

## GENERAL OPERATING PROCEDURES

### 1. REAFFIRMATION FOR CONTINUED ACCREDITATION

Accredited programs are reviewed annually by written report and by the data provided annually to the Commission on Accreditation (CoA). Accredited programs are also assessed an annual fee. In addition, each accredited program undergoes a more extensive periodic review that involves a self-study report and a site visit.

Immediately following the site visit, the program is assessed a site visit fee. Instructions for preparing annual reports and the periodic self-study reports are sent to programs by the Office of Program Consultation and Accreditation, in accordance with the CoA directions.

#### 1.1 Annual Review (Reaffirmation)

Annual reaffirmation of a program's accredited status is based on the CoA's review of any narrative annual report information requested and the data provided in the Annual Report Online, as well as a signed assurance of the program's continued adherence to the *Standards of Accreditation for Health Service Psychology* (SoA). If the program does not provide assurance of adherence to the SoA, if the Annual Report Online is incomplete or missing, or if any information provided by the program raises questions about the program's continued consistency with the SoA (including any information or actions that may have been taken by regional accrediting bodies or state agencies regarding the institution's accreditation and/or authority to grant degrees), the CoA may, at any time, request additional information or an invitation for a special site visit. The CoA's request for a special site visit will state the explicit reasons why a site visit is needed, although any subsequent review by the CoA may not be limited to these issues.

#### 1.2 Periodic Review

The CoA schedules the year of the next site visit for accredited programs at the time an accreditation decision is made. In preparation for that review, programs are expected to prepare a self-study report demonstrating their continued consistency with the SoA.

Upon receipt of a self-study report in anticipation of the periodic review, the staff will review the self-study report to determine the extent to which the materials include information responsive to the self-study instructions and take one of the following actions:

- a. Authorize a site visit;
- b. Postpone approval for a site visit, pending receipt of additional information from the program; or
- c. Refer to the CoA for full review. Following this review, the CoA may choose among the following decision options:
  1. Authorize a site visit (questions may be provided to the program and to the site visitors for consideration during the site visit); or
  2. Defer authorization pending receipt of additional information and/or clarification of the self-study materials.

Specific information is provided for the review processes at each level of accreditation in the *Accreditation Operating Procedures* by level.

### 1.3 Withdrawal From Accredited Status

A program may request to voluntarily withdraw from accredited status at any time by advising the CoA of its intent in writing in advance of the requested withdrawal date. Programs requesting voluntary withdrawal will be placed on the next CoA agenda for official vote of the program's change in accredited status.

In addition, the CoA has the authority to delete a program from the list of accredited programs when the CoA concludes that the program is no longer in existence. In such instances, the program will receive prior notification of the pending action.

Furthermore, accredited programs assume the responsibility and obligation to provide certain information and payments to the CoA in a timely manner as set forth in the SoA and these *Accreditation Operating Procedures*. An accredited program will be deemed to have decided to voluntarily withdraw from accreditation, thereby terminating its accredited status, if it fails to satisfy any of the following requirements:

- a. Providing a self-study by the designated due date (see Section 8 M; 8 D; 8 I; and 8 P);
- b. Scheduling a site visit to allow completion of the periodic review before the end of the program's accreditation review cycle as designated by the CoA (see Section 7 M; 7 D; 7 I; and 7 P);
- c. Submitting its annual report by the designated due date (see Section 1.1);
- d. Submitting payment of its annual fee by the designated due date; or
- e. Failing to submit information requested in the course of program review by the designated due date (see Section 8 M; 8 D; 8 I; and 8 P).

If delay in meeting these requirements is based on exceptional circum-

stances beyond the control of the program that preclude the program from meeting its accreditation responsibilities, the chief executive officer or the president of the institution in which the program is located may apply to the CoA (or its Executive Committee<sup>1</sup> if authorized by the CoA) with supporting evidence for an extension of the deadline.

The CoA will confirm the withdrawal of a program in writing no later than 30 days in advance of the effective date of the program's withdrawal from accreditation. The program will have a final chance to respond to this correspondence. The effective date of withdrawal will be deemed as no more than 60 days after the program has withdrawn from accreditation by failing to meet its obligations as an accredited program. The CoA will notify the public of the change in status. A program that has withdrawn under this provision retains the right to reapply subsequently as an applicant.

## 2. APPEAL OF A DECISION

### 2.1 Appealable Decisions

The Board of Educational Affairs (BEA) of the APA serves as the appeal agent for CoA decisions.

