

Commission on Accreditation

# Site Visitor Manual

Guidelines for the Review of Master's, Doctoral, Internship, and Postdoctoral Residency Programs



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### Foreword

When reviewing a program, the American Psychological Association's Commission on Accreditation (APA-CoA) employs a thorough and objective examination of all required elements of accreditation identified in the Standards of Accreditation (SoA). Elements of this examination include the self-study, the preliminary review of the self-study, the program's response to the preliminary review, the site visit report, and the program's response to the site visit report. The site visit allows for in-person observations of a program's compliance with the SoA. The site visit also focuses on features that are less tangible, including the physical and emotional environment of the program and the climate of the program and institution being visited. As the site visit report plays a crucial role in this examination, the accreditation site visitor is critical to the success of the accreditation process.

The role and responsibilities of a site visitor are described in this manual and in IR D.3-3: Role and Responsibilities of a Site Visitor. In sum, a site visitor serves to offer observational data about a program regarding its adherence with the accreditation standards. It is essential that site visitors maintain objectivity and thereby function as neutral observers. It is important that every visitor understands the accreditation standards and uses the standards in their assessment and evaluation of a program. In addition, preparation for the visit, including completing a thorough reading of the self-study materials, as well as considering questions that should be asked on the visit and components that should be observed, become important. The questions that are raised during the preparation process should become a part of the site visit team's items to clarify or address further during the visit.

This manual will assist you in preparation for service as a site visitor. On behalf of the American Psychological Association and the Office of Program Consultation and Accreditation (OPCA), I extend my appreciation for your willingness to serve as an accreditation site visitor for the APA-CoA. Serving as a site visitor is a responsibility that makes demands on your time and professional energy. Your willingness to do so denotes your personal and professional commitment to excellence in the quality of professional education and training in the field of psychology. Thank you for that commitment and for your voluntary service.

Sincerely,

Aaron Joyce, PhD, ABPP

Director, Office of Program Consultation and Accreditation

American Psychological Association

## Section I

Overview of the Accreditation Process



The accreditation process is intended to promote consistent quality and excellence in education and training in health service psychology (HSP), as defined in Section I of the SoA.

## Scope of Accreditation

The scope of accreditation includes:

- I. Master's degree programs in:
  - a. Clinical, Counseling, and School practice areas
  - b. A combination of the above practice areas.
  - c. Other developed practice areas
- II. Doctoral degree programs in:
  - a. Clinical, Counseling, and School practice areas
  - b. A combination of the above practice areas.
  - c. Other developed practice areas
- III. Doctoral **Internship** programs in HSP (10, 12, and 24 months in length).
- IV. Postdoctoral Residency programs in specialized and general fields of HSP.

#### The CoA

The structure of the CoA was created to ensure appropriate balance between academic institutions and programs, practitioners of the profession, and the publics served by accreditation.

The CoA consists of at least 32 appointed representatives from the following organizations:

Seats	Organization Type
1	Academy of Clinical Science
1	APS / BSA
1	BEA / NCSPP
2	Clinical Psychology / CUDCP
1	CoS
2	Counseling Psychology / CCPTP
2	General Public
4	Graduate Departments of Psychology / COGDOP
1	Graduate Students of Psychology / APAGS
1	Individual and cultural diversity
2	National Council of Schools and Programs of Professional Psychology
2	Open Seats
6	Postdoctoral and Internship Centers (3) APPIC, (2) Internships, and (1) Postdoctoral residencies
4	Professional Practice / BPA, CAPP
2	School Psychology / CDSPP

### The Accreditation Process



#### Reaccreditation: Assignment to a Review Cycle

Each winter, cycle email notifications go out to programs that have a site visit scheduled for the following year. The cycle notification informs the program of its self-study due date and provides information about the site visit process. Applicant programs are not assigned a particular review cycle; however, they are encouraged to aim for one of the three self-study submission dates (January 1, May 1, September 1).

## Self-Study Submission, Preliminary Review, & Site Visit Authorization

The self-study process is intended to provide the program an opportunity to systematically review, describe, and evaluate its consistency with the SoA. Upon receipt, the self-study is reviewed by the OPCA for completeness and the program's responsiveness to the SoA. Requests for additional information may be identified. The review may also identify specific questions in need of careful examination during the site visit. These items are communicated directly to the program upon authorization of the site visit. Any requests for additional information must be addressed prior to the visit taking place. The self-study, the preliminary review, and the program's response to the preliminary review are made accessible to all members of the site visit team.

#### **Site Visitor Selection**

Once a site visit has been authorized, the CoA selects a Chair for the program's site visit team and provides a list/s of potential site visit members (and, for doctoral programs, a list of potential generalists) to the program. The program is responsible for

coordinating and scheduling the visit with the site visit team.

#### The Site Visit & the Site Visit Report

Site visitors act as neutral observers of the program; their role is to gather information on the program in relation to the SoA through direct observation. After the site visit, the site visit team submits a report to the CoA. The program is then afforded the opportunity to review and comment on that report. After this process is complete, the program is placed on the CoA's next program review agenda.

#### Full Review by the CoA

The CoA conducts program review three times a year, during the spring, summer, and fall meetings. The CoA's meeting dates for the upcoming year are publicly announced each fall and are available on the CoA's website (https://accreditation.apa.org/). Each program to be reviewed is assigned two readers who are independently responsible for preparing a presentation of the program based upon the selfstudy report, the preliminary review and program response, the site visit report and program response, as well as any other information provided by the program during review. The presentation of each reader is made to a review panel (a subset of the CoA formed for program review meetings). The review panel then forms a recommendation to present to the entire CoA. The CoA awards accreditation to those programs judged to be in accordance with the SoA. Once a final accreditation decision has been made. site visitors receive the decision feedback for the program (see IR D.4-9), as well as the program's response to the site visit report (see IR D.3-3(b)).

## **Important Accreditation Documents**

- Accreditation Operating Procedures (AOP)
  Defines procedures the CoA uses to review programs.
- Standards of Accreditation (SoA)
  Defines standards required to be met by health service psychology programs.
- CoA Policy Statements & Implementing Regulations (IRs)
  Provides elaboration regarding provisions of the SoA.

For additional information related to general accreditation information, please visit:

accreditation.apa.org

## Section II

Overview of the Site Visit Process



The site visit is an essential and unique step in the accreditation process. The site visit report supplies critical information about a program, verifies information contained in the self-study, and adds information about program operation that can only be obtained by direct observation. Since representatives of the program do not appear before the CoA, it is only the site visit team that has face-to-face contact with those involved in the training program.

#### Site Visitor Selection

To become a site visitor, one must complete training to become familiar with the SoA for master's, doctoral, internship, and/or postdoctoral programs in health service psychology. The credentials of those completing such trainings determine the type of visitor each individual will be - either a health service psychology site visitor (a psychologist trained and qualified in an area of psychology within the scope of accreditation) or a generalist site visitor (a psychology outside the scope of accreditation). Site visit Chairs are health service psychology site visitors who have participated in multiple site visits. For additional information regarding qualifications to be a site visitor, refer to IR D.3-1.

The CoA selects the Chair of every site visit team and provides a list/s of potential HSP site visit members (and, for doctoral programs, a list of potential generalists) to each program. Master's programs recruit two representatives from the member list/s. Doctoral, internship, and postdoctoral programs recruit a single representative from the member list. Doctoral programs also recruit a single representative from the generalist list. There is no limit to the number of visits a visitor can participate in. For additional information regarding site visit team composition and site visitor selection, refer to IR D.3-2.

#### Conflict of Interest

In preparing the list/s of visitors, the CoA attempts to avoid the appearance of a conflict of interest with the program. This is necessary to maintain the credibility of the accreditation process. However, all relationships between individuals and programs cannot be known by the CoA and staff. The responsibility to identify any possible conflict lies equally with the program and the site visitors.

Examples of possible conflicts of interest include:

- former employment at the program
- having been a former student at the program
- having a former student at the program
- close professional or personal relationship with a member of the staff at the program

For additional information regarding conflicts of interest for site visitors, refer to IR E.3-2.

### Site Visitor Responsibilities

Site visitors gather information on the program in relation to the SoA through direct observation. This includes gathering information regarding less tangible features of a program that cannot be fully captured in written record provided by the program. To be effective, it is essential that site visitors maintain objectivity and function as neutral observers. Site visitors are representatives of the CoA but are neither decision makers for the CoA nor consultants for the program. As such, site visitors

must report to the CoA information on the program as it pertains to the SoA.

