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Commission on Accreditation

2010

Self-Study Instructions

Postdoctoral Residency Programs

Mail Self-Study to:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242

(T) 202-336-5979 (F) 202-336-5978
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INTRODUCTION

The accreditation self-study instructions presented herein are designed to provide a framework to complete the self-study. All programs **MUST** follow these instructions using the outline provided (see Implementing Regulation [D2-3](#)). In addition, throughout the instructions you will find that certain data, documents, and materials are requested. These data, materials, and documents must be provided with the self-study. In the past 3-5 years, there have been many changes in higher education. As just one example, there is now increased emphasis on measurable outcomes. The Commission on Accreditation (CoA) is sensitive to these changes and has incorporated much of the relevant language and requirements reflecting these changes. That means that if you have not prepared a self-study very recently, there may be requirements and components that are not familiar to you (e.g., the requirements for measurable *objectives/competencies* in Domain B along with aggregated *outcome data* to support having met those objectives in Domain F). It is the program's responsibility to keep abreast of changes in reporting requirements, self-study components, and materials that must be provided both in the self study and in your public documents.

During the accreditation process, your self-study will undergo extensive review by Office staff, site visitors, and CoA members. When any of these individuals raise questions or request clarification, it benefits all involved to enter into collaborative efforts to present such clarification or answer such questions. This should not be considered an adversarial process, but rather a process of working together to ensure that an acceptable level of quality is maintained in the field. While the program clearly has expertise regarding its own structure, model, and training experiences, the Commission on Accreditation represents expertise in psychology accreditation in general. Working collaboratively to enhance the clarity and comprehensiveness of the self-study should be the goal of all involved.

SELF-STUDY PROCESS

The accreditation self-study process is a form of INTERNAL program evaluation. It is primarily intended to provide the program an opportunity to systematically review, describe, and evaluate its education and training model and outcomes (Domains B & F of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, or G&P). While all Domains of the Guidelines and Principles are important and necessary to address, Domains B & F, and the correspondence between the two, are the most salient areas for describing both the nature of your training program and its ultimate success. They are also the two Domains in which programs often provide inadequate information with which to make judgments.

The self-study also functions as an EXTERNAL program evaluation, by providing the CoA and site visitors with an opportunity to assess the degree to which your program's model and outcomes are consistent with the Scope of Accreditation and the G&P.

The G&P require that each program "be evaluated in the light of its own education and training philosophy or model, insofar as [it is] consistent with those generally accepted as appropriate to the profession and the Commission on Accreditation." The self-study is therefore expected to reflect accurately both the unique aspects of the program's education and training model as well

as the appropriateness of the model to the CoA and to the profession. The Accreditation self-study, site visit, and CoA review are all activities aimed at evaluating the program's model, its components, and consistency with the G&P.

A program may choose to adhere to the principles and values of a specific professional psychology training community whose training model was promulgated at a national conference. In such a case the CoA expects the program's unique training goals and objectives to be consistent with the training principles, values, goals and objectives published in that conference's proceedings, as well as with those in the G&P. In all cases, the program must clearly specify its training model or philosophy.

Likewise, a program may have training goals and objectives that extend beyond those required by the G&P, may use innovative training processes or educational methods that are unique to its training setting, or may employ nontraditional training populations or other resources not reflected in the G&P; all of these must be clearly identified and presented where requested in order to be evaluated as part of the accreditation review.

POSTDOCTORAL PROGRAM SCOPE AND OTHER POLICIES

The CoA includes in its scope of accreditation "...postdoctoral residency programs providing education and training in preparation for entering professional practice at an advanced level of competency in one of the *substantive* areas of professional psychology...or in a *specialty* practice area." Implementing Regulations [C-11\(a\)](#) and [C-11\(b\)](#) describe the accreditation process and self-study formats for postdoctoral residency programs. Per Implementing Regulation [C-11\(b\)](#), those specialty areas that have met the guidelines to be included in the scope of accreditation are as follows (*as of January 1, 2009**):

- Clinical Child Psychology
- Clinical Health Psychology
- Clinical Neuropsychology
- Family Psychology
- Forensic Psychology
- Rehabilitation Psychology

**Notification of additional specialty areas will be provided on the Accreditation website when the area has met the requirements and guidelines.*

In addition to the important Implementing Regulations (IR's) referenced above, programs should review all other IR's that are directly relevant to postdoctoral residency program training. These policies can be found as part of the CoA's "Policy Statements and Implementing Regulations" on the accreditation web page at <http://www.apa.org/ed/accreditation/implementregs200524.pdf>. The Implementing Regulations set forth the CoA's philosophy and amplify language in the G&P and the Accreditation Operating Procedures. The document is designed as a companion piece to the G&P/Operating Procedures and provides references, as appropriate, to sections of those documents.

New to the 2010 self-study instructions, this document provides the web link to the page of the relevant Implementing Regulation when referenced; however, ultimately it is the program's responsibility to make sure that ALL policies have been followed and that this is reflected in the self-study.

The CoA regularly updates existing Implementing Regulations and develops new policies as appropriate. The CoA produces an electronic newsletter after each Commission meeting to highlight new or updated regulations. Programs are encouraged to review the newsletter, available online at <http://www.apa.org/ed/accreditation/>, on a regular basis for policy updates.

DEFINITIONS

The phrase “education and training model (or philosophy),” as used in the G&P, refers to a program's education and training plan. An education and training model has five (5) distinct components that, taken collectively, should depict the program accurately:

1. Philosophy (values and principles);
2. Goals, objectives, and competencies, and their outcomes;
3. Processes and methods;
4. Resources; and
5. Program evaluation and assessment.

1. **Philosophy (values and principles)** describes the “why” of an education and training program, its reason for existing. It addresses fundamental assumptions, deeply held convictions and generally accepted tenets which define what is “appropriate and important” to the public, to the professional psychology training community at large, and to the training program and its sponsor institution, and why it is, therefore, important to conduct the program. Values and principles should “inform” the program's entire model and should logically lead to the program's goals and objectives. Information about the program's values and principles should be presented in Domain B.
2. **Goals and objectives** are descriptions of *expected, predicted or desired* outcomes. A Goal is broader than an Objective. Typically one goal subsumes several objectives. For example, a program may have as a goal: to produce competent clinicians. Objectives under this goal could include production of postdoc residents who are competent in psychological assessment; production of postdoc residents who are competent in psychotherapy; etc. Goals and objectives are targets, and **competencies** serve as the operationalized and measurable translation of the objectives. Competencies are the skills exhibited by postdoc residents which demonstrate that the program is meeting its objectives. An **outcome** reflects the extent to which a goal or objective has *actually* been reached, (as in: “Our outcomes were as follows: we were partially successful in achieving Goal X, we fully achieved Objectives A, B and C, but we failed to reach Objective D”).

Information about the nature of a program's goals and objectives should be presented in Domain B. This should include *how* the program assesses whether or not the specific goals and objectives are being met. The outcomes of these assessments (i.e., which goals are

actually achieved by the program, and the data which demonstrate that achievement) should be presented in Domain F.

3. **Processes** address the “how” of the training enterprise and should describe the “methods of procedure” and the efforts (i.e., the program’s training and education activities) used to transform the program’s principles and resources into outcomes. Training curriculum descriptions, syllabi, program manuals, etc., are examples of training process descriptions. Information about the program’s curriculum is requested in Domain B.
4. **Resources** are the human and fiscal “tools” and other “raw materials” necessary to attain the program’s goals and objectives. They include the physical training environment, the equipment, materials and supplies, the training supervisors and other staff, the residents, the training populations and settings, and the financial support for the program. Information about the program’s resources is requested in Domain C.
5. **Program evaluation and assessment** consists of both internal and external program evaluation. These activities traditionally focus on resources, processes and outcomes:
 - a) *Resource evaluation* assesses the quality, adequacy and sufficiency of the resources employed in the process of attaining goals and objectives.
 - b) *Process evaluation* assesses the methods and activities employed to attain program goals and objectives; the consistency of the methods and activities with those goals and objectives and the values and principles informing them; and how they relate to the actual outcomes produced.
 - c) *Outcome evaluation* compares or measures a program’s desired, expected or predicted outcomes (i.e. its education and training goals and objectives, which serve as evaluation standards) against its actual ones (i.e. the “products” of the training program). In so doing, outcome evaluation assesses the degree to which the program was successful in “realizing” its goals and objectives (i.e., its desired, expected or predicted “products”), both during the residency program and after completion.

Information about program self-assessment and outcomes is requested in Domain F. It is expected that assessment of program outcomes will include measures of student performance while in the program and/or immediately upon completion of training (proximal measures), **and** measures of the performance of graduates of the program (distal measures). The expectation is that aggregate data will be presented for both proximal and distal outcomes.

SELF-STUDY FORMAT

The attached instructions refer to and follow the sequence of the Domains of the G&P. The G&P text is provided in normal font, while bold prompts are provided as guidelines for your responses. Postdoctoral residency programs are now REQUIRED to use the template provided, answering all questions in bold font. You may delete the G&P text from your final

document, but you should leave the bolded prompts/guidelines within the narrative to ensure that you have addressed all areas.

There is a narrative component as well as required Tables 1-6 used to summarize quantitative information. Answer each question fully but succinctly and complete all tables, including the ones embedded in the narrative instructions. In many instances a question can be answered concisely in the appropriate table. In some instances a question may require a more extensive or detailed response. You are strongly encouraged to strike a balance between being succinct and comprehensive in responding to self-study questions. Your program, the site visitors and the CoA are best served by descriptions that are accurate, complete, and concise.