The following decisions may be appealed:

- a. Denial of a site visit upon application for "accredited, on contingency" or initial "full accreditation"
- b. Denial of "accredited, on contingency" status
- c. Denial of "full accreditation"
- d. Accredited, on probation
- e. Revocation of accreditation
- f. Withdrawal, based on lack of adherence to the provisions of Section 1.3

### 2.2 Filing an Appeal

The chief executive officer of a master's or doctoral program's host institution or the responsible administrative officer of an internship or postdoctoral residency program may challenge an appealable decision within 30 days of receipt of written notice of the CoA decision. The written notice must identify the specific grounds upon which the appeal is made, which must be either a procedural violation or substantive errors by the CoA in its review of the program's consistency with the SoA. The appeal should be addressed to the president of the APA. A nonrefundable appeal fee will be charged to the appellant program, such fee to be submitted with the program's letter of appeal.

### 2.3 Appointment of Appeal Panel

Within 30 days of receipt of the program's letter of appeal, the APA Board of Educational Affairs will provide the program with a list of six potential appeal panel candidates, none of whom will

<sup>1</sup> Throughout this document, CoA may refer to the Commission on Accreditation in its entirety, the CoA Executive Committee, or its duly authorized representative(s).

have had affiliation with the program filing the appeal or with the accreditation process related to the program. The Office of Program Consultation and Accreditation will determine the willingness of the potential panel members to serve and notify the program to that effect. Within 15 days, the program will select three panel members from this list to serve as its appeal panel, one of whom will be a public member. If the program does not notify the Office of Program Consultation and Accreditation of its selection within 15 days, the Board of Educational Affairs will designate three members to serve on the appeal panel. Consistent with policies adopted by the Board of Educational Affairs, the program and the CoA will have an opportunity to participate in a *voir dire* of the panel and to challenge any of the designated panelists for due cause (e.g., conflict of interest, bias, or other prejudicial infirmity).

## 2.4 Scope and Conduct of Appeal

An appeal is not a *de novo* hearing, but a challenge of the decision of the CoA based on the evidence before the CoA at the time of its decision. The CoA's decision should not be reversed by the appeal panel without sufficient evidence that the CoA's decision was plainly wrong or without evidence to support it.

Accordingly, the appeal panel should not substitute its judgment for that of the CoA merely because it would have reached a different decision had it heard the matter originally.

The procedural and substantive issues addressed by the appeal panel will be limited to those stated in the program's appeal letter. If an issue requires a legal interpretation of the Commission on Accreditation's procedures or otherwise raises a legal issue, the issue may be resolved by APA legal counsel instead of the appeal panel.

Only the facts or materials before the CoA at the time of its final decision may be considered by the panel. The panel will be provided with only those documents reviewed by the CoA in making its decision, the letter that notified the program of the CoA decision, the letter of appeal, written briefs submitted by the program, and reply briefs submitted by the CoA. The letter of appeal and written briefs shall not refer to facts or materials that were not before the CoA. Deliberative and other internal documents prepared for purposes of CoA's review are not part of the record and shall not be considered on appeal.

The program will be provided a final listing of the record before the CoA and a copy of the record at least 30 days before the date of the appeal hearing. If the program objects to the record or wishes to refer to any fact or material not included in that record, it must notify the Office of Program Consultation and Accreditation at least 15 days prior to the hearing so that the issue can be resolved by APA's legal counsel.

The appeal panel will convene a hearing at APA during one of three prescheduled appeal panel hearing dates. In addition to the three members of the appeal panel, the appeal hearing will be attended by one or more program representatives, one or more representatives of the CoA, and staff of the Office of Program Consultation and Accreditation. Separate legal counsel may also accompany either party, the program, or the CoA.

When legal counsel attends and participates in the hearing, it is with the understanding they recognize the proceedings are not a judicial forum, but a forum to review the CoA's decision in terms of procedural violations or substantive error.

APA's legal counsel will also attend the hearing. In addition to advising APA, counsel has responsibility to assure compliance with the *Accreditation Operating Procedures* and may resolve legal or procedural issues or can advise the panel regarding those issues.

## 2.5 Decision and Report of Appeal Panel

The CoA's decision should be affirmed unless (a) there was a procedural error and adherence to the proper procedures would dictate a different decision; or (b) based on the record before it, the CoA's decision was plainly wrong or without evidence to support it. The appeal panel has the options of (a) upholding the CoA decision, (b) amending the CoA decision, or (c) remanding the matter to the CoA to address specific designated issues before final action.

