

Standards of Accreditation in Health Service Psychology: Postdoctoral Residency

I. Institutional and Program Context

A. Type of Program

1. **Accreditation.** Programs providing training in health service psychology (HSP) may be accredited in one or more areas:
 - a. Advanced competencies in health service psychology in the traditional areas of clinical, counseling, school, or some combination thereof.
 - b. A content area of emphasis or a recognized proficiency in health service psychology that promotes attainment of advanced competencies.
 - c. Specialty practice areas in health service psychology. If accreditation is sought in a recognized specialty practice area, the substantive specialty practice area must meet at least two of the following requirements:
 - i. The specialty is recognized as a specialty by the Commission on the Recognition of Specialties and Proficiencies in Professional Psychology (CRSPPP) of the American Psychological Association or by the American Board of Professional Psychology.
 - ii. The specialty is recognized by and holds membership on the Council of Specialties.
 - iii. The specialty has provided the Commission on Accreditation with specialty-specific postdoctoral educational and training guidelines endorsed by the Council of Specialties.
2. **Length of Program.** Each resident must complete a minimum of 1 year of full-time training in no less than 12 months (10 months for school psychology postdoctoral training programs), or 2 years of half-time training in no more than 24 months. Substantive traditional practice area residencies may consist of up to 3 years of full-time training. Specialty practice residencies may require longer training periods.
3. **Direct Service Delivery.** This is an essential element of training that promotes advanced HSP competencies. Programs must

allocate sufficient time to various training activities promoting the development of advanced competencies (e.g., direct service, didactics, supervision, and research). Programs that require substantial research activities must demonstrate how these research activities are directly related to HSP service delivery competencies and how the program ensures all residents attain the required HSP competencies at an advanced level.

4. **Learning. Learning must take precedence over service delivery.** The program must demonstrate that residents' service delivery activities are primarily learning-oriented and that training considerations take precedence over service needs and revenue generation.

B. Institutional and Program Setting and Resources

1. **Training Setting.** The setting must be appropriate for the program's aims and the development of residents' advanced competencies. Resources to support training must be sufficient to meet the program's aims and various expected learning outcomes. The service population must be appropriate and sufficient to meet the direct service activities that foster development of advanced competencies.
2. **Administrative Structure**
 - a. The program's aims are consistent with the mission of the larger institution in which it resides, and it is represented in the institution's operating budget and plans in a manner that enables the program to achieve its aims.
 - b. The program has a documented administrative structure and processes in place to systematically coordinate, control, direct, and organize its training activities and resources. The program has responsibility for recruitment, selection, evaluation, and termination of residents, as well as program content.
 - c. A postdoctoral training program may consist of, or be located under, a single administrative entity (e.g., institution, agency, school, or department) or may take the form of a consortium.
3. **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 residents 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' diverse higher education landscape, training can take place in both secular and faith-based settings. 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. Programs must provide public notice to applicants, residents, 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.

4. Funding and Budget Sources

- a. Programs must have stable and sufficient funding to conduct the training necessary to meet their aims.
- b. All postdoctoral residents must be financially supported at a level consistent with that afforded comparable doctoral-level professionals training at the same site or in the region.

5. Training Resources and Support Services

- a. The program provides sufficient and appropriate resources to fulfill the aims of the program (e.g., office space, supplies, computers, clerical support, library, and test equipment).
- b. These resources and facilities must be ADA-compliant.

C. Policies and Procedures

1. Administrative

a. Resident Recruitment and Selection

- i. The program has procedures for resident selection that ensure residents are appropriately prepared for the training offered.
- ii. If residents have not graduated from APA-accredited doctoral and internship programs, the program must describe how the residency program ensures that selected residents are otherwise qualified and appropriately prepared for advanced training.

b. Policies and Procedures. The program adheres to, and makes available to all interested parties, formal written policies and procedures that govern:

- i. resident selection,
- ii. internship and academic preparation requirements,
- iii. administrative and financial assistance,
- iv. requirements for successful resident performance (including expected competencies and minimal levels of achievement for completion),
- v. resident performance evaluation and feedback,
- vi. processes for identification and remediation of insufficient competence and/or problematic behavior,
- vii. grievance redress for residents,
- viii. supervision requirements.

