



Master's Accreditation Update and Brief Overview of Key Points for Programs

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CoA Leadership

Janay Sander, PhD

Associate Chair for Quality Assurance (2024)

Chair, Master's Accreditation Work Group (2023)

Sheila Peters, PhD

Co-Chair, Master's Accreditation Work Group (2023)

You may all be aware when you enter the room that this meeting is being recorded and we will work on making a transcript available at the end of this presentation for you or to be able to share with your colleagues.

Background

Demand in the field

- ♦ Increasing demand for psychological services
- ♦ Need to expand access to mental health care

Why Accreditation?

- ♦ Accreditation provides quality assurance for students and protects the public
- ♦ Accrediting programs would increase the number of clinicians trained in the science of psychology practice at the master's level and increase access to psychological services for consumers

APA's Role

- ♦ In 2018 APA's Council of Representatives approved a motion to pursue accreditation of health service psychology (HSP) master's-level programs
- ♦ In February 2019, APA's Board of Educational Affairs task force developed a blueprint for APA to follow in pursuing accreditation of master's programs in HSP
- ♦ Based on the blueprint, APA CoA was charged with forming the Master's Accreditation Work Group to develop policies, procedures, and processes to develop an accreditation system at the master's level



Just as a little background for anyone who is aware of the history of where we are as the Commission on Accreditation. In 2018 the Council of Representatives approved a motion to pursue accreditation of health service psychology at the master's level. The Board of Educational affairs asked the Commission on Accreditation to proceed with a mechanism to be able to accredit master's level training programs in health service psychology. So, since that time, the Commission has been working to create a pathway for master's accreditation at the master's level. in health service psychology.

CoA Responsibilities

♦ CoA's Responsibilities

- *Standards of Accreditation for Health Service Psychology, Master's Degree Programs (SoA-M)*
- *Accreditation Operating Procedures for Master's Degree Programs (AOP-M)*
- Implementing Regulations (IRs)

♦ Outside of CoA's Scope

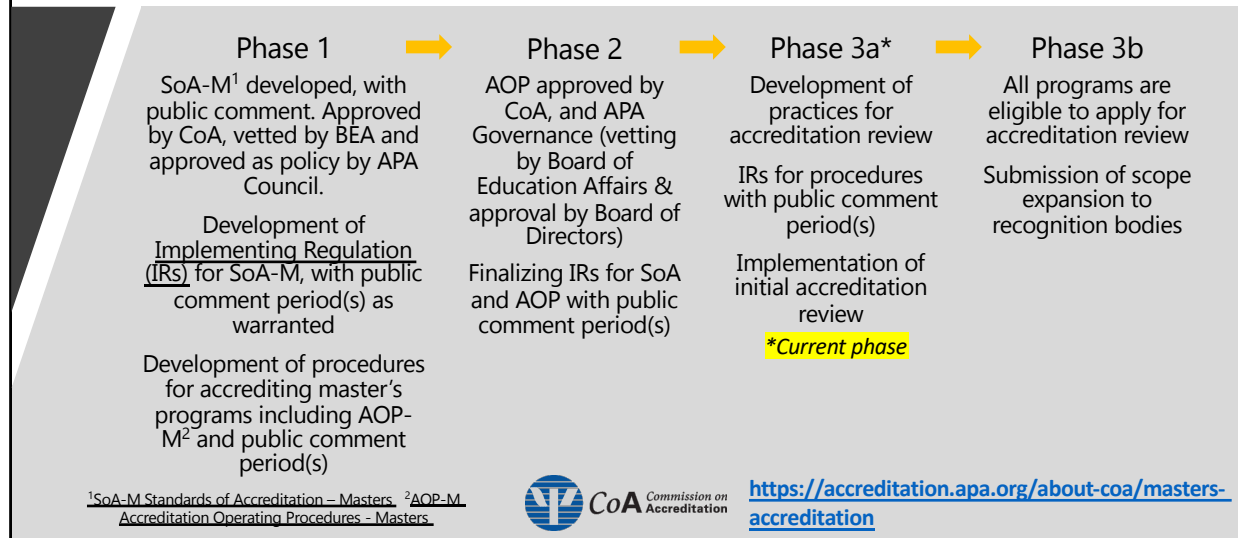
- Title of practitioner
- Scope of practice
- Licensure eligibility



One of the questions that the Commission receives frequently is about where our role ends and where do other entities become responsible for this field-wide change. I want to remind the audience and anybody who is interested to understand the specific boundaries of different responsibilities. The Commission on Accreditation is responsible for the Standards of Accreditation for Master's Programs in health service psychology and the Accreditation Operating Procedures that govern that, as well as the Implementing Regulations. There are a lot of other issues around scope of practice and title use and how people become eligible for licensure. Those are outside the Commission on Accreditation's scope. We have invited someone to come speak at the end of our presentation today about some of these other common issues in the field outside our scope.

