



Commission on Accreditation Update

March 2014

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2014 CoA Policy Meeting

CoA Policy Meeting Actions

The [Commission on Accreditation](#) (CoA) held its annual policy meeting February 6-9 in Washington, DC. This meeting was preceded by an orientation day for new members on February 5. For the third consecutive year, Commissioners participated in a “calibration” exercise designed to maximize consistency of decisions across reviewers. As is typical of the annual policy meeting, no programs were reviewed. Instead, the CoA focused on a number of important policy issues including those related to the proposed Standards of Accreditation (SoA).

The Standards of Accreditation (SoA) in Health Service Psychology: *What You Need to Know*

1. **Public Comment:** [Public comment](#) on the proposed SoA began on January 16 and continues through July 7, 2014. This is your opportunity to pose questions to the CoA, make recommendations, and provide any other thoughts to help inform the development of the new standards. It is important to note that the SoA documents are proposals; nothing is final at this point and your feedback is important to the CoA's process. Based on the feedback received, the CoA will review all comments and decide the timeline for moving forward.

2. **Process/Timeline:** One concern expressed by CoA's publics is that new standards will be implemented within the next year or two. Given the profound impact new accreditation standards will have to the field and discipline, programs will receive ample notice of upcoming changes during a carefully executed

implementation period. This of course will only occur after the approval process for the new standards ensues consistent with [Implementing Regulation A-1](#). First, the CoA approved standards will be presented to the APA Board of Educational Affairs and Board of Directors for review. Upon completion of those reviews, the revised standards must be approved by the APA Council of Representatives (CoR).

In addition to the SoA, there are supplementary materials included in the revision process. For instance, the *Accreditation Operating Procedures* (AoP) will need to be revised to align to the new standards; they also will receive a separate period of public comment. In regards to the AoP, the CoA is considering changing the maximum number of years of accreditation and structuring a contingency status for doctoral programs (similar to that approved in 2012 and currently in effect for [internship and postdoctoral residency programs](#)).

As such, it is unlikely for implementation to occur prior to 2016 at which time there will be an appropriate phase-in and application of the new accreditation standards.

3. **Programs in Religious Institutions:** In moving forward with the standards of accreditation, the Commission's goal is to ensure that all programs, whether they are religiously-affiliated or in public or private institutions, are held to the same education and training standards while simultaneously ensuring that religious institutions are afforded their rights under the Constitution. In the new standards, the statements formerly in Footnote 4 are now broadly applicable core standards and can be found in the doctoral (Standard I.B.2), internship (Standard I.B.2) and postdoctoral (Standard I.B.3) standards.

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The SoA: What You Need to Know (continued from Page 1, Column 2)

4. Competencies: Based on review of public comment in both Phase I and Phase II of the Roadmap process for revising accreditation standards, it was quite clear that sentiment is in favor of CoA's requiring a common set of competencies for accredited programs. What was not clear was which set of the many competencies that have been developed and proposed by various entities should be required. Various individuals and groups have endorsed different lists of competencies. In order to ensure that CoA was accurately representing the field of health service psychology and to be consistent and fair to all groups, the CoA implemented a methodology to identify competencies that are common across various competency sets that had already been developed. This was a multi-step process.

First, all of the major sets of psychology competencies in the training literature were collected. CoA review found that each set of competencies has two components: major competency areas (e.g., ethical and legal standards, evidence-based practice in assessment) and specific competencies within each area (e.g., knowledge and application of APA ethical principles of psychologists, knowledge and utilization of evidence-based criteria to select assessment methods). The second step was to determine which major competency areas would be included in the standards. The CoA prepared a matrix that identified competency areas that were common across the literature. These commonly-agreed-upon competency areas are those proposed for inclusion in the SoA as the required profession-wide competency areas. Next specific, required competencies for each broad competency area will be described within Implementing Regulations. By describing these specific competencies in the IRs, rather than in the SoA, the CoA will be able to modify and adjust specific required competencies in response to changes in the field and to differentiate specific competencies by level of training.

In addition, although profession-wide competencies will be required of all programs, the ways in which programs pursue these competencies are expected to differ based on a program's specific training aims. Each accredited program will be required to describe its training aims and the ways in which these aims are integrated into training of the required competencies. Programs also may elect to augment the required profession-wide competencies with competencies of their own (i.e., program-specific competencies). Regardless of whether a program elects to rely solely on the profession-wide competencies or chooses to add program-specific competencies, the competencies must be integrated into the overall aims of the program, be clearly defined, and be measurable.

