**2025 Self-Study - DOCTORAL**

**Standard I: Institutional and Program Content**

**I.A. Type of Program**

**I.A.1 Health Service Psychology**

The program offers broad and general doctoral education and training that includes preparation in health service psychology (HSP). Although HSP encompasses a range of practice areas, degree types, and career paths, certain elements are common to training in the profession. A program that is accredited in health service psychology must demonstrate that it contains the following elements:

1. Integration of empirical evidence and practice: Practice is evidence-based, and evidence is practice-informed.
2. Training is sequential, cumulative, graded in complexity, and designed to prepare students for practice or further organized training.
3. The program engages in actions that indicate respect for and understanding of cultural and individual differences and diversity.

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

**Provide a brief orienting statement of the program's mission and aims. More specific detail regarding your program’s aims and required competencies will be requested in Standard II.**

**Concisely describe the means by which the doctoral training achieves an integration of science and practice to provide orienting context to the detailed information in subsequent standards.**

**Concisely describe how training is sequential, cumulative, graded in complexity, and designed to prepare students for practice or further organized training to provide orienting context to the detailed information in subsequent standards. Training refers to all aspects of the curriculum, including coursework, practicum, research, and any other major program requirements.**

**Concisely describe the program’s overall commitment to respect for and understanding of cultural and individual differences and diversity to provide context to the detailed information in subsequent standards.**

**I.A.2Practice Area**

Health service psychology includes several practice areas in which an accredited program may focus, including the areas of clinical psychology, counseling psychology, school psychology, combinations of these areas, and other developed practice areas*.*

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

**Identify the area of practice in which the program prepares students.**

**I.B Institutional and Administrative Structure**

**I.B.1Administrative Structure**

The program's purpose must be pursued in an institutional setting appropriate for doctoral education and training in health service psychology. The institution must have a clear administrative structure and commitment to the doctoral program.

1. The sponsoring institution of higher education must be authorized under applicable law or other acceptable authority to provide a program of postsecondary education and have appropriate graduate degree-granting authority. This includes state authorization and accreditation of the institution by a nationally recognized regional accrediting body in the United States.
2. The program is an integral part of the mission of the academic department, college, school, or institution in which it resides. It is represented in the institution's operating budget and plans in a manner that supports the training mission of the program. Funding and resources are stable and enable the program to achieve its aims.

Supporting Material

**UPLOAD OPTIONAL**

Focused Questions

**Identify the regional accrediting body that recognizes the sponsoring institution and the institution’s current accreditation status with this body.**

**Discuss how the program is integral to the department, college, school, or institution.**

**Briefly describe the mission(s) of the agency or institution which sponsors/hosts the doctoral training program and explain how the training program fits within this mission. How is it viewed/valued by the sponsor institution and its administration?**

**Discuss the adequacy and stability of the doctoral program's budget, including how the program receives its budget.**

**I.B.2Administrative Responsibilities Related to Cultural and Individual Differences and Diversity**

The program recognizes the importance of cultural and individual differences and diversity in the training of psychologists. The Commission on Accreditation defines cultural and individual differences and diversity as including, but not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status. The program has made systematic, coherent, and long-term efforts to attract and retain students and faculty from diverse backgrounds into the program. Consistent with such efforts, it acts to ensure a supportive and encouraging learning environment appropriate for the training of individuals who are diverse and the provision of training opportunities for a broad spectrum of individuals. Further, the program avoids any actions that would restrict program access on grounds that are irrelevant to success in graduate training, either directly or by imposing significant and disproportionate burdens on the basis of the personal and demographic characteristics set forth in the definition of cultural diversity. Because of the United States' rich diverse higher education landscape, training can take place in both secular and faith-based settings. Thus this requirement does not exclude programs from having a religious affiliation or purpose and adopting and applying admission and employment policies that directly relate to this affiliation or purpose, so long as public notice of these policies has been made to applicants, students, faculty, and staff before their application or affiliation with the program. These policies may provide a preference for persons adhering to the religious purpose or affiliation of the program, but they shall not be used to preclude the admission, hiring, or retention of individuals because of the personal and demographic characteristics set forth under the definition of cultural diversity. This provision is intended to permit religious policies as to admission, retention, and employment only to the extent that they are protected by the U.S. Constitution. This provision will be administered as if the U.S. Constitution governed its application. Notwithstanding the above, and 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.

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

**Discuss how** **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.**

**Does the program/institution adhere to a religious affiliation or purpose that informs its admission and/or employment policies? If so, describe how these policies are made known to applicants, students, faculty, and staff before their application to or affiliation with the program.**

**I.C. Program Context and Resources**

**I.C.1 Program Administration and Structure**

1. Program Leadership. The program has consistent and stable leadership with a designated leader who is a doctoral-level psychologist and a member of the core faculty. The program leader's credentials and expertise must be in an area covered by HSP accreditation and must be consistent with the program's aims. This leadership position may be held by more than one individual.
2. Program Administration. The program has designated procedures and personnel responsible for making decisions about the program, including curriculum, student selection and evaluation, and program maintenance and improvement. The program's decision-making procedures, including who is involved in decision-making, must be consistent with the missions of the institution and department, and with the program's aims. The program ensures a stable educational environment through its personnel and faculty leadership.

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

**Describe the administrative structure of the program, including the leadership structure.**

**Describe the program leader’s expertise and credentials.**

**Describe other personnel involved in program administration.**

**I.C.2 Length of Degree and Residency**

The program has policies regarding program length and residency that permit faculty, training staff, supervisors, and administrators to execute their professional, ethical, and potentially legal obligations to promote student development, socialization and peer interaction, faculty role modeling, and the development and assessment of student competencies. Residency provides students with mentoring and supervision regarding their development and socialization into the profession, as well as continuous monitoring and assessment of student development through live face-to-face, in-person interaction with faculty and students. These obligations cannot be met in programs that are substantially or completely online. At a minimum, the program must require that each student successfully complete:

1. A minimum of 3 full-time academic years of graduate study (or the equivalent thereof) plus an internship prior to receiving the doctoral degree;
2. At least 2 of the 3 academic training years (or the equivalent thereof) within the program from which the doctoral degree is granted;
3. At least 1 year of which must be in full-time residence (or the equivalent thereof) at that same program. Programs seeking to satisfy the requirement of one year of full-time residency based on "the equivalent thereof" must demonstrate how the proposed equivalence achieves all the purposes of the residency requirement.

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

**Review: IR C-5 D: Academic residency for doctoral programs; and IR C-15 D: Awarding the doctoral degree prior to completion of the internship.**

**Outline the length and residency requirements of the program. In doing so, the program needs to specifically address how it meets the following criteria: a) requires a minimum of 3 full-time academic years of graduate study (or the equivalent) plus internship prior to receiving the doctoral degree; b) at least 2 of the 3 academic training years (or the equivalent) must be at the program from which the doctoral degree is granted; and c) at least 1 year must be in full-time residence at the program.**

**Provide the location (e.g., web address or link) of the description of these requirements in the program's public materials.**

**I.C.3Partnerships/Consortia**

A graduate program may consist of, or be located under, a single administrative entity (e.g., institution, agency, school, or department) or in a partnership or consortium among separate administrative entities. A consortium is comprised of multiple independently administered entities that have, in writing, formally agreed to pool resources to conduct a training or education program.