The report of the appeal panel will state its decision and the basis of that decision based on the record before the panel. The report of the panel will be addressed to the president of the APA and sent within 30 days of the hearing. Copies will be provided to the chief executive officer of the master's or doctoral program's host institution or to the responsible administrative officer of an internship or postdoctoral residency program, the chair of the CoA, the chair of the Board of Educational Affairs, and the Office of Program Consultation and Accreditation.

## 2.6 Review of Adverse Action Based Solely on Financial Deficiencies

Where an adverse CoA decision is based solely on failure of the program to meet an agency standard pertaining to finances, the program will have one opportunity to seek review of new information by the Commission. The CoA will undertake such a review only where the program can establish, to the CoA's satisfaction, that there is new financial information that (a) was unavailable to the program until after the CoA reached its decision and (b) is significant and bears materially on the financial deficiencies identified by the CoA as the reason for the adverse action. Such a request for review must be received prior to the adverse action becoming final or any appeal hearing, whichever is earlier. A program may seek the review of new financial information as described above only once. Any determination by the CoA made with respect to review requested under this provision does not provide a basis for appeal.

# 3. COMPLAINTS

## 3.1 Complaint Against an Accredited Program

The procedures for handling complaints against accredited programs are intended to deal only with complaints based on purported lack of program consistency with the *Standards of Accreditation for Health Service Psychology* (SoA). It is not a mechanism for adjudication of disputes between individuals and programs. The CoA

cannot, for instance, direct a program to change a grade, readmit a student or reinstate a faculty member. For resolution of these disputes, complainants are encouraged to follow their institution's due process and grievance procedures.

### 3.1.1 Filing a Complaint

For timely resolution, complainants are encouraged to file their complaints as soon as possible after the alleged noncompliance comes to their attention. When inquiries are received by the Office of Program Consultation and Accreditation, copies of the SoA, *Accreditation Operating Procedures*, and a complaint summary form will be sent to the person making the inquiry. To be processed, all complaints must:

- a. Be written and signed;
- b. Identify the individual, group, or legal entity making the complaint;
- c. Present evidence that the subject program is not consistent with one or more of the SoA's components;
- d. Describe the status of legal action, if any, related to the complaint; and
- e. Grant permission to send the complaint, in its entirety, to the program.

### 3.1.2 Timelines for Filing a Complaint

For students, interns, postdoctoral residents, or individuals complaining on their behalf, complaints must be filed in writing within 18 months of leaving their program (either through withdrawal, termination, or graduation/completion). Complaints filed by individuals not included above must be filed in writing within one year from the time that the alleged noncompliance occurred.

### 3.1.3 Processing of a Complaint

Receipt of a complaint meeting these requirements will be acknowledged in writing by the Office of Program Consultation and Accreditation within 30 days of receipt and sent to the program at the same time that acknowledgment of receipt is forwarded to the complainant. The program will be given 30 days to respond.

Complainants are encouraged to submit all available supporting information at the time the complaint is filed, rather than providing supplemental information at a later date. The program's response must be from the program itself and not from any third party acting for the program. The complainant may be asked to respond to information provided by the program but will not receive a copy of materials provided by the program.

### 3.1.4 CoA Action

The CoA will review the complaint at its first regularly scheduled meeting held after the receipt of the program's response. After review, the CoA may act upon the complaint or defer action pending receipt of additional information. The CoA may act upon the complaint in any of the following ways:

- a. Request an invitation for a special site visit to investigate the complaint;
- b. Request additional information from the program;

- c. Send an informative letter to the program, the complainant, or both;
- d. Notify the program that no action is required by the program; or
- e. Such other action as, in the judgment of the CoA, is appropriate under the circumstances.

The CoA will communicate its action on the complaint, in writing, to the complainant and the program.

## 3.2 Complaint Against Accreditation Site Visitor(s)

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

### 3.2.1 Filing a Complaint

The director of training of a program, with notice to the chief executive officer of a doctoral program's host institution or the responsible administrative officer of an internship or postdoctoral residency program, may file a complaint regarding the actions of site visitors.

The director of training must notify the Office of Program Consultation and Accreditation of the institution's or program's intent to file a complaint within 30 days after the completion of the site visit.

Subsequently, the complaint must:

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

### 3.2.2 Processing of a Complaint

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

### 3.2.3 CoA Action

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

- a. Dismiss the complaint;
- b. Reprimand the site visitor(s), which may include deletion from the list of potential site visitors maintained in the Office of

Program Consultation and Accreditation;

- c. Pursue the matter further, either by further inquiry of the parties involved or by means of a special fact-finding sub-commission of the CoA, to provide additional information upon which to base a decision; or
- d. Take other action as, in the judgment of the CoA, is appropriate under the circumstances.

