

Office of Program Consultation and Accreditation  
American Psychological Association  
750 First St. NE  
Washington, DC 20002

June 27, 2022

Dear Colleagues,

The *Standards of Accreditation for Health Service Psychology* (SoA) outline training requirements for programs at the doctoral, doctoral internship, and postdoctoral levels. Correspondent to the SoA are the Implementing Regulations (IRs), which are official policy documents that “elucidate, interpret and operationally define” the Commission on Accreditation’s (CoA) policies and procedures. IRs are divided into several different sections (A through E), which are subject to regular review and revision by the CoA. Through this iterative process, opportunities for clarification have arisen regarding IRs in Section C, which relate specifically to the SoA.

Per the AOP 8.2(b) I and 8.2(b) P respectively, all programs that are accredited, on contingency must provide at least two cohorts of aggregated proximal data and at least one cohort of aggregated distal data in order to move to full accreditation status. IR C-26 I refers specifically to accredited, on contingency status for internship programs while IR C-22 P refers specifically to accredited, on contingency status for postdoctoral residency programs. Changes to these IRs include a clarification on the definition on accredited, on contingency status and an expansion on proximal and distal outcome data.

The *Accreditation Operating Procedures* (AOP) outline training requirements for doctoral, doctoral internship, and postdoctoral residency programs to be accredited by the American Psychological Association (APA). Correspondent to the SoA are the Implementing Regulations (IRs), which are official policy documents that “elucidate, interpret and operationally define” the APA Commission on Accreditation’s (CoA) policies and procedures. IRs are divided into several different sections (A through E), which are subject to regular review and revision by the CoA. Through this iterative process, opportunities for clarification have arisen regarding a Section of the AOP as well as an IR in Section D, which relates specifically to the AOP.

AOP Section 3.2.3 focuses on CoA Actions in response to complaints against site visitor(s). After discussion by the Complaints Work Group, the CoA has clarified other actions that the Complaint Work Group and CoA can take in response to a complaint and its review. New actions include providing guidance to the site visitors, requiring remediation, and removing the site visitor from the list of potential site visitors.

In accordance with the APA "Policies for Accreditation Governance" and U.S. Department of Education regulations for notice and comment, the CoA will make the proposed revisions available for a sixty (60) day period of public review and comment. The comment period is scheduled to begin at **5:00 pm Eastern Daylight Time on June 27, 2022 and will continue through 5:00pm Eastern Daylight Time on August 26, 2022.**

To promote thoughtful discussion, the CoA is providing an electronic-based form for public comment submission. Comments and other information including users' identities will be public, while email addresses used in the registration process will be kept confidential. The CoA will consider all comments received and make appropriate revisions should they be deemed necessary prior to approval of the final versions of the IRs.

Should you have any questions or concerns, please contact the Office of Program Consultation and Accreditation at (202) 336-5979 or [apaaccred@apa.org](mailto:apaaccred@apa.org). On behalf of the CoA, thank you for your review and comments.

**Public Comment: Changes in the CoA's Accredited on Contingency policy for internship programs (C-26 I)**

Per Section 8.2(b) I of the AOP, the CoA requires internship programs that are accredited on contingency to provide outcome data for trainees in the program and program graduates by the time two cohorts have completed the program in order to move to full accreditation. Changes to IR C-26 I include clarifications on the process and data required of a program moving from accredited, on contingency to full accreditation status.

## C-26 I. “Accredited, on Contingency”

(Commission on Accreditation, October 2015; revised for public comment April 2022)

"Accredited, on contingency" is an accredited status that reflects a program’s adherence to the Standards of Accreditation (SoA). Programs seeking “accredited, on contingency” status will be reviewed for adherence with all aspects of the SoA. Programs will be granted this status if the internship program sufficiently meets all standards with the exception of outcome data on interns while they are in the program and after program completion (see Accreditation Operating Procedures [AOP] 8.2(b) I). To move from contingent to full accreditation status, programs must provide at least two cohorts of aggregated proximal data and at least one cohort of aggregated distal data.