Site visitors must recognize that information gathered during a site visit remains confidential among programs, the site visitors, and the CoA. For this reason, site visitors must state explicitly to all who are interviewed during visits that what they are told may, at the discretion of the site visitors, be reported to the CoA, but will remain confidential with the CoA. Site visitors must not withhold from the CoA any information pertinent to the making of an accreditation decision.

Site visitors' responsibilities for site visits terminate upon completion of their reports, although the CoA may request clarification of some matters prior to making its decisions. Under no circumstances are site visitors permitted to initiate any contact or respond to inquiries or correspondence from visited programs after completion of the visit. All such matters are to be referred to the CoA through the OPCA.

For additional information regarding the role and responsibilities of a site visitor, refer to IR D.3-3.

#### Time Commitment

When contacted to schedule a site visit, site visitors need to ensure they have adequate time (minimally, 5 days) in their calendar for the entire site visit process, including reviewing the program's self-study,

performing the site visit, and completing the site visit report. The visit itself lasts <u>two full days</u>, and all visitors are expected to remain for the duration of the visit

### Confidentiality Agreement

During the site visit, site visitors should not ask for, receive, or review individual patient/client records, including redacted records. Site visitors sign The Site Visitor Confidentiality Agreement (see Appendices section of this manual) for every site visit they agree to complete, which provides information regarding Protected Health Information (PHI) that is protected under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and under any applicable law or regulation. For additional information regarding site visitor access to confidential files, refer to IR D.3-8.

## Remaining Current on Issues of Accreditation

The CoA recommends that all active site visitors periodically visit the accreditation webpage in order to remain up to date on accreditation policies and the site visit process. The site provides downloadable versions of the SoA, AOP, and IRs. It is recommended that all active site visitors attend a training every 3-5 years. For a list of upcoming trainings visit <a href="https://accreditation.apa.org/upcoming-workshops">https://accreditation.apa.org/upcoming-workshops</a>.

For additional information related to site visits and site visitors, please review Section D.3 of the IRs.

# Section III

The Site Visit



## **Pre-Site Visit Preparations**

To prepare for a site visit, the visitor should become thoroughly familiar with the SoA and the IRs. Although visitors may disagree personally with aspects of these policies, they should represent them faithfully during the visit and avoid idiosyncratic interpretations. The reliability of the accreditation process depends on a consistent interpretation and application of the SoA by site visitors, the CoA, and all others concerned with accreditation.

#### Pre-Site Visit Tasks & Reminders

- ❖ Assess for Conflicts of Interest: Visitors will receive a visit confirmation email from the OPCA containing the program's previous decision letter; information regarding travel, lodging, and reimbursement for the visit; reminders regarding the site visit report; and notice that the team has access to the program's self-study. Visitors must access the self-study as soon as it is available and review the faculty/staff tables to ensure that no conflicts of interest exist (see IR E.3-2: Conflict of Interest Policy for Site Visitors). If a potential conflict is identified, please contact the OPCA at apasitevisit@apa.org immediately.
- Book Travel & Lodging: Visitors should not book travel and lodging prior to receipt of the visit confirmation email from the OPCA, which will include details regarding making travel and lodging arrangements, as well as instructions for submitting expenses for reimbursement. Some things to keep in mind when booking travel and lodging for the visit:
  - o Visitors should arrive the night before the visit and depart the evening of the last day of the visit.
  - o Travel should be booked no later than four weeks prior to the visit. Visitors are strongly encouraged to use APA's travel company (ATC/Deem) to book flights.
  - Hotel accommodations should be comfortable, convenient, and reasonably priced for the area.
     The site visit team Chair may need to seek suggestions from the program for a hotel that is near the site visit location all members of the team should stay at the same hotel.
  - Unique accommodations, such as a rental car or an additional hotel night, require authorization by the OPCA. When a member of a site visit team is approved for a car rental, the expectation is that a reasonable attempt will be made to provide other members of the site visit team with transportation when possible.
  - Those who are employed by the VA and visiting a VA program must contact the VA office to make lodging and travel arrangements.
  - Additional information regarding travel, lodging, and reimbursement for site visits is included with every visit confirmation email.
- Create the Visit Schedule: The Chair of the team should discuss with the program director the tentative schedule at least two weeks prior to the visit. Due to variation across programs, example site visit schedules are not provided by the CoA.
- \* Review Program Materials & Prepare Questions: Each site visitor must review the self-study, the preliminary review, the program's response to the preliminary review, and the previous decision letter. From this review, visitors should formulate questions to be asked of the program at the time of the visit.
- ❖ Confirm the Schedule & Travel with the Team: Visitors should touch base with one another regarding the schedule, travel plans, and local arrangements. The visit itself requires two full days, and all visitors are

<u>expected to remain for the duration of the visit.</u> It is recommended that site visitors exchange cell phone numbers in case of changes/delays in travel plans.

- Have Team Meeting the Evening Before the Visit Begins: The team should meet the evening before the visit begins to:
  - o Share and discuss questions/comments derived from their review of the program's materials.
  - o Prepare questions/issues to address during the visit see Site Visit Report Prep Sheet for suggested substandard-specific questions/comments to address during the visit and when writing the report.
  - Review the planned schedule and discuss any possible adjustments that need to be made. Scheduling changes should be identified as early as possible to allow the program adequate time to make necessary arrangements.
  - o Plan allocation of individual team member responsibilities during the visit.
  - o Make initial plans for the preparation of the site visit report.

#### The Site Visit

#### **Interviews**

When conducting interviews, site visitors are reminded to maintain objectivity and remain neutral observers. Visitors should start by explaining the purposes and procedures of the site visit and their role as information gatherers for the CoA. They should not provide expert consultation, be seen as an advocate for change, give prescriptive programmatic recommendations, and imply or guarantee an accreditation decision. **Fundamental topics to be discussed during interviews can be found in the charts following this section.** 

#### Program Director/Department Chair/Chief Psychologist/Unit Leader/Department Head

The site visit team will usually begin the site visit with an orientation discussion with the program's responsible administrative officers: the program director and the chair/chief psychologist/ head/unit leader of the department housing the program. This orientation session allows the team to see the training program as a whole.

When conducting its meeting with the **program director**, the site visit team at a minimum should seek information about:

- an overview of the program
- strengths and weaknesses of the program, as related to the SoA
- long-range plans for the program
- faculty and trainee/student morale

- the program's philosophy; the method of faculty decision-making
- the method of delegation of responsibility
- matters unique to the program
- matters unique to the program director's role

When conducting an interview with the **departmental chair/chief psychologist/department leader**, the site visit team at a minimum should seek information about:

- the fit of the program within the overall department
- adequacy of resources provided to the program
- department investment in the program
- morale of faculty and trainees/students

- the administration stance toward the program
- the method of department decision making

 policies to promote professional/academic growth of the faculty

#### **University/Institutional Administrators**

When conducting interviews with university/institutional administrators, site visitors should seek information about:

- the place of the program in the institution's master plan
- the program's contribution to the mission of the institution
- authorization of the institution to provide distance education
- financial resources and problems
- planned changes, if any, for the program

#### **Interviews with Faculty/Staff Members**

The general purpose of the interview with faculty/staff is to get an accurate impression of each person's actual contribution (through teaching, supervision of clinical experiences and practica, or supervision of research) to the education of the trainee/student. The visitor must be careful to distinguish, when necessary, between the national reputation and professional status of faculty/staff and each individual's actual contributions to the program. It is important to allow faculty/staff to express their impression of the quality and nature of the program.

