

Standards of Accreditation in Health Service Psychology: Doctoral

I. Institutional and Program Context

A. Type of Program

1. **Health Service Psychology.** The program offers broad and general doctoral education and training that prepares students for careers in Health Service Psychology (HSP). Although HSP encompasses a range of practice areas, degree types, and career paths, certain elements are common to training in the profession. A program that is accredited in Health Service Psychology must demonstrate that it contains the following elements:
 - a. Essential integration of empirical evidence and practice: practice is evidence-based; relevant evidence is practice-informed. All training programs must enable their students to achieve basic competencies in each, as well as in their integrated application.
 - b. Training for practice is sequential, cumulative, graded in complexity, and designed to prepare students for practice or further organized training.
 - c. The program engages in actions that indicate respect for and understanding of cultural and individual diversity.
2. **Practice Area.** Health Service Psychology includes several practice areas in which an accredited program may focus, including the areas of clinical psychology, counseling and school psychology, other developed practice areas, and combinations of these areas.
3. **Degree Type.** The program can confer either a PhD or PsyD degree. Although both PhD and PsyD degrees contain all the required elements common to HSP programs, they differ in the balance among, and relative emphasis on, program components, based on specific training goals or likely career paths of their graduates. Training in HSP involves the acquisition and integration of knowledge, skills, and attitudes from two major domains within the discipline of psychology: research and practice. Differences in degree types represent the relative emphases of each of these aspects in the training program, although all programs must include both.
 - a. Programs that confer the PhD have an emphasis on ensuring that graduates are able to contribute to the knowledge of the discipline of psychology, in addition to qualifying for entry to practice. Thus, programs that confer the PhD must have a substantial proportion of faculty who contribute to the literature in the discipline (or related disciplines and fields), as well as faculty who have been trained for the practice of psychology. Students in such programs should demonstrate the ability to contribute to knowledge via professional publications and/or presentations.

- b. Programs that confer the PsyD have an emphasis on ensuring that graduates have the ability to provide evidence-based services to a range of populations, in addition to the ability to generate knowledge that improves the application of the discipline or enables them to evaluate their own practice. Thus, programs that confer the PsyD must have a substantial proportion of faculty who are able to prepare students to engage in evidence-based practice, as well as faculty who are actively contributing to scholarship. Students in such programs should be prepared for entry to practice, as demonstrated by their ability to access and utilize current knowledge to answer different kinds of behavioral health questions, evaluate the applicability of the evidence for a particular individual or population, and deliver evidence-based services.

B. Institutional Setting and Resources

1. **Administrative Structure.** The program's purpose must be pursued in an institutional setting appropriate for the doctoral education and training of professional psychologists. The institution must have a clear administrative structure and commitment to the doctoral program.
 - a. The sponsoring institution of higher education must be authorized under applicable law or other acceptable authority to provide the program of postsecondary education and have appropriate graduate degree-granting authority. This includes state authorization and accreditation of the institution by a nationally recognized regional accrediting body in the United States.
 - b. The program is an integral part of the mission of the academic department, college, school, or institution in which it resides. It is represented in the institution's operating budget and plans in a manner that supports the training mission of the program. Funding and resources are stable and enable the program to achieve its goals and objectives.
2. **Administrative Responsibilities.** The program recognizes the importance of cultural and individual differences and diversity in the training of psychologists. The program has made systematic, coherent, and long-term efforts to attract and retain students and faculty from diverse backgrounds into the program. Consistent with such efforts, it acts to ensure a supportive and encouraging learning environment appropriate for the training of diverse individuals and the provision of training opportunities for a broad spectrum of individuals. Further, the program avoids any actions that would restrict program access on grounds that are irrelevant to success in graduate training, either directly or by imposing significant and disproportionate burdens on the basis of the personal and demographic characteristics set forth in the definition of cultural diversity. Because of the United States' rich diverse higher education landscape, training can take place in both secular and faith based settings. Thus programs with a religious affiliation or purpose may utilize admissions and employment policies that grant a preference to individuals sharing the

institution's religious affiliation or purpose, to the extent afforded by the U.S. Constitution. Such policies may not otherwise be used to preclude the admission or employment of individuals based on the personal and demographic characteristics set forth under the definition of cultural diversity, and programs must provide public notice to applicants, students, faculty and staff of policies that impact admissions or employment before their application to or affiliation with the program. Regardless of a program's setting, the program may not constrain academic freedom or otherwise alter the requirements of these standards. Finally, compelling pedagogical interests require that each program prepare graduates to navigate cultural and individual differences in research and practice, including those that may produce value conflicts or other tensions arising from the intersection of different areas of diversity.

