

COMMISSION ON  
ACCREDITATION

IMPLEMENTING REGULATIONS

Section C:  
IRs Related to the *Guidelines and Principles*

for [Doctoral Graduate Programs](#)

for [Internship Programs](#)

for [Postdoctoral Residency Programs](#)

## **G&P IRs for Doctoral Graduate Programs**

Systematic Evaluation of Supervision, Consultation, and Evaluation in Programs .....	<a href="#">C-1</a>
Academic Residency for Doctoral Programs.....	<a href="#">C-2</a>
Record of Student Complaints in CoA Periodic Review .....	<a href="#">C-3</a>
Interns and Use of the Title “Doctor” .....	<a href="#">C-4</a>
Awarding the Doctoral Degree Prior to Completion of the Internship.....	<a href="#">C-5</a>
Position Titles of Psychology Interns .....	<a href="#">C-6</a>
Program Names, Labels, and other Public Descriptors .....	<a href="#">C-6(a)</a>
Accreditation Status and CoA Contact Information .....	<a href="#">C-6(b)</a>
Program Record-Keeping on Complaints/Grievances.....	<a href="#">C-12</a>
Definition of “Developed Practice Areas” for Doctoral and Internship Programs and the Process by which Areas May be Identified as Such .....	<a href="#">C-14</a>
Review of Applications for the Recognition of Developed Practice Areas.....	<a href="#">C-14(a)</a>
Appeal of Decisions for Areas Seeking to be Added to the Scope of Accreditation as a Developed Practice Area.....	<a href="#">C-14(b)</a>
Evaluating Program Adherence to the Principle of <i>Broad and General Preparation</i> for Doctoral Programs .....	<a href="#">C-16</a>
Core Faculty in Doctoral Programs .....	<a href="#">C-18</a>
Notification of Changes to Accredited Programs .....	<a href="#">C-19</a>
Disclosure of Education/Training Outcomes and Information Allowing for Informed Decision-Making to Prospective Doctoral Students.....	<a href="#">C-20</a>
Programs Operating Outside the United States .....	<a href="#">C-21</a>
Diversity Recruitment and Retention.....	<a href="#">C-22</a>
Footnote 4 .....	<a href="#">C-22(a)</a>
Diversity Education and Training.....	<a href="#">C-23</a>
Empirically Supported Procedures/Treatments .....	<a href="#">C-24</a>
Positive Student Identification Consistent with Higher Education Opportunity Act .....	<a href="#">C-25</a>
Practicum Guidelines for Doctoral Programs.....	<a href="#">C-26</a>
Distance and Electronically Mediated Education in Doctoral Programs.....	<a href="#">C-27</a>
Telesupervision.....	<a href="#">C-28</a>
Conduct of Doctoral Reviews.....	<a href="#">C-31</a>
Selection and Admissions of Students into Accredited Doctoral Programs.....	<a href="#">C-31(a)</a>
Student Attrition Rates for Doctoral Programs.....	<a href="#">C-31(b)</a>
Expected Internship Placements for Students in Accredited Doctoral Programs.....	<a href="#">C-31(c)</a>
Licensure Rate for Doctoral Programs.....	<a href="#">C-31(d)</a>
Outcome Data for Doctoral Programs.....	<a href="#">C-32</a>

## **G&P IRs for Internship Programs**

Systematic Evaluation of Supervision, Consultation, and Evaluation in Programs .....	<a href="#">C-1</a>
Record of Student Complaints in CoA Periodic Review .....	<a href="#">C-3</a>
Interns and Use of the Title “Doctor” .....	<a href="#">C-4</a>
Position Titles of Psychology Interns .....	<a href="#">C-6</a>
Program Names, Labels, and other Public Descriptors .....	<a href="#">C-6(a)</a>
Accreditation Status and CoA Contact Information .....	<a href="#">C-6(b)</a>
Selection of Interns .....	<a href="#">C-7</a>
Completion of an Accredited Internship Program: Issue of Half-Time, Two-Year Internship Programs .....	<a href="#">C-8</a>
Intern Funding.....	<a href="#">C-9</a>
Affiliated Internship Training Programs.....	<a href="#">C-10</a>
Program Record-Keeping on Complaints/Grievances.....	<a href="#">C-12</a>
Definition of “Developed Practice Areas” for Doctoral and Internship Programs and the Process by which Areas May be Identified as Such .....	<a href="#">C-14</a>
Review of Applications for the Recognition of Developed Practice Areas.....	<a href="#">C-14(a)</a>
Appeal of Decisions for Areas Seeking to be Added to the Scope of Accreditation as a Developed Practice Area.....	<a href="#">C-14(b)</a>
Jurisdiction of Licensure for Supervisors .....	<a href="#">C-15</a>
Required Supervision in Internship and Postdoctoral Programs .....	<a href="#">C-15(b)</a>
Consistency in Internship Experiences within a Program .....	<a href="#">C-17</a>
Notification of Changes to Accredited Programs .....	<a href="#">C-19</a>
Diversity Recruitment and Retention.....	<a href="#">C-22</a>
Footnote 4 .....	<a href="#">C-22(a)</a>
Diversity Education and Training.....	<a href="#">C-23</a>
Empirically Supported Procedures/Treatments .....	<a href="#">C-24</a>
Positive Student Identification Consistent with Higher Education Opportunity Act .....	<a href="#">C-25</a>
Telesupervision .....	<a href="#">C-28</a>
Internship and Postdoctoral Residency Didactics.....	<a href="#">C-29</a>
Outcome Data for Internship and Postdoctoral Residency Programs.....	<a href="#">C-30</a>

## **G&P IRs for Postdoctoral Residency Programs**

Systematic Evaluation of Supervision, Consultation, and Evaluation in Programs .....	<a href="#">C-1</a>
Record of Student Complaints in CoA Periodic Review .....	<a href="#">C-3</a>
Program Names, Labels, and other Public Descriptors .....	<a href="#">C-6(a)</a>
Accreditation Status and CoA Contact Information .....	<a href="#">C-6(b)</a>
Statement on Postdoctoral Residency Accreditation .....	<a href="#">C-11</a>
Accreditation Process for Postdoctoral Residencies .....	<a href="#">C-11(a)</a>
Postdoctoral Residency Substantive Specialty Practice Areas .....	<a href="#">C-11(b)</a>
Postdoctoral Residency Program Transitions .....	<a href="#">C-11(c)</a>
Emphases/Tracks within Traditional Area Postdoctoral Residency Programs .....	<a href="#">C-11(d)</a>
Program Record-Keeping on Complaints/Grievances .....	<a href="#">C-12</a>
Statement on Number of Postdoctoral Residents .....	<a href="#">C-13</a>
Jurisdiction of Licensure for Supervisors in Postdoctoral Residencies .....	<a href="#">C-15(a)</a>
Required Supervision in Internship and Postdoctoral Programs .....	<a href="#">C-15(b)</a>
Notification of Changes to Accredited Programs .....	<a href="#">C-19</a>
Diversity Recruitment and Retention .....	<a href="#">C-22</a>
Footnote 4 .....	<a href="#">C-22(a)</a>
Diversity Education and Training .....	<a href="#">C-23</a>
Positive Student Identification Consistent with Higher Education Opportunity Act .....	<a href="#">C-25</a>
Telesupervision .....	<a href="#">C-28</a>
Internship and Postdoctoral Residency Didactics .....	<a href="#">C-29</a>
Outcome Data for Internship and Postdoctoral Residency Programs .....	<a href="#">C-30</a>

### **C-1. Systematic Evaluation of Supervision, Consultation, and Evaluation in Programs** (Commission on Accreditation, July 1997; revised January 2007, October 2008)

In the context of these sections of the *Guidelines and Principles for Accreditation*, the term “evaluation” refers to such activities as program evaluation or evaluation of an intervention at the individual or group level. It does not refer to the psychological assessment of an individual person.

#### Doctoral Graduate Programs

*B.3. In achieving its objectives, the program has and implements a clear and coherent curriculum plan that provides the means whereby all students can acquire and demonstrate substantial understanding of and competence in the following areas:*

*(c) Diagnosing or defining problems through psychological assessment and measurement and formulating and implementing intervention strategies (including training in empirically supported procedures). To achieve this end, the students shall be exposed to the current body of knowledge in at least the following areas: theories and methods of...consultation and supervision; and evaluating the efficacy of interventions;*

At the doctoral level, students are expected to be exposed to the current body of knowledge in supervision, consultation, and evaluation.

#### Internship Training Programs

*B.4. In achieving its objectives, the program requires that all interns demonstrate an intermediate to advanced level of professional psychological skills, abilities, proficiencies, competencies, and knowledge in the areas of:*

*(b) Theories and/or methods of consultation, evaluation, and supervision;*

The G&P elaborate different levels of competency expected in supervision, evaluation, and consultation. Although direct experience in the practice of these activities will be the typical road to intermediate or advanced competence, actual practice is not required at the internship level.

#### Postdoctoral Residency Programs

*B.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) 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.

## C-2. Academic Residency for Doctoral Programs

(From the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, Section III.A., Domain A.4; Commission on Accreditation, July 2007)

The doctorate is the highest degree of educational accomplishment in professional psychology. The level of sophistication in thought and behavior required for the degree is attained in part through full-time study in residence at an institution of doctoral education. To this end, the *Guidelines and Principles* (Section A.4.) requires of each student “a minimum of 3 full-time academic years of graduate study—at least 2 of which must be at the institution from which the doctoral degree is granted and at least 1 year of which must be in full-time residence or the equivalent thereof.”

Residency has two primary purposes: student development and socialization, and student assessment. With regard to student development, residency allows students (1) to concentrate on course work, professional training and scholarship; (2) to work closely with professors, supervisors and other students; and (3) to acquire the habits, skills, and insights necessary for attaining a doctoral degree in psychology. Full-time residence provides students other opportunities, including obtaining fluency in the language and vocabulary of psychology as enhanced by frequent and close association with, apprenticing to, and role modeling by faculty members and other students; obtaining valuable experience by attending and participating in both formal and informal seminars; colloquia; discussions led by visiting specialists from other campuses, laboratories, or governmental research and/or practice organizations; and, obtaining support in thesis, dissertation, or doctoral project work through frequent consultations with advisors.

An equally important purpose of the residency requirement is to permit faculty, training staff, supervisors, and administrators to execute their professional, ethical, and potentially legal obligations to assess all elements of student competence. Executing these obligations is an essential aspect of assuring quality and protecting the public. These elements include not only student-trainees' knowledge and skills, but also their emotional stability and well being, interpersonal competence, professional development, and personal fitness for practice. Through such student assessment, accredited programs can ensure—insofar as possible—that their graduates are competent to manage relationships (e.g., client, collegial, professional, public, scholarly, supervisory, teaching) in an effective and appropriate manner. This capacity for managing relationships represents one of the competencies that define professional expertise.

Programs seeking to satisfy the requirement of one year of full-time residency based on "the equivalent thereof" must demonstrate how the proposed equivalence achieves all of the purposes of the residency requirement, as articulated above. In evaluating whether the residency requirement is satisfied, the Commission will consider processes and indicators related to the elements of student development and socialization and student assessment detailed in paragraphs 2 and 3 of this Implementing Regulation.

**Note:** *The above statement on the purpose of full-time residency is drawn substantially from the Policy Statement of the Council of Graduate Schools titled "The Doctor of Philosophy Degree" (Council of Graduate Schools, 2005), the statement of the Council of Chairs of Training Councils (December, 2003) titled "Comprehensive Evaluation of Student Competence," and the APA Policy Statement on Evidence-Based Practice in Psychology (August, 2005).*

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

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

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

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



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

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

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

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

### **C-6. Position Titles of Psychology Interns**

(Commission on Accreditation, original date unknown; revised 1998)

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

**C-6(a). Program Names, Labels, and Other Public Descriptors**  
(Commission on Accreditation, January 2002; revised January 2003)

**What the internship or postdoctoral residency program is called:**

Because accreditation is available to both doctoral internships and postdoctoral residencies, programs must portray themselves in a manner that does not misrepresent their level of training. Thus, in general, doctoral internship programs should not describe themselves as “residencies,” and postdoctoral residency programs should not describe themselves as “internships.” It is recognized, however, that agencies and institutions providing training at either or both of these levels may have local or state regulations about, or restrictions on, the terms used to portray programs that prepare individuals for practice. In the event that it is not possible to use the term “internship” for doctoral internship training programs, and “residency” for postdoctoral residency training programs, the program in question should include in all public documents (e.g., brochures, materials, web sites, certificates of completion) a statement about the program’s accredited status.

Preferred:

- “Internship in Clinical Psychology”
- “Internship in Professional Psychology”

Example with accurate accreditation status:

- “Residency in Clinical Psychology, accredited as a doctoral internship in professional psychology”

**How the program describes itself:**

It is recognized that programs have many possible reasons why they choose the self-descriptors or labels that they do. Some are bound by state law, others by institutional regulation, and others simply seek to assign a label to their program to describe their focus to the public. Given that these self-descriptors do not necessarily coincide with recognized areas of accreditation, any program whose label does not reflect the specific area in which it received accreditation must portray its accredited status in a manner consistent with the G&P.

Postdoctoral programs accredited in substantive or specialty areas may offer training in areas of emphasis. Areas of emphasis may be described in all public materials except the certificate of completion. Programs will state clearly that accreditation is specific to the substantive or specialty area only.

Preferred:

- “Doctoral program in clinical psychology”
- “Internship in clinical psychology”
- “Internship in professional psychology”

Examples with accurate accreditation status:

- “Doctoral program in medical psychology, accredited as a program in clinical psychology”
- “Internship in pediatric psychology, accredited as a doctoral internship in professional psychology”
- “Postdoctoral residency with an emphasis in geropsychology, accredited as a postdoctoral residency in clinical psychology”

### **What trainees are called:**

For doctoral internships, trainees (per the G&P) have a training status at the site that is officially recognized in the form of a title or designation such as “psychology intern” (consistent with the licensing laws of the jurisdiction in which the internship is located).

For postdoctoral residencies, trainees (per the G&P) 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.

In both cases, the title assigned to the trainee should not mislead the public about their level of training.

### **Certificate of completion of internships and residencies:**

The certificate of completion for doctoral internships should reflect the program's substantive area of professional psychology, or indicate that the program is an internship in "professional psychology.”

Examples:

- “X has successfully completed a doctoral internship in clinical psychology”
- “Y has successfully completed a doctoral internship in professional psychology”

Certificates of completion for postdoctoral residencies reflect only the substantive traditional practice area (clinical, counseling, or school) or the recognized specialty practice areas in which the program has been accredited. Areas of emphasis may not be identified on the certificate.

