sign and abide by the Honor Code and rules of enforcement.

The Honor Council representative attends the meetings of the Honor Council and participates in the decision making process enforcing the EVMS Honor Code. Representatives of the Honor Council serve as the jury for trials that determine the innocence or guilt of students who are accused of dishonesty or honor code violations. The Honor Council representative adheres to the EVMS Honor Code and Honor Council policies and procedures while respecting the rights of other students’ privacy.
Social Chair
The Social Chairperson shall organize periodic social functions for the class. The social chair should work with the other class social chairpersons to organize social functions that encourage participation of multiple classes and programs. The social chair should be assertive in collaborating with other students and with students from other programs. The social chair should act in the best interest of all class members by being inclusive and welcoming. The social chair should take the opportunity to facilitate celebrations for the class and support class members (i.e. Birthdays, milestones, bereavement, graduation celebration). The social chair should consult with class officers, specifically, the treasurer to ensure fiscal responsibility in the development of and payment for social events.

Art Therapy Program Student Representatives
The student representatives communicate the mission of the Graduate Art Therapy and Counseling Program to prospective students. The student representatives participate in giving campus tours to include the program offices, the art therapy classroom and art therapy studio. The student representatives attend orientation events and other EVMS sponsored events to welcome new and prospective students, as well as share the experience of graduate education at EVMS and living in the local area. Student representatives may be called up to share their experiences with prospective students during student recruitment sessions. The student representatives promote the field of art therapy and have a strong identity as developing art therapists.

Student Council Representatives
As representatives of the student body, the Student Council strives to be a resource for students in promoting the ideals of leadership, responsibility, and achievement. SC represents the students to the administration, faculty, and staff of EVMS. Each graduating class of each program will have a minimum of two SC representatives with voting rights. The class selects the SC representatives. The SC representatives attend monthly meetings with the Dean/Provost, Associate Dean for Academic Affairs, and student representatives from the School of Medicine and School of Health Professions to receive updates and discuss current issues and EVMS events, participate in student government, participate and advertise opportunities and events for students, and review other relevant items such as student clubs. The SC representatives deliver reports from the meetings to the members of their art therapy class.

Phoenix Committee Representative
The Phoenix Committee helps students with mental health concerns such as anxiety, depression, substance abuse, eating disorders, and family concerns. Phoenix maintains complete confidentiality in any assistance sought. The Phoenix Committee Representative is an advocate who exemplifies integrity through clear boundaries and confidentiality.
Student Affairs Representative

The Office of Student Affairs works closely with students in both the School of Health Professions and the Medical School to promote student life and a positive campus climate. The Student Affairs Representative participates in monthly meetings to monitor, discuss, and recommend improvements to EVMS faculty and leadership for the benefit of EVMS campus life.
Work Study and Employment Opportunities

Student assistants must remain in good academic standing in the Graduate Art Therapy and Counseling Program. Students who fall out of good academic standing may be asked to resign or be terminated from employment in the program.

Claywork Assistant

The Claywork Assistant maintains organization and cleanliness of the claywork and kiln supplies and equipment and operates the firing of the kiln.

Gallery Assistant

The Gallery Assistant works with the Studio & Gallery Director to plan and hang/install art exhibitions (typically two per semester) in designated areas.

Studio Assistant

The Studio/Classroom Assistant works with the Studio & Gallery Director to maintain organization and cleanliness of the studio, the classroom, the art supplies, and the equipment.

Research Assistant(s)

The Research Assistant is ideally familiar with arts-based research and current practices in the field of art therapy. The research assistant assists full time art therapy faculty researchers in carrying out their research endeavors through work on and contributions to collaborative research teams. The Research Assistant reports directly to the Program Coordinator.

Student Employment

Due to the academic and clinical demands of the GATCP curriculum, the GATC Program recommends that students not be employed during their time in the GATC Program. The following guidelines are meant to help the student in making decisions about work during participation in the GATC Program.

1. Students should keep in mind that while they may be able to work during breaks in curriculum, variable schedules and travel associated with clinical placements during the clinical internships may make balancing employment and the demands of the program difficult.
2. Students who choose to work are encouraged to make this known to their faculty advisor.
Degree Requirements
Requirements for Graduation are:

1. Complete all coursework with a B/3.00 average or above,
2. Complete the Written and Oral comprehensive exam with a score of 84 or above,
3. Complete all individual supervision, group supervision, and internship requirements,
4. Complete a Capstone Project,
5. Meet expectations on the Professional Performance review in all areas,
6. Be recommended for graduation by the Program Director and GATCP Faculty,
7. Student must file the appropriate graduation application,
8. Student must have paid all debts to the school, returned all borrowed books, and
9. Complete the Graduation Checklist.
Awards, Scholarships & Honors

Paul Fink Outstanding Art Therapist Award

The Eastern Virginia Medical School Graduate Art Therapy Program began at the birth of the medical school in 1973. Paul J. Fink, M.D., first Chair of the EVMS Department of Psychiatry, an internationally known psychiatrist, and past president of the American Psychiatric Association, began the art therapy program within the Department of Psychiatry and Behavioral Sciences. The Paul Fink Outstanding Art Therapist Award honors a tradition of excellence in clinical practice, scholarship, and academics.

