COMMISSION ON ACCREDITATION

IMPLEMENTING REGULATIONS

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E.1. Miscellaneous regulations

E.1-1. Procedure for Office of Program Consultation and Accreditation Maintenance of Program Accreditation Records

(Commission on Accreditation, October 1997; revised July 2011, April 2023, April 2025)

Section 602.15(b) of the criteria for recognition of the CoA's accrediting activities by the U.S. Secretary of Education states the following:

"The agency maintains complete and accurate records of (1) its last full accreditation or preaccreditation review of each institution or program, including on-site evaluation team reports, institution's or program's responses to on-site reports, periodic review reports, any reports of special reviews conducted by the agency between regular reviews, and a copy of the institution's or program's most recent self-study; and (2) all decisions made throughout an institution's or program's affiliation with the agency regarding the accreditation and preaccreditation of any institution or program and substantive changes."

This implementation procedure outlines the steps that will be taken by the CoA, consistent with the Secretary's requirements.

1. An accreditation history will be maintained for each program. This information will include dates of review for accreditation and the final decision resulting from the review.

2. The Office of Program Consultation and Accreditation will maintain the following records for each program:

    a) The program's most recent self-study report.

    b) The site visit reports and responses from the program's most recent periodic reviews.

    c) All narrative annual reports submitted by the program following its most recent periodic reviews.

    d) Copies of all official decision letters issued by the CoA to a program regarding decisions made on a program's accredited status, including any substantive changes.

As part of routine records maintenance, the CoA discards records that it is not required to retain under current U.S. Department of Education recognition standards, CoA policies, or other applicable legal requirements.

E.1-2. Groups to Receive Notification of Proposed Changes in the *Standards of Accreditation* and *Accreditation Operating Procedures*

(Commission on Accreditation, October 1998; revised July 2002, April 2004, November 2019, January 2026, March 2026)

Section 6.d of the "APA Policies for Accreditation Governance" states the following:

"The Commission on Accreditation [CoA] shall be responsible for formulating, promulgating, and implementing accreditation policies, procedures, and criteria following appropriate public notice, public hearings, and approval. Such public notice shall include the members of the Council of Representatives, the Board of Directors, and the Board of Educational Affairs, as well as those persons and programs potentially affected by any proposed changes in accreditation policies, procedures, and criteria."

In addition, Section 602.21(c-d) of the criteria for recognition of the CoA's accrediting activities by the U.S. Secretary of Education states the following:

(a) The agency must maintain a comprehensive systematic program of review that involves all relevant constituencies and that demonstrates that its standards are adequate to evaluate the quality of the education or training provided by institutions and programs it accredits and relevant to the educational or training needs of students.

(b) The agency determines the specific procedures it follows in evaluating its standards, but the agency must ensure that its program of review-

(1) is comprehensive;

(2) occurs at regular, yet reasonable, intervals or on an ongoing basis;

(3) examines each of the agency's standards and the standards as a whole; and,

(4) involves all of the agency's relevant constituencies in the review and affords them a meaningful opportunity to provide input into the review.

As such, the CoA's *Standards of Accreditation in Health Service Psychology* (SoA) and *Accreditation Operating Procedures* (AOP) will receive systematic review at least every 10 years, or sooner as needed. The SoA and AOP systematic review process begins with notification of the public and relevant constituent groups described below by informing them that the CoA will begin systematic review of the SoA and/or AOP and is soliciting feedback on areas of that warrant revision. The CoA then reviews information provided by relevant groups (as defined below) and designates a subgroup of Commissioners to begin preparing a draft revision of the SoA and/or AOP. Once the CoA approves the draft revision, it is sent to the same relevant groups for comment on the draft revision. The CoA then continues an iterative process of reviewing and incorporating public comment in the SoA and/or AOP revisions until the revised SoA and/or AOP is ready to be considered for adoption as policy. The adoption of the revised SoA and/or AOP will then follow the approval process detailed in IR A.2: Summary by the Board of Directors of the American Psychological Association of Key Provisions of the Policies for Accreditation Governance Defining APA Governance Interaction with the Commission on Accreditation. Regular and systematic review of the Implementing Regulations (IRs) occurs at least once a year at the Commission meeting designated for a policy agenda. If the Commission determines that there is a need to change the SoA, the IRs, or other policy, the Commission will initiate action within 12 months following the policy meeting and will finalize all changes within a reasonable period of time.

Moreover, this implementation procedure identifies the parties to be involved in the CoA's systematic review of its Standards and provided the opportunity to provide comment on the SoA and AOP as a whole and any on proposed changes in the SoA and AOP, consistent with the requirements as set forth in the preceding documents. The CoA reviews all public comment received and incorporates public comment in its process of review and revision, as deemed appropriate.