In a few instances an Accreditation Guideline (and the self-study question pertaining to that guideline) appears in slightly different forms in more than one G&P Domain (i.e., is repeated). In those instances it may suffice to refer clearly to the response previously provided, to avoid redundancy. Most training programs and their activities are extensively documented. For that reason, comprehensive responses can often be provided by referring directly to existing program documentation, thereby preventing duplication of effort. If such is the case, please append the relevant documentation and respond to questions by *specifying exactly where* in the appended documents the requested information can be located (*including page number of the final document*). Only material which is specifically referenced in the self-study text should be included in the appendices. Much of the information required should already be in a program's training brochure or manual, or in a residency handbook.

Most training programs and their activities are extensively documented. For that reason, comprehensive responses can often be provided by referring directly to existing program documentation, thereby preventing duplication of effort. If such is the case, append the relevant documentation and respond to questions by *specifying exactly where* (Appendix and/or page #) in the appended documents the requested information can be located. Only material which is specifically referenced in the self-study text should be included in the appendices. Much of the information required may already be in a program's training brochure/website, manual, or resident handbook.

Some examples of existing program documentation useful in responding to self-study questions are:

1. Brochures or other informational materials describing your program's mission, training resources and processes;
2. Program manuals or resident training handbooks;
3. Publications listing training goals, objectives and norms for an advanced or specialty practice area as defined by its national reference group or professional training community,
4. Didactic seminar schedules, training calendars, listings of training events such as colloquia, workshops, invited lectures, grand rounds;
5. Rotation descriptions, sample training contracts, descriptions of required knowledge and practice competencies,

6. Descriptions of methods of measuring attainment of program and resident training goals and objectives, samples of performance-based examinations, evaluation forms and other resource, process or outcome assessment methods;
7. Descriptions of training outcomes, e.g., resident work samples, scholarly products, post-docs or initial employment settings;
8. Administrative policy and /or procedure manuals, program correspondence, etc.

Postdoctoral programs are REQUIRED to use the template of the self-study instructions in completing the self-study. In addition to the instructions above, the program must adhere to the following additional guidelines:

Physical submission:

- Applicants provide 4 original copies of the self-study. Programs undergoing periodic review provide 3 original copies of the self-study.
- It is not necessary to send the self-study in large 3-ring binders. All self-studies are removed from large binders and placed in identical folders. Rubber bands, clips, or your own folders are acceptable ways of separating the documents.
- Binding is not necessary; however, if you choose to use it, please use binding that is easy to remove when extra copies of the self-study are eventually shredded.
- Photocopying materials on two sides is encouraged in order to minimize paper.

Length and formatting:

- If submitting as an integrated practice program, provide a separate set of tables for **each** area in which you are seeking accreditation (traditional and specialty/ies).
- If submitting as an integrated practice program, separate Domains B, C and F should be provided for each specialty and/or traditional practice area. For the other Domains A, D, E, G, H, much of the information is likely to apply across the programs at an institution; but if there are differences, specify which information applies to each specialty or traditional practice area.
- Due to the required use of the template, there is no page limit for postdoctoral residency programs. Programs are asked to be complete in their descriptions, yet as succinct as possible. Do not provide information that is not requested or related to the G&P.
- Use no smaller than **12 point** typeface for the self-study text, to ensure that the text is easy to read.
- Paginate the document continuously from the Transmittal page through Appendices so that information can be easily referenced. It also is easier to review and follow the self-study materials if the various components are clearly indicated in some way (e.g., tabs) that makes the components easier to identify.
- **Bold prompts should not be removed and are there to indicate that the program has provided the required information.**
- Form fields indicate where responses are necessary. Programs should use these areas for narrative. These gray text boxes can be deleted (i.e., your final text should not be highlighted in gray) and are only there to remind you to provide information in that spot.
- It is difficult to edit within the boxes. You may wish to prepare your response outside the form field and paste into the gray boxes or you may replace the gray boxes with your text.

- Appendices contain material that supports the self-study. Only material that is referenced *specifically* (Appendix # and page #) in the self-study text OR requested in these instructions should be included in appendices. Do not assume an item in the appendices will be read unless it is specifically referenced within the self-study.

Miscellaneous:

- Do not provide reference to any resident by name unless their permission to do so has been granted. When submitting sample documents, please remove any name that could raise FERPA or Health Information Portability and Accountability Act (HIPAA) issues, questions, or concerns.
- Follow the abbreviated CV format provided in these instructions, answering all questions briefly, and not exceeding the 2-page limit. Double check to make sure that a CV is included for every staff member who provides instruction or supervision for the program. Make sure that the number of CVs provided corresponds to the number of staff in the program, as reported in Table 2.

Important reminders:

- While reviewing your program's past self-study may be useful in program self-assessment and enhancement, please note that the instructions evolve every year to ask for more specific information. You must follow the most current instructions since specific information that may not have been requested in the last self-study may now be requested.
- After completing your self-study, please complete *and submit* the checklist on the following page to ensure that the program has provided all necessary information.
- Often times site visits, reviews, or decisions are delayed due to avoidable mistakes and/or omissions. Before submitting the final document, please double-check to make sure that:
 - All components of the self-study that need to be submitted are included, in the correct order;
 - All numbers match throughout the document (e.g., the number of current residents or supervisors in the narrative corresponds with the information provided in the tables, and that all tables are consistent with one another);
 - References to page numbers of policies and other appendices are correct throughout the narrative and the Summary Check Sheet (which must be included);
 - Every question, item, or table described in this document has been addressed;
 - If during the last accreditation review, your program was asked to provide a response with your next self-study, that response is included within the relevant Domain(s) and discussed in Domain F;
 - Every new requirement or request for additional information is clearly documented and easy to assess for completeness; and
 - You have included the transmittal page, signed by all parties.

After completing your self-study, complete the checklist below to ensure that you have provided all necessary information with accurate references. Please double-check to ensure that all page numbers noted here are identical to ones provided within the self-study narrative.

This completed checklist should be included with each copy of the self-study.

Summary Check Sheet for Documents and Appendices		
√ Done	Task	Page #(s)
	Transmittal page signed by all parties	
	Table 1	
	Table 2	
	Table 3	
	Table 4	
	Table 5	
	Table 6	
	Abbreviated Curriculum Vitae for supervisors	
	Sample Certificate of Completion	
	Resident Handbook	
	Program Due Process Policy	
	Program Grievance Policy	
	Resident Selection Policies	
	Administrative assistance (clerical and technical support, etc)	
	Financial support for stipends and training activities	
	Resident brochure/web pages	
	Consortium Agreement signed by all members (if applicable)	
	Residency Evaluation Forms	
	Sample program outcome evaluation surveys with aggregate data (for residents during program AND after graduation)	
	Policies required by the Program's institution	
	Seminar List/Schedule with descriptions as necessary	
	Minimum Requirements for Successful Completion of the Residency (e.g. Average rating across competencies, - or no competency lower than "x")	
	Correspondence with the CoA	
	Other materials/Describe:	
	Other materials/Describe:	
	Other materials/Describe:	
	Other materials/Describe:	
	Other materials/Describe:	

Transmittal Pages
Postdoctoral Residency Programs: Self-Study Report for 2010

Note: Please include all required signatures

Currently Accredited (3 copies)

Date Submitted: _____

OR

Applicant (4 copies)

Program Name: _____

Location (City/State): _____

Department Name (if applicable): _____

Institution/Agency Name (if different from program name): _____

Date of last site visit: _____

Number of residents in program this year: _____

Is the program seeking concurrent accreditation with the Canadian Psychological Association?

No Yes

The program is invoking Footnote 4¹: No Yes

Is the internship program part of a consortium? No Yes

If Yes, list all affiliates, including addresses and a contact person for each site: _____

Does the program offer training in a traditional practice area? No Yes

If Yes, identify traditional area: Clinical Counseling School

Does the program offer training in a specialty practice area? No Yes

If Yes, identify specialty areas here: _____

Is the program seeking accreditation as an integrated practice program? No Yes

If Yes, specify all areas here: _____

PROGRAM CONTACT INFORMATION: The following will be used to update our database. The individuals listed will receive copies of important program correspondence (i.e., site visit reports, decision letters). Please add the contact information for any other individuals who should receive such correspondence (i.e., co-directors, accreditation directors, etc). Signatures indicate that the self-study has been approved for submission and serve as an invitation to conduct a site visit to the program.

¹ See Footnote 4 under Domain D regarding policies of religiously-affiliated institutions.

Program Director: _____
(Name) (Signature)
Credential and Jurisdiction of Director of Training, i.e., licensed, registered or certified: []
Title:
Traditional or specialty practice area:
Full Mailing Address: []
Phone Number: Ext. [] Fax: [] Email Address: []

Note: If submitting an application for integrated programs, include signatures for additional Program Directors below (add more as needed).

Program Director: _____
(Name) (Signature)
Credential and Jurisdiction of Director of Training, i.e., licensed, registered or certified: []
Title:
Traditional or specialty practice area:
Full Mailing Address: []
Phone Number: Ext. [] Fax: [] Email Address: []

Program Director: _____
(Name) (Signature)
Credential and Jurisdiction of Director of Training, i.e., licensed, registered or certified: []
Title:
Traditional or specialty practice area:
Full Mailing Address: []
Phone Number: Ext. [] Fax: [] Email Address: []

Chief Psychologist/Dept Head: _____
(Name) (Signature)
Title:
Traditional or specialty practice area:
Full Mailing Address: []
Phone Number: Ext. [] Fax: [] Email Address: []

Institution/Agency President/CEO: _____
(Name) (Signature or that of designee*)
Title:
Full Mailing Address: []
Phone Number: Ext. [] Fax: [] Email Address: []

*If signed by designee, provide the full name of that individual in addition to the name of the person for whom he/she signed.