Paul Fink Award: The recipient of the Paul Fink Outstanding Art Therapist Award is granted to the student who has excelled in clinical practice, capstone, and academics. S(he) has demonstrated the core values of integrity, creativity, self-awareness, humanity, collaboration, and depth as an Art Therapist.

Qualifications:
- Faculty Nomination
- Excellence in Clinical Practice- recommendations from ATR Supervisors and review for consensus from core faculty
- Excellence in Capstone - recommendation from Capstone Chair and review for consensus from core faculty
- Excellence in Academics- GPA 3.95 or above
  Electives & performance
  Professional Performance Reviews
- Demonstrated the core values of integrity, creativity, self-awareness, humanity, collaboration, and depth Majority Vote from Faculty

Academic Honors

Honors are bestowed as recognition of outstanding academic achievement and as a means to further encourage sound scholarship. They are awarded to every art therapy graduate student attaining the required proficiency. Students also receive certificates. The Graduate Art Therapy and Counseling Program supports academic achievement and is pleased to recognize and reward graduate students whose performance merits special attention. The recipient(s) of this honor have achieved a minimum GPA of 3.98 and have demonstrated depth understanding of curricular content, exceptional class participation, and timely response to deadlines for assignments.

Qualifications:
- GPA 3.95 or above
- Faculty Nomination
- Majority Vote from Faculty
Capstone Honors

Honors are bestowed as recognition of outstanding completion of a capstone project that demonstrates the student’s ability to integrate foundational knowledge, clinical practice, and investigative and evaluative practices in art therapy. The recipient(s) have followed deadlines, demonstrated skill in writing and making citations in APA style, designed and executed a project of original excellence, successfully completed an oral defense, and have extrapolated implications and conclusions relevant to Art Therapy. The Capstone Project contributes to the field of art therapy, the community, or the world.

Qualifications:
Core faculty nominations
Core faculty rank nominations
Awarded to not more than 1/4 of the graduating class

James J. Consoli Art Therapy Scholarship

This scholarship is awarded by the EVMS Graduate Art Therapy & Counseling Program to one rising second year student who demonstrates financial need, academic excellence, and an outstanding depiction of his/her artist-therapist identity in artwork and written commentary. The monetary value of the scholarship varies yearly and is dependent upon the growth of the funding source. The scholarship is awarded as tuition remission.

History/Biography

This scholarship was created in 1997 in memory of art therapist James J. Consoli, ATR-BC, LPC (1956-1997) and substantial additional funds were given in 2014 in memory of Meghan Kirkpatrick (1987-2014).

Jim Consoli earned a Master of Arts in Art Therapy from George Washington University. He was a Registered and Board Certified art therapist, a National Certified Counselor, a Licensed Professional Counselor in TN and VA, and an AAMFT approved supervisor. He held a faculty position at EVMS from 1990-1997. At the time of his early passing he was the Assistant Director of the EVMS Graduate Art Therapy Program and an Associate Professor of Psychiatry and Behavioral Sciences. He served a term as President of the Virginia Art Therapy Association. He presented locally, nationally, and internationally and was an instructor on the American Art Therapy Association Family Art Therapy Regional symposium team. James Consoli is best remembered for his strong artist-therapist identity and playful sense of humor, and interests in family therapy, hypnosis and visualization, and the creation of educational videos. He was instrumental in his contributions to a major curriculum
revision of the Graduate Art Therapy Program in 1990, which included a new studio course in Processes and Materials of Art Psychotherapy, the development of the family therapy specialization track, and alignment of coursework with the potential for licensure of graduates as professional counselors. In his 1991 film, Psychimagery, he used a technique he called "ushered imagery" to gently allow patients to serve as their own guide in order to create personal solutions through their own empowerment. Jim served as the first video reviewer for *Art Therapy: Journal of the American Art Therapy Association*. He is now remembered through the *Jim Consoli Video/Film Award* given by AATA in recognition of a video or film of high quality that adds to the existing fund of knowledge about the field of art therapy.

Meghan displayed through her self-awareness and creativity her artist-therapist self, while in the EVMS Graduate Art Therapy and Counseling Program. From a very early age, Meghan Kirkpatrick discovered her joy and talent were connected to art. That led her to obtain a Bachelor of Arts degree at Dennison University. Upon graduation, unsure of how to best utilize her education, she worked almost 2 years at a graphic design company. During her time there she came to realize that this was not going to be her career. During her time there, she realized that graphic design did not fulfill her desire to help others. In the fall of 2011, she entered the EVMS Graduate Art Therapy and Counseling program. The classes, fellow students, and faculty confirmed her belief that becoming an art therapist was exactly what she wanted to be doing with her life. Always a compassionate person, she looked forward to the opportunity to impact others' lives through art therapy. She was a gifted and inspired student and a fiber artist. Unfortunately, after the completion of her first year at EVMS, the cancer that Meghan had battled as a child recurred and ended her hopes of returning to complete her degree. She passed away March 10, 2014. It is hoped that this award will help art therapy students with the same aspirations as Meghan to complete their studies and allow them to pursue this worthy career.