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C. Program Context and Resources

1. Program Administration and Structure

- a. **Program Leadership.** The program has consistent and stable leadership with a designated leader who is a doctoral-level psychologist and a member of the core faculty. The program leader's credentials and expertise must be in an area covered by HSP accreditation and must be consistent with the program's aims. This leadership position may be held by more than one individual.
- b. **Program Administration.** The program has designated procedures and personnel responsible for making decisions about the program, including curriculum, student selection and evaluation, and program maintenance and improvement. The program's decision-making procedures, including who is involved in decision making, must be consistent with the missions of the institution and department, and with the program's aims. The program ensures a stable educational environment through its personnel and faculty leadership.
- c. **Length of Degree and Residency.** The program has policies regarding program length and residency that permit faculty, training staff, supervisors, and administrators to execute their professional, ethical, and potentially legal obligations to promote student development, socialization and peer interaction, faculty role modelling and the development and assessment of student competencies. Residency provides students with mentoring and supervision regarding their development and socialization into the profession, as well as continuous monitoring and assessment of student development through live face-to-face, in-person interaction with faculty and students. These obligations cannot be met in programs that are substantially or completely online. At a minimum, the program must require that each student successfully complete:
 - i. a minimum of 3 full-time academic years of graduate study (or the equivalent thereof) plus an internship prior to receiving the doctoral degree;
 - ii. at least 2 of the 3 academic training years (or the equivalent thereof) within the program from which the doctoral degree is granted;
 - iii. at least 1 year of which must be in full-time residence (or the equivalent thereof) at that same program. 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 the purposes of the residency requirement.

2. **Partnerships/Consortia.** A graduate program may consist of, or be located under, a single administrative entity (e.g., institution, agency, school, or department) or in a partnership or consortium among separate administrative entities. A consortium is comprised of multiple independently administered entities that have, in writing, formally agreed to pool resources to conduct a training or education program.
3. **Resources.** The program has, and appropriately utilizes, the resources it needs to achieve its training goals and objectives, including student acquisition and demonstration of competencies. The program works with its academic unit and/or the administration of the sponsor institution to develop a plan for the acquisition of those additional resources that may be necessary for program maintenance and development. The resources should include the following:
 - a. financial support for training and educational activities;
 - b. clerical, technical, and electronic support;
 - c. training materials and equipment;
 - d. physical facilities;
 - e. services to support students with academic, financial, health, and personal issues.

D. Program Policies and Procedures

1. **Areas of Coverage.** The Commission on Accreditation espouses a broad definition of cultural diversity and individual difference that includes, but is not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status. The program has and adheres to formal written policies and procedures that govern students as they enter, progress through, and matriculate from the program. These must include policies relevant to:
 - a. academic recruitment and admissions, including general recruitment/admissions and recruitment of diverse students;
 - b. degree requirements;
 - c. administrative and financial assistance;
 - d. student performance evaluation, feedback, advisement, retention, and termination decisions;
 - e. due process and grievance procedures;
 - f. student rights, responsibilities, and personal development;