- c. **Diversity of Staff and Residents.** The host institution and residency program each maintain a nondiscrimination policy to ensure equal access to all qualified individuals.
- d. **Resident Evaluation.** Residents must receive, at least semiannually, written feedback on the extent to which they are meeting stipulated performance requirements.
 - i. Feedback is linked to the program's expected competencies and minimal levels of achievement.
 - ii. An initial written evaluation is provided early in training to serve as the basis for self-correction.
 - iii. A written evaluation is provided at the conclusion of training.
 - iv. Residents are afforded the opportunity to discuss the evaluation, including any areas of problematic performance that are noted, and are advised regarding the steps necessary to remedy problem areas (if remediable).
 - v. Substantive written feedback regarding the extent to which corrective actions are or are not successful in addressing identified performance problems is provided.
 - vi. Verification that each evaluation has been discussed by the resident and supervisor is provided.
 - vii. In all matters relevant to the evaluation of residents' performance, programs must adhere to their sponsor institution's policies and local, state, and federal statutes regarding due process and fair treatment.
- e. **Record Keeping.** The program documents and permanently maintains accurate records of the residents' supervised training experiences and evaluations for future reference, certification, licensing, and credentialing purposes.

2. **Insufficient Competence and Grievance Policies**

- a. The program adheres to, and makes available to all interested parties, formal written policies and procedures that govern:
 - i. grievance redress for residents;
 - ii. evaluation of resident performance and remediation and termination processes.

- b. Each program is responsible for confidentially maintaining records of all formal complaints and grievances against the program 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. The Commission on Accreditation will examine a program's records of student complaints as part of its periodic review of the program.

D. Program Climate

1. **Diversity.** The program ensures a welcoming, supportive, and encouraging learning environment for all residents, including residents from diverse and underrepresented communities.
 - a. Program climate is reflected in the recruitment, retention, and development of training supervisors and residents, as well as in didactic and experiential training that fosters an understanding of cultural and individual diversity as it relates to professional psychology.
 - b. The program conducts periodic self-assessment of its training climate in regards to diversity and takes steps to maintain an atmosphere that promotes the success of all residents.
2. **Resident/Faculty Relationship Climate**
 - a. The program recognizes the rights of residents and training supervisors to be treated with courtesy and respect. To maximize the quality and effectiveness of residents' learning experiences, interactions among residents, training supervisors, and program staff should be collegial and conducted in a manner that reflects psychology's ethical principles and professional conduct standards.
 - b. The program provides opportunities for socialization into the profession.
 - c. The program encourages peer interaction, and residents are provided with opportunities for appropriate peer interaction, support, and learning.
 - d. Residents are also provided with opportunities for collegial interaction with professionals and/or trainees in other disciplines.

II. Competencies, Training, and Outcomes

- A. **Aims of the Program.** The program must describe its aims in residency training (i.e., the overall, long-term expected outcome of the residency program).
- B. **Competencies.** Postdoctoral programs ensure that residents attain advanced competencies relevant to the program's specialty or area-of-emphasis. All programs provide experiences to promote advanced competencies fundamental to Health Service Psychology (Level 1). Additionally, programs ensure that residents attain advanced competencies relevant to the program's aims or area-of-emphasis (Level 2), or that are consistent with the program's designated specialty (Level 3).
1. **Level 1—Advanced Profession-Wide Competencies Required of All Residents**
 - a. **Integration of Science and Practice.** This includes evidence-based practice.
 - b. **Diversity.** This includes issues of cultural and individual diversity relevant to advanced practice, as appropriate to the population served and the specialty area.
 - c. **Ethics.** This includes professional conduct, ethics and law, and other standards for providers of psychological services.
 2. **Level 2—Program-Specific, Area-of-Emphasis, or Proficiency Competencies**
 - a. Consistent with the standards for the traditional or specialty area of professional psychology practice in which the program provides its training, the program specifies expected learning outcomes (i.e., residents' expected competencies upon program completion).
 - b. The program requires all its residents to demonstrate professional psychological competencies at an advanced level in those domains integral to achieving its aims. These may include:
 - i. psychological assessment and/or intervention;
 - ii. consultation, program evaluation, supervision, or teaching, or a combination of these;
 - iii. scholarly inquiry;

