

COMMITTEE ON ACCREDITATION

POLICY STATEMENTS
IMPLEMENTING REGULATIONS

January 2001

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Introduction

Throughout its history, accreditation has served as the nongovernmental process of educational quality assessment and enhancement, through educational institutions and programs, governed by the principle of voluntary commitment to self-evaluation and peer review, in a manner that engenders confidence and trust among the publics it serves. It fulfills that purpose by:

- *Requiring clear statements of objectives and thorough and candid self-evaluation reports of institutions and programs;*
- *Providing due process in program reviews and appeals, wide dissemination of information concerning the purposes, practices and decisions of accreditation, competent personnel on accrediting bodies and site visit teams, and public representatives on accrediting bodies;*
- *Making the accreditation process as open as possible consistent with accomplishing the purposes of accreditation; and*
- *Establishing conditions of functional independence in which accrediting (bodies) may perform their duties.*

The process of accrediting programs in psychology has been in place since 1947, the early history of which is reported in the *American Psychologist* issues of June 1947, December 1947, August 1948, August 1949, November 1950, and June 1952. The Committee on Accreditation (CoA), American Psychological Association is recognized as the national accrediting authority for professional education and training in psychology by the U.S. Secretary of Education as well as by nongovernmental recognition bodies. Accordingly, the CoA's accreditation policies, procedures, and guidelines are intended to be consistent with nationally recognized purposes and values of accreditation, as articulated by governmental and nongovernmental groups with an interest in accreditation.

Section II.D of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology* (G&P) states that "the CoA, in representing a broad array of constituencies, has the authority to adopt implementing regulations which elucidate, interpret, and operationally define its guidelines and principles, procedures, domains, and standards." To that end, this document contains statements and policies that (1) set forth the CoA's philosophy and (2) amplify language in the G&P and the *Accreditation Operating Procedures*. It is designed as a companion piece to the G&P/Operating Procedures and provides references as appropriate to sections of those documents. This document also contains the basic policies governing the CoA's accrediting activities, as adopted by the APA Council of Representatives and the Board of Directors.

Section A

APA Policies Governing Accreditation

A-1. Policies for Accreditation Governance

Adopted by the APA Council of Representatives on 18 August 1991
Amended by the Council of Representatives 18 February 1996

Section 1: Name and Reporting Line of the Accrediting Body

The governance body responsible for the accreditation of doctoral and internship training programs in professional psychology shall be called the "Committee on Accreditation." In a manner consistent with the Bylaws of the American Psychological Association, it shall be appointed by and report to the Board of Educational Affairs.

Section 2: Functions of the Committee on Accreditation

The Committee on Accreditation shall be responsible for the accreditation of education and training programs in professional psychology consistent with its recognized scope of accreditation practice, and its published policies, procedures, and criteria.* In carrying out that responsibility, consistent with recognition provisions of the Commission on Recognition of Postsecondary Accreditation (CORPA), the Committee on Accreditation shall:

- a. be responsible for formulating and promulgating its accreditation policies, procedures and criteria;
- b. be solely responsible for final accreditation decisions on education and training programs of professional psychology;
- c. undertake timely and appropriate self-study analysis of its own objectives, criteria, policies, procedures, and practices;
- d. provide appropriate consultative guidance and general information about the accreditation process and its purposes;
- e. establish guidelines for the selection, training, and evaluation of accreditation site visitors;
- f. conduct evaluative and developmental research appropriate to accreditation;
- g. have authority to appoint consultants, program review panels, and task forces in the discharge of its duties, within authorized policy and budget; and,
- h. discharge such other responsibilities as necessary to comply with the Commission on Recognition of Postsecondary Accreditation "Recognition Provisions" and policies.

* In practice, the scope of accreditation to date has been limited to doctoral-level education and training in professional psychology, in the areas of clinical, counseling, and school psychology (and appropriate combinations thereof). In principle, however, it is not limited to these areas.

Section 3: Structure of the Committee on Accreditation

Inasmuch as postsecondary accreditation pertains to educational institutions and programs, it is essential that graduate educators have a major voice in formulating policies and implementing the process of accreditation for professional education and training. At the same time, there must be appropriate balance of representation from practitioners of the profession, as well as representation of the general public's interest by persons outside the professional discipline who have an informed, broad-gauged community perspective about matters of higher education. These are fundamental principles pertaining to the composition of accrediting bodies in the professions, and it is upon these that the structure of the Committee on Accreditation is based. One additional principle is that appointments to the Committee shall reflect the individual and cultural diversity within our society among psychologists, and the breadth of psychology as a discipline.

There shall be no fewer than 21 persons appointed to the Committee on Accreditation. To achieve appropriate balance between academic institutions and programs, practitioners of the profession, and the publics served by accreditation, appointments to the Committee on Accreditation shall represent in addition the following domains of perspective and responsibility with regard to professional education and training in psychology, each of which is essential to the balance of viewpoints expected in accrediting bodies and their activities:

- | | |
|------------|--|
| Domain I | academic leadership for graduate education in the discipline of psychology at the departmental level of administration or higher; |
| Domain II | professional education and training program leadership in academic and service settings appropriate to the scope of accreditation in psychology; |
| Domain III | practitioners of the profession representing independent and institutional practice, apart from those involved in the leadership of training programs; |
| Domain IV | the general public, as represented by persons with breadth of community perspective who are not psychologists, and |
| Domain V | consumers of education and training, to be represented by a graduate student of psychology. |

Section 4: Sources and Numbers of Nominations for Appointment

The national organizations of psychologist educators and practitioners listed below shall be formally allocated "seats" (appointed positions) on the Committee on Accreditation, appropriate and proportional to the domains of perspective and responsibility that they represent for professional education and training in psychology. For each vacant seat to be filled, following guidelines set forth in Section 5 of this document, the Board of Educational Affairs will solicit a nomination slate of three candidates from the organizations named below (or will solicit nominations at large, when specified), from which it will make appointments to the Committee:

Domain I: Graduate Departments of Psychology (4 seats)

- slates for all seats shall be solicited from the Council of Graduate Departments of Psychology (COGDOP)

Domain II: Professional Schools and Training Programs (10 seats)

- slates for 2 seats shall be solicited from the Council of University Directors of Clinical Psychology (CUDCP)
- slates for 2 seats shall be solicited from the Council of Counseling Psychology Training Programs (CCPTP)
- slates for 2 seats shall be solicited from Council of Directors of School Psychology Programs (CDSPP)
- slates for 2 seats shall be solicited from the National Council of Schools of Professional Psychology (NCSPP)
- slates for 2 seats shall be solicited from the Association of Psychology Postdoctoral and Internship Centers (APPIC)

Domain III: Professional Practice (4 seats)

- slates for all seats shall be solicited from the governance (Board of Professional Affairs/Committee for the Advancement of Professional Practice) of the APA Practice Directorate.

Domain IV: The General Public (2 seats)

- nominations for both seats shall be solicited at large by the Board of Educational Affairs from a broad range of education and public interest groups to represent the general public; these seats are to be filled by **persons other than psychologists or psychology students**, persons of broad community experience and perspective outside the discipline of psychology

Domain V: Consumers of Education and Training (1 seat)

- a slate for the seat shall be solicited from the American Psychological Association Graduate Students (APAGS) to reflect graduate students as the consumer public of education and training in professional psychology

Section 5: Guidelines for the Nomination and Appointment Process

a. Nominations shall be solicited by the Board of Educational Affairs from the appropriate organizations annually for all vacancies to be filled, as specified in Section 4 of this document, in accordance with procedures and timelines for APA governance nominations.

b. Three names shall be submitted for each vacancy, with supporting information pertaining to each candidate. Should a call for nominations result in no response, following due notice the Board of Educational Affairs shall appoint an individual or individuals of its own choosing appropriate to the domain at issue.

c. There shall be a three-year term for each member appointed, with eligibility for a maximum of two consecutive terms of service. Terms shall be staggered within each domain such that all seats in that domain shall not be vacant at the same time.**

d. The student member shall be a graduate student in good standing admitted to doctoral candidacy from a program accredited by the APA. Appointment of the student member shall be for a one-year and shall be eligible to be reappointed for two additional years.

e. Appointments shall reflect individual and cultural diversity and the breadth of psychology as a discipline. In this regard, the Board of Educational Affairs shall review the balance of appointments across all domains and report annually to Council on the outcome of such review.

f. Slates submitted by the Council of Graduate Departments of Psychology (Domain I) are expected to represent diversity of university psychology department settings (i.e., types and location of universities, colleges and schools, etc.) and breadth of the scientific discipline of psychology.

g. The allocated seats for professional training programs (Domain II) shall be reviewed by the Board of Educational Affairs on a three-year cycle, in consultation with the Committee on Accreditation, to ensure appropriate representation among types of programs accredited and the scientific basis of assessment and intervention.

h. Of the slates submitted in the area of professional practice (Domain III), two shall represent independent practice and two shall represent institutional practice, apart from professional education and training, with diversity of practice settings, specialty areas of practice, and types of populations served.

Section 6: Policy and Procedural Authority

a. The Council of Representatives, having full power and authority over the affairs and funds of the Association, has overall authority for accreditation policy. The Council exercises this authority directly when broad or major policies are concerned. On other matters, Council delegates authority to the Board of Directors for approval and implementation of practices consistent with Association policy.

b. The Board of Directors, serving as the administrative agent of the Council, exercises approval authority for accreditation policy and procedural changes, except as otherwise described herein. The Board of Directors, through the Chief Executive Officer, shall ensure that accreditation policies and practices do not violate other policies of the Association, do not exceed authorized budget, and do not expose the Association to undue legal risk.

c. The Board of Educational Affairs shall be responsible to Council, through the Board of Directors, for maintaining consultation with and general oversight of the Committee on Accreditation on matters of accreditation policy and procedure. It shall appoint members to the Committee on Accreditation in a manner consistent with the Association Bylaws, as specified in this document, and shall serve as the appointing authority for ad hoc accreditation appeal panels. It shall appoint one of its members annually to serve as a non-voting member on the Committee on Accreditation for purposes of policy consultation between the Board of Educational Affairs and the Committee on Accreditation.

** The student member is an exception to the three-year term as described in Section 5.d.

d. The Committee on Accreditation shall be responsible for formulating, promulgating, and implementing accreditation policies, procedures, and criteria following appropriate public notice, public hearings, and approval. Such public notice shall include the members of the Council of Representatives, the Board of Directors, and the Board of Educational Affairs, as well as those persons and programs potentially affected by any proposed changes in accreditation policies, procedures, or criteria. The Committee on Accreditation shall be solely responsible for making final accreditation decisions on professional education and training programs in psychology. In a manner consistent with policies and recognition provisions of the Commission on Recognition of Postsecondary Accreditation (CORPA), the Committee on Accreditation shall have authority for the administration of accreditation practices within the guidelines of its recognized scope of practice and its published policies, procedures, and criteria for accreditation. On an annual basis, the Committee shall elect its own chair.

**A-2. Summary by the Board of Directors of the American Psychological Association
of Key Provisions of the Policies for Accreditation Governance
Defining APA Governance Interaction with the Committee on Accreditation
Prepared for the Department of Education (as approved June 12, 1999)**

The Board of Directors confirms that the APA Council of Representatives has adopted policies to insulate the work of accreditation from other interests with which APA governance is concerned. Specifically, APA governance interacts with CoA in accordance with the Policies for Accreditation Governance, adopted by the Council of Representatives on August 18, 1991 as amended on February 18, 1996, in the following way:

1. The policies and procedures governing CoA's accrediting activities were developed by CoA and are set forth in the "Guidelines and Principles of Accreditation" and the "Accreditation Operating Procedures." These policies and procedures were approved by the Board of Directors and the Council of Representatives.
2. CoA is responsible for formulating changes in accreditation policy or procedures but may not implement the change without approval by the Board of Directors or, in the case of broad or major change in policy, the Council of Representatives. If the Board (or Council in the case of a broad or major policy change) disapproves the change formulated by CoA, the item returns to CoA for further consideration, and if revised is resubmitted for approval by the Board of Directors and, when appropriate, the Council of Representatives. This process would be followed until resolution is found.
3. The BEA liaison to CoA attends CoA meetings, as a non-voting member of CoA.
4. CoA is solely responsible for making accreditation decisions on professional education and training programs in psychology. Neither the Board of Directors nor Council has a role in those decisions.
5. CoA has an appeals process described in the "Accreditation Operating Procedures" that provides for review of individual CoA program decisions to assure that in reaching an accreditation decision about a particular program the CoA adheres to its published procedures and reaches a decision regarding the program's conformance to the "Guidelines and Principles of Accreditation" that is consistent with the information available to it at the time of its decision. BEA appoints independent appeal panels of qualified individuals who hear these appeals. Neither the Board of Directors nor Council has a role in those decisions.

A-3. Operational Support of Accreditation

(Excerpted from *APA Association Rules*, Section 210-2.1, May 1997)

A direct service program provides to individuals or organizations a product, benefit, or service for a fee. Each direct service program (e.g., Convention, Sponsor Approval, Continuing Education, Accreditation, and Communications) shall have their specific financial goals set annually by the chief executive officer during the budget process but shall be expected to at least produce an excess over expenses.

Section B

Committee on Accreditation Policy Statements:

Philosophy, Values, and Responsibilities

B-1. The Purpose and Practice of Accreditation

(Guidelines and Principles for Accreditation of Programs in Professional Psychology, Section II.A)

Accreditation is a voluntary, non-governmental process of self-study and external review intended to evaluate, enhance, and publicly recognize quality in institutions and in programs of higher education. As such, it serves:

1. General, liberal education;
2. Technical, vocational education and training; and
3. Education and training for the professions.