Programs will be required to collect data on achievement of all competencies, to use those data for program improvement, and to make those data available for accreditation review.

5. What has changed? What has not changed? At the midwinter training council meetings, it became clear to the CoA that the various parties served by accreditation would benefit from summaries of the salient differences between the G&P and the proposed SoA. In response, the CoA drafted summaries for each level of accreditation (doctoral, doctoral internship, and postdoctoral residency). These summaries are included at the end of this issue of the *CoA Update*.

CoA Welcomes 7 New Members

The CoA welcomed seven new members during the Policy meeting and recognizes their dedication to quality assurance in psychology education and training.

- **Nina W. Brown, EdD**
- **Cindy I. Carlson, PhD**
- **Philinda S. Hutchings, PhD**
- **Karl Koob, MMIS, RHIA, FAHIMA, CPEHR**
- **James A. Mulick, PhD**
- **Jack Schaffer, PhD**
- **David A. Smith, PhD**

2015 CoA Self-Study and Site Visits

Programs scheduled for periodic review in 2015 have been assigned to [review cycles](#). As a reminder, programs with site visits in 2015 are required to use the [2015 CoA self-study instructions and tables](#). The Office of Program Consultation and Accreditation (OPCA) strongly encourages program directors to attend one of CoA's self-study [workshops](#) (as early in the self-study process as possible). There is no cost to participants for attending. Also, the Accreditation webpage contains a helpful self-study [FAQ](#). Programs are welcome to contact OPCA at (202) 336-5979 for consultation on completing the self-study.

Important Accreditation Dates 2014

April 3-6	Spring Program Review Meeting
May 1	Annual Report Online (ARO) opens; Fall Cycle 2014 Self-Studies Due
July 7	Deadline for public comment on the proposed SoA
July 17-20	Summer Program Review and Policy Meeting
October 23-26	Fall Program Review Meeting

PUBLIC COMMENT: SoA

The proposed Standards of Accreditation (SoA) in Health Service Psychology is now open for public comment through **July 7, 2014**.

The proposed SoA represents a culmination of the two prior phases of public comment occurring during 2012 and 2013, conversations with training councils, and other discussions with stakeholders on the future of the discipline and profession. The proposed SoA signifies the next step forward and a continued opportunity to further build upon the dialogue between the CoA and constituents.

The SoA consists of three parts representing each level of training: Doctoral; Doctoral Internship; and Postdoctoral Residency. You will have an opportunity to comment on any or all sections across each training level.

The CoA Public Comment System is accessible from the following URL:

<http://apps.apa.org/accredcomment/default.aspx>

Prior to viewing the standards and offering comments, you will be asked to review important details pertaining to the SoA and affirm that you have read this material. *Please take the time to review this introduction.*

Comments received from the prior two phases of comment continue to be available on the [Office of Program Consultation and Accreditation](#) webpage. You will also be able to access the current public comment system from the OPCA page.

In accordance with the APA "Policies for Accreditation Governance" and Department of Education regulations for notice and comment, the CoA has made the proposed standards of accreditation available for a period of public review and comment. The public comment period began on **January 16, 2014 and continues through July 7, 2014**. In an effort to promote thoughtful discussion, the CoA is providing an electronic-based comment form for public comment submission. Comments and other information, including users' identity, will be public. Email addresses used for registration will be kept confidential. The CoA will consider all comments received in moving forward with revisions to its standards of accreditation.

REMINDERS FOR ACCREDITED PROGRAMS

Program Review Decision Outcomes

Consistent with AOP [4.5](#), programs under review will be sent written notification of the review outcome **30 days** following the final day of the program review meeting. All meetings end on Sunday, and authorized representatives of reviewed programs may contact the office after 12 noon ET on the following Tuesday to obtain the final decision. *NOTE:* OPCA will only be able to provide the **year** of the program's next site visit (for accredited programs) over the telephone. Programs are randomly assigned to a review cycle the year prior to their site visit and will be notified of the due date for their self-study at that time. As a reminder, the information on the CoA website is the most current available to the public and statuses for programs receiving final decisions are updated **30 days** following each program review meeting (See Important Accreditation Dates on Page 2).