Typically, major faculty/staff members are interviewed individually so that each person can describe his or her unique contribution as fully as possible. In some cases, meeting with more than one person or in a group format may be appropriate and acceptable. In the interview with each member of the program's **faculty/staff**, the visitor should obtain information about:

- the person's role in the program
- teaching load, courses/seminars taught and clinical responsibilities
- provision of distance education
- clinical supervisory load
- involvement in dissertation or research committees
- strengths and weaknesses of the program, as related to the SoA

- view of administrative leadership
- research productivity
- morale and satisfaction with position
- tenure/promotion issues
- program decision making
- questions unique to that person's vita
- their understanding of the program's processes and outcomes
- involvement in the self-study process

#### Students/Interns/Residents/Alumni

At the outset of interviews with trainees/students/alumni, site visitors should explain that comments shared during the interview will be noted anonymously. The team should be sensitive to the fact that students/trainees may wish to be open and candid about program strengths and weaknesses yet may be reluctant to discuss issues that may jeopardize the program's accreditation or application for accreditation. The site visit team should make it clear that no program is expected to be without flaws. Trainees'/students' anxieties are often eased if the visitors begin by asking them to state, in turn, their year level, specialty area, research interest and activity to date, career plans, and why they chose this program. For internships, site visitors should find out the home university of each intern.

Students/trainees should be engaged in an open discussion of their understanding of the program's aims, content, and effectiveness. The visitors should note the degree to which students/trainees reflect and embody the assimilation of the stated aims and outcomes of their program. The visitors should determine how comfortably the students/trainees interact with each other and with faculty/staff, and the extent to which they are challenged by the program. The visitors should note specific satisfactions and dissatisfactions with courses, course loads, quality of teaching and research training, clinical experience and supervision, and congruence between their expectations and actual experiences with the program. In interviews with alumni, the visitors should note all of the above from when the alumni were in the program. Though the CoA understands there may be circumstances when a site visit may not include alumni interviews, alumni interviews should occur when possible.

When conducting interviews with students/interns/residents/alumni, the team should seek their perceptions of:

- program strengths and weaknesses
- understanding of program processes and outcomes
- knowledge of program and institutional policies/procedures
- utilization of distance education
- morale and dignity
- familiarity with professional & ethical issues
- general satisfaction with the program
- opportunity for student/trainee interaction

- availability of faculty/staff
- program decision making & their input
- discrimination and sexual harassment issues
- faculty/staff support for research
- financial support
- finding a mentor
- integration of clinical training experiences
- preparation for further training/education and/or internship/entry into profession
- what they would change about the program

	Master's Programs				
	Standard I	Standard II	Standard III	Standard IV	Standard V
Program Director	-Adequacy of support -Policies and procedures -Annual feedback -Remediation procedures -Complaints	-How aims are determined -Evaluation and outcome mechanisms -Coverage related to PWCs and DSK -Curriculum plan -Clinical experience policies	-Student qualification/recruit ment -Trends related to attrition	-Faculty recruitment  -Faculty competence for courses assigned	-Availability and accuracy of program information -Process to update website
Instructional Faculty/Staff	-Perceived adequacy of support -Policies and procedures -Annual feedback	-Role in program (courses taught, advising, supervision) -How involved in program evaluation and improvement  -If applicable, distance education utilization	-Student qualifications/recruit ment -Handling grievances and remediation	-How to maintain competence to teach coursework (and administration's support to do so) -Time for research?	-Availability and accuracy of program information
Other Administrators	-Knowledge and support of program -Complaint procedures and use		-Student issues that have come to the administration's attention	-Faculty issues that have come to the administrator's attention	
Students	-Perceived adequacy of support/resources -Policies and procedures	-Knowledge of competencies and evaluation methods -Adequacy of training, supervision, and advising  -How involved in program evaluation and improvement -If applicable, distance education utilization	-Climate	-Faculty sufficiency and availability	-Awareness and accuracy of policies and program information -Is public information useful?

	Doctoral Programs				
	Standard I	Standard II	Standard III	Standard IV	Standard V
Program Director	-Adequacy of support -Policies and procedures -Annual feedback -Remediation procedures -Complaints	-How aims are determined -Evaluation and outcome mechanisms -Coverage related to PWCs and DSK -Curriculum plan -Practicum and internship policies	-Student qualification/recruit ment -Trends related to attrition	-Faculty recruitment  -Faculty competence for courses assigned	-Availability and accuracy of program information -Process to update website
Faculty	-Perceived adequacy of support -Policies and procedures -Annual feedback	-Role in program (courses taught, advising, supervision) -How involved in program evaluation and improvement  -If applicable, distance education utilization	-Student qualifications/recruit ment -Handling grievances and remediation	-How to maintain competence to teach coursework (and administration's support to do so) -Time for research?	-Availability and accuracy of program information
Other Administrators	-Knowledge and support of program -Complaint procedures and use		-Student issues that have come to the administration's attention	-Faculty issues that have come to the administrator's attention	
Students	-Perceived adequacy of support/resources -Policies and procedures	-Knowledge of competencies and evaluation methods -Adequacy of training, supervision, and advising  -How involved in program evaluation and improvement -If applicable, distance education utilization	-Climate	-Faculty sufficiency and availability	-Awareness and accuracy of policies and program information -Is public information useful?

	Internship Programs				
	Standard I	Standard II	Standard III	Standard IV	Standard V
Program Director	-Adequacy of support -Policies and procedures -Annual feedback -Remediation procedures -Complaints	-How aims are determined -Coverage related to PWCs -Coverage related to PSCs (if applicable) -Ensure 4 hours of supervision -Evaluation and outcome mechanisms -Outcome data	-Intern qualification/recruit ment -Semiannual feedback/remediati on	-Supervisor sufficiency -Staff involvement in program planning/implement ation	-Availability and accuracy of program information -Process to update website
Supervisors	-Perceived adequacy of support -Policies and procedures -Annual feedback	-Role in program (didactics, supervision) -How involved in program evaluation and improvement  -If applicable, distance education utilization	-Intern qualifications/recruit ment -Handling grievances and remediation	-Perceived support from department and administration -Involvement in program planning/implement ation	-Availability and accuracy of program information
Other Administrators	-Knowledge and support of program -Complaint procedures and use		-Intern issues that have come to the administration's attention	-Staff issues that have come to the administrator's attention	-Availability and accuracy of program information
Interns	-Perceived adequacy of support/resources -Policies and procedures -Climate	-Knowledge of competencies and evaluation methods -Adequacy of training and supervision  -How involved in program evaluation and improvement -If applicable, distance education utilization	-Feedback	-Staff sufficiency and availability	-Awareness and accuracy of policies and program information -Is public information useful?

	Postdoctoral Residency Programs				
	Standard I	Standard II	Standard III	Standard IV	Standard V
Program Director	-Adequacy of support -Policies and procedures -Annual feedback -Remediation procedures -Complaints	-How aims are determined -Coverage of advanced competencies in HSP (Level 1) -Coverage of competencies specific to area of focus/specialty (Levels 2 & 3)  -Ensure 2 hours of individual supervision -Evaluation and outcome mechanisms -Outcome data	-Resident qualification/recruit ment -Semiannual feedback/remediati on	-Supervisor sufficiency -Staff involvement in program planning/implement ation	-Availability and accuracy of program information -Process to update website
Supervisors	-Perceived adequacy of support -Policies and procedures -Annual feedback	-Role in program (didactics, supervision) -How involved in program evaluation and improvement  -If applicable, distance education utilization	-Resident qualifications/recruit ment -Handling grievances and remediation	-Perceived support from department and administration -Involvement in program planning/implement ation	-Availability and accuracy of program information
Other Administrators	-Knowledge and support of program -Complaint procedures and use		-Resident issues that have come to the administration's attention	-Staff issues that have come to the administrator's attention	-Availability and accuracy of program information
Residents	-Perceived adequacy of support/resources -Policies and procedures -Climate	-Knowledge of competencies and evaluation methods -Adequacy of training and supervision  -How involved in program evaluation and improvement -If applicable, distance education utilization	-Feedback	-Staff sufficiency and availability	-Awareness and accuracy of policies and program information -Is public information useful?