A. Groups that will receive requests for review and comment on the SoA and AOP as a whole and any CoA policies and substantive revisions (i.e. SoA, AOP, IRs)

1. Governance of the American Psychological Association (APA)

All members of:

- APA Board of Directors
- APA Board of Educational Affairs
- APA Council of Representatives

Current Chairs of:

- APA Committee on Disability Issues in Psychology (CDIP)
- APA Committee on Ethnic Minority Affairs
- APA Committee on Sexual Orientation and Gender Diversity
- APA Committee on Women in Psychology
- APA Division 12 (Clinical Psychology)
- APA Division 16 (School Psychology)
- APA Division 17 (Counseling Psychology)
- APA Division 42 (Private Practice)

2. Parties directly involved in the accreditation process

- Accreditation site visitors
- Alumni from accredited programs
- Members of standing accreditation appeal panel pool
- Training directors of accredited programs
- Students of accredited programs

3. Psychology groups to which seats on the CoA are formally allocated

- Academy of Psychological Clinical Science (APCS)
- American Psychological Association of Graduate Students (APAGS)
- APA Board for the Advancement of Psychology in the Public Interest (BAPPI)
- APA Board of Professional Affairs (BPA)
- APA Board of Scientific Affairs (BSA)
- Association of Psychology Postdoctoral and Internship Centers (APPIC)
- Committee on Professional Practice and Standards (COPPS)
- Council of Counseling Psychology Programs (CCPTP)
- Council of Directors of School Psychology Programs (CDSPP)
- Council of Graduate Departments of Psychology (COGDOP)
- Council of University Directors of Clinical Psychology (CUDCP)
- National Council of Schools and Programs of Professional Psychology (NCSPP)

4. Other groups within the psychology community

- American Association of State and Provincial Psychology Boards (ASPPB)
- American Board of Professional Psychology (ABPP)
- Association of Counseling Center Training Agencies (ACCTA)
- Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN)
- Clinical Neuropsychology Specialty Council
- Commission for the Recognition of Specialties and Subspecialties in Professional Psychology (CRSSPP)

- Council of Chairs of Training Councils (CCTC)
- Council of Specialties (CoS) in Professional Psychology
- Department of Veterans Affairs Office of Academic Affiliations
- National Register of Health Service Psychologists
- State Psychological Associations
- State Psychology Licensing Boards

5. Other groups with an interest in accreditation

- Association of Specialized and Professional Accreditors (ASPA)
- Commission for Accreditation of Higher Education (CHEA)
- U.S. Department of Education (ED)
- All accrediting agencies that are recognized either by the Secretary of Education or the Council for Higher Education Accreditation (CHEA); and/or are members of ASPA
- Members of the public

B. General Comments on Dissemination

1) All recipients of a notice of the CoA undertaking a process of systematic review of its policies will be encouraged to disseminate the notice to their members/constituents to ensure wide opportunity to provide comment.

2) In addition to distributing a notice of CoA's systematic review of its policies to the groups outlined previously, the Commission on Accreditation will publish a notice of call for comment and the notice will be posted on the OPCA website, along with instructions on how to obtain a copy of the notice of systematic review. The Commission on Accreditation will also send email announcements to listservs of all APA Divisions, Boards, Committees, and constituent groups.

3) The Commission on Accreditation reserves the right to expand its distribution of proposed changes as may be appropriate in the specific instance. In addition, the Commission will review this list every three years to determine what other groups, if any, should be added for automatic receipt of proposed changes.

E.1-3. Commission on Accreditation Policy on Research Studies

(Adopted by the Commission on Accreditation April 1999; revised January 2007, October 2020, October 2025)

Inasmuch as the Commission on Accreditation (CoA) has been charged in the "Policies for Accreditation Governance" with the following duties related to research:

- Undertake timely and appropriate self-study analysis of its own objectives, criteria, policies, procedures, and practices
- Conduct evaluative and developmental research appropriate to accreditation

And inasmuch as the CoA has established the following goals of its accreditation program:

- Protect the interests of students
- Benefit the public
- Improve the quality of teaching, learning, research, and professional practice

The CoA has developed this policy on the conduct of research studies. These studies involve the examination of the reliability and validity of its accreditation standards and procedures as well as an examination of individual program characteristics to assess ongoing program consistency with the *Standards of Accreditation (SoA)*.

This research policy/plan has the following objectives:

1. Ensure overall construct validity of the SoA, consistent with the professional principles and values of the profession of psychology:
    a. Broad and general preparation for practice at the entry level to independent practice;
    b. Broad and in-depth postdoctoral preparation for professional practice at the advanced level in substantive traditional practice areas—focused and in-depth postdoctoral preparation for practice in substantive specialty practice areas;
    c. The contribution of science and practice to excellence in training in Health Service Psychology; and,
    d. The right of each program to define its philosophy, training aims, profession-wide and program-specific competencies, and desired outcomes, consistent with those generally accepted as appropriate to the profession.
2. Ensure validity of the SoA in the measurement of program quality of teaching, learning, research, and professional practice; protection of students; and benefit to public.
3. Ensure ability of programs to remain consistent with SoA, both on aggregate and individual program basis.
4. Ensure reliability/integrity of accreditation process to ensure fairness to all stakeholders in the process.