Supporting Material

**REQUIRED FOR CONSORTIUM PROGRAMS ONLY: Upload copy of consortial agreement, signed by ALL members that includes a) the nature and characteristics of the participating entities; b) the rationale for the consortial partnership; c) each partner’s commitment to the training/education program, its aims and competencies; d) each partner’s obligations regarding contributions and access to resources; e) each partner’s adherence to central control and coordination of the training program; and f) each partner’s commitment to uniform administration and implementation of the program’s training principles, policies, and procedures addressing trainee/student admission, financial support, training recourse access, potential performance expectations, and evaluations. Label this upload Consortium Agreement.**

**REQUIRED FOR CONSORTIUM PROGRAMS ONLY: Fill out and upload the Consortium Partners/Sign-Off template.**

Focused Questions

Is this program a consortium? If no, write “N/A” in text box. If yes, please address the following:

**Review IR C-30 D: Partnerships/Consortium**

**Provide a list of all member entities of the consortium.**

**Describe the relationship and responsibilities of each of the consortial partners.**

**Discuss how resources are pooled in order to administer the program.**

**Confirm that a signed consortium agreement and Consortium Partners/Sign-off**

**template have been uploaded.**

**I.C.4 Resources**

The program has, and appropriately utilizes, the resources it needs to achieve its training aims, including student acquisition and demonstration of competencies. The program works with its academic unit and/or the administration of the sponsor institution to develop a plan for the acquisition of additional resources that may be necessary for program maintenance and development. The resources should include the following:

1. Financial support for training and educational activities;
2. Clerical, technical, and electronic support;
3. Training materials and equipment;
4. Physical facilities;
5. Services to support students with academic, financial, health, and personal issues;
6. Sufficient and appropriate practicum experiences to allow a program to effectively achieve the program's training aims.

Supporting Material

**UPLOAD OPTIONAL**

Focused Questions

**Provide a narrative describing each of the resources identified in Standard I.C.4 including the sufficiency of each. Include a comprehensive listing of all student support services (available through the program or institution) designed to facilitate students’ progress through the program.**

**a. financial support for training and educational activities;**

**b. clerical, technical, and electronic support;**

**c. training materials and equipment;**

**d. physical facilities;**

**e. services to support students with academic, financial, health, and personal issues;**

**f. Sufficient and appropriate practicum experiences to allow a program to effectively achieve the program's training aims.**

**Describe how students are made aware of the availability of these services.**

**I.D Program Policies and Procedures**

**I.D.1Areas of Coverage**

The program has and adheres to formal written policies and procedures that govern students as they enter, progress through, and matriculate from the program. These must include policies relevant to:

* + - 1. academic recruitment and admissions, including general recruitment/admissions and recruitment of students who are diverse;
      2. degree requirements;
      3. administrative and financial assistance;
      4. student performance evaluation, feedback, advisement, retention, and termination decisions;
      5. due process and grievance procedures;
      6. student rights, responsibilities, and professional development;

nondiscrimination policies. The program must document nondiscriminatory policies and operating conditions and avoidance of any actions that would restrict program access or completion on grounds that are irrelevant to success in graduate training or the profession.

Supporting Material:

**Upload REQUIRED TABLE: Download Table 1 Program Policies and Procedures template. Use this template to provide Attachment Names/Page #'s for program policies that have been uploaded as appendices. Please label upload as - TABLE 1 Program Policies and Procedures**

**Upload all public materials on the program and other program-related material (brochures, letters, program manuals, handbooks, formal institutional policy and procedure memoranda, etc.) discussing the policies requested.**

Focused Question:

Please describe how the program makes these policies and procedures available to all interested parties.  
 Complete Table 1 Program Policies and Procedures and provide all public materials on the program and other program-related material (brochures, letters, program manual, handbooks, formal institutional policy and procedure memoranda, etc.) discussing the policies requested.

**I.D.2 Implementation**

All policies and procedures used by the program must be consistent with the profession's current ethics code and must adhere to their sponsor institution's regulations and local, state, and federal statutes regarding due process and fair treatment. If the program utilizes policies developed at another level (e.g., department or institution), it must demonstrate how it implements these policies at the program level.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

**Describe how the program ensures that it reflects psychology's ethical principles, legal codes, and professional conduct standards within its policies and procedures.**

**If policies are developed at the department or institution level, discuss how the program implements these policies at the program level.**

**I.D.3Availability of Policies and Procedures**

The program makes the formal written policies and procedures available to all interested parties. By the time of matriculation, the program provides students with written policies and procedures regarding program and institution requirements and expectations regarding students' performance and continuance in the program and procedures for the termination of students.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

**Briefly discuss how the program communicates its written policies and procedures to current students and potential applicants.**

**I.D.4 Record Keeping**

The program is responsible for keeping information and records related to student training and complaints/grievances against the program. Records must be maintained in accord with federal, state, and institution policies regarding record keeping and privacy. The Commission on Accreditation will examine student records and programs' records of student complaints as part of its periodic review of programs.

* + - 1. **Student Records.** The program must document and maintain accurate records of each student's education and training experiences and evaluations for evidence of the student's progression through the program, as well as for future reference and credentialing purposes. The program should inform students of its records retention policies.
      2. **Complaints/Grievances.** The program must keep records of all formal complaints and grievances of which it is aware that have been submitted or filed against the program and/or against individuals associated with the program since its last accreditation site visit. The Commission on Accreditation will examine a program's records of student complaints as part of its periodic review of the program.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Review: IR C-6 D: Record of student complaints in CoA periodic review.**

**Provide a summary record of formal student complaints or grievances received by, or known to, the program against the program and/or against individuals associated with the program since the program's last accreditation site visit. Do not include any identifying information on students. Site visitors will review the full records during the site visit.**

**(Optional) If your program has had any informal complaints or grievances that you believe the Commission/site visitors should be aware of, please provide that information here.**

**Describe the program's system for maintaining student records and complaints, including whether there is a confidential location for storing this information. Confirm duration of record retention for future reference and credentialing purposes. Site visitors will review this information as a part of the site visit.**

**Programs are reminded that records of complaints and grievances filed against the program must be kept for whichever time period is longest as required by CoA (i.e., since last periodic review) institutional, state, and federal policy. Please confirm that records of complaints and grievances are maintained according to this requirement.**

**Describe how students are informed of record retention policies.**

**I.(AI)**

Additional Information relevant to Standard I.

Supporting Material

**Please upload any additional documents that pertain to this standard (if applicable).**

Focused Questions

(**IF CURRENTLY ACCREDITED): In the program's last decision letter and/or other correspondence since the last review, did the CoA note any Section I issues to specifically address "in the next self-study"? If so, provide the response here.**

**(IF CURRENTLY ACCREDITED): In the program's last decision letter and/or other correspondence since the last review, did the CoA note any other Section I issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the CoA and whether the CoA determined that the issue was satisfactorily addressed or required additional information. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.**

**Standard II: Aims, Competencies, Curriculum, and Outcomes**

**II.A. Aims of the Program**

1. The program must provide information on the aims of its training program that are consistent with health service psychology as defined by these standards, the program's area of psychology, and the degree conferred.
2. These aims should reflect the program's approach to training and the outcomes the program targets for its graduates, including the range of targeted career paths.

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

**Describe the program's overarching aim(s) and how they reflect the approach to training and outcomes (including career paths) that the program targets for graduates. Briefly explain how the aim(s) are consistent with health service psychology, the program's substantive area of psychology, and the degree type conferred (i.e. Ph.D. or Psy.D.).**

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

1. **Discipline-specific knowledge and profession-wide competencies**

Discipline-specific knowledge serves as a cornerstone for the establishment of identity in and orientation to health service psychology. Thus, all students in accredited programs should acquire a general knowledge base in the field of psychology, broadly construed, to serve as a foundation for further training in the practice of health service psychology.