### Proximal Outcome Data

Proximal data are defined as outcomes on interns as they progress through and complete the program that are tied to the required profession-wide competencies and program specific competencies (if any). Proximal data at a minimum must include the evaluations of trainees by others responsible for their training, including mid-point and end-of-year evaluations, consistent with IR C-16 I. Proximal outcome data should be presented using basic descriptive statistics that allow for evaluation of whether all interns attained the requisite minimum levels of achievement before completing the program.

The program must provide aggregated proximal outcome data for at least two cohorts.

### Distal Outcome Data

Distal data are defined as outcomes on interns after they have completed the program that are tied to the profession-wide competencies and program specific competencies (if any). Consistent with IR C-16 I, distal data typically include information obtained from alumni surveys addressing former interns’ perceived assessments of the degree to which the program promoted mastery of profession wide competencies and program specific competencies (if any).

The program must provide aggregated distal outcome data for at least one cohort. If distal data are available for additional cohorts, those data must also be provided to the Commission for review.

Programs that already have both one year of proximal and one year of distal data are eligible to apply for full accreditation status (see AOP 8.2(c) I). Programs are encouraged to contact the Office of Program Consultation and Accreditation (OPCA) if they need guidance on whether they have sufficient data to apply for full accreditation.

### Process to Apply:

Programs may apply for "accredited, on contingency" status before ~~prior to~~ the arrival of interns on-site provided that interns will be on-site by the time of the site visit. Programs applying for “accredited, on contingency” status are not required to provide outcome data at the time of application, ~~though they must submit any proximal and distal data collected to date. If data are presented at the time of the site visit, the program must send a copy of these data to the CoA.~~

The internship program will submit a self-study detailing all SoA components except ~~a complete set of~~ outcome data. However, the self-study must include plans for how the program will evaluate proximal and distal outcomes required to demonstrate minimum levels of achievement in profession-wide competencies and program-specific competencies (if any).

### Components of the self-study submission for “accredited, on contingency”:

With the exception of the provision of ~~complete~~ outcome data (Standard II), each standard will be addressed with respect to the program's plans and policies to meet the requirements of the SoA. The program must submit its ~~evaluation plans and forms~~ to evaluate ~~proximal and distal intern~~ outcomes including associated evaluation forms for interns, and, when possible, provide existing outcome data.

**Term of “accredited, on contingency” status:**

The maximum amount of time an internship program ~~may can~~ be granted “accredited, on contingency” is two years for a program lasting one year, or four years for a program that is half-time for two years in duration. As an accrediting body recognized by the U.S. Department of Education, the Commission on Accreditation (CoA) cannot permit a program to hold “accredited, on contingency” status for more than five years [Section 602.16(a)(2) of the Criteria for Recognition by the U.S. Secretary of Education]. Under DoE regulations, by the end of this five-year window, programs that are accredited on contingency must either earn full accreditation or withdraw from accreditation. The program is advised to consider its timeline in light of requirements to apply for full accreditation status. To ~~apply for full~~ move from contingent to full accreditation status, programs must provide at least two cohorts of aggregated proximal data and at least one cohort of aggregated distal data.

Interns in the program as well as the public must be kept informed of any change in the program's timeline that could negatively impact accreditation. Such notice must include current information in all the program's public documents (e.g., website, brochure, APPIC Directory listing). Additionally, the program's public documents must refer all interested parties to the CoA website, where on which is maintained a current listing of accredited program statuses is maintained.

The program must publish the date that the outcome data are due to move from “accredited, on contingency” to full accreditation, as well as the consequences of not submitting data at that time in its public materials. Programs must provide the following statement for this notice:

In order to move from “contingent” to “full” accreditation status, the program must provide proximal and distal outcome data to the APA Commission on Accreditation (CoA) by <DATE>. If these data are not provided, the program will be deemed to have withdrawn once the interns currently on-site complete the program

**Moving from “accredited, on contingency” to full accreditation status:**

A program that is “accredited, on contingency” must submit proximal and distal outcome data by the time two cohorts have completed the program. Upon receipt, the CoA will review the data provided to determine whether they are sufficient to grant full accreditation. Contingent programs are eligible for up to three years of initial full accreditation following receipt of adequate and appropriate outcome data.