Assessing Reliability and Validity

The CoA has established the following list of research studies to aid in the analysis of the reliability and validity of the *SoA*. The evaluation cycle will be completed every five years; a review of the plan itself will take place every fifth year. The CoA will use the results of these studies to make enhancements as necessary to the accreditation process.

Type of Study	To Assess How Well the Following Objectives Are Met (See Page 1)	General Study Procedure	Stakeholders That Will Be Involved in Assessment	How Often Study Will Be Conducted
1. Analysis of annual report data: aggregate	• Ensure validity of SoA in quality/ protect/benefit • Ensure program ability to remain consistent w/SoA	Data from annual report forms will be tabulated; summary statistics on program characteristics will be presented.	Accredited programs	Annually
2. Analysis of annual report data: individual programs	• Ensure validity of SoA in quality/ protect/benefit • Ensure program ability to remain consistent w/SoA	See "Plan for Assessing Program Characteristics"	Accredited programs	Annually
3. Detailed study of Standards I, III, IV, and V (Master's, Doc., Intern., Postdoc.)	• Ensure overall construct validity • Ensure validity of SoA in quality/ protect/benefit • Ensure program ability to remain consistent w/SoA	Content analysis of CoA decision letters to determine occurrence, i.e., frequency of programs' being cited on this each standard in general and specific sub-standards.	Accredited programs	Every 5 years (Year 1 of cycle)

Type of Study	To Assess How Well the Following Objectives Are Met (See Page 1)	General Study Procedure	Stakeholders That Will Be Involved in Assessment	How Often Study Will Be Conducted
4. Detailed study of Standard II (Master's, Doc., Intern., Postdoc.)	• Ensure overall construct validity • Ensure validity of SoA in quality/ protect/benefit • Ensure program ability to remain consistent w/SoA	Content analysis of CoA decision letters to determine occurrence (e.g. frequency) of programs' being cited on this each standard in general and specific sub-standards.	Accredited programs	Every 5 years (Year 1 of cycle)
		Survey students, alumni, and training and practice groups about the relevance of the competencies identified in Standard II to student preparation for professional practice.	Chairs of groups that seat the Commission on Accreditation State licensing boards Students Employers	
5. Evaluation of adequacy of site visit reports (using sample)	Ensure reliability/ integrity of process	A sample of site visit reports is examined to determine whether site visitors are addressing all standards in the site visit report, the degree to which they are complying with the CoA's instructions in providing information on the program, and the frequency with which visitors provide recommendations or other undesired information.	• Accredited programs • Site visitors	Every 5 years (Year 1 of cycle)

Type of Study	To Assess How Well the Following Objectives Are Met (See Page 1)	General Study Procedure	Stakeholders That Will Be Involved in Assessment	How Often Study Will Be Conducted
6. Self-study report adequacy (using sample): • Do programs address information requested in report guidelines? • What is the relation of the adequacy of the self- study report to decision outcome?	Ensure reliability/ integrity of process	A sample of self-study reports is examined to determine whether programs are addressing all domains in the self-study report and the degree to which they are complying with the CoA's instructions in providing information on the program (including tables). The determined adequacy measure will be compared to the outcome of the decision-making process (e.g., Was a decision deferred for more information?).	Accredited programs	Every 5 years (Year 1 of cycle)
7. Report on incidence and program responses to D.4-7 threshold letters.	• Ensure overall construct validity • Ensure validity of SoA in quality/ protect/benefit • Ensure program ability to remain consistent w/SoA	Letters notifying programs and responses of D. 4-7 letters are analyzed to determine the incidence of each threshold being triggered and whether or not and how notifications are being addressed.	Accredited programs	Every 5 years (Year 2 of cycle)
8. Consistency of decisions in programs with similar issues (e.g., loss of faculty members)	Ensure reliability/ integrity of process	A sample of decision letters of programs reviewed in the five years preceding the study will be analyzed to determine the standards on which the programs were cited. Statistical analyses will be performed to determine patterns of decisions across programs.	Accredited programs	Every 5 years (Year 2 of cycle)

