Commission on Accreditation Update
May 2013

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CoA April 2013 Meeting

The Commission on Accreditation (CoA) held its first program review meeting of the year April 4-7 in Washington, DC. A total of 111 doctoral, internship, and postdoctoral residency programs were reviewed for either initial or continued accreditation, as well as 6 requests for changes to programs' accredited status (e.g., "Accredited, inactive" status for a training year). Decisions made at the meeting are available on the Office of Program Consultation and Accreditation (OPCA) website. Also, complete listings of accredited and applicant programs have been updated to reflect actions taken at the April meeting.

IR C-20

The CoA addressed a few minor revisions to Implementing Regulation (IR) C-20 as part of its policy agenda. This IR concerns programs' disclosure of education/training outcomes as part of the information programs provide to prospective doctoral students and to the public. Doctoral programs are required to update these data by October 1 every year to reflect the most recent seven years. Each winter, OPCA staff review all doctoral programs' "Student Admissions, Outcomes and Other Data" for compliance with IR C-20. Based on the results of the 2012 review, minor changes were proposed and subsequently approved by the CoA. Most notably, the two "Time to Completion" tables have been combined into a single table, allowing programs the option to describe policies relating to advanced standing for students (when applicable). Also, the title of the weblink to C-20 data from programs' homepage must be "Student Admissions, Outcomes and Other Data" so the public can easily find and compare infromation across accredited doctoral programs.

IR C-20 (continued)

The revised IR is now available on the CoA website and doctoral programs will be subject to its requirements on September 15, 2013. The template tables and instructions for IR C-20 are available on the OPCA website. Doctoral programs are strongly encouraged to review these changes in order to ensure that the IR C-20 data being presented are completely consistent with CoA requirements.

Endorsement of Geropsychology as a specialty

Consistent with the CoA's provisions for accreditation of postdoctoral residency training programs as described by IR C-11(b): Postdoctoral Residency Substantive Specialty Practice Areas, the Commission endorsed Geropsychology as a specialty area.. Geropsychology now joins the existing endorsed postdoctoral specialty practice areas of Behavioral and Cognitive Psychology; Clinical Child Psychology; Clinical Health Psychology; Family Psychology; Forensic Psychology; and Rehabilitation Psychology. As a reminder, "substantive specialty practice areas" are only relevant to postdoctoral residency training programs and are not applicable to the doctoral or internship levels of training.

The Roadmap: Revising the G&P

The CoA will continue to accept public comment on the second phase of questions for revising the G&P through **June 1**. To better inform the revision process, selected guests were in attendance to assist the Commission's work in reviewing structures of other accreditation standards as a guide for drafting a potential structure for the APA Commission on Accreditation. It is hoped that the developing framework will offer a mechanism for organizing the responses from public comment as the CoA begins preliminary work on standards at its July meeting.

Important Accreditation Dates 2013

May 13	Annual Report Online (ARO) opens
June 1	Deadlines for public comment on the G&P Roadmap: Phase II Questions and public disclosure
July 17-21	Summer Program Review and Policy Meeting
August 2	CoA Open Forum at APA Convention: Honolulu, HI
October 17-20	Fall Program Review Meeting

New Accreditation Statuses

The revised *Accreditation Operating Procedures* (AOP) that allow for an "eligible" status and accredited "accredited, on contingency" status became effective on January 1, 2013. The CoA has prepared an application for "eligible" status, which consists of essential elements from Domains A-D. Applicants for "accredited, on contingency" will use the existing self-study instructions, except for the data requirements contained in Domain F. All forms for the new statuses are now available on the CoA website.

Annual Accreditation Fees

Annual fee invoices for accredited internship and postdoctoral residency programs will be mailed on June 1, 2013 and, for accredited doctoral programs, on August 1, 2013. Annual fees are due by December 31, 2013. Programs not submitting payment by this due date may be subject to withdrawal from accredited status as described in Section 2.3 of the *Accreditation Operating Procedures* (AOP).

Effective **January 1, 2013**, annual accreditation fees are as follows:

- **$2250** (internship and postdoctoral residency programs);
- **$3750** (doctoral programs with 1-50 students); and
- **$4250** (doctoral programs with 50+ students).

Student count for doctoral programs is based on data submitted by programs to the ARO as of September 15, 2012.

Did you know?

The CoA publishes annual summary data on doctoral, internship, and postdoctoral residency programs. Please visit the Annual Report Online Statistics page for 2004-2011 data and also results from additional research requests approved by the CoA consistent with IR E.1-3. Summary data for 2012 will be posted later this year.