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

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

### 3.3 Complaint Against the Commission on Accreditation

There may be instances in which a party or parties desire to formally express dissatisfaction with actions of the Commission on Accreditation. These concerns may be expressed through the following avenues where the CoA action at issue is not subject to appeal per Section 2 (Appeal of a Decision):

- a. When the CoA has completed a periodic review, with a resulting decision to deny an initial site visit, deny or revoke accreditation, or grant “accredited, on probation” status, the affected program may formally appeal the decision as set forth in Section 2 of the *Accreditation Operating Procedures*.
- b. Individuals, groups, or programs may wish to make a complaint or to raise issues regarding CoA activities, operations, or policies. This may be accomplished by:
  - 1. Expressing the concern or issue through APA governance, including the Board of Educational Affairs (BEA), the Board of Directors, and/or the Council of Representatives; or
  - 2. Written communication with the CoA through the Office of Program Consultation and Accreditation.

If the complaint is directed to the CoA, the CoA will take action on such written communication in the same manner in which it processes complaints against the actions of accredited programs, as specified in Section 3.1 of the *Accreditation Operating Procedures*, to the extent relevant. If the complaint is directed to an APA governance group other than the BEA, the matter will be referred to BEA for handling. The BEA will be responsible for resolving the complaint. BEA will provide CoA an opportunity to respond to the complaint before acting on the complaint and will seek additional information from the complainant or the CoA.

- c. Parties also have the option of filing third-party testimony with regard to the CoA's petition for continued recognition by the U.S. Secretary of Education at such time as a petition is reviewed. Those desiring to do so should contact the U.S. Department of Education's Office of Accreditation and State Liaison.

## 4. THIRD-PARTY COMMENT/TESTIMONY – PROVISION OF THIRD-PARTY TESTIMONY RELATED TO INITIAL OR PERIODIC REVIEW FOR ACCREDITATION

The U.S. Secretary of Education's criteria for recognition activities states: “In providing public notice that an institution or program subject to its jurisdiction is being considered for accreditation or preaccreditation, the agency must provide an opportunity for third party comment concerning the institution's or program's qualifications for accreditation or preaccreditation.” The following section outlines the steps that will be taken by the CoA, consistent with the Secretary's requirements.

### 4.1 Provision of Third-Party Comment

- a. The CoA will provide public notice of all programs scheduled for initial or periodic review prior to the beginning of each review year.
  - 1. In the case of programs applying for continued accreditation, such notice will appear on the accreditation website and will include a summary of the accreditation guidelines, along with instructions that questions regarding testimony be directed to the Office of Program Consultation and Accreditation. Such notice may also appear on related web pages with information for students/interns/residents.
  - 2. In the case of programs applying for initial accreditation (whether “full” or “contingent”), the CoA will provide public notice of all programs that have submitted initial application materials. Such notice will appear on the accreditation website and may appear on related web pages with information for students/interns/residents.
- b. Deadlines for receipt of third-party testimony will be given in the notice. The deadlines will be determined according to the following formula: the due date of self-study reports for programs in each review cycle, plus 5 additional working days.
- c. All third-party testimony must state the name of the person(s) or the party(ies) represented by the testimony. Issues addressed in the testimony must be limited to a program's consistency with the SoA. All testimony must be in writing and is limited to 10 pages.
- d. All third-party testimony made on a program will be incorporated into the preliminary review process, as governed by Sections 6 M, 6 D, 6 I, and 6 P of the *Accreditation Operating Procedures*. The testimony provided will be forwarded to the program, which will be given the opportunity to comment in writing no later than 1 month prior to the meeting during which the review will occur. Should no comments be received from the program during this time, the CoA will consider the testimony to be undisputed.
- e. The CoA will consider all third-party testimony and program comments part of the record for purposes of program review and decision. Consideration of the testimony will be governed by Section 4 of the *Accreditation Operating Procedures*.



- f. Third-party testimony is not to be confused with the complaint process. Although both deal with a program's consistency with the SoA, the complaint process differs in many respects:
1. The process and actions to be taken with the CoA in the review of a complaint are governed by Section 3.1.3 of the *Accreditation Operating Procedures*;
  2. Complaints may be filed only against the operations of an accredited program and not against those reviewed for initial accreditation;
  3. Submission of third-party testimony can be made only in the context of a program's review for initial or continued accreditation, as appropriate;
  4. Third-party testimony may be filed on behalf of a program as well as against it; and
  5. A program has the option of declining to respond to third-party testimony.

Attention will be invited to the existence of the complaint process, with instructions to contact the Office of Program Consultation and Accreditation should questions arise.