- g. nondiscrimination policies. The program must document nondiscriminatory policies and operating conditions and avoidance of any actions that would restrict program access or completion on grounds that are irrelevant to success in graduate training or the profession.
2. **Implementation.** If the program utilizes policies developed at another level (e.g., department or institution), it must demonstrate how it implements these policies at the program level. All policies and procedures used by the program must be consistent with the profession's current ethics code and must adhere to their sponsor institution's regulations and local, state, and federal statutes regarding due process and fair treatment.
 3. **Availability of Policies and Procedures.** The program makes the formal written policies and procedures available to all interested parties. At the time of admission, the program provides students with written policies and procedures regarding program and institution requirements and expectations regarding students' performance and continuance in the program and procedures for the termination of students.
 4. **Record Storage.** The program is responsible for keeping information and records related to student training and complaints/grievances against the program. Records must be maintained in accord with federal, state, and institution policies regarding record keeping and privacy. The Commission on Accreditation will examine student records and programs' records of student complaints as part of its periodic review of programs.
 - a. **Student Records.** The program must document and maintain permanent and accurate records of each student's education and training experiences and evaluations for evidence of the student's progression through the program, as well as for future reference and credentialing purposes.
 - i. For current students, the program must maintain records relevant to ongoing program review and accreditation review.
 - ii. For graduates, the program must maintain records relevant to accreditation review. Records must be maintained for all graduates until licensed or for a maximum of 10 years.
 - iii. The program may retain graduates' records beyond the period required by CoA (e.g., for the purposes of ongoing program self-evaluation or for assisting students with documentation of training for licensure). The program should inform students of its records retention policies.

- b. **Complaints/Grievances.** The program must keep records of all formal complaints and grievances of which it is aware that have been submitted or filed against the program and/or against individuals associated with the program since its last accreditation site visit. In addition to these required materials, a program may wish to maintain a separate log of complaints/grievances that does not identify the complainant or the party against whom the complaint was filed.

II. Curriculum, Outcomes, and Development

A. Aims of the Program

1. Consistent with health service psychology as defined by these standards, the program's area of psychology, and the degree conferred, the program must provide information on the aims of its training program.
2. These aims should reflect the program's approach to training and intended outcomes, including the career paths of its graduates.

B. Discipline-Specific Knowledge, Profession-Wide Competencies, and Learning/Curriculum Elements Required by the Profession

1. Discipline-Specific Knowledge and Profession-Wide Competencies

- a. Discipline-specific knowledge represents the requisite knowledge of psychology an individual must have to attain the profession-wide competencies. Programs may elect to demonstrate discipline-specific knowledge of students by:
 - i. Using student selection criteria that involve standardized assessments of a foundational knowledge base (e.g., GRE subject tests). In this case, the program must describe how the curriculum builds upon this foundational knowledge to enable students to demonstrate graduate level discipline-specific knowledge. Additional coursework in advanced topics is expected.
 - ii. Providing students with broad exposure to discipline-specific knowledge. In this case, the program is not required to demonstrate that students have specific foundational knowledge at entry, but must describe how the program's curriculum enables students to demonstrate graduate-level discipline-specific knowledge.
- b. Profession-wide competencies include certain competencies required for all students who graduate from accredited programs in Health Service Psychology. Programs must provide opportunities for all of their students to achieve and demonstrate each required profession-wide competency. The specific requirements in each area below will be articulated in *Implementing Regulations*. Because science is at the core of all that a health service psychologist does, programs must demonstrate that they are relying on the most recent and rigorous evidence base for the development and assessment of each of the competency categories.

- i. Evidence-based practice in intervention
- ii. Evidence-based practice in assessment
- iii. Ethical and legal standards
- iv. Individual and cultural diversity
- v. Research
- vi. Professional values and attitudes
- vii. Communication and interpersonal skills
- viii. Consultation/interprofessional/interdisciplinary
- ix. Supervision
- x. Reflective practice

2. **Learning/Curriculum Elements Related to the Program's Aims.** The program must describe the process by which students attain discipline-specific knowledge and each profession-wide competency (i.e., the program's curriculum) and provide a description of how the curriculum is consistent with professional standards and the program's aims.