Accreditation is intended to protect the interests of students, benefit the public, and improve the quality of teaching, learning, research, and professional practice. Through its domains and standards, the accrediting body is expected to encourage institutional freedom, ongoing improvement of educational institutions and training programs, sound educational experimentation, and constructive innovation.

The accreditation process involves judging the degree to which a program has achieved the goals and objectives of its stated training model. That is, an accreditation body should not explicitly prescribe a program's educational goals or the processes by which they should be reached; rather, it should judge the degree to which a program achieves outcomes and goals that are consistent with its stated training model and with the guiding principles contained in this document. If a program's goals and model of training are clearly and accurately described, the different "publics" served by this program should be able to make intelligent and informed decisions about the quality of the program and the students it trains.

Thus, accreditation in psychology is intended to: "achieve general agreement on the goals of training...encourage experimentation on methods of achieving those goals and...suggest ways of establishing high standards in a setting of flexibility and reasonable freedom¹."

¹ The APA Committee on Training in Clinical Psychology (1947). First report of the new accreditation process in psychology. *American Psychologist*, 2, 539-558.

B-2. Scope of Accreditation

(Guidelines and Principles for Accreditation of Programs in Professional Psychology, Section I)

The Committee on Accreditation (CoA) will include in its scope of accreditation: 1) the doctoral graduate training program which, through didactic and experiential training in the science and practice of psychology, affords the student the opportunity to learn the basic competencies necessary to provide psychological services; 2) the internship which, building on professional skills and competencies acquired during doctoral training, provides significant opportunities to take substantial responsibility for carrying out major professional functions, tasks, duties, and roles under appropriate supervision, and 3) postdoctoral residencies in professional psychology which, building on professional skills and competencies acquired during doctoral training and internship, provide education and training in preparation for the practice of professional psychology at an advanced level of competency in a substantive practice area, as defined below.

The accreditation process is intended to promote consistent quality and excellence in education and training in professional psychology and, thus, to provide tangible benefits for prospective students, the local, national, and international publics that are consumers of psychological services, and the discipline of psychology itself.

In applying for accreditation, the program identifies the substantive area(s) of professional psychology in which it will prepare students and the educational model it will employ. The CoA will consider applications from **doctoral graduate** and **internship** programs in (a) the traditional substantive professional areas of clinical, counseling, and school psychology; (b) programs that combine more than one of these areas; c) programs in emerging substantive areas of professional psychology; and, from **postdoctoral residency** programs providing education and training in preparation for entering professional practice at an advanced level of competency in one of the substantive traditional practice areas of clinical, counseling and school psychology or in a substantive specialty practice area.

B-3. Rights and Responsibilities of the Committee on Accreditation and Its Accredited Programs

(Excerpted from the *Accreditation Operating Procedures*, Section 4.1, and other sources)

As a self-regulatory process, accreditation includes certain rights and responsibilities for institutions, programs and accrediting bodies. The Committee on Accreditation (CoA) as well as the programs it accredits, in cooperation with each other, have the responsibility to:

1. Involve broad participation of affected constituencies in the development and acceptance of standards and policies.
2. Develop standards and policies which: (a) are consistent with the purposes of accreditation; (b) are sufficiently flexible to allow diversity and effective program development; (c) allow and encourage institutional or programmatic freedom and autonomy; and, (d) allow the institution or program to exercise its rights within a reasonable set of parameters relevant to the quality of education and, in professional fields, to prepare individuals effectively for practice in the profession.
3. Conduct periodic review of the standards.

In all reviews, the Committee on Accreditation will be guided by the following general principles:

- a. Should a member of the CoA be in actual or potential conflict of interest with respect to a program scheduled for review, that member will be recused during discussion and decision making on that program;
- b. A high degree of professional judgment will be exercised by the CoA as to whether the program is fulfilling acceptable, publicly stated objectives, consistent with the "Guidelines and Principles for the Accreditation of Programs in Professional Psychology."

Before making an accreditation decision, the CoA will review the program's most recent self-study report, the most recent site visit report, the program's response to that report, and any other records of relevance that the program has submitted. As required by the U.S. Department of Education, the CoA must provide opportunity for third-party comment concerning a program's qualifications for accreditation. The CoA will provide such public notice at least 6 months in advance of the review. The CoA will accept written comments on initial applicant or accredited programs from third parties, and will forward the comments to the program for comment before proceeding with the review.

B-4. Accredited Program's Relationship with Accrediting Body
(Adapted from *Guidelines and Principles for Accreditation of Programs in Professional Psychology, Domain H*)

An accredited program demonstrates its commitment to the accreditation process by fulfilling the following responsibilities:

1. The program abides by the Committee on Accreditation's published policies and procedures, as they pertain to its recognition as an accredited program.
2. The program informs the Committee on Accreditation in a timely manner of changes in its environment, plans, resources, or operations that could alter the program's quality.
3. The program is in good standing with the Committee on Accreditation in terms of payment of fees associated with the maintenance of its accredited status.

**B-5. Recognition of the Committee on Accreditation's Policies and Practices
By External Groups**
(Committee on Accreditation, October 1998)

Through its guidelines and procedures, the Committee on Accreditation advocates continuous self-study by its accredited programs for the maintenance and enhancement of program quality. In similar fashion, the Committee acknowledges the need to conduct a program of self-study of its own accrediting practices as charged in the "Policies for Accreditation Governance," and to ensure that those practices are consistent with good practice within the accrediting community as well as within higher education. Therefore, the Committee will, as appropriate, seek recognition of its policies and practices by the governmental and nongovernmental groups established to review and recognize the activities of accrediting agencies. Such recognition is consistent with the Committee's belief in the value of self-evaluation and peer review and ultimately benefits the communities served by accreditation in psychology.

Section C

Implementing Regulations Related to the “Guidelines and Principles”

C-1. Systematic Evaluation of Supervision and Consultation in Programs
(Committee on Accreditation, July 1997)

The *Guidelines and Principles* states the need for doctoral, internship, and postdoctoral residency programs to provide exposure to the theory and practices in supervision and consultation. Programs, therefore, need to inform the CoA what training they are providing in consultation and supervision and the methods by which they are providing that training, as well as demonstrating how their actions are consistent with the *Guidelines and Principles*.

C-2. Academic Residency

*(Guidelines and Principles for Accreditation of Programs in Professional Psychology,
Section III.A., Domain A.4)*

The program requires of each student a minimum of 3 full-time academic years of graduate study (or the equivalent thereof) and completion of an internship prior to awarding the doctoral degree. At least 2 of the 3 academic training years (or the equivalent thereof) must be at the institution from which the doctoral degree is granted, and at least 1 year of which must be in full-time residence (or the equivalent thereof) at that same institution.

C-3. Record of Student Complaints in CoA Periodic Review
(Committee on Accreditation, October 1998)

Domain E.1 of the G&P addresses the need for accredited programs to recognize the rights of students/interns/residents to be treated with courtesy and respect, to inform them of the principles outlining ethical conduct of psychologists, and to ensure that they are aware of avenues of recourse should problems with regard to these principles arise. As part of its assessment of the consistency with which programs meet this guideline, the CoA will examine programs' records of student complaints as part of its periodic review of programs. The CoA expects that each program will routinely keep a record of complaints and grievances it has received or are available to it. Information on the record of complaints is requested in the self-study report that the program will submit as part of its periodic review.

C-4. Interns and the Use of the Title “Doctor”
(Committee on Accreditation, date unknown)

The use of the title “doctor” orally and/or in writing in the absence of an earned doctorate is a violation of the “Ethical Principles of Psychologists.” All training directors of accredited doctoral and internship programs should remind their faculties/staffs and their doctoral students/interns of the ethical principle involved in this issue, and that a violation of the same is inconsistent with the APA guidelines.

C-5. Awarding the Doctoral Degree Prior to Completion of the Internship
(Committee on Accreditation, original date unknown; revised January 2001)

All accredited program requirements, including the internship, should be satisfactorily completed prior to awarding the doctoral degree in the student's substantive area of professional psychology. In special instances in which students participate in graduate ceremonies prior to completing the internship, the program should ensure that university certification by transcript, diploma, or other means of the student's having completed the degree requirements for the accredited program in professional psychology does not precede the actual completion of all such program requirements.

It is the responsibility of the graduate program that prepares individuals for entry into a profession to assure their readiness. Successful completion of the internship is the standard which has been adopted for this purpose. Programs in professional psychology that certify the completion of all requirements of that program for the doctoral degree before completion of an internship violates accreditation guidelines. Whether or not a student completes a dissertation prior to an internship is a matter of individual and program discretion.

Internships are designed and funded as training experiences at the predoctoral level. The competency level of the training experience is consistent with that designation, and it would be inappropriate simply to rename the training as postdoctoral. If the trainee is a "respecialization" intern, the fact that the trainee has a doctoral degree in another field of the discipline does not change the predoctoral level of experience required in the trainee's field of professional respecialization.

C-6. Position Titles of Psychology Interns

(Committee on Accreditation, original date unknown; updated 1998)

According to Section B, Domain C.2(g) of the *Guidelines and Principles*, an internship program will have an “identifiable body of interns who have a training status at the site that is officially recognized in the form of a title or designation such as psychology ‘intern’ (consistent with the licensing laws of the jurisdiction in which the internship is located.” The CoA recognizes that this may encompass a number of titles to which interns at training sites are referred. However, consistent with Domain G of the *Guidelines and Principles*, all accredited internship programs should be clear and consistent in their public materials about the training they offer, regardless of their agency’s local terminology in reference to interns/trainees. The internship program’s public materials should make clear that the fact that it is an accredited internship training program.

C-7. Selection of Interns

(Committee on Accreditation, October 1983; updated 1998)

As stated in Internship Domain C.2 of the *Guidelines and Principles*:

The program has an identifiable body of interns who: are either in the process of completing a doctoral degree in professional psychology from a regionally accredited, degree-granting institution in the United States or have completed a doctoral degree in psychology in a field other than professional psychology and are certified by a director of graduate professional psychology training as having participated in an organized program in which the equivalent of pre-internship training has been acquired at a regionally accredited degree-granting institution in the United States. In the case of Canadian programs, the institution is publicly recognized as a member in good standing by the Association of Universities and Colleges of Canada...have completed adequate and appropriate supervised practicum training...have interests, aptitudes, and prior academic and practicum experience that are appropriate for the internship's goals and objectives...

Only those students admitted to an internship training program under the preceding conditions would be properly referred to as "interns." It is entirely possible, however, that an internship agency might afford instructional opportunity for a psychologist or graduate student in developmental psychology, social psychology, neuropsychology, or some other academic/science ~~specialty~~ specialty area of psychology, in the course of which they may be introduced, under proper supervision, to psychological assessment and intervention/techniques. However, such experience would not properly be considered internship training, and certification of having completed an accredited internship would not be appropriate.

In instances in which the program accepts interns from programs other than those in professional psychology, the CoA may raise questions similar to the following of the accredited internship training agency:

- How many of such persons are involved in any way with the accredited internship training program?
- What requirement, if any, do they impose for the time of internship training staff or other resources of the internship training program?
- How are those persons referred to while participating with the program? Is it clear to everyone what their role is, and what their purpose is in association with the program?
- Is there any certification of their participation, and if so, what is its nature?

**C-8. Completion of an Accredited Internship Training Program:
Issue of Half-Time, Two-Year Internship Programs**
(Committee on Accreditation, 1987; updated 1998)

Accredited internship training sites may host interns on a full-time or a half-time basis. In either case, doctoral training programs in psychology need to ensure that the students' overall internship experience is appropriate in terms of breadth, depth and focus. Internship agencies that accept half-time students also need to ensure the same, whether or not the student plans to be at the same agency for both half years. Thus, if a student plans to divide the total internship experience among two or more agencies, it is important that the sponsoring doctoral program, the intern, and the participating internship agencies have a mutual understanding of the students' overall plan. Students engaged in half-time internship training will complete their programs within 24 months.

In an accredited setting that accepts interns for half-time placement, both years should be completed at that setting for the intern to claim completion of an accredited internship. Internship training agencies must also make clear to the public that practicum students and others who use the setting for training are not completing an accredited internship.

C-9. Unfunded Internships

(Committee on Accreditation, October 1981 and March 1992)

The Committee on Accreditation is in full support of internship positions being funded; however, it will consider special program and individual circumstances in which a program can offer quality training despite a lack of funding. In such cases, the “burden of evidence” lies with the program to demonstrate that the lack of funding does not adversely affect morale or quality of training.

The spirit of this policy is clear—the Committee strongly discourages the use of unfunded internship positions. The Committee understands, however, the **rare** or **unusual** circumstance in which the award of an incremental unfunded internship would serve to alleviate unavoidable hardship for the potential unfunded intern candidate (e.g., remaining geographically close to an ailing family member, etc.) Examples of less clearly defensible rationales would be elective geographic preference or the specific theoretical persuasion of a desired internship program or supervisor, etc.

In circumstances in which the case for an unfunded internship would seem to be compelling, the responsibility for retaining and the accountability for articulating the rationale for the placement rests with the doctoral and internship programs, jointly. The APA accreditation staff is always available for consultation, but the decision to accept unfunded interns rests with the program alone. The awarding of such positions should be documented fully in the doctoral and internship program’s annual reports to the Committee, and the program should anticipate that site visitors may make focused inquiry into the case circumstances resulting in the *ad hoc* creation of an unfunded internship position.