#### **4.2 Provision of Third-Party Information for the Identification of Incorrect/Misleading Information Released by an Accredited or Applicant Program**

- a. The CoA provides for the public correction of incorrect or misleading information released by an accredited or applicant program about:
  1. The program's accreditation status;
  2. The contents of reports of site team visitors; and
  3. The CoA's accrediting actions with respect to the program.
- b. The procedure for providing such correction is as follows:
  1. All third-party testimony must state the name of the person(s) or the party(ies) represented by the testimony. Issues addressed in the testimony must identify the incorrect/misleading information alleged to have been provided by the program. All testimony must be in writing and is limited to 10 pages. If the information appeared in print form, a copy of the document in question should accompany the testimony.
  2. The third-party testimony will be forwarded to the program alleged to have supplied the information, and the program will have the opportunity to comment in writing no later than one month from the program's receipt of the CoA's letter. Should no comments be received from the program during this time, the CoA will consider the testimony to be undisputed.
  3. Upon receipt of a response from the program or in the absence of a response, one month after the program's receipt of the CoA's letter, the CoA will review the testimony and any program response. If a misleading instance is verified, the program will be informed by

the CoA, in writing, that the program's actions are not consistent with the SoA. The CoA reserves the right to take further action with regard to the program, consistent with the *Accreditation Operating Procedures*, as may be appropriate under the circumstances.

4. In those instances in which incorrect/misleading information has been verified, the CoA will provide public correction of such information via its website. This public announcement will include a summary of the information released by the program, accompanied by the CoA's clarification/correction of the information (subject to its procedures regarding confidentiality and public disclosure of information).

### **5. CONFIDENTIALITY AND PUBLIC DISCLOSURE OF INFORMATION**

An up-to-date listing of all applicant programs will be regularly available on the accreditation website. Included in all published materials will be the identity of programs whose accreditation has been denied, or revoked, as well as those voluntarily withdrawing from accredited status. The CoA will make public notice of all accreditation decisions no later than 30 days following the CoA meeting at which the decisions were made. In the case of programs for which appealable decisions have been reached, and appeal has been filed, the CoA will note that the decision is under appeal.

CoA decisions including accreditation actions, deferrals, and adverse actions, and a list of any standards to which a program is required to respond, will be disclosed in the directory of accredited programs on the accreditation website. The CoA will share the accreditation status of programs with regional and specialized accrediting bodies as appropriate. All other information, and the records used in accreditation decisions, will be kept confidential by the CoA.

The Commission will identify and make public, as appropriate, all applicant programs applying for initial review by the CoA for "accredited, on contingency" or "full accreditation" to allow for third-party comment.

The CoA will notify the Department of Education of any accredited program that the CoA has reason to believe is failing to comply with financial aid responsibilities as outlined in Title IV of the Higher Education Act, or any purported fraud and abuse by accredited programs, and its reasons for such concern. The CoA also will take action to correct in a timely manner any incorrect or misleading information released by an accredited program about the accreditation status of the program and the CoA's accrediting actions with respect to the program.

In addition, the Office of Program Consultation and Accreditation will make disclosure as required by the U.S. Department of Education and in those instances when the CoA is legally required to disclose such information.

# MASTERS ACCREDITATION OPERATING PROCEDURES

## 6.M MASTER'S APPLICATION FOR INITIAL ACCREDITATION

### 6.1 M Master's Application

All programs can seek review of “accredited, on contingency” before seeking full accreditation. Master's programs seeking “accredited, on contingency” must be reviewed on all aspects of the SoA, which involves submission of a self-study and a site visit. “Accredited, on contingency” is granted to a master's program when the program demonstrates initial evidence of educational quality consistent with the SoA and the capacity to meet all accreditation standards in the designated time frame. Review for this status requires matriculation of students, evaluations of students in clinical experiences, evidence of the integration of science and practice, and significant resource allocation. To move from “accredited, on contingency” status to “fully accredited,” the master's program must submit a new self-study for a second site visit within 5 years of being granted “contingent” accreditation.

Applicants for initial accreditation begin the process by submitting a self-study report. Instructions for preparing the report are provided by the Office of Program Consultation and Accreditation.

Applications may be submitted to the Office of Program Consultation and Accreditation at any time during the year and must be accompanied by a nonrefundable application fee.

### 6.2 M Review for Initial Site Visit

Upon receipt of an initial application for “accredited, on contingency,” or “full accreditation” status, the Office of Program Consultation and Accreditation will confirm receipt of the required application fee.

