



STATE OF CONNECTICUT

BOARD OF TRUSTEES

FOR THE STATE COLLEGES

P. O. Box 2008

NEW BRITAIN, CONNECTICUT 06050

TEL. NEW BRITAIN: 203-229-1607

TEL. HARTFORD: 203-566-7373

RESOLUTION

concerning

CLINICAL FEE SCHEDULE

for

FAMILY COUNSELING CLINIC

at

SOUTHERN CONNECTICUT STATE COLLEGE

August 2, 1979

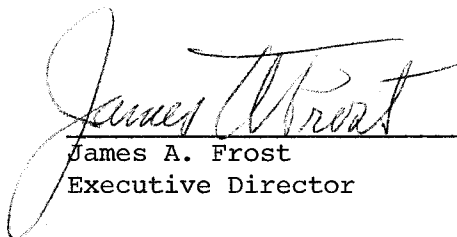
WHEREAS, The Family Counseling Clinic has been established at Southern Connecticut State College to provide faculty-supervised practicum experiences for Master's degree and Sixth-Year Certificate candidates, and

WHEREAS, The Clinic will extend its services to members of the public, now, therefore, be it

RESOLVED, That, pursuant to authority granted in Section 10-116 of the Connecticut General Statutes, and subject to the approval of the Board of Higher Education, the fee schedule attached to this resolution is adopted for services provided by the Family Counseling Clinic, and further be it

RESOLVED, That all income from fees received by the Clinic shall be deposited in College accounts and used for support of the Clinic or other College purposes.

A Certified True Copy:


James A. Frost
Executive Director

FAMILY COUNSELING CLINIC
FEE SCHEDULE

Intake/diagnostic	\$15.00
Couple, individual or family - treatment per session	20.00
Group treatment	5.00

Fees shall be charged on the basis of ability to pay. Such ability shall be determined from the following table:

Annual Adjusted Gross Income

<u>No. of Exemptions</u>	<u>Category I</u>	<u>Category II</u>	<u>Category III</u>
1	Under \$ 6,000	\$ 6,000 - 7,199	\$ 7,200 or over
2	" 7,200	7,200 - 8,229	8,300 " "
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7	" 11,700	11,700 - 12,299	12,300 " "
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9	" 12,900	12,900 - 13,499	13,500 " "
10	" 13,500	13,500 - 14,099	14,100 " "

Clients in Category I shall pay 10% of the schedule fees.

Clients in Category II shall pay 50% of the schedule fees.

Clients in Category III shall pay the full amount listed in the schedule of fees.

Persons desiring a reduction of fees shall file the following statement:

This statement is made in support of a request for a reduction in fees charged by the Family Counseling Clinic at Southern Connecticut State College for services provided to

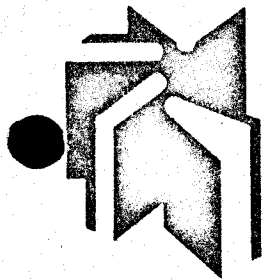
_____.

The number of exemptions in my family as reported on the last Federal income tax report or reports filed by me and/or my parents or guardians were _____.

The total adjusted gross income before deductions as reported on the last Federal income tax report filed by me and/or my parents or guardians was _____.

Signed: _____

Notarized:



**THE
CONNECTICUT
STATE
COLLEGES**

FOUNDED 1849

Office of the
Executive Director

P.O. BOX 2008 NEW BRITAIN, CONNECTICUT 06050

Telephone : (203) 827-7700

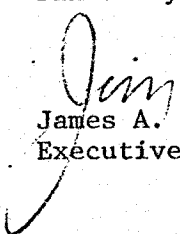
October 3, 1979

Dr. Manson Van B. Jennings
President
Southern Connecticut State College
501 Crescent Street
New Haven, CT 06515

Dear Dr. Jennings:

Enclosed is a copy of BHE Resolution #79-F28-S, dated
September 25, 1979, approving the establishment of a fee schedule
for the Southern Connecticut State College Family Counseling
Clinic.

Sincerely,


James A. Frost
Executive Director

cc: Dr. Porter
Mr. Rossomando
Mr. Scheuerman



STATE OF CONNECTICUT

BOARD OF HIGHER EDUCATION

P.O. Box 1320

HARTFORD, CONNECTICUT 06101

AREA CODE 203 566-3912

RECEIVED

OCT 1 1979

BOARD OF TRUSTEES
FOR THE STATE COLLEGES

September 27, 1979

Dr. James A. Frost, Executive Director
Board of Trustees for the State Colleges
P. O. Box 2008
New Britain, Connecticut 06050

Dear Dr. Frost:

At the Board of Higher Education meeting on Tuesday, September 25,
a quorum being present and voting, the following resolution was
approved:

79-F28-S Establishment of a fee schedule for the
Southern Connecticut State College Family
Counseling Clinic

I hereby certify that the enclosed is a true copy of the resolution.