Self-Study for Postdoctoral Residencies

- ◆ The Accreditation Guidelines and Principles (G&P) are printed below, followed by specific or clarifying instructions, which are bolded throughout the text. Programs are **REQUIRED** to respond to all bold prompts and should leave those prompts in the narrative to ensure such information has been included.
- ◆ Please be sure to read all introductory information and instructions on pages 2-8 before completing this.
- ◆ It is the Program's responsibility to ensure that the Self-Study addresses all accreditation-salient Domains and issues.

Domain A: Eligibility

As a prerequisite for accreditation, the postdoctoral training program's purpose must be within the scope of the accrediting body and must be pursued in an institutional setting appropriate for training of professional psychologists.

1. The program offers postdoctoral residency education and training in psychology, one goal of which is to provide residents with education and training in preparation for practice at an advanced level in a substantive traditional or specialty² practice area in professional psychology.
 - **A.1. Specify and briefly describe the area of advanced traditional or specialty practice in professional psychology for which your professional psychology postdoctoral training program prepares its residents. If your program has more than one area (traditional and/or specialty), describe all areas. How long has your program been in existence?**
 - Review Implementing Regulations [C-11](#), [C-11\(a\)](#), and [C-11\(b\)](#).
 - **Complete Table 1. If yours is an integrated practice program, please complete Table 1 describing the integrated program, and separate tables for each of the traditional and/or specialty practice areas in the integrated program.**
2. The program is sponsored by an institution or agency that has among its primary functions the provision of service to a population of recipients sufficient in number and

² All accreditation decisions must be made on the basis of the Domains and Standards in the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*. Within the Standards of the Guidelines and Principles, the Commission on Accreditation may in its decision making processes refer to or adopt definitions, training models, goals, objectives and norms developed by certain professional psychology training communities or reference groups.

variability to provide residents with adequate experiential exposure to meet the program's education and training goals and objectives.

- **A.2. Briefly describe the mission(s) of the agency or institution which sponsors/hosts your postdoctoral training program. Describe the sponsor institution's service delivery setting(s) in which your program's training and education activities take place and the service recipient population(s) (clients, patients) in those settings. If the training takes place in more than one setting, describe the multiple settings, their service recipient populations and the types of training experiences offered in each setting.**
3. The program is an integral part of the mission of the institution in which it resides, and is represented in the institution's operating budget and plans in a manner that enables the residency program to achieve its goals and objectives. All postdoctoral residents in psychology are financially supported and provided benefits at a level consistent with that afforded comparable doctoral level professionals in training.
- **A.3. Explain how your training program fits into your sponsor institution's mission. How is it viewed/valued by your sponsor institution and its administration? Describe how the program is funded and how is it represented in its sponsor institution's operating budget.**
 - **Describe how residents are financially supported (what is their annual salary or stipend and what fringe benefits do they receive). How does this compensation package compare to that of doctoral professionals in training with similar responsibilities at your host or sponsor institution?**
4. The program requires of each resident a minimum of one year full-time training to be completed in no less than 12 months (10 months for school psychology postdoctoral training programs), or two years of half-time training to be completed in no more than 24 months. Substantive traditional practice area residencies may consist of up to three years of full time training. Substantive specialty practice area residencies may require longer training periods, in which the overall program duration and weekly time commitment is consistent with the program's training model and the standards of the specialty practice area in which the program provides its training.
- **A.4. What is the overall duration of your postdoctoral training program, i.e., how long (in terms of weeks, average number of hours per week and total number of hours) does it take to complete the residency? If your program has "part-time" residents, describe the average weekly time commitment and overall duration of the part-time training program and how this part-time program differs from the full-time one.**

5. The program engages in regular and systematic actions that indicate respect for and understanding of cultural and individual diversity³. This is reflected in the recruitment, retention, and development of training supervisors and residents, and in didactic and experiential training that foster an understanding of cultural and individual diversity as they relate to professional psychology. The program has nondiscriminatory policies and operating conditions and avoids any actions that would restrict program access on grounds that are irrelevant to success in the postdoctoral training program or the profession.

➤ **A.5. Reference nondiscriminatory policies in Table A.6, below. Provide brief statement here; refer to Domain D for full response.**

6. The program adheres to, and makes available to all interested parties, formal written policies and procedures that govern resident selection, internship and academic preparation requirements, administration and financial assistance, resident performance evaluation and feedback, advisement, retention, termination, due process and grievance redress for residents and training supervisors. It complies with other policies and procedures of the sponsor institution that pertain to supervisors' and residents' rights, responsibilities, and personal development.

➤ **A.6. In the table below, provide page references for the following program policies (*not* self-study narrative text) that can be located within the program's written documents in the appendices of the self-study.**

PLEASE NOTE: The items below refer to program-level policies and procedures (i.e., those provided in an intern training handbook). Those procedures should be provided in hard-copy with the self-study. If in addition to these program-level policies there are more general institutional or agency policies and procedures in place, it is acceptable to provide the appropriate webpage/URL address, with page numbers or instructions on how to find the specific policy.

³ See Section III.A. (Domain A.5) of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology* (guidelines for doctoral graduate programs).

Policy Item	Page #(s)
Resident selection	
Internship and academic preparation requirements	
Administrative assistance (clerical and technical support, etc)	
Financial assistance (may include benefits)	
Resident performance evaluation, feedback, advisement, retention, minimal requirements	
Resident termination	
Due process	
Grievance procedures	
Statement of nondiscrimination	
Other relevant <u>institutional</u> policies with which the program is required to comply (specify)	

- **(IF CURRENTLY ACCREDITED):** If the CoA noted any **Domain A** issues in your program’s last decision letter or in other correspondence since the last review, please indicate those here and provide a response (you may reference correspondence in the appendices as necessary, but provide a summary of those issues here in the narrative):

ADDITIONAL DOCUMENTATION REMINDER – Domain A

Provide the information requested on the Transmittal Page and in Table 1.

Include as appendices all public materials on your host or sponsor institution, training program publicity and other program related material (brochures, letters, program manuals, handbooks, formal institutional policy and procedure memoranda, etc.,) describing resident recruitment and selection procedures; prior preparation and other admission requirements; program completion requirements; performance evaluation and feedback, conflict/grievance resolution, advisement, retention and termination policies and procedures, residents’ financial compensation and fringe benefits, etc.

Domain B: Program Philosophy, Objectives and Training Plan

The program has a clearly specified philosophy or model of training, compatible with the mission of its sponsor institution and appropriate for the practice of professional psychology. The psychology postdoctoral residency is an organized logically sequenced program. Its goal is to provide quality education and training that is primarily experiential in nature, and preparation of psychologists for professional psychology practice at an advanced competency level in a substantive or specialty practice area. The program's goal's and objectives are consistent with its philosophy or model.

NOTE: If your program is an *integrated* practice program that provides training in one or more traditional and/or specialty practice areas, provide separate Domain B information for each area.

1. The program publicly states an explicit philosophy or model of professional training and education by which it intends to prepare residents for advanced practice in a substantive traditional or specialty practice area in professional psychology. The program's philosophy and educational model should be substantially consistent with the mission, goals, and culture of the program's sponsor institution. It must also be consistent with the following principles of the discipline:
 - **B.1. Briefly describe your program's education and training *goal(s)*, i.e., the expected long-term, overall (global) or final training outcomes that your program's training intends to produce. Describe each training goal in terms of service recipient populations (e.g., "preparation for advanced practice competence in substantive traditional area A, with populations Y and Z," or "preparation for specialty area practice credentialing in area X"), and supervised services rendered by residents (i.e. assessments, interventions, consultation, etc.)**
 - **If your program is an integrated practice program that provides training in one or more specialty practice areas, identify the specialty area(s) and list the postdoctoral training goals for each specialty as defined by its national professional reference group or training community. (For example, for the neuropsychology specialty area, the goals of the program would need to be consistent with the Houston Conference Guidelines.)**
 - **How are your postdoctoral program's mission and activities consistent with the mission and culture of your sponsor institution or agency?**
 - a) the postdoctoral residency in a substantive traditional or specialty practice area of professional psychology is designed to develop advanced practice competencies and expertise based upon sound scientific and professional practice foundations: psychological practice is based on the science of psychology which, in turn, is influenced by the professional practice of psychology;
 - **B.1a. Specify how your program integrates science and practice in a manner consistent with its training model and with the advanced traditional or specialty practice area in which it provides training.**
 - **Describe how this advanced traditional or specialty area practice training is based upon the science of psychology and how this advanced traditional or specialty practice area has influenced the science of psychology. Describe what opportunities your program provides its residents for scholarly or research activities and your residents' involvement in such activities.**