**Scholarship Criteria**

1. A student progressing into the second year of the Graduate Art Therapy & Counseling Program at EVMS.

2. Student must have a GPA of at least 3.5.

3. Student needs to demonstrate financial need, as determined by the Office of Financial Aid based on the evaluation of submission of the following:
   a. Financial Aid Application
b. FASFA forms  
c. EVMS Supplemental Scholarships


4. Submission of the completed James J. Consoli Scholarship Award Application.

5. Submission of a qualifying art piece and accompanying written statement. The artwork should conceptualize the development of your artist-therapist identity.

   a. In any media/style that conforms with the following criteria:
      i. Size:
         1. No less than- 12” x 12”
         2. No larger than- 72” x 72”
      ii. Two-dimensional or relief that does not protrude more than three (3) inches from the wall.

   b. The accompanying written statement (i.e. prose, poetry, dialogue) should describe what you sense, feel, think and know about your artist-therapist identity.

   c. The artwork should be delivered to the program office and the commentary should be submitted in hard copy and by email to the program.

Scholarship Award Process and Criteria

The James J. Consoli Scholarship Committee, comprised of the Graduate Art Therapy & Counseling Program Director and Core Faculty, will select the winner based on completeness of the application and the evaluation of the following:

1. The artwork’s ability to stand on its own merit as a work of art.

2. The congruency between the written statement and the artwork.

3. Conceptualization of the theme: Depiction of your artist-therapist identity.

The GATCP Faculty will select and announce the winner. The Financial Aid office will process the scholarship award during the summer. The winner of the scholarship award will receive a certificate, a financial tuition remission, and will have his/her artwork and written statement prominently displayed on campus for one year.

Student Awards

Altruism
Altruism is a core value in the identity of an art therapist. Altruism is the practice of concern for the welfare of others, often giving back selflessly to the community and/or profession. The recipient of the Altruism Award must have demonstrated altruistic behavior through altruistic care, concern and generous service to Graduate Art Therapy & Counseling Program, Eastern Virginia Medical School, and/or community. The recipient is nominated and selected by her/his peers in the cohort. Members of the graduating class send nominations to the Program Director, who presents the award to the recipient.

Leadership
The Leadership Award honors the student who has demonstrated innovative, motivational leadership impacting his or her academic, clinical, cohort, and/or community environments. The student has served as a class officer and/or as a committee representative. The recipient of the Leadership Award must have demonstrated contribution to leadership within the Graduate Art Therapy & Counseling Program, Eastern Virginia Medical School, and/or community. The recipient is nominated and selected by her/his peers in the cohort. Members of the graduating class send nominations to the Program Director, who presents the award to the recipient.

Graduation
Students meeting the requirements for graduation are able to participate in the graduation ceremony to receive their diploma. Students and their families are invited to attend a graduation ceremony held by Eastern Virginia Medical School. Students graduate with fellow students from both the School of Medicine and the School of Health Professions.
INTRODUCTION

AMERICAN ART THERAPY ASSOCIATION MISSION STATEMENT

The American Art Therapy Association, Inc., is an organization of professionals dedicated to the belief that the creative process involved in the making of art is healing and life enhancing. Its mission is to serve its members and the general public by providing standards of professional competence and developing and promoting knowledge in and about the field of art therapy.

PREAMBLE

The goals of the Ethical Principles for Art Therapists are to safeguard the welfare of the individuals, families, groups and communities with whom art therapists work and to promote the education of members, students, and the public. The principles put forth in this ethics document are intended to address many situations encountered by art therapists. In general, art therapists are guided in their decision-making by core values that affirm basic human rights. These values reflect aspirational ethical principles, which include:

**Autonomy:** Art therapists respect clients’ right to make their own choices regarding life direction, treatment goals and options. Art therapists assist clients by helping them to make informed choices, which further their life goals and affirm others rights to autonomy, as well.

**Nonmaleficence:** Art therapists strive to conduct themselves and their practice in such a way as to cause no harm to individuals, families, groups and communities.

**Beneficence:** Art therapists promote wellbeing by helping individuals, families, groups and communities to improve their circumstances. Art therapists enhance welfare by identifying practices that actively benefit others.

**Fidelity:** Art therapists accept their role and responsibility to act with integrity towards clients, colleagues and members of their community. Art therapists maintain honesty in their dealings, accuracy in their relationships, faithfulness to their promises and truthfulness in their work.

**Justice:** Art therapists commit to treating all persons with fairness. Art therapists ensure that clients have equal access to services.
Creativity: Art therapists cultivate imagination for furthering understanding of self, others and the world. Art therapists support creative processes for decision-making and problem solving, as well as, meaning-making and healing.

These Ethical Principles for Art Therapists apply to art therapists’ professional activities across a wide variety of contexts, such as in person, postal, telephone, and Internet and other electronic transmissions. These activities are distinguished from the private conduct of art therapists, which is not within the purview of this document.

In this ethics document, the term reasonable means the prevailing professional judgment of art therapists engaged in similar activities in similar circumstances, given the knowledge the art therapist had or should have had at the time.

The development of a rigorous set of ethical principles for art therapists’ work-related behavior requires a personal commitment and constant effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical practice. This ethics document defines and establishes principles of ethical behavior for current and future members of this association and informs credentialing bodies, employers of art therapists, and the general public that the members of the American Art Therapy Association, Inc., are required to adhere to the Ethical Principles for Art Therapists. Art therapists are bound to follow all federal, state, and institutional laws and regulations in addition to the Ethical Principles for Art Therapists.

ETHICS COMMITTEE STATEMENT OF PURPOSE

The Ethics Committee is the committee charged by the American Art Therapy Association, Inc., to recommend changes to and endorse the Ethical Principles for Art Therapists. The Ethics Committee educates the membership of the American Art Therapy Association and the general public, and responds to inquiries regarding issues of ethical practice.