- iv. management and administration pertinent to psychological service delivery and practice, training, and research.
3. **Level 3—Specialty Competencies.** To be accredited in a specialty practice area, the program must meet the training and education guidelines endorsed by the specialty area as well as the standards for accreditation.
4. **Learning Experiences That Promote the Development of Advanced Competencies**
- a. A formal, goal-directed training plan describing planned training experiences must be provided for each resident. An individualized training plan should include the resident's level of competence at entry in describing how he or she will successfully attain the program's exit criteria. The educational activities listed below may occur in an interprofessional context or may make use of existing didactics occurring in the setting if they are appropriate for an advanced level of training.
 - b. **Educational Activities** (e.g. didactics, clinical conferences, grand rounds, and group supervision). The program must demonstrate how structured educational activities complement experiential training and how they are linked to competencies in Levels 1–3 above.
 - c. **Clinical Activities.** The program must provide supervised service delivery experiences in an appropriate setting that promote the development of the advanced competencies identified in Levels 1–3.
 - d. **Individual Supervision**
 - i. At least two hours per week of individual supervision focused on resident professional activities must be conducted by a doctoral-level licensed psychologist.
 - ii. Supervisory hours beyond the required 2 hours of individual supervision must be conducted by professionals who are appropriately credentialed for their role/contribution to the program. While these additional supervisors do not have to be psychologists, the supervision activities should reflect goal-directed training.
 - iii. Supervisors must maintain an ongoing supervisory relationship with the resident and have primary professional

clinical responsibility for the cases for which they provide supervision.

- iv. A postdoctoral resident must have a doctoral-level licensed psychologist serving as his or her primary supervisor.
- v. The primary supervisor must maintain overall responsibility for all supervision, including oversight and integration of supervision provided by other mental health and health professionals.

C. Evaluation

1. Evaluation of Residents' Competencies

- a. An evaluation is made of the resident's progress toward satisfactory attainment of the program's expectations of competency development, as reflected in the completion of the program's stated minimum levels of achievement and other program requirements.
- b. Data on residents' competencies must include competency-based assessments of residents as they progress through, and at completion of, the program (proximal data), as well as information regarding their attainment of competencies after they graduate (distal data).
 - i. Proximal data should include multiple evaluations of residents by others (e.g., by supervisors or trainers). The evaluation process and assessment forms must parallel the program's expected competencies. These evaluations include the feedback provided to residents as required in Standard I.C.1(d).
 - ii. At each evaluation interval, the evaluation must be based in part on direct observation (either live or electronically) of the competencies evaluated.
 - iii. Distal data reflect the program's effectiveness in achieving its aims and/or resident attainment of program-defined competencies. Resident self-ratings or satisfaction with training while in the program or following graduation may provide helpful input to the program for purposes of self-review, but are not considered sufficient because they do not reflect the residents' attainment of competencies.
 - iv. Distal data typically include information obtained from alumni surveys assessing former residents' perception of

the degree to which the program achieved its aims by preparing them in the competencies identified by the program. The data may also include graduates' professional activities and accomplishments (e.g., licensure, employment, memberships, and affiliations). The interval used to collect distal data should be sufficient to allow the program to evaluate its success in achieving its expected training outcomes.

2. **Quality Improvement of the Program.** The program must demonstrate a commitment to excellence through self-study, thereby ensuring its aims are met, enhancing the quality of its professional education and training, and contributing to the fulfillment of its host institution's mission.
 - a. The program, with appropriate involvement of its training supervisors, residents, and former residents, engages in a self-study process that addresses:
 - i. its expectations for the quality and quantity of the resident's preparation and performance in the program;
 - ii. its effectiveness in achieving program aims for residents in terms of outcome data (while residents are in the program and after completion), taking into account the residents' views regarding the quality of the training experiences and the program;
 - iii. its procedures to maintain current achievements or to make changes as necessary;
 - iv. its aims and expected outcomes as they relate to local, regional, state/provincial, and national needs, as well as advances in the knowledge base of the profession and the traditional or specialty practice area in which the program provides its training.
 - b. The program provides resources and/or opportunities to enhance the quality of its training and supervision staff through continued professional development.
 - c. The program and its host institution value and recognize the importance of resident training and of the supervisors' training and supervisory efforts, and demonstrate this in tangible ways.
 - d. The program demonstrates how it utilizes proximal and distal data to monitor and improve the program.

III. Program Residents

A. Resident Selection and Characteristics

1. **Resident Selection.** As evidence that residents meet the program's entry requirements, the program ensures that its residents:
 - a. have completed appropriate doctoral education and training in professional psychology or appropriate respecialization, either of which must include the completion of an appropriate internship;
 - b. have interests and abilities that are appropriate for the postdoctoral training program's aims and expected competencies.
2. **Postdoctoral Psychology Residents.** The program has one or more postdoctoral psychology residents who:
 - a. have an understanding of the program's aims and expected competencies;
 - b. have meaningful involvement in those activities and decisions that serve to enhance resident training and education;
 - c. have a title commensurate with the title carried in that setting by other professionals in training who have comparable responsibility, education, and training, consistent with the laws of the jurisdiction in which the program is located.
3. **Resident Diversity.** The program has made systematic and sustained efforts to attract residents from different ethnic, racial, gender, and personal backgrounds into the program.
 - a. Consistent with such efforts, it acts to ensure a supportive and encouraging learning environment and the provision of training opportunities appropriate for the training of diverse individuals.