- b) postdoctoral training has sufficient breadth to ensure advanced competence as a professional psychologist and sufficient depth and focus to ensure professional and technical expertise in the area in which the program provides its substantive traditional or specialty practice training.
- **B.1b. Describe how your program’s training ensures breadth of advanced professional competence and is of sufficient depth and focus to ensure technical expertise and proficiency in the traditional or specialty practice area for which it prepares its residents.**
- **Refer to G &P II.B.2 -*Guiding Principles of Accreditation*, for additional information regarding broad and in-depth for traditional practice areas and focused and in-depth for substantive specialty practice areas.**
- 2. The postdoctoral program is organized, and builds upon but is distinct from doctoral preparation and internship. The postdoctoral program must be clearly differentiated from other training programs offered within the institution. The program includes the following:
 - **B.2. Explain how your postdoctoral training activities constitute a *program*, as opposed to an apprenticeship or simply "on the job training," supervised training, or supervised service delivery after completion of the doctorate.**
 - **Explain how your program differs from doctoral internship training in professional psychology in general, and from other training programs in psychology or related areas offered at your sponsor institution.**
 - **What other training programs are sponsored by your host institution? Are any of these postdoctoral programs? How do these other training programs and their training supervisors, students or residents relate to your professional psychology postdoctoral residency program and its residents?**
 - a) education and training activities are cumulative, graduated in complexity and are structured in terms of their sequence, intensity, duration, and frequency, as well as planned and programmed in their methods and content.
 - **B.2a. Explain how your program’s expected training outcomes (i.e., its *goals and objectives*) build on the prior competencies (i.e. entry level knowledge, skills, abilities, etc.) required of the residents for admission to your program.**
 - **In what manner are resident learning experiences “graduated in complexity”?**
 - b) the primary training method is supervised service delivery in direct contact with service recipients;

- **B.2b. Describe the types and average amount per week of supervised direct service delivery (i.e., “patient care” or “direct service”) activities your program requires of its residents. How does the program ensure residents receive at a minimum of four hours of supervision with at least two of those hours being individual supervision?**
 - c) training includes socialization into the profession of psychology, and is augmented by other appropriately-integrated modalities, such as mentoring, didactic exposure, role-modeling and enactment, observational/vicarious learning, and supervisory or consultative guidance;
 - **B.2c. How does your program ensure residents’ socialization into the profession appropriate to its advanced traditional or specialty practice area of training? How does your program ensure that residents interact with peers and have access to peer consultation?**
 - **Describe the didactic and other (i.e., *non-service delivery*) common training experiences and the average weekly total time commitment for these that are required of full-time and/or part-time psychology postdoctoral residents in your program.**
 - **Describe each of these didactic and other learning activities in terms of their content, format and average duration per week (e.g., didactic seminars, colloquia, symposia, co-therapy, discussion with staff, mentorship, role modeling or enactment, observation, consultative guidance, case conferences, rounds, journal clubs, etc). Didactic schedules and required readings should be included in the appendices.**
3. Consistent with its philosophy or training model and the standards for the advanced substantive traditional or specialty area of professional psychology practice in which the program provides its training, the program specifies education and training objectives in terms of residents’ competencies expected upon program completion. In achieving these objectives, the program requires that all residents demonstrate an advanced level of professional psychological competencies, skills, abilities, proficiencies, and knowledge in the following content areas:
- **B.3. Describe your program's training plan or curriculum in terms of its specific education and training objectives and competencies for each area in which you are seeking accreditation (traditional and specialty areas). Briefly relate these training objectives and competencies to the more general training *goals* described in your responses to Domain B.1 above. In other words, describe how the program’s specific education and training objectives and competencies related to the program’s general philosophy or model of professional training and education. (NOTE: The below table format may be used to present this information. This table may be provided here in the narrative or in the appendices.)**

OPTIONAL TABLE: List the program’s goals, objectives, and competencies that follow and support the stated philosophy and model (add rows for additional goals/objectives/competencies as necessary):

Goal #1:
Objective(s) for Goal #1:
Competencies Expected:
Appendix & Page Number for Evaluation Forms Used for Expected Competencies:
How Outcomes are Measured:
Minimum Thresholds for Achievement for Expected Competencies:
Goal #2:
Objective(s) for Goal #2:
Competencies Expected:
Appendix & Page Number for Evaluation Forms Used for Expected Competencies:
How Outcomes are Measured:
Minimum Thresholds for Achievement for Expected Competencies:
Goal #3:
Objective(s) for Goal #3:
Competencies Expected:
Appendix & Page Number for Evaluation Forms Used for Expected Competencies:
How Outcomes are Measured:
Minimum Thresholds for Achievement for Expected Competencies:

- **Describe the training plan/curriculum in terms of content, format, processes, methods, sequences, frequency and duration of education and training activities.**

- **If your program has “part-time” residents, describe their average weekly time commitment in relation to the program’s objectives for supervised direct service delivery, supervision and other learning activities. Explain how this part-time curriculum is consistent with the requirements of the program’s training model and with the G&P.**

- **B.3a-f. This G&P standard identifies education and training *objectives* (i.e., desired, expected or predicted intermediate, circumscribed or “short-term” training outcomes) in terms of *content areas* in which residents "should acquire and demonstrate (advanced or specialty practice related) understanding and competence." These content areas are listed below and define training objectives required of *all* professional psychology postdoctoral programs and residents. Describe how (i.e., the *processes* whereby) your program achieves the objectives, (i.e. how its residents acquire knowledge, understanding, skills, abilities, competence, etc.), specifically as related to the advanced traditional or specialty**

practice area(s) in which your program provides training, in the following content areas:

- (a) theories and effective methods of psychological assessment, diagnosis and interventions;
- (b) consultation, program evaluation, supervision and/or teaching;
At the post-doctoral level, an advanced level of professional psychological competency and knowledge gained through professional practice is required in one or more of these areas: supervision, consultation, program evaluation, and teaching.

➤ **Review Implementing Regulation [C-1](#).**

- (c) strategies of scholarly inquiry;
- (d) organization, management and administration issues pertinent to psychological service delivery and practice, training, and research;
- (e) professional conduct; ethics and law; and other standards for providers of psychological services;
- (f) issues of cultural and individual diversity that are relevant to all of the above.

➤ **Additionally, describe in detail any additional training objectives and competencies which are unique to your program's model, and/or to its advanced traditional and/or specialty area practice training mission.**

➤ **For each specialty practice area, provide descriptions of postdoctoral training objectives and norms or standards for that specialty practice area, as defined by its national reference group or professional training community. Describe the *processes* and methods your program uses to develop residents' understanding and competence, i.e., *how* your residents acquire the knowledge, skills, abilities, attitudes, etc., related to these additional advanced traditional or specialty practice area-specific postdoctoral training objectives.**

4. Resident supervision is regularly scheduled and sufficient relative to the resident's professional responsibility. At a minimum, a full-time resident will receive four hours structured learning activities per week, at least two hours of which will include individual, face-to-face supervision;

➤ **B.4. Describe in detail the amount, schedule (duration and frequency) and nature of residents' weekly individual supervision by psychologists and specify any other forms of supervision (e.g., group supervision, supervision by non-psychologists, etc).**

- **How does the program ensure residents receive at a minimum of four hours of structured learning activities, with at least two of those hours being individual supervision?**
 - a) Each resident shall have at least two supervisors during any one training year; at least one of these shall be a psychologist who shall serve as the resident's primary supervisor;
- **Review Implementing Regulation [C-15\(b\)](#).**
- **B.4a. Where is supervision provided and by whom? How many supervisors does each resident work with during a residency year? How many of these are psychologists? Who has professional responsibility for the services provided by residents?**
 - b) Supervision is consistent with the residents' training activities, so as to provide an intensive, advanced substantive traditional or specialty practice learning experience while maintaining appropriate responsibility for the service recipients;
 - c) Methods of supervision are appropriate for advanced practice training and reflect the knowledge base of the substantive traditional or specialty practice area in supervision;
- **B.4b-c. Explain how resident supervision is consistent with your program's advanced traditional and/or specialty practice area(s) training focus, and how it reflects the knowledge base of each advanced traditional and/or specialty practice area.**
 - d) Residents have access to supervisor consultation and intervention in emergencies.
- **B.4d. How do residents obtain access to supervisors for consultation/intervention during emergencies?**
- 5. Postdoctoral residency programs encourage their residents to participate in state, provincial, regional, national and international professional and scientific organizations.
- **B.5. How does your program facilitate and encourage residents' involvement in professional and scientific organizational activities?**
- 6. The program demonstrates that residents' service delivery activities are primarily learning oriented and that training considerations take precedence over service delivery and revenue generation.

- **B.6. Describe how residents’ service delivery activities are primarily learning-oriented and that training considerations take precedence over service delivery and revenue generation. Are your residents required to generate revenue for the agency (i.e., “billable hours/contacts/services”)? If so, how many billable hours/contacts are minimally required per resident per week?**
7. The postdoctoral program has well documented procedures for the administrative structure and process that systematically coordinates, controls, directs, and organizes its training activities and resources. The program has responsibility for recruitment, selection, evaluation and termination of residents, as well as program content.
- **B.7. Describe how the postdoctoral program is administered, i.e., explain the administrative structure, methods and procedures whereby the program and its resources are planned, directed, controlled, coordinated and organized. Describe the leadership of your program and explain how program responsibilities are assigned.**
 - **How and by whom are plans and decisions made about training issues, curricular content, evaluative activities, etc.? Are training supervisors and residents involved in these processes? If so, describe how.**
 - **Are these administrative processes formally described or documented?**
 - **If so, submit them in appendices. Page #:**
 - a) The program has a designated director who is a psychologist, appropriately credentialed (i.e., licensed, registered, or certified) to practice psychology in the jurisdiction in which the program is located, who is primarily responsible for directing the training program and has administrative authority commensurate with those responsibilities;
 - b) The program director’s credentials and expertise must be consistent with the program’s mission and goals and with the advanced substantive traditional or specialty practice area of professional psychology in which the program provides its training.
 - **B.7a-b. Summarize the qualifications, credentials, role and responsibilities of the Director of Training.**

Furthermore, given its stated goals and expected competencies, the program is expected to provide information regarding the minimal level of achievement it requires for post-doctoral residents to satisfactorily progress through and complete the residency program, as well as evidence that it adheres to the minimum levels it has set.