ETHICAL PRINCIPLES FOR ART THERAPISTS

The Board of Directors of the American Art Therapy Association, Inc., hereby promulgates, pursuant to Article XI, Sections 1 and 2 of the Association Bylaws, the Ethical Principles for Art Therapists. Members of the Association abide by these principles and by the applicable laws and regulations governing the conduct of art therapists and any additional license or certification that the art therapist holds.

ETHICAL PRINCIPLES FOR ART THERAPISTS

AMERICAN ART THERAPY ASSOCIATION, Inc.

PRINCIPLES
1.0 RESPONSIBILITY TO CLIENTS

Art therapists endeavor to advance the welfare of clients, respect the rights of those persons seeking their assistance, and make reasonable efforts to ensure that their services are used properly.

1.1 Art therapists respect the rights of clients to make decisions and assist them in understanding the consequences of these decisions.

1.2 In instances when clients lack the capacity to provide informed consent, art therapists protect clients’ interests by seeking permission from an appropriate third party. In such instances art therapists seek to ensure that the third party acts in a manner consistent with clients’ wishes and interests. Art therapists take reasonable steps to enhance such clients’ ability to give informed consent consistent with the clients’ level of understanding.

1.3 It is the professional responsibility of art therapists to avoid ambiguity in the therapeutic relationship and to maintain clarity about the different therapeutic roles that exist between client and therapist.

1.4 Art therapists refrain from entering into multiple relationships with clients if the multiple relationships could reasonably be expected to impair competence or effectiveness of the art therapist to perform his or her functions as an art therapist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

Multiple relationships occur when an art therapist is in a professional role with a client and (a) is simultaneously in another role with the same client, (b) is simultaneously in a personal relationship with a client in the professional relationship, and/or (c) promises to enter into another relationship in the future with the client or a person closely associated with or related to the client.

Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.

Art therapists recognize their influential position with respect to clients, and they do not exploit the trust and dependency of clients.

1.5 Art therapists refrain from engaging in an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner.

1.6 Art therapists refrain from taking on a professional role when (a) personal, professional, legal, financial, or other interests and relationships could reasonably be expected to impair their competence or effectiveness in performing their functions as art therapists, or (b)
expose the person or organization with whom the professional relationship exists to harm or exploitation.

1.7 Art therapists seek supervision or consultation when feeling discomfort or encountering personal and client problems about which they have questions or about which they are confused or uncertain regarding their ability to understand and/or adequately cope.

1.8 Art therapists strive to provide a safe, functional environment in which to offer art therapy services.

This includes:

- proper ventilation;
- adequate lighting;
- access to water;
- knowledge of hazards or toxicity of art materials, and the effort needed to safeguard the health of clients;
- storage space for artwork and secured areas for any hazardous materials;
- allowance for privacy and confidentiality;
- compliance with any other health and safety requirements according to state and federal agencies that regulate comparable businesses.

1.9 Art therapists make information available to clients regarding ethical principles and guidelines, certification and state licensure requirements for practice, and state and federal privacy legislation so that clients are fully aware of their rights.

2.0 CONFIDENTIALITY

Art therapists protect confidential information obtained from clients, through art work and/or conversation, in the context of the professional relationship while clients are in treatment and post-treatment.

2.1 Art therapists treat clients in an environment that protects privacy and confidentiality.

2.2 Art therapists inform clients of the limitations of confidentiality.

2.3 Art therapists do not disclose confidential information for the purposes of consultation or supervision without clients’ explicit consent unless there is reason to believe that those
clients or others are in immediate, severe danger to health or life. Any such disclosure must be consistent with laws that pertain to the welfare of clients, their families, and the general public.

2.4 In the event that an art therapist believes it is in the interest of the client to disclose confidential information, he/she seeks and obtains written consent from the client or client’s guardian(s) when possible before making any disclosures, unless there is reason to believe that the client or others are in immediate, severe danger to health or life.

2.5 Art therapists disclose confidential information when mandated by law in a civil, criminal, or disciplinary action arising from such art therapy services. In these cases client confidences may be disclosed only as reasonably necessary in the course of that action.

2.6 When the client is a minor any and all disclosure or consent required is obtained from the parent or legal guardian of the minor client except when otherwise mandated by law. Care is taken to preserve confidentiality with the minor and to refrain from disclosure of information to the parent or guardian that might negatively affect the minor’s treatment.

2.7 Art therapists maintain client treatment records for a reasonable amount of time consistent with federal, state, and institutional laws and regulations and sound clinical practice. Records are stored or disposed of in ways that maintain confidentiality.

3.0 ASSESSMENT METHODS

Art therapists develop and use assessment methods to better understand and serve the needs of their clients. They use assessment methods only within the context of a defined professional relationship.

3.1 Art therapists who use standardized assessment instruments are familiar with reliability, validity, standardization, error of measurement, and proper application of assessment methods used.

3.2 Art therapists use only those assessment methods in which they have acquired competence through appropriate training and supervised experience.

3.3 Art therapists who develop assessment instruments based on behavioral science research methods follow standard instrument development procedures. They specify in writing the training, education, and experience levels needed to use such instruments.
3.4 Art therapists obtain informed consent from clients regarding the nature and purpose of assessment methods to be used. When clients have difficulty understanding the language or procedural directives, art therapists arrange for a qualified interpreter.