Examples:

- “completed a postdoctoral residency in clinical psychology”
- “completed a postdoctoral residency in clinical health psychology”

**C-6(b). Accreditation Status and CoA Contact Information**  
(Commission on Accreditation, November 2010; revised March 2015)

Domain G.1b of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology* (G&P) for doctoral, internship, and postdoctoral residency programs states that the program must include in its public materials:

*“(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 [CoA]. The program should make available, as appropriate through its sponsor institution, such reports or other materials as pertain to the program’s accreditation status.”*

Programs that are accredited by agencies recognized by the U.S. Department of Education (e.g., CoA) are required to provide the contact information for the accrediting body when the accreditation status is cited. The intent of this Implementing Regulation is to clarify how this information should be presented in order to ensure consistency across programs as well as provide useful information to the public.

Accreditation status:

- For doctoral programs the only official accredited statuses are: “Accredited,” “Accredited on probation,” and “Accredited inactive.”
- For internships and postdoctoral residency programs the only official accredited statuses are: “Accredited on contingency,” “Accredited,” “Accredited on probation,” and “Accredited inactive,”
- Programs may indicate their appropriate status (see above) by referring to “APA” accredited or accredited “by the Commission on Accreditation of the American Psychological Association,” For example, “APA-accredited,” “APA-accredited on contingency,” “accredited by the Commission on Accreditation of the American Psychological Association,” “accredited on contingency by the Commission on Accreditation of the American Psychological Association,” etc.
- Programs should not use the term “APA-approved,” since at APA this term is used to denote approved sponsors of continuing education rather than accreditation of academic/training programs.
- If there are multiple programs in the same department, institution, or agency, it should be clearly indicated in public materials which programs are APA-accredited. Multiple accredited programs should refer to their accredited status individually and in accordance with IR C-6(a).

CoA contact information:

- In ALL public documents, including the program’s website (if applicable), where the program’s accreditation status is cited as above, the name and contact information for the CoA must be provided.
- Information must include the address and direct telephone number for the APA Office of Program Consultation and Accreditation. Other information (i.e., website, e-mail address) may also be included.
- Programs should clarify that this contact information should be used for questions related to the program’s accreditation status. In doing so, the program should also ensure that its own contact information is clearly indicated in its materials so that the public knows how to contact the program directly with any other questions.

- Programs are encouraged to use the following format to provide this information:

*\*Questions related to the program's accredited status should be directed to the Commission on Accreditation:*

*Office of Program Consultation and Accreditation  
American Psychological Association  
750 1<sup>st</sup> Street, NE, Washington, DC 20002  
Phone: (202) 336-5979 / E-mail: [apaaccred@apa.org](mailto:apaaccred@apa.org)  
Web: [www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)*

**C-7. Selection of Interns**  
(Commission on Accreditation, October 1983; revised 1998)

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

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

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

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

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

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

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

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



### **C-9. Intern Funding**

(Commission on Accreditation, October 1981; revised March 1992, November 2001, July 2011)

This Implementing Regulation clarifies the CoA's interpretation of Domain C.3(a) of the *Guidelines and Principles* (G&P) for internship programs regarding: unfunded internships, the sufficiency of intern stipends, and the equity of stipends.

#### **Unfunded Internships**

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

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

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

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

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

#### **Sufficiency of Funding**

The payment of a stipend is a concrete acknowledgement that an intern in the agency is valued and emphasizes that there is a significant training component in addition to experiential learning. While recognizing that internship stipends will not rise to the level of salaries for permanent staff psychologists, it should also be clear that compensation needs to be sufficient so as to avoid imposing an undue hardship upon the intern in terms of basic living needs.

Internship training should be funded so as to: (1) lend tangible value to the intern's service contribution; (2) communicate a valid and dignified standing with professional/trainee community; and (3) be set at a

level that is representative and fair in relationship to both the geographic location and clinical setting of the training site. Stipends should be reasonable in comparison to other accredited internship programs in the local area. Wherever possible, basic support for health/medical insurance should be in place to protect the welfare of interns and their families.

Internship programs should communicate to CoA any intentions to substantially decrease interns' stipends, in accordance with Implementing Regulation C-19.

**Stipend Equity**

The CoA continues to encourage uniform stipends across positions within internship programs, including consortia or otherwise. Consistent with the *Guidelines and Principles for Accreditation*, the CoA recognizes that, unless there are exceptional circumstances, the resources of a consortium are expected to be pooled, including compensation for interns. In certain exceptional cases, the CoA recognizes that resource inequities might exist. In these cases, the CoA encourages the programs to identify how resources might be pooled across consortium participants in such a way that comparable intern compensation can be achieved.

**C-10. Affiliated Internship Training Programs**  
(Commission on Accreditation, March 1998; revised October 2007)

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

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

- 1) The internship and the program with which it is affiliated are site visited and accredited separately and in the same manner as other programs and internships. However, as part of their self-study reports, the programs would designate that they are either (a) an affiliated internship or (b) a program that places students at an affiliated internship.
- 2) The CoA understands that affiliated internships (formerly known as captive internships) involve close integration with the affiliated doctoral programs. However, affiliated internship programs are independently accredited and must be reviewed by the CoA as separate entities and meet all the accreditation requirements expected of a non-affiliated internship program. Affiliated internships must provide the CoA with information specific to the internship program during the course of review. As such, an internship self-study may not simply reference aspects of a doctoral program's self-study to fulfill the internship requirements of the *Accreditation Guidelines and Principles*. All relevant program materials must be submitted within the internship self-study, and all information (e.g. policies and procedures, outcome data, etc.) should be specific to the internship training program.
- 3) Any affiliated internship programs that make use of multiple independently administered entities as training sites will be reviewed as a consortium and will be required to meet all aspects of Domain C.4 of the *Accreditation Guidelines and Principles* for internship programs.
- 4) The internship clearly states its status as exclusively affiliated or partially affiliated in all descriptive material and representations to the public.

If approved, the affiliated internship will be listed in the *American Psychologist* listing for accredited internships. The listing for the internship agency will state that it is an exclusively affiliated or partially affiliated internship; the name of the accredited doctoral program also will be stated (e.g., X Internship [affiliated with Y University Training Program]).

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

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

### **C-11(a). Accreditation Process for Postdoctoral Residencies**

(Commission on Accreditation, January 2000; revised January 2003; October 2004; July 2010)

#### **Principles:**

- 1) Postdoctoral residencies may be accredited as programs preparing individuals for practice at an advanced level in traditional practice areas and in specialty practice areas.
- 2) Accreditable specialty practice areas include only those recognized by broad professional endorsement, as defined in Implementing Regulation C-11(b).
- 3) Review of postdoctoral residencies can be accomplished through existing CoA personnel and procedures.
- 4) All postdoctoral residency review processes will include a preliminary review according to the *Guidelines and Principles for Accreditation of Programs in Professional Psychology (G&P)*.
- 5) Certificates of completion provided to residents that provide information about practice areas for which the program prepares residents must reflect the practice areas (traditional or specialty) in which it was reviewed for accreditation.
- 6) The cost of the site visit to a postdoctoral residency program is linked to the number of visitors to the program.
- 7) The cost of the application and annual fee for all postdoctoral residency programs is the same for all programs as outlined below under Formats 1, 2, and 3.
- 8) In its self-study, the postdoctoral residency program is asked to indicate the Format (1, 2 or 3) it will follow.

#### **Format #1 – Traditional Practice Programs**

*Postdoctoral Residency Training in a Traditional Practice Area:* Programs using this self-study format are those in Clinical, Counseling, or School Psychology that provide greater depth of training than that which occurs during the internship training year. These programs articulate a general model of training and a related set of goals, objectives, and competencies that apply to all postdoctoral residents. In the program, residents may have a greater exposure to more specific and focused emphases within the traditional practice area. These emphases can occur through rotations. Examples of such areas include, but are not limited to, substance abuse, PTSD, geropsychology, etc. Training programs in traditional practice areas that receive approval for a site visit will be visited by two site visitors who represent the traditional practice area. Certificates of completion from programs using this format describe only the traditional practice area of training.

#### **Format #2 – Specialty Practice Programs**

*Postdoctoral Residency Training in Specialty Practice Areas:* Programs using this self-study format have as a major goal the training of specialists in a specialty practice area. Specialty practice areas are limited to those meeting the definition contained within CoA's Implementing Regulation C-11(b). Programs applying for accreditation as a specialty indicate how they adhere to the G&P and to the postdoctoral training guidelines of the designated specialty area. Goals, objectives, and competencies within the training program must be consistent with those of the designated specialty area. Training programs in

specialty practice areas that receive approval for a site visit will be visited by two site visitors, one of whom has expertise in the specialty practice area. Certificates of completion for programs using this format describe only the specialty practice area of training.

### Format #3 – Multiple Practice Programs

*Postdoctoral Residency Training in Multiple Practice Areas:* Programs using this format include combinations of two or more traditional practice and/or specialty practice programs organized within the same training agency or institution that conform to the definition provided in C-11(b). Training agencies and institutions applying with multiple practice programs indicate how they adhere to the G&P and to the postdoctoral training guidelines of the designated specialty practice areas. For example, multiple postdoctoral residency programs that provide training in Clinical Psychology and in Clinical Neuropsychology, where the field follows a two-year training sequence, would need to honor the specialty area guidelines in that specialty. Multiple practice programs may prepare a single self-study, but will need to provide separate sections relating to each specific postdoctoral residency program under certain accreditation domains (e.g., an application involving a Clinical Child Psychology program and a Clinical Neuropsychology program includes separate sections for each program under Domains B, C, and F).

The number of site visitors to a multiple practice program will be determined by the number of traditional practice and/or specialty practice residencies within the program. Certificates of completion for programs using this format indicate the traditional practice or specialty practice training program completed by each resident. Multiple practice postdoctoral programs under Format #3 pay only a single application and annual fee in the same fashion as programs representing Formats #1 or #2. When there is a discrepancy across programs in the year at which the next site visit is due (e.g., a Clinical Psychology residency is accredited for 7 years and a Clinical Health Psychology residency is accredited for 5 years), the programs may request a single reaccreditation site visit in 5 years or independent visits in 5 and again in 7 years.

Applicant and accredited multiple practice postdoctoral residency programs are encouraged to consult with the Office of Program Consultation and Accreditation for the purpose of maximizing the clarity and comprehensiveness of the self-study that is submitted to the Commission on Accreditation.

**C-11(b). Postdoctoral Residency Substantive Specialty Practice Areas**  
(Commission on Accreditation, July 2001; revised February 2005; April 2010; July 2013)

The *Guidelines and Principles for Accreditation* (G&P) include provisions for accreditation of postdoctoral residency training programs providing education and training in preparation for entering professional practice at an advanced level of competency in one of the substantive traditional practice areas of clinical, counseling and school psychology or in a substantive specialty practice area. In defining the meaning of “substantive specialty practice areas” for the purposes of the accreditation of **postdoctoral residency training programs only**, the Commission on Accreditation employs the criteria that follow.

The substantive specialty practice area is one that has been endorsed as follows:

- 1) The specialty has been recognized as a specialty by the Commission on the Recognition of Specialties and Proficiencies in Professional Psychology (CRSPPP) of the American Psychological Association **or** by the American Board of Professional Psychology, **and**
- 2) The specialty has been recognized by and holds membership on the Council of Specialties, **and**
- 3) The specialty has provided the CoA with specialty specific postdoctoral educational and training guidelines endorsed by the Council of Specialties.

The following areas currently meet the provisions above:

- Behavioral and Cognitive Psychology
- Clinical Child Psychology
- Clinical Health Psychology
- Clinical Neuropsychology
- Family Psychology
- Forensic Psychology
- Geropsychology
- Rehabilitation Psychology

The above list will be updated as new areas meeting the criteria are added.

NOTE: The CoA reviews and makes accreditation decisions about programs that have identified specialty practice areas based on the program’s compliance with the G&P.

**C-11(c). Postdoctoral Residency Program Transitions**  
(Commission on Accreditation; July 2010)

Consistent with Implementing Regulation C-11(b), an agency or institution with an existing postdoctoral residency training program in the traditional practice areas of Clinical, Counseling, or School Psychology may wish to develop and seek accreditation in one or more specialty practice areas. For example, an institution or consortium with an accredited postdoctoral program in Clinical Psychology may develop an associated postdoctoral program in Clinical Health Psychology and seek accreditation as a multiple practice program, consistent with Format #3 described in IR C-11(a).

Alternatively, an existing accredited traditional practice program with multiple emphasis areas may wish to develop all emphasis areas into separately accredited specialty programs. For example, an agency or institution with an accredited residency program in Clinical Psychology may develop specialty practice programs in Clinical Child Psychology and Clinical Neuropsychology, with the intention of eventually discontinuing the Clinical Psychology program. In taking this action, the program will want to ensure that the transition from a single program to multiple specialty programs does not jeopardize accreditation of the existing program.

Accredited postdoctoral programs planning to add new specialty practice postdoctoral programs, or to transition from a traditional practice program into one or more specialty practice program should consider the following factors in making the transition:

- Programs considering a transition must consult with the Office of Program Consultation and Accreditation early in the planning process. Further, consistent with IR C-19, the Commission on Accreditation must be informed in advance of such major program changes as well as the intended timeframe of the planned transition.
- For a program to maintain accreditation as a traditional practice program while developing specialty training with the intent of seeking accreditation in one or more specialty practice programs as a multiple practice program, the existing traditional practice program must continue to maintain compliance with the G&P. At a minimum, the basic integrity of the traditional practice program's training model, philosophy, and goals must be maintained. Since all or part of the program would be transitioning to a specialty program, it follows that the program may have additional or more refined goals, objectives, and competencies.
- Transitioning from an accredited program as a traditional practice program to a specialty program or multiple practice programs is a complex process. The CoA makes accreditation decisions individually for each program within multiple practice programs. It is therefore possible for an existing accredited program to be reaccredited and a newly developed applicant program to fail to receive accreditation. In order to avoid jeopardizing existing accreditation, host agencies or institutions are advised to continue administering their existing accredited program throughout the new program accreditation process.
- Specialty practice programs seeking accreditation within an agency or institution should clearly distinguish themselves from traditional practice programs already accredited within the same agency or institution. Consequently, as part of their own self-study, applicant specialty programs are advised to address Domains B, C, and F for the existing program as well as Domains B, C, and F for each of the specialty programs seeking accreditation. During the transition,



postdoctoral residents can be considered part of the existing accredited program and the applicant specialty program.

- Consistent with Domain G, programs should be accurately and completely described in documents that are available to current residents, applicants, and the public. Training experiences within an existing, accredited program must be clearly distinguished from training experiences that are not part of the accredited program. It is especially important for programs to clearly communicate to current and prospective residents the accreditation status of the program.
- Accredited programs no longer training postdoctoral residents must notify the CoA about the decision to become inactive for a given training year (See IR D.4-5) or voluntarily withdraw from accreditation (See IR D.8-1(a) and AOP 2.3.).

