

ACCREDITATION OPERATING PROCEDURES

Commission on Accreditation
c/o Office of Program Consultation and Accreditation
Education Directorate
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Foreword

With implementation of these accreditation guidelines and procedures developed by the Committee on Accreditation, a new chapter opens in the history of accreditation in psychology. More than 60 years ago, in December 1945, the Veterans Administration requested of the (then) recently reorganized American Psychological Association (APA), through its board of directors, a list of universities that could provide adequate training at the doctoral level in clinical psychology to meet the nation's needs for providers of psychological services to armed forces veterans. Within a year of that request, 22 universities were identified, as were the faculty curricula and facilities criteria by which the universities were judged. Thus, in effect, began the accreditation of education and training programs in psychology. As of the beginning of 2012, there are over 370 accredited doctoral programs, approximately 470 accredited internship programs, and more than 65 accredited postdoctoral programs.

- The current *Guidelines and Principles for Accreditation of Programs in Professional Psychology* (G&P) and the *Accreditation Operating Procedures* (AOP) were approved by the Committee on Accreditation and APA in 1995 for implementation January 1, 1996.
- Guidelines for accreditation of postdoctoral training programs were similarly adopted and included in the guidelines document in August 1996.
- In 1999, the Committee on Accreditation made and adopted targeted changes to the G&P and to the AOP to come into full compliance with the U.S. Secretary of Education's regulations for recognition of accrediting agencies.
- Again in 2001 and 2002, the Committee made targeted changes to the G&P and to the AOP. The changes, made primarily to the AOP, included accrediting internship programs for up to 7 years and making adjustments to the appeal process.
- In 2003, the AOP were modified to extend the maximum interval between postdoctoral residency program site visits from 5 to 7 years. In addition, the G&P were updated to reference the current *APA Ethical Principles of Psychologists and Code of Conduct*.
- In 2004, following a period of public comment and approval by the APA Board of Directors, the Committee adopted a number of changes to the AOP in order to improve the accreditation process and assure continued compliance with the U.S. Secretary of Education's requirements. These changes were in effect for all programs undergoing review as of July 1, 2005.
- In 2005, Domain A.5 of the G&P was updated to be consistent with the current definition of diversity as found in the *APA Ethical Principles of Psychologists and Code of Conduct*.
- In 2006, following a period of public comment and approval by the APA Council of Representatives, the scope of accreditation changed, eliminating the term "emerging substantive areas" and including accreditation of developed practice programs.
- In 2006, the APA Council of Representatives also adopted the recommendations of the Snowbird Summit for changing the 21-member *Committee on Accreditation* to the 32-member *Commission on Accreditation* in order to allow for more representation. This new structure, as well as the name "Commission," was in effect on January 1, 2008.

- Sections 6.1 to 6.1.2 of the AOP were modified to extend the timeframe for students, interns, and residents to file complaints against accredited programs, effective July 1, 2007.
- Section 4.2 of the AOP was modified to include “denial of a site visit” as a potential accreditation decision, effective January 1, 2008.
- No new applications from programs located in Canada were accepted as of January 1, 2008. APA accreditation of all programs located in Canada will end on September 1, 2015.
- Section 8 of the AOP was modified to clarify that the outcomes of programs applying for initial accreditation will be made public in 2008.
- In 2009, the Commission made changes to the AOP consistent with the language in the regulations of the Higher Education Opportunity Act of 2008 in amending section 5.5 and adding section 5.6.
- In 2011, the Commission made changes to its procedures for probation and revocation, consistent with the requirements by the US Department of Education to ensure continued recognition as an accrediting agency (Section 4). The Commission also made an effort to clarify the language in other sections of the AOP at the time of these changes.

Introduction

Functions and Structure of the Commission on Accreditation

(Adapted from the "Policies for Accreditation Governance" [adopted by the APA Council of Representatives on August 18, 1991, amended by the Council of Representatives on February 18, 1996, amended by the Council of Representatives on August 9, 2006], Sections 2, 3, and 4 and effective January 1, 2008).

Functions of the Commission on Accreditation

The Commission 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 Secretary of the U.S. Department of Education and the Council for Higher Education Accreditation (CHEA), the Commission on Accreditation shall:

1. Formulate and promulgate accreditation policy that is informed by input from review panels, the annual Accreditation Assembly, and the field in general.
2. Make final program accreditation decisions, taking into account the recommendations received from review panels.
3. Manage, staff, and participate in the panel review process.
4. Organize and convene the annual Accreditation Assembly.
5. Maintain and assure quality of the site visitor function and panel review process.
6. Develop and maintain inter-organizational relationships across the full spectrum of psychology education and training entities.
7. Engage in timely and relevant self-studies and self-evaluations for the purpose of enhancing the quality and credibility of the accreditation review process.
8. Hear and adjudicate complaints from individuals and organizations.
9. Participate as prescribed in the accreditation decision appeal process.
10. Assure openness and periodic review of policies and procedures to ensure that innovation is supported.
11. Provide appropriate consultative guidance and general information about the accreditation process and its purposes through the Office of Accreditation.
12. Conduct evaluative and developmental research appropriate to accreditation.

* 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.

13. Appoint program review panels, consultants, and task forces as needed, within policy and fiscal constraints.
14. Maintain the CoA's status as a recognized professional specialty accrediting body with the U.S. Department of Education and the Council for Higher Education Accreditation.

