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

July 16th, 2018

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, and Section C IRs are those which relate specifically to the SoA.

The SoA and the associated Section C IRs are subject to regular review and revision by the CoA. Through this iterative process, opportunities for clarification have arisen regarding four (4) IRs. Three (3) of the IRs relate to recruitment and retention of diverse individuals at all levels of training, including doctoral programs (IR C-21 D), doctoral internships (IR C-19 I), and postdoctoral residencies (IR C-6 P). The remaining regulation is IR C-29 D, which focuses on initial accreditation for doctoral programs.

In accordance with the APA "Policies for Accreditation Governance" and US Department of Education regulations for notice and comment, the CoA will make the proposed revisions available for a ninety (90) day period of public review and comment. The comment period is scheduled to begin at **5:00 pm Eastern Daylight Time on July 16th, 2018 and will continue through 5:00pm Eastern Daylight Time on October 14th, 2018**.

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:

Office of Program Consultation and Accreditation
Phone: (202) 336-5979
Email address: apaaccred@apa.org
Website: http://www.apa.org/ed/accreditation

On behalf of the CoA, thank you for your review and comments.

C-21 D. Diversity Recruitment and Retention

(formerly C-22; Commission on Accreditation, November 2009; revised March 2013, November 2015; revised for public comment, April 2018)

The Standards of Accreditation (SoA) state that five principles, one of which is a commitment to cultural and individual diversity, "guide accreditation decisions, such that programs whose policies and procedures violate them would not be accredited." Furthermore, the Commission "is committed to a broad definition of cultural and individual differences and diversity that includes, but is not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status (SoA, p. 3)."

Diversity is essential to science and quality education and training in Health Service Psychology. The goals of diversity recruitment and retention include, but are not limited to, creating and maintaining inclusive environments and improving access to quality education and training. An inclusive environment is one in which the program creates an atmosphere that is welcoming, respectful and affirming of students', and faculty members' multiple identities.

In accordance with Standards I.B.2, III.A.1.b.i-ii and IV.B.5 of the Standards of Accreditation (SoA) for doctoral programs, an accredited doctoral program is responsible for making systematic, coherent, and long-term efforts to 1) attract (i.e., recruit) and 2) retain diverse students and faculty into the program. In addition, the *program* is responsible for assessing the effectiveness of both its recruitment and retention efforts, and identifying areas of improvement. For both recruitment and retention of students and faculty, the *program* must provide *program*-level efforts and activities, in addition to any institutional, departmental, or other unit activities that are used. *Programs* are expected to seek and utilize generally accepted best practices in the field regarding recruitment and retention of diverse individuals.

In planning for the recruitment and retention of diverse individuals, accredited programs should consider the following:
- A program may include institutional-level initiatives addressing diversity, but these, in and of themselves, are not considered sufficient.
- The lack of faculty openings, or having existing faculty with strong representation of diversity, does not exempt the program from the responsibility of having a systematic, multi-year plan in place.
- Similarly, having an existing student body with strong representation of diversity does not exempt the program from the responsibility of having a systematic, multi-year plan in place.
- The demographic information about faculty and students in the tables of the self-study and annual report is not sufficient to demonstrate a program's compliance with Standards I.B.2, III.A.1.b.i-ii, and IV.B.5.

Recruitment

The program is expected to document that it has developed and implemented a systematic plan to recruit both students and faculty from diverse backgrounds.

Students

An accredited doctoral program should document and report in its self-study:

- that it has developed a systematic, multi-year, and multiple effort plan, implemented and sustained over time, to attract students from a range of diverse identities;
- the concrete and specific program-level activities, approaches, and initiatives it implements to increase diversity among its students;
- the areas of diversity recruitment in which it has had success, as well as the areas of diversity recruitment it is working to improve, recognizing the broad definition of diversity, and;
- how it examines the effectiveness of its efforts to attract diverse students, and the steps it has taken to revise/enhance its strategies.