**C-11(d). Emphases/Tracks within Traditional Practice Area Postdoctoral Residency Programs**  
(Commission on Accreditation, April 2011)

The CoA recognizes that postdoctoral residency programs accredited in a traditional practice area may offer one or more tracks, rotations, or areas of emphasis within a program. However, such programs may lack key elements required of a single accredited traditional practice program, and instead may resemble multiple specialty programs. For example, a traditional practice program in Clinical Psychology with emphasis areas in neuropsychology and health psychology may lack key features that distinguish it from two separate specialty practice programs in Clinical Neuropsychology and Clinical Health Psychology. This Implementing Regulation is intended to clarify the key features that differentiate a single traditional practice area program with tracks, rotations, or emphasis areas, from multiple practice programs, each of which should be individually accredited.

Key elements that define a *program* regardless of track, rotation, or emphasis area(s):

- A set of goals and objectives [Domain B.2] emanating from a unitary training model and philosophy [Domain B.1]; \*\*
- Some shared educational and training experiences across all residents in the program (e.g., didactics, seminars),[Domain B.2(c)];
- Shared minimal levels of achievement across all residents in the program [Domain B];
- A designated director responsible for overall program oversight and management [Domain B.7(a)];
- Its rationale for the duration of training within the program is consistent with its unitary training model (if the length is greater than one year) [Domain A.4];
- Demonstration through proximal and distal outcome data that the program meets the goals and objectives of the unitary training model [Domain F].

A traditional practice program (e.g., Clinical Psychology) that offers concentrated training (e.g., track, rotation or emphasis) must demonstrate during the program review process that it is indeed a single program, is sufficiently broad, accurately reflects the traditional practice area [IR C-11(b)] and provides public information consistent with the above [Domain G and IR C-6(a)]. This applies both to programs that offer concentrated training in an area where specialty accreditation by the CoA is recognized (e.g., Clinical Neuropsychology or Clinical Health Psychology) as well as unrecognized areas.

**Relevant IRs:**

- C-11. Statement on Postdoctoral Residency Accreditation
- C-11(a). Accreditation Process for Postdoctoral Residencies
- C-11(b). Postdoctoral Residency Substantive Specialty Practice Areas
- C-11(c). Postdoctoral Residency Program Transitions
- C-6(a). Program Names, Labels, and Other Public Descriptors

\*\* CoA acknowledges that a program may choose (but is not required) to have some competencies that are specific to tracks, rotations, or areas of emphasis within the program.

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

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

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

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

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

#### **C-14. Definition of “Developed Practice Areas” for Doctoral and Internship Programs and the Process by which Areas May be Identified as Such**

(Commission on Accreditation, October 2006; pursuant to changes in the scope of accreditation approved by the APA Council of Representatives in August 2006)

##### **Scope of Accreditation for Doctoral Programs:**

The Commission on Accreditation (CoA) reviews doctoral programs in psychology that provide **broad and general** training in scientific psychology and in the foundations of practice. Practice areas include clinical psychology, counseling psychology, school psychology, and *other developed practice areas*. The CoA also reviews programs that combine two or three of the above practice areas.

##### **Scope of Accreditation for Internship Programs:**

The CoA reviews applications from internship training programs in practice areas including clinical psychology, counseling psychology, school psychology, and *other developed practice areas* or in general professional psychology.

##### **Definition**

Developed practice areas of psychology have all of the following characteristics:

- National recognition of the practice area by a national organization(s) whose purpose includes recognizing or representing and developing the practice area, by relevant divisions of the APA, or by involvement in similar umbrella organizations;
- An accumulated body of knowledge in the professional literature that provides a scientific basis for the practice area including empirical support for the effectiveness of the services provided;
- Representation by or in a national training council that is recognized, functional, and broadly accepted;
- Development and wide dissemination by the training council of doctoral educational and training guidelines consistent with the Accreditation G&P;
- Existence of the practice area in current education and training programs;
- Geographically dispersed psychology practitioners who identify with the practice area and provide such services.

##### **Process**

Steps in the identification process are:

- 1) Application by the training council will be initially reviewed by the CoA based upon the criteria defined above to determine the eligibility of the area for public comment on its inclusion;
- 2) If in this initial review, the area meets the criteria for eligibility, the CoA will invite subsequent public comment as well as inviting letters of support or concern from relevant organizations;
- 3) Final decision by the CoA.
- 4) In the case of a decision to not include the area in the scope of accreditation, the training council may file an appeal using an appeal process parallel to the current procedures for the appeal of program-level decisions. Specific procedures for that appeal will be developed.

*(See Implementing Regulation B-2 for more information about changes in the scope of accreditation)*

**C-14(a). Review of Applications for the Recognition of Developed Practice Areas**  
(Commission on Accreditation, October 2007; revised October 2008)

A program cannot be reviewed for accreditation in a developed practice area until that area has been added to the scope of accreditation. An area applying for recognition must first demonstrate training in that area at the doctoral level before programs will be recognized in that area at the internship level.

**Application**

Areas seeking to become included in the scope of accreditation must provide all information requested in the application, which is available from the Office of Program Consultation and Accreditation. Applications not following the required format will be returned without review. Staff members of the Office of Program Consultation and Accreditation will confirm receipt of the application and ensure that all required information has been provided. Staff members may request the submission of any missing information, and the application will not be reviewed by the CoA until all required materials have been provided.

Areas may submit their applications at any time. However, in order to be reviewed during a specific CoA meeting, applications must be received at least 2 months prior to that meeting. A list of CoA meeting dates is available at <http://www.apa.org/ed/accreditation/calendar.aspx>. Applications received after that deadline will be reviewed during the next available meeting.

**Review**

Upon receipt of the area's completed application materials, the Executive Committee of the CoA will be charged with the review of the application. The Executive Committee maintains the right to seek additional consultation and expertise in the area as necessary. Based upon its review of the record, the Executive Committee will develop a recommendation for action by the full CoA. If the full CoA believes the area meets the criteria outlined in Implementing Regulation C-14, then the CoA will invite public comment on inclusion of the area in the scope of accreditation as a Developed Practice Area.

After review of any public comments, the CoA will make its final decision on inclusion of the area as a Developed Practice Area. However, if the area wishes to be specified by name as part of the scope of accreditation, then the application and CoA recommendation will be forwarded to the APA Council of Representatives for review.

**C-14(b). Appeal of Decisions for Areas Seeking to be added to the Scope of Accreditation as Developed Practice Areas**

(Board of Educational Affairs, November 2007)

A decision by the CoA not to recommend an area for inclusion in the scope of accreditation as a Developed Practice Area may be appealed to the APA Board of Educational Affairs using the process outlined for appeals of program review decisions (see Implementing Regulations D5-1 and D5-2).

The Chief Executive Officer of the group or training council petitioning for recognition of the area, or the responsible administrative officer of the group may challenge a CoA decision not to recognize a proposed Developed Practice Area. Such an appeal must be received within 30 days of receipt of written notice of the CoA decision. The appeal must specify the grounds on which the appeal is made, which must be either a procedural violation or substantive error by the CoA in its review of the area's consistency with the provisions of Implementing Regulation C-14. The appeal should be addressed to the President of the APA. A nonrefundable appeal fee will be charged to the appellant group or training council, such fee to be submitted with the letter of appeal.

**Appointment of Appeal Panel**

Within 30 days of receipt of the area's letter of appeal, the APA Board of Educational Affairs will provide the group or training council with a list of six potential appeal panel candidates, no one of whom will have had affiliation with the proposed Developed Practice Area filing the appeal or with the accreditation process related to the non-recognition of the area. The Office of Program Consultation and Accreditation will determine the willingness of the potential panel members to serve, and notify the group or training council to that effect. Within 15 days, the group or training council may select three panel members from this list to serve as its appeal panel. If the group or training council does not notify the Office of Program Consultation and Accreditation of its selection within 15 days, the Board of Educational Affairs will designate three members to serve on the appeal panel.

**Scope and Conduct of Appeal**

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

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

Only the facts or materials that were before the CoA at the time of its decision may be considered by the panel. The panel will be provided with only those documents reviewed by the CoA in making its decision, the letter that notified the group or training council of the CoA's decision, the letter of appeal, written briefs submitted by the group or training council, and reply briefs submitted by the CoA. The letter of appeal and written briefs shall not refer to facts or materials that were not before the CoA at the time the decision was made.

The appeal panel will convene a hearing at APA during one of three pre-scheduled appeal panel hearing dates. In addition to the three members of the appeal panel, the appeal hearing will be attended by one or more representatives of the group or training council representing the proposed Developed Practice Area, one or more representatives of the CoA, and staff of the Office of Program Consultation and Accreditation.

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

### **Decision and Report of Appeal Panel**

The CoA's decision should be affirmed unless (a) there was a procedural error and adherence to the proper procedures that would dictate a different decision; or (b) based on the record before it, the CoA's decision was plainly wrong or without evidence to support it. The appeal panel has the options of: (a) upholding the CoA decision; or (b) returning the matter to the CoA for reconsideration of its decision in light of the panel's ruling regarding procedural violations or substantive errors.

The report of the appeal panel will state its decision and the basis of that decision based on the record before the panel. The report of the panel will be addressed to the President of the APA and sent within 30 days of the hearing. Copies will be provided to the Chief Executive Officer or to the responsible administrative officer of the group or training council whose appeal was heard, the Chair of the CoA, the Chair of the Board of Educational Affairs, and the Office of Program Consultation and Accreditation.



### **C-15. Jurisdiction of Licensure for Supervisors**

(Commission on Accreditation, November 2001; revised November 2003)

Domain C.1(c) of the *Guidelines and Principles for Accreditation* (G&P) for internship programs states that:

*“1. The program has formally designated intern training supervisors who:*

*(c) Are doctoral-level psychologists who have primary professional (clinical) responsibility for the cases on which they provide supervision, and are appropriately credentialed (i.e., licensed, registered or certified) to practice psychology in the jurisdiction in which the internship is located...”*

In interpreting this provision for internship programs, the CoA looks to determine appropriate credentialing of the supervisor on the basis of jurisdiction governing the practice or service that is being supervised, provided the credential is generic in legally qualifying the holder for the independent practice of professional psychology.

For example:

- When the services for which supervision is being provided are conducted in a context where a state or provincial credential is required for practice, then the appropriate credential would be that provided by the state or province.
- When services for which supervision is being provided are being conducted in a federal jurisdiction (e.g., the VA, Bureau of Prisons), then the credentialing rules pertaining to practice in a federal setting would apply.
- For those interns providing services in multiple jurisdictions (such as a Bureau of Prisons internship that has an external community rotation), the jurisdiction governing the intern service that is being supervised would determine the appropriate supervisor credential.
- When the services for which supervision is being provided are conducted in a context where a state or province requires a credential in a specific substantive area (e.g., school psychology certification), the generic credential in professional psychology and the specific substantive area credential are both required.

**C-15(a). Jurisdiction of Licensure for Supervisors in Postdoctoral Residencies**  
(Commission on Accreditation, January 2002; revised November 2003)

Domain C.2(d) of the *Guidelines and Principles for Accreditation* (G&P) for postdoctoral residency programs states that:

*“2. The formally designated supervisors include at least two psychologists who:*

*(d) Are appropriately credentialed (i.e., licensed, registered or certified) to practice psychology in the jurisdiction in which the program is located...”*

In interpreting this provision for postdoctoral residency programs, the CoA looks to determine appropriate credentialing of the supervisor on the basis of jurisdiction governing the practice or service that is being supervised.

For example:

- 1) When the services on which supervision is being provided are conducted in a context where a state or provincial credential is required for practice, then the appropriate credential would be that provided by the state or province.
- 2) When services on which supervision is being provided are being conducted in a federal jurisdiction (e.g., the VA, Bureau of Prisons), then the credentialing rules pertaining to practice in a federal setting would apply.
- 3) For those residents providing services in multiple jurisdictions (such as a Bureau of Prisons internship that has an external community rotation), the jurisdiction governing the resident's service that is being supervised would determine the appropriate supervisor credential.

**C-15(b). Required Supervision in Internship and Postdoctoral Training Programs**  
(Commission on Accreditation, January 2007; revised November 2009)

Domain B.3 of the internship *Guidelines and Principles for Accreditation* (G&P) states that:

*“The internship is an organized program. It consists of a properly administered, planned, structured, and programmed sequence of professionally supervised training experiences that are characterized by greater depth, breadth, duration, frequency, and intensity than practicum training. The training program includes the following:*

*... (c) Intern supervision is regularly scheduled and sufficient relative to the intern’s professional responsibility assuring at a minimum that a full-time intern will receive 4 hours of supervision per week, at least 2 hours of which will include individual supervision;”*

Domain B.4 of the postdoctoral residency G&P states that:

*“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;*

*(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;”*

---

The purpose of this Implementing Regulation is to clarify the supervision required for interns and postdoctoral residents. **Supervision** is characterized as an interactive educational experience between the intern/resident and the supervisor. This relationship: a) is evaluative and hierarchical, b) extends over time, and c) has the simultaneous purposes of enhancing the professional functioning of the more junior person(s); monitoring the quality of professional services offered to the clients that she, he, or they see; and serving as a gatekeeper for those who are to enter the particular profession (Bernard and Goodyear, 2009).

**Interns.** Two weekly hours of individual supervision must be conducted by a doctoral-level licensed psychologist who is involved in an ongoing supervisory relationship with the intern and has primary professional clinical responsibility for the cases on which he/she provides supervision. An intern may have different primary supervisors engaged in providing individual supervision during the course of the training year. Supervisory hours beyond the two hours of individual supervision must be supervised by professionals who are appropriately credentialed for their role/contribution to the program. These 2 additional hours of supervision should be consistent with the definition of supervision provided above. These interactive experiences can be in a group or individual format and must be provided by appropriately credentialed health care providers. The primary doctoral-level licensed psychologist supervisor maintains overall responsibility for all supervision, including oversight and integration of supervision provided by other mental health professionals with psychological research and practice.

**Postdoctoral residents.** Two weekly hours of individual supervision must be conducted by a doctoral-level licensed psychologist who is involved in an ongoing supervisory relationship with the resident and has primary professional clinical responsibility for the cases on which he/she provides supervision. A postdoctoral resident must have a minimum of two doctoral level licensed psychologist supervisors, at least one of whom serves as the resident’s primary supervisor. Supervisory hours beyond the two hours of individual supervision must be supervised by professionals who are appropriately credentialed for their

role/contribution to the program. The primary doctoral-level licensed psychologist supervisor maintains overall responsibility for all supervision, including oversight and integration of supervision provided by other mental health professionals with psychological research and practice.