- **Outline the minimal levels of achievement that the program requires for its residents to maintain good standing and to progress satisfactorily**

through/complete the program. Describe how these achievement levels are consistent with the program's goals and the competencies it expects its residents to acquire. Describe how the program ensures that these minimum achievement levels are met by residents. (You may refer to information already provided in Domain B.3 as applicable).

- **(IF CURRENTLY ACCREDITED):** If the CoA noted any Domain B issues in your program's last decision letter or in other correspondence since the last review, please indicate those here and provide a response (you may reference correspondence in the appendices as necessary, but provide a summary of those issues here in the narrative):

ADDITIONAL DOCUMENTATION REMINDER – Domain B

Submit any other documentation relevant to the above questions, including syllabi/descriptions for any didactic experiences. Provide clear references in the responses to the questions above on where the information referred to is located in the appended documentation.

Training calendars, examples of weekly resident schedules, and rotation descriptions can be helpful in illustrating how the training program is organized.

Domain C: Program Resources

The program demonstrates that it possesses resources of appropriate quality and sufficiency to achieve its training goals and objectives and ensure stability and sustainability.

NOTE: If your program is an integrated practice program that provides training in one or more traditional and/or specialty practice areas, provide separate Domain C information for each area.

1. The postdoctoral training program has formally designated training supervisors who are sufficient in number to accomplish the program's service delivery, education and training and supervision goals;
 - **C.1. How many formally designated postdoctoral training supervisors does your program have? How many of these are licensed professional psychologists?**
 - **Complete Tables 2(a), 2(b), and 2(c). Consortia programs should provide a separate Table 2 (all sections) for each site.**
2. The formally designated supervisors include at least two psychologists, who:
 - a) deliver services in the advanced substantive traditional or specialty practice area in which the postdoctoral training occurs;

- b) function as an integral part of the program at the site where the program is housed;
 - c) have primary professional/clinical responsibility for the cases on which they provide supervision;
 - d) are appropriately credentialed (i.e. licensed, registered, or certified) to practice psychology in the jurisdiction in which the program is located;
- **Review Implementing Regulation [C-15\(a\)](#).**
- e) are of appropriate quality for the program's philosophy of training, model and goals;
- **C.2a-e. Describe succinctly how the qualifications and professional activities (practice, consultation, research, teaching, participation in professional organizations, etc.) of each of your postdoctoral training supervisor staff members specifically support the training model, philosophy, goals and objectives of your program.**
- **Briefly describe the unique training contributions of all staff with significant training roles in your program (primary training supervisors, adjunct training staff, etc.). Include the average number of hours per week each devotes to your program's training activities.**
- f) have expertise, demonstrate substantial competence and have credentials in the advanced substantive traditional or specialty practice area of professional psychology which are at the core of the program's training goals and objectives;
- **C.2f. Explain briefly how your training supervisors and adjunct training staff members serve as professional role models for the residents.**
- g) participate actively in the program's planning, its implementation, and its evaluation; and
 - h) serve as professional role models for the residents.
3. The program may include appropriately qualified adjunct staff/supervisors to augment and expand residents' training experiences, provided these adjuncts are integrated into the program and are held to standards of competence appropriate to their role/contribution within the program (as in 1 c, e & h above).
- **C.3. Explain specifically how *adjunct* staff/supervisors augment and expand your residents' training experiences beyond those offered by the regular training**

supervisor staff, and how these adjunct staff members are integrated into the overall program. Detail the quality control standards used to assess competency of adjunct staff/supervisors.

4. The program has one or more postdoctoral psychology residents who:
- a) are provided with opportunities that ensure appropriate peer interaction, support and socialization;
- **C.4a. How many residents does your postdoctoral psychology training program have? Specify the number in each traditional or specialty area being reviewed for accreditation and indicate the area for each (See also B.2c, above). How many of these are “part-time”?**
- **Review Implementing Regulation [C-13](#).**
- **Complete Tables 3(a) and 3(b). Integrated practice programs should provide a separate Table 3 for each component traditional and/or specialty practice area.**
- b) have completed appropriate doctoral education and training in professional psychology or appropriate respecialization, both of which must include the completion of an appropriate internship;
 - c) have interests and attitudes that are appropriate for the postdoctoral training program’s goals and objectives;
 - d) have an understanding of the program’s philosophy, model and goals;
- **C.4b-d. Describe the prior preparation (i.e., the education and training qualifications and additional competencies, knowledge, skills, abilities and other characteristics) required of residents for admission to each of your accredited programs or those seeking accreditation.**
- **Complete Table 4. Integrated practice programs should provide a separate Table 4 for each component traditional and/or specialty practice area.**
- **How do these admission requirements and your selection methods assure compatibility with each traditional or specialty program's training model and objectives and the residents’ own training objectives? (Also see question B.2a, above.) How are your residents made to understand the program’s education and training model or philosophy of their traditional or specialty postdoc?**
- e) have meaningful involvement in those activities and decisions that serve to enhance resident training and education; and

- **C.4e. How are residents involved in their training and education activities and decisions?**
 - f) have a title commensurate with the title carried in that setting by other professionals in training who have comparable responsibility and comparable education and training, consistent with the laws of the jurisdiction in which the program is located.
- **C.4f. What is the formal title by which the postdoctoral residents are known in your program and sponsor institution?**
- 5. The program has the additional resources necessary to achieve its training goals and objectives. The program works with the administration of the sponsor institution to develop a plan for the acquisition of those additional resources that may be necessary for program development. The resources include:
 - a) financial support for resident stipends, training supervisors, and training activities, consistent with the standards of the advanced substantive traditional or specialty practice area in which the program provides its training;
 - b) clerical and technical support;
 - c) training resources, materials and equipment;
 - d) physical facilities, training populations and settings.
- **C.5a-d. Describe the nature and adequacy of financial, material and human resources available to each traditional and/or specialty training program in light of its mission. Include brief descriptions of office and treatment spaces, other physical facilities, assessment materials, computer equipment, library holdings, clerical support, unique populations of service recipients, service settings, and other resources necessary to achieve each program's goals and objectives.**
- 6. The program takes advantage of the resources and diversity offered by the community in which the program is located.
- **C.6. How does your program use the training opportunities and resources available in the larger community in which your program is located?**
- 7. A postdoctoral training program may consist of, or be located under, a single administrative entity (institution, agency, school, department, etc.) or may take the form of a consortium. A consortium is comprised of multiple independently administered entities which have, in writing, formally agreed to pool resources to conduct a training or education program. Written consortial agreements should articulate:

- **(IF APPLICABLE) In the appendices, provide a copy of the CURRENT consortium agreement that addresses each of the below items, signed and dated by ALL participating members. Page # for agreement:**
 - a) the nature and characteristics of the participating entities;
 - b) the rationale for the consortial partnership;
 - c) each partner’s commitment to the education and training program, its philosophy, model, and goals;
 - d) each partner’s obligations regarding contributions and access to resources;
 - e) each partner’s adherence to central control and coordination of the training program; and,
 - f) each partner’s commitment to uniform administration and implementation of the program’s training principles, policies, and procedures addressing resident admission, financial support, training resource access, potential performance expectations and evaluations.

- **(IF APPLICABLE) C.7a-f. If your program is conducted by a Consortium, describe clearly how the various training entities are coordinated so they fulfill the requirements listed under this domain.**

- 8. An individual consortial partner (member entity) of an accredited consortium may not publicize itself as independently accredited unless it also has independently applied for and received accreditation.

- **(IF APPLICABLE) C.8. Provide documentation that each of the participating consortial partners does not publicize itself as independently accredited. Page #(s) for public documentation:**

- **(IF CURRENTLY ACCREDITED): If the CoA noted any Domain C issues in your program’s last decision letter or in other correspondence since the last review, please indicate those here and provide a response (you may reference correspondence in the appendices as necessary, but provide a summary of those issues here in the narrative):**

ADDITIONAL DOCUMENTATION REMINDER – Domain C

Complete the tables on Staff and Resident Qualifications and Characteristics for each specialty, if applicable.

As instructed in Table 2, complete the abbreviated CV’s for the Director of Training, and on each psychologist who is a primary resident supervisor or adjunct training staff member. Also

complete abbreviated CV's for each non-psychologist with a significant training role in the program.

Domain D: Cultural Diversity and Individual Differences

The program recognizes the importance of cultural and individual differences in the postdoctoral training of psychologists.

1. The program has made systematic, coherent, and long-term efforts to attract and retain residents and supervisors from different ethnic, racial, gender and personal backgrounds into the program. Consistent with such efforts it acts to ensure a supportive and encouraging learning environment and the provision of training opportunities appropriate for the training of diverse individuals. Further, the program avoids any actions that would restrict program access on grounds that are irrelevant to success in postdoctoral training or a career in professional psychology.⁴

NOTE: Describing only the program's outcomes (whether successful or not) in this area is not sufficient. The primary focus in this domain is on the systematic, coherent, and long-term efforts the program has made in recruiting and retaining diverse students and faculty. These should be described as efforts to recruit diversity as opposed to avoiding discriminatory practices. Refer to Domain A.5 of the G&P for Doctoral Programs for the definition of "diversity" as used in this domain.