Site Visitor Nominations

Nominate members of your faculty to serve as a CoA site visitor. A cardinal strength of specialized accreditation is that it is indeed a [peer review](#) process requiring the professional knowledge of experts in the profession and discipline. Given the diversity of training models and program goals, it is vital that CoA has a robust cadre of site visitors to provide effective and appropriate observations. Recruitment is ongoing for new site visitors and several training workshops will be offered on the day prior to the start of the 2014 APA Convention in Washington, DC. Also, current site visitors who have not attended a workshop within the past 3 years are urged to attend a workshop to learn about recent policy and procedural changes to the review process. Please review the [FAQ on Becoming an APA Site Visitor](#) on the OPCA website or [email](#) OPCA for more information.

Notify the CoA of Program Director Changes

Please remember to notify the OPCA in writing (by [e-mail](#) is fine) when there is a change in the program's training director, and provide the contact information (including the e-mail address) for that individual. If the new director was not previously involved with the program, his/her CV must also be provided for Office records. This is consistent with IR [C-19](#), which requires programs to notify CoA in advance of any substantive changes. This will also ensure that the correct individual(s) for the program is listed in our database and receives all of CoA's correspondence.

2014 Annual Report Online (ARO)

The 2014 [Annual Report Online \(ARO\)](#) will open on Thursday May 1, 2014 and close on September 15, 2014. Data preparation forms, tip sheets, and other resources for the 2014 ARO will be available online approximately April 1, 2014. All program directors will receive email notifications about an upcoming series of ARO webinars along with a reminder to update ARO permissions for user accounts. As a reminder, the OPCA research office provides annual summary reports about accredited programs and their students and faculty; [ARO statistics](#) and data tables from 2004-2012 along with responses to [external research requests](#) are publicly available online. Please contact the OPCA Research office between 9 am and 5 pm Monday through Friday at (202) 336-6016 (or email aro@apa.org) with any questions.

CURRENT PROGRAM COUNTS (As of January 2, 2014)

Programs (Level and Area)		Accredited Programs		Applicant Programs Under Review	
		PhD	PsyD	PhD	PsyD
Doctoral Programs	<i>Clinical</i>	173	64	2	3
	<i>Counseling</i>	65	4	1	2
	<i>School</i>	56	5	4	0
	<i>Combined</i>	6	3	1	0
	Total Doctoral	376		13	
Internship Programs	Total Internship	481		33	
Postdoctoral Residency Programs	<i>Traditional – Clinical</i>	52		17	
	<i>Specialty—Clinical Child Psychology</i>	8		1	
	<i>Specialty—Clinical Health Psychology</i>	8		1	
	<i>Specialty--Clinical Neuropsychology</i>	21		3	
	<i>Specialty—Forensic Psychology</i>	1		0	
	<i>Specialty—Rehabilitation Psychology</i>	5		1	
	Total Postdoctoral	95		23	
TOTAL		952		69	

**APA Commission on Accreditation
Proposed Doctoral Standards of Accreditation (SoA)
Highlights: What Is Changed and Unchanged**

What Has Not Changed from the G&P in the Proposed SoA for Doctoral Programs:

- General practice areas within the scope of accreditation at the doctoral level (**Standard I.A.2**);
- Requirement that the program is in a regionally-accredited institution (**Standard I.B.1.a**);
- Standards for education and training of health service psychologists are the same for programs in secular and faith based settings (formerly Footnote 4 - **Standard I.B.2**);
- Importance of ongoing direct face-to-face interaction with students over their developmental sequence (**Standard I.C.1.c**);
- Flexibility in regard to how competencies are achieved by students and assessed by faculty (**Standard II.B., C. and D**);
- Importance of diversity in:
 - policies and procedures to ensure nondiscrimination (**Standard I.D.1**); as a competency (**Standard II.B.1.b**);
 - recruitment and retention of students (**Standard III.A.1.b.ii**) and faculty (**Standard IV.B.5**);
 - creating an environment that nurtures all students for success (**Standard III.B**);
- Internship as part of the doctoral sequence of training (**Standard II.C.2**);
- Demonstration by the program that outcomes have been achieved as appropriate for the area, degree, and aims – including those that are part of:
 - SoA competencies,
 - program specific competencies, and
 - broader areas (e.g., licensure - consistent with federal recognition requirements) - (**Standard II.D.3**);
- Required core faculty (**Standard IV.B**);
- Requirements for clear and accurate public information (**Standard V.A**).