- B. **Program Activities, Resources, and Processes.** These are designed to maximize the likelihood of all residents' success in completing the program. The program must provide professional mentoring to residents in addition to supervision.

IV. Program Faculty

A. Program Leadership and Faculty Qualifications

1. Program Leadership

- a. The program has a designated director who is a psychologist, appropriately credentialed (i.e., licensed, registered, or certified) to practice psychology in the jurisdiction in which the program is located, is primarily responsible for directing the training program, and has administrative authority commensurate with those responsibilities.
- b. The program director's credentials and expertise must be consistent with the program's aims.
- c. For programs that include a recognized specialty practice area, the individual in charge of that area must have appropriate expertise and credentials in that specialty area.

2. **Program Leadership Structure.** The program must describe how faculty members and residents contribute to the planning and implementation of the training program.

B. Faculty/Staff

1. **Sufficiency.** The formally designated supervisors include at least two psychologists, who:
 - a. deliver services in the traditional and/or specialty practice area in which postdoctoral training occurs;
 - b. function as an integral part of the program at the site where the program is housed;
 - c. have primary professional/clinical responsibility for the cases on which they provide supervision;
 - d. are appropriately credentialed (i.e. licensed, registered, or certified) to practice psychology in the jurisdiction in which the program is located;
 - e. are of appropriate quality for the program's aims and have appropriate qualifications for advanced training in the emphasis area, proficiency, or specialty;
 - f. participate actively in the program's planning, its implementation, and its evaluation;
 - g. serve as professional role models for the residents.

2. Recruitment and Retention of Diverse Faculty

- a. The program makes systematic and sustained efforts to attract and retain faculty from different ethnic, racial, gender, and personal backgrounds into the program.
- b. Consistent with such efforts, it acts to ensure a supportive and encouraging learning environment and the provision of continuing educational opportunities appropriate for a broad spectrum of professionals.
- c. The program avoids any actions that would restrict program access on grounds that are irrelevant to a career in professional psychology.

C. Ancillary Faculty

1. The program may utilize ancillary faculty in achieving its aims and competencies.
2. An accredited program must demonstrate that the ancillary faculty are appropriate and sufficient to achieve the program's aims and ensure appropriate competencies for the residents.

V. Communication Practices

A. Public Disclosure

1. General Disclosures

- a. The program demonstrates its commitment to public disclosure by providing accurate and complete 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 training experiences, and expected training outcomes.
- b. The program also demonstrates commitment to public disclosure by providing current information on its use of distance education technologies for training and supervision and its implementation of strategies to ensure diverse resident cohorts.
- c. The program provides its status with regard to accreditation, including the specific training program covered by that status, and the name, address, and telephone number of the Commission on Accreditation. The program makes 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 Residents**

- a. The program provides current information on training outcomes deemed relevant by the profession.
- b. The program is described accurately and completely in documents available to current residents, prospective residents, and other publics. This information should be presented in a manner that allows applicants to make informed decisions about entering the program. At a minimum, descriptions of the program should include the licensure status, employment status, and advanced certifications residents can expect to obtain. Program descriptions should be updated regularly as new cohorts begin and complete the program.
- c. The program describes its aims and expected resident competencies; its selection procedures and requirements for completion; its training supervisors, residents, facilities, service recipient populations, training settings, and other resources; its administrative policies and procedures, including the average amount of time per week residents spend in direct service delivery and other education and training activities; and the total time to completion.
- d. The program provides reasonable notice to its current residents of changes to its aims, didactics, program resources, and administrative policies and procedures, as well as any program transitions that may impact training quality.
- e. The program issues a certificate of completion to residents who successfully attain the expected competencies and complete the contracted learning period.

B. Communication and Relationship With Accrediting Body

The program demonstrates its commitment to the accreditation process through:

1. **Adherence.** The program abides by the accrediting body's published policies and procedures as they pertain to its recognition as an accredited program. The program responds in a complete and timely manner to all requests for communication from the accrediting body, including completing all required reports and responding to questions from the accrediting body.
 - a. **Standard Reporting.** The program responds to regular recurring information requests (e.g., annual reports and

narrative reports) as identified by the accrediting body's effected policies and procedures.

- b. **Nonstandard Reporting.** The program submits timely responses to information requests from the accrediting body consistent with its effected policies and procedures.
 - c. **Fees.** The program is 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 informs 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 sequence of experiential training, faculty changes, or changes in administration.

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