## **C-16. Evaluating Program Adherence to the Principle of “Broad and General Preparation” for Doctoral Programs**

(Commission on Accreditation, November 2001; revised July 2011)

The *Guidelines and Principles for Accreditation of Programs in Professional Psychology* (G&P) stipulate, in Section II, B.1, that preparation at the doctoral level should be broad and general. According to the G&P:

*“This preparation should be based on the existing and evolving body of knowledge, skills, and competencies that define the declared substantive practice area(s) and should be well integrated with the broad theoretical and scientific foundations of the discipline and field of psychology in general.”*

The purpose of this broad and general training is preparation for entry level practice (Section II, B.1) consistent with local, state/provincial, regional, and national needs for psychological services (Section III, Doctoral Graduate Programs, Domain F.2(c)). Thus, the Commission on Accreditation (CoA) believes that all graduates from accredited doctoral programs, regardless of substantive practice area, should develop competence in the breadth of scientific psychology as part of this preparation for entry-level practice. The CoA evaluates a program’s adherence to this provision in the context of the G&P, Domain B.3 (reprinted, in part, below) using the following guidelines:

*“In achieving its objectives, the program has and implements a clear and coherent curriculum plan that provides the means whereby all students can acquire and demonstrate substantial understanding of and competence in the following areas:*

- (a) The breadth of scientific psychology, its history of thought and development, its research methods, and its applications. To achieve this end, the students shall be exposed to the current body of knowledge in at least the following areas: biological aspects of behavior; cognitive and affective aspects of behavior; social aspects of behavior; history and systems of psychology; psychological measurement; research methodology; and techniques of data analysis;*
- (b) ... individual differences in behavior; human development; dysfunctional behavior or psychopathology; and professional standards and ethics.”*

This Implementing Regulation refers specifically to all of the content areas specified in Domain B.3(a) (biological aspects of behavior; cognitive and affective aspects of behavior; social aspects of behavior; history and systems of psychology; psychological measurement; research methodology; and techniques of data analysis) and two of the content areas in Domain B.3(b) (individual differences and human development).

Accredited programs must ensure students’ understanding and competence in these specified content areas, including the history of thought and development in those fields, the methods of inquiry and research, and the applications of the research in the context of the broader domain of doctoral training in the substantive area(s) in which they are accredited (e.g., clinical, counseling, or school psychology, or combinations thereof). Thus, the CoA looks toward the program’s specific training model and goals to determine the breadth needed to provide quality training, and as such, acknowledges that programs may use a variety of methods to ensure students’ understanding and competence and that there are multiple points in the curriculum sequence at which these experiences may be placed. Of note is that the term “curriculum” is used broadly and does not refer only to formal courses. However, the CoA also considers several aspects of training to be necessary to meet the provisions of these aspects of the G&P.

**Broad theoretical and scientific foundations of the field of psychology in general.** This requirement addresses breadth of training both across and within multiple areas in the field of psychology, as described below.

Across: Breadth across areas of psychology is addressed via the provision that the curriculum plan include biological aspects of behavior; cognitive and affective aspects of behavior; social aspects of behavior; history and systems of psychology; psychological measurement; research methodology; and techniques of data analysis, and human development. The CoA understands that these content areas may be addressed in separate places in the curriculum or in an integrative manner within the curriculum.

Within: Within each specified content area, it is understood that the “current knowledge in the area” is continually changing; as such, breadth and depth are seen as involving coverage of current knowledge in the area, as well as history of thought and development in the area, its methods of inquiry and research, and the evolving nature of the area. A curriculum plan that includes coverage of one or a few aspects of a content area must provide clear and convincing evidence that the specific topics are used as a vehicle by which students develop understanding and competence in the broader content area, including its history of thought, methods of inquiry, and current and evolving knowledge base.

The following definitions are provided to assist programs with understanding the CoA’s interpretation of several areas of Domain B.3(a-b). The CoA acknowledges that these lists are *not* checklists that reflect comprehensive lists of required topics. Rather, they are *examples* of the sorts of topics included in each area, but are not exhaustive and are expected to be fluid, reflecting the evolution of the field.

- **(B.3a) Biological aspects of behavior:** The CoA understands this to include multiple biological underpinnings of behavior, and may include topics such as the neural, physiological, and genetic aspects of behavior. Although neuropsychological assessment and psychopharmacology can be included in this category, they do not by themselves fulfill this category.
- **(B.3a) Cognitive aspects of behavior:** The CoA understands that this area may include the study of topics such as learning, memory, thought processes, and decision-making. Cognitive testing and cognitive therapy do not by themselves fulfill this category.
- **(B.3a) Affective aspects of behavior:** The CoA understands that this area may include topics such as affect, mood, and emotion. Psychopathology and mood disorders do not by themselves fulfill this category.
- **(B.3a) Social aspects of behavior:** The CoA understands that this area may include topics such as group processes, attributions, discrimination, and attitudes. Individual and cultural diversity and group or family therapy by themselves do not fulfill this category.
- **(B.3a) Psychological measurement:** The CoA understands this to mean training in psychometric theory and application beyond applied assessment.
- **(B.3b) Individual differences:** The CoA understands that this may include topics such as personality, diversity, measurement issues, psychometrics, psychopathology, intelligence.

- **(B.3b) Human development:** The CoA understands this to include transitions, growth, and development across an individual's life. Curricula limited to one developmental period is not sufficient.

Although the G&P specifies that preparation in the substantive practice area(s) should be well-integrated with broad theoretical and scientific foundations, exposure to the specified content areas should not be presented solely within an applied context. Rather, they should be addressed as sub-disciplines in the field of psychology in their own right, as developed and understood by researchers and scholars within these areas. In other words, demonstrating that the program is consistent with the G&P in this regard would preclude coverage only of the application of these aspects of the content area to practice problems or settings (such as cognitive therapy, group therapy, multicultural counseling).

**Faculty qualifications.** Because coverage of the specified content areas is intended to provide exposure to specified sub-disciplines of psychology, the curriculum plan in these content areas should be developed, provided, and evaluated by faculty who are well qualified in the content area. Faculty may be considered qualified by degree (e.g., major or minor area of concentration) or other educational experience (e.g., respecialization, ongoing professional development or other systematic study, current research productivity in the area). It is *the program's responsibility* to specify clearly articulated procedures for ensuring appropriate faculty qualifications.

**Graduate level understanding and competence.** Accredited programs should clearly document how the curriculum plan ensures graduate-level understanding and competence. The CoA will look for certain pieces of evidence in evaluating graduate level, including students' exposure to a curriculum plan that utilizes primary source materials (including original empirical work that represents the current state of the area), emphasizes critical thinking and communication at an advanced level, and facilitates integration of knowledge in the breadth areas with the program's substantive area(s) of practice. For example, if the program uses a course to satisfy an aspect of Domain B.3 of the G&P, it may be appropriate in some instances to use textbooks that target undergraduate audiences as a minor part of the course (e.g., as foundational reading to introduce the subject area to students) if the majority of the course involves graduate level readings. Programs must also document that students have substantial opportunities to acquire and demonstrate graduate level understanding and competence, as defined above. If a program elects to use students' prior education or experiences to partially satisfy breadth requirements, the program must also document how *each* student demonstrates graduate-level understanding and competence in the relevant content areas.

**Flexibility in curriculum plans to ensure student understanding and competence in specified content areas.** As with all aspects of accreditation review, the CoA recognizes that programs may meet the provisions of the G&P using a variety of methods. For example, programs may provide courses or other educational experiences within their program, may allow students to use prior experiences to demonstrate exposure to the content areas, or may use students' performance on specified outcome measures to demonstrate understanding and competence. The curriculum plan should be documented in sufficient detail so that a reviewer or site visitor can readily understand how the relevant areas are included in the overall educational process in the program, what activities students must engage in to achieve competency and understanding in each area, and how the resulting understanding and competency are evaluated.

If the program chooses to supply courses directed to cover these areas within its required curricular offerings, then it must ensure that the courses provide all students with exposure to the current and evolving knowledge in the relevant area(s), are taught at the graduate level, and are delivered by qualified

faculty (as specified above). Where elective courses can be used to satisfy the requirements, the program must clearly explain how it ensures that **all** students demonstrate substantial understanding of and competence in the required areas, regardless of what course the student chooses to take. Likewise, if the program chooses options other than courses to satisfy the requirements, the program must clearly explain how the experiences and activities allow **all** students to demonstrate substantial understanding of and competence in the required areas.

Doctoral programs that admit students who begin the program with demonstrated competence in the breadth of psychological science may satisfy these requirements by providing more focused coverage of these domains consistent with program goals and objectives. Programs that elect to meet the broad and general requirements through this more focused approach must explain how, for each student, the combination of prior coursework/experience and the graduate curriculum provided is consistent with the content areas provided in B.3(a), as well as individual differences, and human development [B.3(b)].

NOTE: Programs that elect to meet the broad and general requirements through a combination of prior educational experiences and more focused graduate instruction in those areas must still ensure that their curricula are appropriate in relation to local, state/provincial, regional, and national needs for psychological services, such as licensure, consistent with Domain F.2(b) of the G&P.



**C-17. Consistency in Internship Experiences Within a Program**  
(Commission on Accreditation, January 2003)

The Commission recognizes that internship programs may provide training tracks or rotations that constitute different training experiences for interns. In these cases, programs must demonstrate how each rotation promotes the program's overall stated goals and objectives and is consistent with the *Guidelines and Principles for Accreditation of Programs in Professional Psychology*.

**C-18. Core Faculty in Doctoral Programs**  
(Commission on Accreditation, June 2003; revised May 2005)

The *Guidelines and Principles for Accreditation of Programs in Professional Psychology* (G&P) for doctoral programs (C.1) articulate the need for accredited programs to have core faculty, as follows:

1. *The program has an identifiable core faculty responsible for its leadership who:*
  - (a) *Function as an integral part of the academic unit of which the program is an element;*
  - (b) *Are sufficient in number for their academic and professional responsibilities;*
  - (c) *Have theoretical perspectives and academic and applied experiences appropriate to the program's goals and objectives;*
  - (d) *Demonstrate substantial competence and have recognized credentials in those areas which are at the core of the program's objectives and goals; and*
  - (e) *Are available to and function as appropriate role models for students in their learning and socialization into the discipline and profession.*

*In addition to the core faculty, other individuals who hold faculty appointments at the institution may be used to augment and expand students' educational experiences. These adjunct faculty should be held to standards of competence appropriate to their role/contribution within the program (see 1c, d, & e above).*

To clarify the term "core faculty" and to provide the basis for a fair, reliable, and valid measurement process to determine the core faculty time available for the program, the following guidelines are provided.

- 1) Core faculty must be consistent with the G&P, C.1., as quoted above.
- 2) Core faculty must be composed of individuals whose education, training, and/or experience is consistent with his/her role in the program in light of the substantive area in which the program seeks accreditation.
- 3) Core faculty must be composed of individuals whose primary professional employment (50% or more) is at the institution in which the program is housed, and to whom the institution has demonstrated a multi-year commitment (as supported by an examination of the history of appointments in the program or by contracts).
- 4) Core faculty must be identified with the program and centrally involved in program development, decision-making, and student training. "Identified with the program" means that each faculty person is included in public and departmental documents as such, views himself or herself as core faculty, and is seen as core faculty by the students.
- 5) At least 50% of core faculty professional time must be devoted to program-related activities. That means, for example, that a faculty person who is 50% at the institution would need to have 100% of that time spent as a core faculty. (The day per week institutions often allow for professional development activities such as research, consultation, or practice is not intended to

be added to or subtracted from this calculation. That is, a 100% core faculty person in an institution with a consultation policy should be thought of as a 100% person, not 125% or 80%, regardless of the activities done on that day.) A full time 9-month or 11-month core faculty person are both seen as 100%. Core faculty activities directly related to the doctoral program include program-related teaching, research, scholarship, and/or professional activities; supervision of students' research, students' dissertations, and students' teaching activities; mentoring students' professional development; providing clinical supervision; monitoring of student outcomes; teaching in a master's degree program that is an integral part of the doctoral program; and developing, evaluating, and maintaining the program. Core faculty activities not directly related to the doctoral program and **not** seen as aspects of the core faculty role include undergraduate teaching in general and related activities; teaching and related activities in terminal masters or other graduate programs; and clinical work or independent practice not directly associated with training such as at a counseling center.

In addition to core faculty, programs may also have associated program faculty, contributing faculty, and adjunct (visiting, auxiliary, or "other") faculty. The associated program faculty formerly contributing faculty, category would be reserved for faculty who do not meet the criteria for core faculty but make a substantial contribution to the program and take on some of the tasks often associated with core faculty, but are not centrally involved in program development and decision-making. Adjunct faculty are faculty hired on an *ad hoc* basis to teach a course or two, supervise, etc.

Consistent with the program's model, the psychology doctoral program faculty, and in particular, the core faculty, needs to be large enough to advise and supervise students' research and practice, conduct research and/or engage in scholarly activity, attend to administrative duties, serve on institutional or program committees, provide a sense of program continuity, be assured of appropriate class sizes, provide sufficient course offerings to meet program goals and objectives, and monitor and evaluate practicum facilities, internship settings, and student progress.

The Commission will provide, as soon as available, information regarding the number of core faculty in programs receiving the maximum term of accreditation.

**C-19. Notification of Changes to Accredited Programs**  
(Commission on Accreditation, February 2005; revised October 2006)

In accordance with Domain H.2 of the *Guidelines and Principles for Accreditation* (G&P) and Section 4.7(b) of the *Accreditation Operating Procedures* (AOP), all accredited programs (doctoral, internship and postdoctoral residencies) whether under a single administrative entity or in a consortium, must inform the accrediting body in a timely manner of changes that could alter the program's quality.

The Commission on Accreditation (CoA) must be informed in advance of major program changes such as changes in model, degree offered, policies/procedures, administrative structure, faculty resources, supervision resources, area of emphases, or tracks/rotations. In the case of doctoral programs, this includes changes in the areas of emphasis. For internship/postdoctoral programs, this includes new, additional, or eliminated rotation or training sites. For example, consortium programs must inform the CoA of any substantial changes in structure, design or training sites.

Programs must submit to the Office of Program Consultation and Accreditation a detailed written description of the proposed change(s) and the potential impact upon the relevant accreditation domains. The CoA will review the program change(s) and may request additional information or a new self-study. In the case of a substantive change (such as a change in consortium membership), the Commission may also determine that a site visit is needed to assess whether the revised program is consistent with the G&P. Upon completion of this review, the Commission will note the proposed change and include the information in the next scheduled review or inform the program of any needed immediate additional actions.

The only exception to the policy of informing the Commission *in advance* is the occurrence of an unavoidable event beyond the reasonable control and anticipation of the program (e.g., educational/training site unexpectedly withdrawing from a consortium because of financial crisis; resources affected by a natural disaster). In such circumstances, it is incumbent upon the program to immediately inform the CoA in writing of the change and to include in its notification a proposed plan for maintaining program consistency with the G&P. The CoA will then proceed as above.

Consultation on program changes is available from the Office of Program Consultation and Accreditation.