2013 Annual Report Online

The 2013 Annual Report Online (ARO) opened on May 13, 2013. The Office of Program Consultation and Accreditation (OPCA) Research staff will broadcast live webinars at 3:30 PM EDT on **August 21st** and at 11 am EDT on **August 27th**. Any program staff, faculty/supervisors or administrators who want to participate in data entry training and discover what's new in the ARO may attend a webinar. Questions will be answered live. Registration is quick and easy; register for the August 21st webinar or the August 27th webinar. Visit the APA accreditation webpage for the ARO to find other useful resources.

Program directors of doctoral programs can now view their 2010-2012 Threshold Summary Reports in the CoA Portal on the Dashboard tab, under Reports. This might also be a good time to review staff permissions in the Portal as well as add staff accounts for program staff who need Portal access to manage your program's ARO data. The staff account provides permission and access to download the program's confidential data. Please disable any staff accounts for staff who no longer need access to the Portal. At any time, contact the OPCA Research office with questions at (202) 336-6016.

The 2012 ARO CoA Portal Survey results will soon be available on the APA accreditation website. Thank you to all of the programs that chose to participate in last year's survey! The Commission on Accreditation (CoA) has used the feedback to implement several changes to the CoA portal this year.

Site Visitors

The Commission on Accreditation (CoA) is assiduously seeking individuals to become accreditation site visitors. As those of you who have scheduled a site visit in recent years may know, the pool of visitors faces a critical shortage and it is becoming increasingly difficult to find site visitors. If you are not already involved, please consider attending a workshop and becoming a part of the APA Site Visitor Corps. If you are a current site visitor, consider attending the Site Visitor Chair workshop to update your training and learn more about the Chair role. The CoA also recommends that current site visitors attend a training workshop every three years to remain current on accreditation policies and procedures.

Site Visitor Training workshops will be held on July 30, 2013 in Honolulu, Hawaii prior to 2013 APA Annual Convention. Additional information on becoming an APA site visitor is available on the OPCA webpage.

PUBLIC COMMENT

The CoA offers an online comment system for its publics to view proposals, access past comments (as appropriate), and to publicize individual and/or group opinions on accreditation policy proposals and issues. The CoA Public Comment System is the only means by which comments will be considered a part of the official record and reviewed by the Commission. Two issues of significant importance to all accredited programs at all levels of training are currently available for public comment.

The Roadmap: Phase II Questions

At the fall 2012 meeting, the CoA reviewed more than 400 pages of comments received from the public on the first phase of questions for the review and revision of the *Guidelines and Principles for Accreditation* (G&P). Each of the CoA's policy groups (doctoral, internship, and postdoctoral) analyzed the comments and drafted follow-up questions that are now available for public comment. During the first quarter of 2013, CoA members have met with a number of its communities of interest at scheduled meetings during this second phase of review. **The public comment period on the Phase II Questions will continue through June 1, 2013**. *(See pages 3-8 for the Phase II Questions).*

Public Disclosure of Accreditation Decisions

Prompted by direction from the Council for Higher Education Accreditation (CHEA), the CoA considered options for enhancing the content of information provided to the public regarding decisions on accreditation status. Currently, the CoA reports accredited status and year of next site visit on its website and describes the guidelines for 3, 5, and 7 year decisions in its Notice of Actions published 30 days following each program review meeting. Although the CoA was granted continued recognition in January 2013, CHEA reiterated an interpretation of its standards that insists on specific information regarding the basis for accreditation decisions. As a result, the CoA has developed three possible options that are now available for public comment; a fourth is open-ended to allow for additional suggested options from the public. CoA seeks input from all of its communities of interest regarding exactly which option would best meet the need to inform people about the bases of CoA's decisions. Any changes to public disclosure will necessitate public comment, review by the APA Board of Educational Affairs, and approval by the APA Board of Directors of revisions to Section 8 of the *Accreditation Operating Procedures*. **The public comment period continues through June 1, 2013.**

Please visit the Accreditation Public Comment website to download policy proposals, view comments received, or register to post comments. Comments may be submitted as an individual or as part of a group. Please contact the OPCA at 202-336-5979 with any questions or issues regarding the public comment system.