Faculty

An accredited doctoral program should demonstrate and report in its self-study:
- that it has developed a systematic, multi-year, and multiple effort plan, implemented and sustained over time, to attract faculty from a range of diverse identities (i.e., when there are faculty openings);
- the concrete and specific program-level activities, approaches, and initiatives it implements to increase diversity among its faculty;
- the areas of diversity recruitment in which it has had success, as well as the areas of diversity recruitment it is working to improve, recognizing the broad definition of diversity, and;
- how it examines the effectiveness of its efforts to attract diverse faculty, and the steps it has taken to revise/enhance its strategies.

Retention

The program is expected to document that it has developed and implemented a systematic plan to retain both students and faculty from diverse backgrounds.

Doctoral students

An accredited doctoral program is expected to describe in its self-study:
- the specific activities, approaches and initiatives it implements to maintain diversity among its students and ensure a supportive and inclusive environment for all students;
- concrete program-level actions to retain diverse students;
- how these efforts are broadly integrated across key aspects of the program;
- how the program examines the effectiveness of its efforts to retain diverse students, and the steps it has taken as needed to revise and/or enhance its retention strategies.

Faculty

An accredited doctoral program is expected to describe in its self-study:
- the specific activities, approaches, and initiatives it implements to maintain diversity among its faculty and ensure a supportive and inclusive work environment for its diverse faculty members.
- how the program examines the effectiveness of its efforts to maintain diversity among its faculty, and the steps it has taken to revise/enhance its strategies as needed.

C-19 I. Diversity Recruitment and Retention

(formerly C-22; Commission on Accreditation, November 2009; revised March 2013; revised for public comment, April 2018)

The Standards of Accreditation (SoA) state that that five principles, one of which is a commitment to cultural and individual diversity, "guide accreditation decisions, such that programs whose policies and procedures violate them would not be accredited." Furthermore, the Commission "is committed to a broad definition of cultural and individual differences and diversity that includes, but is not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status (SoA, p. 3)."

Diversity is essential to science and quality education in Health Service Psychology. The goals of diversity recruitment and retention include, but are not limited to, creating and maintaining inclusive environments and improving access to quality education and training. An inclusive environment is one in which the program creates an atmosphere that is welcoming, respectful and affirming of interns' and faculty/staff members' multiple identities.

In accordance with Standards I.B.3, III.A.2.a and IV.B. of the Standards of Accreditation (SoA) for internship programs, an accredited internship program is responsible for making systematic, coherent, and long-term efforts to 1) attract (i.e., recruit) diverse interns and faculty/staff as well as, 2) retain diverse faculty/staff into the program. In addition, the *program* is responsible for assessing the effectiveness of both its recruitment and retention efforts and identifying areas of improvement. For both recruitment and retention, the *program* must provide *program*-level efforts and activities, in addition to any institutional, departmental, or other unit activities that are used. *Programs* are expected to seek and utilize generally accepted best practices in the field regarding recruitment and retention of diverse individuals.

In planning for the recruitment and retention of diverse individuals, accredited programs should consider the following:
- A program may include institutional-level initiatives addressing diversity, but these, in and of themselves, are not considered sufficient.
- The lack of faculty/staff openings or having existing faculty/staff with strong representation of diversity, does not exempt the program from the responsibility of having a systematic, multi-year plan in place.
- Similarly, having an existing intern group with strong representation of diversity does not exempt the program from the responsibility of having a systematic, multi-year plan in place.
- The demographic information about faculty/staff and interns in the tables of the self-study and annual report is not sufficient to demonstrate a program's compliance with Standards I.B.3., III.A.2.a and IV.B.

Recruitment
The program is expected to document that it has developed and implemented a systematic plan to recruit both interns and faculty/staff from diverse backgrounds.

Interns
An accredited internship program should document and report in its self-study:

- that it has developed a systematic, multi-year, and multiple effort plan, implemented and sustained over time, to attract interns from a range of diverse identities;
- the concrete and specific program-level activities, approaches, and initiatives it implements to increase diversity among its interns;
- the areas of diversity recruitment in which it has had success, as well as the areas of diversity recruitment it is working to improve, recognizing the broad definition of diversity, and;
- how it examines the effectiveness of its efforts to attract diverse interns, and the steps it has taken to revise/enhance its strategies.