## **C-20. Disclosure of Education/Training Outcomes and Information Allowing for Informed Decision-Making to Prospective Doctoral Students**

(Commission on Accreditation, May 2006; revised November 2006; July 2007; July 2010; March 2012; April 2013; March 2014; May 2014)

Domain G of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology* (G&P) requires that doctoral graduate programs provide potential students, current students, and the public with accurate information on the program and on program expectations. This information is meant to describe the program accurately and completely, using the most up-to-date data on education and training outcomes, and be presented in a manner that allows applicants to make informed decisions about entering the program.

The CoA requires accredited programs to update the data tables annually and post the information in its public materials (e.g. website) by October 1 each year. Failure to update the information is as much of a concern as failure to provide the necessary information in the required format. After October 1, the Commission will review programs' compliance with the below requirements and that the data provided are consistent with the program's data from the Annual Report Online (ARO).

---

### ***Presentation of Required Information***

To ensure that the required information for each program is available to the public in a consistent fashion, the following three provisions are effective **September 15, 2012**:

- The information must all be located in a single place and be titled "Student Admissions, Outcomes, and Other Data";
- If the program has a website, the information must be located no more than one-click away from the main/home doctoral landing page; and (see update to this provision below)
- The data must be presented in tables consistent with those listed at the end of this regulation. Programs may choose to provide other data to supplement the requirements of this regulation, but these tables must be provided. If the program chooses to provide supplemental information, it should be provided below the corresponding required tables.

In addition to the provisions already in effect, two additional requirements are effective **September 15, 2013**:

- The link from the main/home doctoral landing page to the required information must also be titled "Student Admissions, Outcomes, and Other Data";
- Table cells should not be left blank; instead, please enter a "0" if not applicable except where indicated in table

Because the information required should include those education and training outcomes that will allow applicants to make informed and comparative decisions, the Commission requires that all doctoral programs minimally provide the following to prospective students in its public materials, **including its website, if it has one**: 1) time to program completion; 2) program costs (tuition and fees) and fellowships and other funding available; 3) internship acceptance rates; 4) student attrition rates; and 5) licensure outcomes. These are defined as follows:

---

\*For the purposes of this *Implementing Regulation*, only students that have had their doctoral degrees conferred on their transcripts are considered "graduates". "Time to completion" is the amount of time between the date of entry into the program and the date of program completion on the official transcript.

## 1. Time to Completion

Time to completion must be presented in two ways:

- First, programs must provide the **mean** and the **median** number of years that students have taken to complete the program from the time of first matriculation. These data should be provided for all graduates\* in each of the past seven (7) years.
- Second, the program should provide the percentage of students completing the program in fewer than five years, five years, six years, seven years, and more than seven years.

In a text box below the table, programs must also note any admissions policies that allow students to enter with credit for prior graduate work and the expected implications for time to completion.

## 2. Program Costs

Programs are expected to make available the total costs per student for the current first year cohort. This information should include full-time student tuition, tuition per credit hour for part-time students, and any fees or costs required of students beyond tuition costs. For example, if a program requires students to travel to attend a mandatory component of the program, the estimated costs of this travel should be included as well. Programs may also provide information regarding current adjustments to tuition including, but not limited to: financial aid, grants, loans, tuition remission, assistantships, and fellowships. Even if program cost information is provided elsewhere on another university or other site, it must be provided in the doctoral program's materials as well.

NOTE: Please enter discrete dollar values in the Program Costs table and not percentages. For instance, if the program covers students' full costs within a category, please enter "\$0" in that cell.

## 3. Internships

Programs are expected to provide data on students' success in obtaining internships. The program is required to report for **each** of the past seven (7) years:

- The total number of students who sought or applied for internships
- The number and percent of total who obtained internships
- The number and percent of total who obtained APA/CPA-accredited internships
- The number and percent of total who obtained APPIC member internships that were not APA/CPA-accredited (*if applicable*)
- The number and percent of total who obtained other membership organization internships (e.g., CAPIC) that were not APA/CPA-accredited (*if applicable*)
- The number and percent of total who obtained internships conforming to CDSPP guidelines (school psychology programs only) that were not APA/CPA-accredited (*if applicable*)
- The number and percent of total who obtained other internships that were not APA/CPA-accredited (*if applicable*)
- The number and percent of total who obtained paid internships
- The number and percent of total who obtained half-time internships (*if applicable*)

---

\*For the purposes of this *Implementing Regulation*, only students that have had their doctoral degrees conferred on their transcripts are considered "graduates". "Time to completion" is the amount of time between the date of entry into the program and the date of program completion on the official transcript.

NOTES: In calculating the above percentages, the program must base these on the **total number of students** who sought or who applied for internship in each year, including those that withdrew from the application process. To ensure readability and understanding for prospective students, Internship Placement-Table 1 and Internship Placement-Table 2 must be presented separately.

#### 4. Attrition

Programs must report the number and percentage of students who have failed to complete the program once enrolled. These data should be calculated for each entering cohort by dividing the number of students in that cohort who have left the program for any reason by the total number of students initially enrolled in that same cohort. These data should be provided by cohort for all students who have left the program in the last seven (7) years or for all students who have left since the program became initially accredited, whichever time period is shorter.

#### 5. Licensure

Reporting of program licensure data is an expectation of the US Secretary of Education's National Advisory Committee on Institutional Quality and Integrity for program accreditors, including the APA Commission on Accreditation. As such, programs must report the number and percentage of program graduates\* who have become licensed psychologists within the preceding decade. In calculating the licensure percentage:

- The denominator is the total number of program graduates between 2 and 10 years ago
- The numerator is the number of these graduates (between 2 and 10 years ago) who became licensed psychologists in the past 10 years
- The licensure percentage, then, is calculated by dividing the number of graduates (between 2 and 10 years ago) who became licensed psychologists in the past 10 years by the number of graduates during the 8 year span from 2 to 10 years ago. For example, the figures reported by a program for 2014 would be number of graduates from the program between 2004 and 2012 who have achieved licensure in the past 10 years divided by the total number of students graduating from the program between 2004 and 2012.

Programs may clarify their licensure rate for the public in light of their training model and program goals and objectives.

\*Please refer to footnote on first page of this *Implementing Regulation* for definition of graduates.

**The following formatted tables are required to be placed in your public materials for data due October 1, 2015. These tables must be updated each subsequent year.**

**Time to Completion for all students entering the program**

Outcome	Year in which Degrees were Conferred															
	2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014		2014-2015		Total	
Total number of students with doctoral degree conferred on transcript	<i>a</i>															
<b>Mean</b> number of years to complete the program																
<b>Median</b> number of years to complete the program																
<b>Time to Degree Ranges</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Students in less than 5 years	<i>b</i>	<i>g</i>														
Students in 5 years	<i>c</i>	<i>h</i>														
Students in 6 years	<i>d</i>	<i>i</i>														
Students in 7 years	<i>e</i>	<i>j</i>														
Students in more than 7 years	<i>f</i>	<i>k</i>														

**Note:**  $(b+c+d+e+f) = a$  each year;  $(g+h+i+j+k) = 100$  each year

Also, please describe or provide a link to program admissions policies that allow students to enter with credit for prior graduate work, and the expected implications for time to completion. Please indicate NA if not applicable:



**Program Costs**

<b>Description</b>	<b>2015-2016 1<sup>st</sup>- year Cohort Cost</b>
Tuition for full-time students (in-state)	
Tuition for full-time students (out-of-state)	
Tuition per credit hour for part-time students ( <i>if applicable enter amount; if not applicable enter "NA"</i> )	
University/institution fees or costs	
Additional estimated fees or costs to students (e.g. books, travel, etc.)	

**Internship Placement - Table 1**

Outcome	Year Applied for Internship													
	2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014		2014-2015	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students who obtained APA/CPA-accredited internships	<i>a</i>	<i>h</i>												
Students who obtained APPIC member internships that were not APA/CPA-accredited ( <i>if applicable</i> )	<i>b</i>	<i>i</i>												
Students who obtained other membership organization internships (e.g. CAPIC) that were not APA/CPA-accredited ( <i>if applicable</i> )	<i>c</i>	<i>j</i>												
Students who obtained internships conforming to CDSPP guidelines that were not APA/CPA-accredited ( <i>if applicable</i> )	<i>d</i>	<i>k</i>												
Students who obtained other internships that were not APA/CPA-accredited ( <i>if applicable</i> )	<i>e</i>	<i>l</i>												
Students who obtained any internship	<i>f</i>	<i>m</i>												
Students who sought or applied for internships including those who withdrew from the application process	<i>g</i>	-		-		-		-		-		-		-

**Note:**  $h = a/g \times 100$ ;  $i = b/g \times 100$ ;  $j = c/g \times 100$ ;  $k = d/g \times 100$ ;  $l = e/g \times 100$ ;  $m = f/g \times 100$ ;  
 $(a+b+c+d+e) = f$  each year;  $(h+i+j+k+l) = m$  each year

**Internship Placement - Table 2**

Outcome	Year Applied for Internship													
	2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014		2014-2015	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students who sought or applied for internships including those who withdrew from the application process	<i>g</i>													
Students who obtained paid internships	<i>n</i>	<i>p</i>												
Students who obtained half-time internships* ( <i>if applicable</i> )	<i>o</i>	<i>q</i>												

Cell "o" should only include students who applied for internship and are included in cell "g" from "Internship Placement – Table 1."

**Note:**  $p = n/g \times 100$ ;  $q = o/g \times 100$

**Attrition**

Variable	Year of First Enrollment													
	2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014		2014-2015	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students for whom this is the year of first enrollment (i.e. new students)	<i>a</i>	-		-		-		-		-		-		-
Students whose doctoral degrees were conferred on their transcripts	<i>b</i>	<i>e</i>												
Students still enrolled in program	<i>c</i>	<i>f</i>												
Students no longer enrolled for any reason other than conferral of doctoral degree	<i>d</i>	<i>g</i>												

**Note:**  $(b+c+d) = a$  each year;  $(e+f+g) = 100$  each year

**Licensure**

Outcome	2005 to 2015
The total number of program graduates (doctoral degrees conferred on transcript) between 2 and 10 years ago	<i>a</i>
The number of these graduates (between 2 and 10 years ago) who became licensed psychologists in the past 10 years	<i>b</i>
Licensure percentage	<i>c</i>

**Note:**  $c = b/a \times 100$

**C-21. Programs Operating Outside the United States**  
(Commission on Accreditation, October 2007)

Domain A.2 of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology* for doctoral graduate programs currently states that as a requirement for eligibility for accreditation by the APA:

*The program is sponsored by an institution of higher education accredited by a nationally recognized regional accrediting body in the United States or, in the case of Canadian programs, the institution is publicly recognized by the Association of Universities and Colleges of Canada as a member in good standing.*

In February 2007, the APA Council of Representatives approved a proposal by CoA to phase out accreditation of programs in Canada and concurrent accreditation practices with the Canadian Psychological Association (CPA). The APA and CPA have developed a new memorandum of understanding that outlines the timeframe for phasing out concurrent accreditation. Beginning on September 1, 2015, the APA CoA will no longer accredit programs in Canada. At that time, Domain A.2 of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology (G&P)* for doctoral graduate programs will state:

*The program is sponsored by an institution of higher education accredited by a nationally recognized regional accrediting body in the United States.*

The CoA interprets this requirement to mean that only those programs that (a) are sponsored by an institution of higher education that is accredited by a regional accrediting body which is recognized by the United States Department of Education AND (b) reside within the United States or its territories are eligible for APA accreditation. APA accreditation of programs does not extend to those programs' offerings at sites located outside the United States and its territories.

Nothing in this regulation is intended to limit international educational or research experiences that are part of programs that are located in the United States of America and its territories.

## **C-22. Diversity Recruitment and Retention**

(Commission on Accreditation, November 2009; revised March 2013)

In accordance with Domain D.1 (for doctoral, internship, and postdoctoral programs) of the *Guidelines and Principles* (G&P), a program is responsible for making systematic, coherent, and long-term efforts to attract (i.e., recruit) and retain students/interns/residents and faculty/staff/supervisors from differing backgrounds into the program. Although the Commission asks for demographic information about faculty/staff and students/interns/residents in the tables of the self-study and annual report, the information requested is limited to the data collected in federal reports, which is not sufficient in demonstrating a program's compliance with Domain D.1. Consistent with Domain A.5, as described in the doctoral program G&P, cultural and individual diversity includes, but is not limited to age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and social economic status.

### **Recruitment**

#### *Students/Interns/Residents*

An accredited doctoral, internship, or postdoctoral program should document that it has developed a systematic, multiple year plan, implemented and sustained over time, in its efforts to attract students/interns/residents from a range of diverse backgrounds. An accredited program is expected to describe in its self-study the specific activities, approaches, and initiatives it implements to increase diversity among its students/interns/residents. A program may include institutional-level initiatives geared towards achieving diversity, but these in and of themselves are not considered sufficient. Concrete program-level actions to achieve diversity also should be documented. Because diversity is defined broadly, a program should discuss the areas of diversity recruitment in which it excels, as well as the areas of diversity recruitment in which it is working to improve. The program should demonstrate that it examines the effectiveness of its efforts to attract diverse students/interns/residents, and should document steps to revise/enhance its strategies as needed.

#### *Faculty and Staff*

An accredited doctoral, internship or post-doctoral residency program should demonstrate that it has developed a systematic, multiple year plan to attract faculty and staff from a range of diverse backgrounds, implemented as possible (i.e., when there are faculty and staff openings). A program may include institutional-level initiatives geared towards achieving diversity, but these in and of themselves are not considered sufficient. Programs should document concrete actions taken by the training program to achieve diversity. Because diversity is defined broadly, a program should discuss the areas of diversity recruitment in which it excels, as well as the areas of diversity recruitment in which it is working to improve. The program should demonstrate that it examines the effectiveness of its efforts to attract diverse faculty and staff and should document steps to revise/enhance its strategies as needed.

### **Retention**

#### *Doctoral students*

An accredited doctoral program is expected to describe in its self-study the specific activities, approaches and initiatives it implements to maintain diversity among its students and ensure a supportive learning

environment for all students. A program may include institutional-level initiatives geared towards retaining diverse students but these in and of themselves are not considered sufficient. Concrete program-level actions to retain diverse students also should be documented. These efforts should be broadly integrated across key aspects of the program. The program should demonstrate that it examines the effectiveness of its efforts to retain diverse students. Steps to revise/enhance its strategies as needed should be documented

#### *Interns/Residents*

Internship programs and post-doctoral residency programs should document the specific activities, approaches and initiatives implemented to ensure a supportive learning environment for all interns and residents. Because of the length of internship and post-doctoral residency programs (typically one to two years), and the likelihood that students will remain in the program regardless of the learning environment, programs should document that they are attentive to the needs of diverse students. Successful completion of the program by diverse interns/residents may not, in and of itself, demonstrate that the learning environment is supportive of diverse individuals. The program should document that it examines the effectiveness of its efforts to create a supportive learning environment for diverse students. Steps to revise/enhance its strategies as needed should be documented.