The accreditation process for “accredited, on contingency” or “full accreditation” begins with a review by staff of the application in terms of the extent to which the materials include information responsive to the self-study instructions.

Following review of the application for “accredited, on contingency” or “full accreditation,” one of the following actions will be taken:

- a. Authorize a site visit after approval by CoA reviewers;
- b. Defer authorization pending receipt of any missing self-study materials;
- c. Refer to the full CoA for review. Following this review, the CoA may choose among the following decision options:
  1. Authorize a site visit (questions may be provided to the program and to the site visitors for consideration during the site visit);
  2. Defer authorization pending receipt of additional information and/or clarification of the self-study materials; or
  3. Deny a site visit (see Section 2.1).

The CoA is solely responsible for selecting among the above actions in response to the review of the application.

### 6.3 M Withdrawal of Application for Accreditation

A program may withdraw its application without prejudice at any time before the CoA makes an accreditation decision.

## 7.M MASTER'S SITE VISIT

Site visits are conducted as part of the review for initial “accredited, on contingency” or initial “full accreditation” of a master's program and as part of the periodic review of an accredited program. For accredited master's programs, the CoA will request an invitation to schedule a site visit from the chief executive officer of the institution in which a master's program is housed.

For accredited programs, the submission of a self-study serves as the formal invitation to site visit the program and conduct an accreditation review. For applicant programs, the accreditation application serves as the formal invitation to site visit the program and conduct an accreditation review.

If a site visit is not arranged within the assigned review cycle and thus precludes the program from meeting its accreditation responsibilities, the program will be deemed to have withdrawn from accredited status at the end of the review cycle (in accordance with Section 1.3).

Within the calendar year in which they are scheduled for a periodic review by the CoA, accredited master's programs will be assigned randomly to one of two review cycles for their site visits. The specific dates of the site visit within the cycle are chosen by the program. A change of cycle may be requested by the program in writing to the chair of the CoA for exceptional circumstances only.

Programs that have received authorization for an initial accreditation site visit will be assigned to the next available review cycle.

### 7.1 M Site Visit Team

The Office of Program Consultation and Accreditation will maintain a database of potential site visitors appointed by the CoA. Training will be provided for site visitors, and their performance will be evaluated by the CoA regularly, based on information from programs and other relevant sources.

The CoA is responsible for assigning site visitors, but will give notice to the program and provide an opportunity for the program to communicate its views and any objections regarding site visitor selection.

#### 7.1.1 M Special Site Visit

The Commission on Accreditation may vote to conduct a special site visit in lieu of or in addition to a regular site visit to the program in keeping with its mandate to protect the public and maintain program quality. The special site visit is viewed by the Commission as an opportunity to interact directly with the program. It affords the Commission the opportunity to collect information as to the program's operation and to address questions that are not fully answered by the record before the Commission. In that regard, special site visits are intended to be beneficial to both the Commission and the program. A special site visit team may include one or more members of the Commission or other individuals selected by the Commission.

### 7.2 M Site Visit Report and Program Response

Within 30 days of the completion of the visit, the site visit team will deliver to the Office of Program Consultation and Accreditation a report in a format prescribed by the CoA. The report will address the program's consistency with the SoA and address any questions posed by the CoA before the visit. The site visit team may, at its discretion, provide the CoA with evaluative comments related to the program's strengths and weaknesses and overall consistency with the SoA but should not make a specific accreditation recommendation. It should be clear to the program, however, that evaluative comments represent the opinions of the site visitors and do not represent an accreditation decision.

After the site visit report is submitted, any communications between the site visit team and the program regarding the site visit must be conducted through the Office of Program Consultation and Accreditation rather than directly between the site visit team and the program.

A copy of the site visit report will be provided to the program. The program should confirm that it has received the report. The program may also provide written comment or response to any aspect of the report. Such response must be delivered to the Office of Program Consultation and Accreditation within 30 days of receipt of the report by the program or its host institution. Upon written request by the program, the period for responding may be extended by the chair of the CoA for an additional period not to exceed 30 days. The CoA will proceed with the review of a program



once it has received the program's response. In the absence of a response from the program within the allotted time, the CoA will proceed with the review of the program.

In its response to the site visit report, the program should correct any errors of fact and provide evidence to counter anything in the report with which the program does not concur. Any statements of fact in the report that are not challenged in the program's response may be considered by the CoA to be undisputed. The CoA will review the site visit report and all other relevant documents that it has received, and after considering all elements of the program review, will accept sole responsibility for the accreditation decision.