Under virtually all “exceptional” circumstances, it would be the Committee’s expectancy that single or individual cases would be the source of such unfunded internships, but events can occur (e.g., closure of a nearby internship) that might constitute the kind of extraordinary circumstance necessitating the creation of more than one unfunded position in a given training year. However, in the view of the Committee, the routine or regular granting of one or more unfunded internship positions would not adhere to the spirit of the present Committee policy.

Programs also are enjoined to avoid the explicit or implicit communication to applicants or potential applicants that unfunded internship placements might be negotiable during recruitment at any point during the recruitment cycle. Again, maneuvers by a program and student to create the appearance of a special need after the recruiting season has ended will not be seen as consonant with the spirit of the policy.

Internship training should be funded so as to (1) lend tangible value to the intern’s service contribution; (2) communicate a valid and dignified standing with professional/trainee community; and (3) provide appropriate and realistic monetary resources to permit interns and their families to subsist during the training year. While recognizing that internship stipends will not rise to the level of salaries for permanent staff psychologists, it should also

be clear that compensation needs to be sufficient so as to avoid imposing an undue hardship upon the intern in terms of basic living needs. Wherever possible, basic support for health/medical insurance should be in place to protect the welfare of interns and their families.

C-10. Affiliated Internship Training Programs
(Committee on Accreditation, March 1998)

An **exclusively affiliated** internship is an accredited internship which only admits interns who are students from a specific accredited doctoral program. A **partially affiliated** internship is an accredited internship in which a portion of the interns admitted are students from a specific accredited doctoral program.

The procedures for evaluating and designating the programs are as follows:

- 1) The internship and the program with which it is affiliated are site visited and accredited separately and in the same manner as other programs and internships. However, as part of their self-study reports, the programs would designate that they are either (a) an affiliated internship or (b) a program that places students at an affiliated internship.
- 2) The internship clearly states its status as exclusively affiliated or partially affiliated in all descriptive material and representations to the public.
- 3) If approved, the affiliated internship will be listed in the *American Psychologist* listing for accredited internships. The listing for the internship agency will state that it is an exclusively affiliated or partially affiliated internship; the name of the accredited doctoral program also will be stated (e.g., X Internship [affiliated with Y University Training Program]).

C-11. Statement on Postdoctoral Residency Accreditation
(Committee on Accreditation, July 1999)

The Committee on Accreditation of the American Psychological Association encourages post-doctoral training programs in advanced professional psychology and in all specialty areas of professional psychology to submit applications for accreditation. Programs could be located within a single administrative entity or may take the form of a consortium and, at the post-doctoral level reflect advanced training which may be either broad and general or focused and in-depth. Under the Guidelines and Principles, programs have the right to be evaluated in light of their own education and training model and consequent goals, objectives, and outcomes. As such, the postdoctoral training program's model can be one cited in the professional literature, one defined through the Council of Specialties, or one defined by the program itself.

C-11(a). Accreditation Process for Postdoctoral Residencies
(Committee on Accreditation, January 2001)

Principles:

1. Postdoctoral residencies may be accredited as programs preparing individuals for practice at an advanced level in substantive traditional practice areas and in substantive specialty practice areas.
2. Accreditable substantive specialty practice areas include only those recognized by broad professional endorsement.
3. Review of postdoctoral residencies can be accomplished through existing CoA personnel and procedures.
4. All Postdoctoral Residency review processes will include a preliminary review according to the *Guidelines and Principles of Accreditation*.
5. Certificates provided to residents at the program completion that provide information about practice areas for which the program prepares residents must reflect the practice areas (traditional or specialty) in which it was reviewed for accreditation.
6. Multiple postdoctoral residencies provided at the same institution may be considered as a single Postdoctoral Residency program if there is some meaningful linkage between the residencies.
7. The cost of the site visit to a Postdoctoral Residency program is linked to the number of visitors to the program.
8. The cost of the application and annual fee for a Postdoctoral Residency program is linked to the base application or annual fee applicable to all programs, adjusted for the number of additional practice areas represented in the residency.

Transitional Processes:

1. These transitional processes are only available to Postdoctoral Residency programs accredited between 1997 and 2000.
2. If the last site visit included a person representative of a substantive specialty practice area, no new site visit is needed. However, if the last site visit did NOT include a specialty practice area person, then a new site visit will be necessary. This determination will be made after CoA review.
3. If, in the self-study, Domains B, C and F refer to specialty practice area information, no re-writing of the self-study is needed. If such a re-write is indicated, the program will be asked to submit information about the specialty practice area in Domains B, C, and F and additional materials as appropriate. These additional materials and revised Domains will be reviewed by the specialty practice representative (generally at least one of the site visitors, if possible) and the CoA.

	Postdoctoral Residency characteristics (TSA=traditional substantive area)	Application/ Annual Fee (n x base)	Site Visitors/Fee (n x fee per site visitor)	<i>Certificate/Claim—examples only— permissible cert/claim yet to be determined</i>
1	“Clinical Psychology”	=1.0	2 general =2.0	“Postdoctoral Residency in Clinical Psychology”
2	“Clinical Psychology with emphasis in Gero”	=1.0	2 general =2.0	“Postdoctoral Residency in Clinical Psychology”
3	“Clinical Psychology with specialty tracks in Neuro and Child” --program has TSA common core/goals	=1.35	1 general 1 Neuro 1 Child =3.0	“Postdoctoral Residency in Clinical Psychology; Neuro specialty area” “Postdoctoral Residency in Clinical Psychology; Child specialty area”
4	“Clinical Psychology with specialty tracks in Neuro, Child, and Health” --program has TSA common core/goals	=1.45	1 general 1 Neuro 1 Child 1 Health =4.0	“Postdoctoral Residency in Clinical Psychology; Neuro area” “Postdoctoral Residency in Clinical Psychology; Child area” “Postdoctoral Residency in Clinical Psychology; Health area”
5	“Neuro Psychology” “Child Psychology” --program has linkages, but not TSA common core/goals	=1.25	1 general 1 Neuro 1 Child =3.0	“Postdoctoral Residency in Neuro” “Postdoctoral Residency in Child”
6	“Neuro Psychology” “Child Psychology” “Health Psychology” --program has linkages, but not TSA common core/goals	=1.35	1 general 1 Neuro 1 Child 1 Health =4.0	“Postdoctoral Residency in Neuro” “Postdoctoral Residency in Child” “Postdoctoral Residency in Health”
7	“Child Psychology with an emphasis in Neuro”	=1.0	1 general 1 Child =2.0	“Postdoctoral Residency in Child”
8	“Neuro Psychology” “Child Psychology” --separate programs--share institution but have no linkages or TSA common core/goals	=1.0 =1.0	1 general 1 Neuro =2.0 1 general 1 Child =2.0	“Postdoctoral Residency in Neuro” “Postdoctoral Residency in Child”

C-12. Program Record-Keeping on Complaints/Grievances
(Committee on Accreditation, July 2000)

In accordance with Domain E (for doctoral, internship, and postdoctoral programs) of the *Guidelines and Principles*, a program is responsible for keeping information and records of all formal complaints and grievances, of which it is aware, filed against the program and/or against individuals associated with the program since its last accreditation site visit. These records will be reviewed by the Committee on Accreditation (CoA) as part of its periodic review of programs.

The CoA expects a program to keep all materials pertaining to each of the complaints/grievances filed against it during the aforementioned time period. In addition to these materials, a program may wish to maintain a separate log of complaints/grievances that does not identify either the complainant or the party against whom the complaint was filed. Entries in the log should include the date the complaint/grievance was filed; the issue(s) addressed; what, if any, action was taken; and the governance level (e.g., department, college, institution) at which the complaint/grievance has been or will be adjudicated. The program also may wish to include a copy of this log as an exhibit in its self-study document and to share this summary with the site visit team. The site visitors, however, reserve the right to view the full record of program materials on any or all of the filed complaints/grievances.

C-13. Statement on Number of Postdoctoral Residents
(Committee on Accreditation, October 2000)

Domain C, Section 4(a) of the Guidelines and Principles for Postdoctoral Residency Programs states that a program will have postdoctoral psychology residents who “are of sufficient number to ensure meaningful peer interaction, support, and socialization.” The Committee on Accreditation recognizes that the nature of the postdoctoral residency leads to a different socialization process and definition of “peers” than would be the case in an internship program. For this reason, the Committee believes that some postdoctoral residency programs may be able to achieve meaningful interaction, support, and socialization without having more than one resident. Regardless of the number of residents in any given program, however, it is incumbent upon each program to demonstrate how it adequately provides this level of interaction and socialization for its resident(s).

**C-14. Accreditation of Programs in Substantive Areas and Specialties:
Implications for Doctoral Programs**
(Committee on Accreditation, October 2000)

Present Status

Under the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, doctoral education in preparation for entry level practice must be broad and general, representing a substantive area of professional psychology. The substantive areas that are recognized under the Guidelines and Principles are clinical, counseling, or school, or a combination of these areas. In addition, the Guidelines and Principles also include a provision that emerging substantive areas also may be recognized for doctoral accreditation.

Domains of knowledge and practice variously described as tracks or areas of specialization, competence, emphasis, or proficiency must be built on substantive areas of professional psychology. The Committee on Accreditation accredits programs that offer “specialty” training only at the postdoctoral level, where such advanced preparation can either be broad, or focused in a specialized area. It is recognized that there are multiple meanings ascribed to the term “specialty” and “specialization” in the professional community, and, in light of this, it is important to note that the Committee on Accreditation does not consider a “specialty” (in many of the ways the term is being used in organized psychology) to be equivalent to a “substantive area” at the doctoral level as outlined by the Guidelines and Principles.

From the perspective of the Committee on Accreditation, emerging substantive areas should be identified, comprehensively recognized, and delineated by the professional psychology community. This recognition and delineation must be reflected in a broad endorsement from the profession; emerging substantive areas would not be determined in the context of an individual program, or through the recognition of an area by a narrow group of professional committees, councils, or other entities.

To date, consensus about such emerging substantive areas at the doctoral level has not been adequately achieved. However, it is recognized that efforts to distinguish various areas of psychology are being undertaken in a number of different venues, and the Committee hopes to assist in moving these processes forward. It is hoped that the necessary delineation will be accomplished soon. In the meantime, doctoral programs that offer elective concentrations or tracks within the traditional substantive areas may wish to self-designate their areas of emphasis (such as clinical with emphases in health and child).

When an emerging substantive area is adequately clarified, it will be considered by the Committee on Accreditation for a comprehensive evaluation within the accreditation domains according to the requirements set forth in the Guidelines and Principles for doctoral programs (specifically Domain B, number 3) as providing substantive training in the depth and breadth of psychology.

Current activities and plans

Following from this statement of the present status of accreditation of training programs in specialties and substantive areas, the Committee recognizes the need to elaborate what is meant for a substantive area to be “comprehensively recognized and delineated.” In this regard, the Committee is actively monitoring (and in some cases participating in) the processes that are currently underway in a variety of venues relevant to the issue of specialties, emerging substantive areas, and their designation. These include:

1. Through the *Council of Specialties*, the formation of aggregate units (“synarchies”) representing different specialties
2. Through the *Board of Educational Affairs in conjunction with the Committee on Accreditation*, the evaluation of the scope and composition of the Committee on Accreditation
3. Through the *Council of Credentialing Organizations in Professional Psychology*, the development of a conceptual framework for specialization in psychology
4. Through the *Commission for Recognition of Specialties and Proficiencies in Professional Psychology*, the receipt and recognition of specialty and proficiency petitions, and the development of conceptual tools to diversify the notion of specialization
5. Through the *Commission on Education and Training Leading to Licensure*, the identification of requisite broad and general training that would lead to entry level practice
6. Through the *Committee on Accreditation* self study process, the assessment of need from the field for new areas of doctoral accreditation
7. Through the *American Board of Professional Psychology*, the certification of individual competence in various domains of specialty practice

It is the goal of the Committee on Accreditation to work with these groups and processes as the issues of substantive areas and specialization in professional psychology are addressed, and to be informed by the broadly-based consensus emerging from these efforts in terms of their implications for education and training and for accreditation of doctoral programs, internships, and postdoctoral residencies in professional psychology. Toward this goal, the Committee on Accreditation is committed to moving forward a collaborative process within and between these efforts to facilitate the resolution of these issues.

Section D

Implementing Regulations Related to the “Accreditation Operating Procedures”

D1. Regulations related to initial application for accreditation

D1-1. Operating Procedures for Programs Submitting an Initial Application for Accreditation*

(Committee on Accreditation, January 1997; revised January 2001)

A doctoral program, predoctoral internship program, or postdoctoral residency program may apply for review of its initial application for accreditation when:

1. The self-study is complete in all respects;
2. It is determined by the CoA that the program meets the requirements of Domain A: Eligibility of the G&P;
3. The program can demonstrate in its application the achievement of the following outcomes:
 - a. in a doctoral program, there are sufficient students at each level of matriculation, including candidacy status, during the year of its initial application;
 - b. in an internship program, there are at least two students enrolled during the year of its initial application;
 - c. in a postdoctoral residency program, there is at least one student enrolled during the year of its initial application;
4. If the program does not yet have graduates, interns or residents who have finished at the time the application is submitted, it is incumbent on the program to demonstrate how there are sufficient outcomes to warrant accreditation.

*This further elaborates the statement under II. Guiding Principles of Accreditation, C. Outcome Oriented Evaluation Focus... “For each domain, programs are expected to document either their potential for success in these domains (in the case of applicant programs) or their record of achievements in these domains (in the case of already accredited programs).”