Type of Study	To Assess How Well the Following Objectives Are Met (See Page 1)	General Study Procedure	Stakeholders That Will Be Involved in Assessment	How Often Study Will Be Conducted
9. Consistency of decisions—reviewer agreement: • Primary/secondary reviewers • Reviewer/review panel group • Review panel/CoA	Ensure reliability/ integrity of process	Decision recommendations (divided by master's, doctoral, internship, and postdoctoral programs) from three CoA meetings will be reviewed and analyzed. Agreement and discordance between these decisions will be examined.	Accredited programs	Every 5 years (Year 2 of cycle)
10. Study of Graduate Outcomes: • Advanced practice training (indicated by ABPPs) • Advance research productivity (publications, indicated by citation search) • Licensure: • Scores on particular sections in comparison to training model • Scores on overall licensing exam	• Ensure overall construct validity • Ensure validity of SoA in quality/ protect/benefit • Ensure program ability to remain consistent w/SoA	Data from annual report forms will be tabulated for ABPPs and publications. Licensing exam score data from the most recent EPPP performance publication will be tabulated to study psychology licensing exam performance.	Accredited programs	Every 5 years (Year 2 of cycle)

Type of Study	To Assess How Well the Following Objectives Are Met (See Page 1)	General Study Procedure	Stakeholders That Will Be Involved in Assessment	How Often Study Will Be Conducted
11. Timing of complaint reports	Ensure reliability/ integrity of process	All complaints received in the five years preceding the study will comprise the sample. The study will analyze the time elapsed between receipt of the complaint and acknowledgement to complainant/forwarding to program, time elapsed between due date of program response and receipt of response, and ability of CoA to review complaint at the regularly-scheduled meeting following receipt of all materials.	• Accredited programs Students/general public	Every 5 years (Year 3 of cycle)
12. Study of program arrangements for site visit: Characteristics and reasons for programs to: • Request additional list(s) of site visitors • Request change in site visit cycle	Ensure reliability/ integrity of process	Programs visited in the two years preceding the study will comprise the sample. Information from the Office of Program Consultation and Accreditation database pertaining to the questions at left will be analyzed to uncover characteristics of programs that request additional site visitors and/or a change in their site visit cycle.	Accredited programs	Every 5 years (Year 3 of cycle)
13. Study of the impact of membership changes in the CoA on decision making and process over time.	Ensure reliability/ integrity of process	Information collected from the content analyses described previously will be analyzed by year to assess whether differences in decision patterns are apparent by year.	Accredited programs	Every 5 years (Year 3 of cycle)

Type of Study	To Assess How Well the Following Objectives Are Met (See Page 1)	General Study Procedure	Stakeholders That Will Be Involved in Assessment	How Often Study Will Be Conducted
14. Evaluation of complaint process: • Analysis of issues raised in complaints • Number of complaints received per year • Characteristics of programs against which complaints are filed • Results of complaint review • Impact of complaint review/CoA decision on programs • Timing of response to original complaint and time from receipt of complaint to completion of Commission analysis and decision	Ensure reliability/ integrity of the process	All complaints received in the five years preceding the study will be analyzed along the dimensions at left.	• Accredited programs • Students/general public	Every 5 years (Year 4 of cycle)
15. Evaluation of appeal process: • Analysis of stated reasons for appeal • Characteristics of programs that appeal • Outcomes of appeal hearings • Evaluation of the appeal process by CoA members and appellants (before decision is made)	Ensure reliability/ integrity of the process	• All Programs that appealed CoA decisions in the five years preceding the study will be examined on the factors at left.	• Appellant programs	Every 5 years (Year 4 of cycle)
		• The CoA members and appeal panelists participating will complete an evaluation form designed to capture their views of the appeal process.	• Appeal panelists	

Type of Study	To Assess How Well the Following Objectives Are Met (See Page 1)	General Study Procedure	Stakeholders That Will Be Involved in Assessment	How Often Study Will Be Conducted
16. Survey of accredited programs and other interested parties regarding the appropriateness and clarity of the SoA, as well as its relevance to student preparation for professional practice	• Ensure overall construct validity • Ensure validity of SoA in quality/ protect/benefit • Ensure program ability to remain consistent w/SoA	A survey instrument, developed by the CoA in conjunction with the APA Research Office, will collect information regarding the degree to which stakeholders agree/disagree that the scope of accreditation, guiding principles, and *Standards of Accreditation* are appropriate to quality training in psychology and are written in a clear fashion. The results will be analyzed on an aggregate basis, as well as across the groups involved in the assessment.	• Accredited programs • Chairs of groups that seat the Commission on Accreditation • Site visitors • APA governance groups • Institutional/ specialized accreditors • State licensing boards • National Register • National higher education organizations	Every 5 years (Year 4 of cycle)
17. Survey of internship programs: ratings of doctoral programs	• Ensure overall construct validity • Ensure validity of SoA in quality/ protect/benefit • Ensure program ability to remain consistent w/SoA	A survey instrument, developed by the CoA in conjunction with the APA Research Office, will collect information from accredited internship programs. The questions will address the degree to which internships agree/disagree that accredited doctoral programs are providing training that adequately prepares students for internship. Questions will assess overall quality of internships' applicant pool as well as their current internship classes.	Accredited internship programs	Every 5 years (Year 4 of cycle)