Structure of the Commission 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 Commission on Accreditation is based. One additional principle is that appointments to the Commission 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 32 persons appointed to the Commission on Accreditation. To achieve appropriate balance between academic institutions and programs, practitioners of the profession, and the publics served by accreditation, appointments to the Commission 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 – Breadth of the Scientific Discipline of Psychology (N=5)

I.A. Academic leadership for graduate education in the discipline of psychology at the departmental level of administration or higher

- Four seats nominated by the executive board of the Council of Graduate Departments of Psychology (COGDOP)

I.B. Representative of the core scientific activities of the discipline of psychology

- One seat nominated jointly by the Association for Psychological Science and the Board of Scientific Affairs of the American Psychological Association (APS/BSA).¹

Domain II – Professional Education and Training in Psychology (N=16)

II.A. Training program leadership (N=5)

- One seat nominated by the board of the Association of Psychology Postdoctoral and Internship Centers (APPIC)
- One seat nominated by the board of the Council of Counseling Psychology Training Programs (CCPTP)
- One seat nominated by the board of the Council of Directors of School Psychology Programs (CDSPP)
- One seat nominated by the board of the Council of University Directors of Clinical Psychology (CUDCP)

- One seat nominated by the board of the National Council of Schools and Programs of Professional Psychology (NCSPP)

II.B. Leadership in professional education (N=1)

- One seat nominated jointly by the Board of Educational Affairs of the American Psychological Association and the National Council of Schools and Programs of Professional Psychology (BEA/NCSPP)

II.C. Professional peers nominated from program review panels (N=10)

- One seat nominated by the appropriate nominating authority from each group of program review panels for the varied areas and levels of training in professional psychology that are accredited.
 - Doctoral Panels (5)
 - One seat nominated by the Academy of Psychological Clinical Science (APCS)
 - One seat nominated by NCSPP
 - One seat nominated by CCPTP
 - One seat nominated by CDSPP
 - One seat nominated by CUDCP
 - Internship Panels (4)
 - Two seats nominated by APPIC
 - Two seats nominated by other organizations involved directly in internship training
 - Post-Doctoral Panel (1)
 - One seat to be determined through an open solicitation for nominations from organizations involved directly in postdoctoral training (e.g., CoS, APPIC)

Domain III - Practitioners of the Profession Representing Independent, Institutional, and Specialized Practice – (N=5)

III.A. Independent and institutional practice (4)

- Two seats representing institutional practice and two seats representing independent practice will be nominated jointly by APA's Board of Professional Affairs and Committee for the Advancement of Professional Practice (BPA/CAPP).

III.B. Specialized practice (1)

- One seat nominated by the Council of Specialties (CoS).

Domain IV - Representatives of the Public Interest (N=3)

IV.A. General Public (N=2)

- Nominations for both seats to be solicited at large by the CoA from a broad range of education and public interest groups with nominees to be persons with breadth of community perspective and leadership experience who are not psychologists.

IV.B. Public Interest: Individual and Cultural Diversity (N=1)

- One seat to be determined from an open solicitation of nominations, including from BAPPI, for a psychologist who brings scholarly expertise on issues of individual and cultural diversity in the context of advancing the science and

practice of psychology in public service for appointment to a three-year, non-renewable term.

Domain V – Graduate Student Consumers of Education and Training (N=1)

- One seat nominated by the board of the American Psychological Association of Graduate Students (APAGS) for appointment to a one-year term.

Open Seats (N=2)

Without regard to the Domains identified above, the CoA will solicit nominations from groups, organizations, and individuals to identify psychologist nominees for two open seats. Appointments will be made from the range of nominees for three-year, non-renewable terms to allow for greater flexibility and responsiveness to the development and evolution of the field and to provide opportunities to be informed by the annual Accreditation Assembly. Initially, on a three-year cycle, one nominee for an Open Seat will be appointed in each of the first two years, followed by an appointment of a nominee from Domain IV.B, Public Interest.

Accreditation Operating Procedures of the Commission on Accreditation

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Section 8. CONFIDENTIALITY AND PUBLIC DISCLOSURE OF INFORMATION

1. APPLICATION FOR INITIAL ACCREDITATION

1.1 Application

Eligibility guidelines for accreditation are provided in the *Guidelines and Principles for Accreditation of Programs in Professional Psychology (G&P)* available under separate cover from the APA Office of Program Consultation and Accreditation. The accreditation process is initiated by the program that wishes to submit itself for review; and the burden of proof for consistency with the G&P rests with the applicant.

Applicants for initial accreditation begin the process by submitting a self-study report. Instructions for preparing the report are provided by the Office of Program Consultation and Accreditation. Applications may be submitted to the Office of Program Consultation and Accreditation at any time during the year and must be accompanied by a non-refundable application fee.