C. Practicum and Required Internship Training Elements

1. **Practicum** This must include supervised experience working with diverse individuals with a variety of presenting problems, diagnoses, and issues. The purpose of practicum is to develop the requisite knowledge and skills for graduates to be able to demonstrate the competencies defined above. The doctoral program needs to demonstrate that it provides a training plan applied and documented at the individual level, appropriate to the student's current skills and ability, that ensures that by the time the student applies for internship the student has attained the requisite level of competency.
 - a. Programs must place students in settings that are committed to training, that provide experiences that are consistent with health service psychology and the program's aims, and that enable students to attain and demonstrate appropriate competencies.
 - b. Supervision must be provided by appropriately credentialed individuals. When the practicum site does not provide for doctoral-level licensed psychologists as supervisors, the doctoral program must provide ongoing supervision by appropriately licensed faculty.
 - c. As part of a program's ongoing commitment to ensuring the quality of their graduates, each practicum evaluation must be based in part on direct observation (either live or electronically).

2. **Required Internship.** The program must demonstrate that all students complete a one year full-time or two year part-time internship. The program's policies regarding student placement at accredited versus unaccredited internships should be consistent with national standards regarding internship training.
 - a. **Accredited Internships.** Students are expected to apply for, and to the extent possible, complete internship training programs that are either APA- or CPA-accredited. For students who attend accredited internships, the doctoral program is required to provide only the specific name of the internship.
 - b. **Unaccredited Internships.** When a student attends an unaccredited internship, it is the responsibility of the doctoral program to provide evidence demonstrating quality and adequacy of the internship experience. This must include information on the following:
 - i. the nature and appropriateness of the training activities;
 - ii. frequency and quality of supervision;
 - iii. credentials of the supervisors;
 - iv. how the internship evaluates student performance;
 - v. how interns demonstrate competency at the appropriate level.
 - c. For unaccredited internships, the doctoral program must include documentation of the evaluation of its students in its student files.
3. **Program-Specific Competencies and Related Curriculum.** Accredited doctoral programs in health service psychology may require that students attain additional competencies specific to the program.
 - a. If the program requires additional competencies of its students, it must describe the competencies, how they are consistent with the program's aims, and the process by which students attain each competency (i.e., curriculum).
 - b. Additional competencies must be consistent with the ethics of the profession.

D. Evaluation of Students and Program

1. Evaluation of Students' Competencies

- a. The program must evaluate students' competencies in both profession-defined and program-defined areas. By the time of degree completion, each student must demonstrate achievement of both the profession-wide competencies and those required by the program. Thus, for each competency, the program must:

- i. Specify how it evaluates student performance, and the minimum level of achievement or performance required of the student to demonstrate competency. Programs must demonstrate how the evaluation methods used are appropriate for the measurement of each competency. The level of achievement expected should reflect the current standards for the profession.
 - ii. Provide outcome data that clearly demonstrate that by the time of degree completion, all students have reached the appropriate level of achievement in each profession-wide competency as well as in each program-defined competency. While the program has flexibility in deciding what outcome data to present, the data should reflect assessment that is consistent with best practices in student competencies evaluation (e.g., is reliable and valid and uses multiple methods, including at least some direct observation).
 - iii. Present formative and summative evaluations linked to the exit criteria, as well as data demonstrating achievement of competencies, for each student in the program.
- b. For program graduates, the program must provide more distal evidence of students' competencies and program effectiveness and must evaluate graduates' functioning as health service psychologists after they have left the program.
 - i. Two years after graduation, the program must provide data on how well the program prepared students in each profession-wide and program-specific competency. The program must also provide data on students' job placement and licensure rates.
 - ii. At 5 and 10 years post-graduation, the program must provide data on graduates, including those who are still licensed (as appropriate for their current job duties) and their scholarly/research contributions (as consistent with the program's aims).

2. Evaluation of Program Effectiveness and Quality Improvement Efforts

- a. The program must demonstrate a commitment to excellence through ongoing self-study in order to monitor its performance in training competent health service psychologists and contributing to fulfillment of its sponsor institution's mission.
- b. The program must document mechanisms for engaging in regular, ongoing self-assessment that:
 - i. Involves program stakeholders, including faculty, students, graduates, and others involved in the training program.