Sincerely,

A handwritten signature in cursive script that reads "Michael D. Usdan".

Michael D. Usdan
Commissioner

MDU/fr
enclosure

RESOLVED that the Board of Higher Education, subject to its responsibilities contained in Section 10-116 (a) of the Connecticut General Statutes, Revision of 1958, approve the request of the Board of Trustees for State Colleges for the establishment of a fee schedule for the Southern Connecticut State College Family Counseling Clinic as follows:

Intake/diagnostic	\$15.00
Couple, individual or family - treatment per session	20.00
Group treatment	5.00

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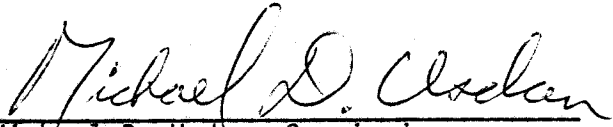
Annual Adjusted Gross Income

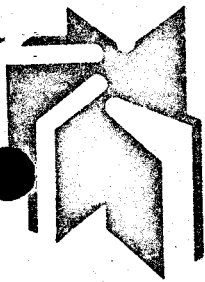
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 Michael D. Usdan, Commissioner
 Board of Higher Education



THE
CONNECTICUT
STATE
COLLEGES

FOUNDED 1849

file

Office of the
Executive Director

P.O. BOX 2008 NEW BRITAIN, CONNECTICUT 06050

Telephone : (203) 827-7700

August 13, 1979

Dr. Michael D. Usdan, Commissioner
Board of Higher Education
P. O. Box 1320
Hartford, CT 06101

Dear Mike:

I request Board of Higher Education approval of the attached clinical fee schedule for the Family Counseling Clinic at Southern. This fee schedule was approved by the Board of Trustees for State Colleges on August 2, 1979, subject to approval by the BHE. Also attached is a resolution formally establishing the Family Counseling Clinic.

Clinical activities in family counseling have evolved at Southern over a period of time. The faculty has concluded that it is essential to have an on-campus clinic because off-campus practicum opportunities generally do not provide the kind of supervision for students which the faculty judge to be essential. Another factor is the greater efficiency in the utilization of faculty supervisors' time which an on-campus facility will provide.

The Board of Higher Education approved a similar fee schedule for the Center for Communications Disorders at Southern on January 24, 1978. It was helpful to us to compare the handling of that fee schedule as we considered this one, and you may find it helpful also.

Please don't hesitate to call me or Tom Porter if you have any questions on this request. Thanks for your help.

Sincerely,

James A. Frost
Executive Director

jf
Enc.

cc: Dr. Porter

bc: President Jennings
Vice President Nowlan
Dean Orlando



STATE OF CONNECTICUT
BOARD OF TRUSTEES
FOR THE STATE COLLEGES

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RESOLUTION

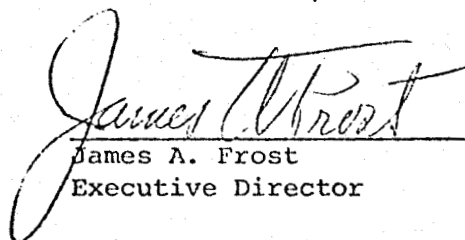
concerning

CLINICAL FEE SCHEDULE
for
FAMILY COUNSELING CLINIC
at
SOUTHERN CONNECTICUT STATE COLLEGE

August 2, 1979

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- WHEREAS, The Clinic will extend its services to members of the public, now, therefore, be it
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A Certified True Copy:


James A. Frost
Executive Director

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_____.

The number of exemptions in my family as reported on the last Federal income tax report or reports filed by me and/or my parents or guardians were _____.

The total adjusted gross income before deductions as reported on the last Federal income tax report filed by me and/or my parents or guardians was _____.

Signed: _____

Notarized:



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BOARD OF TRUSTEES FOR THE STATE COLLEGES