1.2 Review for Initial Site Visit

Upon receipt of an initial application, the Office of Program Consultation and Accreditation will confirm receipt of the required application fee. The accreditation process begins with a review by staff of the application in terms of the extent to which the materials include information responsive to the self-study instructions. Following review of the application, one of the following actions will be taken by staff:

- (a) Authorize a site visit after approval by CoA reviewers;
- (b) Defer authorization pending receipt of any missing self-study materials;
- (c) Refer to the CoA for full review. Following this review, the CoA may choose among the following decision options:
 - (1) Authorize a site visit (questions may be provided to the program and to the site visitors for consideration during the site visit);
 - (2) Defer authorization pending receipt of additional information and/or clarification of the self-study materials; or
 - (3) Deny a site visit (see Section 4.2(f)).

The CoA is solely responsible for selecting among the above actions in response to the review of the application.

1.3 Withdrawal of Application for Accreditation

A program may withdraw its application without prejudice at any time before the CoA makes an accreditation decision.

2. REAFFIRMATION FOR CONTINUED ACCREDITATION

Accredited programs are reviewed annually by written report. Accredited programs are also assessed an annual fee. In addition, each accredited program undergoes a more extensive periodic review that involves a self-study report and a site visit. Immediately following the site visit, the program is assessed a site visit fee. Instructions for preparing annual reports and the periodic self-study reports are sent to programs by the Office of Program Consultation and Accreditation, in

accordance with the CoA directions.

2.1 Annual Review (Reaffirmation)

Annual reaffirmation of a program's accredited status is based on the CoA's review of any narrative annual report information requested and the data provided in the Annual Report Online. If either report or the information reported is not complete or raises questions about the program's continued consistency with the G&P, which is to include any information or actions that may have been taken by regional accrediting bodies or state agencies regarding the institution's accreditation and/or authority to grant degrees, the CoA may, at any time, request additional information or an invitation for a site visit. The CoA's request will state the explicit reasons for the CoA view that a visit is needed.

2.2 Periodic Review

Accredited programs are scheduled by the CoA for the year of their next site visit at the time that an accreditation decision is made. In preparation for that review, programs are expected to prepare a self-study report, demonstrating their continued consistency with the G&P.

Upon receipt of a self-study report in anticipation of the periodic review, the staff will review the self-study report to determine the extent to which the materials include information responsive to the self-study instructions. One of the following actions will be taken by staff:

- (a) Authorize a site visit;
- (b) Postpone approval for a site visit, pending receipt of additional information from the program; or
- (c) Refer to the CoA for full review. Following this review, the CoA may choose among the following decision options:
 - (1) Authorize a site visit (questions may be provided to the program and to the site visitors for consideration during the site visit); or
 - (2) Defer authorization pending receipt of additional information and/or clarification of the self-study materials

2.3 Withdrawal From Accredited Status

A program may request to voluntarily withdraw from accredited status at any time by advising the CoA of its intent in writing in advance of the requested withdrawal date. Programs requesting voluntary withdrawal will be placed on the next CoA agenda for official vote of the program's change in accredited status.

In addition, the CoA has the authority to delete a program from the list of accredited programs when the CoA concludes that the program is no longer in existence. In such instances, the program will receive prior notification of the pending action.

Furthermore, accredited programs assume the responsibility and obligation to provide certain information and payments to CoA in a timely manner as set forth in the G&P and these *Accreditation Operating Procedures*. An accredited program will be deemed to have decided to voluntarily withdraw from accreditation, thereby terminating its accredited status, if it fails to satisfy

any of the following requirements:

1. Providing a self-study by the designated due date (see Section 2.2);
2. Scheduling a site visit so as to allow completion of the periodic review before the end of the program's accreditation review cycle as designated by the CoA (see section 3);
3. Submitting its annual report by the designated due date;
4. Submitting payment of its annual fee by the designated due date; or
5. Failing to submit information requested in the course of program review by the designated due date.

If delay in meeting these requirements is based on exceptional circumstances beyond the control of the program that preclude the program from meeting its accreditation responsibilities, the chief executive officer or the president of the institution in which the program is located may apply to the CoA (or its Executive Committee* if authorized by the CoA) with supporting evidence for an extension of the deadline.

The CoA will confirm the withdrawal of a program in writing no later than 30 days in advance of the effective date of the program's withdrawal from accreditation. The program will have a final chance to respond to this correspondence. The effective date of withdrawal will be deemed as no more than 60 days after the program has withdrawn from accreditation by failing to meet its obligations as an accredited program. The CoA will notify the public of the change in status. A program that has withdrawn under this provision retains the right to reapply subsequently as an applicant.

3. SITE VISIT

Site visits are conducted as part of the review for initial accreditation and as part of the periodic review of an accredited program. For accredited programs, the CoA will request an invitation to schedule a site visit from:

- (a) The Chief Executive Officer of the institution in which a doctoral program is housed;
or
- (b) The appropriate administrative officer of the agency in which an internship or postdoctoral residency program is housed.

For accredited programs, the signed self-study transmittal page serves as the formal invitation to site visit the program and conduct an accreditation review. For applicant programs, the accreditation application and the signed self-study transmittal page serve as the formal invitation to site visit the program and conduct an accreditation review.

If a site visit is not arranged within the assigned review cycle which precludes the program from meeting its accreditation responsibilities, the program will be deemed to have withdrawn from accredited status at the end of the review cycle (in accordance with Section 2.3).