#### Record Review

Site visitors are expected to review a representative sample of student/trainee files during the site visit. At a minimum, this should include 1 student/trainee file per cohort since the program's last site visit. Additionally, some of the files selected to be reviewed should include examples of remediation, if applicable. Specifically, record review should include, as applicable:

- Student/trainee files:
  - Evaluations and evidence of review with student/trainee: evidence of meeting competencies/MLAs, documentation of direct observation.
  - Certificates of completion (for internship programs): present and align with IR C-22 I.
  - Remediation plans (if applicable): evidence the program followed its remediation procedures, documentation of the current status/outcome
- Other files:
  - Complaints/Grievances: Evidence (e.g., documentation, interviews) that program/institutional policies were followed
  - Evaluations of program by current/former students/trainees.
- Other documents (for doctoral programs):
  - Comprehensive exams
  - Dissertations/Doctoral papers/projects (a minimum of 3 from different advisors)

### Wrapping Up

#### **First Day**

The site visit team should schedule time at the end of the first day of the visit to review and discuss their findings, including:

- the data gathered
- initial impressions
- changes required in the next day's schedule
- plans for conducting the closing conference
- the timetable and assignments for writing the site visit report

#### **Second Day**

This is the time to address any issues/interviews that were not clarified on the first day of the visit. The visitors should leave enough time to work together to organize findings for the closing conference and determine who will lead the closing conference (typically the Chair). The division of labor for the completion of the site visit report must be solidified prior to departure from the site.

#### **Closing Conference**

The site visit ends with a closing conference to provide program representatives with feedback. The closing conference should include the program director and may include, at the discretion of the program, faculty/staff, students/trainees, alumni, and administrators.

The closing conference is usually led by the site visit team Chair, with observations provided by the other visitors as appropriate. The presentation should be structured alongside the site visit report outline. Site visitors should present their perceptions of the program's strengths and weaknesses relative to the SoA, aims, and stated outcomes. Program representatives should use the closing conference as an opportunity to provide their interpretation of the

facts, if their interpretation differs from that of the site visit team, and to correct any errors of fact. Program representatives should be reminded that they will be provided the site visit report and invited by the CoA to respond to the report.

#### Site Visit Decorum Reminders

- Socializing with program staff or students/trainees should be avoided. For this reason, visitors should not interact with program staff or students/trainees outside of the visit's schedule (e.g., have dinner with program staff). There may be situations in which some social contact is appropriate (e.g., during a luncheon provided by the program), but this should be minimized.
- Program participants naturally will be eager to please the site visit team. Special care must be taken not to exploit this tendency by using the site visit as an opportunity for the development of personal relationships.
- The site is not to pay for any site visitor expenses (exceptions include a working lunch with trainees/students and/or staff/faculty/supervisors).
- ❖ Background material (material gathered by the visitors during the visit or material furnished thereafter at the request of the visitors) should be treated as confidential and regarded as program property. It should be shared only among team members and the CoA.
- Members of the team should not offer solutions to problems or program concerns, imply criticism of persons or aspects of the program under study, give the impression that any interview is pro-forma, or imply or guarantee an accreditation decision.
- Visitors are expected to give full and objective attention to the work of the visit during their time with the program. Visitors must be prompt for meetings and interviews and must remain for the entire visit.
  Departure from the setting should not be scheduled prior to the close of business on the final day of the visit.

Site visitors are encouraged to contact the OPCA at <a href="mailto:apasitevisit@apa.org">apasitevisit@apa.org</a> as questions arise.

## **Section IV**

The Site Visit Report



## The Site Visit Report

A well-written site visit report is essential in providing a comprehensive evaluation of a program to the CoA to render an accreditation decision. Considerable care should be exercised in its preparation.

### Site Visit Report Tasks & Reminders

- Visitors should not leave the site visit until report writing assignments for each standard have been agreed upon. Although the Chair is responsible for submitting the final report, all members of the team should be aware of assignments in case of unexpected delays in the report preparation.
- Visitors should share copies of their notes with each other prior to leaving the site to ensure that each member has an overview of the entire visit.
- The site visitors should agree upon a date for submission of their assigned report sections to the Chair. It is strongly recommended that this initial draft of the report be created within two weeks.
- Visitors are encouraged to utilize the appropriate (doctoral, internship, or postdoctoral) Site Visit Report Preparation Sheet found on the OPCA's webpage (<a href="https://accreditation.apa.org/current-site-visitors">https://accreditation.apa.org/current-site-visitors</a>) to draft the report. Master's program site visit reports must be completed in the Master's report preparation sheet on this webpage. To facilitate the writing of the report, these report preparation sheets include substandard-specific questions/comments to consider when drafting report content. Due to variation across programs, example site visit reports are not provided by the CoA.
- Strong reports are concise, comprehensive, and focus exclusively on specific observations and data demonstrating the extent to which the program is consistent with the SoA. For more information regarding qualities of a strong site visit report, refer to Appendix B.
- The Chair **MUST** submit the final report, along with a copy of the site visit schedule, to the OPCA within 30 days of the visit. Since the CoA cannot perform its function without the report, delays in submitting the report jeopardize the entire accreditation process.
- ❖ Site visitors' responsibilities for the site visit terminate upon submission of the report, although the CoA may request clarification of some matters prior to making its decisions. After completion of the visit, under no circumstances are site visitors permitted to initiate any contact or respond to inquiries or correspondence from visited programs (unless requested to do so by the CoA) until the accreditation decision is determined.

# Appendix A

CoA Portal Navigation



## **CoA Portal Help Document**

## **For Site Visitors**

The entire APA accreditation process is conducted online. This includes submission of the self-study, selection of site visitors, and submission of the site visit report. This document is intended to assist Site Visitors with **navigating the self-study and submitting the site visit report** in the CoA Portal.

Additional resources are available on the accreditation website (<a href="https://accreditation.apa.org/current-site-visitors">https://accreditation.apa.org/current-site-visitors</a>).

#### Logging on to the CoA Portal

Navigate to the CoA Portal (https://coaportal.apa.org/login)

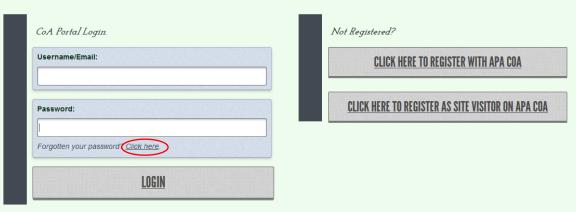
- o NOTE: The recommended internet browsers for accessing the CoA Portal are Firefox and Chrome.
- If you are already an active site visitor (i.e., you have attended a site visitor training) you are already registered in the CoA Portal. DO NOT attempt to register as a site visitor.
- Your Username is the email address associated with your site visitor profile. If you are unsure of the correct email (or if the email address needs to be updated), please contact <u>OPCA</u>.
- If you have never logged on to the CoA Portal and/or do not remember your password:
  - Click the link under the password field to request a password reset.
  - Enter your email address as prompted and click "Reset password." The system will email you an updated password.
  - Return to the login page and sign-in using your email address and updated password.



#### Welcome to the CoA Portal

The APA Commission on Accreditation (APA CoA) is recognized by both the secretary of the U.S. Department of Education and the Council for Higher Education Accreditation (CHEA) as the national accrediting authority for professional education and training in psychology. APA CoA accredits doctoral graduate programs in clinical, counseling, and school psychology and programs offering combinations of two or more of these areas, internship programs in professional psychology, and postdoctoral residency programs that provide education and training in preparation for professional practice. The CoA Portal is the online information system that programs, site visitors, and APA CoA members use throughout the accreditation process. Users are granted access to different information based on their role and stage of the accreditation process.

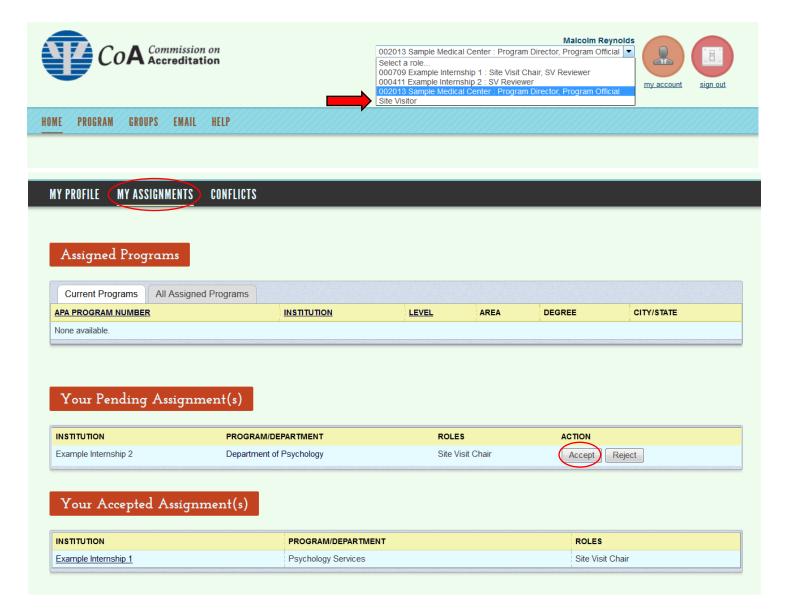
 $\hbox{Please $\underline{\tt email}$ the APA Office of Program Consultation and Accreditation for assistance accessing the site. } \\$ 