Type of Study	To Assess How Well the Following Objectives Are Met (See Page 1)	General Study Procedure	Stakeholders That Will Be Involved in Assessment	How Often Study Will Be Conducted
18. Survey of accredited programs and other interested parties regarding their views of the accreditation process	Ensure reliability/ integrity of process	A survey instrument, developed by the CoA in conjunction with the APA Research Office, will collect information regarding the degree to which stakeholders agree/disagree that the accreditation procedures are fair, are applied fairly by the CoA, and are written in a clear fashion. The results will be analyzed on an aggregate basis, as well as across the groups involved in the assessment.	• Accredited programs • Chairs of groups that seat the Commission on Accreditation • Site visitors • APA governance groups • Institutional and specialized accreditors • State licensing boards • National Register • National higher education organizations	Every 5 years (Year 5 of cycle)
19. Evaluation of site visitor workshops	Ensure reliability/ integrity of process	At the end of site visitor workshops, the participants are asked to complete a short evaluation form with questions on the quality of various aspects of the workshop.	Site visitors	Information is collected after each site visit and will be analyzed and presented annually.

Type of Study	To Assess How Well the Following Objectives Are Met (See Page 1)	General Study Procedure	Stakeholders That Will Be Involved in Assessment	How Often Study Will Be Conducted
20. Evaluation of site visit process: • Site visit chair evaluation of other team members • Other team member evaluation of site visit chair • Program evaluation of site visitors, site visit process, and self-study instructions/tables • Primary/secondary reviewer evaluation of site visit report	• Ensure reliability/ integrity of process	Evaluation forms are distributed to each visited program prior to the visit, with instructions to complete and return the form within five days of the completion of the visit. Similar instructions are given to the team chair and team members. Programs also will be asked to complete a questionnaire which is designed to gauge their impressions of the site visit process (e.g., instructions from Accreditation Office, ease in obtaining site visitors) as well as their experience in completing their self-study reports.	• Accredited programs • Site visitors	Information is collected after each site visit. Aggregate information will be analyzed in Years 1 and 4 of cycle. Feedback on individual performance will be forwarded to specific site visitors annually.
21. Review of trends in higher education and accreditation	• Ensure validity of SoA in quality/ protect/benefit • Ensure reliability/ integrity of process	Office of Program Consultation and Accreditation staff will review literature and periodicals on higher education and accreditation and will keep the CoA informed of these trends at the CoA's regular meetings.	No direct involvement, but literature review may involve publications produced by stakeholder groups	Ongoing

Plan for Assessing Program Characteristics

The CoA has established the following plan for assessment of program characteristics. These assessments will take place annually, in conjunction with the annual review of programs for reaffirmation of accredited status, and, for year-to-year comparison of program characteristics, with the periodic review of programs. In so doing, the CoA endeavors to assess ongoing program consistency with the *Standards of Accreditation* as well as to assist programs in ongoing quality assurance and enhancement.

Overview of CoA Plan for Assessing Program Characteristics

Program characteristics will be assessed on two dimensions: A **longitudinal** comparison (program compared with itself, using the program's data provided in previous years) and a **"snapshot"** comparison.

The following program characteristics, based upon available data collected in the annual reports, will be used in the longitudinal comparison:

- **Program demographics**
  - Student/faculty or intern/staff ratios
  - % women in program
  - % ethnic minorities in program
  - % of students/faculty who presented papers/workshops
  - % of students/faculty who published articles
  - % of students involved in part-time delivery of services
  - % if students involved in grant-supported research
  - % of faculty that are recipients of grants
  - % of faculty engaged in delivery of professional services
  - Number of slots (internships)
  - Stipend for a full-time intern (internships)

- **Student achievement measures**
  - Graduates employed in an area consistent with program aims (master's)
  - Time to degree (master's and doctoral)
  - Internship placement rates (number accepted/number applied) (doctoral)
  - Attrition rate (number left program/number in program) (master's and doctoral)
  - Licensure pass rates [if collected]
  - Percentage of graduates who are licensed/Job placement rates [if collected]

Statistical information (distribution, minimum, maximum, median, mean, standard deviation) of the **student achievement measures** will be developed, using the annual report data for that year. Program values on the student achievement measures will be contextualized with those of other programs, using the following cohort groups:

- Clinical M.S. programs
- Clinical M.A. programs
- Counseling M.S. programs
- Counseling M.A. programs
- School M.S. programs
- School M.A. programs
- Combined M.S. programs
- Combined M.A. programs
- Clinical Ph.D. programs
- Clinical Psy.D. programs
- Counseling Ph.D. programs
- Counseling Psy.D. programs
- School Ph.D. programs
- School Psy.D. programs
- Combined Ph.D. programs
- Combined Psy.D. programs
- Internship programs
- Postdoctoral programs

Thresholds of Acceptable Performance—Use of Demographic/Student Achievement Measures by the CoA