3.5 In selecting assessment methods and reporting results, art therapists consider any factors that may influence outcomes, such as culture, race, gender, sexual orientation, age, religion, education, and disability. They take reasonable steps to ensure that others do not misuse the results of their assessments.

3.6 Art therapists take reasonable steps to ensure that all assessment artwork and related data are kept confidential according to the policies and procedures of the professional setting in which these assessments are administered.

4.0 CLIENT ARTWORK

Art therapists regard client artwork as a form of protected information and the property of the client. In some practice settings client artwork, or representations of artworks, may be considered a part of the clinical record retained by the therapist and/or agency for a reasonable amount of time consistent with state regulations and sound clinical practice.

4.1 Client artwork may be released to the client during the course of therapy and upon its termination, in accordance with therapeutic objectives and therapeutic benefit.

4.1.a The client is notified in instances when the art therapist and/or the clinical agency retain copies, photographic reproductions or digital images of the artwork in the client file as part of the clinical record.

4.1.b If termination occurs as a result of the death of the client, the original artwork is released to relatives if (a) the client signed a consent specifying to whom and under what circumstances the artwork should be released; (b) the client is a minor or under guardianship and the art therapist determines that the child’s artwork does not violate the confidentiality the child entrusted to the art therapist; (c) the art therapist received and documented clear verbal indications from the client that the client wanted part or all of the artwork released to family members; or (d) mandated by a court of law.

4.2 Art therapists obtain written informed consent from clients or, when applicable, legal guardians, in order to keep client artwork, copies, slides, or photographs of artwork, for educational, research, or assessment purposes.

4.3 Art therapists do not make or permit any public use or reproduction of client art therapy sessions, including dialogue and artwork, without written consent of the clients.
4.4 Art therapists obtain written informed consent from clients or legal guardians (if applicable) before photographing clients’ artwork or video-taping, audio recording, otherwise duplicating, or permitting third party observation of art therapy sessions.

4.5 Art therapists obtain written, informed consent from clients or legal guardians (if applicable) before using clinical materials and client artwork in any teaching, writing, and public presentations. Reasonable steps are taken to protect client identity and to disguise any part of the artwork or videotape that reveals client identity.

4.6 Art therapists disclose client artwork to third parties, members of interdisciplinary teams and supervisors with the consent of the client or legal guardians (if applicable).

4.7 Art therapists explain how client artwork will be stored while the client is receiving art therapy services and the duration of retention for the actual artwork, photographs or digital images.

5.0 EXHIBITION OF CLIENT ARTWORK Exhibiting artwork created in art therapy provides an opportunity for clients to show their artwork to the general public or those in their agencies who would not normally see their artwork. Art therapists affirm that the artwork belongs to the clients, and an exhibition of client artwork has the potential to inform the public and empower the clients, while decreasing stigma and preconceptions. In preparation for an exhibition of client artwork, art therapists and clients or legal guardians (if applicable) weigh the benefits of exhibiting against the potential unintended consequences for the clients.

5.1 Art therapists engage clients who wish to exhibit their artwork in a thoughtful and intentional conversation regarding the rationales, benefits, and consequences of exhibiting artwork created in art therapy.

5.2 Art therapists ensure proper safeguards in exhibition to ensure that clients and their imagery are not exploited, misrepresented, or otherwise used in ways that are not approved by the clients.

5.3 In selecting artwork for exhibition, art therapists help clients make decisions based on several factors, including reason(s) for the display of the artwork, the therapeutic value of the artwork to the clients, the degree of self-disclosure, and the ability to tolerate audience reactions.

5.4 Art therapists discuss the merits and detriments of including artwork created outside of the art therapy session in the exhibition with clients or legal guardians (if applicable).
5.5 Art therapists discuss with clients or legal guardians (if applicable) the importance of confidentiality (e.g., personal history, diagnosis, and other clinical information) and anonymity (e.g., name, gender, age, culture) with regard to the display of clients’ artwork. Art therapists respect the rights of clients who wish to be named in exhibits.

5.6 Art therapists obtain written informed consent from clients or, when applicable, parents or legal guardians, in order to exhibit client artwork. Art therapists discuss with clients, parents or legal guardians how the exhibition will be described and advertised to the public and viewing audience to ensure their consent in being associated with the exhibition.

5.7 In the event that exhibited artwork is for sale, the art therapist and client discuss the potential therapeutic impact before a sale of artwork is initiated. Art therapists ensure that clients and responsible parties (if applicable) are aware of and agreeable to how profits are used and who will specifically benefit from them (e.g., clients, agency[ies], social cause[s]).

5.8 Art therapists clearly state where and when exhibitions will take place to ensure that clients understand the range of possible audience members and degree of public exposure.

5.9 With regard to on-line exhibitions, art therapists make clients aware of the widespread availability of images, and therefore the enlarged viewing audience, as well as the potential for their images to be downloaded, forwarded or copied by on-line viewers.

6.0 PROFESSIONAL COMPETENCE AND INTEGRITY

Art therapists maintain high standards of professional competence and integrity.

6.1 Art therapists keep informed of developments in their field through educational activities and clinical experiences.

6.2 Art therapists refrain from using art materials, creative processes, equipment, technology or therapy practices that are beyond their scope of practice, experience, training, and education. Art therapists assist persons in obtaining other therapeutic services if the therapist is unable or unwilling to provide professional help, or where the problem or treatment indicated is beyond the scope of practice of the art therapist.