P. O. BOX 2008 NEW BRITAIN, CONNECTICUT 06050
TEL. NEW BRITAIN: 203-229-1607 TEL. HARTFORD: 203-566-7373

RESOLUTION

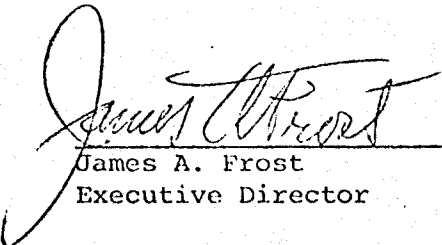
concerning

ESTABLISHMENT OF FAMILY COUNSELING CLINIC at SOUTHERN CONNECTICUT STATE COLLEGE

August 2, 1979

- WHEREAS, The Department of Counseling and School Psychology at Southern Connecticut State College has since its inception been involved in the training of professionals in a variety of clinical areas, and
- WHEREAS, The Marriage and Family Counseling subdivision of this Department's Master's and Sixth-Year programs has grown to approximately 125 students, and
- WHEREAS, Clinical practicum experiences are required features of the curriculum of these programs, and
- WHEREAS, Clinical practicum experiences for these students in off-campus agencies which provide adequate professional supervision are inadequate in number and difficult for College supervisors to visit within the time available, now, therefore, be it
- RESOLVED, That, pursuant to authority granted in Sections 10-109b, 10-325c, and 10-116 of the Connecticut General Statutes, a Family Counseling Clinic staffed by faculty of the Department of Counseling and School Psychology is established at Southern Connecticut State College to extend counseling services to members of the public while simultaneously providing faculty-supervised practicum experiences for Master's degree and Sixth-Year Certificate candidates in Counseling.

A Certified True Copy:


James A. Frost
Executive Director

Planning Pending 79-45 (1)



STATE OF CONNECTICUT

SOUTHERN CONNECTICUT STATE COLLEGE
501 CRESCENT STREET NEW HAVEN, CONNECTICUT



FEB 1 1979

January 26, 1979
BOARD OF TRUSTEES
FOR THE STATE COLLEGES

TEL. (203) 397-4236

Copy given FR & cc TAP

Dr. James Frost, Executive Director
Board of Trustees for the State Colleges
P.O. Box 2008
New Britain, Connecticut 06050

Dear Jim:

Enclosed is a proposal for a fee schedule for our Family Counseling Clinic. It is modeled after the schedule developed and approved for the clinic sponsored by the Department of Communications Disorders, which provides services related to speech pathology and audiology. You may recall that the latter was formally approved (SCR#77-126) a year ago after we had made an investigation of how UCONN and other universities charged fees for such services.

We would appreciate having this proposal placed on the agenda of the appropriate Board committee.

Sincerely,

Manson Van B. Jennings
President

MVanBJ/ad
Enc.

PROPOSAL FOR A CENTER/CLINIC FOR FAMILY COUNSELING

1. Rationale

The Department of Counseling and School Psychology has, since its inception in 1973 been involved in the training of professionals in a variety of clinical areas and especially most recently in Marriage and Family Counseling.

An integral part of the program includes a minimum of 250 hours in practicum/field work in the student's area of specialization. An additional 600 hours of internship are required for students in a 6th year program. Originally the Department had hoped to provide a setting within the college for a training experience so that students could receive direct supervision while learning the techniques of the profession. At the time, this plan proved unworkable and therefore the Department went outside the campus to agencies so that students could be placed in a setting where they could function as apprentices. This has always been a less than satisfactory arrangement for a number of reasons: there has been no guarantee of the type or quality of supervision received by the student; frequently students have no available space from which to work; theoretical framework is apt to be diametrically opposed to that from which the students have been trained; input from the college supervisor is limited and restricted by the confines of the agency.

As the program in Marriage and Family Counseling has grown both in numbers and reputation, placement of students in outside agencies has become increasingly difficult. Agencies in the greater Connecticut area have become increasingly reluctant to accept Masters students for placement without a minimum of two semesters of prior clinical experience. To provide the kind of training experience recommended by the American Association of Marriage and Family Counselors, it has become apparent that the Department could best do this by providing a college-based setting where students can be involved in family counseling under the supervision of a faculty member.

Further, the Department is in the process of seeking accreditation of the training program by the American Association of Marriage and Family Counselors. The main barrier to realizing this goal is the lack of a campus-based clinical setting for practicum experience.

In maintaining the tradition of Southern Connecticut State College to become involved in community service, the Department through both faculty members and student interns, has given of time and expertise in bringing to the community counseling services and consultation. The Department has been approached specifically by two town planning agencies who have been aware of the quality of service delivered by the department, to provide the specific focus of brief strategic family therapy which has become a specialty of this program. In order to provide these services, the establishment of clinical facilities and a mechanism for the provision of services needs to be established. It would be the aim and purpose of this proposed center to provide services in the area of family counseling for residents who are economically disadvantaged, as well as those who wish to take advantage of these services on a moderate fee schedule.

2. Students in training:

A total of approximately 125 graduate students are in various phases of training. Each student spends a minimum of two semesters of 250 hours in a practicum experience.