D2. Regulations related to submission of program self-study

D2-1. Request for Delay in Submission of Self-Study Materials
(CoA Executive Committee, June 1996)

When a program requests a delay of submission of its self-study report of less than 30 days, Program Consultation and Accreditation staff will determine whether such delay will be granted. All other requests will be forwarded to the CoA Executive Committee.

D2-2. Preliminary Review Process

(Committee on Accreditation, March and July 1997; Revised January 2001)

A preliminary review process is undertaken for (a) applicant programs and (b) accredited programs under periodic review. The preliminary review process for applicant programs will be undertaken by assigned reader(s) from among the members of the CoA. The preliminary review process for accredited programs will be undertaken by assigned reader(s) from among the members of the CoA, in instances requiring special consideration or that raise concerns that may affect the ability of the CoA to conduct an effective site visit. In instances that do not require such special consideration, the preliminary review process will be undertaken by staff, who will focus on the extent to which information responsive to the self study instructions is provided.

D3. Regulations related to the site visit and to site visitors

D3-1. Site Visitor Nomination

(Committee on Accreditation, amended March 1998)

The CoA invites nominations of individuals to serve as APA accreditation site visitors. Site visitors are classified either as “professional” psychologists (i.e., the areas of clinical, counseling, and school) or “generalists” (from areas of psychology outside the scope of accreditation).

Because the CoA needs site visitors who are engaged in educational activities and participate in training programs like those accredited by the CoA, strict criteria are maintained for inclusion and retention in the site visitor pool. Nominators of potential site visitors should consider the following background characteristics before submitting a nomination:

For site visitors who are in professional psychology

- Received a doctoral degree from an accredited program and have a minimum of five years of professional experience
- Have an involvement as faculty in an accredited training program, or an association with an accredited training program within the past five years
- If primarily engaged in private practice, have a formal ongoing association (such as adjunct faculty or external supervisor) with a training program
- Considered to be concerned with, and knowledgeable about, educational, professional, and scientific issues in psychology
- Hold appropriate licensure and/or certification
- Are active members of professional and/or research organizations within psychology

For site visitors who are generalists

- Received a doctoral degree from a regionally accredited institution and have a minimum of five years of professional experience
- Have involvement as faculty in a department or school which has an accredited training program, or if retired, had such association
- Considered to be concerned with, and knowledgeable about, educational, professional, and scientific issues in psychology
- Are active members of professional and/or research organizations within psychology

The CoA makes a special effort to ensure diversity among site visitors. Therefore, the Committee strongly encourages the nomination of women and members of underrepresented groups.

In submitting a nomination, the nominator should provide a brief statement about why he or she thinks the nominee has the appropriate background and personal qualities to be included in the site visitor pool. A copy of the nominee's resume should accompany the nomination. All nominations should be mailed to the Office of Program Consultation and Consultation, American Psychological Association, 750 First Street, N.E., Washington, DC 20002-4242.

D.3-1(a) Policy on Credentials of Participants in Accreditation
(Committee on Accreditation, January 2001)

The CoA is committed to having the highest of standards of conduct for all participants in the accreditation process. In instances where those standards have been compromised (e.g., a participant's license to practice has been surrendered, suspended or revoked by a state or provincial licensing authority; he/she has been dropped from membership in a national or state membership association due to actions by an Ethics Committee; he/she has been found guilty in state or federal court of an action associated with his/her professional role as a teacher or administrator that caused harm to a student or other person associated with a training program) the Committee will review the individual's appropriateness for service on a case-by-case basis.

D3-2. Site Visitor Selection

(Excerpted from Section 3 of the *Accreditation Operating Procedures*;
Committee on Accreditation, October 1989)

The program [being site visited] is responsible for selecting its site visitors from lists provided by the CoA, arranging the dates of the site visit within the assigned cycle, and determining the availability of site visitors for these dates. The CoA will provide programs with a list of three psychologists who are qualified to chair the site visit team based on experience as a site visitor and professional background and experience compatible with the program being visited.

In addition to the chair, site teams for doctoral programs will have at least two other members, and internship training programs will have at least one other member. These members of the site visit team will be selected by the program from a list of five eligible visitors for each position on the team. For both doctoral and internship programs, the list of eligible visitors for the second visitor will be constructed based on experience in an area of professional psychology compatible with the training objectives of the program. For doctoral programs, the list of eligible visitors for the third visitor—known as the “generalist”—will be constructed based on experience in psychology outside the scope of accreditation.

Whenever a program is part of a regional or national system of educational or health service organizations, no more than one of the site visitors should be from the same organizational system.

D3-3. Role and Responsibilities of a Site Visitor (*Site Visitor Workbook*, 1997; revised December 2000)

It is essential that the visitor maintain objectivity when conducting a visit. A fair and objective evaluation of a program and the award of accredited status depends on a careful and objective examination of the domains identified in the *Guidelines and Principles* as they relate to each aspect of a specific program's philosophy, objectives and procedures. The CoA depends in part on the self-study report prepared by the program. Professionally qualified site visitors add both specific data to that provided by the self-study and evaluate less tangible features of a program.

To be effective, the visitor must be a **neutral** observer, concerned with the quality of the program in relation to the *Guidelines and Principles*. The visitor should clarify to the program that the purpose of the visit is to understand the program in terms of **its** philosophy, modes of implementation, and defined and documented outcomes. **It is important for the visitor to act as a "sensor"—not a "censor."** Site visitors are **representatives** of the CoA but are not in the role of **decision makers or consultants**. As such, site visitors should report to the CoA all pertinent information regarding the program's fit with the *Guidelines and Principles*. Site visitors should recognize that this information remains confidential among the program, the site visitors, and the CoA. For this reason, site visitors should state explicitly to all who are interviewed during a visit that what they are told may, at the discretion of the site visitors, be reported to the CoA, but will remain confidential with the CoA. Site visitors should **not** agree to withhold from the CoA any information pertinent to the accreditation decision.

The site visitor's responsibility for the site visit usually terminates upon completion of the report. Since the CoA may request clarification of some matter prior to making its decision, under no circumstances should a site visitor initiate any contact or respond to inquiries or correspondence from the visited program after completion of the visit. All such matters are to be referred to the CoA through its appropriate Central Office staff.

D3-4. Site Visitor Evaluation
(Committee on Accreditation, 1996)

Accreditation site visitors are evaluated through a three-way process that captures different perspectives with regard to site visitor performance:

1. The program director of training completes an evaluation of the entire site visit team following the site visit and prior to receiving the report of the site visitors.
2. The chair of the site visit team evaluates the other team member(s) following submission of the site visit report.
3. The Committee on Accreditation evaluates the quality of the site visit team's report at the meeting when the program is reviewed.

D3-5. CoA Members as Site Visitors
(Committee on Accreditation, July 1985)

As a general rule, Committee on Accreditation members will not serve on site visit teams during their respective terms of office, allowing for certain exceptions, where indicated.

D3-6. Change in Site Visit Cycle
(Committee on Accreditation, 1997)

Program Consultation and Accreditation Staff will forward to the Committee any requests by programs to change the cycle in which a program is scheduled for site visit.

D3-7. Sharing of Formal Complaints
(Committee on Accreditation, June 1981)

Program Consultation and Accreditation staff will forward any formal complaints received, and the subsequent actions taken by the Committee on that complaint, to the site visiting team assigned to visit that program. The material will be limited to complaints received since the most recent site visit to the program, on which the Committee has already acted.

D3-8. Access to Confidential Files by the CoA/Site Visitors
(Committee on Accreditation, July 1989 and July 1997; revised January 2001)

While accreditors may have valid reason to review student and client files maintained by a program, access to such files must be tempered as necessary by the legal and ethical standards that apply (e.g., the APA “Ethical Principles of Psychologists”).

Review of Educational Records

The Family Educational Rights and Privacy Act (FERPA) prohibits the release of educational records by educational agencies and institutions except in delineated situations. One exception permits an educational agency or institution to release educational records¹ to an accrediting organization to permit that accreditor to carry out its functions. Because the CoA is not an educational organization, however, it may not gain access to these files if no permission is given by the educational program.

FERPA imposes limits on the release of materials that fall outside the term “educational records.” This restricts materials that the CoA may receive from the educational agency or institution. These restricted items include (a) records of instructional, supervisory, and administrative personnel which are in the sole possession of the maker thereof and which are not accessible or revealed to any other person except a substitute; (b) records maintained and created by a law enforcement unit of the educational agency or institution for the purpose of law enforcement; c) records made and maintained in the normal course of business by individuals employed by an educational agency or institution, which relate exclusively to that person in his/her capacity as an employee and are not available for use for any other purpose; or (d) records on a student who is attending an institution of postsecondary education, which are made or maintained by a physician, psychologist, or other recognized professional acting in his or her professional capacity, and which are made, maintained, or used only in connection with the provision of treatment to the student, and are not available to anyone other than persons providing such treatment.

Review of Patient Information Located in Student Records

Typically, state laws provide that medical records must be kept confidential subject to various exceptions, but these provisions vary considerably from state to state. No overarching Federal law allowing access to patient records for such purposes as site visits appears to exist; accordingly, the issue of whether site visitors may review individual patient records in the course of reviewing student records depends on the state law in effect where the program being reviewed is located. Typically, deletion of identifying patient information by the program being reviewed for accreditation is adequate. If a program refuses to provide access to records, it should bear the burden of providing a legal opinion explaining the basis for refusal and, more specifically, an explanation of why the deletion of information identifying the patient is not adequate to comply with the state law at issue.

¹ Educational materials are defined in FERPA as materials which (a) contain information directly related to a student and (b) are maintained by an educational agency or institution.

D3-9. Cooperation with Other Agencies
(Committee on Accreditation, February 1979)

Whereas the American Psychological Association Committee on Accreditation recognizes the merits of subjecting institutions to only one visit (duplication of effort, additional costs in time and money, etc.), and in its desire to act in a manner consistent with the statement endorsed by the Association of Specialized and Professional Accreditors (encouraging the cooperation of accrediting agencies, insofar as feasible in the scheduling and conduct of joint on-site visits), the Committee on Accreditation will participate with other appropriate agencies in conducting cooperative visits when (1) accrediting agencies have substantive interests in common; and (2) the institution desires a consolidated visit.

D4. Regulations related to Committee on Accreditation decision making process

D4-1. CoA Executive Committee (Committee on Accreditation, October 1998)

There will be an Executive Committee appointed by the CoA chair to act for the CoA between meetings on accreditation matters other than the making of program decisions as outlined in Section 4 of the *Accreditation Operating Procedures*. Members of the Executive Committee will be selected to represent the diversity of constituent groups responsible for nominating members of the CoA. The Executive Committee will include at least one member each in his/her first, second, or third year of the CoA; as well as any associate chairs that may be designated by the Chair to facilitate CoA business.

**D4-2. Third-Party Testimony Policy/Unsolicited Information
Received About Accredited Programs**
(Committee on Accreditation, 1997)

The Office of Program Consultation and Accreditation receives, on occasion, unsolicited information regarding accredited or applicant programs. Office staff will communicate to those offering such information that presently only two options exist to convey to the CoA information regarding an accredited program: either the filing of a formal complaint or the provision of third-party testimony. Procedures for filing a complaint/providing third-party comments [as follows] will be forwarded to those submitting unsolicited information.

**D4-3. Procedure for the Provision of Third-Party Testimony
Related to Committee on Accreditation (CoA)
Program Review for Accreditation**
(Committee on Accreditation, November 1996; revised July 2000)

Provision of Third-Party Testimony Related to Initial or Periodic Review for Accreditation

Section 602.23(b) of the criteria for recognition of the CoA's accrediting activities by the U.S. Secretary of Education states the following: "In providing public notice that an institution or program subject to its jurisdiction is being considered for accreditation or preaccreditation, the agency must provide an opportunity for third-party comment concerning the institution's or program's qualifications for accreditation or preaccreditation."

This implementation procedure outlines the steps that will be taken by the CoA, consistent with the Secretary's requirements and with Section 4.1 (Guiding Principles of the Periodic Review) of the CoA's *Accreditation Operating Procedures*.

1. In accordance with the procedures, the CoA will provide public notice of all programs scheduled for initial or periodic review prior to the beginning of each review year. Such notice will appear in *The APA Monitor* and on the Committee on Accreditation World Wide Web site and will include a summary of the accreditation guidelines. In addition, a notice regarding public comment will be added to the listing of accredited programs in *American Psychologist*, along with instructions that questions regarding testimony be directed to the Program Consultation and Accreditation Office.
2. Deadlines for receipt of third-party testimony will be given in the notice. The deadlines will be determined according to the following formula: the due date of self-study reports for programs in each review cycle, plus five (5) additional working days.

All third-party testimony must state the name of the person(s) or the party(ies) represented by the testimony. Issues addressed in the testimony must be limited to a program's consistency with the *Guidelines and Principles for Accreditation*. All testimony must be in writing and is limited to ten (10) pages.

3. All third-party testimony made on a program will be reviewed by CoA reader(s) assigned to conduct the program review process and will be incorporated into the preliminary review process, as governed by Sections 1.2 and 2.2 of the *Accreditation Operating Procedures*. The testimony provided will be forwarded to the program, which will be given the opportunity to comment in writing no later than one month prior to the meeting during which the review will occur. Should no comments be received from the program during this time, the CoA will consider the testimony to be undisputed.
4. All third-party testimony, and program comments thereto, will be considered part of the record for purposes of program review and decision by the CoA. Consideration of the testimony will be governed by Section 4 of the *Accreditation Operating Procedures*.