The title and licensure requirements vary by state and jurisdiction. You can find information generally about all of the license requirements at ASPPB's website. And there are a handful of states and jurisdictions that do already have a master's pathway for licensure in a handful of states and jurisdictions.

Master's Accreditation Timeline



This is an overview of where the Commission is in the timeline of the initial accreditation process. We are currently in Phase 3a. The Standards of Accreditation for Master's have been developed. They were put out for public comment twice before being approved by the CoA in October of 2020. In February of 2021 the APA Council of Representatives approved the Standards as APA policy.

Following a round of public comment and approval by the CoA, the APA Board of Directors approved the addition of master's level programs in the Accreditation Operating Procedures in February of 2022. Implementing Regulations have been developed in most areas; however there are a few remaining for the Operating Procedures. What is currently approved is available to the public on our website, along with the Standards and Accreditation Operating Procedures. Any future calls for public comment will be posted on our main accreditation website: <https://accreditation.apa.org/>.

Initial Accreditation Review

- ♦ APA CoA received self-studies from 7 applicant programs
- ♦ After undergoing a preliminary review at the Fall 2023 CoA meeting, 2 of these programs were authorized for a site visit
- ♦ Site visits are authorized for the 2024 winter site visit cycle (January – May 2024)
- ♦ Preliminary reviewers and site visitors are current Commissioners and qualified external consultants who have master's HSP experience and/or expertise



We received 7 applications from master's programs. At our Fall 2023 meeting, two programs were authorized for a site visit to occur between January and May of this year.

Eligibility – What Makes a Program a Candidate for APA CoA Master's Accreditation

- ♦ Established master's degree in **health service psychology**
 - May exist as a terminal degree program or as part of a more advanced graduate training program
- ♦ **Developed curriculum and clinical training experiences** consistent with program aim(s) and health service psychology
- ♦ Coverage of all required **discipline-specific knowledge (DSK) and profession-wide competency (PWC)** areas
- ♦ **Proximal (current student) data** that demonstrate student attainment of PWCs and DSKs
- ♦ **Distal (program graduate) data** on how well the program prepared students in each PWC (and program-specific competency, if applicable) area + graduates' job placement, licensure, credentialing, and employment rates



When we look at eligibility, we are looking for programs that have an established master's degree in an area of health service psychology; those areas being clinical psychology, counseling psychology, school psychology, or a combination of those areas. Programs can have a focus within an area of health service psychology (for example, clinical psychology with a focus on forensic psychology and the institution does not need to have a doctoral-level program. The program may exist as a terminal degree program or they may be part of a more advanced graduate program.

The curriculum and clinical training experiences are focused on health service psychology and consistent with the program's specific aims. In order to be eligible as a candidate for master's accreditation, the program must have proximal data from at least one cohort of students by the time the self-study is submitted. In terms of distal data, the program must have at least one graduate by the time the program is approved for a site visit. Proximal data is looking at how current students are attaining knowledge in the discipline-specific knowledge and profession-wide competency areas. Distal data is looking at how well students have been prepared in these competency areas as well as job placement or further training, licensure, credentialing, and employment.

Major Differences: Master's vs. Doctoral

Standard(s)	Master's	Doctoral
I.A.1 Health Service Psychology	<ul style="list-style-type: none"> Science and practice Preparation for practice at the master's level or further training Terminal master's degree (or part of higher-level degree) 	<ul style="list-style-type: none"> Empirical evidence and practice Preparation for entry-level practice at doctoral level or further training Doctoral Degree
I.C.1 Program Administration and Structure	<ul style="list-style-type: none"> Program leader – no educational requirement for program leader; must be member of core faculty 	<ul style="list-style-type: none"> Program leader must be doctoral-level psychologist and member of core faculty
I.C.2 Length of Degree, Delivery Method, and Design/Length of Degree and Residency	<ul style="list-style-type: none"> Minimum of 2 academic years of graduate-level study (or equivalent) At least half of training earned in program that grants master's degree 	<ul style="list-style-type: none"> Minimum of 3 full-time academic years of graduate study (or equivalent) + internship 2/3 academic years within program that grants doctoral degree 1 year of full-time residence

For anyone attending this town hall today, some of you may be familiar with doctoral training. This slide won't be quite as meaningful if you are not familiar already with doctoral level training standards, but it may give you some idea of the big picture for what is included in the master's level for health service psychology accreditation. These are snapshots of the current differences across standards in health service psychology. The implementing regulations we'll be referencing are more specific and give more guidance to programs.