Phase II Questions: Public Comment November 29, 2012-June 1, 2013

There are two kinds of questions to which we are seeking input. The first set of questions pertains to both doctoral- and internship-level training. The second group of questions focuses on training at the postdoctoral level. The public comment system is organized by each of the numbered questions within the two question groups. You are welcome to provide comments on as many or as few sections as you choose; but please ensure that your responses are specific to the relevant question.

The public comment period began on November 29, 2012, and will continue through June 1, 2013 and may be accessed at the following URL:
http://apaoutside.apa.org/AccredSurvey/Public/

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 the 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 the Roadmap. On behalf of the CoA, thank you for your review and comments. Please contact the APA Office of Program Consultation and Accreditation with

any questions or concerns. Address: 750 First Street, N.E., Washington, DC 20002-4242; Phone: (202) 336-5979; Email: apaaccred@apa.org; Web: http://www.apa.org/ed/accreditation

Questions for Doctoral and Internship Training

Accreditation Framework - Competencies and Program Characteristics

1. There have been many comments in favor of moving CoA accreditation at the doctoral and internship levels toward a uniform, profession-based competency-based assessment. What are the pros and cons of this? If CoA moves to a uniform-professional based competency-based assessment, how might this be implemented? Should CoA identify relevant competencies? Should CoA use previously-identified competencies in the profession (e.g., Benchmark Competencies, NCSPP, etc.)? Are there other competencies that are not fully addressed in existing documents (e.g., research and science) and if so, how should CoA identify and incorporate these into the G&P?

2. What kind of proximal and distal outcome data should CoA require to evaluate whether a training program is successfully training students/interns to be competent?

3. Should clinical, counseling, or school programs be evaluated using the same or different accreditation standards? For purposes of accreditation, does type of training model matter (e.g., scientist-practitioner, practitioner-scholar, or clinical scientist)? Should programs be evaluated for accreditation on their own program goals, objectives, and competencies; on a set of uniform –profession based competencies; or both?

Curriculum

4. Should specialization (e.g., neuropsychology, health) be permitted prior to the post-doctoral level (i.e., at doctoral and/or internship)? What are the pros/cons of such a model? How might this be operationalized given the importance of broad and general training?

5. Several comments have called for increased interdisciplinary training in professional psychology. How and when should interdisciplinary training and collaboration occur? Should it be a required part of doctoral training? internship? What implications does this have for the acceptable qualifications of faculty and internship program contributors (i.e., instructors, practicum supervisors, internship primary/supplemental supervisors, research mentors)?

Sequence of Training

6. Should there be a minimum expectation for entry criteria to an accredited doctoral program?

What should that expectation be (e.g., undergraduate coursework, minimum GPA, minimum GRE scores)? How would minimum admissions criteria impact underrepresented/non-traditional applicants? What plans should programs implement to handle exceptions to the criteria?

7. What outcomes should be expected to demonstrate the effectiveness of a program's admissions criteria (e.g., retention, time to completion, internship match rate, job placement, licensure rates)? At what point should CoA identify admissions criteria as problematic?
8. What are the pros and cons of requiring either the dissertation proposal, data collection, or defense prior to application for internship?
9. Should programs be required to send students to accredited internships? If not, how should programs assure quality of internship experience?
10. When should the internship experience occur (pre/post conferral of the degree)? What are the potential consequences of pre versus post?

Diversity

11. How should CoA assess attention to diversity issues at each level of training?
12. Should CoA continue to include a domain specific to diversity issues? Should diversity issues be infused throughout the standards?
13. What should CoA's expectations be for recruitment and retention strategies for diverse students, faculty and staff?

Structural Issues and Resources

14. How does the G&P need to take into account new organizational structures of doctoral and internship programs (e.g., multiple sites, centrally controlled consortia, in-house internships)? What should be the common elements for a program that is located across multiple sites to insure that it is one cohesive program?
15. In doctoral programs, what faculty qualifications should be required to contribute to required program training (e.g., in coursework, practicum supervision, research supervision)? How should faculty qualifications be evaluated?
16. What elements of doctoral and internship training must be in-person vs. other formats? What proportion of online (or other not-in-person) learning is acceptable?

17. Can in-person training be delivered via telehealth, telesupervision, or course videoconferencing? In other words, must individuals always be in the same physical room or are other options acceptable as in-person? Is there a maximum acceptable percentage of training that can be delivered via these technologies? Are there certain elements or placements within the sequence of training where these technologies would be appropriate and other elements or placements in the sequence of training where these technologies would not be appropriate?

18. Should the revised standards establish a maximum number of cumulative hours a doctoral intern can be expected to work per week? Should the revised standards establish enforceable criteria for a livable salary/stipend for interns and benefits? What might those criteria be for each of these?