1. Discipline-specific knowledge represents the requisite core knowledge of psychology an individual must have to attain the profession-wide competencies. Programs may elect to demonstrate discipline-specific knowledge of students by:
   1. Using student selection criteria that involve standardized assessments of a foundational knowledge base (e.g., GRE subject tests). In this case, the program must describe how the curriculum builds upon this foundational knowledge to enable students to demonstrate graduate level discipline-specific knowledge.
   2. Providing students with broad exposure to discipline-specific knowledge. In this case, the program is not required to demonstrate that students have specific foundational knowledge at entry but must describe how the program's curriculum enables students to demonstrate graduate-level discipline-specific knowledge.

Supporting Material

**Upload REQUIRED TABLE: Table 2 Download Discipline-specific knowledge template. Complete the table for each knowledge area. Please label upload as – TABLE 2 Discipline-Specific Knowledge.**

Focused Questions

**Review: IR C-7 D: Discipline-Specific Knowledge**

**Complete Table 2 Discipline-Specific Knowledge. This table should include only *evaluated educational* experiences used to meet any DSK area. Activities that are not formally evaluated should not be included.**

**Demonstrate in a narrative how the program ensures that all students acquire a general knowledge base in the field of psychology, broadly construed, to serve as a foundation for further training in the practice of health service psychology.**

**Describe how the minimum level of achievement (MLA) is sufficient to demonstrate graduate-level knowledge for each individual DSK area. If one overall course grade is used to demonstrate competence in multiple DSK areas, the program should clarify how it determines that students demonstrate competence in each individual DSK area that is subsumed by the overall grade.**

**If the program permits students to attain foundational knowledge of Category 1 or 2 areas outside of doctoral training, the program must describe its systematic process to evaluate each individual student’s foundational knowledge and how those processes are:**

**a. Relevant to the required discipline-specific knowledge areas.**

**b. Sufficiently rigorous to demonstrate students’ substantial understanding of discipline-specific knowledge.**

**c. Appropriate for the program’s intended use.**

**d. Free from discrimination on bases irrelevant to success in the doctoral program.**

**e. Based on a substantial educational experience that included evaluation of knowledge contemporaneous with the experience (e.g., a course for which the instructor assigned a grade at course completion, rather than an activity completed in the remote past that was evaluated post hoc by a member of the doctoral faculty).**

**II.B.1.b**

Profession-wide competencies include certain competencies required for all students who graduate from programs accredited in health service psychology. Programs must provide opportunities for all of their students to achieve and demonstrate each required profession-wide competency. Although in general, the competencies appearing at or near the top of the following list serve as foundations upon which later competencies are built, each competency is considered critical for graduates in programs accredited in health service psychology. The specific requirements for each competency are articulated in Implementing Regulations. Because science is at the core of health service psychology, programs must demonstrate that they rely on the current evidence-base when training students in the following competency areas. Students must demonstrate competence in:

* + - * 1. Research
        2. Ethical and legal standards
        3. Individual and cultural diversity
        4. Professional values, attitudes, and behaviors
        5. Communication and interpersonal skills
        6. Assessment
        7. Intervention
        8. Supervision
        9. Consultation and interprofessional/interdisciplinary skills

Supporting Material:

**Upload REQUIRED TABLE: Download Table 3 Profession-Wide Competencies template. Complete the table for each of the curriculum areas identified in Standard II.B.1.b. Please label upload as - TABLE 3 Profession-Wide Competencies.**

**Upload samples of program and supervisor evaluation forms or instruments, student performance evaluations, surveys conducted, and any other methods or tools used to assess attainment of student and program training aims and competencies.**

Focused Questions

**Review: IR C-8 D: Profession-Wide Competency.**

**Complete Table 3 Profession-Wide Competencies.**

**Describe how the program demonstrates that it relies on the current evidence base when training students in the profession-wide competency areas.**

**Describe how the program ensures that it prepares students 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.**

**Describe how the minimum level of achievement (MLA) is sufficient to demonstrate broad and general preparation for internship. For each PWC, readiness for internship is generally defined as: Demonstrates capacity to integrate and apply PWCs with increasing professional autonomy and effectiveness across a broad and increasingly more complex range of clinical and professional activities in cooperation and collaboration with supervision, consultation, and training. Following internship, doctoral programs are also responsible for ensuring that all students achieve readiness for entry level practice on all profession-wide competencies upon graduation (successful completion of an APA accredited internship is sufficient evidence that this has occurred).**

**II.B.2 Learning/Curriculum Elements Related to the Program's Aims.**

The program must describe the process by which students attain discipline-specific knowledge and each profession-wide competency (i.e., the program's curriculum) and provide a description of how the curriculum is consistent with professional standards and the program's aims.

Supporting Material:

**Upload syllabi for ALL required courses in addition to any elective courses that may be used to meet any of the requirements of Standard II.**

**Important Reminders for providing syllabi:**

* **Syllabi should be provided for all courses that are listed in Table 2 (DSK), Table 3 (PWC), and Table 4 (PSC if relevant).**
* **Syllabi should be ordered by course number and should be clearly labeled by both course number and title.**
* **Course number, course title, instructor name and date of most recent course offering should be clearly marked on the first page of the syllabus.**
* **Full citations for all readings must be listed on each syllabus. It is not sufficient for syllabi to refer to reading lists that are made available to students through online course management software (e.g., Blackboard, Canvas).**

**The preferred method for syllabi uploads is to provide them all in one document (e.g. PDF) with bookmarks for easy navigation.**

**The minimum information required for CoA's review of each syllabus includes:**

* **a listing of all topics covered,**
* **the nature of the assignments students are required to complete,**
* **name of instructor,**
* **date the course was last offered,**
* **specific bibliographies of required readings (including primary sources, as appropriate), If the program or a course in the program uses an electronic method for listing or storing required readings (e.g., the list of readings is available on Blackboard), the reading list must be uploaded with the syllabus.**

**Information must be presented in a way that can be understood by outside reviewers (including, for example, chapter names and paper titles, rather than just author and date).**

**All syllabi will be evaluated solely on the basis of what is submitted with the self-study; as a result, a syllabus that is missing the required readings may be judged to be inadequate on that basis alone.**

Focused Questions:

**If multiple sections of a course are offered or multiple syllabi are provided for one course, describe the procedure to ensure that each section of the course provides sufficient coverage of the identified knowledge area.**

**Does the program use distance/online/electronically mediated education methodologies? If yes, please address the following:**

1. **Describe specifically when and how distance/online/electronically mediated education methodologies are used. If specific courses (in part or whole) or educational experiences are offered using distance education methods, each must be explicitly identified as such.**
2. **Describe the methods by which the program identifies the person participating in the education or training activity that uses distance education methodologies. In other words, the program must report how it ensures that a student registering or receiving credit for a course is the same person that participates in and completes the course.**
3. **Describe how the methods described above protect student privacy.**
4. **Describe how students are informed in a timely manner of any additional program fees associated with verification of student identity.**

**II.B.3** **Required Practicum Training Elements.**

* + - 1. Practicum must include supervised experience working with diverse individuals with a variety of presenting problems, diagnoses, and issues. The purpose of practicum is to develop the requisite knowledge and skills for graduates to be able to demonstrate the competencies defined above. The doctoral program needs to demonstrate that it provides a training plan applied and documented at the individual level, appropriate to the student's current skills and ability, that ensures that by the time the student applies for internship the student has attained the requisite level of competency.
      2. Programs must place students in settings that are committed to training, that provide experiences that are consistent with health service psychology and the program's aims, and that enable students to attain and demonstrate appropriate competencies.
      3. Supervision must be provided by appropriately trained and credentialed individuals.
      4. As part of a program's ongoing commitment to ensuring the quality of their graduates, each practicum evaluation must be based in part on direct observation of the practicum student and her/his developing skills (either live or electronically).