DOCTORAL

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What Has Changed from the G&P in the Proposed SoA for Doctoral Programs:

- Move from “professional psychology” to Health Service Psychology (**Standard I.A.1** - defined further in Glossary)
- Move from program models to practice area and degree type (**Standard I.A.2** and **Standard I.A.3**);
- Integrate the concepts currently found in Footnote 4 of the G&P into the SoA (**Standard I.B.2**);
- Additional requirements for documentation of student records and their retention (**Standard I.D.4**);
- Place competencies and their assessment together in the SoA (**Standard II**);
- Require discipline specific knowledge and set of profession-wide competencies (**Standard II.B.1.b**);
 - Set of profession-wide competencies derived through a multi-step process that identified points of consensus across the various sets of competencies in the literature;
 - Required profession-wide competency areas included in SoA:
 - ✓ Evidence-based practice in intervention
 - ✓ Evidence-based practice in assessment
 - ✓ Ethical and legal standards
 - ✓ Individual and cultural diversity
 - ✓ Research
 - ✓ Professional values and attitudes
 - ✓ Communication and interpersonal skills
 - ✓ Consultation/interprofessional/interdisciplinary
 - ✓ Supervision
 - ✓ Reflective practice
 - Specific requirements for each competency area defined within Implementing Regulations to allow for CoA modification/adjustment in response to changes in the field and to differentiate specific competencies by level of training, as appropriate.
- More specifics re: expected practicum (**Standard II.C.1**) and internship training (**Standard II.C.2**) - including expectations if students do not attend accredited internships (**Standard II.C.2.b**);
- Require demonstration that program has met its own outcomes and those defined for Health Service Psychology (**Standard II.D.3**);
- Describe how demonstrated prior knowledge in psychology can serve as a foundation for advanced “broad and general” education in curriculum (**Standard II.B.1.a.i** and **Standard III.A.2.c.i**);
- Require programs to engage in review of effectiveness of their diversity practices for students (**Standard III.1.b**) and faculty (**Standard IV.B.5**);
- Clarify required communication between doctoral program and internship (**Standard V.A.3**).

**APA Commission on Accreditation
Proposed Internship Standards of Accreditation (SoA)
Highlights: What Is Changed and Unchanged**

What Has Not Changed from the G&P in the Proposed SoA for Doctoral Internships:

- Internships can be full-time or part-time (**Standard I.A.2.c**);
- Programs can be located in one institution, they can be affiliated with a specific doctoral program, or they can be in consortia (**Standard I.A.2.c**);
- Internship must be one year full-time or two years part-time (**Standard I.A.2.d**);
- Standards for education and training of health service psychologists are the same for programs in secular and faith based settings (formerly Footnote 4 - **Standard I.B.2**);
- Interns must be funded (**Standard I.C.3.a**);
- Interns receive at least four (4) hours of supervision per week - at least two (2) in individual supervision by a doctoral-level licensed psychologist and at least two (2) additional hours supervised by appropriately credentialed health care professionals (**Standard II.C.3.b-c**);
- Flexibility in regard to how competencies are achieved by interns and assessed by faculty/supervisors (**Standards II.B-D**);
- Demonstration by the program that outcomes have been achieved as appropriate for the program aims (**Standard II.D.**)— including those that are part of:
 - SoA competencies, and
 - Program specific competencies
- Importance of diversity:
 - In policies and procedures to ensure nondiscrimination (**Standard I.E**);
 - As a competency (**Standard II.A.2.d**);
 - In recruitment of interns (**Standard III.A.2**) and staff recruitment and retention (**Standard IV.B.1**);
 - In creating an environment that nurtures all interns for success (**Standard IV.B.2**);
- Minimum of two interns in an accredited program (**Standard III.A.3**); and
- Requirements for clear and accurate public information (**Standard V.A**).