#### *Faculty/Staff*

An accredited doctoral, internship or post-doctoral residency program is expected to describe in its self-study the specific activities, approaches, and initiatives it implements to maintain diversity among its faculty and staff. A program may include institutional-level initiatives geared towards retaining diverse faculty/staff members, but these in and of themselves are not considered sufficient. The program should document that it examines the effectiveness of its efforts to maintain diverse faculty/staff. Steps to revise/enhance its strategies as needed should be documented.

**C-22(a). Review of Programs Invoking Footnote 4**  
(Commission on Accreditation, November 2009)

The footnote to Domain D.1 (“Footnote 4”) of the *Guidelines and Principles* (G&P) regarding efforts in the recruitment and retention of diverse students/interns/residents and faculty/staff states that:

*This requirement does not exclude programs from having a religious affiliation or purpose and adopting and applying admission and employment policies that directly relate to this affiliation or purpose so long as: (1) Public notice of these policies has been made to applicants, students, faculty, or staff before their application or affiliation with the program; and (2) the policies do not contravene the intent of other relevant portions of this document or the concept of academic freedom. These policies may provide a preference for persons adhering to the religious purpose or affiliation of the program, but they shall not be used to preclude the admission, hiring, or retention of individuals because of the personal and demographic characteristics described in Domain A, Section 5 of this document (and referred to as cultural and individual diversity). This footnote is intended to permit religious policies as to admission, retention, and employment only to the extent that they are protected by the U.S. Constitution. It will be administered as if the United States Constitution governed its application.*

---

During the 2008 renewal of the Higher Education Act, now referred to as the Higher Education Opportunity Act (HEOA), statutory changes were made that include the following:

*(4) (a) such agency or association consistently applies and enforces standards that respect the stated mission of the institution of higher education, **including religious missions...***

The footnote refers **only** to Domain D.1. Consistent with Domain A: Eligibility, it is important for the CoA to review all programs in the context of being consistent with the mission of the institution. The provisions of the footnote apply only to Domain D.1 where additional clarification appeared to be necessary.

In reviewing programs that indicate on the transmittal page of the self-study that they are invoking Footnote 4, the CoA will review all aspects of the self-study in the same fashion as any other program. For example, Footnote 4 does not alter the requirements that programs integrate science and practice and provide appropriate broad and professional education for entry to practice (Domain B); represent the appropriate level of quality assurance (Domain F); or have a thoughtful and coherent plan to educate students in areas of individual and cultural diversity (Domain D.2). A program invoking Footnote 4 that is located within an institution with a religious mission *may* include other areas of competency beyond those articulated in Domain B of the G&P. However, as with all accredited programs, the program must provide evidence that demonstrates that students are educated at the appropriate level in those areas of competence required by the G&P.

In its review of programs invoking Footnote 4, the CoA will, as with all accredited programs:

- Ensure that the program is described accurately and completely in documents that are available to current students, prospective students, and other “publics,” including how the program implements the areas noted in the footnote in terms of admissions and selection procedures (Domain G: Public Disclosure);

- Review the institutional policies and procedures that are required by Domain A: Eligibility and ensure that these are made public consistent with Domain G;
- Review the environment for students at the program consistent with students' rights to be treated with courtesy and respect within the mission of the institution and program (Domain E: Student-Faculty/Intern-Staff/Resident-Supervisor Relations); and
- Review the policies and procedures the program and institution use to enforce any code of student/intern/resident conduct or behavior, and the provisions for due process should a student/intern/resident be viewed as violating any aspect of that code of behavior and/or conduct.



### **C-23. Diversity Education and Training**

(Commission on Accreditation, November 2009; revised March 2013)

In accordance with Domain D.2 for doctoral, internship, and postdoctoral programs of the *Guidelines and Principles* (G&P), a program has and implements a thoughtful and coherent plan to provide students/interns/residents with relevant knowledge and experiences about the role of cultural and individual diversity in psychological phenomena and professional practice. Although the Commission asks for demographic information about faculty/staff and students/interns/residents in the tables of the self-study and annual report, the information requested is limited to the data collected in federal reports, which is not sufficient in demonstrating a program's compliance with Domain D.1. Consistent with Domain A5, as described in the doctoral program G&P, cultural and individual diversity includes but is not limited to age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and social economic status.

An accredited program is expected to articulate and implement a specific plan for integrating diversity into its didactic and experiential training. This training should be based on the multicultural conceptual and theoretical frameworks of worldview, identity, and acculturation, rooted in the diverse social, cultural, and political contexts of society, and integrated into the science and practice of psychology. Programs are expected to train students/interns/residents to respect diversity and be competent in addressing diversity in all professional activities including research, training, supervision/consultation, and service. Programs are expected to train students/interns/residents to be competent not only for serving diverse individuals present in their local community and training setting, but also for working with diverse individuals they may encounter when they move to other locations after completion of their training. The program should demonstrate that it examines the effectiveness of its education and training efforts in this area. Steps to revise/enhance its strategies as needed should be documented.

## **C-24. Empirically Supported Procedures/Treatments** (Commission on Accreditation, November 2009)

This Implementing Regulation is intended to clarify the expectations of the CoA with regard to language currently present in the doctoral and internship *Guidelines and Principles* (G&P) as follows:

### Doctoral Programs:

#### Domain B.3.c

*... the program has and implements a clear and coherent curriculum plan that provides the means whereby all students can acquire and demonstrate substantial understanding of and competence in the following areas:*

*...(c) Diagnosing or defining problems through psychological assessment and measurement and formulating and implementing intervention strategies (**including training in empirically supported procedures**). To achieve this end, the students shall be exposed to the current body of knowledge in at least the following areas: theories and methods of assessment and diagnosis; effective intervention; consultation and supervision;*

#### Domain B.4a

*...the program requires that its students receive adequate and appropriate practicum experiences. To this end the program should:*

*(a) Place students in settings that: are clearly committed to training; supervise students using an adequate number of appropriate professionals; and provide a wide range of training and educational experiences through applications of **empirically supported intervention procedures**;*

### Internship Programs:

#### Domain B.4.a

*... the program requires that all interns demonstrate an intermediate to advanced level of professional psychological skills, abilities, proficiencies, competencies, and knowledge in the areas of:*

*(a) Theories and methods of assessment and diagnosis and effective intervention (**including empirically supported treatments**);*

---

The purpose of this Implementing Regulation is to clarify the CoA's expectation with regard to the language in the G&P highlighted above. Training in empirically supported procedures/treatments should focus on assisting students and interns to acquire knowledge, skills and attitudes that promote the integration of science and practice. Training in empirically supported procedures/treatments does not require exposure to any specific system of therapy, nor does it eliminate the need for students/interns to understand or attend to common factors.

Through this training, students and interns should:

1. Be conversant with the most common methods used to examine outcomes of therapeutic factors and interventions (e.g., efficacy studies; effectiveness studies; meta-analytic studies) and the conclusions drawn from this research;
2. Obtain supervised experiences that enable them to implement treatment that is cogently defined, supported by scientific evidence, and consistent with the program's model;

3. Be provided with supervised experience in collecting quantitative outcome data on the psychological services they provide; and
4. Not be trained in interventions known to be harmful or ineffective.

**C-25. Positive Identification of Students Consistent with Higher Education Opportunity Act**  
(Commission on Accreditation, November 2009)

Consistent with the 2008 Higher Education Opportunity Act, all accrediting agencies recognized by the U.S. Department of Education are required by federal law to engage in a review of the methods used by its accredited programs for positive identification of students who are enrolled in any form of distance/online/electronically mediated education.

As such, the APA Commission on Accreditation (CoA) requires that if a student in an APA-accredited program is engaged in any form of distance, online, or electronically mediated education for any part of their educational sequence (doctoral, internship, residency), the program must provide CoA with information in its self-study regarding the methods it and its host institution use to identify that student. In particular, the program must provide CoA with information about how it ensures that a student who registers or receives credit for a course that uses any form of distance, online, or electronically mediated education is the same student who participates in and completes that course. Whatever methodology is used must clearly protect student privacy. Finally, students must be provided with information at the time of registration or enrollment of any projected additional student charges associated with verification of student identity.

**C-26. Practicum Guidelines for Doctoral Programs**  
(Commission on Accreditation, January 2010)

Domain B.4 of the *Guidelines and Principles for Accreditation of Programs in Professional Psychology* (G&P) for doctoral graduate programs states that:

*“...the program requires that its students receive adequate and appropriate practicum experiences.”*

In reviewing practicum experiences within doctoral programs, the CoA looks to determine that the program is responsible for identifying how the practicum helps to realize the educational goals identified in the program’s curriculum plan. This curriculum plan should:

- 1) Include a clear statement of the goals and objectives for practicum training;
- 2) Document outcome measures on how practicum training meets these goals and objectives; and
- 3) Specify how practicum is clearly integrated with other elements of the program. This includes a description of how academic knowledge is integrated with practical experience through forums led by psychologists for the discussion of the practicum experience, and that practicum training is sequential, cumulative and graded in complexity, and designed to prepare students for further organized training.

Further, each accredited doctoral program is expected to have clearly defined administrative policies and procedures in place for both internal and external practicum settings.

The below guidelines clarify the CoA’s expectations as to how programs demonstrate and provide documentation during the program review process of adherence to the specific provisions of Domain B.4(a-d):

*...To this end the program should:*

*a) Place students in organized practicum settings that: are clearly committed to training; supervise students using an adequate number of appropriate professionals; and provide a wide range of training and educational experiences through applications of empirically supported intervention<sup>4</sup> procedures;*

- The CoA recognizes that practicum training and experiences can include psychological testing, consultation, program development, outreach, and advocacy, as well as the use of evidence-based practice procedures and the ability to identify and use evidence-based procedures. The CoA also recognizes that not all interventions that may occur during practicum meet the definition of “empirically supported.”
- When students are not being supervised on site by doctoral level psychologists, the program must provide on-going weekly opportunities for students to discuss their clinical work with a doctoral level psychologist appropriately credentialed for the jurisdiction in which the program is located.
- It is recognized that supervision on site can be provided by pre-doctoral interns or post-doctoral fellows under the supervision of a psychologist appropriately credentialed for the jurisdiction.

---

<sup>4</sup> The term “empirically supported” is the current language in the *Guidelines and Principles* (G&P), which has not been updated since 1998. The CoA recognizes that this language is dated but has decided not to change the G&P at this time. In the interim, IR C-24 provides some guidance regarding the interpretation of “empirically supported” procedures/treatments as used in the G&P.

- The program should document how the program ensures the quality of the practicum sites, including regularly scheduled site reviews.
- The program should document the use of evaluation procedures for practicum experiences, methods for identifying strengths and weaknesses of practicum settings, and how a problem with a site is managed.
- The program should identify the administrative methods used to ensure that practicum placements meet these criteria and discuss how students are matched to these sites.
- The program should demonstrate how training and educational experiences are conducted in ways that integrate science and practice.

*b) Integrate the practicum component of the students' education and training with the other elements of the program and provide adequate forums for the discussion of the practicum experience;*

- As mentioned in the first section of this IR, the program's curriculum plan should provide clear evidence that practicum is integrated with other elements of the program.
- The program should discuss how it regularly evaluates the forum for the discussion of the practicum experience.

*c) Ensure that the sequencing, duration, nature, and content of these experiences are both appropriate for and consistent with the program's immediate and long-term training goals and objectives;*

- The program should include a description of how it uses feedback from the clinical supervisors to address the progress, development, and competencies of the practicum student.
- The program should identify how the minimum acceptable level of achievement is defined and assessed, and identify policies for remediation or dismissal from a practicum site when this level of achievement is not met.

*d) Describe and justify the sufficiency of practicum experiences required of students in preparation for an internship.*

- The program should identify how the required practicum experiences are sufficient to prepare the students for internship.

## **C-27. Distance and Electronically Mediated Education in Doctoral Programs** (Commission on Accreditation, July 2010)

The APA Commission on Accreditation (CoA) is recognized as an accrediting body by both the U.S. Department of Education and Council of Higher Education Accreditation. The CoA's recognized scope of accreditation does not include distance education. However, the CoA understands that the growth of technology has increased the options for how instruction can be delivered within psychology doctoral programs. Traditional methods of teaching and interaction in the same time and place are no longer the only available approach to instruction. The CoA recognizes that some accredited doctoral programs may elect to utilize distance and electronically mediated delivery formats in a supplemental or adjunctive role within their programs.

The CoA defines distance and electronically mediated education in the following manner, consistent with definitions from the APA Task Force on Distance Education and Training in Professional Psychology (June 2002, page 4) as well as definitions specified by other higher education accreditation organizations.

**Distance education** is defined as a formal educational process in which the majority of the instruction occurs when student and instructor are not in the same place. Instruction may be synchronous (students and instructors present at the same time) or asynchronous (students and instructors access materials on their own schedule). Distance education may employ correspondence study, or audio, video, or computer technologies.

**Electronically mediated education** covers a wide set of electronic applications and processes such as Web-based learning, computer-based learning, virtual classrooms, and digital collaboration. It includes the delivery of content via Internet, intranet/extranet (LAN/WAN), audio and videotape, satellite broadcast, interactive TV, and CD-ROM.

Although the *Guidelines and Principles for Accreditation of Programs in Professional Psychology (G&P)* do not set a pre-determined limit on the extent of distance education that is permitted, a doctoral program delivering education and training substantially or completely by distance education is not compatible with the G&P and could not be accredited. This is because face-to-face, in-person interaction between faculty members and students is necessary to achieve many essential components of the G&P that are critical to education and training in professional psychology, including socialization and peer interaction, faculty role modeling, and the development and assessment of competencies.

The following elements are specifically noted for all accredited and applicant doctoral programs:

- Practicum experiences must be conducted face-to-face, in-person, and cannot be completed through distance education (i.e., virtual clients) or other electronically mediated education;
- Telesupervision of students within practicum experiences is governed through a separate Implementing Regulation;
- All programs are expected to follow generally accepted best practices and utilize evidence-based methods in distance education and electronically mediated delivery;
- All programs are expected to clearly describe to the CoA in their self-studies which aspects of their education and training utilize distance or electronically mediated delivery formats; and

- All programs are expected to clearly disclose to the public which aspects of their education and training utilize distance or electronically mediated delivery formats.