Supporting Material:

**Upload REQUIRED TABLE: Download Table 5 Practicum Settings template. Use this template to provide required practicum information. Please label upload as - TABLE 5 Practicum Settings**

Focused Questions:

**Review: IR C-12 D: Practicum guidelines for doctoral programs, IR C-13 D: Telesupervision, and IR C-14 D: Direct Observation**

**Describe the nature of practicum training provided, including:**

1. **How the program applies a training plan, documented at the individual level, that ensures that by the time of internship application the student has attained the requisite level of competency;**
2. **How the program ensures that students are placed in settings that are committed to training, that provide experiences that are consistent with health service psychology and the program’s aims, and;**
3. **How the program ensures that supervision is provided by appropriately trained and credentialed individuals.**

**Discuss how the program ensures practicum evaluations are based in part on direct observation, consistent with IR C-14 D. Explain how the program verifies the occurrence of direct observation on practicum evaluation forms.**

**If students' practicum experiences utilize any amount of telesupervision, discuss how it is used and provide the reference for the policy addressing this supervision modality.** **Be sure to include all of the information referenced in IR C-13 D.**

**II.B.4 Required Internship Training Elements**

The program must demonstrate that all students complete a one year full-time or two year part-time internship. The program's policies regarding student placement at accredited versus unaccredited internships should be consistent with national standards regarding internship training.

a. **Accredited Internships.** Students are expected to apply for, and to the extent possible, complete internship training programs that are either APA- or CPA-accredited. For students who attend accredited internships, the doctoral program is required to provide only the specific name of the internship.

b. **Unaccredited Internships.** When a student attends an unaccredited internship, it is the responsibility of the doctoral program to provide evidence demonstrating quality and adequacy of the internship experience. This must include information on the following:

* + - * 1. the nature and appropriateness of the training activities;
        2. frequency and quality of supervision;
        3. credentials of the supervisors;
        4. how the internship evaluates student performance;
        5. how interns demonstrate competency at the appropriate level;
        6. documentation of the evaluation of its students in its student files.

Supporting Material:

**Upload REQUIRED TABLE: Download Table 6 Internship Placement template. Use this template to provide required placement information. Please label upload as - TABLE 6 Internship Placement**

Focused Questions:

**Review: IR C-17 D: Expected Internship Placements for Students in Accredited Doctoral Programs**

**Describe the program's policies, expectations of and requirements for internship placement.**

**Describe how the program reviews/monitors the quality of non-accredited internship sites. Specifically:**

1. **the nature and appropriateness of the training activities;**
2. **frequency and quality of supervision;**
3. **credentials of the supervisors;**
4. **how the internship evaluates student performance;**
5. **how interns demonstrate competency at the appropriate level;**
6. **documentation of the evaluation of its students in its student files.**

**II.C Program-Specific Elements – Degree Type, Competencies, and Related Curriculum**

**II.C.1 Degree Type**

All accredited programs in psychology support the development of disciplinary knowledge and core competencies associated with the profession, and support the acquisition and integration of knowledge, skills, and attitudes from two major domains within the discipline: research and evidence-based practice. Programs are accredited either to offer the Ph.D. degree or to offer the Psy.D. degree. Other doctoral degree designations that meet these general parameters may be eligible for consideration as appropriate. Although all doctoral degrees contain all the required elements common to programs accredited in HSP, they differ in the balance among, and relative emphasis on, program components, based on specific training aims or likely career paths of their graduates.

In general, Ph.D. programs place relatively greater emphasis upon training related to research, and Psy.D. programs place relatively greater emphasis on training for engaging in professional practice. Graduates of each type of program or other doctoral degree designations, however, must demonstrate a fundamental understanding of and competency in both research/scholarly activities and evidence-based professional practice.

Programs that confer the Ph.D. must have a substantial proportion of faculty who conduct empirical research in the discipline (or related disciplines and fields) and a substantial proportion of faculty who have been trained for the practice of psychology. Thus, students in Ph.D. programs are trained to both create and disseminate the scholarly research upon which science and practice are built, as well as utilize such research to engage in evidence-based practice.

Programs that confer the Psy.D. must have a substantial proportion of faculty who engage in scholarship and/or empirical research in the discipline (or related disciplines and fields) and a substantial proportion of faculty who have been trained for the practice of psychology. Thus, students in Psy.D. programs are trained to engage in evidence-based practice, as well as in scientific inquiry and evaluation.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

**Describe how training aligns with the chosen degree type.**

**II.C.2 Program-Specific Competencies and Related Curriculum**

Doctoral programs accredited in health service psychology may require that students attain additional competencies specific to the program.

* + - 1. If the program requires additional competencies of its students, it must describe the competencies, how they are consistent with the program's aims, and the process by which students attain each competency (i.e., curriculum).
      2. Additional competencies must be consistent with the ethics of the profession.

Supporting Material:

**Optional: Download Table 4 Program-Specific Competencies template. Please label upload as - TABLE 4 Program-Specific Competencies**

**Note: If the program opts to present program-specific competencies, please ensure they are not already reflected in the 9 required profession-wide competencies and associated elements (see IR C-8 D).**

Focused Questions:

**If the program requires additional competencies of all its students, it must describe the competencies, how they are consistent with the program's aim(s), and the process by which students attain each competency (i.e., curriculum).**

**Describe how these additional competencies are consistent with the ethics of the profession.**

**Describe how the minimum levels of achievement (MLAs) are sufficient to demonstrate general preparation for entry level practice and licensure.**

**II.D Evaluation of Students and Program**

**II.D.1.a** **Evaluation of Students’ Competencies**

1. The program must evaluate students’ competencies in both profession-defined and program-defined areas. By the time of degree completion, each student must demonstrate achievement of both the profession-wide competencies and those required by the program. Thus, for each competency, the program must:
   1. Specify how it evaluates student performance, and the minimum level of achievement or performance required of the student to demonstrate competency. Programs must demonstrate how their evaluation methods and minimum levels of achievement are appropriate for the measurement of each competency. The level of achievement expected should reflect the current standards for the profession.
   2. Provide outcome data that clearly demonstrate that by the time of degree completion, all students have reached the appropriate level of achievement in each profession-wide competency as well as in each program-defined competency. While the program has flexibility in deciding what outcome data to present, the data should reflect assessment that is consistent with best practices in student competency evaluation.
   3. Present formative and summative evaluations linked to exit criteria, as well as data demonstrating achievement of competencies, for each student in the program.