In using the demographic and student achievement measures on a program-by-program basis, the CoA will determine whether the program's operations are consistent with the SoA. Thresholds of acceptable performance are set forth in the SoA, in which the following minimum standards of performance are defined as characteristic of accredited programs regardless of program model:

- A program's purpose must be within the scope of the accrediting body and must be pursued in an institutional setting appropriate for the education and training of professional psychologists.
- A program will have a clearly specified philosophy of education and training, compatible with the mission of its sponsor institution and appropriate to the science and practice of psychology. The program will ensure the development of competencies as delineated for master's doctoral, internship, and postdoctoral programs.
- A program will have resources (physical, financial, human) of appropriate quality and sufficiency to achieve its education and training aims and competencies.
- A program will recognize the importance of cultural and individual differences and diversity in the training of psychologists.
- A program will have education, training, and socialization experiences characterized by mutual respect and courtesy between faculty/staff and students/interns/residents and will operate in a manner that facilitates educational experiences.
- A program will engage in self-study, which assures that its aims and competencies are met, enhances the quality of professional education and training, and contributes to the fulfillment of its sponsor institution's mission.
- A program will provide written materials and other communications that appropriately represent it to the relevant publics.
- A program will fulfill its responsibilities to the CoA by abiding by its published policies and procedures; informing the CoA in a timely manner of program changes; and paying all fees associated with its accredited status.

E.1-3(a). Use of Data and Research Personnel Resources
(Commission on Accreditation, July 2001; revised February 2005, October 2007)

The role of the Accreditation Research Office in the Office of Program Consultation and Accreditation (OPCA) is to provide the Commission on Accreditation with the data and information it needs to continually improve serving the public as an accrediting body. In order to accomplish this task, there are a number of ongoing research projects that the unit engages in, as well as special projects at the behest of the Commission. The ongoing research projects include the evaluation of site visitors, collecting and analyzing annual report data (longitudinal analysis as well as yearly cohort analyses), surveys on consumer satisfaction, and the collection of information as determined by the Department of Education and the Council for Higher Education Accreditation (CHEA) (i.e., CoA Survey about the *Standards of Accreditation* for Doctoral Programs).

All information gathered in the process of program review (e.g., self-study, site visit report, decision letter) is considered confidential. Only members of the Commission, official liaisons, and Office staff have access to this information, and then only when they are acting as part of their official duties. Relevant statistics and special reports prepared by the Accreditation Research Office in the OPCA, however, will be made available through the Internet.

Requests for analyses of data collected by the OPCA must be approved by the Commission. Raw data will not be released. Any request for analyses must include: (1) a statement of the question to be answered; (2) a statement of the need for the analyses; (3) information about how the analyses provided will be disseminated; (4) an assurance that the source of the analyses will be appropriately acknowledged; and (5) a copy of any formal dissemination of the findings. Such special requests will be undertaken only after the primary task of serving the Commission is completed. Requestors may be asked to bear the cost of those analyses. Aggregate results of analyses provided by special request will be made available to the public through the internet.

E.1-4. Training for New Commission on Accreditation Members and Official Liaisons to the Commission on Accreditation

(Commission on Accreditation, July 2000; revised July 2018)

Commissioners of the Commission on Accreditation (CoA) participate in and officially-designated liaisons from the Board of Educational Affairs and the Board of Directors to the CoA are privy to a number of accreditation-related activities, including review and decision making on programs and determination of policy regarding accreditation issues. These functions require the exercise of professional judgment and awareness of actual or perceived conflict of interest. In addition, members and liaisons frequently are presented with accreditation issues of a sensitive and/or confidential nature. Because of the need for a thorough understanding of the accreditation review process, consistency in decision making on programs, and sensitivity to confidentiality in accreditation, each new member and liaison to the CoA will be required to undergo training prior to being permitted to participate in the confidential (closed) portions of CoA meetings. Minimally, such training will cover the accreditation program review process, conflicts of interest in accreditation, and communication and consultation with accredited programs.

An orientation for new Commissioners and liaisons will be scheduled by the APA Office of Program Consultation and Accreditation. The orientation will occur prior to the first regularly-scheduled meeting following the beginning of the terms of service for the new Commissioners and liaisons. Should a new Commissioner or liaison be unable to attend that orientation session, they will receive training at the prerogative of the CoA chair in consultation with the Executive Committee.

E.1-5. Accreditation Reference Library

(Commission on Accreditation, February 2005; revised November 2022)

The CoA will maintain a reference library of documents that it feels benefits, or may benefit, the work of CoA members. These documents are maintained for the use of the CoA, but do not constitute or reflect official positions of the Commission and do not supersede the Commission's *Standards of Accreditation* (SoA) or its existing implementing regulations.

Documents may be proposed for inclusion in the reference library by current members of the CoA or by individuals or groups outside of the CoA. Once submitted, documents will be reviewed for relevance to the SoA by the Communication Work Group (CWG). CWG-approved documents will be provided to the Executive Committee for approval to be included in the library.