6.3 Art therapists diagnose, treat, or advise on problems only in those cases in which they are competent, as determined by their education, training, and experience.

6.4 Art therapists cooperate with other professionals, when indicated and professionally appropriate, in order to serve their clients effectively.
6.5 Art therapists, because of their potential to influence and alter the lives of others, exercise reasonable care when making public their professional recommendations and opinions through testimony or other public statements.

6.6 Art therapists do not engage in any relationships with clients, students, interns, trainees, supervisees, employees, research participants, or colleagues that are exploitative by their nature.

6.7 Art therapists accurately represent research findings to avoid distortion or misuse.

6.8 Art therapists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact.

7.0 MULTICULTURAL AND DIVERSITY COMPETENCE

Multicultural and Diversity Competence in art therapy refers to the capacity of art therapists to continually acquire cultural and diversity awareness of and knowledge about cultural diversity with regard to self and others, and to successfully apply these skills in practice with clients. Art therapists maintain multicultural and diversity competence to provide treatment interventions and strategies that include awareness of and responsiveness to cultural issues.

7.1 Art therapists do not discriminate against or refuse professional service to anyone on the basis of age, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.

7.2 Art therapists take reasonable steps to ensure that they are sensitive to differences that exist among cultures. They strive in their attempts to learn about the belief systems of people in any given cultural group in order to provide culturally relevant interventions and treatment.

7.3 Art therapists are aware of their own values and beliefs and how these may affect cross-cultural therapy interventions.

7.4 Art therapists obtain education about and seek to understand the nature of social diversity and oppression with respect to race, ethnicity, national origin, color, gender, gender identity, sexual orientation, class, age, marital status, political belief, religion, and mental or physical disability.

7.5 Art therapists acquire knowledge and information about the specific cultural group(s) with which they are working and the strengths inherent in those cultural groups. They are
sensitive to individual differences that exist within cultural groups and understand that individuals may have varying responses to group norms.

7.6 When working with people from cultures different from their own, art therapists engage in culturally sensitive supervision or education, seek assistance from members of that culture, and make referrals to professionals who are knowledgeable about the cultures when it is in the best interest of the clients to do so.

7.7 Art therapists are guided by the American Art Therapy Association’s Art Therapy Multicultural and Diversity Competencies.

8.0 RESPONSIBILITY TO ART THERAPY STUDENTS AND SUPERVISEES

Art therapists instruct students interested in learning about art therapy and art therapy supervisees by using accurate, current, and scholarly information to foster professional growth.

8.1 Art therapists as teachers, supervisors, and researchers maintain high standards of scholarship and present accurate information.

8.2 Art therapists are aware of their influential position with respect to students and supervisees, and they avoid exploiting the trust and dependency of such persons. Art therapists, therefore, do not engage in a therapeutic relationship with their students or supervisees.

8.3 Art therapists take reasonable steps to ensure that students, employees, or supervisees do not perform or present themselves as competent to perform professional services beyond their education, training, and level of experience.

8.4 Art therapists who act, as supervisors are responsible for maintaining the quality of their supervision skills and obtaining consultation or supervision for their work as supervisors whenever appropriate.

8.5 Art therapists do not require students or supervisees to disclose personal information in course or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, spouses, or significant others, except when (a) the program or training facility has clearly identified this requirement in its admissions and program materials, or (b) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training or professional related activities in a competent manner or whose personal problems could reasonably be judged to pose a threat to the students, their clients, or others.
8.6 When providing training and/or supervision to non-art therapists, art therapists take precautions to ensure that trainees understand the nature, objectives, expectations, limitations and resulting qualifications of the supervision and/or training as distinct from formal studies in art therapy.

9.0 RESPONSIBILITY TO RESEARCH PARTICIPANTS

Art therapy researchers respect the dignity and protect the welfare of participants in research.

9.1 Researchers are guided by laws, regulations, and professional standards governing the conduct of research. When institutional review and approval is required for the conduct of research with human subjects, art therapists provide accurate information about their proposed research, obtain approval from the relevant institutional review board (or equivalent) prior to initiating research activities, and adhere to the institutionally-approved protocol at every stage of the research.

9.2 To the extent that research participants may be compromised by participation in research, art therapist researchers seek the ethical advice of qualified professionals not directly involved in their investigations and observe safeguards to protect the rights of research participants.

9.3 Researchers requesting participants’ involvement in research inform them of all aspects of the research that might reasonably be expected to influence willingness to participate. Researchers take all reasonable steps necessary to ensure that full and informed consent has been obtained from all participants. Particular attention is paid to the informed consent process with research participants who are also receiving clinical services, have limited understanding and/or communication, or are minors.

9.4 Researchers respect participants’ freedom to decline participation in, or to withdraw from, a research study at any time with no negative consequences to their treatment.

9.5 Information obtained about research participants during the course of an investigation is confidential unless there is authorization previously obtained in writing. When there is a risk that others, including family members, may obtain access to such information, this risk, together with the plan for protecting confidentiality, is explained as part of the procedure for obtaining informed consent.
9.6 Artwork created by research participants as a part of a research study belongs to the research participants, unless otherwise specified through the research study informed consent document.