The first standard has to do with the definition of health service psychology and what is covered. The key differences are both master's and doctoral will have preparation for entry level practice, with a recognition that preparation for practice at the master's level or further training will be different based on jurisdiction and licensure. A program would only seek accreditation for a master's degree, but a master's degree can be a terminal master's degree or it can be part of a degree in route to a higher-level degree, such as an EdS or a doctoral degree. At the doctoral level of training, it is only a doctoral degree.

In terms of the program administration there will obviously be some university guidelines and different institutional accreditation that would be outside of CoA's

scope that universities would have to attend to, but in the standards, at the master's level there is no requirement for the program leader to have a specific degree. However, they must be a member of the core faculty. A difference for the doctoral level of training is that the program leader must be a doctoral level psychologist and a member of the core faculty.

In terms of length of degree for the master's level, it's two years or the equivalent. There is a recognition that master's programs may have nontraditional students or part-time students so that's why equivalent is allowable. The minimum for a doctoral program is 3 full-time years or the equivalent plus an internship. At the master's level at least half the program needs to be granted from that program and for doctoral level it's 2/3 of the academic years and 1 year of full-time residence.

At both levels, master's and doctoral level training focuses on broad and general training in health service psychology areas, which includes clinical psychology, counseling psychology, school psychology, or a combination of these areas.

Master's vs Doctoral Standards of Accreditation – Discipline-Specific Knowledge (DSK) - [*IRC-7 M*](#)

Standard(s)	Master's	Doctoral
History & Systems of Psychology	Not required at master's level	Category 1 <ul style="list-style-type: none"> History and Systems of Psychology
Basic Content Areas in Scientific Psychology	Category 1 <ul style="list-style-type: none"> Affective Aspects of Behavior Biological Aspects of Behavior Cognitive Aspects of Behavior Developmental Aspects of Behavior Social Aspects of Behavior 	Category 2 <ul style="list-style-type: none"> Affective Aspects of Behavior Biological Aspects of Behavior Cognitive Aspects of Behavior Developmental Aspects of Behavior Social Aspects of Behavior



Discipline-specific knowledge and profession-wide competencies are the two main curriculum aspects in master's and doctoral training. We're first going to talk about the discipline-specific knowledge areas. History and Systems is not required at the master's level. For the doctoral level, History and Systems is required but it may be covered at the undergraduate level. This is the only one that's allowable at the doctoral level of accreditation to be covered at the undergraduate level. For the basic content areas in scientific psychology, the categories are the same broadly; however, master's programs can meet this category at the undergraduate or graduate level. In doctoral training they need to be at the graduate level. If programs have embedded or are part of an accelerated master's program, this allows for some flexibility in how master's programs can ensure that all of their students are obtaining this knowledge.

Some programs will probably have some specific questions about this. I would encourage programs to stay updated through our website or call the office if you're interested in learning more specific applications of what this discipline-specific knowledge might look like.

Just as a note, even though master's level training can have the basic content areas in scientific psychology covered at the undergraduate level, it is not consistent with the Commission on Accreditation to have them all met at the undergraduate level. If any areas can be met at the undergraduate level, the program will need to thoroughly explain how they ensure students obtain this knowledge.

Master's vs Doctoral Standards of Accreditation – Discipline-Specific Knowledge (DSK)

Standard(s)	Master's	Doctoral
Advanced Integrative Knowledge in Scientific Psychology	Not required at master's level	Category 3 <ul style="list-style-type: none"> Advanced Integrative Knowledge of Basic Discipline-Specific Content Areas
Research, Statistics, Psychometrics	Category 2 <ul style="list-style-type: none"> Consumption of Research Research Related to Practice Psychometrics 	Category 4 <ul style="list-style-type: none"> Research Methods Statistical Analysis Psychometrics



These are the last two categories of discipline specific knowledge. The Advanced Integrative Knowledge is required at the doctoral level, but not required at the master's level. For Research, Statistics, and Psychometrics, both master's level and doctoral level programs must meet this category at the graduate level. The difference here is that at the master's level, the emphasis is on consumption of research, Research Related to Practice, and Psychometrics. As opposed to the doctoral level, where the emphasis is on Research Methods, Statistical Analysis, and Psychometrics.