## 8.M PERIODIC REVIEW BY THE COA

A periodic review by the CoA is one in which a decision may be made about a program's accreditation status. The periodic review follows submission of (a) a self-study report by the program, (b) site visit report, and (c) the program's response to the site visit report. These requirements apply equally to programs making initial application for accreditation and those seeking continuation of accredited status.

### 8.1 M Guiding Principles of the Periodic Review

In all reviews, the CoA will be guided by the following general principles:

- a. Should a member of the CoA be in actual or potential conflict of interest with respect to a program scheduled for review, that member will be recused during discussion and decision making on that program;
- b. A high degree of professional judgment will be exercised by the CoA as to whether the program is fulfilling acceptable, publicly stated objectives, consistent with the SoA.

Before making an accreditation decision, the CoA will review the program's most recent self-study report, the most recent site visit report, the program's response to that report, and any other records of relevance that the program has submitted and any third-party comments and responses to those comments that have been received (consistent with Section 4 of these procedures).

In making a decision, the CoA will also consider the program's outcomes in light of the program's stated educational aims and the importance of ensuring that students are adequately prepared for entry into practice.

### 8.2 M Accreditation Statuses and Decision Options

The following decisions are available to the CoA with respect to the accredited status of a master's program:

- a. "Accredited, on contingency" is an accredited status that designates a master's program that, in the professional judgment of the CoA, is consistent, substantively and procedurally, with the SoA in terms of the commitment to a program of study for all students with demonstrated sup-

port of the administration, evidence that there is capacity to ensure that all students demonstrate appropriate discipline-based knowledge, and that the program has appropriate and adequate resources for all students to become competent in the profession-wide competencies. Thus, the master's program must have a sequence of training and a curriculum map in place, including syllabi for required courses. A master's program that is "accredited, on contingency" must provide outcome data for students in the program within 3 years of receiving "accredited, on contingency" status. Failure to do so will lead to the program being deemed to have withdrawn from accreditation. The maximum amount of time a master's program can be on "accredited, on contingency" is 5 years in total.

- b. "Accredited" (or "fully accredited") designates a program that, in the professional judgment of the CoA, is consistent, substantively and procedurally, with the SoA. Accredited programs are scheduled for periodic review at intervals of up to 10 years.
- c. "Accredited, inactive" designates a master's program that has not admitted students for 2 successive academic years or has provided the CoA with notice that it has decided to phase out and close the program.

Requests for inactive status are granted by the CoA for one year at a time. Request for renewal of inactive status must be done prior to the beginning of the academic/training year. Programs not granted renewal of inactive status are given notice that they are no longer compliant with the provisions of accreditation and then may be placed on probation.

- d. "Accredited, on probation" serves as notice to the program, its students, and the public that in the professional judgment of the CoA, the accredited program is not currently consistent with the SoA and may have its accreditation revoked.

Before this decision, the program will be given an opportunity to *show cause* why it should not be placed on probation by providing a written response to the issues of concern. The program's show cause response will be reviewed two CoA meetings after the program was provided the show cause notice. Programs that are still not in compliance at the time of the CoA's review are then placed on "accredited, on probation" status.

Following placement on "accredited, on probation" status, the program is given a time by which to comply with the issues identified by the CoA in the probation decision. Master's programs must provide a response to the issues within four CoA meetings after the probation decision was reached.

- e. "Revocation of accreditation" is considered by the CoA to be an adverse action. It designates a program that has previously been placed on "accredited, on probation" status and for which the CoA has evidence that the program continues to be substantively inconsistent with the SoA at the time of its review of the program's response to the probation. A decision to revoke a program's accreditation reflects the CoA's deter-

mination that the program will not become consistent with the SoA within a reasonable time.

- f. “Denial of accreditation” is considered by the CoA to be an adverse action. It designates an applicant program which, in the professional judgment of the CoA, is substantively inconsistent with the SoA. Before this decision, the program is given an opportunity to show cause why it should not be denied accreditation through a written response to the issues of concern.
- g. “Denial of a site visit” is considered by the CoA to be an adverse action. It designates an applicant program that, in the professional judgment of the CoA, is not ready for a site visit. Before this decision, the program is given an opportunity to show cause why it should not be denied a site visit through a written response to the issues of concern.

### 8.3 M Decision Process

A quorum of the CoA, two-thirds of its members, must be present at a scheduled meeting to make an accreditation decision on a program. If a CoA member has recused him/herself from a portion of the meeting because of a conflict or perceived conflict of interest, that person will not be counted in determining a quorum. Accreditation decisions reflect the majority view of CoA members.