Faculty/Staff
An accredited internship program should demonstrate and report in its self-study:
- that it has developed a systematic, multi-year, and multiple effort plan, implemented and sustained over time, to attract faculty/staff from a range of diverse identities (i.e., when there are faculty/staff openings);
- the concrete and specific program-level activities, approaches, and initiatives it implements to increase diversity among its faculty/staff;
- the areas of diversity recruitment in which it has had success, as well as the areas of diversity recruitment it is working to improve, recognizing the broad definition of diversity, and;
- how it examines the effectiveness of its efforts to attract diverse faculty/staff, and the steps it has taken to revise/enhance its strategies.

Retention

The program is expected to document that it has developed and implemented a systematic plan to retain faculty/staff from diverse backgrounds.

Faculty/Staff
An accredited internship program is expected to describe in its self-study:
- the specific activities, approaches, and initiatives it implements to maintain diversity among its faculty/staff and ensure a supportive and inclusive work environment for its diverse faculty/staff members.
- how the program examines the effectiveness of its efforts to maintain diversity among its faculty/staff, and the steps it has taken to revise/enhance its strategies as needed.

C-6 P. Diversity Recruitment and Retention

(formerly C-22; Commission on Accreditation, November 2009; revised March 2013; November 2015, revised for public comment, April 2018)

The Standards of Accreditation (SoA) state that that five principles, one of which is a commitment to cultural and individual diversity, "guide accreditation decisions, such that programs whose policies and procedures violate them would not be accredited." Furthermore, the Commission "is committed to a broad definition of cultural and individual differences and diversity that includes, but is not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status (SoA, p. 3)."

Diversity is essential to science and quality education in Health Service Psychology. The goals of diversity recruitment and retention include, but are not limited to, creating and maintaining inclusive environments and improving access to quality education and training. An inclusive environment is one in which the program creates an atmosphere that is welcoming, respectful and affirming of residents' and faculty/staff members' multiple identities.

In accordance with Standards I.B.3, III.A.3 and IV.B.2 of the Standards of Accreditation (SoA) for postdoctoral programs, an accredited postdoctoral program is responsible for making systematic, coherent, and long-term efforts to 1) attract (i.e., recruit) as well as, 2) retain diverse residents and faculty/staff into the program. In addition, the *program* is responsible for assessing the effectiveness of both its recruitment and retention efforts, and identifying areas of improvement. For both recruitment and retention, the *program* must provide *program*-level efforts and activities, in addition to any institutional, departmental, or other unit activities that are used. *Programs* are expected to seek and utilize generally accepted best practices in the field regarding recruitment and retention of diverse individuals.

In planning for the recruitment and retention of diverse individuals, accredited programs should consider the following:
- A program may include institutional-level initiatives addressing diversity, but these, in and of themselves, are not considered sufficient.
- The lack of faculty/staff openings or having existing faculty/staff with strong representation of diversity, does not exempt the program from the responsibility of having a systematic, multi-year plan in place.
- Similarly, having an existing resident group with strong representation of diversity does not exempt the program from the responsibility of having a systematic, multi-year plan in place.
- The demographic information about faculty/staff and residents in the tables of the self-study and annual report is not sufficient to demonstrate a program's compliance with Standards I.B.3., III.A.3 and IV.B.2.

Recruitment
The program is expected to document that it has developed and implemented a systematic plan to recruit both residents and faculty/staff from diverse backgrounds.

Residents
An accredited postdoctoral program should document and report in its self-study:

- that it has developed a systematic, multi-year, and multiple effort plan, implemented and sustained over time, to attract residents from a range of diverse identities;
- the concrete and specific program-level activities, approaches, and initiatives it implements to increase diversity among its residents;
- the areas of diversity recruitment in which it has had success, as well as the areas of diversity recruitment it is working to improve, recognizing the broad definition of diversity, and;
- how it examines the effectiveness of its efforts to attract diverse residents, and the steps it has taken to revise/enhance its strategies.