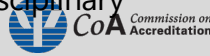
Master's vs Doctoral Standards of Accreditation – Profession-Wide Competencies (PWCs) - *IR C-8 M*

Master's

- i. Integration of psychological science and practice
- ii. Ethical and legal standards
- iii. Individual and cultural diversity
- iv. Professional values, attitudes, and behaviors
- v. Communication and interpersonal skills
- vi. Assessment
- vii. Intervention
- viii. Supervision
- ix. Consultation and interprofessional/interdisciplinary skills

Doctoral

- i. Research
- ii. Ethical and legal standards
- iii. Individual and cultural diversity
- iv. Professional values, attitudes, and behaviors
- v. Communication and Interpersonal skills
- vi. Assessment
- vii. Intervention
- viii. Supervision
- ix. Consultation and interprofessional/interdisciplinary skills



The main difference with the profession-wide competencies is in regard to research. The expectation is that master's level practitioners will understand psychological science and how it informs practice. They will be consumers of research and be able to apply it to their skill set. In comparison, doctoral programs have the expectation that students will also be able to conduct research and develop it in the context of the work that they do. This is often in the form of a dissertation.

Frequently Asked Questions/Q&A

- ♦ **What if a master's degree is part of an already accredited doctoral program?**

- Master's program would apply separately for accreditation to be accredited at the master's level. There is no acceleration of accreditation offered to programs that are developed out of accredited doctoral programs.

- ♦ **What are the residency requirements? Is distance education allowed?**

- *SoA-M Standard I.C.2* - at least half of the training (or equivalent) earned in the program from which degree is granted
- *IR C-10 M: Distance Education* – Programs that provide education by distance to students must attest that they are authorized to do so by (1) their institutional accreditor, and (2) any pertinent jurisdictional authority such as a state or province.

- ♦ **What constitutes "appropriately trained and credentialed" supervisors?**

- Standards and IRs do not prohibit someone to provide supervision without a doctorate degree, but the jurisdiction rules may dictate what is considered appropriately trained and credentialed.



This next part is in response to questions that were submitted in advance and we consolidated them to try and address as many frequently asked questions as we could.

The first one is about whether a master's degree is already part of a currently accredited doctoral program. Accreditation is based on the program; there isn't any advantage or disadvantage of being affiliated with an already existing accredited doctoral program because they would be separately accredited. Each new program that is seeking accreditation would be considered as a separate program. The self-study and site visit and entire process would be just like the accreditation process is now for current levels of training that the CoA accredits.

I see in the chat a question whether they graduated from a program that will become accredited, if they would have graduated from an accredited program and the answer is no. Accreditation dates are based on the timing of the self-study, site visit, and Commission vote. Accreditation is not retroactive.

The next question is what are the residency requirements and is distance education allowed. In the Standards of Accreditation, at least half of the training or the

equivalent must be earned in the program from which the degree is granted. So, for transfer students, that would need to be something that the program has a process for and the program would have to explain how half of the training or equivalent would be earned in the program. For master's, Implementing Regulation C-10 M: Distance Education provides more context. Programs that provide education by distance to students must attest that they're authorized to do so by their institutional accreditor and any other pertinent jurisdiction authority such as the state or province.

What constitutes appropriately trained and credentialed supervisors? The Standards of Accreditation and the Implementing Regulations do not prohibit anyone to provide supervision without a doctoral degree. The jurisdiction and licensing board would likely dictate what is considered appropriately trained and credentialed where the services are occurring.

Frequently Asked Questions/Q&A

- ♦ **Who will be reviewing master's programs?**

- [Commission on Accreditation](#) - comprised of at least 32 members with a broad range of experience and educational backgrounds, appropriately balanced between academic institutions and programs, practitioners of the profession, and the publics served by accreditation.

- ♦ **Where can I find up-to-date information on the master's accreditation process?**

- Our website: <https://accreditation.apa.org/about-coa/masters-accreditation> will continue to be periodically updated with a timeline, the status of master's programs applying for initial accreditation, and FAQs.
- All policy documents discussed in this presentation are available on our website.
- Future self-study training opportunities, calls for site visitors, and site visitor trainings will also be available on the APA accreditation website: <https://accreditation.apa.org> and presented in our quarterly CoA Updates.



Who will be reviewing the master's programs. Our general Commission is comprised of at least 32 members with a broad range of experience and educational backgrounds with a balance between academic institutions and programs, practitioners, and the public.