Within the year in which they are scheduled for a periodic review by the CoA, accredited doctoral programs will be assigned randomly to one of two review cycles for their site visits (January – June; August – December). Accredited internship programs and postdoctoral residencies will be assigned randomly to one of three cycles for their site visits (January - March; April - August; September - December). The specific dates of the site visit within the cycle are chosen by the

* Throughout this document, CoA may refer to the Commission on Accreditation in its entirety, the CoA Executive Committee, or its duly authorized representative(s).

program. A change of cycle may be requested by the program in writing to the Chair of the CoA for exceptional circumstances only.

Programs that have received authorization for an initial accreditation site visit will be assigned to the next available review cycle.

3.1 Site Visit Team

The Office of Program Consultation and Accreditation will maintain a database of potential site visitors appointed by the CoA. The CoA will prepare lists of site visitors from this database. Ideally, no site visitor will participate in more than two site visits per year. Training will be provided for site visitors, and their performance will be evaluated by the CoA regularly, based on information from programs and other relevant sources.

The program 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. The proposed site visitors will be notified prior to their inclusion on a list in order to confirm their availability during the relevant review cycle and identify issues of bias or conflict of interest. Identification of such issues shall be a continuing duty of the site visitors. Additional names will be provided only for cases in which the entire list raises issues of conflict of interest or bias or other prejudicial infirmity for the program. In such cases, the program must provide the CoA with documentation of perceived conflict of interest, bias, or prejudicial infirmity for its determination.

In addition to the chair, site teams for doctoral programs will have at least two other members, and internship and postdoctoral residency 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 all 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 will be constructed based on experience in psychology in an area outside the scope of accreditation. Programs may request an additional site visitor (e.g., in a case in which two programs at one institution are having a combined visit). The CoA also may request that a program have an additional site visitor (e.g., in a case in which a specific G&P-related concern is being investigated).

Additional names for the second (and third) visitor will be provided only for cases in which the program notifies the CoA in writing of either a potential or actual conflict of interest, bias, prejudicial infirmity, or unavailability of all the individuals on the list(s). The CoA will review program challenges to the lists of potential site visitors before deciding if new lists should be provided.

The CoA relies on the expertise and judgment of the site visit team to verify the self-study report, to further explore the unique characteristics of the program, and to report additional information relevant to the G&P. Site visitors also will be responsible for obtaining information responsive to questions raised by the CoA readers in the pre-site visit review of program materials. Site visitors may themselves raise questions following their review of the self-study and should include the program's response to those questions in their report.

A typical site visit is scheduled for a period of two full days during which time the site visit team will meet with appropriate representatives of the host institution's administration who are associated with the program, departmental and program faculty/staff, and students/interns/residents of the program.

3.1.1 Special Site Visit

The Commission on Accreditation may vote to conduct a special site visit in lieu of or in addition to a regular site visit to the program in keeping with its mandate to protect the public and maintain program quality. The special site visit is viewed by the Commission as an opportunity to interact directly with the program. It affords the Commission the opportunity to collect information as to the program's operation and to address questions that are not fully answered by the record before the Commission. In that regard, special site visits are intended to be beneficial to both the Commission and the program. A special site visit team may include one or more members of the Commission, or other individuals selected by the Commission.

3.2 Site Visit Report and Program Response

Within 30 days of the completion of the visit, the site visit team will deliver to the Office of Program Consultation and Accreditation a report in a format prescribed by the CoA. The report will address the program's consistency with the G&P and address any questions posed by the CoA prior to the visit. The site visit team may, at its discretion, provide the CoA with evaluative comments related to the program's strengths and weaknesses and overall consistency with the G&P but should not make a specific accreditation recommendation. It should be clear to the program, however, that evaluative comments represent the opinions of the site visitors and do not represent an accreditation decision.

After the site visit report is submitted, any communications between the site visit team and the program regarding the site visit must be conducted through the Office of Program Consultation and Accreditation, rather than directly between the site visit team and the program.

A copy of the site visit report will be provided to the program. The program should confirm that it has received the report. The program may also provide written comment or response to any aspect of the report. Such response must be delivered to the Office of Program Consultation and Accreditation within 30 days of receipt of the report by the program or its host institution. Upon written request by the program, the period for responding may be extended by the Chair of the CoA for an additional period not to exceed 30 days. The CoA will proceed with the review of a program once it has received the program's response. In the absence of a response from the program within the allotted time, the CoA will proceed with the review of the program.

In its response to the site visit report, the program should correct any errors of fact and provide evidence to counter anything in the report with which the program does not concur. Any statements of fact in the report which are not challenged in the program's response may be considered by the CoA to be undisputed. The CoA will review the site visit report and all other relevant documents that it has received, and after considering all elements of the program review, will accept sole responsibility for the accreditation decision.

4. PERIODIC REVIEW BY THE COA

A periodic review by the CoA is one in which a decision may be made about a program's accreditation status. The periodic review follows receipt of (a) a self-study report by the program;

(b) site visit report; and (c) the program's response to the site visit report. These requirements apply equally to programs making initial application for accreditation and those seeking continuation of accredited status.

4.1 Guiding Principles of the Periodic Review

In all reviews, the CoA 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 G&P.

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 and any third-party comments and responses to those comments that have been received (consistent with Section 7 of these procedures).

In making a decision, the CoA will also consider the program's outcomes in light of the program's stated educational goals and objectives and the importance of ensuring that students/interns/residents are adequately prepared for entry into practice.