5. Third-party testimony is not to be confused with the complaint process. Although both deal with a program's consistency with the *Guidelines and Principles*, the complaint process differs in many respects: a) the process and actions to be taken with the CoA in the review of a complaint are governed by Section 6.1.3 of the *Accreditation Operating Procedures*; b) complaints may be filed only against the operations of an accredited program and not against those reviewed for initial accreditation; c) submission of third-party testimony can be made only in the context of a program's review for initial or continued accreditation; d) third-party testimony may be filed on behalf of a program as well as against it; and e) a program has the option of declining to respond to third-party testimony. Attention will be invited to the existence of the complaint process, with instructions to contact the Program Consultation and Accreditation Office should questions arise.

Provision of Third-Party Information for the Identification of Incorrect/Misleading Information Released by an Accredited or Applicant Program

The CoA provides for the public correction of incorrect or misleading information released by an accredited or applicant program about (1) the program's accreditation status; (2) the contents of reports of site team visitors; and (3) the CoA's accrediting actions with respect to the program. The procedure for providing such correction is as follows:

1. All third-party testimony must state the name of the person(s) or the party(ies) represented by the testimony. Issues addressed in the testimony must identify the incorrect/misleading information alleged to have been provided by the program. All testimony must be in writing and is limited to ten (10) pages. If the information appeared in print form, a copy of the document in question should accompany the testimony.
2. The third-party testimony will be forwarded to the program alleged to have supplied the information, with provision of the opportunity to comment in writing no later than one month from the program's receipt of the CoA's letter. Should no comments be received from the program during this time, the CoA will consider the testimony to be undisputed.
3. Upon receipt of a response from the program, or, in the absence of a response, one month after the program's receipt of the CoA's letter, the CoA will review the testimony and any program response. If a misleading instance is verified, the program will be informed by the CoA, in writing, that the program's actions are not consistent with the *Guidelines and Principles*. The CoA reserves the right to take further action with regard to the program, consistent with the *Accreditation Operating Procedures*, as may be appropriate under the circumstances.
4. In those instances in which incorrect/misleading information has been verified, the CoA will provide public correction of such information via its Web site and/or *The APA Monitor*. This public announcement will include a summary of the information released by the program, accompanied by the CoA's clarification/correction of the information (subject to its procedures regarding confidentiality and public disclosure of information).

D4-4. Appearances before the Committee on Accreditation
(Committee on Accreditation, February 1979)

Individuals wishing to discuss a Committee action involving a particular program must use the appeal process which is the proper arena for such discussion. Individuals desiring input into the Committee's discussion should first meet with the accreditation staff. This does not preclude, however, the Committee from asking a representative to appear under circumstances where the Committee decides that needed information can be obtained only by this means.

D4-5. Full Disclosure of Numerical Vote
(Committee on Accreditation, January 1982)

The CoA will not report to programs the votes on final accreditation. The CoA is one whole body which makes final accreditation decisions based on its overall professional judgment, rather than individual members recording their independent votes on a program.

D4-6. Accredited, on Probation Status: Uses and Time Frame
(Committee on Accreditation, October 1998; Updated January 2001)

According to Section 4.2 (b) of the *Accreditation Operating Procedures*, “accredited, on probation” status designates a program which, in the CoA’s professional judgment, is not operating in a manner consistent with the G&P. Section 4.2 (b) also states that programs on “accredited, on probation” status are given a set time period in which to correct these deficiencies; this interval is defined in Section 4.4 as being no less than one year and no more than three years after the program’s most recent site visit. The time frame for the probationary status also will be calibrated according to the effective date of the decision, which is the date of adjournment of the CoA meeting in which the decision was made (Section 4.6). For internship programs, this period will be no longer than one year after the effective date of the decision; for doctoral programs, the period will be no longer than two years after the effective date. These time frames are stipulated by the U.S. Secretary of Education in the regulations for the Secretary’s recognition of accrediting agencies.

D4-7. Monitoring of Programs on “Accredited, Inactive” Status
(Committee on Accreditation, July 2000*)

Inactive Programs: According to Section 4.2 of the *Accreditation Operating Procedures*, a doctoral program that has not admitted students for two successive years or an internship or postdoctoral residency program that has no funded interns in a given training year may be placed on “accredited, inactive” status. Such status is granted by the Committee on Accreditation (CoA) for a period of one year at a time. The CoA will receive annual updates from the program and will determine the date of the next site visit on a case-by-case basis.

For programs requesting an extension of inactive status beyond one year, the CoA will request that the program provide the additional domain-related information with the program’s annual report or via correspondence at a set renewal date.

Systematic “Phasing Out” of Old Programs: A program that has notified the CoA that it is in the process of closing will be monitored in the same fashion. Upon such notification, the CoA will request from the program detailed information about the phase out plan and will determine a time certain for a receipt of a focused self-study and site visit based upon the date of the most recent site visit. This will be done to ensure the quality of the program for students matriculating during the phase out process. Based on the provided phase out plan, the CoA will also establish an end date for program accreditation.

*This policy subsumes and replaces the implementing regulation “Systematic ‘Phasing Out’ of Old Programs,” July 1997.)

**D4-8. Protection of Students in Programs Before Accreditation
Status Is Awarded and After Accreditation is Revoked**
(Committee on Accreditation, March 1997; revised October 2000)

Although the *Accreditation Operating Procedures* specifically define effective dates for initial accreditation and revocation of accreditation, the issue of “protection” of students who complete their programs before accreditation status is granted or after accreditation is revoked is one that is frequently raised with CoA members and Program Consultation and Accreditation staff.

Because the CoA’s responsibility for accreditation extends to programs and not individuals, such accreditation “protection” for students completing programs (the CoA considers a student to have completed his or her program as of the date recorded on the official transcript that indicates that all degree requirements have been completed) prior to or after the period of accreditation cannot be predated or extended. Programs are requested to refer interested parties to the *Operating Procedures*.

D4-9. Committee on Accreditation
Threshold Ranges for Student Achievement Outcomes in Doctoral Programs
(Committee on Accreditation, July 1999; revised July 2000 and January 2001)

Thresholds for “acceptable performance¹” by accredited doctoral programs in professional psychology are set forth in the Committee on Accreditation’s “Guidelines and Principles for Accreditation of Programs in Professional Psychology” (G&P). In that document, the following minimum standards of performance are defined as characteristic of accredited programs regardless of program model:

- A program’s purpose must be within the scope of the accrediting body and must be pursued in an institutional setting appropriate for the education and training of professional psychologists.
- A program will have a clearly specified philosophy of education and training, compatible with the mission of its sponsor institution and appropriate to the science and practice of psychology. A program’s education/training model and its curriculum plan will be consistent with this philosophy. The program will ensure the development of competencies as delineated for doctoral, internship, and postdoctoral programs.
- A program will have resources (physical, financial, human) of appropriate quality and sufficiency to achieve its education and training goals and objectives.
- A program will recognize the importance of cultural and individual differences and diversity in the training of psychologists.
- A program will have education, training, and socialization experiences characterized by mutual respect and courtesy between faculty/staff and students/interns/residents and will operate in a manner that facilitates educational experiences.
- A program will engage in self-study, which assures that its goals and objectives are met, enhances the quality of professional education and training, and contributes to the fulfillment of its sponsor institution’s mission.
- A program will provide written materials and other communications that appropriately represent it to the relevant publics.
- A program will fulfill its responsibilities to the CoA by abiding by its published policies and procedures; informing the CoA in a timely manner of program changes; and paying all fees associated with its accredited status.

The CoA will consider a program’s outcomes as compared with programs of similar model in making its decision (Operating Procedures, Section 4.1). To assist the CoA in determining whether a program’s performance is acceptable, threshold ranges of student achievement outcomes have been developed. All thresholds are developed from data obtained from doctoral programs in their annual reports; hence, they represent, as closely as possible, the state of the field and provide a mechanism by which programs may be compared with one another. These threshold ranges will be reviewed periodically and revised as appropriate.

The threshold ranges are designed to provide the CoA with assistance in general assessment of whether a given program is operating in a manner consistent with the G&P. While the ranges provide the CoA with guidelines, some of the ranges describe basic categories of program model based upon areas within professional psychology and affiliation with training groups. Not all programs will fit into these categories. As such, it is incumbent upon each program to describe its philosophy or model of training accurately and to be accountable to its own training model and goals. Each program will be expected, as a result of its goals and procedures for student assessment, to provide information and evidence regarding the minimal level of achievement it requires for students to progress satisfactorily through and graduate from the program (Domain B). Each program also bears the burden of proof in demonstrating (a) that its

¹ As required by Section 602.16 (a)(1)(i) of the Criteria for Recognition by the U.S. Secretary of Education, which stipulates that accreditors will have standards addressing “success with respect to student achievement in relation to mission, including, as appropriate, consideration of course completion, State licensing examination, and job placement rates.”

outcomes are consistent with its model and goals and (b) that the outcomes are consistent with the G&P.

The Student Achievement Threshold Ranges (Developed from 1998 Annual Report Data)

(Will be reviewed periodically and revised as appropriate)

- **Number of years to complete program:** In general, the CoA expects that most students will complete their doctoral programs in *not less than 3 years nor more than 6-7 years*.
- **Percent of students withdrawing from the program:** The CoA expects that the percentage of a given program's students that withdraw from the program in a given academic year generally will be between 0 and 5 percent.
- **Percent of students accepted into an internship:** In general, the CoA expects that, of the total number of students in a given program applying for an internship for the following year, between 80 and 100 percent of those students will be placed into either an accredited or unaccredited internship.
- **Percent of students who are authors/coauthors of articles in professional/scientific journals**
Percent of students who are authors/coauthors of papers or workshops at professional meetings

For these two performance standards, the CoA expects that, in general, a given program's percentage of students involved in these activities will fall within the following ranges, according to the program's stated objectives and training model:

Program Type	Pct students authors of journal articles	Pct students authors of meeting papers
Clinical (PhD)	5-80	5-80
Clinical (PsyD)	0-12	0-30
Counseling (PhD)	5-55	25-70
Counseling (PsyD)	5-55	25-70
School (PhD)	0-40	20-70
School (PsyD)	0-40	5-35

**D4-10. Use of Annual Reports for Reaffirmation of Accredited Status
And Monitoring of Individual Programs**
(Committee on Accreditation, July 2000)

In accordance with Section 2 of the *Accreditation Operating Procedures*, accredited programs are reviewed annually by written report. Annual reaffirmation of a program's accredited status is based upon the CoA's review of the annual report. In the context of that review, the CoA reviews the information and data provided by the program to monitor individual program performance.

The following policy outlines the steps taken in the review of the annual report, consistent with the *Operating Procedures*.

1. As annual reports are received, they are checked off on a master list of accredited programs. Any additional written reports or comments provided by the program are removed from the "data" portion of the report for separate review.
2. Data from the annual report is coded, entered into a database, and proofed for accuracy.
3. After data from all programs' annual reports have been entered, a listing of all programs' "threshold" measures is produced. All measures are compared against the threshold ranges developed by the CoA and included in Policy D.4-9 of the CoA's Implementing Regulations.
4. Individual program data for the current year is compared with the program's data from the previous year. Differences between years is reviewed using the program's overall size as a baseline, as measured by numbers of students and faculty, in determining the significance of any changes noted.
5. All "outliers" (i.e., programs with threshold data outside the CoA's defined ranges and/or those with data values that differ substantially from the previous year) are identified and brought to the attention of the CoA.
6. All programs that do not submit annual reports by the time of the CoA's reaffirmation of accredited status are identified by office staff and forwarded to the CoA for review and response.
7. All programs that submitted annual reports and were asked subsequent to their last periodic reviews to respond to a "flag" but did not do so are identified by office staff and forwarded to the CoA for review and response.
8. All program correspondence submitted with the annual reports is reviewed by office staff. Major changes and/or program difficulties are noted. If the correspondence indicates problems and/or difficulties, or if there is a question about whether changes and/or difficulties exist, the correspondence is forwarded to the CoA for review and response. All responses to "flags" also are forwarded to the CoA for review.

9. The results of the staff reviews/analyses of the annual reports (i.e., outliers, non-submissions, problems/major changes, flags) are discussed by the CoA. If the report is acceptable to the CoA and the issues raised in the review are determined by the CoA to pose no questions about the program's continued consistency with the G&P, the program's report is accepted and accreditation is reaffirmed. This occurs typically at the CoA's fall meeting.

10. As noted in Section 2.1 of the *Accreditation Operating Procedures*, if the report is not complete or raises questions about the program's continued consistency with the G&P, the CoA may, at any time, request additional information or request an invitation for a site visit. Such action may take one of the following forms:

- Defer reaffirmation pending receipt of additional information from the program
- Defer reaffirmation pending a special site visit
- Defer reaffirmation and request that the program invite the CoA to conduct the program's regular site visit earlier than originally scheduled
- Reaffirm but ask the program to provide information in its next annual report

11. If staff determine that no review is needed by the CoA (i.e., no problems or concerns), the program's report is accepted by the CoA and accreditation is reaffirmed. This occurs typically at the CoA's fall meeting.

12. Notice of reaffirmation is made over the CoA's Web site and in printed materials as appropriate. All programs from which more information or further action is required are notified by letter. In addition, any program that provided a response to a "flag" is notified by letter of the outcome of the review.

D4-11. Addressee and Distribution of CoA Decision Letters
(Committee on Accreditation, July 2000)

Consistent with the Council of Higher Education Accreditation (CHEA) policy statement regarding the need for accreditors to keep institutional executives appropriately informed at all stages of the review process, the CoA will address any correspondence that provides the results of a CoA vote (e.g., decision letters, review of a response to a “flag”) to the president/CEO of the institution, with a copy of that letter to the training director and to other administrators with responsibility for the program. Letters of an informational nature will be addressed directly to the training director.