The program must present aggregated proximal and distal outcome data that are consistent with Implementing Regulation (IR) C-16 I: Outcome Data for Internship Programs. At a minimum, these data should include the cohort that was present during its initial application for accreditation and any subsequent cohorts. Depending on the length of time between the program's original self-study submission/site visit and the CoA's decision to grant “accreditation, on contingency” status, the initial cohort may or may not be the one present at the time the program received contingent accreditation. The program should still present proximal and distal data for that initial cohort, as well as all subsequent cohorts, when providing its outcome data for review to move to full accreditation status.

“Accredited, on contingency” programs that are inactive (i.e., did not accept interns) for one or more training year(s) are not relieved of the responsibility to submit outcome data by their designated due date. If a program is unable to provide two cohorts of proximal data and at least one cohort of distal data by the

designated due date, it must contact the Office of Program Consultation and Accreditation for further guidance on the submission of its outcome data.

In the event that a program does not provide required proximal and distal data at the end of two years (four years for 2-year, half-time programs), the program will be considered to have voluntarily withdrawn from accreditation. Consistent with 8.2(b)I of the AOP, “failure to do so [~~provide outcome data~~] will lead to the program’s being deemed to have withdrawn from accreditation, following completion of the program by the interns currently on-site at the program.” That is, if the program is deemed to have voluntarily withdrawn from accreditation, interns in the program at the time will have completed an accredited program (when its status was “Accredited, on contingency” only). Programs that submit proximal and distal data will be eligible for an additional three years as a “fully accredited” program.

**Public Comment: Changes in the CoA's Accredited on Contingency policy for postdoctoral residency programs (C-22 P)**

Per Section 8.2(b) P of the AOP, the CoA requires postdoctoral residency programs that are accredited on contingency to provide outcome data for trainees in the program and program graduates by the time two cohorts have completed the program in order to move to full accreditation. Changes to IR C-22 P include clarifications on the process and data required of a program moving from accredited, on contingency to full accreditation status.

## **C-22 P. “Accredited, on Contingency”**

(Commission on Accreditation, October 2015; revised for public comment April 2022)

"Accredited, on contingency" is an accredited status, that reflects a program’s adherence to the Standards of Accreditation (SoA). Programs seeking “accredited, on contingency” status will be reviewed for adherence with all aspects of the SoA. Programs will be granted this status if the postdoctoral residency program sufficiently meets all standards with the exception of outcome data on residents while they are in the program and after program completion (see Accreditation Operating Procedures [AOP] 8.2(b) P). To move from contingent to full accreditation, programs must provide at least two cohorts of aggregated proximal data and at least one cohort of aggregated distal data.

### **Proximal Outcome Data**

Proximal data are defined as outcomes on residents as they progress through and complete the program, which are tied to the required profession-wide competencies, program specific competencies (if any), and specialty area competencies (if applicable). Proximal data at a minimum must include the evaluations of trainees by others responsible for their training, including mid-point and end-of-year evaluations, consistent with IR C-16 P. Proximal outcome data should be presented using basic descriptive statistics that allow for evaluation of whether all residents attained the requisite minimum levels of achievement prior to completing the program.

The program must provide aggregated proximal outcome data for at least two cohorts.

### **Distal Outcome Data**

Distal data are defined as outcomes on residents after they have completed the program, which are tied to the profession-wide competencies, program specific competencies (if any), and specialty competencies (if applicable). Consistent with IR C-16 P, distal data typically include information obtained from alumni surveys addressing former residents’ perceived assessments of the degree to which the program promoted mastery of profession wide competencies, program specific competencies (if any), and specialty area competencies (if applicable).

The program must provide aggregated distal outcome data for at least one cohort. If distal data are available for additional cohorts, those data must also be provided to the Commission for review.