- ii. Evaluates its effectiveness in training students who, by the time of graduation, demonstrate the competencies required by the profession and the program, and who after graduation are able to engage in professional activities consistent with health service psychologists and with the program's aims.
- iii. Evaluates the currency and appropriateness of its aims, curriculum, and policies and procedures with respect to the following: its sponsor institution's mission and goals; local, state/provincial, regional, and national needs for psychological services; national standards for health service psychologists; and the evolving evidence base of the profession.
- iv. Identifies potential areas for improvement.

3. **Documenting and Achieving Outcomes Demonstrating Program's Effectiveness.** All accredited doctoral programs are expected to prepare students for entry-level practice as licensed health service psychologists and the program's achievement of this should be reflected in student success in achieving licensure after completion of the program.

- a. The licensure rate of program graduates shall be evaluated within the context of: the requirement that all accredited doctoral programs prepare students for entry-level practice; each program's own stated educational aims and competencies and statements made by the program to the public.
- b. Because specific educational aims and competencies in a doctoral program may differ, there is no specified threshold or minimum number for reviewing a program's licensure rate. Instead the Commission on Accreditation shall use its professional judgment to determine if the program's licensure rate, in combination with other factors, such as attrition of students from the program and their time to degree, demonstrates students' successful preparation for entry-level practice in health service psychology.
- c. Program licensure rates and other proximal and distal outcomes must be consistent with the expressed or implied statements the program makes to the public and the Commission on Accreditation with respect to achieving its educational goals.

III. Students

A. Selection Processes and Criteria

1. The program has an identifiable body of students at different levels of matriculation.
 - a. They constitute a number that allows opportunities for meaningful peer interaction, support, and socialization.
 - b. They are reflective of a systematic, multiple-year plan, implemented and sustained over time, designed to attract students from a range of diverse backgrounds as outlined in the glossary.
 - i. The program must implement specific activities, approaches, and initiatives to increase diversity among its students. It may participate in institutional-level initiatives aimed toward achieving diversity, but these alone are not sufficient.
 - ii. The program should document the concrete actions it is taking to achieve diversity, identifying the areas of diversity recruitment in which it excels as well as the areas in which it is working to improve. The program should demonstrate that it examines the effectiveness of its efforts to attract diverse students and document any steps needed to revise/enhance its strategies.
 - c. By prior achievement, students have demonstrated appropriate competency for the program's aims as well as expectations for a doctoral program.
 - i. If the program has criteria for selection that involve demonstration of prior knowledge (e.g., GRE subject tests), the program must discuss how meeting these criteria influence program requirements, are appropriate for the aims of the program, and how the criteria maximize student success.
 - ii. If the program has broad entrance criteria (e.g., undergraduate or graduate GPA), the program must address how students will be prepared for advanced education and training in psychology, how the curriculum is structured in accord with the goal of graduate-level competency, and how the criteria relative to the curriculum maximize student success.
 - d. By interest and aptitude, they are prepared to meet the program's aims.
 - e. They reflect, through their intellectual and professional development and intended career paths, the program's goals, objectives, and philosophy.

B. Supportive Learning Environment

1. Program faculty are accessible to students and provide them with guidance and supervision. They serve as 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.
2. The program recognizes the rights of students and faculty to be treated with courtesy and respect. In order to maximize the quality and effectiveness of students' learning experiences, all interactions among students, faculty, and staff should be collegial and conducted in a manner that reflects the highest standards of the scholarly community and of the profession. (See the current *APA Ethical Principles of Psychologists and Code of Conduct*). The program has an obligation to inform students of these principles, put procedures in place to promote productive interactions, and inform students of their avenues of recourse should problems with regard to them arise.
3. To ensure a supportive and encouraging learning environment for diverse students, the program must avoid any actions that would restrict program access on grounds that are irrelevant to success in graduate training.