Materials in the reference library will be reviewed by the Commission's Communication Work Group every three (3) years for currency and continued relevance.

E.1-6. Site Visitor Training Materials from External Sources

(Commission on Accreditation, February 2005)

External sources periodically submit materials to the CoA with the request that they be distributed to site visitors as a part of their site visitor training or for their use when conducting site visits. The CoA is open to receiving such materials but will not provide these materials directly to site visitors.

When such materials are received, they will be reviewed by the CoA working group on training with respect to their relevance to the SoA and for their use or adaptation in developing or revising site visitor training materials.

E.2. Governance Policies and Procedures

E.2-1. Commission on Accreditation Meeting Procedures

(Commission on Accreditation, originally adopted May 1987; revised July 2000, July 2002, March 2003, November 2003, January 2006, April 2006, October 2006, October 2011, July 2018, April 2022, January 2026)

1. CLOSED SESSION. Due to the confidential nature of program review, the CoA will conduct this portion of its business in closed session. Closed sessions include only CoA members, relevant program review consultants, if any, APA Office of Program Consultation and Accreditation staff, legal counsel (when necessary), and the officially designated liaisons to the CoA from the BEA and the APA Board of Directors. When appropriate, CoA might invite certain people to attend, such as–observers from agencies that recognize accrediting bodies (i.e., U.S. Department of Education, Council for Higher Education Accreditation). The CoA is authorized to conduct specific business in executive session if necessary. Executive session includes only CoA members and the liaisons appointed by the BEA and the Board of Directors. In such instances the CoA chair will confer with senior staff liaisons on the matter of whom else shall attend.

2. OPEN SESSION. The CoA is authorized to conduct business in a specifically designated open session on certain occasions when information from other sources within or outside of APA would be of benefit to CoA members or on those occasions in which the CoA wishes to provide information to other individuals or groups. Open sessions include any individual who requests admittance, invited guests, and any APA members as well as APA staff. In general, most CoA deliberations other than program accreditation reviews are conducted in open session, unless CoA determines that a closed session is necessary.

3. MEETING TIMES. The CoA holds four full meetings each year; one at the end of January that is dedicated to discussions of policy and planning the Commission's work for the year and three meetings where program review is the focus. The program review meetings are scheduled to occur during Spring (last week of March to the beginning of April), Summer (the middle of July), and Fall (end of October). Specific meeting dates are set by the Commission in order to allow program reviews to occur within the time frame established by the Accreditation Operating Procedures in accord with US CFR 602.20 (a). US CFR 620.20 (a) provides the maximum allowable time frame for a program that has been found non-compliant with an accreditation standard to become fully compliant (Note that this time frame is the lesser of four years or 150 percent of the program length). The APA-CoA ensures that all programs are reviewed within this timeframe.

Meeting times will be arranged by the full CoA with decisions determined by majority vote. Changes in meeting times or arrangements for additional meetings will be arranged by Executive Committee in consultation with APA Office of Program Consultation and Accreditation staff. Issues relevant to these arrangements will be budget, CoA member availability, and factors related to availability of meeting facilities.

4. ATTENDANCE. Members are expected to be present at all scheduled meetings of the CoA in their entirety whether in person and/or virtually. Presence at a virtual meeting is defined as being technologically available for the duration of the meeting. A member who is absent for one entire meeting will be contacted by the Chair of the CoA to determine whether the absent CoA member can attend future meetings regularly. Failure to be present at a second meeting during the members' term of service will constitute resignation from the CoA. Any Commission member not present for more than a half a day of a meeting will be deemed to have missed the entire meeting. Extenuating circumstances will be considered by the CoA. Whenever possible, advance notice of an anticipated absence for any portion of the meeting is expected.

5. QUORUM. In accordance with the *Accreditation Operating Procedures*, two-thirds of the members shall constitute a quorum for the purpose of making a decision on a program. When a CoA member has withdrawn from a portion of the meeting (e.g., as in a real or perceived conflict of interest situation), that position will not be counted in determining a quorum. The vote of the majority of the CoA members at a meeting at which a quorum is present shall be required to make a program decision.

6. LIAISON. The role of the BEA and the Board of Directors liaisons is to (a) share with the CoA the perspectives of their respective boards on educational and training issues, generally, as facilitators of communication with the CoA. Liaisons do not serve to direct or determine CoA policy recommendations nor speak for the CoA; (b) observe the operations of the CoA in the context of its procedures; (c) function only as observers, without voice, during sessions in which accreditation reviews and decisions are being made about specific programs and (d) share with the BEA and Board of Directors, respectively, general policy issues of concern to the CoA.

7. AGENDA. Agenda items cover areas of CoA responsibility as outlined in "Policies for Accreditation Governance" (section 2). No formal action will be taken on any matter of business that is not an official part of the CoA agenda at a particular meeting. Agenda items of the highest priority will be those pertaining to program accreditation decisions and such other matters as may affect the status of accredited programs.