Programs delivering any amount of distance education or utilizing any electronically mediated formats are expected to describe to the CoA how they meet all standards of the G&P, as is true of all programs that are accredited or are seeking accreditation. **In their self-studies, such programs are expected to pay particular attention as to how distance or electronically mediated delivery is related to ALL parameters of the G&P.**



## **C-28. Telesupervision** (Commission on Accreditation, July 2010)

The CoA recognizes that accredited programs may utilize telesupervision in their program curriculum. At the same time, the CoA recognizes there are unique benefits to in-person supervision. Benefits to in-person supervision include, but are not limited to: opportunities for professional socialization and assessment of trainee competence, recognition and processing of subtle, nonverbal, and emotional or affective cues and interactions in supervision, all of which are essential aspects of professional development, ensuring quality, and protecting the public. Therefore, the CoA recognizes that there must be guidelines and limits on the use of telesupervision in accredited programs.

The following applies only to the MINIMUM number of required hours of supervision. At the doctoral level, these are the minimal supervision requirements for each practicum site, as defined by the doctoral program. Supervision beyond the minimum number of required hours may utilize methods or modalities that are deemed appropriate by the accredited program. Nothing in this Implementing Regulation contravenes other requirements in the *Guidelines and Principles for Accreditation in Professional Psychology* (G&P). It only clarifies the utilization of telesupervision at the doctoral practicum, internship and postdoctoral levels.

### ***Definitions:***

**Telesupervision** is clinical supervision of psychological services through a synchronous audio and video format where the supervisor is not in the same physical facility as the trainee.

**In-person supervision** is clinical supervision of psychological services where the supervisor is physically in the same room as the trainee.

Programs utilizing ANY amount of telesupervision need to have a *formal policy* addressing their utilization of this supervision modality, including but not limited to:

- An explicit rationale for using telesupervision;
- How telesupervision is consistent with their overall model and philosophy of training;
- How and when telesupervision is utilized in clinical training;
- How it is determined which trainees can participate in telesupervision;
- How the program ensures that relationships between supervisors and trainees are established at the onset of the supervisory experience;
- How an off-site supervisor maintains full professional responsibility for clinical cases;
- How non-scheduled consultation and crisis coverage are managed;
- How privacy and confidentiality of the client and trainees are assured; and
- The technology and quality requirements and any education in the use of this technology that is required by either trainee or supervisor.

### ***Guidelines and Limits:***

- Doctoral programs: Telesupervision may not account for more than 50% of the total supervision at a given practicum site, and may not be utilized until a student has completed his/her first intervention practicum experience. Furthermore, it is the doctoral program's responsibility to ensure that the student has had sufficient experience and in-person supervision in intervention at the doctoral level and possesses a level of competence to justify this modality of supervision in his/her sequence of training.

- Internship programs: Telesupervision may not account for more than one hour (50%) of the minimum required (as defined in the G&P) two weekly hours of individual supervision, and two hours (50%) of the minimum required (as defined in the G&P) four total weekly hours of supervision.
- Postdoctoral programs: Telesupervision may not account for more than one hour (50%) of the minimum required (as defined in the G&P) two weekly hours of face-to-face supervision.

Programs that utilize telesupervision are expected to address generally accepted best practices. Furthermore, as with all accredited programs, programs that utilize telesupervision must demonstrate how they meet all domains of the G&P.

**C-29. Internship and Residency Didactics**  
(Commission on Accreditation; July 2010)

The purpose of this IR is to clarify the type of information required from internship and postdoctoral residency programs about their didactic activities. Didactic activities are defined as planned sessions of instruction that are included within the internship or postdoctoral residency training curriculum. When didactic activities are used to meet or partially meet any of the program's goals and objectives or required curriculum areas, it is the program's responsibility to include adequate information on those didactics within the self-study to convey their nature and content. A title alone would not be sufficient; descriptions may include an abstract/description of the content, learning objectives, or any other additional material necessary (e.g., bibliography, readings) to demonstrate the material covered.

### **C-30. Outcome Data for Internships and Postdoctoral Residency Programs** (Commission on Accreditation, July 2011)

This Implementing Regulation clarifies the type of data the CoA needs to make an accreditation decision on internship and postdoctoral residency programs.

The CoA requires all accredited programs to provide outcome data on the extent to which the program is effective in achieving its goals, objectives, and competencies. As stated in the *Guidelines and Principles* (G&P) for internships (F.1b) and postdoctoral residency programs (F.1b):

*The program, with appropriate involvement from its interns [residents], engages in regular, ongoing self-studies that address:*

*(b) Its effectiveness in achieving program goals and objectives **in terms of outcome data** (i.e., while interns [residents] are in the program and after completion, and including the interns' [residents'] views regarding the quality of the training experiences and the program);*

Also, the United States Department of Education (USDE) requires recognized accrediting bodies (such as the CoA) to collect and monitor data-driven outcomes, especially as they relate to student achievement. In making an accreditation decision on a program, CoA must demonstrate that it reviews student achievement through review of the program's outcome data.

Accredited internship and postdoctoral residency programs specify their goals, objectives, and competencies as part of Domain B. It is each program's responsibility to collect, present, and utilize aggregate proximal and distal outcome data that are directly tied to its goals, objectives, and competencies, including the content areas specified in Domain B.4 (internship programs) / Domain B.3 (postdoctoral programs).

#### **Definitions and Guidelines:**

**Proximal data** are defined as outcomes on interns/residents as they progress through and complete the program, which are tied to the program's goals, objectives, and competencies.

- Proximal data typically include the evaluations of interns/residents by others (e.g., by supervisors/trainers), including mid-point and end-of-year evaluations. This is most easily accomplished when the evaluation forms parallel the program's goals, objectives, and competencies. It is expected that these data would at least include the semi-annual feedback provided to interns/residents as required by Domain E.4 of the G&P.
- While intern/resident *self-ratings or satisfaction with training* may be a part of proximal assessment, they are not considered sufficient outcome data in this context since they do not address the program's success in achieving its goals, objectives, and competencies.

**Distal data** are defined as outcomes on interns/residents after they have completed the program, which are tied to the program's goals and objectives.

- Distal data typically include information obtained from alumni surveys addressing former interns'/residents' perceived assessments of the degree to which the program achieved its goals and objectives in its training of them (consistent with the traditional or specialty practice area in which the program provides its training, for postdoctoral programs).
- Distal data reflecting graduates' professional activities and accomplishments (e.g., licensure, employment, memberships, and affiliations), such as those found in the self-study tables, are

examples of distal outcomes but alone are not sufficient because they do not fully reflect achievement of all of a program's goals and objectives.

- Although alumni surveys assessing former interns'/residents' overall *satisfaction* with the training program (including the degree to which the education and training is relevant) may be an important component of a program's ongoing self-study process, they are not considered sufficient outcome data in this context since they do not address the program's success in achieving its goals and objectives.
- Although CoA does not specify the interval at which distal data should be collected, the interval should be appropriate to allow the program to evaluate its success in meeting its goals and objectives to determine if changes need to be made, consistent with Domain F.

**Aggregate data** are compilations of proximal data and compilations of distal data across interns/residents, which may be broken down by cohort or years. Aggregate data demonstrate the effectiveness of the program as a whole, rather than the accomplishment of an individual intern/resident over time.

- To the extent possible, data should be presented in table form using basic descriptive statistics (e.g., sample sizes, means, percentages, etc.). The program should choose statistics that demonstrate that it is meeting its goals and objectives, and how its trainees are acquiring competencies in relation to its defined minimal levels of achievement.
- If data are aggregated over a number of years (i.e., not broken down by cohort or years), the program needs to demonstrate how aggregating the data in this way facilitates the program's self-improvement.
- For postdoctoral residency programs that have only one resident in a training cohort, data should be presented in raw form for each cohort and in aggregated form across cohorts, because it is not possible to aggregate data within a cohort or year.

### **Specificity of Data:**

The CoA recognizes that programs (both internship and postdoctoral) vary widely in the specificity of their goals, objectives, or competencies. It is expected that an accredited program will provide data at a level of specificity sufficient so that the program and the CoA can assess the program's effectiveness in achieving its outcomes. For example:

- A program with one to three main goals and several objectives may choose to provide data points for each main goal and objective. Such a program would not be required to provide data points on each and every competency subsumed under each objective.
- A program with several goals and numerous objectives and competencies may choose to provide data points for only each of its goals.

### **C-31. Conduct of Doctoral Reviews** (Commission on Accreditation, July 2012)

A number of programs have sought clarification regarding how the CoA reviews key markers of student progress that are assessed *both* at the time of the full CoA review as reflected in decision letters and during the annual review process based upon data provided by programs in completing the Annual Report Online (ARO). Four such issues are addressed in this IR series: IR C-31(a): Student Selection and Admission; IR C-31(b): Student Attrition; IR C-31(c): Internship Placement; and IR C-31(d): Licensure.

For each of these issues, the CoA reviews programs for their quality in a comprehensive manner through the review of the self-study and site visit, as well as monitoring continued adherence to providing educational quality. These two processes - *periodic review* and *annual review* - are discussed below.

***Periodic review*** - In reaching a decision about the accreditation status of a program, the CoA does not have a set number of issues or concerns that automatically leads to an adverse decision; rather the professional judgment of the Commission is based on the overall review of the program's adherence to the accreditation standards - the G&P and related Implementing Regulations. In making an accreditation decision, the CoA looks at the program's entire record to determine whether or not, as a whole, the program achieves an appropriate level of quality to be accredited, and that it meets its own stated goals and objectives.

The G&P do allow for some flexibility in the professional judgment of the CoA based upon the program's stated model, goals, and objectives. However, the purpose of the CoA's accreditation review at the doctoral level is to evaluate "preparation for entry-level practice in professional psychology, regardless of the program's model. At this time, "entrance to the profession" involves the completion of the doctoral program in a timely manner and attainment of licensure. In addition, review of licensure rates is required by the U.S. Department of Education. As a result, for the purposes of evaluating entrance to the profession, the CoA evaluates the proportion of students entering a doctoral program who complete it, the time-to-degree, and the proportion of students completing the doctoral program who attain licensure.

***Annual review*** - In its annual monitoring of accredited doctoral programs (as articulated in Implementing Regulation D4.7), the CoA has set a series of parameters by which it reviews programs' adherence to general quality assurance indicators each year. At this time these include: time to degree; annual attrition within the student body; and changes in core faculty as related to total students in the program. CoA is also working to develop a criterion for internship placement. The CoA requires programs to provide annual report data each year, and uses these data to monitor program quality indicators during those years the program is not engaged in periodic review. Thus, if a program meets the IR D.4-7 threshold as determined by the Annual Report Online ("ARO") in a given year, it means that the program does not need to provide additional reports on that specific threshold in that year. It is important to understand that meeting these thresholds simply means that the program's reported data will not trigger a fuller review in connection with the annual report. This does not mean that these outcome data will

dictate reaccreditation during the periodic review, which is based on a more comprehensive analysis of the program, including a broader review of the data, the program's outcomes, and other factors bearing on the program's consistency with the Guidelines and Principles.

**C-31(a). Selection and Admissions of Students into Accredited Doctoral Programs**  
(Commission on Accreditation, July 2012)

Domain C.2 of the Doctoral section of the Guidelines and Principles for Accreditation (G&P) states:

*The program has an identifiable body of students at different levels of matriculation who:*

- a) Are of sufficient number to ensure opportunities for meaningful peer interaction, support and socialization;*
- b) By interest, aptitude, and prior achievement are of appropriate quality for the program's goals and objectives;*
- c) Reflect through their intellectual and professional development and intended career paths the program's goals, objectives, and philosophy.*

Because all accredited programs have preparation for professional practice as a major educational goal, the CoA expects that accredited programs will admit students who are appropriately prepared to succeed in doctoral education and training, and will provide them with appropriate educational and training opportunities enabling them to complete the program. The CoA also expects that students will demonstrate success in achieving competency as assessed by the program's assessment of expected competencies, including competencies expected by the profession.

To this end, the CoA expects programs to clearly define their admissions standards and to clarify how these standards reflect their educational goals and objectives. Further, the program needs to discuss how its admissions and selection standards are adequate and appropriate for its educational goals and objectives. In compliance with Domain F.1, the program must demonstrate its effectiveness in meeting its educational goals for students in the program and any program graduates. This effectiveness must be demonstrated relative to the program's stated educational model and goals, and must be consistent with Domain E.2, in that "program faculty are accessible to students and provide them with a level of guidance and supervision that *actively encourages timely completion of the program*" [emphasis added].

In summary, although the CoA's review of doctoral student selection policies and procedures necessarily requires the exercise of professional judgment, programs must demonstrate that:

1. They have and abide by written policies and procedures for student selection;
2. Those written policies and procedures are consistent with their educational goals;
3. Those written policies and procedures are developed to ensure that students are well-prepared to succeed and that program graduates are prepared for entry to practice;

As part of CoA's evaluation of a program's student selection policies and procedures, the CoA will also consider the program's outcome data on program graduates, including attrition, time to degree, graduate rate, and licensure data as indices of the program's effectiveness in selecting students who are able to complete a doctoral program and enter into practice.



CoA recognizes that doctoral programs' student selection and admissions practices may be informed by their training models or by institutional or program missions (e.g., that emphasize providing opportunities for enrollment of nontraditional graduate students, or that enroll students with very diverse prior educational experiences). However, CoA reviews programs based only on educational goals that include broad and general preparation for entry-level practice, integration of science and practice, and the program's philosophy and mission in relation to current professional standards and regional and national needs. Thus, selection and admissions practices must be consistent with effective training and outcomes in these areas.

**C-31(b). Student Attrition Rates for Doctoral Programs**  
(Commission on Accreditation, July 2012)

**Attrition during Initial or Periodic Review**

In the initial or periodic review of a doctoral program, the CoA looks at a number of indicators of program success. Domain C.2 of the G&P states:

*The program has an identifiable body of students at different levels of matriculation who:*

- a) Are of sufficient number to ensure opportunities for meaningful peer interaction, support and socialization;*
- b) By interest, aptitude, and prior achievement are of appropriate quality for the program's goals and objectives;*
- c) Reflect through their intellectual and professional development and intended career paths the program's goals, objectives, and philosophy.*

Further, in Domain E.2, the G&P states:

*Program faculty are accessible to students and provide them with a level of guidance and supervision that actively encourages timely completion of the program. The faculty provide appropriate professional role models and engage in actions that promote the students' acquisition of knowledge, skills, and competencies consistent with the program's training goals.*

A doctoral program is expected to prepare students for entry level to practice as professional psychologists; an essential part of such preparation is the extent to which students successfully complete the doctoral program. During periodic review of the program, the CoA reviews self-study materials (including the narrative and tabular information) as well as program correspondence. The overall attrition rate for the seven years preceding the review is considered by the CoA to be an indicator of the effectiveness of the program's student selection criteria, the appropriateness and availability of faculty for mentoring students in the program, and the program's success in training students for entry into practice. Attrition data evaluated during periodic review include the proportion of admitted students who do not complete their degrees. As such, the attrition rate at the time of periodic review may be very different from the attrition rate based on the Annual Report Online, in which students who have already departed the program are no longer included as part of either the numerator or the denominator. In addition to overall attrition rate, the CoA may consider attrition rates within cohorts (i.e., year of entry) and other aspects of the attrition data.