C. Plans to Maximize Student Success

1. Program faculty members engage in and document actions and procedures that actively encourage timely completion of the program and maximize student success. The program minimizes preventable causes of attrition (e.g., flawed admission procedures or unsupportive learning environments) and engages in tailored retention/completion efforts as appropriate (e.g., accommodation of student needs and special circumstances).
2. **Program Engagement.** This includes specific activities, approaches, and initiatives to implement and maintain diversity and ensure a supportive learning environment for all students. The program may participate in institutional-level initiatives aimed toward retaining diverse students, but these alone are not sufficient. Concrete program-level actions to retain diverse students should be integrated across key aspects of the program and should be documented. The program should also demonstrate that it examines the effectiveness of its efforts to retain diverse students and document any steps needed to revise/enhance its strategies.
3. **Feedback and Remediation.** Students receive, at least annually, written feedback on the extent to which they are meeting the program's requirements and performance expectations. Such feedback should include:
 - a. timely, written notification of any problems that have been noted and the opportunity to discuss them;
 - b. guidance regarding steps to remediate any problems (if remediable);
 - c. substantive, written feedback on the extent to which corrective actions have or have not been successful in addressing the issues of concern.

IV. Faculty

A. Program Leadership, Administration, and Management

1. The program has consistent and stable leadership with a designated leader who is a doctoral-level psychologist and a member of the core faculty. The program leader's credentials and expertise are consistent with the program's mission and goals and with the substantive area of professional psychology in which the program provides training. More than one individual can hold this leadership position.
2. The program leader(s) together with program core faculty have primary responsibility for the design, implementation, and evaluation of the program's administrative activities (e.g., policies and procedures for student admissions, student evaluations, and arrangement of practicum experiences) and for its educational offerings (e.g., coursework, practicum experiences, and research training).

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B. Faculty Qualifications and Role Modeling

1. **Core Faculty.** The program has an identifiable core faculty responsible for the program's activities, educational offerings, and quality, 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 aims;
 - d. demonstrate substantial competence and have recognized credentials in those areas that are at the core of the program's aims;
 - e. are available to function as appropriate role models for students in their learning and socialization into the discipline and profession.
2. **Additional Core Faculty Professional Characteristics**
 - a. Core faculty must be composed of individuals whose education, training, and/or experience are consistent with their roles in the program in light of the substantive area in which the program seeks accreditation.
 - b. 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 multiyear commitment. At least 50% of core faculty professional time must be devoted to program-related activities.
 - c. 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 member 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.
 - d. Core faculty activities directly related to the doctoral program include program-related teaching, research, scholarship, and/or professional activities; supervising students' research, students' dissertations, and students' teaching activities; mentoring students' professional development; providing clinical supervision; monitoring 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.

e. 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 master's or other graduate programs; and clinical work or independent practice not directly associated with training, such as at a counseling center.

3. **Associated and Adjunct Faculty.** In addition to core faculty, programs may also have associated program faculty, contributing faculty, and adjunct (visiting, auxiliary, or "other") faculty. Associated program faculty do not meet the criteria for core faculty. They are not centrally involved in program development and decision making, but they still make a substantial contribution to the program and take on some of the tasks often associated with core faculty. Adjunct faculty are hired on an ad hoc basis to teach one or two courses, provide supervision, etc.

4. **Faculty Sufficiency**

- a. Consistent with the program's model, the 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, provide appropriate class sizes and sufficient course offerings to meet program goals and objectives, and monitor and evaluate practicum facilities, internship settings, and student progress.
- b. The program faculty, and in particular the core faculty, needs to be large enough to support student engagement and success within the program, from admissions, to matriculation, to timely completion of program requirements and graduation.
- c. At least one member of the core faculty needs to hold professional licensure as a psychologist to practice in the jurisdiction in which the program is located.
- d. The program faculty must themselves be engaged in activities demonstrating the skills they are endeavoring to teach their students, such as delivering psychological services, conducting psychological research, publishing scholarly work, presenting professional work at conferences/meetings, teaching classes/workshops, and supervising the professional work of others.