19. Should the revised standards establish clear criteria defining what constitutes an on-site supervisor? Given that some programs have multiple sites, what are the implications of this for the notion of "on-site" supervisors? What percentage of time does a supervisor need to be in a particular setting to be considered integral to the setting?

Other

20. Are there additional concerns you have about the G and P revision that have not been addressed by the questions above?

Questions for Postdoctoral Training

1. Beyond accreditation of recognized specialties as defined by CoA – should there be other postdoctoral accreditation in other areas?
    a. If so, what areas?
    b. What is the role of accreditation at the postdoctoral level for the broad areas covered in doctoral and internship training (i.e.. clinical, counseling, and school psychology)?
    c. How should CoA address areas of emphasis within broad (as opposed to specialty) postdoctoral programs that are not at the level of a specialty such as a proficiency? (e.g…PTSD, Substance Abuse, etc.)

2. Given the differences between the nature of doctoral training (doctoral and internship), to what extent should CoA conduct the review of postdoctoral residency programs for accreditation?
    a. How would this impact the nature of the self-study?
    b. How would this impact the role of site visitors?

   c. How would this have implications for accreditation decisions?

3. Currently, doctoral and internship training involve preparation for *entry-level* practice, and postdoctoral training involves preparation for *advanced* practice. Please comment on whether this is an appropriate distinction, and if not how postdoctoral training in preparation for practice should be distinguished from doctoral and internship training.

4. What are the most appropriate ways for CoA to collaborate with the various specialty synarchies to ensure currency of postdoctoral standards as well as the specialty review standards?

5. What is the most appropriate way for CoA to collaborate with state licensing boards and ASPPB regarding postdoctoral requirements?

6. How should clinical service delivery/experience be defined at the postdoctoral level of accreditation?
   a. How much of this can be conducted using standardized patients?
   b. How much telesupervision and/or telehealth interventions can be included?
   c. What level of experiential training vs. research-focus is appropriate for the accreditation of a postdoctoral residency program?

7. What areas beyond clinical service delivery should be included as postdoctoral level competencies? How prescriptive should the standards be for these areas that add value to postdoc training?
   a. Teaching (with a broad definition)?
   b. Advocacy?
   c. Interprofessional competence?
   d. Leadership?
   e. Consultation?

8. What training areas or competencies can be assumed to be in place at the completion of doctoral and internship training, such that those areas/competencies no longer need to be addressed at the postdoctoral level?

9. Should entrance to a level of training of knowledge and clinical competency be linked to performance on a national examination? Should there be a standard way of measuring benchmark competencies prior to entry to a postdoctoral residency?
   a. Is this limited to the postdoctoral level or is this something that should be reviewed for entrance to the profession at other levels?

10. What is the role of diversity training at the postdoctoral level? Are there conceptual differences in how this should be approached in terms of the level of training or in terms of the specialty area(s)?

11. How should the qualifications/credentials of training directors and supervisors be assessed by CoA in a residency program? How should sufficiency of faculty be defined?

12. What is the appropriate amount, level, focus, and type of supervision provided to the postdoctoral resident? Should there be common requirements across specialties regarding supervision provided to residents?

13. What role should formal didactics play at the postdoctoral level? How is this different or similar to other levels of training?

14. What outcome measures are appropriate at the postdoctoral level as evidence of quality education and training?

15. How can the CoA better structure the review and accreditation of multiple specialty programs at a single institution?

16. What other standards or areas should CoA address in the revised G&P for postdoctoral residencies?

CURRENT PROGRAM COUNTS
(as of May 8, 2013)

		Accredited Programs		Applicant Programs Under Review	
		PhD	PsyD	PhD	PsyD
Doctoral Programs	*Clinical*	174	62	2	4
	Counseling	65	4	0	1
	School	57	6	3	0
	Combined	5	3	1	0
	Total Doctoral	**376**		**11**	
Internship Programs	Total Internship	**476**		**26**	
Postdoctoral Residency Programs	*Traditional – Clinical*	46		14	
	Specialty – Clinical Neuropsychology	19		5	
	Specialty – Clinical Health Psychology	7		3	
	Specialty – Clinical Child Psychology	7		2	
	Specialty – Rehabilitation Psychology	4		1	
	Specialty – Forensic Psychology	1		0	
	Total Postdoctoral	**84**		**25**	
TOTAL		**936**		**62**	

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