Programs that already have both one cohort of proximal and one cohort of distal data are eligible to apply for full accreditation (see AOP 8.2 (c) P). Programs are encouraged to contact the Office of Program Consultation and Accreditation (OPCA) if they need guidance on whether they have sufficient data to apply for full accreditation.

### **Process to Apply:**

Programs may apply for "accredited, on contingency" status before prior to the arrival of residents on site provided that residents will be on site by the time of the site visit. Programs applying for “accredited, on contingency” status are not required to provide outcome data at the time of application, ~~though they must submit any proximal and distal data collected to date. If data are presented at the time of the site visit, the program must send a copy of these data to the CoA.~~

The postdoctoral program will submit a self-study detailing all SoA components except ~~a complete set of~~ outcome data. However, the self-study must include plans for how the program will evaluate proximal and distal outcomes required to demonstrate minimum levels of achievement in profession-wide competencies, program-specific competencies (if any), and specialty competencies (if applicable).

### **Components of the self-study submission for “accredited, on contingency”:**

With the exception of the provision of ~~complete~~ outcome data (Standard II), each standard will be addressed with respect to the program's plans and policies to meet the requirements of the SoA. The program must submit its ~~evaluation plans and forms~~ to evaluate proximal and distal resident outcomes including associated evaluation forms for residents, and when possible, provide existing outcome data.

**Term of “accredited, on contingency” status:**

The maximum amount of time a postdoctoral program ~~may can~~ be granted “accredited, on contingency” is two years for a program lasting one year, or four years for a program that is more than one year in duration. As an accrediting body recognized by the U.S. Department of Education, the Commission on Accreditation (CoA) cannot permit a program to hold “accredited, on contingency” status for more than five years [Section 602.16(a)(2) of the Criteria for Recognition by the U.S. Secretary of Education]. Under DoE regulations, by the end of this five-year window, programs that are accredited on contingency must either earn full accreditation or withdraw from accreditation. The program is advised to consider its timeline in light of requirements to apply for full accreditation status. To ~~apply for move from contingent to~~ full accreditation status, programs must provide at least two cohorts of aggregated proximal data and at least one cohort of aggregated distal data.

Residents in the program as well as the public must be kept informed of any change in the program's timeline that could negatively impact accreditation. Such notice must include current information ~~on~~ in all the program's public documents (e.g., brochure, APPIC Directory listing). Additionally, the program's public documents must refer all interested parties to the CoA website, where on which is maintained a current listing of accredited program statuses is maintained.

~~The program must publish the date of expiration of the status in its public materials. The program must publish the date that the outcome data are due to move from “accredited, on contingency” to full accreditation, as well as the consequences of not submitting data at that time in its public materials. Programs must provide the following statement for this notice:~~

In order to move from “contingent” to “full” accreditation status, the program must provide proximal and distal outcome data to the APA Commission on Accreditation (CoA) by <DATE>. If these data are not provided, the program will be deemed to have withdrawn once the residents currently on-site complete the program

**Moving from “accredited, on contingency” status to full accreditation:**

A program that is “accredited, on contingency” must submit proximal and distal outcome data by the time two cohorts have completed the program. Upon receipt, the CoA will review the data provided to determine whether they are sufficient to grant full accreditation. Contingent programs are eligible for up to three years of initial full accreditation following receipt of adequate and appropriate outcome data.

The program must present aggregated proximal and distal outcome data that are consistent with Implementing Regulation (IR) C-16 P: Outcome Data for Postdoctoral Residency Programs. At a minimum, these data should include the cohort that was present during its initial application for accreditation and any subsequent cohorts. Depending on the length of time between the program's original self-study submission/site visit and the CoA's decision to grant “accreditation, on contingency,” that initial cohort may or may not be the one present at the time the program received accreditation. The program should still present proximal and distal data for that initial cohort, as well as all subsequent cohorts, when providing its outcome data for review to move to full accreditation.

“Accredited, on contingency” programs that are inactive (i.e., did not accept residents) for one or more training year(s) are not relieved of the responsibility to submit outcome data by their designated due date. If a program is unable to provide two cohorts of proximal data and at least one cohort of distal data by the designated due date, it must contact the Office of Program Consultation and Accreditation for further guidance on the submission of its outcome data.