9.7 Art therapy researchers fulfill federal, state and institutional laws and regulations that pertain to the duration and location of retaining raw data. Original artwork and/or digital photographs of participant artwork are de-identified and securely stored. Audio or video recordings are stored according to compliant procedures in a password-protected electronic folder. Any artwork and/or photographs of artwork may be saved indefinitely for potential use in future research, presentations, publications and related educational forums, as specified in the informed consent document.

10. RESPONSIBILITY TO THE PROFESSION

Art therapists respect the rights and responsibilities of professional colleagues and participate in activities that advance the goals of art therapy.

10.1 Art therapists adhere to the ethical principles of the profession when acting as members or employees of organizations.

10.2 Art therapists attribute publication credit to those who have contributed to a publication in proportion to their contributions and in accordance with customary professional publication practices.

10.3 Art therapists who author books or other materials that are published or distributed appropriately cite persons to whom credit for original ideas is due.

10.4 Art therapists who author books or other materials published or distributed by an organization take reasonable precautions to ensure that the organization promotes and advertises the materials accurately and factually.

10.5 Art therapists value participation in activities that contribute to a better community and society.

10.6 Art therapists recognize the importance of developing laws and regulations pertaining to the field of art therapy that serve the public interest, and with changing such laws and regulations that are not in the public interest.
10.7 Art therapists cooperate with the Ethics Committee of the American Art Therapy Association, Inc., and truthfully represent and disclose facts to the Ethics Committee when requested.

10.8 Art therapists take reasonable steps to prevent distortion, misuse, or suppression of art therapy findings by any institution or agency of which they are employees.

11.0 FINANCIAL ARRANGEMENTS

Art therapists make financial arrangement with clients, third party payers, and supervisees that are understandable and conform to accepted professional practices.

11.1 When art therapists work in conjunction with other professionals (other than in an employer/employee relationship), the payment to each is based on the services provided and not based on who generated the referral.

11.2 Art therapists do not financially exploit their clients.

11.3 Art therapists disclose their fees at the beginning of therapy and give reasonable notice of any change in fees.

11.4 Art therapists represent facts truthfully to clients, third-party payers, and supervisees regarding services rendered and the charges for services.

11.5 Art therapists may barter only if it is (a) not clinically contraindicated, (b) not exploitative to the client, and (c) an acceptable community standard or practice where the client and art therapist reside. Bartering is an agreement entered by the client and the art therapist to exchange art therapy services for a type of non-monetary remuneration by the client, such as goods or services.

11.6 Art therapists aspire to offer equal access to art therapy services to those clients who are unable to pay full fee, and where possible, offer a sliding fee scale to accommodate such need.

12.0 ADVERTISING

Art therapists engage in appropriate publicity regarding professional activities in order to enable clients to choose professional services on an informed basis.
12.1 Art therapists accurately represent their professional competence, education, training, and experience.

12.2 Art therapists do not use a name that is likely to mislead the public concerning the identity, responsibility, source, and status of those with whom they are practicing, and do represent themselves as being partners or associates of a firm if they are not.

12.3 Art therapists do not use any professional identification that includes a statement or claim that is false, fraudulent, misleading, or deceptive. Art therapists accurately represent their education and credential qualifications. Art therapists avoid titles or abbreviations, which may be misleading or imply a credential that they have not obtained.

12.4 Art therapists correct, whenever reasonable, false, misleading, or inaccurate information and representations made by others concerning the therapists’ qualifications, services, or products.

12.5 Art therapists make certain that the qualifications of persons whom they employ are represented in a manner that is not false, misleading, or deceptive.

12.6 Art therapists may represent themselves as specializing within a limited area of art therapy only if they have the appropriate education, training, and experience to practice in that specialty area.

12.7 Members in good standing of the American Art Therapy Association may identify such membership in public information or advertising materials as long as they clearly and accurately represent the membership category to which they belong.

12.8 Art therapists use the ATR® and/or ATR-BC® designation only when they have been officially notified in writing by the Art Therapy Credentials Board, Inc., that they have successfully completed all applicable registration and certification procedures.

12.9 Art therapists refrain from using the “AATA” initials following their name as if it were an academic degree or the “AATA” initials or logo for any purpose without receiving written permission from the Association.

12.10 Art therapists using photos or videos of clients, their artwork and/or endorsements for any advertising purposes obtain explicit consent from clients for doing so. Such consent includes whether and how the client wants to be identified.

13.0 INDEPENDENT PRACTITIONER
An independent art therapy practitioner is someone who is responsible for the delivery of services to clients when clients pay the art therapist directly or through third-party payment sources for art therapy services rendered. Independent practitioners of art therapy must conform to state laws and regulations that pertain to the provision of independent mental health practice and to applicable art therapy credentialing and certification requirements. Independent practitioners of art therapy confine their practice within the limits of their training. Art therapists who are independent practitioners neither claim nor imply professional qualifications exceeding those actually earned and received. They are responsible for correcting any misrepresentation of these qualifications.

14.0 INITIAL AND ENDING PHASES IN ART THERAPY

Art therapists take care to orient clients to the nature of art therapy services and respectfully end art therapy services when appropriate.

14.1 Art therapists, upon acceptance of clients, provide informed consent that includes, but is not limited to: client rights, confidentiality and its restrictions, duty to report, roles of both client and art therapist, expectations and limitations of the art therapy process, fee structure, payment schedule, session scheduling arrangements, emergency procedures, complaint and grievance procedures and how client artwork will be documented and stored.