In December of 2022 the CoA put a public call out for self-nominations for consultants for the initial master's accreditation process. 22 consultants with expertise in master's education and training were selected. These consultants serve in a variety of roles including preliminary reviewers, site visitors, and program reviewers. Note that while consultants take part in the program review discussions, only CoA members vote on accreditation decisions.

Where can you find updates? The website for master's accreditation is in the chat (<https://accreditation.apa.org/about-coa/masters-accreditation>) if you want to bookmark that. That is the best place to get routine updates when they are available, including future self-study trainings. The Commission will post updates. Policies are available in the public materials on the website including the Standards, Operating Procedures, and Implementing Regulations. Any new materials that come out in these areas will be posted for public comment on the general Commission on

Accreditation website: <https://accreditation.apa.org>.

In addition to future self-study trainings, there will be site visitor trainings as well. As you can imagine, the process of accrediting master's programs will need to include a new pool of site visitors at the master's level. So stay tuned!

Questions Outside CoA's Scope

- ♦ **Licensure/licensing regulations**
- ♦ **Model licensure information**
- ♦ **Professional title of practitioner**
- ♦ **Scope of practice**



There were several questions that we received and the Commission continues to receive about licensure regulations, model licensure information, professional title of practitioner, and scope of practice. These are all areas outside the lane of the Commission on Accreditation as we are really focused on the accreditation process and standards and regulations that govern that alone. We have invited Dr. Lynn Bufka from the APA Practice Directorate to provide some updates in these areas that are beyond our scope. Thank you, Dr. Bufka for joining us.

(Dr. Bufka presentation)

Thank you. The questions related to what is the professional path for people who graduate from an accredited program with a master's degree in health service psychology are important questions. The answers are not entirely determined by APA. Most programs are training individuals to go into some sort of practice setting. It's only about 15 or 17 jurisdictions in the US that license individuals with a master's degree in psychology under psychology licensing boards. In all the other jurisdictions, if those individuals are going to pursue licensure, it's under the Marriage and Family Therapy

boards or under Professional Counselor kinds of licensure so recognize that both ASPPB, the Association of State and Provincial Psychology Boards and APA have been thinking hard about this question. I serve as a liaison to an ASPPB group that's working on this. Staff from ASPPB who serve as liaisons to APA are also on this call and many psychologists are working in work groups or a task force to begin to define what it would mean to be licensed. What do we think as a discipline? What would it mean to be licensed with a master's degree and to provide services with that license? So that's sort of the scope of where things are.

At this point, APA does not have a professional title for a practitioner. Some have been suggested, but there's not one that's been landed on yet. The scope of practice has not been defined. Those things are in development and I'd hoped to say that we have a call for nominations for a task force to update APA's guidance on licensure for both doctoral and this new domain with master's had been released. It's not yet released but it will come out very, very soon and I will work with my APA colleagues who have facilitated this call to ensure that the call for nominations gets distributed widely to people who are interested and who may be attending this call. But we will work closely with ASPPB. We really want to have consistency and right now there is no consistency in the jurisdictions that license individuals with a master's degree. About one third have independent practice for individuals with master's degrees and about two thirds have supervised practice for individuals with master's degree. I want to underscore that there is not yet any policy of APA at all. Anything that gets proposed will go out for public comment and discussion before ultimately going forward to the Council of Representatives for decision-making. It's important to know that the groups that have been meeting thus far have come to some agreement that it makes sense that there is some degree of independent practice for individuals with a master's degree. It may not be the same full scope of practice as somebody with a doctoral degree, but there would likely be some degree of independent practice for people with master's degrees comparable to individuals like licensed professional counselors or licensed marriage and family therapists in terms of the degree of independence that those professionals have in providing their services.

We have some time to talk so I will answer some questions that were received in advance. We hope to put APA's model act up for comment. So, if you are interested in other aspects of licensure, for instance, questions around licensure for doctoral psychologists, please comment on that model act when it's available and propose ideas for what should be included and how that could change. The task force will be formed. We're going to work jointly with ASPPB on this. We're going to try to have if not identical, very consistent recommendations because it would be really difficult for states who ultimately determine licensure decisions for professionals to have competing recommendations.