Supporting Material:

**IMPORTANT INFORMATION ON PROVISION OF PROXIMAL DATA:**

**Programs should NOT upload information in any portion of the self-study that identifies students by name or initials. All materials must be de-identified.**

**All currently accredited programs must provide detailed, aggregate PROXIMAL outcome data for students as they progress through the program since the time of its last site visit. Applicant programs seeking full accreditation must provide all available data (from past 10 years).**

**Applicant programs applying for "accredited, on contingency" do not need to provide complete aggregated proximal data. Rather these programs should provide the data collected to date (including at least 1 practicum term) and a plan and evaluation mechanisms to collect outcome data. See IR C-29 D: Accredited, On Contingency.**

**Proximal, competency-based outcomes are measures obtained while the student is in the program. Examples include course grades, practicum evaluations, doctoral program evaluations, and internship evaluations. Student self-evaluation data are welcomed, but are not considered competency-based and therefore are not sufficient on their own.**

***The CoA expects that programs collected proximal data before 1/1/2017 in a manner consistent with the Guidelines and Principles (G&P) [former accreditation standards], and collected data in 2017 and beyond in a manner consistent with the Standards of Accreditation (SoA), regardless of when a student entered the program. These data can all be reported based on SoA requirements OR programs may opt to present SoA-based data (i.e., 2017 and beyond) and G&P-based data (i.e., collected prior to 2017) separately, as explained below.***

**Upload REQUIRED TABLE: Download SoA PROXIMAL DATA TABLE. Use this template**

**to provide required SoA-based proximal data. Please label upload as – Proximal data**

**table.**

**Proximal data should be provided for all outcome measures described for the discipline-specific knowledge areas, profession-wide and program-specific competencies (if applicable). Data must clearly demonstrate that all students have met the MLAs identified in Tables 2, 3, and 4 (if applicable).**

**Because the SoA has similarities to the G&P, much of the proximal data collected under the G&P (i.e., prior to 2017) could be presented in a manner that demonstrate consistency with the SoA. Programs may populate cells using such data and describe in the narrative how the data are consistent with the SoA. Alternately, data collected prior to January 1, 2017 may be presented separately (see next [optional] upload request).**

**Note: For each year listed in the 'Percent' columns in the table template, enter the N who attained the MLA divided by the N who attempted the MLA to calculate the percentage of successful attainment. You must use the "=" symbol: (e.g., =5/5).**

**[Optional] Upload G&P-based proximal data collected before implementation of the**

**SoA.**

**The CoA understands that data collected under the former accreditation standards (G&P) may be presented by the program’s former goals, objectives, and competencies. As such, there is no required template. If the program opts to present data collected prior to 2017 in this manner, please be sure to identify the minimum levels of achievement (MLAs) for the G&P data provided. Data must clearly demonstrate that all students have met these MLAs.**

**Upload current proximal data evaluation mechanisms (if applicable).**

**Optional: Provide documentation of the program’s self-evaluative activities (e.g., meeting minutes, faculty retreats, evaluations, etc.).**

Focused Questions:

**Review: IR C-18 D: Outcome data for doctoral programs.**

**Describe the program's outcome assessment process in detail.**

**Describe the expected program outcomes and the outcomes that were achieved. In so doing, summarize the data that demonstrate the extent to which all MLAs have been met for all required outcome measures for discipline-specific knowledge areas and profession-wide and program-specific competencies upon program completion. This description should supplement the more detailed data which are to be uploaded as an attachment.**

**If any MLAs were not met, please provide narrative to address remediation efforts**

**and whether the competency was successfully achieved.**

**If any cells in the data table are empty and/or have N/A listed; please explain absence of data points.**

**II.D.1.b**

For program graduates, the program must provide distal evidence of student's competencies and program effectiveness and must evaluate graduates' career paths in health service psychology after they have left the program.

* + - * 1. Two years after graduation, the program must provide data on how well the program prepared students in each profession-wide and program-specific competency. The program must also provide data on student's job placement and licensure rates.
        2. At 5 years post-graduation, the program must provide data on graduates, including data on graduate's licensure (as appropriate for their current job duties) and their scholarly/research contributions (as consistent with the program's aims).

Supporting Material:

**IMPORTANT INFORMATION ON THE PROVISION OF DISTAL DATA**

**Programs should NOT upload information in any portion of the self-study that identifies students by name or initials. All materials must be de-identified.**

**All programs currently accredited and applicant programs seeking full accreditation must provide detailed aggregated DISTAL outcome data for program graduates (i.e., after students have graduated from the program). Data must demonstrate the extent to which program alumni feel the program prepared them in all profession-wide and any program-specific competencies. These data should provide evidence of the program's effectiveness in helping graduates attain required competencies and pursue career paths in health service psychology after they have left the program.** **Please ensure that all distal data collection tools (e.g., alumni surveys) are uploaded.**

**Note: Any data gathered by December 31, 2016 may be presented in a manner consistent with the G&P. Any data collected after January 1, 2017 must be presented in a manner that is consistent with the SoA regardless of whether training was completed under the G&P or SoA. The CoA recognizes that some of the program’s students may have experienced the vast majority of their training in a program consistent with the G&P and that particularly for these cohorts, the data will be reflective of this. Programs are asked to provide commentary that will help guide CoA’s interpretation of their distal data and demonstrate how such data are utilized to make program improvements consistent with the SoA.**

**Available distal data must be presented for *all* graduates since the program’s last site visit (i.e., not just for graduates surveyed at 2 and 5 years following implementation of the SoA).**

**Applicant programs applying for "accredited, on contingency" do not need to provide aggregated distal data. Rather these programs should provide a plan and evaluation mechanisms to collect distal outcome data. See IR C-29 D: Accredited, On Contingency.**

**Upload REQUIRED TABLE: Download SoA DISTAL DATA TABLE. Use this template to**

**provide required SoA-based distal data. Please label upload as – Distal Data Table.**

**For each cohort the program should enter the N of respondents at the top of each column and should complete the "Range" column in the format [MIN-MAX] of responses received from the graduates.**

**Upload G&P-based distal data collected before implementation of the SoA.**

**Upload current distal data collection tool/s (e.g., alumni survey).**

Focused Questions:

**Review: IR C-18 D: Outcome data for doctoral programs.**

**Summarize the distal data that are available to demonstrate achievement of all profession-wide and program-specific competencies. This description should supplement the more detailed data which are to be uploaded as an attachment.**

**Describe the graduate survey response rate (e.g., percentage of respondents). If the response rate is low, discuss efforts made to improve the response rate.**

**Describe the formal process employed to collect distal data (e.g., timing, frequency, format, etc.).**

**II.D.2. Evaluation of Program Effectiveness and Quality Improvement Efforts**

a. The program must demonstrate a commitment to ensure competence in health service psychology through ongoing self-evaluation in order to monitor its performance and contribution to the fulfilment of its sponsor institution's mission.

b. The program must document mechanisms for engaging in regular, ongoing self-assessment that:

* + - * 1. Involves program stakeholders, including faculty, students, graduates, and others involved in the training program.
        2. Evaluates its effectiveness in training students who, by the time of graduation, demonstrate the competencies required by the profession and the program, and who after graduation are able to engage in professional activities consistent with health service psychology and with the program's aims.
        3. Evaluates the currency and appropriateness of its aims, curriculum, and policies and procedures with respect to the following: its sponsor institution's mission and goals; local, state/provincial, regional, and national needs for psychological services; national standards for health service psychology; and the evolving evidence base of the profession.
        4. Identifies potential areas for improvement.