INTERNSHIP

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What Has Changed from the G&P in the Proposed SoA for Doctoral Internships:

- Move from “professional psychology” to Health Service Psychology (**Standard I.A.1** - defined further in Glossary);
- Integrate the concepts currently found in Footnote 4 of the G&P into the SoA (**Standard I.C.2**);
- Along with a stipend, wherever possible, basic support for health/medical insurance should be in place to protect the welfare of interns and their families (**Standard I.C.3.a**);
- Additional requirements for documentation of student records and their retention (**Standard I.D.4**);
- Place competencies and their assessment together in the SoA (**Standard II**);
 - Replace “model” with program aims and a set of profession-wide competencies (**Standard II.B.**) A set of profession-wide competencies was derived through a multi-step process that identified points of consensus across the various sets of competencies in the literature;
 - Required profession-wide competency areas included in SoA:
 - ✓ Evidence-based practice in intervention
 - ✓ Evidence-based practice in assessment
 - ✓ Ethical and legal standards
 - ✓ Individual and cultural diversity
 - ✓ Research
 - ✓ Professional values and attitudes
 - ✓ Communication and interpersonal skills
 - ✓ Consultation/interprofessional/interdisciplinary
 - ✓ Supervision
 - ✓ Reflective practice
 - Specific requirements for each competency area defined within Implementing Regulations to allow for CoA modification/adjustment in response to changes in the field and to differentiate specific competencies by level of training, as appropriate.
- Each intern evaluation must be based in part on direct observation (either live or video/electronic) of the intern (**Standard II.D.1.a.iv**);
- Require demonstration that program has met profession-wide competencies for Health Service Psychology and program-specified competencies (if applicable) (**Standard II.D.2**);
- Require programs to engage in review of effectiveness of their diversity practices for students (**Standard III.A.1.b**) and faculty (**Standard IV.B.2**);
- Clarify required communication between doctoral program and internship (**Standard V.A.3**).

**APA Commission on Accreditation
Proposed Postdoctoral Standards of Accreditation (SoA)
Highlights: What Is Changed and Unchanged**

What Has Not Changed from the G&P in the Proposed SoA for Postdoctoral Residencies:

- Postdoctoral programs can be in traditional practice areas; proficiencies with those areas or in specialty practice areas (**Standard I.A**);
- Programs can be located in one institution, or in consortia (**Standard I.B.2**);
- Standards for education and training of health service psychologists are the same for programs in secular and faith based settings (formerly Footnote 4 - **Standard I.B.3**);
- Postdocs must be funded (**Standard I.B.4.b**);
- Postdocs receive at least 2 hours of individual supervision per week by a doctoral-level licensed psychologist (**Standard II.B.4.d**);
- Flexibility in regard to how competencies are achieved by postdocs and assessed by faculty/supervisors (**Standards II.B-C**);
- Demonstration by the program that outcomes have been achieved as appropriate for the program aims (**Standard II.C**) and at all appropriate levels;
- Importance of diversity:
 - In policies and procedures to ensure nondiscrimination (**Standard I.D.1**);
 - In creating an environment that nurtures all postdocs for success (**Standard I.D.2**);
 - As a competency (**Standard II.B.1.b**);
 - In recruitment of postdocs (**Standard III.A.3**) and staff recruitment and retention (**Standard IV.B.2**); and
- Requirement for clear and accurate public information (**Standard V.A**).

POSTDOCTORAL

What Has Changed from the G&P in the Proposed SoA for Postdoctoral Residencies:

- Move from “professional psychology” to Health Service Psychology (HSP) (**Standard I.A.1** - defined further in Glossary);
- Programs that require substantial research activities must demonstrate how these research activities are directly related to HSP competencies and how the program ensures all residents attain the required HSP competencies at an advanced level (**Standard I.A.3**);
- Integrate the concepts currently found in Footnote 4 of the G&P into the SoA (**Standard I.B.3**);
- Place competencies and their assessment together in the standards (**Standard II.B**);
 - Replace “model” with program aims and a set of profession-wide competencies (**Standard II.B.1-3**) -three levels of competencies:
 - Level 1—Advanced Profession-Wide Competencies Required of All Residents
 - Integration of Science and Practice (includes evidence-based practice)
 - Diversity (includes issues of cultural and individual diversity relevant to advanced practice, as appropriate to population served and specialty area).
 - Ethics (includes professional conduct, ethics and law, and other standards for providers of psychological services)
 - Level 2—Program-Specific, Area-of-Emphasis, or Proficiency Competencies
 - The program requires all its residents to demonstrate professional psychological competencies at an advanced level in those domains integral to achieving its aims
 - Level 3—Specialty Competencies

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