- **D.1. Describe your program's systematic *efforts* to recruit and retain RESIDENTS and STAFF from diverse (defined broadly) individual and cultural backgrounds.**
 - **How does your program ensure a supportive and encouraging learning environment for individuals of diverse backgrounds?**
2. The program has a thoughtful and coherent instructional plan to provide residents with relevant knowledge and experiences about the role of cultural and individual diversity in psychological phenomena and professional practice. It engages in positive efforts designed to ensure that residents will have opportunities to learn about cultural and individual diversity as they relate to the advanced substantive traditional or specialty practice area of psychology postdoctoral training. The avenues by which these training goals are achieved by the program are to be developed by the program.
- **D.2. Describe the individual differences and cultural diversity characteristics of the populations of recipients (consumers, clients, patients) to whom residents deliver services.**

⁴ See Section III.A. (Domain D.1, Footnote 4) of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology* (guidelines for doctoral graduate programs) for a further explication of this principle.

- **How do your residents acquire appreciation of and competence, knowledge and skills in the area of individual differences and cultural diversity?**
- **How are individual and cultural diversity issues integrated with the advanced traditional or specialty practice training focus of the program?**
- **(IF CURRENTLY ACCREDITED): If the CoA noted any Domain D issues in your program's last decision letter or in other correspondence since the last review, please indicate those here and provide a response (you may reference correspondence in the appendices as necessary, but provide a summary of those issues here in the narrative):**

ADDITIONAL DOCUMENTATION REMINDER – Domain D

Include all documents on institutional, agency and program policies and procedures on nondiscriminatory recruitment and personnel practices (should be referenced in Domain A.6).

Provide samples of staff and resident recruitment announcements or advertisements, etc. to document the program's efforts in recruiting diverse staff and residents.

Append and reference information or copies of training calendars listing diversity training events and experiences to document the program's efforts in educating residents about diversity.

Domain E: Resident-Supervisor Relations

The program demonstrates that its policies, procedures, education, training and socialization experiences are characterized by mutual respect and courtesy between residents and training supervisors and that it operates in a manner that facilitates residents' training and educational experiences.

1. The program recognizes the rights of residents and training supervisors to be treated with courtesy and respect. In order to maximize the quality and effectiveness of residents' learning experiences, all interactions among residents, training supervisors, and program staff should be as between colleagues and conducted in a manner that reflects psychology's ethical principles and professional conduct standards.⁵ The program has an obligation to inform residents of these principles and their avenues of recourse should problems arise.
- **E.1. Describe how the program recognizes the rights of residents and training supervisors to be treated with courtesy and respect and ensures resident and**

⁵ See the current APA *Ethical Principles and Code of Conduct* and the Canadian Psychological Association *Canadian Code of Ethics for Psychologists* (1991).

staff/supervisor interactions are collegial and reflect psychology's ethical principles and professional conduct standards.

- **How and when does the program inform its residents of the program's own training and performance requirements and of its policies and professional psychology's ethical principles and conduct standards?**
2. Training supervisors are accessible to the residents and provide them with a level of guidance and supervision that actively encourages timely and successful completion of the program. The supervisors provide appropriate professional role modeling and engage in actions that promote the residents' acquisition of knowledge, skills and competencies consistent with the program's training goals.
- **E.2. How and when does your program assess the residents' personal training goals and their compatibility with the program's overall training goals?**
 - **How do training supervisors facilitate residents' timely and successful program completion? How do they serve as role models to the residents?**
3. The program shows respect for cultural and individual diversity among its residents by treating them in accord with the principles contained in Section C, Domain A, Standard 5 of this document.
- **E.3. How does the program show respect for cultural and individual diversity among its residents by treating them in accord with the principles contained in Section C, Domain A, Standard 5 of the G&P?**
4. The program provides residents immediately upon entry with written grievance and conflict resolution procedures and policies regarding program requirements and expectations for residents' performance and continuance in, or termination from the program. The nature and structure of supervision are reviewed early in the program. Residents receive, at least semi-annually, systematic written feedback on the extent to which they are meeting these performance requirements and expectations. Feedback should address the residents' performance and progress in terms of professional conduct and psychological knowledge, skills and competencies in the areas of psychological assessment, intervention and consultation, and should include:
- **E.4. What are the program's policies and procedures for addressing residents' conflicts, resolving residents' grievances, resident advising, problem notification, problem remediation, continuance in, and termination from the program?**
 - **How and when do residents become aware of these policies and procedures, and where are they documented?**

- **When are supervisors' and residents' expectations regarding the nature and structure of supervision first discussed?**
 - a) an initial written evaluation provided early enough in the program to serve as the basis for self-correction (if needed);
 - b) a second written evaluation which occurs early enough to provide time for continued correction (if needed) or development;
 - c) discussions and signing of each evaluation by the resident and the supervisor;
- **E.4a-c. Describe *how* your program evaluates residents' performance in terms of frequency and methods, i.e., what evaluation methods or formats are used by your program to assess that residents have acquired the competence, understanding, knowledge, skills, abilities, attitudes, etc. specified in your program's training goals and objectives.**
- **Describe how your program provides evaluative performance feedback to residents.**
 - d) timely written notification of all problems that have been noted, the opportunity to discuss them and guidance regarding steps to remedy them (if remediable);
 - e) substantive written feedback on the extent to which corrective actions are or are not successful in addressing those problems.
- **How does the program notify, assist and provide feedback to residents whose performance or progress is not satisfactory?**
- 5. The program issues a certificate of residency completion to residents successfully completing the training program.
- **E.5 Attach a copy of the "Certificate of Postdoctoral Residency in Psychology" residents receive upon program completion. Page #:**
- **Review Implementing Regulation [C-6\(a\)](#).**
- 6. The program documents and permanently maintains records of the residents' supervised training experiences and evaluations for future reference, certification and credentialing purposes. In all matters relevant to the evaluation of residents' performance, programs must adhere to their sponsor institution's regulations and local, state, and federal statutes regarding due process and fair treatment.
- **E.6 What records does the program compile on resident performance evaluations and program completion, and how are those records maintained?**

- **Include a comprehensive listing of all support services (available through the residency or institution) designed to facilitate progress through the residency. These services may include, but are not limited to counseling, financial assistance, legal aid, etc.**
 - **How are residents made aware of the availability of these services?**
7. Each program will be responsible for keeping information and records of all formal complaints and grievances against the program, of which it is aware, filed against the program and/or against individuals associated with the program since its last accreditation site visit. The Commission on Accreditation will examine programs' records of student complaints as part of its periodic review of programs.
- **E.7 Provide a record of resident complaints or grievances received by, or known to the residency since the program's last accreditation site visit.**
 - **Review Implementing Regulation [C-3](#).**
 - **Regardless of whether any complaints have been received, how does or how would the program maintain these confidential records?**
 - **Review Implementing Regulation [C-12](#).**
 - **(IF CURRENTLY ACCREDITED): If the CoA noted any Domain E issues in your program's last decision letter or in other correspondence since the last review, please indicate those here and provide a response (you may reference correspondence in the appendices as necessary, but provide a summary of those issues here in the narrative):**

ADDITIONAL DOCUMENTATION REMINDER – Domain E

Provide relevant personnel policies, appropriate sections of procedure manuals or other documentation on conflict, problem or grievance resolution, due process, etc. If your program has existing documents (e.g., a detailed personnel handbook, procedure manual, etc.) append it and refer to the sections in which the requested information can be located.

Provide sample copies of resident evaluation forms or documents, training contracts, etc.

Domain F: Program Self-Assessment and Quality Enhancement

The program demonstrates a commitment to excellence through self study which assures that its goals and objectives are met, enhances the quality of professional education and training obtained by its residents and training supervisors, and contributes to the fulfillment of its host institution's mission.

NOTE: If your program is an integrated practice program that provides training in one or more traditional and/or specialty practice areas, provide separate Domain F information for each area.

1. The program, with appropriate involvement from its training supervisors, residents and former residents, engages in a self-study process that addresses:
 - **F.1. Briefly list the internal and external quality evaluation/assurance/enhancement activities your program employs.**
 - **Describe how training staff and residents are involved in these activities.**
 - a) its expectations for the quality and quantity of the resident's preparation and performance in the program;
 - **F.1a. Specify the methods used to assess the adequacy of residents' preparation for your program, and the methods used to assess attainment of both the program's and the residents' training goals and objectives (i.e., the desired, expected or predicted training *outcomes*), in terms of resident *performance*. (Also see, and/or refer to Domain E.4a-e, above.)**
 - **Specifically, how do you demonstrate and document the attainment of the training objectives defined by the content areas in Domain B, and the attainment of those unique goals and objectives determined by the advanced traditional or specialty practice area in which your program provides training? Stated differently, how does your program ascertain residents' *knowledge* and *practice competence*, in light of its advanced traditional or specialty practice area training focus and its unique training model or mission?**
 - b) its effectiveness in achieving program goals and objectives for residents in terms of outcome data (i.e., while residents are in the program and after completion) and including the residents' views regarding the quality of the training experiences and the program;
 - **F.1b. In what manner and how often does the program evaluate the residents' training goals and objectives, and the residents' views of the training experience and the program? (Also see, and/or refer to Domain E.4. (a)-(e), above.)**
 - **Complete Tables 5-6, providing separate tables for each traditional/specialty area.**
 - **All programs must provide detailed PROXIMAL and DISTAL aggregate outcome data that is related to your program's stated educational model, philosophy, goals, objectives, and competencies. Such data should be provided for residents as they progress through the program (proximal data) and for graduates of the program (distal data). There should be a *clear connection* between the stated goals/objectives/competencies that were outlined in Domain B, the method of**

evaluation the program uses to determine whether these are being achieved (e.g., student evaluation forms), and the detailed outcome data.