Faculty/Staff

An accredited postdoctoral program should demonstrate and report in its self-study:
- that it has developed a systematic, multi-year, and multiple effort plan, implemented and sustained over time, to attract faculty/staff from a range of diverse identities (i.e., when there are faculty/staff openings);
- the concrete and specific program-level activities, approaches, and initiatives it implements to increase diversity among its faculty/staff;
- the areas of diversity recruitment in which it has had success, as well as the areas of diversity recruitment it is working to improve, recognizing the broad definition of diversity, and;
- how it examines the effectiveness of its efforts to attract diverse faculty/staff, and the steps it has taken to revise/enhance its strategies.

Retention

The program is expected to document that it has developed and implemented a systematic plan to retain residents and faculty/staff from diverse backgrounds.

Residents

An accredited postdoctoral program is expected to describe in its self-study:
- the specific activities, approaches and initiatives it implements to maintain diversity among its residents and ensure a supportive and inclusive environment for all residents;
- concrete program-level actions to retain diverse residents;
- how these efforts are broadly integrated across key aspects of the program;
- how the program examines the effectiveness of its efforts to retain diverse residents, and the steps it has taken as needed to revise and/or enhance its retention strategies.

Faculty/Staff

An accredited postdoctoral program is expected to describe in its self-study:
- the specific activities, approaches, and initiatives it implements to maintain diversity among its faculty/staff and ensure a supportive and inclusive work environment for its diverse faculty/staff members.
- how the program examines the effectiveness of its efforts to maintain diversity among its faculty/staff, and the steps it has taken to revise/enhance its strategies as needed.

There are two processes by which an unaccredited doctoral program may apply for initial accreditation: 1) apply first for "accredited, on contingency" status and later for full accreditation or 2) apply directly for full accreditation.

Accredited, On Contingency

> *Doctoral programs seeking "accredited, on contingency" must be reviewed on all aspects of the SoA, which involves submission of a self-study and a site visit. "Accredited, on contingency" is granted to a doctoral program when the program demonstrates initial evidence of educational quality consistent with the SoA and the capacity to meet all accreditation standards in the designated time frame." (AOP 6.1D)*

Initial Application for "Accredited, On Contingency"

Timeline:

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*]. By the end of this five-year window, programs that are accredited on contingency must either earn full accreditation or withdraw from accreditation. Therefore, doctoral programs seeking "accreditation, on contingency" status are advised to carefully consider the complete timeline and eligibility criteria required to achieve both "accredited, on contingency" status and ultimately full accreditation status, as described below. Programs are strongly advised to consult with the Office of Program Consultation and Accreditation prior to applying for "accredited, on contingency" status, in order to ensure that they understand all requirements for this two-part sequence of applications for full accreditation.

It is mandatory that the program be ready to apply for full accreditation within 3 years of obtaining the "accredited, on contingency" status, to ensure that full accreditation may be attained within 5 years of initial accreditation. If the application for full accreditation is not submitted within 3 years of the "accredited, on contingency" status being awarded; or if the program is denied full accreditation; or if full accreditation is not granted by CoA within 5 years of the program entering "accredited, on contingency" status, the program will be deemed to have withdrawn from accreditation.

A program that is accredited on contingency is an APA-accredited program, and students whose doctoral graduation date falls during the period that this accreditation status is in place will be deemed to have graduated from an accredited program. Because of the time-limited nature of the "accredited, on contingency" status, students in the program and the public must be kept informed of any change in the program's timeline that could negatively impact full accreditation. In addition, the program must publish the date of expiration of the "accredited, on contingency" status in its public materials by stating, "The program is accredited, on contingency through the following date: _____."

Process to Apply:

Eligibility
A doctoral program is eligible to submit a self-study to attain "accredited, on contingency" status after it has enrolled a minimum of two student cohorts, one of which must be engaged in practicum training. These two cohorts must be enrolled in two different academic years, rather than in two different semesters or quarters within the same academic year. At a minimum, aggregated proximal evaluation data (described in IR C-18D) for one practicum term must be provided by the time of the site visit. Should the program not have aggregated proximal evaluations for at least one practicum term by the time of the site visit, the program will be ineligible for "accredited, on contingency" status. If these proximal data are presented solely at the time of the site visit, rather than in the original self-study, the program is required to provide a copy of the outcome data to both the site visitors and the CoA. In the event that the program has already collected proximal and distal data for discipline-specific knowledge (DSK), profession-wide competencies, and program-specific competencies, those data must be submitted with the self-study, in accordance with the instruction in Implementing Regulation (IR) C-18 D. See below for more information on the self-study submission.