#### **Accepting a Site Visit**

The Program Director or the <u>OPCA</u> will contact you (via email and/or telephone) to determine if you are able to participate in a site visit. Once you have agreed to be a site visitor, you will receive an email alerting you to log on and confirm your participation. To do so, follow these steps:

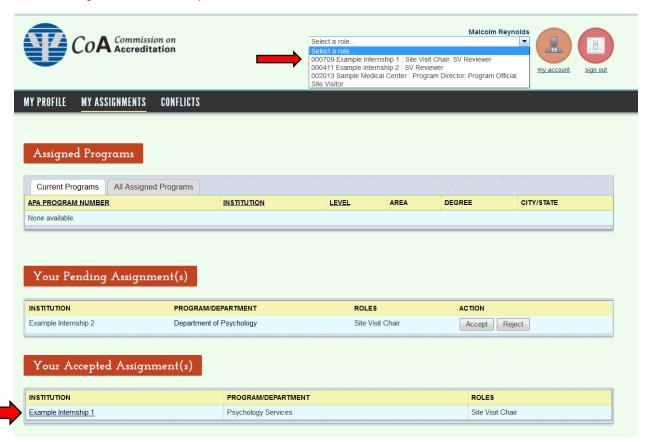
- Log on to the CoA Portal (<a href="https://coaportal.apa.org/login">https://coaportal.apa.org/login</a>)
- If you have multiple roles in the system (i.e. Program Director, Site Visitor), you should be directed to your Home page. From there, click the "Update Site Visitor Profile" button. If the button is not available, click the "Site Visitor" role in the drop-down list (under your name).
- Navigate to the "my Assignments" tab (if not automatically directed there).
- Click "Accept" to formally accept the program's invitation to be a site visitor.
- Once all site visitors have accepted the assignment, APA will approve the visit and grant you access to the program's online self-study (and related materials).

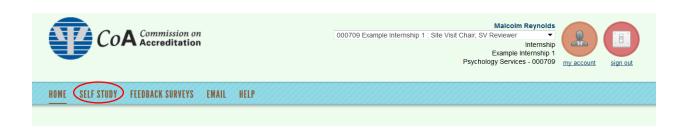


#### **Reviewing the Self-Study**

Once CoA has confirmed you as a site visitor, you will receive an email alerting you that the self-study is now accessible for your review. To access the self-study:

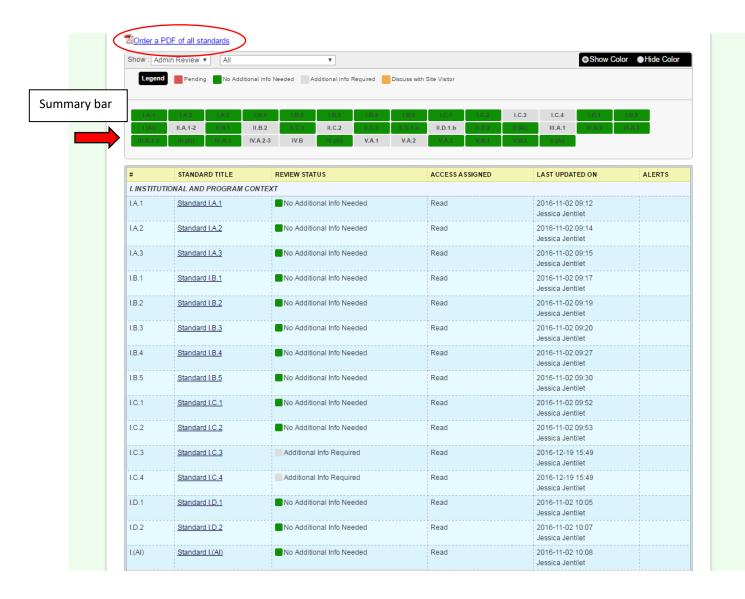
- Log on to the CoA Portal (<a href="https://coaportal.apa.org/login">https://coaportal.apa.org/login</a>)
- Click on the program name. You can do this either from the "My Assignments" tab or in the dropdown list on the top right (under your name).
- Navigate to the Self-Study tab.





#### Standards tab

- The self-study has been broken down into multiple sub-standards based on the Standards of Accreditation [SoA].
- No matter what standard you are reviewing, the top summary bar will always be visible. You can navigate between standards by clicking a box in the summary bar.
- At a glance, you can see where additional information has been requested by CoA in its preliminary review of the self-study.
  - o Gray: The program has been asked to provide a response to question/s.
  - Orange: The program has been asked to discuss certain issues with the site visitors.
  - Green: No additional information has been requested.

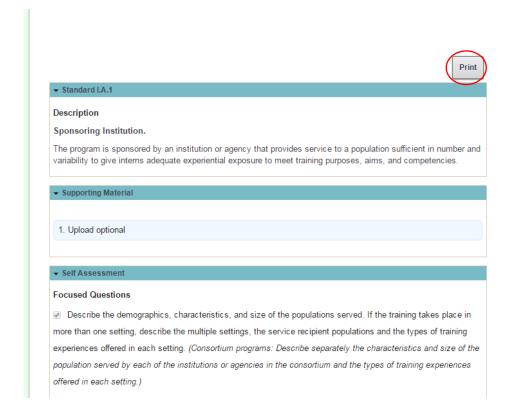


Note: You can export the self-study into a single document for printing purposes by clicking "Order a PDF of all standards" button seen in the screenshot above.

#### Reviewing the standards

When you click into the first standard (I.A.1) you will see the basic layout for all standards:

- Description: Information specific to the standard you are viewing.
- Supporting Material: Section where programs will upload required materials (none required for Standard I.A.1, seen in the screenshot below).
- Self-Assessment: Section where programs provide a narrative response that addresses focused questions specific to each standard.



Note: You can print each individual standard by clicking the "Print" button seen in the screenshot above.

• Data Views: Some standards will also have a Data View section which provides table data imported from the Annual Report Online [ARO] (see screenshot below). NOTE: Since the ARO does not include all of the data required for the self-study, in many cases the program will upload an Excel version of the completed table. If required, this will be uploaded in the "Supporting Material" section.

NUMBER OF CURRENT SUPERVISORS WHO HAVE ENGAGED IN THESE PROFESSIONAL ACTIVITIES FOR THE PAST 2 YEARS:	TRAINING SUPERVISORS (7)	OTHER AGENCY/ INSTITUTION SUPERVISORS ()	OTHER CONTRIBUTORS ()
Members of Professional Societies	7	1	
Authors/Co-authors of Papers at Professional meetings	5	*	
Authors/Co-authors of Articles in Prof/Scientific Journals	3	*	
Recipients of Grants or Contracts	1	†	
Engaged in Delivery of Direct Professional Services	7	+	
Involved in leadership roles in professional organizations	6	†	

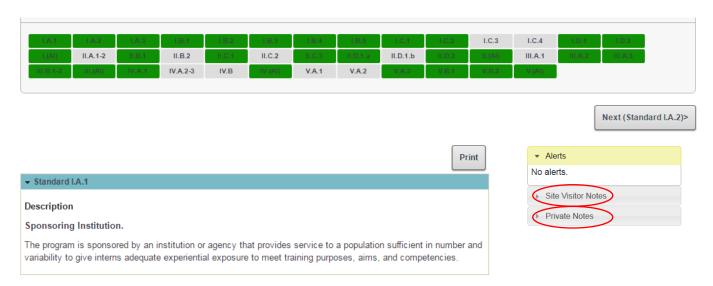
- Admin Review (AKA Preliminary Review): Under the program's Self-Assessment textbox is a section
  called "Admin Review." Prior to the authorization of the site visit, the self-study was reviewed by CoA
  and/or CoA staff to determine if any additional information and/or clarification was required.
  - o If information was requested, the program will be provided with an additional text box and expected to respond within 4 weeks of the site visit.

programs.	length for full-time (12 months, 10 months [School Psychology], or half-time (up to 24 mo
Narrative Response	
→ Status	
Progress Status :	Ready for Submission ▼
▼ Admin Review	
Review Status :	No Additional Info Needed ▼
Admin Review Com	ments:

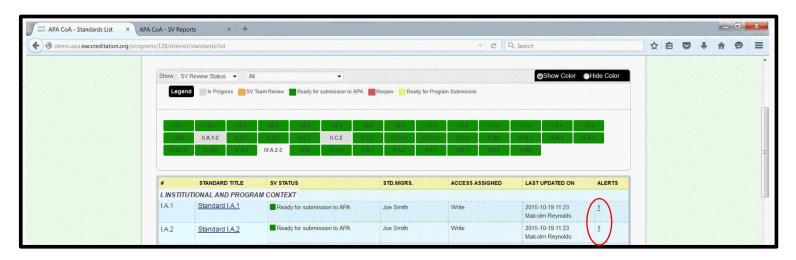
As previously noted, the summary bar will identify the sub-standards where additional information was requested.