- Examples of proximal competency-based outcomes are measures obtained while the resident is in the program such as resident mid-point, end-of-year and end of training program evaluations, and their consistency with your program's stated objectives and competencies.
- Examples of distal goal-related outcomes are measures obtained after the resident has completed the program; such as the type of initial and subsequent employment, professional roles and activities of former residents, and their consistency with your program's training mission and goals (e.g., licensure, employment in the practice area, obtaining additional postdoctoral advanced or specialty practice credentials).

These data may be supplied in a table, in text, and/or in a flowchart. Aggregate outcome data may be provided in the appendices.

- Discuss what data are available to demonstrate achievement of Domain B goals/objectives/competencies:
 - Page # for proximal aggregate data in appendices:
 - Page # for distal aggregate data in appendices:
- c) its procedures to maintain current achievements or to make changes as necessary;
- F.1.c. How does your program evaluate and demonstrate the adequacy and sufficiency of its training resources, processes, procedures and methods in relation to its training goals, objectives and actual outcomes? How has your program used this information to modify its training processes or resources?
 - d) its goals, objectives, and outcome data relevant thereto, in relation to local, regional, state/provincial, and national needs and changes in the knowledge base of the profession and the advanced substantive traditional or specialty practice area in which the program provides its training.
- F.1d. Describe your program's *outcomes* and the methods used to evaluate them. In other words, has your program reached its stated goals and objectives? How do you know that your program has reached them? (Also see Domain F.1a-c, above.)
- Are the program's outcomes consistent with those predicted by the goals and objectives? How are your program's outcome findings coordinated with, or

integrated into its planning and decision processes, and how is outcome feedback used to modify the program's goals and objectives?

- Also, briefly describe how your program evaluates, responds to and influences changes in the knowledge base of the science or practice of psychology, and to changes in local, regional or national needs for psychological services. In other words, how does the training program stay current?
 - Include here information regarding how the program has responded to previous feedback from the CoA since the last accreditation review. Although this information has been requested at the end of each domain, please provide a brief summary here to demonstrate the self-assessment aspect of addressing these issues.
2. The program provides resources and/or opportunities to enhance the quality of its training and supervision staff through continued professional development.
- **F.2. Describe how your program and its host institution support the continuing professional development of its training and supervisory staff.**
3. The program and its host institution value and recognize the importance of resident training and of the supervisors' training and supervisory efforts, and demonstrate this in tangible ways.
- **F.3. How does the program/programs and its host institution tangibly demonstrate value for the importance of the staff's training activities?**
 - Describe any additional or unique aspects of your program not addressed in the questions in this self-study outline. Are any of these aspects important to the Commission's selection of potential site visitors for your program?
 - **(IF CURRENTLY ACCREDITED):** If the CoA noted any Domain F issues in your program's last decision letter or in other correspondence since the last review, please indicate those here and provide a response (you may reference correspondence in the appendices as necessary, but provide a summary of those issues here in the narrative):

ADDITIONAL DOCUMENTATION REMINDER – Domain F

Provide documentation of self-evaluative activities, including copies of program and supervisor evaluation forms or instruments, resident performance evaluations, examinations or tests of resident competency or knowledge, and any other methods of assessing attainment of resident and program training goals and objectives (i.e. resource, process and outcome evaluation standards, methods and measurement instruments, and results.)

Complete Tables requesting information on residents' first employment after completing your program, licensure, other credentialing and/or professional activities and accomplishments.

All accredited programs must provide proximal and distal aggregate outcome data. Applicant programs are expected to provide proximal outcome data on residents' progression through the program; if the program does not yet have distal (graduate) data it should adhere to the principles of Implementing Regulation [D1-1](#) in justifying outcomes.

Domain G: Public Disclosure

The program demonstrates its commitment to public disclosure by providing written and other communications that appropriately represent it to the relevant publics.

1. The program is described accurately and completely in documents that are available to current residents, applicants, and the public. The descriptions of the program should include:
 - a) its training model, goals and objectives; its selection procedures and requirements for completion; its training supervisors, residents, facilities, service recipient populations, training settings and other resources; its administrative policies and procedures, the average amount of time per week residents spend in direct service delivery and other education and training activities, and the total duration of the program to completion.
 - b) its status with regard to accreditation, including the specific program covered by that status, and the name, address, and telephone number of the Commission on Accreditation. The program should make available, as appropriate through its sponsor institution, such reports or other materials as pertain to the program's accreditation status.
- **G.1a-b. How does the program inform its applicants and the public about its admission criteria, application and selection processes, its training model and mission (values, training goals, objectives, etc), its requirements for completion, its resources, its administrative policies and procedures, and its accreditation status?**
 - **Indicate the program's web address, if it has one:**
 - **Provide a complete set of all program documents (brochures, recruiting practices, program advertisements, web pages, etc.) available to current and prospective residents and place them in a labeled appendix. Reference these documents here:**

List Public Documents	Location in Self Study (Appendix & Page #)

- Describe how these documents are distributed to applicants and residents.
- Ensure that the current accredited status of your specific program is accurately presented in all public materials, including program web pages, along with the address and telephone number (202-336-5979) of the CoA. Reference where in each applicable document this information can be verified by reviewers:
- (IF CURRENTLY ACCREDITED): If the CoA noted any Domain G issues in your program’s last decision letter or in other correspondence since the last review, please indicate those here and provide a response (you may reference correspondence in the appendices as necessary, but provide a summary of those issues here in the narrative):

ADDITIONAL DOCUMENTATION REMINDER – Domain G

Provide copies of program public materials (flyers, brochures, posters, listings in directories, etc.) and program handbooks and materials, as appropriate, as well as public materials on your host or sponsor institution.

If any of the above materials are available online, provide the (working) web links.

Domain H: Relationship with Accrediting Body

The program demonstrates its commitment to the accreditation process by fulfilling its responsibilities to the accrediting body from which its accredited status is granted.

1. The training program abides by the accrediting body’s published policies and procedures, as they pertain to its recognition as an accredited postdoctoral training site.
- **H.1. Since your program’s last application for renewal of accreditation (if applicable), have there been instances of program departure from the accreditation G&P? If so, please explain.**

- **At your last accreditation review or site visit (if applicable), if issues or problems were raised by the Commission on Accreditation, what actions has your program taken to respond to these issues, and what results have been achieved?**
2. The training program informs the accrediting body in a timely manner of changes in its training model, goals, objectives, curriculum plan and resources or operations that could alter the postdoctoral training program's quality.
- **Review Implementing Regulation [C-19](#).**
 - **H.2. Since your last site visit (if applicable) have there been any changes in your, or your sponsor institution's, mission or resources, or in your training program's processes or practices, or other issues that have influenced the quality of the training program, the training staff or the residents' training experiences? If so, describe them.**
 - **Provide any correspondence with CoA in appendices. Page #:**
 - **Does your program or its host institution have any plans that might substantially change the nature, function or mission of your postdoctoral program in the foreseeable future? Describe these plans and their potential consequences to your program's accreditation status.**
3. The training program is in good standing with the accrediting body in terms of payment of fees associated with the maintenance of its accredited status.
- **Describe the program's status with regard to financial responsibility to the accrediting body.**
 - **(IF CURRENTLY ACCREDITED): If the CoA noted any Domain H issues in your program's last decision letter or in other correspondence since the last review, please indicate those here and provide a response (you may reference correspondence in the appendices as necessary, but provide a summary of those issues here in the narrative):**

Table 1

Postdoctoral Residency Programs

*Domain A (Eligibility)*⁶

Program Name:

Institution Name:

Date Submitted:

Date of Last Site Visit:

Program's Primary Educational Model and Professional Training Goal(s) and Objectives: ⁷

⁶ Please complete a separate set of Tables for each area in which you are seeking accreditation (traditional and specialty) so that it is clear which residents and supervisors are involved in each specialty.

⁷ Provide a succinct description of the model; a fuller description should be provided in the narrative for Domain B.

Table 2(a)

Current Program Training Supervisors (Summary Information)⁸

Psychologist Training Supervisors (involved with planning/implementation of postdoctoral residency; have direct contact with residents):

Name	# of hours per week at this institution	% Time Assigned to program (based upon 40 hr/wk)	Role/Contribution to program	Highest Degree Earned	Psychology Licensure (Y/N)	ABPP Specialty

Non-Psychologist Training Supervisors (may be involved with planning/implementation of residency and have direct contact with residents but are not psychologists):

Name	# of hours per week at this institution	% Time Assigned to program (based upon 40 hr/wk)	Role/Contribution to program	Highest Degree Earned	Licensure (Y/N)

⁸ For **EACH** person identified in this table as having direct contact with residents, please prepare an abbreviated curriculum vita according to the format provided.