4.2 Accreditation Statuses and Decision Options

The following decisions are available to the CoA with respect to the accredited status of a program:

- (a) "Accredited" designates a program which, in the professional judgment of the CoA, is consistent, substantively and procedurally, with the G&P. Accredited programs are scheduled for periodic review every 3-7 years.
- (b) "Accredited, inactive" designates a doctoral program that has not admitted students for two successive academic years or has provided the CoA with notice that it has decided to phase out and close the program, or a one-year internship or post-doctoral residency program that will not be accepting funded interns/residents for a given training year. In the case of an internship or postdoctoral residency program that takes two years to complete, the program may be designated as "accredited, inactive" if the program undergoes a period of two successive years with no funded interns/residents. Requests for inactive status are granted by the CoA for one year at a time. Request for renewal of inactive status must be done prior to the beginning of the academic/training year. An internship or residency program is expected to make such a request in writing as soon as it has determined whether it will be accepting interns/residents. Programs not granted renewal of inactive status are given notice that they are no longer compliant with the provisions of accreditation and then may be placed on probation.
- (c) "Accredited, on probation" is considered by the CoA to be an adverse action. It serves as notice to the program, its students/interns/residents, and the public that in the professional judgment of the CoA, the accredited program is not currently consistent with the G&P and may have its accreditation revoked. Prior to this

decision, the program will be given an opportunity to show cause why it should not be placed on probation by providing a written response to the issues of concern. The program's show cause response will be reviewed two (2) CoA meetings after the program was provided the show cause notice. Programs that are still not in compliance at the time of the CoA's review are then placed on "accredited, on probation" status.

Following placement on "accredited, on probation" status, the program is given a time certain in which to come into compliance with the issues identified by the CoA in the probation decision letter. Doctoral programs must provide a response to the issues within four (4) CoA meetings after the probation decision was reached. Internship and post-doctoral residency programs must provide a response to the issues within two (2) CoA meetings after the probation decision was reached. In the case of a school psychology internship program that is 10 months in length, the program must provide a response within one (1) CoA meeting after the probation decision was reached.

- (d) "Revocation of accreditation" is considered by the CoA to be an adverse action. It designates a program that has previously been placed on "accredited, on probation" status and for which the CoA has evidence that the program continues to be substantively inconsistent with the G&P at the time of its review of the program's response to the probation. A decision to revoke a program's accreditation reflects the CoA's determination that the program will not become consistent with the G&P within a reasonable time.
- (e) "Denial of accreditation" is considered by the CoA to be an adverse action. It designates an applicant program which, in the professional judgment of the CoA, is substantively inconsistent with the G&P. Prior to this decision, the program is given an opportunity to show cause why it should not be denied accreditation through a written response to the issues of concern.
- (f) "Denial of a site visit" is considered by the CoA to be an adverse action. It designates an applicant program which, in the professional judgment of the CoA, is not ready for a site visit. Prior to this decision, the program is given an opportunity to show cause why it should not be denied a site visit through a written response to the issues of concern.

4.3 Decision Process

A quorum of the CoA, two-thirds of its members, must be present at a scheduled meeting to make an accreditation decision on a program. If a CoA member has recused him/herself from a portion of the meeting because of a conflict or perceived conflict of interest, that person will not be counted in determining a quorum. Accreditation decisions reflect the majority view of CoA members.

In the case of a program initially applying for accreditation, the CoA will determine whether to grant or deny the program accreditation. In the case of an accredited program, the CoA will determine whether to reaffirm the program's present status. When a program's current accredited status is not renewed, it will automatically become a program whose status is "accredited, on probation."

In the case of an accredited program that has been placed on probation, the CoA will determine whether to restore the program's status from "accredited, on probation" to "accredited" or revoke

accreditation. A program returned to accredited status will have a self-study due **one (1) year** after receipt of the decision letter for a full review and site visit. A program that does not have its status restored to “accredited” will have its accreditation revoked. In extraordinary circumstances, if the CoA determines that the program has made significant progress on most of the probation issues but needs additional time to implement changes, the CoA may vote to continue a program on probation for good cause. The length of the extension will be determined by the CoA depending on the program’s circumstances for coming into full compliance, but may not exceed one year. A program may not be continued on probation more than once in a single review cycle.

Deferral for information: Whenever it deems appropriate, the CoA may defer making a decision about a program in order to obtain more information. Further, when in the CoA’s judgment, significant disparity exists between the site visit report and information provided in the program’s response to that report, the CoA will defer making a decision and seek additional information to resolve the difference. Further, the Commission may seek additional information through a request for an invitation to conduct a special site visit. When a decision is deferred for information, the CoA will notify the program in writing, and specify what additional information is needed to determine the program’s consistency with the G&P. The CoA may also write to the chair of the site visit team to identify issues in need of clarification, and a copy of this correspondence will be provided to the program. The program will be provided the opportunity to respond to any new information provided by the site visit team chair, prior to final review of the program by the CoA.

Deferral for cause: When the CoA has concerns which may result in a decision to deny a site visit or deny accreditation to an applicant program or place an accredited program on probation, it will defer its final decision, give written notice to the program of its concerns, and thereby provide an opportunity to supplement the record before a decision is made. The CoA will assume that materials and information provided by the program, before the final decision is made by the CoA, represent the full and complete basis on which the program wishes its accreditation status to be determined.