The CoA also recognizes the vital role site visitors play in the accreditation process and the need for continuing feedback to the site visitors about their participation in the accreditation process. Therefore, the CoA also will provide the program’s visiting team with a copy of any letters generated by the CoA in the decision making process (including, but not limited to, letters requesting more information and the final decision letter). Implementation of this policy will be preceded by the education of site visitors about the program review process as well as about confidentiality and sensitivity issues in relation to receiving information about the CoA’s decision. All programs being reviewed for initial or continuing accreditation will be informed of this policy prior to its implementation.

D5. Regulations related to the filing of complaints

D5-1. Time Frame for Review of Complaints against the Actions of Accredited Programs (Committee on Accreditation, October 1998)

Section 6.1 of the *Accreditation Operating Procedures* outlines procedures for filing of complaints filed against the actions of accredited programs and for the CoA's response to such complaints. The following procedure augments the complaint process and outlines time frames for acknowledgment of the complaint and action by the CoA.

1. Receipt of a complaint meeting the requirements set forth in Section 6.1.1 of the complaint procedure will be acknowledged in writing by the Office of Program Consultation and Accreditation within 30 days of receipt. The complaint will be forwarded to the program for its response at the same time that acknowledgment of receipt is forwarded to the complainant. As specified in the procedure, the program will be given 30 days to respond.
2. The CoA will review the complaint at its first regularly-scheduled meeting held after the receipt of the program's response, taking whatever action is deemed appropriate as set forth in Section 6.1.3 of the complaint process.

D5-1(a). Processing and Review of Complaints against Accredited Programs
(Committee on Accreditation, January 2001)

When a complaint against an accredited program is received by the Office of Program Consultation and Accreditation, Office staff will review the complaint materials to ensure that the complaint meets the requirements set forth in Section 6.1.1 of the *Accreditation Operating Procedures*. In accordance with Section 6.1.2 of the *Procedures*, a complaint meeting those requirements will be acknowledged in writing by the Office of Program Consultation and Accreditation within 30 days of receipt and will be sent to the program at the same time that acknowledgement of receipt is forwarded to the complainant. The program will be given 30 days to respond.

Upon receipt of the program's response, a program complaint review subcommittee, appointed by the CoA chair, will be charged with the review of the complaint and the program's response to the complaint. Based upon its review of the complaint, the subcommittee will develop a recommendation for action by the full CoA in accordance with the procedures and time frame specified in Section 6.1.3 of the *Procedures*.

D5-2. Filing of Complaints against the Committee on Accreditation
(*Accreditation Operating Procedures*, Section 6.3)

There may be instances in which a party or parties desires to formally express dissatisfaction with actions of the Committee on Accreditation. These concerns may be expressed through the following avenues:

1. When the CoA has completed a periodic review, with a resulting decision to deny an initial site visit, deny or revoke accreditation, or grant accredited, on probation status, the affected program may formally appeal the decision as set forth in Section 5 of the *Accreditation Operating Procedures*.
2. Individuals, groups, or programs may wish to make a complaint or to raise issues regarding CoA activities, operations, or policies. This may be accomplished by:
 - (a) expressing the concern or issue through APA governance, including the Board of Educational Affairs, the Board of Directors, and/or the Council of Representatives;
 - (b) expressing the concern or issue through the appropriate stakeholder group responsible for nominating CoA members; or
 - (c) written communication with the CoA through the Office of Program Consultation and Accreditation.

The CoA will take action on such written communication in the same manner in which it processes complaints against the actions of accredited programs, as specified in Section 6.1 of the *Accreditation Operating Procedures*, to the extent relevant.

3. Parties also have the option of filing third-party testimony with regard to the CoA's petition for continued recognition by the U.S. Secretary of Education at such time as a petition is reviewed. Those desiring to do so should contact the U.S. Department of Education's Office of Postsecondary Education, Accreditation and Eligibility Determination Division.¹

¹ [The contact information is as follows: U.S. Department of Education, Office of Postsecondary Education, Accreditation and State Liaison Division, 1990 K Street, N.W., #7105, Washington, DC 20006; (202) 219-7011.]

D6. Regulations related to conflict of interest

D6-1. Conflict of Interest Policy for Committee on Accreditation Members

(Committee on Accreditation, April 1993; revised December 1998; revised January 2001)

Members of the Committee on Accreditation participate in a range of decisions regarding applicant and accredited programs. It is essential that these decisions appear to third parties and in fact are fair, based on accurate data, and are guided by the Committee members' best judgment. These qualities—fairness, expertise, and accuracy—can be eroded if Committee members vote on program decisions in which they have an actual or potential conflict of interest. For purposes of this policy, “potential conflict of interest” means circumstances that could be perceived by a reasonable third party as creating an apparent conflict of interest.

Because members of the Committee on Accreditation are chosen based on active involvement in the profession of psychology, it is likely that program decisions occasionally will be made by the Committee for which the member holds a dual interest. Since the Committee may not know fully the previous experience of its members, it is incumbent that Committee member exercise good faith and avoid participating in program decisions where an actual or perceived conflict of interest exists. Examples of relationships that pose conflict of interest concerns include: (1) the member has had or has a working relationship with the institution; (2) a former advisee directs the doctoral program; (3) a Committee member's doctoral student is in an internship program under review; or (4) the member has had a consulting relationship with the training program.

In addition, there are broader issues of conflict of interest which apply to consideration of policy and procedure. Committee members may experience a conflict of interest when they serve on more than one board or committee within the APA or within more than one organization. The Committee on Accreditation and its constituencies assume that Committee members will discharge their duties in good faith recognizing their fiduciary duty to the Committee on Accreditation and with the care that an ordinarily prudent person in like position under similar circumstances would exercise. Therefore, Committee members serving on other committees or boards in the APA or in other associations with overlapping interests in accreditation must be attentive to instances of possible conflict of interest due to dual service.

The decision regarding whether a member should be recused from participating in a given decision belongs to the Committee. Any Committee member who is aware of circumstances that he or she believes could pose a conflict of interest either for themselves or for another Committee member should inform the chair of the Committee of the underlying facts and his or her assessment of the appropriate resolution of the potential or actual conflict. If the Committee member who has the potential or actual conflict advises the Chair that he or she wishes to be recused from the decision making process, the Chair will honor the member's decision and the recusal will be noted in the minutes. If the Committee member is uncertain about the appropriate resolution or believes he or she can make an unbiased decision despite the appearance of conflict of interest, the Chair shall refer the matter to the full Committee on Accreditation for resolution. If it is determined that there is an actual or potential conflict of interest regarding a Committee decision, the member will be recused

during discussion and decision making. The minutes of the meeting will reflect any decision regarding a possible conflict of interest. When there is any doubt in the member's mind as to whether a conflict exists or may appear to exist, the member should refer the issue to the Committee or Committee Chair. In addition to recusal, a Committee member may abstain from voting on a matter at any time.

There may be other times when nonparticipation in program decisions is called for, even when conflict of interest is not involved. For example, Committee members may receive *ex parte* communications by a program or by others on the program's behalf presenting material that is beyond the record. Voting on the program after receiving these communications would be inappropriate.

In summary, Committee members should conduct themselves in a manner that avoids any appearance of partiality or bias and should deal with ambiguous situations in a manner that avoids the potential conflict. It is essential that the process at every level be conducted honestly, objectively, and fairly and that the perception of external parties is congruent with this high standard.

D6-2. Conflict of Interest Policy for Site Visitors

(Site Visitor Workbook, 1997;

Committee on Accreditation, date unknown, revised January 2001)

In preparing lists of site visitors, the CoA and Program Consultation and Accreditation staff attempt to avoid even the appearance of a conflict of interest with the program being visited. This is absolutely necessary to maintain the credibility of the accreditation process. However, all relationships between individuals and programs cannot be known by the CoA and staff. **The responsibility to determine any possible conflict, actual or apparent, lies equally with the program and the site visitors.**

Possible conflicts for site visitors include:

- former employment by the program
- former student in the program
- family connection with the program
- having an “old” friend associated with the program
- having a former classmate on staff at the program
- having a close professional or personal relationship with a member of the staff at the program
- being a previous site visitor to the program
- where a staff member of a program an individual is asked to visit was a member of the site visiting team to his/her program

The Committee is committed to avoiding even the appearance of a conflict of interest and maintaining the integrity and credibility of the accreditation process. It will not consider a site visit report in which it detects an appearance of or an actual conflict of interest.

D6-3. Conflict of Interest Policy for Staff of the Office of Program Consultation and Accreditation

(Adopted by the Committee on Accreditation April 1999; revised January 2001)

Permanent staff of the Program Consultation and Accreditation Office do not have direct involvement in decision making regarding applicant and accredited programs (e.g., they do not participate directly in site visits nor do they take part in discussing and voting on accredited and applicant programs). Staff, however, do provide consultation to programs and individuals on matters such as developing applications and filing complaints; conducting preliminary reviews of program self-study reports; and attending program review and decision making meetings of the CoA. It is possible that a staff member, in the course of her or his work, may be involved with a program for which that staff member holds a dual interest. Examples of such situations include former employment at the program (including consulting); currently a student *in* the program or made application to the program; family connection with the program; having a close professional or personal relationship with a program staff member; and having an adverse relationship with the program or its personnel.

Temporary staff (e.g., interns, administrative temps, and consultants) have very limited interaction with representatives of accredited programs in matters concerning the accreditation process, and they have no access to confidential program information (except for research interns, who may be granted supervised access to confidential information to enable them to perform their duties). Situations may arise, however, in which temporary staff may be privy to accreditation information that may lead to or create an undue advantage for that staff member. Such situations might occur, for instance, when a temporary staff member is in the process of applying for admission to, or is seeking permanent employment in, doctoral or internship programs or postdoctoral residencies.

It is essential that the accreditation process be fair, unbiased, and based on accurate data in both actuality and appearance. Since the CoA or other office staff may not know fully the previous experience of each staff member, it is incumbent on the staff member, whether permanent or temporary, to avoid participating in any accreditation-related activity regarding a program where there is an actual or perceived conflict of interest. When there is any doubt in the staff member's mind as to whether a conflict exists, or may appear to exist, he or she should refer the issue to their immediate supervisor or to the Director of the Program Consultation and Accreditation Office.

If an actual or perceived conflict of interest exists, staff will take appropriate steps to avoid involvement with the relevant program's interaction with the CoA or the Program Consultation and Accreditation Office, including leaving the room when the program is being discussed/and or a decision is being made with regard to the program.

**D6-4. Conflict of Interest Policy for Officially-Designated Liaisons
To the Committee on Accreditation**

(Adopted by the Committee on Accreditation January 2000; Revised January 2001)

Pursuant to the Board of Directors/Committee on Accreditation agreement approved by the Board in December 1999 and to the “Policies for Accreditation Governance” dated August 18, 1991 and amended February 18, 1996), official liaisons to the Committee on Accreditation from the APA Board of Directors and the Board of Educational Affairs are permitted to attend both open and closed sessions of CoA meetings. They may be present during review and decision making regarding applicant and accredited programs and will be privy to information of a confidential nature. It is possible that a liaison, in the course of his or her involvement, may be party to a discussion on a program for which that liaison holds a dual interest. Examples of such situations include (1) current or former employment at the program (including consulting); (2) a liaison’s doctoral student is in an internship program under review; (3) family connection with the program; (4) having a close professional or personal relationship with a member of the staff of the program; and (5) having an adverse relationship with the program or its personnel.

It is essential that the accreditation process be fair, unbiased, and based on accurate data in both actuality and appearance. Since the CoA or staff of the Program Consultation and Accreditation Office may not know fully the previous experience of each liaison, it is incumbent on the liaison to not be present during any accreditation-related activity regarding a program where there is an actual or perceived conflict of interest. If an actual or perceived conflict of interest exists, liaisons will take appropriate steps to avoid involvement with any aspect of the relevant program’s interaction with the CoA or the Program Consultation and Accreditation Office. When there is any doubt in the liaison’s mind as to whether a conflict exists or may appear to exist, he or she should refer the issue to the Chair of the Committee on Accreditation or to the Director of the Program Consultation and Accreditation Office.

Furthermore, consistent with the CoA meeting procedures regarding consultation services, no CoA liaison who participates in closed sessions shall offer consultation services to programs (reimbursed or non-reimbursed) for the purpose of assisting them to seek or maintain their accreditation status. Each liaison will refrain from such activity during the term of his/her appointment as a liaison and for a period of one year thereafter.

D7. Regulations related to confidentiality and disclosure of information used in the accreditation process

D7-1. Confidentiality and Public Disclosure of Information

(Accreditation Operating Procedures, Section 7)

An annual list of the status of accredited programs and the year of each program's next scheduled site visit will be published in the *American Psychologist*, and an annual list of all final decisions¹ made by the CoA will be published in the accreditation newsletter. Included in all published lists will be the identity of programs whose accreditation has been revoked as well as those voluntarily withdrawing from accredited status. An updated list that includes changes in status or new programs since the previous annual list will be published midyear. In addition, after each meeting of the CoA, the published lists of accredited programs will be updated as necessary by an addendum of final decisions and will also be available through other means as appropriate.² The CoA will share the accreditation status of programs with regional and specialized accrediting bodies as appropriate. All other information, and the records used in accreditation decisions, will be kept confidential by the CoA.