#### **Private Notes/Site Visitor Notes**

- As you read the self-study (and later, as you write your sections of the report), you can write private notes to yourself using the "Private Notes" function on the right side of each standard page. Private notes are only visible to the writer. CoA, the program, and other site visitor/s will not have access to these notes.
- "Site Visitor Notes" will be visible to all of the site visitors. This allows the team to comment to each other regarding specific standards and to provide feedback to each other when writing the site visit report. Site visitor notes are not visible to the program or to CoA.

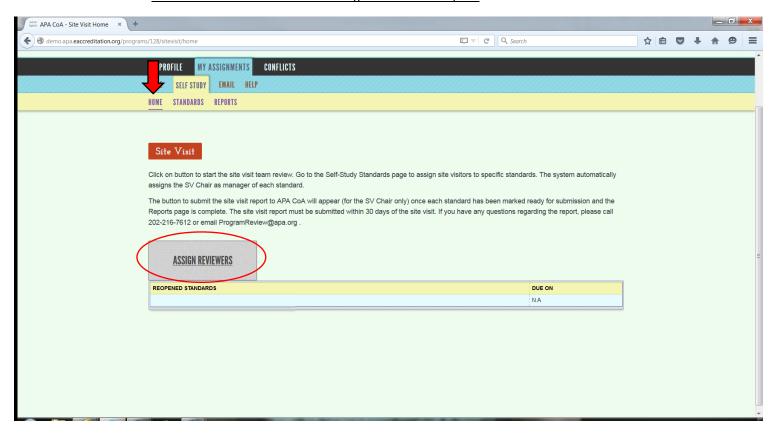


• Your fellow visitor/s will be alerted to Site Visitor Notes on the Standards tab (in the Alerts column).

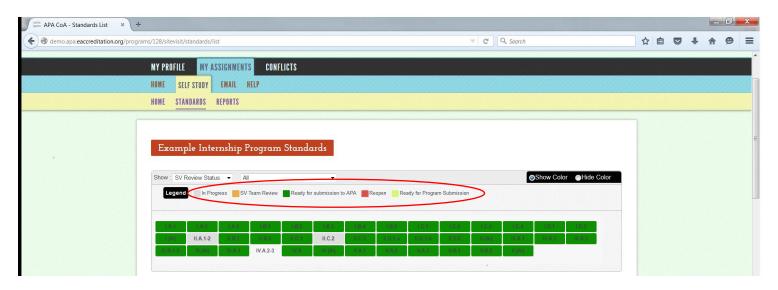


#### **The Site Visit Report**

The site visit report module will become available to site visitors on the first day of the site visit. In order to start the module, the Chair of the team will need to navigate to the "Home" tab. There will be a button labeled "Assign Reviewers." The Chair must click this button to begin the site visit report.



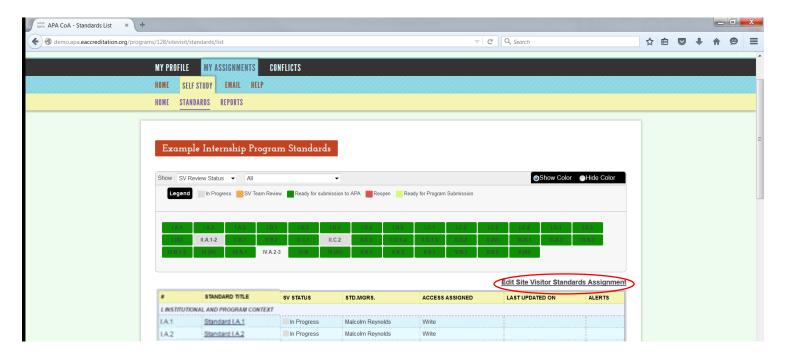
Once this button is clicked, the self-study will shift to the site visit module. The Standards tab will now show the progress for the site visit report (instead of the Admin Review).



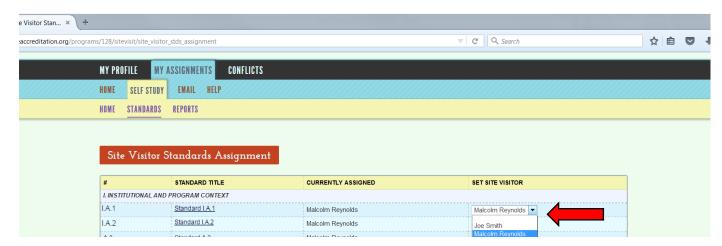
#### **Assigning Standards**

The Chair of the site visit team is responsible for assigning standards in the CoA Portal. During the visit the team determines who will write designated sections of the report. The Chair will need to input those assignments in the system. To do this:

• Click the "Edit Site Visitor Standards Assignment" link on the Standards tab.



• Select the site visitor assigned to write each section of the report using the dropdown arrow.

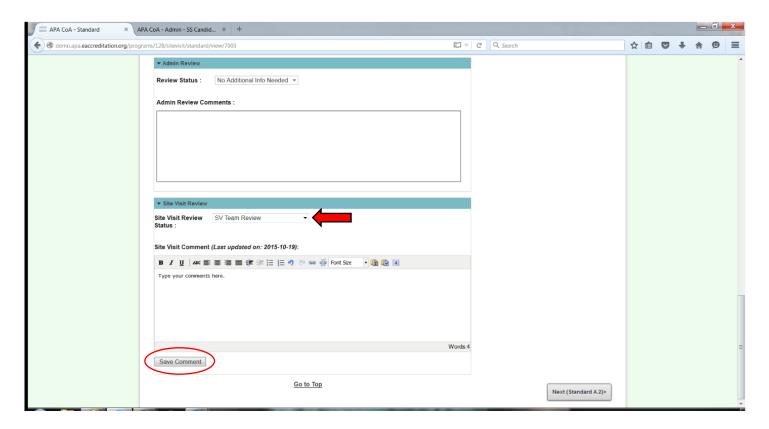


- Once each section has been assigned a visitor, scroll to the bottom and click "Save Standards Assignment."
- Each site visitor will now have access to write and edit the report for the standards they have been assigned.

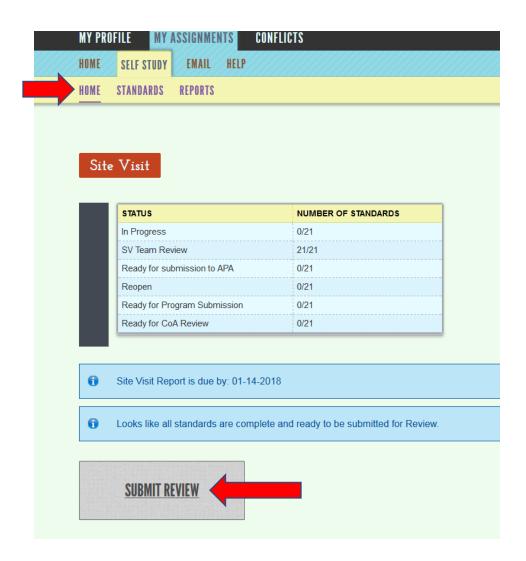


### Writing the Report

- Navigate to one of your assigned standards.
- Scroll to the "Site Visit Review" box at the bottom of the screen.
- Type your narrative in the "Site Visit Comment" box and click "Save Comment".
  - NOTE: If you do not see the "Site Visit Review" box or if you are unable to save the report
    content, you likely only have "read" access to the report. To gain "write" access, the Chair must
    click the "Assign Reviewers" button on the "Home" tab. Please look later in this document for
    details regarding granting "write" access to the report.
- When you are ready for the rest of the team to view your work, change the "Site Visit Review Status" to "SV Team Review." Note: You must click "Save Comment" before you can change the status.