Adjunct Staff/Supervisors (Psychologist and non-psychologist staff who are not involved with planning/implementation of residency but who have direct contact with residents):

Name	# of hours per week at this institution	% Time Assigned to program (based upon 40 hr/wk)	Role/Contribution to program	Highest Degree Earned	Licensure (Y/N)

Other Contributors to Program⁹ (e.g., didactic seminar presenters):

Name	# of hours per week at this institution	% Time Assigned to program (based upon 40 hr/wk)	Role/Contribution to program	Highest Degree Earned	Licensure (Y/N)

⁹ Curriculum vita not necessary for other contributors who have minimal contact with residents.

Table 2(b)

Current Residency Supervisor Demographics

<i>Number of individuals who identify themselves as:</i>		Psychologist Training Supervisors	Non-Psychologist Training Supervisors	Adjunct Staff/ Supervisors	Other Contributors
African American/Black	M				
	F				
Caucasian	M				
	F				
Hispanic/Latino	M				
	F				
Asian/Pacific Islander	M				
	F				
American Indian/Alaska Native	M				
	F				
Multiethnic¹⁰	M				
	F				
TOTAL NUMBER	M				
	F				
Other¹¹	M				
	F				
Subject to Americans with Disabilities Act	M				
	F				
Foreign Nationals¹²	M				
	F				

¹⁰ Individuals identifying with more than 1 of the above categories. For those individuals who are categorized as multiethnic, be sure to only include them in this category and not in other ethnicity categories.

¹¹ Programs may choose to note other types of diversity described in Domain A.5.

¹² Individuals who are not U.S. citizens or Permanent Residents.

Table 2(c)

Professional Activities in the Last Seven Years

<i>The number of current staff who in the last 7 years have been:</i>	Members of Professional Societies	Authors/Co-Authors of Papers at Professional Meetings	Authors/Co-Authors in Professional/Scientific Journals	Recipients of Federal Grants or Other Awards	Engaged in Delivery of Professional Services
Psychologist Training Supervisors					
Non-Psychologist Training Supervisors					
Adjunct Staff/ Supervisors					
Other Contributors					

CoA Abbreviated Postdoctoral Residency Staff Summary

(Limit of one (1) double-sided or two (2) single-sided pages per staff member)
Answer ALL items including names of sites, types of sites, and "yes" or "no" where indicated.

Name: _____

Highest Degree Earned: Ph.D. Psy.D. Ed.D. Other (specify): _____

Date of Degree: _____

Area of Degree (Clinical, School, Counseling, Combined, Other-specify): _____

Institution Awarding Degree: _____

APA/CPA Accredited Doctoral Program: No: Yes:

Psychology Internship Completed: No: Yes: Year: _____

Name of Program: _____

Type of Setting (e.g., Mental Health Center, VA Medical Center): _____

APA/CPA Accredited Internship: No: Yes:

Psychology Postdoctoral Residency Completed: No: Yes: Year: _____

Name of Program: _____

Area of Emphasis: _____

Type of Setting: _____

APA/CPA Accredited Postdoctoral Residency: No: Yes:

Licensure: No: Yes:

State(s)/Province(s): _____

ABPP Diplomate: No: Yes:

Specialty: _____

Currently listed in National Register and/or Canadian Register? No: Yes:

Primary Professional Appointment (name of institution/site): _____

Position title: _____

Type of Setting: _____

Academic Position, Rank, Tenure-Status, Year of Appointment to program under review:

Describe Clinical/Service Delivery Responsibilities in current position with program under review:

Professional Honors & Recognition (*Member/Fellow of Professional or Scientific Society, etc.*):

Selected Presentations to Professional/Scientific Groups in Last Seven Years (*List chronologically using APA format for bibliographic citations*):

Selected Publications in Last Seven Years (*List chronologically using APA format for bibliographic citations*):

Selected Funded Research Grants or Training Contracts in Last Seven Years (*Include funding source, duration of funding, total direct costs*):

Other Professional Activities in Last Seven Years (*Include leadership activities/roles in state /provincial, regional or national professional organizations*):

Table 3(a)

Resident Statistics

<i>For the last seven years, report the number of residents for each entering resident cohort who:</i>	2009-2010	2008-2009	2007-2008	2006-2007	2005-2006	2004-2005	2003-2004
Applied to program							
Offered admission							
Funded							
Unfunded							

Resident Professional Activities

<i>Of the residents entering in each cohort, the number who are <u>currently</u>:</i>	2009-2010	2008-2009	2007-2008	2006-2007	2005-2006	2004-2005	2003-2004
Members of Professional/ Research Societies (include student affiliates)							
Authors/Co-Authors of Papers at Prof. Mtg.							
Authors/Co-Authors of Articles in Prof. and/or Scientific Journals ¹³							
Recipients of Federal Grants or Private Foundation Awards							
Recipients of State or Local Grants or Contracts							
Leadership roles/activities in state/provincial, regional or national professional organizations							

¹³ Work published (or in press)/presented during or after graduate training. Books may be included.

Resident Support: Please provide the following information:

- A. No. of hours/week required of a full-time resident _____
- B. Stipend for a full-time one-year resident _____
- C. No. of hours/week required of a part-time resident _____
- D. Stipend for a part-time resident _____
- E. Total hours required to complete the residency _____

Table 3(b)

Resident Demographics:

<i>Residents entering each year who identify themselves as:</i>		2009-2010	2008-2009	2007-2008	2006-2007	2005-2006	2004-2005	2003-2004
African-American/Black	M							
	F							
Caucasian	M							
	F							
Hispanic/Latino	M							
	F							
Asian/Pacific Islander	M							
	F							
Multiethnic or None of the Above ¹⁴	M							
	F							
TOTAL NUMBER	M							
	F							
Other ¹⁵	M							
	F							
Total Number Subject to Americans with Disabilities Act	M							
	F							
Foreign Nationals ¹⁶	M							
	F							

¹⁴ Individuals identifying with more than one OR none of the above areas. For those individuals who are categorized as multiethnic, be sure to only include them in this category and not in other ethnicity categories.

¹⁵ Programs may choose to note other specific types of diversity as broadly described in Domain A.5 of the G&P for doctoral programs.

¹⁶ Individuals who are not US citizens or Permanent Residents (i.e., have student or other type of visa to attend residency program).

Table 4

Program Residents - Pre-Residency Experience/Education

Provide the following information for each resident entering your program for the last 7 academic years. (DO NOT IDENTIFY THE RESIDENTS BY NAME). Start with residents entering the program in 2009-2010 and report back to those entering in 2003-2004. Please place the requested information in the following format and identify by year of admission (e.g., 09.001, 09.002, 09.003, etc):

ID#	Name and location of doctoral degree program and year of completion	Substantive area (Clinical, Counseling, School, Combined)	Degree program type (PhD, PsyD, EdD)	Area of training emphasis in doctoral program (if applicable)	Name and location of pre-doctoral internship and year of completion

Table 5

Program Residents - Post-Residency Experience

Provide the following information for each resident who completed your program in the last 7 academic years. (DO NOT IDENTIFY THE RESIDENTS BY NAME). Start with residents completing the program in 2008-2009 and report back to those finishing in 2002-2003. Please place the requested information in the following format and identify by year of admission (e.g., 06.001, 05.001, etc):

ID#	Initial Post-Residency Employment Setting Code*	Initial Job Title	Current Employment Code*	Year Degree Completed	Current Job Title (if different)	Psychology Licensure (Y/N)?	Licensed in State(s)	Other Professional Achievements (e.g. fellow status, diplomate)

*See codes on next page.

Post-Residency Employment Setting Codes

1. Community Mental Health Center
2. Health Maintenance Organization
3. Medical Center
4. Military Medical Center
5. Private General Hospital
6. General Hospital
7. Veterans Affairs Medical Center
8. Private Psychiatric Hospital
9. State/County Hospital
10. Correctional Facility
11. School District/System
12. University Counseling Center
13. Academic Teaching Position
 - 13a. doctoral program
 - 13b. masters program
 - 13c. 4-year college
 - 13d. community/2 yr. College
 - 13e. adjunct professor
14. Independent Practice
15. Academic Non-Teaching Position
16. Medical School
33. Other (e.g., consulting), please specify
44. Student
99. Not currently employed

Table 6

Postdoctoral Residency Outcome Measures: Credentials

Please provide credentialing information on the immediate past **seven (7)** years of graduates (or since the inception of your program if it has been in existence less than seven years). The individuals reported in this table should match those reported in Table 5.

ID Number	State/Province of Primary License/Certificate	Listed in National Register or Canadian Register	Fellowship in Professional Scientific Psychology	American Board of Professional Psychology (ABPP)													American Board of Psychological Hypnosis (ABPH)		
				Child & Adolescent	Cognitive & Behavioral	Couple and Family	Clinical Health	Clinical Neuropsychology	Counseling	Clinical	Forensic	Group	Organization & Business	Psychoanalysis	Rehabilitation	School	Clinical Hypnosis	Experimental Hypnosis	

ID Number	State/Province of Primary License/Certificate	Listed in National Register or Canadian Register	Fellowship in Professional Scientific Psychology	American Board of Professional Psychology (ABPP)													American Board of Psychological Hypnosis (ABPH)	
				Child & Adolescent	Cognitive & Behavioral	Couple and Family	Clinical Health	Clinical Neuropsychology	Counseling	Clinical	Forensic	Group	Organization & Business	Psychoanalysis	Rehabilitation	School	Clinical Hypnosis	Experimental Hypnosis