The CoA will notify the U.S. Department of Education of any accredited program that the CoA has reason to believe is failing to comply with financial aid responsibilities as outlined in Title IV of the Higher Education Act, or any purported fraud and abuse by accredited programs, and its reasons for such concern. The CoA also will take action to correct in a timely manner any incorrect or misleading information released by an accredited program about the accreditation status of the program, the contents of the site visit report, and the CoA's accrediting actions with respect to the program.

In addition, the Office of Program Consultation and Accreditation will make disclosure as required by the U.S. Department of Education and in those instances when the CoA is legally required to disclose such information.

¹ [In the case of appealable decisions (denial, probation, or revocation), the CoA's accreditation decisions become final either (1) 30 days after the program is notified of the CoA's decision and the program elects not to appeal, or (2) if the program elects to appeal the decision, after receipt of the appeal panel report if the appeal panel upholds the CoA's decision.]

² [For the most current information on accredited program status, please consult the lists of accredited doctoral and internship/postdoctoral programs on the CoA's Web site at www.apa.org/ed/accred.html.]

D7-2. Procedures for Notification of CoA Actions in Accordance with the Secretary of Education's Standards for Recognition of Accrediting Agencies
(Committee on Accreditation, October 1997)

This implementation procedure outlines the steps that will be taken by the CoA, consistent with the Secretary's requirements and with Section 7 (Confidentiality and Public Disclosure of Information) of the CoA's *Accreditation Operating Procedures*, to provide information on CoA activities, actions and decisions to the Secretary, State agencies, other accrediting agencies, and the public.

1. Information to the U.S. Department of Education (USDE)

Item	Appropriate Section Reference in DE Regulations	How Often and/or When
Lists of Accredited Programs	602.4(a) and c	Annually (when published, usually January)
CoA annual report (contains the CoA's final accrediting actions for that year)	602.4(a), (b), and (d)	Annually (when published)
The name of any accredited program that the CoA has reason to believe is failing to comply with Title IV, HEA program responsibilities or is engaged in fraud or abuse, and the CoA's reason for such concern	602.4(f)	As needed
Notification of any proposed change in policies, procedures, or accreditation standards that might alter the CoA's scope of recognition or compliance with Section 602.4 (submission of information) of the Secretary's recognition provisions	602.4(g)	As needed
Notification of decision to award initial accreditation	602.29(a)(1)	No later than 30 days after decision
Final decision to deny or revoke accreditation, or place program on accredited, on probation status	602.29(a)(2)(I), (b)	At same time program is informed, but no later than 30 days after decision is final
Program decision to withdraw voluntarily from accreditation	602.29(a)(4), (d)(1)	No later than 30 days after notification is received by the CoA
Program decision to allow accreditation to lapse	602.29(a)(5), (d)(2)	No later than 30 days after date on which accreditation lapses

Item	Appropriate Section Reference in DE Regulations	How Often and/or When
Reasons for denial or revocation of a program's accreditation/ program's comments on action (if any)	602.29c	No later than 60 days after decision is final

2. Publicly-Available Information

The following information is available in printed form to all interested parties. Items marked with an asterisk (*) also appear in electronic form on the CoA's Web site (www.apa.org/ed/accred.html).

- Current lists of accredited internship and doctoral programs*
(NOTE: Supplements to the printed lists, published 30 days after each CoA meeting, provide updates on accreditation status, including newly-accredited programs and final decisions by the CoA to place a program on "accredited, on probation" status or to deny or revoke accreditation. The lists maintained on the Web site are updated within 30 days after each CoA meeting and incorporate all final decisions made by the CoA.)
- Program review cycles for current year*
- Accreditation Guidelines/Principles and Procedures*
- List of current CoA members and institutional affiliations*
- Important accreditation dates for the current year, including CoA meeting dates*
- CoA implementation procedures*
- Statement of reasons for denial or revocation of accredited status, in accordance with CoA procedure for notice of such actions
- CoA annual report, which includes lists of CoA members and Program Consultation and Accreditation Office staff; aggregate statistics on accredited programs; CoA activities, including final accreditation decisions for that year; appeal panel pool members; upcoming program review cycles; important accreditation dates; site visitor training workshop dates; and implementation procedures

3. Information to State Licensing Boards

State psychology licensing boards will receive the following:

- Updated list of accredited doctoral and internship programs (annually, in January)
- Updated Accreditation Guidelines/Principles and Procedures (following publication of updated versions)
- CoA annual report (annually, when published)

4. Information to Other Accrediting Agencies

All accrediting agencies that are currently or were previously recognized either by the Secretary of Education or the Commission on Recognition of Postsecondary Accreditation (CORPA)/Council on Higher Education Accreditation (CHEA); and/or are members of the Association of Specialized and Professional Accreditors (ASPA), will receive the following information:

- CoA annual report (annually, when published)
- Updated list of accredited doctoral and internship programs (annually, in January)
- Updated Accreditation Guidelines/Principles and Procedures (following publication of updated versions)

In addition, the regional or national body that accredits any institution housing a program initially accredited, placed on accredited, on probation status, having its accreditation status revoked, or voluntarily withdrawing from accreditation will be notified of the CoA's action with regard to that program, as follows:

- CoA decisions to award initial accreditation: no later than 30 days after decision
- Final decisions of "accredited, on probation" status or revocation of accreditation: no later than 30 days after decision becomes final
- Decisions by accredited programs to voluntarily withdraw from accreditation: no later than 30 days after CoA is notified

D7-3. Policy on Regard of Actions by Regional Accreditors and State Agencies (Committee on Accreditation, October 1998)

In accordance with Section 602.30(2) of the criteria for recognition by the U.S. Secretary of Education, the CoA will not renew the accreditation status of a program during any period in which the institution offering the program (1) is the subject of an interim action by a recognized institutional accrediting agency potentially leading to the suspension, revocation, or termination of accreditation; (2) is the subject of an interim action by a State agency potentially leading to the suspension, revocation, or termination of the institution's legal authority to provide postsecondary education; (3) has been notified of a threatened loss of accreditation, and the due process procedures required by the action have not been completed; or (4) has been notified of a threatened suspension, revocation, or termination by the State of the institution's legal authority to provide postsecondary education, and the due process procedures required by the action have not been completed. If a recognized institutional accrediting agency takes adverse action with respect to the institution offering the program or places the institution on public probationary status, the CoA will promptly review its accreditation of the program to determine if it should take adverse action against the program.

Consistent with Domain A (Eligibility) and Domain H (Relationship with Accrediting Body) of the G&P, the CoA expects each doctoral program to provide accurate information on its sponsoring institution's accreditation status and to keep the CoA informed of any changes in the program's environment, plans, resources, or operations which could affect program quality. Therefore, the CoA expects all doctoral programs to inform it of any adverse or potentially adverse actions by the programs' institutional accreditors. The CoA also expects all doctoral programs to inform it of any actions by a state agency that adversely affect the parent institution's accreditation, authority to provide postsecondary education, or authority to award doctoral degrees.

In addition, the CoA will endeavor to collect information on institutional accreditation/state grant of authority, as follows:

Actions by Nationally-Recognized Accrediting Agencies. Eligibility for CoA accreditation of a doctoral psychology program is based in part on that program being sponsored by an institution accredited by a nationally recognized regional accrediting body (for programs in the United States). Therefore, the CoA has a vested interest in being informed of adverse or potentially adverse actions by regional accrediting bodies. In order that the CoA may be kept apprised of such actions, it will send a letter on an annual basis to all agencies that accredit institutions in which accredited psychology programs are housed. The letter will invite the agencies to keep the CoA informed of any decisions that affect, or potentially affect, any of the CoA-accredited programs. This letter will be accompany the listing of accredited programs, which is forwarded annually to the accrediting agencies outlined in the CoA's "Procedures for Notification of CoA Actions in Accordance with the Secretary of Education's Standards for Recognition of Accrediting Agencies"

Actions by State Agencies. The authority of any accredited doctoral psychology program to provide

training and to award a doctoral degree is granted by the state through the institution in which that program is housed. The CoA will monitor developments with regard to changes in institutional authority to provide postsecondary education as granted by state agencies.

When the CoA receives any information, whether from an accredited program or another source, regarding (a) the potential revocation, or the placing on probation, of a sponsoring institution's accreditation, or (b) the actual or potential suspension, revocation, or termination by a state of an institution's legal authority to provide postsecondary education or to award doctoral degrees, it will review any affected programs' consistency with Domains A and H. Based upon its findings, the CoA will determine appropriate action as set forth in Section 4 of the *Accreditation Operating Procedures*, consistent with the Secretary of Education's regulations.

**D7-4. Procedure for Notice of Reasons for Denial or Revocation of Accreditation by the
APA Committee on Accreditation (CoA)**
(Committee on Accreditation, July 1995)

Section 602.26(d) of the criteria for recognition of the CoA's accrediting activities by the U.S. Secretary of Education states the following:

“For any decision listed in paragraph (b)(2) of this section [i.e., a final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation of an institution or program], [the accrediting agency] makes available to the Secretary, the appropriate State licensing or authorizing agency, and the public upon request, no later than 60 days after the decision, a brief statement summarizing the reasons for the agency's decision and the comments, if any, that the affected institution or program may make with regard to that decision.”

This implementation procedure outlines the steps that will be taken by the CoA, consistent with the Secretary's requirements and with Section 7 (Confidentiality and Public Disclosure of Information) of the CoA's *Accreditation Operating Procedures*.

1. A decision to deny or revoke accreditation is considered final if a formal letter of appeal is not received within the 30-day period following receipt of written notification of the CoA's decision, or if the CoA's decision is upheld by an appeal panel. As required by the U.S. Secretary of Education's criteria for recognition, the Secretary and any other appropriate accrediting agencies are notified at this time, usually by a letter to the Secretary with copies to the other entities and to the program.
2. In addition, once a decision to deny or revoke accreditation is final, a statement to the U.S. Secretary of Education and such other appropriate agencies as required by the Secretary will be drafted, stating the basis of such decision in terms of the domains cited by the CoA and upheld on appeal (if a hearing was conducted). The statement will be forwarded to the program for comment. The program will have 30 days to review the statement and provide written comments to the statement. Representatives of the program will provide signatures to their comments.

The original statement and any program comments will be distributed as required in the recognition criteria (i.e., to the U.S. Secretary of Education and to the public upon request). The statement and comments will be distributed no later than 60 days after the CoA's decision becomes final.

3. In the event that the program does not reply to the request for comment on the statement within the 30-day time period, it will be taken as an indication of agreement with the statement. The statement will be distributed as required.

**D7-5. Timing of Notification by the Committee on Accreditation to the U.S. Secretary of
Education of Final Decisions of Denial, Revocation, or Probation**
(Committee on Accreditation, October 2000)

Section 602.26(b) of the regulations for the U.S. Secretary of Education's Recognition of Accrediting Agencies (34 CFR Part 602, effective July 1, 2000) states the following:

[The agency] provides written notice of the following types of decisions to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the [accreditation] decision, by no later than 30 days after it reaches the decision: (1) a final decision to place an institution or program on probation or equivalent status; (2) a final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation of an institution or program.

This implementation procedure outlines the steps that will be taken by the CoA, consistent with the Secretary's requirements and with Section 7 (Confidentiality and Public Disclosure of Information) of the CoA's Accreditation Operating Procedures. For the purposes of this procedure, "appropriate State licensing or authorizing authority" refers to the psychology licensing board of the state in which the program (doctoral, internship, or postdoctoral residency) is located, and "appropriate accrediting agency" refers to the agency responsible for the accreditation of the institution in which the program is housed (doctoral programs only).

The following CoA decisions are governed by this policy: accredited, on probation, denial of accreditation, and revocation of accreditation. Because these decisions are appealable, they do not become final until either (1) 30 days after the program is notified of the CoA's decision and the program elects not to appeal, or (2) if the program elects to appeal the decision, after receipt of the appeal panel report if the appeal panel upholds the CoA's decision.

1. When the CoA elects to deny or revoke accreditation, or place a program on "accredited, on probation" status, the affected program will receive two letters. The first letter will communicate the CoA's decision and will be mailed no more than 30 days after the CoA meeting per the Accreditation Operating Procedures. The second letter will inform the program that the decision of the CoA has become final and will be mailed either (1) 30 days after the original notification, if the program elects not to appeal the decision, or (2) as a cover letter to the report of the appeal panel, if the program appeals the decision and the decision is upheld by the appeal panel. (Per the Accreditation Operating Procedures, the appeal panel has 30 days to file its report.)
2. The Secretary of Education (or his/her designated Department official), the executive director of the appropriate State licensing agency, and (for doctoral programs) the executive director of the appropriate institutional accrediting agency will be listed as recipients of copies of the letter which communicates that the decision has become final. These individuals, however, will not receive copies of any attachments, such as appeal hearing reports.

D8. Miscellaneous procedures

D8-1. Procedure for Program Consultation and Accreditation Office Maintenance of Program Accreditation Records (Committee on Accreditation, October 1997)

Section 602.15(b) of the criteria for recognition of the CoA's accrediting activities by the U.S. Secretary of Education states the following:

“The agency maintains complete and accurate records of (1) its last two full accreditation or preaccreditation reviews of each institution or program, including on-site evaluation team reports, institution's or program's responses to on-site reports, periodic review reports, any reports of special reviews conducted by the agency between regular reviews, and a copy of the institution's or program's most recent self-study; and (2) all decisions regarding the accreditation and preaccreditation of any institution or program, including all correspondence that is significantly related to those decisions.”

This implementation procedure outlines the steps that will be taken by the CoA, consistent with the Secretary's requirements.