5. **Cultural and Individual Diversity of Faculty Members**

- a. **Recruitment of Diverse Faculty and Staff.** Each accredited program is responsible for making systematic, coherent, and long-term efforts to attract (i.e., recruit) and retain faculty/staff/supervisors from differing backgrounds. The program should demonstrate that it has developed a systematic, multiple-year plan to attract faculty and staff from a range of diverse backgrounds and implemented it when possible (i.e., when there have been faculty and staff openings). The program may participate in institutional-level initiatives aimed toward achieving diversity, but these alone are not sufficient. The program should document concrete actions it has taken to achieve diversity, addressing the areas of diversity recruitment in which it excels as well as the areas in which it is working to improve. It should demonstrate that it examines the effectiveness of its efforts to attract diverse faculty and staff and document any steps needed to revise/enhance its strategies.
- b. **Retention of Diverse Faculty and Staff.** The program should 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 aimed toward retaining diverse faculty and staff, but these alone are not sufficient. The program should demonstrate that it examines the effectiveness of its efforts to maintain diverse faculty and staff and document any steps needed to revise/enhance its strategies.

V. Communication Practices

A. Public Disclosure

1. General Disclosures

- a. The program demonstrates its commitment to public disclosure by providing clearly presented written materials and other communications that appropriately represent it to all relevant publics. At a minimum, this includes general program information pertaining to its aims, required curriculum sequence, and the expected outcomes in terms of its graduates' careers.
- b. The program must disclose its status with regard to accreditation, including the specific academic program covered by that status, and the name, address, and telephone number of the Commission on Accreditation. The program should make available, as appropriate through its sponsor institution, such reports or other materials as pertain to the program's accreditation status.

2. Communication With Prospective and Current Students

- a. All communications with potential students should be informative, accurate, and transparent.

- b. The program must be described accurately and completely in documents that are available to current students, prospective students, and other publics. This information should be presented in a manner that allows applicants to make informed decisions about entering the program. Program descriptions should be updated regularly as new cohorts begin and complete the program.
- c. Descriptions of the program should include information about its requirements for admission and graduation; tuition and other costs; curriculum; time to completion; faculty, students, facilities, and other resources, including distance learning technologies; administrative policies and procedures; the kinds of research, practicum, and internship experiences it provides; and its education and training outcomes.
 - i. If the program has criteria for selection that involve competence-based assessments (e.g., GRE subject tests), it must describe how those criteria are appropriate for the aims of the program, how the curriculum is structured in terms of students' initial assessed competency at entry to the program, and how the criteria maximize student success.
 - ii. If the program has broad entrance criteria (e.g., undergraduate or graduate GPA), it must address how students will be prepared for advanced education and training in psychology, how the curriculum is structured in accord with the goal of graduate-level competency, and how the criteria relative to the curriculum maximize student success.
- d. The program must provide reasonable notice to its current students of changes to its aims, curriculum, program resources, and administrative policies and procedures, as well as any other program transitions that may impact its educational quality.

3. Communication Between Doctoral and Doctoral Internship Programs

- a. Throughout the internship year, communication between the doctoral program and the internship should be maintained. This ongoing interaction can remain largely informal, depending on the needs of the program and the trainee. The doctoral program should initiate this contact at the start of the training year.
- b. Any formal, written internship evaluations must be retained in student files and used to evaluate the student competencies required for degree completion.

B. Communication and Relationship With the Accrediting Body

The program must demonstrate its commitment to the accreditation process through:

1. **Adherence.** The program must abide by the accrediting body's published policies and procedures as they pertain to its recognition as an accredited program. The program must respond in a complete and timely manner to all requests for communication from the accrediting body, including completing all required reports and responding to all questions.
 - a. **Standard Reporting.** The program must respond to regular, recurring information requests (e.g., annual reports and narrative reports) as required by the accrediting body's policies and procedures.
 - b. **Nonstandard Reporting.** The program must submit timely responses to information requests from the accrediting body.
 - c. **Fees.** The program must be in good standing with the accrediting body in terms of payment of fees associated with the maintenance of its accredited status.
2. **Communication.** The program must inform the accrediting body in a timely manner of changes in its environment, plans, resources, or operations that could alter the program's quality. This includes notification of any potential substantive changes in the program, such as changes in practice area or degree conferred or changes in faculty or administration.

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