Supporting Material:

**Upload REQUIRED TABLE: Download Table 7 Program Graduates Internship and Dissertation\_Final Project template. Use this template to provide graduate internship/dissertation data. Please label upload as - TABLE 7 Program Graduates Internship and Dissertation\_Final Project. Note: For your convenience, the dataviews on this page include ARO data. Feel free to cut/paste these data into the required Table 7 upload.**

**Upload REQUIRED TABLE: Download Table 8 Program Graduates Employment template. Use this template to provide graduate employment data. Please label upload as - TABLE 8 Program Graduates Employment. Note: For your convenience, the dataviews on this page include ARO data. Feel free to cut/paste these data into the required Table 8 upload.**

Data Views:

**Table 7 (Some fields are automatically filled in by ARO data)**

**Table 8 (Some fields are automatically filled in by ARO data)**

Focused Questions

**Discuss how students are involved in the program evaluation process.**

**Discuss how faculty are involved in the program evaluation process.**

**Describe the program’s self-assessment processes and how all proximal and distal outcomes are used to evaluate the achievement of the program's aim(s) and the profession-wide and program-specific competencies. How does the program identify potential areas for improvement?**

**Provide specific examples of how both proximal and distal outcome data and other feedback have been used to modify the program, and how these modifications, in turn, have been evaluated.**

**How has the program monitored all areas noted in Section II.D.2.b and made programmatic changes, as appropriate?**

**Discuss how the program has responded to feedback from the CoA since the last accreditation review to demonstrate how the program uses self-assessment to make changes as needed.**

**II.D.3** **Documenting students’ achievements and outcomes that demonstrate the program’s effectiveness.**

All accredited doctoral programs are expected to document student achievement while in the program and to look at post-graduation outcomes. Accredited programs are also expected to prepare students for entry-level practice and the program's achievement of this should be reflected in student success in achieving licensure after completion of the program.

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Review: IR C-19 D: Licensure Rates for Doctoral Programs**

**Discuss the licensure rate of program graduates. Include the licensure rate that appears in the program's "Student Admissions, Outcomes, and Other Data" section of its public documents in the narrative, and ensure that the rates listed in the narrative and in the disclosure data are consistent.**

**II.(Al)**

Additional information relevant to Section II.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any Section II issues to specifically address "in the next self-study"? If so, provide your response here.**

**(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any other Section II issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the CoA and whether the CoA determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.**

**Standard III: Students**

**III.A. Student Selection Processes and Criteria**

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

Supporting Material:

**Upload samples of student recruitment announcements, letters, advertisements, etc. to document your program's efforts in recruiting diverse students.**

**Upload REQUIRED TABLE: Download Table 9 Student Statistics template. Please label upload as - TABLE 9 Student Statistics. Note: For your convenience, the dataviews on this page include ARO data. Feel free to cut/paste these data into the required Table 9 upload.**

**Upload REQUIRED TABLE: Download Table 10 Student Demographics template. Please label upload as - TABLE 10 Student Demographics. Note: For your convenience, the dataviews on this page include ARO data. Feel free to cut/paste these data into the required Table 10 upload.**

**Upload REQUIRED TABLE: Download Table 11 Educational History of Students Enrolled in Doctoral Program template. Please label upload as - TABLE 11 Educational History of Students Enrolled in Doctoral Program. Note: For your convenience, the dataviews on this page include ARO data. Feel free to cut/paste these data into the required Table 11 upload.**

**Upload REQUIRED TABLE: Download Diversity Recruitment and Retention Table (Students). Please label upload as – Diversity Table (Students)**

**Note: Applicant programs should make sure to include the most current information on their newest and/or incoming cohort in Tables 9, 10, and 11.**

Dataviews:

**Table 9 (All fields are automatically filled in by ARO data)**

**Table 10 (All fields are automatically filled in by ARO data)**

**Table 11 (All fields are automatically filled in by ARO data)**

Focused Questions:

**Review: IR C-21 D: Diversity Recruitment and Retention**

**Ensure consistency of student numbers across tables.**

**Discuss how the number of students is sufficient to ensure meaningful peer interactions, support, and socialization.**

**Describe the criteria the program uses to evaluate applicants and the quality of their prior achievement.**

**Discuss the strategies the program uses to ensure students are a good fit with the program.**

**Describe the systematic, multiple-year plan, implemented and sustained over time, designed to attract students from a range of diverse backgrounds. Specifically, the program must describe how it meets the following criteria:**

**a. The program must implement multiple specific activities, approaches, and initiatives designed to increase diversity among its students. It may participate in institutional-level initiatives aimed toward achieving diversity, but these alone are not sufficient.**

**b. The program should document the concrete actions it is taking to enhance diversity, identifying the areas of diversity recruitment in which it excels as well as the areas in which it is working to improve.**

**Describe the process by which the program examines the effectiveness of its efforts to**

**attract students who come from diverse backgrounds and document the steps it has**

**taken to revise/enhance its strategies.**

**III.B.1 Supportive Learning Environment**

1. Program faculty are accessible to students and provide them with guidance and supervision. They serve as appropriate professional role models and engage in actions that promote the students' acquisition of knowledge, skills, and competencies consistent with the program's training aims.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

**Discuss faculty accessibility, how faculty are appropriate role models, and how faculty engage in actions that promote attainment of program aims and competencies.**

**III.B.2**

The program recognizes the rights of students and faculty to be treated with courtesy and respect. In order to maximize the quality and effectiveness of students' learning experiences, all interactions among students, faculty, and staff should be collegial and conducted in a manner that reflects the highest standards of the scholarly community and of the profession (see the current APA Ethical Principles of Psychologists and Code of Conduct). The program has an obligation to inform students of these principles, put procedures in place to promote productive interactions, and inform students of their avenues of recourse should problems with regard to them arise.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

**Discuss the program’s efforts to ensure a supportive, collegial, and respectful environment for students.**

**Discuss how students are informed of the current APA Ethical Principles of Psychologists and Code of Conduct.**

**III.B.3**

To ensure a supportive and encouraging learning environment for students who are diverse, the program must avoid any actions that would restrict program access on grounds that are irrelevant to success in graduate training.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

**Discuss how the program ensures respect for cultural and individual diversity.**

**Briefly summarize the program’s response from Standard I.B.2 regarding how it avoids actions that restrict program access on grounds irrelevant to success in graduate training.**

**III.C. Plans to Maximize Student Success**

1. Program faculty engage in and document actions and procedures that actively encourage timely completion of the program and maximize student success. The program minimizes preventable causes of attrition (e.g., flawed admission procedures or unsupportive learning environments) and engages in tailored retention/completion efforts as appropriate (e.g., accommodation of student needs and special circumstances).

Dataviews:

**Table 12 (Some fields are automatically filled in by ARO data)**

**Table 13 (All fields are automatically filled in by ARO data)**

Supporting Material:

**Upload REQUIRED TABLE: Download Table 12 Students Present Status template. Please label upload as - TABLE 12 Students Present Status. Note: For your convenience, the dataviews on this page include ARO data. Feel free to cut/paste these data into the required Table 12 upload.**

**Upload REQUIRED TABLE: Download Table 13 Current Students Matriculating Beyond Their Seventh Year in the Program template. Please label upload as - TABLE 13 Current Students Matriculating Beyond Their Seventh Year in the Program.**

Focused Questions:

**Review: IR C-22 D: Student Attrition Rates for Doctoral Programs**

**Describe the program’s efforts and procedures to ensure timely completion of program.**

**Discuss any attrition and describe efforts to evaluate and minimize preventable causes of attrition.**

**III.C.2 Program Engagement**

The program engages in specific activities, approaches, and initiatives to implement and maintain diversity and ensure a supportive learning environment for all students. The program may participate in institutional-level initiatives aimed toward retaining students who are diverse, but these alone are not sufficient. Concrete program-level actions to retain students who are diverse should be integrated across key aspects of the program and should be documented. The program should also demonstrate that it examines the effectiveness of its efforts to retain students who are diverse and document any steps needed to revise/enhance its strategies.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Review: IR C-21 D: Diversity Recruitment and Retention**