1. An accreditation history will be maintained for each program. This information will include dates of review for accreditation and the final decision resulting from the review.
2. The Program Consultation and Accreditation Office will maintain the following records for each program:
 - a. The program's most recent self-study report.
 - b. The site visit reports and responses from the program's two most recent periodic reviews.
 - c. The decision letters from the program's two most recent periodic reviews.
 - d. Reports of special site visits, and responses from the program, held during the period of the program's two most recent periodic reviews.
 - e. All annual reports submitted by the program following its two most recent periodic reviews.
 - f. All other routine and non-routine correspondence between the program and the CoA/Program Consultation and Accreditation Office following the program's two most recent periodic reviews.
 - g. All correspondence between the program and the CoA/Program Consultation and Accreditation Office pertaining to the program's appeal of an accreditation decision (if any) or complaints filed against the program (if any) that occurred following the program's two most recent periodic reviews.

**D8-2. Groups to Receive Notification of Proposed Changes in the Accreditation
Guidelines and Principles and Operating Procedures**
(Committee on Accreditation, October 1998)

Section 6.d of the “APA Policies for Accreditation Governance” states the following:

“The Committee on Accreditation [CoA] shall be responsible for formulating, promulgating, and implementing accreditation policies, procedures, and criteria following appropriate public notice, public hearings, and approval. Such public notice shall include the members of the Council of Representatives, the Board of Directors, and the Board of Educational Affairs, as well as those persons and programs potentially affected by any proposed changes in accreditation policies, procedures, and criteria.”

In addition, Section 602.21(c) of the criteria for recognition of the CoA’s accrediting activities by the U.S. Secretary of Education states the following:

“If the agency determines, at any point during its systematic program of review, that it needs to make changes to its standards, the agency must initiate action within 12 months to make the changes and must complete that action within a reasonable period of time. Before finalizing any changes to its standards, the agency must (1) provide notice to all of the agency’s relevant constituencies, and other parties who have made their interest known to the agency, of the changes the agency proposes to make; (2) give the constituencies and other interested parties adequate opportunity to comment on the proposed changes; and (3) take into account any comments on the proposed changes submitted timely by the relevant constituencies and by other interested parties.”

This implementation procedure identifies the parties to be informed of proposed changes in the CoA’s *Guidelines and Principles for Accreditation of Programs in Professional Psychology (G&P)* and *Accreditation Operating Procedures*, consistent with the requirements as set forth in the preceding documents.

A. Groups that will receive notice of proposed substantive G&P/Operating Procedures changes

1. Governance of the American Psychological Association (APA)

All members of:

- APA Council of Representatives
- APA Board of Directors
- APA Board of Educational Affairs

Current Presidents of:

- APA Division 12 (Clinical Psychology)
- APA Division 17 (Counseling Psychology)
- APA Division 16 (School Psychology)

- APA Division 42 (Private Practice)
- APA Committee on Women in Psychology
- APA Committee on Gay, Lesbian, and Bisexual Concerns
- APA Committee on Minority Affairs
- APA Committee on Disabilities

2. Parties directly involved in the accreditation process

- Training directors of accredited programs
- Accreditation site visitors
- Members of standing accreditation appeal panel pool

3. Psychology groups to which seats on the CoA are formally allocated

- Council of Graduate Departments of Psychology (COGDOP)
- Council of University Directors of Clinical Psychology (CUDCP)
- Council of Counseling Psychology Programs (CCPTP)
- Council of Directors of School Psychology Programs (CDSPP)
- National Council of Schools and Programs of Professional Psychology (NCSPP)
- Association of Psychology Postdoctoral and Internship Centers (APPIC)
- APA Board of Professional Affairs (BPA)
- APA Committee for the Advancement of Professional Practice (CAPP)
- American Psychological Association of Graduate Students (APAGS)

4. Other groups within the psychology community

- Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN)
- Clinical Neuropsychology Synarchy (CNS)
- American Association of State and Provincial Psychology Boards (ASPPB)
- American Board of Professional Psychology (ABPP)
- State Psychology Boards
- State Psychological Associations
- National Register

5. Other groups with an interest in accreditation

- U.S. Department of Education
- Commission for Accreditation of Higher Education (CHEA)
- Association of Specialized and Professional Accreditors (ASPA)
- All accrediting agencies that are recognized either by the Secretary of Education or the Commission on Recognition of Postsecondary Accreditation (CORPA)/CHEA; and/or are members of ASPA

B. General Comments on Dissemination

1. All recipients of a notice of proposed changes will be encouraged to disseminate copies of the proposed changes with their members/constituents.

2. In addition to distributing the proposed changes to the groups outlined previously, the Committee on Accreditation will publish a notice of call for comment in *The APA Monitor* and post the announcement on its Web site, along with instructions on how to obtain a copy of the proposed changes.

3. The Committee on Accreditation reserves the right to expand its distribution of proposed changes as may be appropriate in the specific instance. In addition, the Committee will review this list every three years to determine what other groups, if any, should be added for automatic receipt of proposed changes.

D8-3. Committee on Accreditation Meeting Procedures

(Committee on Accreditation, originally adopted May 1987; revised July 2000)

1. CLOSED SESSION. Due to its confidential nature, the CoA will conduct its primary business (i.e., that pertaining to program accreditation reviews and decisions) in closed session. Closed sessions include only CoA members, APA Office of Program Consultation and Accreditation staff, legal counsel (when necessary), and the officially designated liaisons to the CoA from the BEA and the APA Board of Directors. When appropriate, CoA might invite certain people to attend, such as observers from agencies that recognize activities of accrediting organizations. In those instances, all programs scheduled for review at that meeting will be so notified. The CoA is authorized to conduct specific business in executive session if necessary. Executive session includes only CoA members and the liaisons appointed by the BEA and the Board of Directors. In such instances the CoA chair will confer with senior staff liaison on the matter of whom else shall attend.

2. OPEN SESSION. The CoA is authorized to conduct business in a specifically designated open session on certain occasions when information from other sources within or outside of APA would be of benefit to CoA members or on those occasions in which the CoA wishes to provide information to other individuals or groups. Open sessions include any individuals who request admittance, invited guests, and any APA members as well as APA staff. In general most CoA deliberations other than program accreditation reviews are conducted in open session.

3. MEETING TIMES. Meeting times will be arranged by the full CoA with decisions determined by majority vote. Changes in meeting times or arrangements for additional meetings will be arranged by Executive Committee in consultation with APA Office of Program Consultation and Accreditation staff. Issues relevant to these arrangements will be budget, CoA member availability, and factors related to availability of meeting facilities.

4. ATTENDANCE. Members are expected to attend all scheduled meetings of the CoA in their entirety. A member who is absent for all of one meeting will be contacted by the Chair of the CoA to determine whether the absent CoA member can attend future meetings regularly. Failure to attend a second meeting during the members' term of service will constitute resignation from the CoA. Extenuating circumstances will be considered by the CoA.

5. QUORUM. In accordance with the *Accreditation Operating Procedures*, two-thirds of the members shall constitute a quorum for the purpose of making a decision on a program. When a CoA member has withdrawn from a portion of the meeting (e.g., as in a real or perceived conflict of interest situation), that position will not be counted in determining a quorum. The vote of the majority of the CoA members at a meeting at which a quorum is present shall be required to make a program decision.

6. LIAISON. The role of the BEA and the Board of Directors liaisons is to (a) share with the CoA perspectives on educational and training issues, generally; (b) observe the operations of the CoA in the context of its procedures; and (c) share with the BEA and Board of Directors, respectively, general policy issues of concern to the CoA.

7. AGENDA. Agenda items cover areas of CoA responsibility as outlined in “Policies for Accreditation Governance” (section 2). No formal action will be taken on any matter of business that is not an official part of the CoA agenda at a particular meeting. Agenda items of the highest priority will be those pertaining to program accreditation decisions and such other matters as may affect the status of accredited programs.

8. AGENDA ITEMS PRESENTERS. In consultation with the CoA Chair, APA Office of Program Consultation and Accreditation staff assign primary responsibility for study and presentation of particular agenda items to individual CoA member(s) by means of written notification in the regular agenda mailing, with the exception of program review. These items will be assigned by the Associate Chair for Program Review. All assignments are subject to change, should a CoA member be in conflict of interest with the program being considered.

9. AVOIDANCE OF CONFLICT OF INTEREST.

a. CoA members. Should a member of the CoA be in a real or perceived possible conflict of interest with respect to any program scheduled for review by the CoA at any particular meeting, that member will be excused during discussion and decision on that program. Further, the CoA may determine that a member is in possible conflict of interest and ask that member to abstain or be recused from discussion and decision on a particular program. CoA members shall adhere to their published conflict of interest policy [see Section D6-1 of this regulations document].

b. BEA/Board of Directors liaisons. Should one of the CoA’s BEA/Board of Directors liaisons be in a real or perceived possible conflict of interest with respect to any program scheduled for review by the CoA at any particular meeting, that liaison will be excused during discussion and decision on that program. Further, the CoA may determine that a liaison is in possible conflict of interest and ask that liaison to be recused from discussion and decision on a particular program. CoA liaisons shall adhere to their published conflict of interest policy [see Section D6-4 of this regulations document].

10. CoA ACTIONS. CoA actions on any agenda item are not considered final until the adjournment of a regularly scheduled meeting. CoA decisions regarding program review are made in accordance with the *Guidelines and Principles for Accreditation of Programs in Professional Psychology* and the *Accreditation Operation Procedures*.

11. CONSULTATION SERVICES. During the term of his/her appointment to the CoA, and for a period of one year thereafter, no CoA member shall offer consultation services to programs (reimbursed or non-reimbursed) for the purpose of assisting them to seek or maintain their accreditation status. The liaisons to the CoA appointed by the BEA and Board of Directors shall follow the same procedure.

12. CoA MEMBER SITE VISIT.

a. Regular site visits. CoA members shall be removed from the regular pool of site visitors during their tenure on the CoA. In special circumstances (e.g., for unusual or extremely difficult accreditation decisions or for CoA members’ training purposes), this rule may be temporarily suspended and a CoA member may serve as a site visitor in a specific instance. Such members may

not be an official member of the site team and shall not participate or vote on the CoA's review and action on the program.

b. Special site visits. The CoA may conduct special site visits either in the investigation of formal complaints or of specific G&P-related concerns that require further review. The CoA may appoint one or more of its members to conduct these site visits. These site visitors will produce a detailed written report including any issues that arose during the visit. They also may make themselves available to answer any questions that the primary/secondary reviewers and the review panel may have in formulating a recommendation for the full CoA. Members on special site visits are not required to be recused from participating on the CoA's decision regarding the program in question.

13. CONFIDENTIALITY. CoA members and the BEA and Board of Directors liaisons will maintain the confidentiality of the program review materials presented at each meeting. All materials shall be kept confidential except: (a) a list of all accredited doctoral programs and internship training programs shall be published in the *American Psychologist*; (b) disclosure shall be made in those instances when the APA is legally required to disclose such information; and (c) at the request of the chief executive officer of the institution where a doctoral program is housed or the administrative head of an internship program, or with his or her consent, information on a specific program may be made available upon request to other accrediting agencies recognized by the CHEA by which the institution has been accredited or whose accreditation it is seeking.

14. EXECUTIVE COMMITTEE (revised by the Committee on Accreditation, October 25, 1998). There will be an Executive Committee appointed by the CoA chair to act for the CoA between meetings on accreditation matters other than the making of program decisions as outlined in Section 4 of the *Accreditation Operating Procedures*. Members of the Executive Committee will be selected at the discretion of the chair to represent the diversity of constituent groups responsible for nominating members of the CoA. The Executive Committee will include at least one member each in his/her first, second, or third year of the CoA; as well as any associate chairs that may be designated by the Chair to facilitate CoA business.

15. AVOIDANCE OF ANTITRUST LIABILITY. Each CoA member shall be familiar with and adhere to "Guidelines for Board/Committee Members on Avoiding Antitrust Liability."

16. ANNUAL REPORT. The CoA, with assistance of Office of Program Consultation and Accreditation staff, shall prepare a non-confidential annual report of its activities for the BEA, the APA governance, and the general public.

**D8-5. Training for New Committee on Accreditation Members and Official Liaisons to
The Committee on Accreditation**
(Committee on Accreditation, July 2000)

Committee on Accreditation (CoA) members and officially-designated liaisons from the Board of Educational Affairs and the Board of Directors to the CoA participate in and/or are privy to (as appropriate to their roles) a number of accreditation-related activities, including review and decision making on programs and determination of policy regarding accreditation issues. These functions require the exercise of professional judgment and awareness of actual or perceived conflict of interest. In addition, members and liaisons frequently are presented with accreditation issues of a sensitive and/or confidential nature. Because of the need for a thorough understanding of the accreditation review process, consistency in decision making on programs, and sensitivity to confidentiality in accreditation, each new member and liaison to the CoA will be required to undergo training prior to being permitted to participate in the confidential (closed) portions of CoA meetings. Minimally, such training will cover the accreditation program review process, conflicts of interest in accreditation, and communication and consultation with accredited programs.

An orientation for new members/liaisons will be scheduled by the APA Office of Program Consultation and Accreditation. The orientation will occur prior to the first regularly-scheduled meeting following the beginning of the terms of service for the new members/liaisons. The date of the orientation will be selected upon consultation with the new members/liaisons on dates that they will be available to attend. Should a new member/liaison be unable to attend that orientation session, he/she will receive training at the prerogative of the CoA chair in consultation with the Executive Committee.

NOTE: D8-4 (Committee on Accreditation Policy on Research Studies) is in a separate file. The file can be found at

EDPRG:\ACCRED\POLICY\Policy on Research Studies Sept 1998.