4.4 Site Visit Interval

At the time of making an accreditation decision, the CoA will also decide the year in which to schedule the program’s next periodic review. For all accredited programs, a period ranging from 3 to 7 years between site visits may be designated depending upon the program’s stage of development and the stability of program outcomes. Programs returned to accredited status from probationary status will be given one (1) year from receipt of the decision letter in which to provide a new self-study in preparation for the next site visit and full review.

An accredited program may always request to submit a self-study and schedule a site visit earlier than scheduled. Such a request should be provided in writing to the CoA along with the rationale for requesting an earlier review. In addition, the CoA reserves the right to schedule an earlier visit for any accredited program if it has evidence to suggest concerns about the program’s consistency with the G&P.

4.5 Communication of Decision to Program

Within 30 days following any decision, the CoA will give written notice of the outcome of its review to the Chief Executive Officer of the institution housing a doctoral program or the appropriate administrative officer of the institution housing an internship or postdoctoral residency program. The decision letter will contain a statement of the bases for the decision. In that letter, the CoA

also may alert the program to G&P-related areas of concern, requesting that the program address its attention to these in subsequent reports or in the next self-study.

4.6 Effective Date of a Decision

Award of “accreditation” is effective on the final day of the site visit preceding the CoA decision. Other non-appealable accreditation decisions are effective as of the date of adjournment of the CoA meeting in which the decision was made. Appealable decisions (as defined in Section 5.1) that are not appealed by the program are effective 30 days after receipt of the CoA’s decision letter.

If a program elects to appeal a decision of “accredited, on probation,” and the decision is upheld, the effective date of probation remains as 30 days after receipt of the CoA’s decision letter, and the program must respond to the issues of probation in the same timeframe as indicated in the CoA’s decision letter.

If a program elects to appeal any other decision other than probation, and the decision is upheld, the original CoA decision will take effect 30 days after the appeal panel hearing date.

For any appeal in which the decision is amended or reversed by the appeal panel, the new decision will be effective 30 days after the end of the appeal hearing.

4.7 Failure to Meet Accreditation Responsibilities

Changes in a program’s accreditation status by the CoA may result from a program’s failure to meet the following responsibilities:

- (a) Abiding by the CoA’s published policies and procedures; or
- (b) Informing the CoA in a timely manner of changes in its environment, plans, resources, or operations that could diminish the program’s quality.

Before a change in accreditation status is made for any of these reasons, the program will be notified in writing by the CoA and given 30 days in which to respond. Based on the program’s response, the CoA will determine appropriate action.

This section involves the substantive review of program materials and responses in determining whether the CoA should change a program’s accredited status, unlike Section 2.3 wherein a program is deemed to have withdrawn by its failure to meet its procedural obligations as an accredited program.

5. APPEAL OF A DECISION

5.1 Appealable Decisions

The Board of Educational Affairs of the APA serves as the appeal agent for CoA decisions.

The following decisions of the CoA may be appealed:

- (a) Denial of a site visit upon application

- (b) Denial of accreditation
- (c) Accredited, on probation
- (d) Revocation of accreditation
- (e) Withdrawal, based on lack of adherence to the provisions of Section 2.3

5.2 Filing an Appeal

The Chief Executive Officer of the host institution of a doctoral program or the responsible administrative officer of an internship or postdoctoral residency program may challenge an appealable decision within 30 days of receipt of written notice of the CoA decision. The written notice must identify the specific grounds on which the appeal is made, which must be either a procedural violation or substantive errors by the CoA in its review of the program consistency with the G&P. The appeal should be addressed to the President of the APA. A nonrefundable appeal fee will be charged to the appellant program, such fee to be submitted with the program's letter of appeal.

5.3 Appointment of Appeal Panel

Within 30 days of receipt of the program's letter of appeal, the APA Board of Educational Affairs will provide the program with a list of six potential appeal panel candidates, no one of whom will have had affiliation with the program filing the appeal or with the accreditation process related to the program. The Office of Program Consultation and Accreditation will determine the willingness of the potential panel members to serve, and notify the program to that effect. Within 15 days, the program will select three panel members from this list to serve as its appeal panel, one of whom will be a public member. If the program does not notify the Office of Program Consultation and Accreditation of its selection within 15 days, the Board of Educational Affairs will designate three members to serve on the appeal panel. Consistent with policies adopted by the Board of Educational Affairs, the program and the CoA will have an opportunity to participate in a *voir dire* of the panel and to challenge any of the designated panelists for due cause (e.g., conflict of interest, bias, or other prejudicial infirmity).

5.4 Scope and Conduct of Appeal

An appeal is not a *de novo* hearing, but a challenge of the decision of the CoA based on the evidence before the CoA at the time of its decision. The CoA's decision should not be reversed by the appeal panel without sufficient evidence that the CoA's decision was plainly wrong or without evidence to support it. Accordingly, the appeal panel should not substitute its judgment for that of the CoA merely because it would have reached a different decision had it heard the matter originally.

The procedural and substantive issues addressed by the appeal panel will be limited to those stated in the program's appeal letter. If an issue requires a legal interpretation of the Commission on Accreditation's procedures or otherwise raises a legal issue, the issue may be resolved by APA legal counsel instead of the appeal panel.