14.2 During the initial phase, art therapists and clients design treatment plans, goals, and objectives to assist the clients in attaining maintenance of maximum level of functioning and quality of life.

14.3 Either the art therapist or the client may initiate termination. Art therapists and clients terminate art therapy services by attending to appropriate termination indications when it becomes reasonably clear that the client has attained stated goals and objectives, is not likely to continue services, is not likely to benefit, or is being harmed by continuing the service.

14.4 Art therapists communicate the termination of art therapy services to clients by engaging and involving the clients appropriately in the termination process.

14.5 Art therapists ensure, to the extent that it is possible, a termination process of sufficient duration so as to promote a smooth transition for the clients to another mental health practitioner or to independent functioning.

14.6 Art therapists remain especially attentive to clients' behaviors when any danger of client regression or negative reaction to termination exists. Art therapists work to avert or assist in the management of such negative outcomes, to the extent possible, by use of appropriate therapeutic interventions and by taking steps to ensure continuity of care when appropriate.
15.0 PROFESSIONAL USE OF THE INTERNET, SOCIAL NETWORKING SITES AND OTHER ELECTRONIC OR DIGITAL TECHNOLOGY

Electronic technology includes, but is not limited to, computer hardware and software, fax machines, telephones, videos, and audio and video recording devices. It is possible that those for whom the communication is not intended can access communications through some of these devices. Therefore art therapists take steps to ensure the confidentiality of communication, including therapy or supervision sessions conducted at a distance.

15.1 Art therapists understand that personal and professional information on social networking sites, discussion groups, blogs, websites, and other electronic media may be readily available to the public. As such, it is advisable for art therapists to take precautions to protect information they do not want to be available to clients.

15.2 Before undertaking technology-assisted professional activities, art therapists make certain that the particular use of technology for treatment, consultation, or supervision is congruent with any relevant laws. Art therapists seek technical assistance when needed so that they are sufficiently knowledgeable and proficient in available technology to best meet their professional needs and the needs of their clients, supervisees, or students.

15.3 Art therapists should discuss with clients who are interested in digital electronic-assisted art therapy the benefits and limitations of such services, and also determine that the particular clients possess the necessary cognitive abilities to make the best use of this form of treatment.

15.4 Art therapists provide for communication that is accessible to persons with disabilities. In cases in which electronic communication is the most accessible, art therapists take steps to incorporate this type of communication and to use it in a manner that is as secure and confidential as possible.

15.5 Art therapists inform clients and supervisees of the limitations of confidentiality specific to electronic communication as well as other limits of confidentiality pertaining to the use of technology in art therapy services and supervision. Art therapists discuss the limitations of encryption, the permanent nature of posted messages on the Internet, and the public access to information or artwork that is posted digitally on electronic media sites and interfaces.

15.6 If encryption is not possible, art therapists notify clients of this fact and limit messages to general communications.
16.0 CONDUCTING ART THERAPY BY ELECTRONIC MEANS

Art therapy by electronic means is a continuously evolving application of art therapy. As such, it presents opportunities for service, as well as ethical dilemmas. Art therapists consider the ethical ramifications of providing art therapy services via the Internet, telephone, or other electronic means.

16.1 Art therapists who offer services or information via electronic transmission inform clients of the risks to privacy and the limits of confidentiality. Art therapists discuss the merits and detriments of recording or documenting the sessions.

16.2 Art therapists obtain informed consent from clients or legal guardians (if applicable) that describes the type of technology to be used when providing art therapy services by electronic means.

16.3 Art therapists take reasonable steps to ensure that any art therapy services provided through electronic means are in accordance with applicable laws, regulations, and the licensing requirements of the states in which they and their clients reside.

16.4 When providing art therapy services by electronic means, art therapists take reasonable precautions to determine the true identity of the clients.

17.0 ABIDING BY THE ETHICAL PRINCIPLES FOR ART THERAPISTS

By accepting membership in the American Art Therapy Association, Inc. (AATA), art therapists agree to abide by the Association’s Ethical Principles for Art Therapists. It is the responsibility of each member to act in accordance with these principles and to comply with all applicable laws, regulations, and licensing requirements that govern the practice of therapy in each member’s state. These principles are written to provide a basis for education and a foundation for ethical practice.

17.1 The American Art Therapy Association Bylaws, Article XI, Section 11.2, authorizes the Ethics Committee to be a standing committee of the Association. The committee educates the membership and the general public as to the Ethical Principles for Art Therapists and has the responsibility to recommend, make changes to, and implement these principles as adopted by the Board of Directors of the Association and as they may be amended from time to time.

17.2 Art therapists who have had their professional credentials revoked by the Art Therapy Credentials Board as a result of an ethics violation shall have their American Art Therapy Association membership terminated.
18.0 INQUIRIES AND COMPLAINTS

Conflicts and disagreements are inherent in human interactions. Situations may occur in which one or more individuals believe that one or more members of the Association may have violated the *Ethical Principles for Art Therapists*. The Ethics Committee can address any inquiries that fall within its scope of responsibility as stated in the Bylaws of the Association. Complaints of unethical conduct are beyond the scope of the Ethics Committee and will be addressed to the relevant credentialing or licensure bodies, which govern the art therapist in question. Inquiries to the Ethics Committee can be submitted to the Ethics Committee Chairperson by emailing: ethicschair@arttherapy.org