The proposed center would function with the student (under supervision of the faculty member(s)) providing the services as follows:

maintaining appointments records)	
clinical record keeping)	30 hours under direction
statistical data keeping)	
intake services	30 hours
co-therapist with individuals and families (group supervision)	30 hours
co-therapist with groups (group supervision)	30 hours
primary therapist with individuals (with direct one on one supervision)	30 hours
primary therapist with individuals with group supervision	30 hours
primary therapist with couples direct one on one supervision	30 hours
outreach, preventative efforts in community (group supervision)	30 hours

3. Referrals

Services would be provided either on a contractual basis entered into with city or town agencies and/or will be accepted on referrals from any qualified source such as a school system, a medical professional, etc.

4. Fee Schedule:

Intake/diagnostic	\$15.00
Couple, individual or family - treatment per session	20.00
Group treatment per session	5.00

Fees shall be charged on the basis of ability to pay. Such ability shall be determined from the following table:

<u>No of Exemptions</u>	<u>Annual Adjusted Gross Income</u>		
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4. Schedule of Fees (Cont'd)

Clients in Category I shall pay 10% of the schedule of fees.

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Persons desiring a reduction of fees shall file the following statement:

This statement is made in support of a request for a reduction in fees charged by the Family Counseling Clinic at Southern Connecticut State College for services provided or to be provided to _____.

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The total adjusted gross income before deductions as reported on the last Federal income tax report or reports filed by me and/or my parents or guardians was _____.

Signed: _____

Notarized:

5. Proposed use of income from fees:

- a. purchase of clinical supplies such as forms, appointment books, video and audio tapes, etc.
- b. purchase of clinical equipment, maintenance and repair of existing equipment
- c. supportive clinical services to improve the operation of the clinic. At the onset of the proposed operation it will be possible to make use of present faculty to supervise student clinical activities; however, as services provided increase, it would be desirable to employ a clinical supervisor whose main duties would involve exclusively clinic direction. Also the use of a stenographer is anticipated as the operation grows and the need arises.

Submitted by

William J. Beucler
William J. Beucler, Chairman
Counseling and School Psychology

Barbara DeFrank
Barbara DeFrank, Ph.D
Counseling and School Psychology

Date: September 19, 1978

Board Pending

July 3, 1979

TO: Vice President Nowlan
Dean Orlando

FROM: Thomas A. Porter

RE: Family Counseling Clinic

Dr. Frost suggested and the Planning Committee approved that the Family Counseling Clinic resolution be divided into two resolutions: one establishing the Clinic and the other establishing the fee schedule.

The revised resolutions are attached for your review. Please note that they refer to the 6th Year Program as well as the Masters. Please confirm that this is accurate.

It is contemplated that these resolutions will be presented to the July Board meeting.

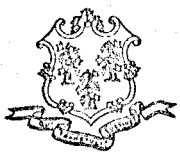
T.A.P.

b
encl.

cc: President Jennings

*Orlando
CS
July 24 12:00
July 24 for good*

Draft



STATE OF CONNECTICUT
BOARD OF TRUSTEES
FOR THE STATE COLLEGES

P. O. Box 2008 NEW BRITAIN, CONNECTICUT 06050
TEL. NEW BRITAIN: 203-229-1607 TEL. HARTFORD: 203-566-7373

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A Certified True Copy:

James A. Frost
Executive Director

Draft



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Signed: _____

Notarized:

Interdepartment Message

SAVE TIME: *Handwritten messages are acceptable.*

Use carbon if you really need a copy. If typewritten, ignore faint lines.

STO-201 REV. 3/77 STATE OF CONNECTICUT
(Stock No. 6938-051-01)

To	NAME Dr. Frost	TITLE	DATE July 2, 1979
	AGENCY	ADDRESS	
From	NAME Dr. Porter <i>RP</i>	TITLE	TELEPHONE
	AGENCY	ADDRESS	

SUBJECT
Family Counseling Clinic Resolutions

I have had the fee schedule resolution re-typed to reflect your proposed change and in addition, added a reference to Section 10-116 which states that the BOT "...shall fix fees for such other purposes as the board deems necessary..."

I have incorporated in the resolution establishing the clinic references to Section 10-109b, which states that the BOT "...shall administer the colleges...", Section 10-325c which states that the BOT may establish career programs at the bachelors, masters, and sixth-year level, and Section 10-116, cited above.

No statutes were cited in the Communications Disorder resolution, which is attached for your reference.

b
att.

Dr. Porter: looks fine!
JAT
3 July 79



STATE OF CONNECTICUT

BOARD OF TRUSTEES FOR THE STATE COLLEGES

P. O. Box 2008

NEW BRITAIN, CONNECTICUT 06050

TEL. NEW BRITAIN: 203-229-1607

TEL. HARTFORD: 203-566-7373

*Pursuant to authority granted in
Section 10-116 of the Connecticut
General Statutes, and*

RESOLUTION

concerning

CLINICAL FEE SCHEDULE

For

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At

SOUTHERN CONNECTICUT STATE COLLEGE

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Executive Director