

SoA vs. G&P

The *Standards of Accreditation for Health Service Psychology* (SoA) were approved by APA Governance in February 2015. The Commission on Accreditation (CoA) will begin to review programs for adherence to the SoA on September 1, 2016. A majority of the G&P is located within the SoA. The following is a list of major changes that appear in the SoA.

Across all Program Levels:

HSP vs. Professional Psychology

The SoA eliminates any reference to professional psychology. The scope of accreditation has been changed to instead include health service psychology (HSP). For the purposes of accreditation, HSP is defined as:

the integration of psychological science and practice in order to facilitate human development and functioning. Health service psychology includes the generation and provision of knowledge and practices that encompass a wide range of professional activities relevant to health promotion, prevention, consultation, assessment, and treatment for psychological and other health-related disorders (SoA Introduction, Section I).

CoA will release an Implementing Regulation on training in HSP for public comment in late Summer 2015.

Guidelines vs. Standards

The SoA does away with domains of guidelines and principles. The document describes five standards of accreditation:

- I. Institutional and Program Context
- II. Program Aims, Learning Structure, and Outcomes
- III. Students/Interns/Residents
- IV. Faculty/Supervisors/Staff
- V. Communication

The re-organization was done to better link training to outcomes (Domain B&F), reflect the nature of training at each program level, and to reduce redundancies. A few redundancies do still remain and were intentionally included.

Diversity

Diversity remains a consistent theme throughout the SoA. Standard I for each program level includes language from Footnote 4 directly in the Standard. Also, a provision for demonstrating compliance with the Americans with Disabilities Act has been added to the list of required policies and procedures for all accredited programs. Self-Study questions related to diversity will be strategically placed to help reduce any redundant questions.

Record Keeping

SoA Standard I across all program levels expounds upon CoA's previous record keeping expectations outlined in the G&P, clarifying that student/intern/resident evaluations will be reviewed as a part of periodic review.

Training Models

With the implementation of the SoA, programs will no longer need to demonstrate how it is aligned with a given training model. Instead, the SoA includes description of degree types for doctoral programs, as described below.

Aims and Competencies vs. Goals/Objectives/Competencies

The concept of reporting a program's goals, objectives, and competencies (GOCs) has been replaced with aims and competencies. Programs must describe their aims and demonstrate how the expected competencies meet these desired aims. Depending on program level, the CoA will also require programs to provide students/interns/residents with training in specific competencies (explained in greater detail later in this document).

Profession-Wide Competencies

CoA developed a set of nine competencies in which all students/interns must demonstrate achievement. These nine competencies are:

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| 1. Research | 6. Assessment |
| 2. Ethical and legal standards | 7. Intervention |
| 3. Individual and cultural diversity | 8. Supervision |
| 4. Professional values, attitudes, and behaviors | 9. Consultation and interprofessional/interdisciplinary skills |
| 5. Communication and interpersonal skills | |

Postdoctoral residency programs do not need to demonstrate achievement of all nine competencies. An Implementing Regulation defining these competencies will be out for public comment from May 1, 2015 - June 30, 2015.

Program Specific Competencies

In addition to the required profession-wide competencies, all accredited programs may elect to identify program specific competencies related to the program aims. If the program includes any additional competencies, all students/interns/residents within that program must demonstrate achievement of these competencies in order to successfully complete the program. ***This is an optional section of the SoA, intended to encourage innovation in specific areas of interest or development.***

Direct Observation

With the implementation of the SoA, CoA will require that evaluations of students/interns/residents be based in part on direct observation. Given this focus on the need for direct observation, CoA defines and clarifies its expectations of direct observation in an Implementing Regulation out for public comment from May 1, 2015 – June 30, 2015.

Doctoral Programs Only

Degree Type

The Doctoral SoA defines what is meant by PhD and PsyD in Standard II.C.1. These definitions include expectations of training for a program providing a given degree. Under the SoA, programs will be required to describe how training is in line with the chosen degree type.

Discipline-Specific Knowledge

As stated in the SoA, “discipline-specific knowledge represents the requisite core knowledge of psychology an individual must have to attain the profession-wide competencies” (Doctoral Standard II.B.1.a). This concept is only applicable to doctoral programs seeking accreditation and is designed to replace the concept of broad and general training outlined in Implementing Regulation C-16. , Some of the discipline-specific knowledge may be attained prior to enrollment in the program, while some will be required in the doctoral program. An Implementing Regulation clarifying this concept will be out for public comment from May 1, 2015 – June 30, 2015.

Licensure as Outcome Measure

Standard II.D.3 of the Doctoral SoA places a focus on licensure as an outcome measure. This focus previously was represented in Implementing Regulation C-31(d).

Doctoral and Internship Programs ONLY

Communication between Doctoral and Internship Programs

In Standard V.A.3, the SoA places responsibility of clear communication between doctoral and internship programs on both entities. This standard clarifies the nature of and the timeframe in which communication should occur.

Postdoctoral Residency Programs ONLY

Areas of Postdoctoral Accreditation

Postdoctoral residency programs may now be accredited under one or more areas:

1. Advanced competencies in the major areas of training in HSP, or
2. Specialty practice areas in HSP. A given specialty area must meet 2 of the following 3 requirements:
 - a. Recognized by the Commission on the Recognition of Specialties and Proficiencies in Professional Psychology (CRSPPP),
 - b. Recognized by and holds membership on the Council of Specialties (CoS),
 - c. The specialty has provided the CoA with specialty-specific postdoctoral educational and training guidelines endorsed by the CoS.

Competency Levels for Postdoctoral Residency Training

The Postdoctoral Residency SoA outlines 3 levels of competencies (Standard II.B):

- Level 1 - Advanced Competency Areas Required of All Programs at the Postdoctoral Level (includes integration of science and practice, ethical and legal standards, and diversity)
- Level 2 - Program-Specific or Area of Focus Competencies (includes competencies of the training focus of the program, if any)
- Level 3 - Specialty Competencies (includes the competencies of the specialty training as described by CRSPPP and/or CoS)

All accredited postdoctoral residency programs must provide information regarding Level 1 competencies. The provision of Level 2 are optional, but would typically describe advanced

competencies in HSP for programs that are not focused on a specialty practice area. Level 3 competencies are required if the program elects to be accredited as a specialty practice area.

Individualized Training Plans

Consistent with Standard II.C.1 of the Postdoctoral Residency SoA, programs will now be able to develop individualized training for residents. This training plan, “should include the resident’s level of competence at entry in planning for how he or she will successfully attain the program’s exit criteria.”