The CoA does not set specific percentages in determining acceptable cohort or overall attrition rates. The importance of contextual issues (i.e., evaluating the attrition rate in the context of the full record of information available about a program) makes it impossible to apply a "one-size-fits-all" metric in determining program quality. Thus, the review of the attrition data requires the professional judgment of the CoA as a whole to determine how the seven-year attrition rate (including the overall attrition rate and rates for specific cohorts) reported by a program is

appropriate for the profession and for the program to maintain consistency with its public materials.

#### **Implementing Regulation (IR) D.4-7 Attrition Threshold**

The Implementing Regulation (IR) D.4-7 attrition threshold for the annual review is used as a broad indicator of changes in a program based upon the total number of students in the program, and the total number of students who leave the program during a year for any reason. For purposes of the annual review, the CoA uses an empirical metric to identify a level of attrition that leads to additional review, by using the mean of the most recent three years of overall attrition rates, as derived from ARO data provided by all doctoral programs. The specific threshold represents an attrition rate at the 95th percentile for those programs. In other words, the CoA seeks additional information from programs which fall *within the lowest 5% of all programs in overall attrition (i.e., those programs with the least favorable attrition rates) among all accredited doctoral programs*. When a program's attrition rate prompts CoA to ask for additional information during annual reviews, that information is reviewed by the CoA to determine if additional review is necessary.

It is important to note that the fact that a program's three-year data did not trigger a request for additional information during the annual review does not mean that attrition will not be the subject of more comprehensive analyses during the periodic review.

**C-31(c). Expected Internship Placements for Students in Accredited Doctoral Programs**  
(Commission on Accreditation, July 2012)

The CoA conducts reviews in accordance with its Guidelines and Principles (G&P) and as required by the US Department of Education (USDE) and Higher Education Accreditation (CHEA) regulations (see relevant USDE and CHEA regulations below). Several pieces of the G&P are relevant to this review. Domain A.4 states that eligibility for accreditation by the CoA requires “...*completion of an internship prior to awarding the doctoral degree.*” Domain B1(b) requires that training for practice is sequential, cumulative and graded in complexity and designed to prepare students for further organized training. Domain B.4(d) states that “...*the program must describe and justify the sufficiency of practicum experiences required of students in preparation for an internship.*” Therefore, it is clear that placement of students in an organized internship is both an important step in the doctoral training sequence and an important outcome of the graduate doctoral training.

Accredited doctoral programs, or doctoral programs seeking accreditation, must provide to the CoA appropriate data to demonstrate outcomes consistent with the G&P and the program's stated educational goals. Because completion of an internship is a required component of training for all accredited doctoral programs, the CoA requires that the doctoral program provide evidence of students' successful completion of an internship program of appropriate quality.

In their capacity as accrediting bodies, the Canadian Psychological Association (CPA) and the APA - CoA have written standards and review procedures that guide external review of the quality of internship programs. Thus, programs that place students in CPA or APA-CoA accredited internships are not required to provide additional documentation of the quality of internship placements.

For all other internship placements (including APPIC member, CAPIC member, CDSPP compliant site, etc.), the doctoral program must demonstrate how it ensures the quality of the internship training experience. To that end, an accredited program that sends students to sites that are not accredited must provide information to the CoA regarding its process for monitoring the quality of internship training, including the quality of student achievement and development of competencies at these sites. Information regarding the nature of the training provided must be of sufficient detail to demonstrate the adequacy and quality of these training experiences.

CoA is required to follow these US Department of Education (USDE) and Council of Higher Education Accreditation (CHEA) regulations in its reviews:

*USDE - §602. 16 Accreditation and preaccreditation standards.*

- (a) The agency must demonstrate that it has standards "for accreditation, and preaccreditation, if offered, that are sufficiently rigorous to ensure that the agency is a reliable authority regarding the quality of the education or training provided by the institutions or programs it accredits.*

*(b) The agency meets this requirement if-*

*(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:*

*(i) Success with respect to student achievement in relation to the institution's mission, which may include different standards for different institutions or programs, as established by the institution, including, as appropriate, consideration of course completion, State licensing examination, and job placement rates.*

*CHEA -12A 3. 12A. Advances Academic Quality. Advancing academic quality is at the core of voluntary accreditation. "Academic quality" refers to results associated with teaching, learning, research, and service within the framework of institutional mission. To be recognized, the accrediting organization provides evidence that it has:*

*3. standards or policies that include expectations of institutional or program quality, including student achievement, consistent with its mission.*

**C-31(d). Licensure Rate for Doctoral Programs**  
(Commission on Accreditation, July 2012)

**Evaluation of Graduates' Licensure Rates:**

CoA accreditation of doctoral and internship education and training programs is based on "preparation for entry-level practice in professional psychology" (see II. Guiding Principles of Accreditation - Section B.1. Broad and General Preparation for Practice at the Entry Level). All doctoral programs, whether seeking accreditation or reaccreditation, are expected to achieve this objective of preparing students for entry level practice in professional psychology. One tangible index of preparation for entry level practice is a program's success in preparing its graduates to be licensed as psychologists.

The CoA interprets the licensure rate of program graduates within the context of: (1) the requirement that *all* accredited doctoral programs prepare students for entry-level practice; (2) each program's own stated educational goals and objectives; and, (3) statements made by the program to the public. Because specific educational goals and objectives in the programs CoA accredits may differ, the CoA does not specify a threshold or minimum number when reviewing a program's licensure rate. Rather, the CoA uses its professional judgment to determine if the program's licensure rate, in combination with other factors such as the attrition of students from the program and their time to degree, demonstrates students' successful preparation for entry-level practice in professional psychology. This includes determining if program graduates' licensure rates are consistent with the expressed or implied promises the program makes to the public and to CoA with respect to achieving its educational goals. In general, the more emphasis a program places on producing graduates who will be practitioners, the higher expectations CoA will have for the proportion of students who matriculate into the program and eventually become licensed. In the process of periodic review, a program needs to discuss its licensure data in terms of its educational goals and provide information to address discrepancies between those goals and the actual licensure of students admitted to the program. All accredited doctoral programs are, however, expected to prepare students for entry-level practice and the program's achievement of this should be reflected in student success in achieving licensure after completion of the program.

An accredited doctoral program is also required to provide data on licensure to the public consistent with Implementing Regulation C-20.

NOTE: The CoA also has to conduct its reviews in accordance with the regulations of the US Secretary of Education and the Council of Higher Education Accreditation (CHEA) requiring:

*USDE - §602. 16 Accreditation and preaccreditation standards.*

- (a) The agency must demonstrate that it has standards "for accreditation, and preaccreditation, if offered, that are sufficiently rigorous to ensure that the agency is a reliable authority regarding the quality of the education or training provided by the institutions or programs it accredits.*
- (b) The agency meets this requirement if-*

*(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:*

*(i) Success with respect to student achievement in relation to the institution's mission, which may include different standards for different institutions or programs, as established by the institution, including, as appropriate, consideration of course completion, State licensing examination, and job placement rates.*

*CHEA -12A 3. 12A. Advances Academic Quality. Advancing academic quality is at the core of voluntary accreditation. "Academic quality" refers to results associated with teaching, learning, research, and service within the framework of institutional mission. To be recognized, the accrediting organization provides evidence that it has:*

*3. standards or policies that include expectations of institutional or program quality, including student achievement, consistent with its mission.*

### **C-32. Outcome Data for Doctoral Programs** (Commission on Accreditation, October 2012)

The United States Department of Education (USDE) requires recognized accrediting bodies (such as CoA) to collect and monitor data-driven outcomes, especially as they relate to student achievement. In making an accreditation decision on a program, CoA must demonstrate that it reviews student achievement through review of the program's outcome data. Therefore, CoA requires all accredited programs to provide outcome data on the extent to which the program is effective in achieving its goals, objectives, and competencies. This Implementing Regulation clarifies the type of data CoA needs to make an accreditation decision for doctoral programs.

As stated in the *Guidelines and Principles* (G&P) for doctoral programs (F.1a):

*The program, with appropriate involvement from its students, engages in regular, ongoing self-studies that address:*

*(a) Its effectiveness in achieving program goals and objectives in terms of outcome data (i.e., while students are in the program and after completion);*

Accredited doctoral programs specify their goals, objectives, and competencies as part of Domain B. It is each program's responsibility to collect, present, and utilize: (1) aggregate proximal outcome data that are directly linked to program goals, objectives, and competencies, including the content areas specified in Domain B.3, and (2) aggregate distal outcome data that are directly linked to program goals and objectives.

#### **Definitions and Guidelines:**

**Proximal data** are defined as outcomes for students as they progress through and complete the program, that are linked to the program's goals, objectives, and competencies.

- Proximal data typically include evaluations of students' performance by others (e.g., by course instructors, thesis/dissertation committees, supervisors) and may also include more objective performance indicators (e.g., numbers of peer-reviewed presentations, publications).
- These data are most easily evaluated by CoA when evaluation methods clearly parallel the program's goals, objectives, and competencies. For example, individual rating scale items might include language that parallels the program's stated goals, objectives, and competencies. Some evaluation methods may be broader than a specific competency (e.g., course grades or dissertation defense pass/fail outcomes); or may be relevant to multiple competencies (e.g., successful dissertation defense may relate to competencies in scholarly literature, research methods, data analysis methods). In these instances, the program should describe how the evaluation method is specifically linked to the relevant goals, objectives, and competencies.



- Although student self-ratings of either *satisfaction with training*, or *attainment of program competencies*, may be a part of proximal assessment, these ratings are not considered sufficient outcome data in this context because the ratings do not address the program's success in achieving its goals, objectives, and competencies beyond the student's own perspective.
- Completion of an *unevaluated activity* (attendance at a class or seminar, completion of a manuscript, completion of practicum hours) is not considered sufficient proximal outcome data. Rather, the program must provide evaluative data (e.g., course outcomes/grades, supervisor evaluation of practicum performance, dissertation defense outcome, acceptance of a peer-reviewed presentation or publication) that demonstrate that the program is achieving its goals and objectives by ensuring that students are achieving expected competencies.

**Distal data** are defined as outcomes for students after they have completed the program, which are linked to the program's goals and objectives.

- Distal data typically include information obtained from alumni addressing former students' assessments of the degree to which the program achieved its goals and objectives in its training of them. Distal data may also include graduates' professional activities and accomplishments (e.g., licensure, employment activities and products, professional memberships and affiliations).
- However, the data that are requested in the required self-study Table 9, *Program Graduates: Employment*, are insufficient alone because it is unlikely that they fully reflect achievement of all of a program's goals and objectives.
- Distal data are most easily evaluated by CoA when evaluation items clearly parallel the program's goals and objectives. For example, individual alumni survey items might include language that parallels the program's stated goals and objectives. For evaluation methods that may not be as clearly linked to specific objectives and instead may be broader, explanation of how the evaluation method is linked specifically to the relevant goals and objectives can facilitate CoA's evaluation of the extent to which distal data reflect the program's effectiveness in meeting its goals and objectives.
- Although alumni surveys assessing former students' overall *satisfaction* with the training program may be an important component of a program's ongoing self-study process, these surveys are not considered sufficient outcome data in this context because the program's success in achieving its goals and objectives is not addressed. However, as noted above, former students' perceptions of how well the program achieved its goals and objectives with respect to the former students' training could be considered appropriate distal data.

- Although CoA does not specify the interval at which distal data should be collected, the program should demonstrate that data are collected regularly and in an ongoing and timely manner such that the program can use the data to make needed changes consistent with requirements of Domain F.

**Aggregate data** are compilations of proximal data and compilations of distal data across students, which may be presented by cohort, program year, or academic year. Aggregate data demonstrate the effectiveness of the program as a whole, rather than the accomplishment of an individual student over time.

- To the extent possible, data should be presented in table form using basic descriptive statistics (e.g., sample sizes, means, percentages). The program should choose statistics that best demonstrate the program's success in meeting its goals and objectives, and how students are acquiring competencies in relation to the program's defined minimal levels of achievement. For example, presenting percentages of students achieving a competency is clearer than simply presenting numbers of students achieving a competency (i.e., without a denominator). Similarly, some data are useful for understanding general student performance (e.g., means), but do not clearly indicate that all students are reaching minimal levels of achievement for all competencies. The program should provide meaningful data in such a way that the CoA can determine that by the time of program completion, all students are reaching these minimal levels of achievement.
- If data are aggregated over a number of years (i.e., not presented by cohort or academic year), the program must demonstrate how aggregating the data in this way facilitates the program's self-improvement.

### **Specificity of Data:**

CoA recognizes that programs vary widely in the specificity of their goals, objectives, or competencies. It is expected that an accredited program will provide data at a level of specificity sufficient to allow the program and CoA to assess the program's effectiveness in achieving its outcomes.

If a program describes broad competencies like the foundational or functional competencies presented in the competencies benchmark document (Fouad et al., 2009), then data should be provided at the competency level. If a program lists these broad competency areas as objectives and then for competencies, lists specific skills related to the broad competency areas, the program may prefer to aggregate the data across the particular skills reflective of each competency.

For example:

- Program A identifies an objective to train versatile professionals who are competent in areas of assessment, intervention, research and consultation. This program might then list each of these areas (i.e., assessment, intervention, research and consultation) as the specific competencies in the program. For Program A, data should be provided at the competency level (i.e., separately for competencies of assessment, intervention, research, consultation). Aggregating data across these four areas would prevent the program from determining whether students achieve each competency.
- Program B identifies an objective to train students who are competent in assessment, and then lists as competencies several particular skills connected to assessment (e.g., demonstrates ability to: evaluate the validity and reliability of different instruments, administer and score a variety of reliable and valid instruments, write a coherent and useful assessment report, provide meaningful feedback to a referral source). Program B could then aggregate data across these particular skills to demonstrate students' achievement of the assessment competency.

Programs may have one or multiple data points relevant to each objective and competency, and data may be relevant to more than one objective or competency. In any case, the program must explain how the data presented are sufficient to allow the CoA, and the program, to evaluate the program's effectiveness in meeting each of its goals and objectives for developing student competencies.

### **Presentation of Data:**

Presentation of the data should facilitate the CoA's evaluation of the program's effectiveness in meeting its goals and objectives. Programs may elect to present data in various formats, including tables, graphs, narrative, or a combination of these formats.

Fouad, N. A., Grus, C. L., Hatcher, R. L., Kaslow, N. J., Hutchings, P. S., Madson, M. B., . . . Crossman, R. E. (2009). Competency benchmarks: A developmental model for understanding and measuring competence in professional psychology. *Training and Education in Professional Psychology*, 3(4, Suppl), S5-S26. doi: 10.1037/a0015832