**Each accredited program is responsible for making systematic, coherent, and long-term efforts to retain students from differing backgrounds. Describe how the program utilizes and implements multiple program-specific activities, approaches, and initiatives to maintain diversity among its student body. A program may include institutional-level initiatives aimed toward retaining students who are diverse, but these alone are not sufficient.**

**Describe the process by which it examines the effectiveness of its efforts to maintain students who come from diverse backgrounds and document the steps it has taken to revise/enhance its strategies.**

**Discuss how the program ensures a supportive and encouraging learning**

**environment appropriate for the training of individuals who are diverse and the**

**provision of training opportunities for a broad spectrum of individuals.**

**III.C.3 Feedback and Remediation**

Students receive, at least annually and as the need is observed for it, written feedback on the extent to which they are meeting the program's requirements and performance expectations. Such feedback should include:

* + - 1. timely, written notification of any problems that have been noted and the opportunity to discuss them;
      2. guidance regarding steps to remediate any problems (if remediable); and substantive, written feedback on the extent to which corrective actions have or have not been successful in addressing the issues of concern.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Referencing any relevant formal policy and procedure statements, the program should discuss policies that address:**

1. **Timely, written notification of all problems that have been noted and the opportunity to discuss them;**
2. **Guidance regarding steps to remediate each problem (if remediable); and**
3. **Substantive, written feedback on the extent to which corrective actions are or are not successful in addressing the issues of concern.**

**III.(Al)**

Additional information relevant to Section III.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any Section III issues to specifically address "in the next self-study"? If so, provide your response here.**

**(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any other Section III issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the CoA and whether the CoA determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.**

**Standard IV: Faculty**

**IV.A. Program Leadership, Administration, and Management**

**IV.A.1**

Leadership of the program is stable. There is a designated leader who is a doctoral-level psychologist and a member of the core faculty. The program leader's credentials and expertise are consistent with the program's mission and aims and with the substantive area of health service psychology in which the program provides training. More than one individual can hold this leadership position.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Describe credentials and expertise of the designated program leader(s). Identify how these are consistent with the program's aim(s).**

**IV.A.2**

The program leader(s) together with program core faculty have primary responsibility for the design, implementation, and evaluation of the program's administrative activities (e.g., policies and procedures for student admissions, student evaluations, and arrangement of practicum experiences) and for its educational offerings (e.g., coursework, practicum experiences, and research training).

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Describe how faculty members' theoretical perspectives and experiences are appropriate for the program's aim(s).**

**Describe how the competence and credentials of program faculty are aligned with the program's aim(s).**

**IV.B. 1-2 Faculty Qualifications and Role Modeling**

1. **Core Faculty.** The program has an identifiable core faculty responsible for the program's activities, educational offerings, and quality, who:
   1. function as an integral part of the academic unit of which the program is an element;
   2. are sufficient in number for their academic and professional responsibilities;
   3. have theoretical perspectives and academic and applied experiences appropriate to the program's aims;
   4. demonstrate substantial competence and have recognized credentials in those areas that are at the core of the program's aims;
   5. are available to function as appropriate role models for students in their learning and socialization into the discipline and profession.

1. **Additional Core Faculty Professional Characteristics**
2. Core faculty must be composed of individuals whose education, training, and/or experience are consistent with their roles in the program in light of the substantive area in which the program seeks accreditation.
3. Core faculty must be composed of individuals whose primary professional employment (50% or more) is at the institution in which the program is housed, and to whom the institution has demonstrated a multiyear commitment. At least 50% of core faculty professional time must be devoted to program-related activities.
4. Core faculty must be identified with the program and centrally involved in program development, decision making, and student training. "Identified with the program" means that each faculty member is included in public and departmental documents as such, views himself or herself as core faculty, and is seen as core faculty by the students.
5. Core faculty activities directly related to the doctoral program include program-related teaching, research, scholarship, and/or professional activities; supervising students' research, students' dissertations, and students' teaching activities; mentoring students' professional development; providing clinical supervision; monitoring student outcomes; teaching in a master's degree program that is an integral part of the doctoral program; and developing, evaluating, and maintaining the program.
6. Core faculty activities not directly related to the doctoral program and not seen as aspects of the core faculty role include undergraduate teaching in general and related activities; teaching and related activities in terminal master's or other graduate programs; and clinical work or independent practice not directly associated with training, such as at a counseling center.

Supporting Material:

**Upload REQUIRED TABLES: Download Table 14.a Core Faculty, Table 14.b Associated Faculty, and Table 14.c Other Contributors. Use these templates to provide required faculty information. Please label uploads as - TABLE 14.a Core Faculty, TABLE 14.b Associated Faculty, and TABLE 14.c Other Contributors Note: For your convenience, the dataviews on this page include ARO data. Feel free to cut/paste these data into the required Table 14 uploads.**

**Upload REQUIRED TABLES: Download Table 15 Faculty Demographics and Table 16 Professional Activities. Use these templates to provide information on faculty demographics and professional activities. Please label uploads as - TABLE 15 Faculty Demographics and TABLE 16 Faculty Professional Activities Table.**

* **Please note that core faculty must spend at least 50% of their professional time in program activities for the doctoral program. Only administrative activities directly related to the program may count as part of the 50% time commitment for core faculty. Participation on committees that are time-limited and necessary for the program to continue (e.g., committees to hire new faculty for the program; faculty retention, promotion, and tenure committees) can be counted as part of the activities related to the program. However, it is the program's responsibility to provide sufficient justification that these activities do indeed directly contribute to the program.**

**Upload the Individual Professional Activities Form Template (if applicable based on whether faculty indicated “Yes” to any of the last 5 columns in Tables 14.a-c) for all core faculty and those who teach required courses and/or provide training in the competency areas identified in Standard II.**

**Important reminders for completing Tables 14 a-c:**

* **Read the table instructions carefully for additional guidance regarding the information required for each faculty member/contributor.**
* **For each faculty member who regularly provides instruction for courses or experiences described under Standard II please briefly describe how that person is competent and/or credentialed to do so.**
* **If faculty member is identified as teaching a specific (required) course, ensure that there is a corresponding syllabus in Standard II.B.2.**

Dataviews:

**Table 14.a (Some fields are automatically filled in by ARO data)**

**Table 14.b-c (All fields are automatically filled in by ARO data)**

Focused Questions:

**Ensure faculty numbers are consistent across tables.**

**Provide criteria for membership in and participation of core and other faculty member groups.**

**Describe how core faculty members function as a unit to make decisions and provide oversight of the program.**

**IV.B.3 Associated and Adjunct Faculty**

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Review: IR C-23 D: Faculty Qualifications**

**Clarify the nature and function of non-core faculty. Include the criteria for membership in each faculty group, as well as the standards used to assess quality in each group.**

**IV.B.4 Faculty Sufficiency**

1. Consistent with the program's model, the program faculty, and in particular the core faculty, needs to be large enough to advise and supervise students' research and practice, conduct research and/or engage in scholarly activity, attend to administrative duties, serve on institutional or program committees, provide a sense of program continuity, provide appropriate class sizes and sufficient course offerings to meet program aims, and monitor and evaluate practicum facilities, internship settings, and student progress.
2. The program faculty, and in particular the core faculty, needs to be large enough to support student engagement and success within the program, from admissions, to matriculation, to timely completion of program requirements and graduation.
3. At least one member of the core faculty needs to hold professional licensure as a psychologist to practice in the jurisdiction in which the program is located.
4. The program faculty must themselves be engaged in activities demonstrating the skills they are endeavoring to teach their students, such as delivering psychological services, conducting psychological research, publishing scholarly work, presenting professional work at conferences/meetings, teaching classes/workshops, and supervising the professional work of others.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