The Self-Study
The program applying for "accredited, on contingency" status must submit a self-study that is complete in all ways, with the exception of the proximal and distal outcome data required under Standard II.D.1 and IR C-18 D.

For any outcome data that are not yet available, the self-study must include plans for how the program will collect and evaluate future proximal and distal outcomes required to demonstrate minimum levels of achievement in DSK, profession-wide and program-specific competencies (if any). In summary, the program is to submit all outcome data that are available at the time of the self-study, proximal practicum data (at the site visit or in the self-study), and plans and methods for complete future proximal and distal outcome data collection, as described in IR C-18 D (including samples of data collection tools as well as the methods by which data will be collected).

With the exception of the provision of complete outcome data (Standard II), each standard will be addressed with respect to the program's plans, policies, and procedures to meet the requirements of the SoA. At this stage, the program must submit syllabi for any required courses or evaluated learning experiences, including those that have not yet been offered. In the case of required courses or evaluated learning experiences that have not yet been taught, the instructor may be listed as 'to be determined'; however, the program must provide a plan to demonstrate how it will ensure that a qualified instructor will be identified to teach the given course, consistent with IR C-23 D (Faculty Qualifications). The program must describe faculty sufficiency to effectively administer the program as it exists at time of submission. In addition, the program must describe the plans for ensuring faculty sufficiency as the program grows to include students at all levels of matriculation and to meet the full implementation of the curriculum plan.

Within three years of being granted "accredited, on contingency" status, the program is required to provide an application for full accreditation, as described below.

Fully Accredited

> *Accredited (or "fully accredited") designates a program that, in the professional judgement of the CoA, is consistent, substantively and procedurally, with the SoA.*

Initial Application for Full Accreditation

Timeline:

<u>Contingent to full</u>
Programs accredited on contingency must meet all of the deadlines and criteria described below to apply for full accreditation. As described more fully above, a program that has not been granted full accreditation within five years of being accredited on contingency will be deemed to have withdrawn from accreditation. To be eligible for full accreditation, the program must provide a new self-study, including proximal and distal outcome data, and have a second site visit, so that the Commission has complete materials on which to base an accreditation decision (See AOP Section 6.1 D).

<u>Full (without previous "contingency" status)</u>
A doctoral program may apply for review of its initial application for full accreditation when it meets all basic eligibility requirements below and the self-study is complete in all respects.

Process to Apply:

<u>Eligibility</u>
Programs applying for initial full accreditation, with or without previous "accreditation, on contingency" status, are required to have an identifiable body of students at all levels of matriculation, including at least one program graduate.

<u>The Self-Study</u>
The program is required to submit a complete self-study that demonstrates compliance with all aspects of the SoA, including both proximal and distal outcome data (see IR C-18 D). Per the SoA, programs must provide distal evidence of students' competencies and program effectiveness (Standard II.D.1.b). Note that in order to meet this requirement, a program must have at least one program graduate when it applies for full accreditation. Per IR C-18D, accredited programs are required to collect distal data from program graduates when they are 2 years and 5 years post graduation. Programs are permitted to collect distal data at additional time points if they choose. The use of more immediate distal data for the application for full accreditation does not relieve the program of the responsibility to collect 2-year and 5-year distal data from program graduates once alumni have reached the 2- and 5-year marks. All programs are required to describe the process by which they will collect the required 2- and 5-year data and to provide all evaluation tools by which they will accomplish this data collection. It is permissible for programs to wait until the site visit to provide distal outcome data. If the distal data do not appear in the self-study, the program is responsible for providing these outcome data to both the site visitors and the CoA. If distal outcome data are not provided by the time of the site visit, the program will not be eligible for full accreditation.