Once all of your assigned sections have be marked with the "SV Team Review" status, navigate to the
"Home" tab and click the "Submit Review" button. Clicking this button allows the other team member(s)
to read the content you saved. Note: At the SV Team Review status, content can only be edited by the Site
Visit Team Chair.



- If the team determines that edits are needed, the Chair will change the status to "Reopen" to indicate that revisions are needed.
- Once the team agrees on the content of the report for a standard, the Chair will change the status to "Ready for Submission to APA."

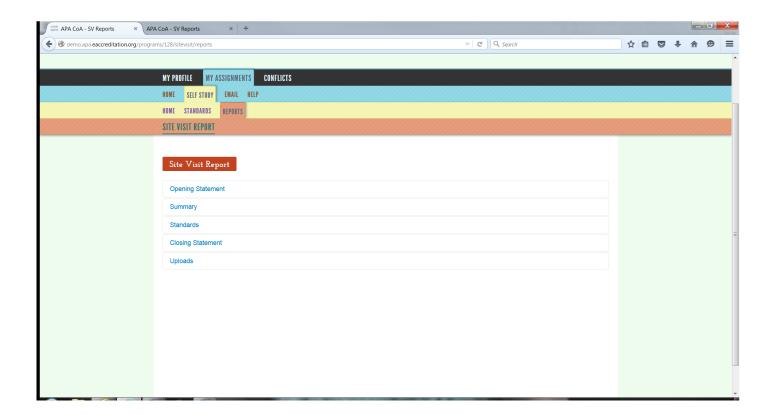
#### Status options explained:

- SV Team Review: This status allows all site visitors to read this section. Until this status is selected, the
  other visitors will not be able to read your work.
- Ready for submission to APA (Chair Only): This status is selected when the narrative is complete. All standards must be in this status in order to submit the report to APA.
- Reopen (Chair Only): This status is selected if the Chair would like to alert a reviewer that edits are needed in a particular section.
- o Ready for Program Submission: This status is only available to CoA.

#### The Reports Tab

In addition to providing comment on each of the standards, the team must provide content on the "Reports" tab. This task falls to the site visit Chair. The "Reports" tab includes the following:

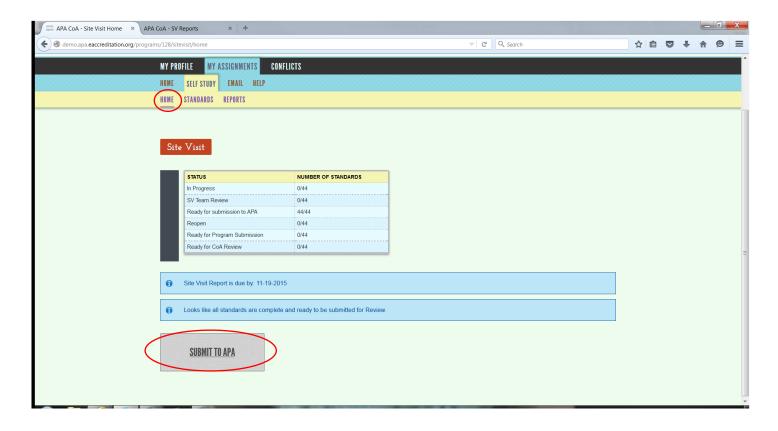
- Opening statement: Generally, includes basic overview information about the visit (dates, logistics, etc.).
- Summary: Allows you to include basic summary information about the program.
- Standards: This will <u>automatically populate</u> with the site visit comments identified per standard.
- Closing statement: Allows for final comments and any additional feedback that is not necessarily standard-specific.
- Uploads: This is where you should upload the SV Schedule and any other documents relevant to the visit.



## Submitting the report

The team Chair is responsible for the final submission of the report to CoA. Once the "Reports" tab is complete and all of the standards have been marked as "Ready for submission to APA" – the report will be ready to submit.

- Navigate to the Self-Study/Home page
- Click "Submit to APA"



Please contact the APA Office of Program Consultation and Accreditation (OPCA) with any questions.

apasitevisit@apa.org
202-336-5979

# Appendix B

Guidance for Writing a Strong Site Visit Report



## A strong site visit report...

- 1. Begins with a careful review of all of the materials provided by the CoA prior to the visit, including the previous decision letter (if applicable), the self-study, the preliminary review, and the program's response to the preliminary review. The self-study, preliminary review (i.e. Admin Review), and program's response to the preliminary review (i.e. Additional Information) will be made available to site visitors at the time of site visit confirmation.
- 2. Attends to every aspect of the SoA and only to the SoA.
- 3. Is detailed, succinct, and concise; accurate; focused on the SoA and the site visit (not the self-study); and free of grammatical and proofreading errors.
- 4. Is descriptive and based on the evidence site visitors see and hear.
  - a. Provides quotes from faculty, administrators, and students/trainees to illustrate the program's adherence to the SoA.
  - b. Describes elements of the program that the CoA cannot directly observe, such as completeness of files, grievances/complaints, quality of dissertations, sufficiency of physical space, and program climate.
  - c. Includes document names and pages numbers when it will clarify the source of the information reported.
- 5. Conveys and maintains a neutral tone; site visit reports should not include recommendations, flattery, and prescriptions.
- 6. Provides sufficient context (e.g., recent staffing changes, changes in budget model) as necessary to facilitate understanding of the program's adherence to the SoA.
- 7. Describes the site visit team's follow-up efforts on any concerns found within the materials reviewed or during the visit.
  - a. Describes follow-up efforts on any issues discussed in the preliminary review and discusses any discrepancies with the program, particularly those items that the preliminary review indicates will be discussed by the site visitors.
- 8. Attends to the program's Minimum Levels of Achievement (MLAs) and outcome data.
  - a. Are the MLAs understandable, clear, and specific?
  - b. Do the evaluation tools and/or rating forms used by the program to evaluate student/trainee achievement make sense in the context of the profession-wide competencies, associated elements, and program-specific competencies (if applicable)?
  - c. What happens when trainees do not achieve the MLAs?
  - d. What do the outcome data say about the extent to which trainees are achieving the MLAs?
  - e. Do any of the data provided raise concerns (e.g., licensure rate, attrition)?
- 9. Includes a *brief* opening statement, summary, and closing statement. More specific content related to the program should be addressed in the standards section of the report.

## A strong site visit report does **NOT** include...

- 1. Repetitive/verbatim text across standards: While it is understood that site visit comments may relate to multiple sub-standards (which is appropriate and expected), the preference is to summarize issues previously noted to avoid verbatim text across standards.
- 2. Statements of compliance/Definitive statements that a standard has been met: The Commission values the role of site visitors in the accreditation process and considers site visitors' observations in their review. However, it should be noted that since the Commission is recognized as the formal accrediting body, site visit reports should avoid statements indicating that a program is, or is not, in compliance with a specific standard. Site visitors should describe their observations in a manner that allows the Commission to make a final determination as to whether the standard has been met.
- 3. Specific recommendations: Consistent with the observer role of the site visitor, visitors are encouraged to convey and maintain a neutral tone in their site reports. As such, site visitors are asked to refrain from including recommendations or prescriptions in their report.
- 4. A lack of descriptive content/excessive brevity: When comments are brief and/or do not provide feedback beyond confirmation that observations were consistent with the content of the self-study, the Commission may lack information that would assist in developing a more complete understanding of the program. While it is not necessary to repeat content directly from the self-study narrative, further details and elaboration on the site visit teams' observations on site are useful to the Commission in verifying that all standards have been met. Sufficient context helps facilitate an understanding of the program's adherence to the SoA.
- 5. Proofreading errors: Site visitors are encouraged to use the Word document Site Visit Report Preparation Sheet to draft and edit their site visit comments before final submission.
- 6. An informal tone: The report is a formal piece of the program's record. As such, visitors should strive to create a cohesive, professional report that reflects the observations of the whole team. Site visitors are encouraged to write in complete sentences and avoid using "I" when noting observations. The site visit Chair is encouraged to review the full report for consistency.