The BPA work group that worked on issues related to scope of practice and title put together a report that was reviewed by the Board of Professional Affairs. the Board of Professional Affairs was generally receptive to the recommendations in that report and it has been fine-tuning some components of the recommendations regarding scope. The title is still being discussed because for some very complicated reasons, which have to do with the fact there are existing titles, none of which are the same across all these jurisdictions, and there are practices happening in related mental health disciplines around how titles are being structured and we don't want to introduce complications to that process. We're trying to be very thoughtful about what titles will include. APA policy is that individuals who use the title psychologist must hold a doctoral degree, so it is anticipated that psychologist will not be part of the title for individuals with the master's degree in health service psychology, but the word psychology or psychological will be part of the title. Once ASPPB and APA finished their work in this regard, one of my responsibilities will be to work with state psychological associations and licensing boards to try to facilitate adopting these new recommendations, so that we can begin to have some consistency across jurisdictions.

All recommendations from any APA work group will go ultimately to APA's Council of Representatives for final approval. I anticipate much like the scope of practice and title for doctoral psychology are embedded in a document that's policy of APA, that same will hold title and scope of practice for people with master's degrees and will also be part of a policy document. The Council of Representatives make those policies for APA. The work group and staff have reviewed statutes related to similar professions and we are looking at questions. Thus far, recommendations are comparable in terms of the amount of time of supervised professional practice that would be required before having independent practice for instance. We don't want to disadvantage our graduates in comparison to related disciplines. So, we're certainly looking at that, trying to have some sort of conceptual consistency in regards to say masters of social work and those kinds of things as they move forward towards independent practice.

related disciplines. So, we're certainly looking at that, trying to have some sort of conceptual consistency in regards to say masters of social work and those kinds of things as they move forward towards independent practice.

Somebody did ask the question of whether or not APA would allow people with a master's degree in psychology to become voting members of APA. That's actually already the case, to be an associate member of APA one must have completed 2 years of graduate work in psychology or hold a master's degree in psychology and associate members can obtain voting privileges after one year. But bear in mind, associate members with voting privileges have a fairly limited range of things that members vote on. You can nominate candidates for president-elect or recording secretary or treasurer and you can vote for members who serve on the board of directors or members at large. Members of council can only be doctoral psychologists and not people who are associate members of APA per the bylaws.

Somebody asked will people who have graduated from a master's level clinical program or non-APA doctoral program have any opportunity to see if their program might be considered for this professional pathway. That will be a decision that gets determined at the state licensing board level. It will be a question that I certainly will pose to our task force as they're thinking about developing recommendations for

OPCA Contact Information

Office of Program Consultation and Accreditation

750 First Street Northeast
Washington, DC 20002-4242

Telephone: (202) 336-5979

apaaccred@apa.org

<https://accreditation.apa.org/about-coa/masters-accreditation>



Thank you to Dr. Bufka for providing that additional context. It's very helpful for people to hear that big picture about what is happening in tandem with this initial accreditation process. I see a few more questions that I want to try and answer because I think they're probably pretty common questions for programs who may be considering seeking accreditation at the master's level.

One of them is about programs that are already accredited by other accreditors such as NASP, CACREP, or MPCAC. When any program is seeking APA accreditation from CoA, that program is a standalone application. There is nothing that is in our current materials or any of the Standards of Implementing Regulations that says anything one way or another about whether the program has additional accreditation approval. So whatever program is seeking accreditation from CoA, would need to meet CoA Standards of Accreditation and demonstrate consistency with the Implementing Regulations.

Another question that came up and I might have Susanne be ready to show IR C-7 M – this question is whether a program needs to have a separate course in each area to meet the discipline-specific knowledge areas. There is nothing in the Implementing Regulation that says these areas must be covered in separate courses. Programs have

flexibility on how they cover these areas as well as how they measure that students are meeting the minimal levels of achievement in each area. So, that is not explicitly stated that these need to be separate courses. There was also a question about allowing students to attain experiences in DSK basic content areas outside of the program and whether or not there would then subsequently be a programmatic requirement that someone take an additional course. Because the DSKs can be met at the undergraduate level that by itself indicates that students may obtain this knowledge before they are enrolled in the master's program. The issue would be around how the program demonstrates that they ensure that all of their students, regardless of where they obtained that discipline-specific knowledge, have obtained the discipline-specific knowledge. So, if there are transfer students from another graduate program or they are meeting it at the undergraduate level from a different university before enrolling in the master's program, that would be how the program would need to validate and document how everyone is meeting those DSKs. This is all the time we have to answer questions. We do keep a frequently asked questions list on the master's accreditation website and will continue to add to that. I would encourage anyone who is potentially interested in submitting an application as a program or becoming a site visitor to regularly check the master's accreditation site for routine updates or future trainings. I want to thank you for your time and interest in APA accreditation at the master's level.