Only the facts or materials that were before the CoA at the time of its final decision may be considered by the panel. The panel will be provided with only those documents reviewed by the CoA in making its decision, the letter that notified the program of the CoA decision, the letter of

appeal, written briefs submitted by the program, and reply briefs submitted by the CoA. The letter of appeal and written briefs shall not refer to facts or materials that were not before the CoA. Deliberative and other internal documents prepared for purposes of CoA's review are not part of the record, and shall not be considered on appeal.

The program will be provided a final listing of the record before the CoA and a copy of the record at least 30 days before the date of the appeal hearing. If the program objects to the record or wishes to refer to any fact or material not included in that record, it must notify the Office of Program Consultation and Accreditation at least 15 days prior to the hearing so that the issue can be resolved by APA's legal counsel.

The appeal panel will convene a hearing at APA during one of three pre-scheduled appeal panel hearing dates. In addition to the three members of the appeal panel, the appeal hearing will be attended by one or more program representatives, one or more representatives of the CoA, and staff of the Office of Program Consultation and Accreditation. Either party, the program or the CoA, also may be accompanied by separate legal counsel.

When legal counsel attends and participates in the hearing, it is with the understanding that they recognize the proceedings are not a judicial forum, but a forum to review the CoA's decision in terms of procedural violations or substantive error.

APA's legal counsel will also attend the hearing. In addition to advising APA, counsel has responsibility to assure compliance with the Accreditation Operating Procedures and may resolve legal or procedural issues or can advise the panel regarding those issues.

5.5 Decision and Report of Appeal Panel

The CoA's decision should be affirmed unless (a) there was a procedural error and adherence to the proper procedures would dictate a different decision; or (b) based on the record before it, the CoA's decision was plainly wrong or without evidence to support it. The appeal panel has the options of: (a) Upholding the CoA decision; (b) amending or reversing the CoA decision or (c) remanding the matter to the CoA to address specific designated issues before final action.

The report of the appeal panel will state its decision and the basis of that decision based on the record before the panel. The report of the panel will be addressed to the President of the APA and sent within 30 days of the hearing. Copies will be provided to the chief executive officer of the host institution of a doctoral program or to the responsible administrative officer of an internship or postdoctoral residency program, the Chair of the CoA, the Chair of the Board of Educational Affairs, and the Office of Program Consultation and Accreditation.

5.6 Review of Adverse Action Based Solely on Financial Deficiencies

Where an adverse CoA decision is based solely on failure of the program to meet an agency standard pertaining to finances, the program will have one opportunity to seek review of new information by the Commission. The CoA will undertake such a review only where the program can establish, to the CoA's satisfaction that there is new financial information that: 1) was unavailable to the program until after the CoA reached its decision and 2) is significant and bears materially on the financial deficiencies identified by the CoA as the reason for the adverse action. Such a request for review must be received prior to the adverse action becoming final or any appeal hearing, whichever is earlier. A program may seek the review of new financial information as described above only once. Any determination by the CoA made with respect to review

requested under this provision does not provide a basis for appeal.

6. COMPLAINTS

6.1 Complaint Against an Accredited Program

The procedures for handling complaints against accredited programs are intended to deal only with complaints based on purported lack of program consistency with the G&P. It is not a mechanism for adjudication of disputes between individuals and programs. The CoA cannot, for instance, direct a program to change a grade, readmit a student, or reinstate a faculty member. For resolution of these disputes, complainants are encouraged to follow their institution's due process and grievance procedures (see G&P A.6).

6.1.1 Filing a Complaint

For timely resolution, complainants are encouraged to file their complaints as soon as possible after the alleged noncompliance comes to their attention. When inquiries are received by the Office of Program Consultation and Accreditation, copies of the G&P, "Accreditation Operating Procedures," and a complaint summary form will be sent to the person making the inquiry. To be processed, all complaints must:

- (a) Be written and signed;
- (b) Identify the individual, group, or legal entity making the complaint;
- (c) Present evidence that the subject program is not consistent with one or more of the G&P's components;
- (d) Describe the status of legal action, if any, related to the complaint; and
- (e) Grant permission to send the complaint, in its entirety, to the program.

6.1.2 Timelines for Filing a Complaint

For students, interns, post-doctoral residents, or individuals complaining on their behalf, complaints must be filed in writing within 18 months of leaving their program (either through withdrawal, termination, or graduation/completion). All other complaints must be filed in writing within 1 year from the time that the alleged noncompliance occurred.

6.1.3 Processing of A Complaint

Receipt of a complaint meeting these requirements will be acknowledged in writing by the Office of Program Consultation and Accreditation within 30 days of receipt and 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. Complainants are encouraged to submit all available supporting information at the time the complaint is filed, rather than providing supplemental information at a later date. The program's response must be from the program itself and not from any third party acting for the program. The complainant may be asked to respond to information provided by the program, but will not receive a copy of materials provided by the program.

6.1.4 CoA Action

The CoA will review the complaint at its first regularly-scheduled meeting held after the receipt of the program's response. After review, the CoA may act upon the complaint or defer action pending receipt of additional information. The CoA may act upon the complaint in any of the following ways:

- (a) Request an invitation for a special site visit to investigate the complaint;
- (b) Request additional information from the program;
- (c) Send an educative letter to the program, the complainant, or both;
- (d) Notify the program that no action is required by program; or
- (e) Such other action as, in the judgment of the CoA, is appropriate under the circumstances.