# Appendix C

**Confidentiality Agreement** 



## **APA CoA Site Visitor Confidentiality Agreement**

I participate in the accrediting process of the American Psychological Association ("APA"), Commission on Accreditation ("CoA"), as a site visitor. In carrying out my duties and responsibilities as a site visitor, I understand that, while a site visitor at a program ("Program"), I may come in contact with certain patient/client information that is confidential in nature, including information that can be used to identify those patients/clients ("confidential information"). In most instances, this confidential information is protected health information covered by the Privacy Rule of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"). For purposes of this Confidentiality Agreement, this confidential information includes all health information protected by state law and/or HIPAA that is transmitted or maintained in any form, including written, oral, or electronic, whether such information is purposefully or incidentally disclosed to me by any party (hereafter "PHI"). I further understand that the APA's CoA's policy is that Programs should not share PHI with site visitors, and site visitors should not request PHI.

I also understand that an accreditation site visit requires access to program and student information that is confidential in nature. It is understood that a site visitor does not serve as a decision maker or consultant, but as an observer representing the CoA. The site visit, therefore, remains confidential among programs, the site visitors, and the CoA. For this reason, as a site visitor, I must inform those with whom I interact of the confidentiality of the site visit process and am obligated to report and not withhold any information gained during the site visit. Specifically, this information will be reported to the CoA, but will remain confidential with the CoA.

Therefore, in exchange for my participation in the accreditation process, I hereby acknowledge and agree to the following:

- 1. During the accreditation review process, I may incidentally come in contact with PHI.
- 2. I agree that if I incidentally receive PHI during the accreditation review process, I will immediately notify the APA Office of Program Consultation and Accreditation and the Program and follow their instructions as to whether I should return or destroy the PHI.
- 3. While any Program PHI is in my possession and control, I agree that I will use reasonable and appropriate safeguards to prevent any use or disclosure of the PHI, except as specifically requested by APA or the Program, as long as such use or disclosure is consistent with HIPAA and other applicable laws.
- 4. I agree that I will not make a duplicate copy of, or by any other means record, any PHI.
- 5. I agree to the extent practicable to mitigate any harmful effect known to me of a use or disclosure of PHI in violation of this Confidentiality Agreement.
- 6. I agree to immediately notify the APA Office of Program Consultation and Accreditation and the Program of any use or disclosure of PHI not permitted by this Confidentiality Agreement of which I become aware.
- 7. Finally, I am obligated to report and not withhold any information gained during the site visit and must inform those with whom I interact of the confidentiality of the site visit process. Specifically, this information will be reported to the CoA, but will remain confidential with the CoA.

Program/s Being Visited:	Visit Date/s:
Name:	Signature:
Today's Date:	

I declare my agreement with the listed terms

## Appendix D

CoA Guidance Addressing the Enforcement of Diversity Accreditation Standards





TO: APA Accredited Programs and Site Visitors

FR: Janay Sander, Ph.D., Chair, APA Commission on Accreditation

RE: Addressing Accredited Program Questions about the Enforcement of Diversity

Accreditation Standards

## March 21, 2025

Recent executive and legislative actions have implications for accredited master's, doctoral, doctoral internship, and postdoctoral residency programs, as well as programs seeking accreditation and those under accreditation review. In response, the APA Commission on Accreditation (CoA) voted on March 13, 2025, to immediately and temporarily suspend evaluation of programs for compliance with several specific accreditation standards. The suspended standards are those related to faculty and student program actions in the areas of diversity in recruitment, admission/selection, and/or retention efforts.

As the sole APA governance body responsible for making accreditation decisions on professional education and training programs in psychology, the Commission – a U.S. Department of Education recognized accrediting agency of health service psychology programs - is implementing this interim action while awaiting further court guidance on the enforceability of Ending Illegal Discrimination and Restoring Merit-Based Opportunity Executive Order (EO) (Jan. 21, 2025) ("Ending Illegal Discrimination EO") (Jan. 21, 2025). Of note, on February 21, 2025, a federal district court enjoined President Trump's Ending Illegal Discrimination EO. The Trump administration challenged the district court's action that had ruled the EO was not be enforced during the litigation. On March 14, 2025, the U.S. Court of Appeals for the Fourth Circuit upheld as legal, at least temporarily, the president's EO seeking to end "illegal DEI." This means that the Ending Illegal Discrimination EO is currently law while litigation is pending.

Programs will continue to adhere to accreditation standards specific to professional competency and curriculum in psychology where the educational benefit of diversity is a core tenet. These accreditation standards include the obligation for accredited programs to engage in offering teaching that indicates respect for and understanding of cultural and individual differences to promote the provision of quality psychological services to all individuals. Additionally, the accreditation standards mandate that programs avoid any actions that would restrict program access or completion on grounds that are irrelevant to success in graduate training or the profession of psychology. Accordingly, accredited programs will continue to have the obligation to "engage [] in actions that indicate respect for and understanding of cultural and individual differences and diversity," Master's § I.A.1.c; Doctoral § I.A.1.c. Similarly, accredited programs will continue to be required to "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," Master's § I.D.1.g; Doctoral § I.D.1.g; Doctoral Internship § I.C.1.j; and Postdoctoral Residency § 1.C.1.b.x.

No accredited program is required to violate the law to become or to remain an accredited program. The commission's actions are based on its understanding that the executive order does not prevent state or local governments, federal contractors or federally funded state and local educational agencies or institutions of higher education from engaging in First Amendment-protected speech.

The Standards of Accreditation that the CoA will temporarily not review for compliance, either in part or entirely, under this interim policy are listed below:

Level of Training	Standards Not Reviewed for Compliance
Master's	I.B.2.: The following statements will not be reviewed for compliance:
	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. I.D.1.a: The following underlined clause from the statement below will not be reviewed for compliance: Academic recruitment and admissions, including general recruitment/admissions and recruitment of students who are diverse. II.A.1.b: Entire Standard III.B.3: The following underlined clause from the statement below will not be reviewed for compliance: To ensure a supportive and encouraging learning environment for a diverse student body, the program must avoid any actions that would restrict program access on grounds that are irrelevant to success in graduate training. III.C.2: Entire Standard IV.B.5: Entire Standard **Doctoral** I.B.2: The following statements will not be reviewed for compliance: 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.

I.D.1.a: The following underlined clause from the statement below will not be reviewed for compliance:

Academic recruitment and admissions, <u>including general</u> recruitment/admissions and recruitment of students who are diverse.

III.A.1.b(i)–(ii): Entire Standard

III.B.3: The following underlined clause from the statement below will not be reviewed for compliance:

To ensure a supportive and encouraging learning environment <u>for a diverse student body</u>, the program must avoid any actions that would restrict program access on grounds that are irrelevant to success in graduate training.

III.C.2: Entire Standard

IV.B.5: Entire Standard

## **Doctoral Internship**

I.B.3: The following statements will not be reviewed for compliance:

The program has made systematic, coherent, and long-term efforts to attract and retain interns and faculty/staff 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 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.  I.D.1(a)-(b): Entire Standard  III.A.2.a-b: Entire Standard  IV.B: Entire Standard
	V.A.1.c: Entire Standard
Postdoctoral Residency	I.B.3: The following statements will not be reviewed for compliance:
	The program has made systematic, coherent, and long-term efforts to attract and retain interns and faculty/staff 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 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.
	I.D.1.a-b: Entire Standard
	III.A.3: Entire Standard
	IV.B.2.a: Entire Standard
	V.A.1.a: The underlined clause will not be reviewed for compliance:

The program demonstrates its commitment to public disclosure by providing accurate and complete written materials and other communications that appropriately represent it to all relevant publics. At a minimum, this includes general program information pertaining to its aims, recruitment and selection, implementation of strategies to ensure resident cohorts that are diverse, required training experiences, use of distance education technologies for training and supervision, and expected training outcomes.

Please note that Implementing Regulations (IRs) associated with the Standards listed above will not be used to evaluate a program's compliance with these Standards. In addition, programs should refrain from submitting diversity-related substantive changes until further notice.

Programs are encouraged to contact the Office of Program Consultation and Accreditation at apaaccred@apa.org with any questions.



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