In the case of a program initially applying for accreditation (either “full” or “contingent”), the CoA will determine whether to grant or deny the program accreditation. In the case of an accredited program, the CoA will determine whether to reaffirm the program’s present status. When a program’s current accredited status is not renewed, it will automatically become a program whose status is “accredited, on probation.”

In the case of an accredited program that has been placed on probation, the CoA will determine whether to restore the program’s status from “accredited, on probation” to “accredited” or revoke accreditation. A program returned to accredited status will have a self-study due one year after receipt of the decision for a full review and site visit. A program that does not have its status restored to “accredited” will have its accreditation revoked. In extraordinary circumstances, if the CoA determines that the program has made significant progress on most of the probation issues but needs additional time to implement changes, the CoA may vote to continue a program on probation for good cause. The length of the extension will be determined by the CoA depending on the program’s circumstances for coming into full compliance but may not exceed one year. A program may not be continued on probation more than once in a single review cycle.

**Deferral for information:** Whenever it deems appropriate, the CoA may defer making a decision about a program in order to obtain more information. Further, when in the CoA’s judgment, significant disparity exists between the site visit report and information provided in the program’s response to that report, the CoA will defer making a decision and seek additional information to resolve the difference. Further, the Commission may seek additional information through a request for an invitation to conduct a special site visit. When a decision is deferred for information, the CoA will noti-

fy the program in writing and specify what additional information is needed to determine the program’s consistency with the SoA. The CoA may also write to the chair of the site visit team to identify issues in need of clarification, and a copy of this correspondence will be provided to the program. The program will be provided the opportunity to respond to any new information provided by the site visit team chair, before final review of the program by the CoA.

**Deferral for cause:** When the CoA has concerns that may result in a decision to deny a site visit or deny accreditation to an applicant program or place an accredited program on probation, it will defer its final decision, give written notice to the program of its concerns, and thereby provide an opportunity to supplement the record before a decision is made. The CoA will assume that materials and information provided by the program before the final decision is made by the CoA represent the full and complete basis on which the program wishes its accreditation status to be determined.

### 8.4 M Site Visit Interval

At the time of making a decision for “full accreditation,” the CoA will also decide the year in which to schedule the program’s next periodic review. For all accredited programs, a period of up to 10 years between site visits will be designated. Programs returned to accredited status from probationary status will be given one year from receipt of the decision in which to provide a new self-study in preparation for the next site visit and full review.

An accredited program may always request to submit a self-study and schedule a site visit earlier than scheduled. Such a request should be provided in writing to the CoA along with the rationale for requesting an earlier review. In addition, the CoA reserves the right to schedule an earlier visit for any accredited program if it has evidence to suggest concerns about the program’s consistency with the SoA.

### 8.5 M Communication of Decision to Program

Within 30 days following any decision, the CoA will give written notice of the outcome of its review to the chief executive officer of the institution housing a master’s program or the appropriate administrative officer of the institution housing an internship or postdoctoral residency program. The decision will contain a statement of the bases for the decision. The CoA’s decision also may alert the program to SoA-related areas of concern, requesting that the program address its attention to these in subsequent narrative reports or in the next self-study.

### 8.6 M Effective Date of a Decision

Award of “accreditation” (either “on contingency” or “full”) and other nonappealable accreditation decisions are effective on the final day of the site visit preceding the CoA decision. Appealable decisions (as defined in Section 2.1) that are not appealed by the program are effective 30 days after receipt of the CoA’s decision.

If a program elects to appeal a decision of “accredited, on probation,” and the decision is upheld, the effective date of probation remains as 30 days after receipt of the CoA’s decision, and the

program must respond to the issues of probation in the same time frame as indicated in the CoA's decision.

If a program elects to appeal any decision other than probation, and the decision is upheld, the original CoA decision will take effect 30 days after the appeal panel hearing date. For any appeal in which the decision is amended or reversed by the appeal panel, the new decision will be effective 30 days after the end of the appeal hearing.

### **8.7 M Failure to Meet Accreditation Responsibilities**

Changes in a program's accreditation status by the CoA may result from a program's failure to meet the following responsibilities:

- a. Abiding by the CoA's published policies and procedures; or
- b. Informing the CoA in a timely manner of changes in its environment, plans, resources, or operations that could diminish the program's quality.

Before a change in accreditation status is made for any of these reasons, the program will be notified in writing by the CoA and given 30 days in which to respond. Based on the program's response, the CoA will determine appropriate action.

This section involves the substantive review of program materials and responses in determining whether the CoA should change a program's accredited status, unlike Section 1.3 where in a program is deemed to have withdrawn by its failure to meet its procedural obligations as an accredited program.



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