**Discuss how the program has sufficient faculty to meet the needs of the program, and how the program determines this.**

**IV.B.5 Cultural and individual differences and diversity**

**IV.B.5.a Recruitment of Faculty who are Diverse**

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

Supporting Material:

**Upload REQUIRED TABLE: Download Diversity Recruitment and Retention Table (Faculty). Please label upload as – Diversity Table (Faculty)**

**Upload samples of faculty recruitment announcements, letters, advertisements, etc. to document your program's efforts in recruiting diverse faculty.**

Focused Questions:

**Review: IR C-21 D: Diversity Recruitment and Retention**

**Each accredited program is responsible for making multiple systematic, coherent, and long-term efforts to attract (i.e., recruit) faculty from differing backgrounds. Describe how the program has met the following criteria:**

**The program has developed a systematic, long-term plan to attract faculty from a range of diverse backgrounds and implemented it when possible (i.e., when there have been faculty openings). The program may participate in institutional-level initiatives aimed toward achieving diversity, but these alone are not sufficient. The program should document concrete actions it has taken to achieve diversity, addressing the areas of diversity recruitment in which it excels as well as the areas in which it is working to improve.**

**The program should describe the process by which it examines the effectiveness of its efforts to attract faculty who come from diverse backgrounds and document the steps it has taken to revise/enhance its strategies.**

**IV.B.5.b Retention of Faculty who are Diverse**

The program has program specific activities, approaches, and initiatives it implements to maintain diversity among its faculty. A program may include institutional-level initiatives aimed toward retaining faculty who are diverse, but these alone are not sufficient. The program demonstrates that it examines the effectiveness of its efforts to maintain faculty who are diverse and documents any steps needed to revise/enhance its strategies.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Review: IR C-21 D: Diversity Recruitment and Retention**

**Each accredited program is responsible for making multiple systematic, coherent, and**

**long-term efforts to retain faculty from differing backgrounds. Describe how the program**

**has met the following criteria:**

**The program has program-specific activities, approaches, and initiatives it implements to maintain diversity among its faculty. A program may include institutional-level initiatives aimed toward retaining faculty who are diverse, but these alone are not sufficient.**

**The program should describe the process by which it examines the effectiveness of its efforts to maintain faculty who come from diverse backgrounds and document the steps it has taken to revise/enhance its strategies.**

**IV. (Al)**

Additional Information relevant to Section IV.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any Section IV issues to specifically address "in the next self-study"? If so, provide your response here.**

**(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any other Section IV issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the CoA and whether the CoA determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.**

**Standard V: Communications**

**V.A. Public Disclosure**

**V.A.1 General Disclosures**

* + - 1. The program demonstrates its commitment to public disclosure by providing clearly presented written materials and other communications that appropriately represent it to all relevant publics. At a minimum, this includes general program information pertaining to its aims, required curriculum sequence, and the expected outcomes in terms of its graduates' careers, as well as data on achievement of those expected and actual outcomes.
      2. The program must disclose its status with regard to accreditation, including the specific academic program covered by that status, and the name, address, and telephone number of the Commission on Accreditation. The program should make available, as appropriate through its sponsor institution, such reports or other materials as pertain to the program's accreditation status.

Supporting Material:

**Upload a complete set of all program documents that provide information available to current and prospective students (flyers, brochures, program advertisements, web pages, etc.). If these have been uploaded in another section of the self-study, please identify in the narrative response below where these documents are located (e.g. Standard/ Attachment Name/Page #).**

Focused Questions:

**Review: IR C-24 D: Program names, labels and other public descriptors, IR C-25 D: Accreditation status and CoA contact information, and IR C-26 D: Disclosure of education/training outcomes and information allowing for informed decision-making to prospective doctoral students.**

**Describe how documents referenced in Standard V.A.1 are made available to applicants and students.**

**Indicate where in the program's public documents information on education and training outcomes can be found, consistent with IR C-26 D. As a reminder, these data must be updated annually and will be reviewed by the CoA as part of periodic program review.**

**Ensure that the current accredited status of the program is accurately presented in all public materials, including program web pages. Please reference where (i.e., page number, visual location) in each applicable document the program's accreditation status and the CoA's contact information is so it can be verified by reviewers.**

**V.A.2 Communication With Prospective and Current Students**

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

**Discuss how the program's public information allows for informed student decisions.**

**V.A.3 Communication Between Doctoral and Doctoral Internship Programs**

a. Throughout the internship year, communication between the doctoral program and the internship should be maintained. This ongoing interaction can remain largely informal, depending on the needs of the program and the trainee. The doctoral program should initiate this contact at the start of the training year.

b. Any formal, written internship evaluations must be retained in student files and used to evaluate the student competencies required for degree completion.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Describe the program's policy for communicating with internships that accept the program’s students.**

**Describe the process for maintaining files of internship evaluations and have sample communications ready for site visitors to review.**

**Describe how internship evaluations are used to review and make program adjustments.**

**V.B Communication and Relationship With Accrediting Body**

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

**V.B.1 Adherence**

The program must abide by the accrediting body's published policies and procedures as they pertain to its recognition as an accredited program. The program must respond in a complete and timely manner to all requests for communication from the accrediting body, including completing all required reports and responding to all questions.

1. **Standard Reporting.** The program must respond to regular, recurring information requests (e.g., annual reports and narrative reports) as required by the accrediting body's policies and procedures.
2. **Nonstandard Reporting.** The program must submit timely responses to any additional information requests from the accrediting body.
3. **Fees.** The program must be in good standing with the accrediting body in terms of payment of fees associated with the maintenance of its accredited status.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Since the program's last site visit (if applicable), have there been any changes in the program's, or the sponsor institution's, mission or resources, or in the doctoral program's processes or practices, or other issues that have influenced the quality of the doctoral program, the faculty, or the students' experiences? If so, describe them.**

**Describe the program's status with regard to financial responsibility to the accrediting body. Applicant programs should note if the application fee has been paid. Accredited programs should note whether annual fees have been paid in a timely manner.**

***Note for applicant programs: It is the program’s responsibility to ensure it contacts the Office of Program Consultation and Accreditation to request an invoice and pay the application fee. The self-study will not be processed/reviewed until receipt of the application fee.***

**V.B.2 Communication**

The program must inform the accrediting body in a timely manner of changes in its environment, plans, resources, or operations that could alter the program's quality. This includes notification of any potential substantive changes in the program, such as changes in practice area or degree conferred or changes in faculty or administration.

Supporting Material:

**Accredited programs only: Upload all correspondence to/from CoA since the time of the last decision letter, including notifications of non-compliance with IR D.4-7 b “Thresholds for Student Achievement Outcomes in Doctoral Programs.”**

Focused Question:

**Does the program or its host institution have any plans that might substantially change the nature, function, or mission of the doctoral program in the foreseeable future? Describe these plans and their potential consequences to the program's accreditation status.**

**If over the course of the review period the program has received notification of noncompliance with one or more of the IR D.4-7 b “Thresholds for Student Achievement Outcomes in Doctoral Programs”, the program is asked to upload any associated notifications and responses and describe the way(s) in which it responded to such notifications.**

**V.(Al)**

Additional Information relevant to Section V.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any Section V issues to specifically address "in the next self-study"? If so, provide your response here.**

**(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any other Section V issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the CoA and whether the CoA determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.**