The CoA will communicate its action on the complaint, in writing, to the complainant and the program.

6.2 Complaint Against Accreditation Site Visitor(s)

The procedures for handling complaints against site visitors are intended to deal with complaints based on purported inappropriate actions of site visitors related to the site visit.

6.2.1 Filing a Complaint

The Director of Training of a program, with notice to the Chief Executive Officer of the host institution of a doctoral program or the responsible administrative officer of an internship or postdoctoral residency program may file a complaint regarding the actions of site visitors. The Director of Training must notify the Office of Program Consultation and Accreditation of the institution's or program's intent to file a complaint within 14 days after completion of the site visit. Subsequently, the complaint must:

- (a) Be written and signed;
- (b) Be sent to the Office of Program Consultation and Accreditation before the host institution has received the written report from the site visit team and within 30 days after completion of the site visit;
- (c) Provide a clear description of the critical incident(s) in question; and
- (d) Grant permission to send the complaint, in its entirety, to the site visit team.

6.2.2 Processing of A Complaint

Receipt of a complaint meeting these requirements will be acknowledged by the Office of Program Consultation and Accreditation and held until the report of the site visit team is received by the Office. The complaint will be sent to all members of the site visit team with request for comment within 30 days. At the same time, the site visit report will be sent to the program for comment. The

program will be asked to explain in its response whether and how the complained of conduct may have influenced the content of the site visit report.

6.2.3 CoA Action

In no case will the CoA decision regarding the program's consistency with the G&P be made until the complaint has been disposed of by the CoA. Based upon its review of the complaint and response, the CoA may make the following decisions:

- (a) Dismiss the complaint;
- (b) Reprimand the site visitor(s), which may include deletion from the list of potential site visitors maintained in the Office of Program Consultation and Accreditation;
- (c) Pursue the matter further, either by further inquiry of the parties involved or by means of a special fact-finding subcommission of the CoA, to provide additional information upon which to base a decision; or
- (d) Take other action as, in the judgment of the CoA, is appropriate under the circumstances.

After acting on the complaint, the CoA must then determine whether the critical incident(s) influenced the content of the site visit report. If the incident is determined to have influenced the site visit report, the CoA will void the site visit report and request from the host institution an invitation to revisit at APA expense. If the incident is determined not to have influenced the site visit report, the CoA will proceed with its review of the program.

The CoA will communicate the disposition of the complaint, in writing, to the program and to the site visitors.

6.3 Complaint Against the Commission on Accreditation

There may be instances in which a party or parties desire to formally express dissatisfaction with actions of the Commission on Accreditation. These concerns may be expressed through the following avenues where CoA action at issue is not subject to appeal per Section 5 (Appeal of a Decision):

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; or
 - (b) written communication with the CoA through the Office of Program Consultation and

Accreditation.

If the complaint is directed to the CoA, 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. If the complaint is directed to an APA governance group other than the BEA, the matter will be referred to BEA for handling. The BEA will be responsible for resolving the complaint. BEA will provide CoA an opportunity to respond to the complaint before acting on the complaint, and will seek additional information from the complainant or the CoA.

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 Accreditation and State Liaison.

7. THIRD-PARTY COMMENT/TESTIMONY - Provision of Third-Party Testimony Related to Initial or Periodic Review for Accreditation

The U.S. Secretary of Education's criteria for recognition activities states: "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." The following section outlines the steps that will be taken by the CoA, consistent with the Secretary's requirements.

7.1 Provision of Third-Party Comment

1. The CoA will provide public notice of all programs scheduled for initial or periodic review prior to the beginning of each review year
 - a. In the case of programs applying for continued accreditation, such notice will appear in The APA Monitor and on the Commission 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. Such notice may also appear on related webpages with information for students/interns/residents.
 - b. In the case of programs applying for initial accreditation, the CoA will provide public notice of all programs that have submitted initial application materials. Such notice will appear on the Commission on Accreditation Website, and may appear on related webpages with information for students/interns/residents.
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.
3. 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.

4. All third-party testimony made on a program 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.
5. 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.
6. 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.

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

1. 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:
 - a. 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.
 - b. 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.

- c. 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.
- d. 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).

8. CONFIDENTIALITY AND PUBLIC DISCLOSURE OF INFORMATION

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 up-to-date listing of all accredited programs will be regularly available on the Office of Program Consultation and Accreditation website. Included in all published lists will be the identity of programs whose accreditation has been denied, or revoked, as well as those voluntarily withdrawing from accredited status. The CoA will make public notice of all accreditation decisions no later than 30 days following the CoA meeting at which the decisions were made. In the case of programs for which appealable decisions have been reached, and appeal has been filed, the CoA will note that the decision is under appeal.

An updated list that includes changes in status or new programs since the previous annual list will be published midyear in the American Psychologist. In addition, after each meeting of the CoA, the published lists of accredited programs will be updated as necessary by an addendum of decisions and will also be available through other means as appropriate. 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 Commission will identify and make public all applicant programs applying for initial review by the CoA as appropriate to allow for third-party comment.

The CoA will notify the 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.