In the event that a program does not provide required proximal and distal data at the end of two years for a one-year program or at the end of four years for a program that is more than one year in duration, the program will be considered to have voluntarily withdrawn from accreditation. Consistent with 8.2(b)P of the AOP, “failure to do so [~~provide outcome data~~] will lead to the program’s being deemed to have withdrawn from accreditation, following completion of the program by the residents currently on-site at the program.” That is, if the program is deemed to have voluntarily withdrawn from accreditation, residents in the program at the time will have completed an accredited program (when its status was “Accredited, on contingency” only). Programs that submit proximal and distal data will be eligible for an additional three years as a “fully accredited” program.

**Public Comment: Changes in the CoA's response to complaints against an accreditation site visitor (AOP 3.2)**

The CoA has clarified other actions that the Complaint Work Group and CoA can take in response to a complaint against a site visitor and its review. New actions include providing guidance to the site visitors, requiring remediation, and removing the site visitor from the list of potential site visitors. As the CoA practice utilizes these options, this change is a way to formalize the procedure.

## Accreditation Operating Procedures (AOP)

### **3.2 Complaint Against Accreditation Site Visitor(s)**

The procedures for handling complaints against site visitors are intended to deal with complaints based on purported inappropriate actions of site visitors related to the site visit.

#### **3.2.1 Filing a Complaint**

The director of training of a program, with notice to the chief executive officer of a doctoral program's host institution or the responsible administrative officer of an internship or postdoctoral residency program, may file a complaint regarding the actions of site visitors. The director of training must notify the Office of Program Consultation and Accreditation of the institution's or program's intent to file a complaint within 30 days after the completion of the site visit. Subsequently, the complaint must:

- (a) Be written and signed;
- (b) Be sent to the Office of Program Consultation and Accreditation before the host institution has received the written report from the site visit team and within 30 days after completion of the site visit;
- (c) Provide a clear description of the critical incident(s) in question; and
- (d) Grant permission to send the complaint, in its entirety, to the site visit team.

#### **3.2.2 Processing of a Complaint**

Receipt of a complaint meeting these requirements will be acknowledged by the Office of Program Consultation and Accreditation and held until the site visit team's report is received by the Office. The complaint will be sent to all members of the site visit team with request for comment within 30 days. At the same time, the site visit report will be sent to the program for comment. The program will be asked to explain in its response whether and how the complained of conduct may have influenced the content of the site visit report.

### 3.2.3 CoA Action

In no case will the CoA decision regarding the program's consistency with the SoA be made until the complaint has been disposed of by the CoA. Based upon its review of the complaint and the site visitor's response from the site visitor team, the CoA may make the following decisions:

- (a) Dismiss the complaint;
- (b) Pursue the matter further, either by further inquiry of the parties involved or by means of a special fact-finding sub-commission of the CoA, to provide additional information upon which to base a decision; or
- ~~(c) Take some form of action— one or more of the following actions in regard to the site visitor~~
  - (1) Provide guidance to site visitor
  - (2) Require some form of remediation (e.g., additional site visitor training)
  - (3) Reprimand the site visitor(s).

~~which may include~~

- (4) Removal deletion from the list of potential site visitors maintained in the Office of Program Consultation and Accreditation ~~pursued~~ pursued;
- ~~(c) Pursue the matter further, either by further inquiry of the parties involved or by means of a special fact-finding sub-commission of the CoA, to provide additional information upon which to base a decision; or~~
- (d) Take other action as, in the judgment of the CoA, is appropriate under the circumstances.

After acting on the complaint, the CoA must then determine whether the critical incident(s) influenced the content of the site visit report. If the incident is determined to have influenced the site visit report, the CoA will void the site visit report and request from the host institution an invitation to revisit at APA expense. If the incident is determined not to have influenced the site visit report, the CoA will proceed with its review of the program.

The CoA will communicate the disposition of the complaint, in writing, to the program and to the site visitors.