8. AGENDA ITEMS PRESENTERS. In consultation with the CoA Chair, APA Office of Program Consultation and Accreditation staff assign primary responsibility for study and presentation of particular agenda items to individual CoA member(s) by means of written notification in the regular agenda mailing, with the exception of program review. These items will be assigned by the Associate Chair for Program Review. All assignments are subject to change, should a CoA member be in conflict of interest with the program being considered.

9. AVOIDANCE OF CONFLICT OF INTEREST.
a. CoA members. Should a member of the CoA be in a real or perceived possible conflict of interest with respect to any program scheduled for review by the CoA at any particular meeting, that member will be excused during discussion and decision on that program. Further, the CoA may determine that a member is in possible conflict of interest and ask that member to abstain or be recused from discussion and decision on a particular program. CoA members shall adhere to their published conflict of interest policy [see Section E.3-1 of this regulations document].
b. BEA/Board of Directors liaisons. Should one of the CoA's BEA/Board of Directors liaisons be in a real or perceived possible conflict of interest with respect to any program scheduled for review by the CoA at any particular meeting, that liaison will be excused during discussion and decision on that program. Further, the CoA may determine that a liaison is in possible conflict of interest and ask that liaison to be recused from discussion and decision on a particular program. CoA liaisons shall adhere to their published conflict of interest policy [see Section E.3-4 of this regulations document].
c. Program Review Consultants. Should a program review consultant be in a real or perceived possible conflict of interest with respect to any program scheduled for review by the CoA at any particular meeting, that individual will be excused during any discussion and decision on that program. Further, the CoA may determine that a consultant is in possible conflict of interest and ask that consultant to abstain or be recused from any discussion and decision on a particular program. Program review consultants shall adhere to their published conflict of interest policy [see Section E.3-5 of this regulations document].

10. CoA ACTIONS. CoA actions on any agenda item are not considered final until the adjournment of a regularly scheduled meeting. CoA decisions regarding program review are made in accordance with the *Standards of Accreditation in Health Service Psychology* and the *Accreditation Operating Procedures*.

11. CONFIDENTIALITY. CoA members, Program Review Consultants and the BEA and Board of Directors liaisons will maintain the confidentiality of the program review materials presented at each meeting, the discussions of programs and related materials by CoA members, and the decisions reached regarding any program in the accreditation process with the following exceptions: (a) a list of all accredited doctoral programs, internship training programs, and postdoctoral residency programs as well as CoA decisions will be available on the APA accreditation website; (b) disclosure shall be made in those instances when the APA is legally required to disclose such information; (c) at the request of the chief executive officer of the institution where a doctoral program is housed or the administrative head of an internship or postdoctoral residency program, or with their consent, information on a specific program may be made available upon request to other accrediting agencies by which the institution has been accredited or whose accreditation it is seeking; (d) as necessary to represent CoA in the accreditation appeal process or related legal proceedings or (e) as otherwise provided in the CoA Implementing Regulations. The confidentiality requirements of this provision are permanent and continue after service with CoA has ended.

12. DUE DILIGENCE. CoA members must exercise reasonable care in the performance of their duties and must maintain the confidentiality of information relating to the accreditation process and deliberations. If a member fails to do so, and this cannot appropriately be addressed through training, additional actions may be taken by the CoA Chair with the advice and consent of the Executive Committee.

13. CoA MEMBER SITE VISIT.

a. Regular site visits. CoA members shall be removed from the regular pool of site visitors during their tenure on the CoA. In special circumstances (e.g., for unusual or extremely difficult accreditation decisions or for CoA members' training purposes), this rule may be temporarily suspended and a CoA member may serve as a site visitor in a specific instance. Such members may not be an official member of the site team and shall not participate or vote on the CoA's review and action on the program. Program review consultants shall also be removed from the regular pool of site visitors while consulting with the CoA.

b. Special site visits. The CoA may conduct special site visits either in the investigation of formal complaints or of specific SoA-related concerns that require further review. The CoA may appoint one or more of its members to conduct these site visits. These site visitors will produce a detailed written report including any issues that arose during the visit. They also may make themselves available to answer any questions that the primary/secondary reviewers and the review panel may have in formulating a recommendation for the full CoA. Members on special site visits are not required to be recused from participating on the CoA's decision regarding the program in question.

14. CONSULTATION SERVICES. During the term of his/her appointment to the CoA, and for a period of one year thereafter, no CoA member shall offer consultation services to programs (reimbursed or non-reimbursed) for the purpose of assisting them to seek or maintain their accreditation status. The liaisons to the CoA appointed by the BEA and Board of Directors, as well as any program review consultants, shall follow the same procedure. When consulting with a program after the one-year period, the Permanent confidentiality provisions of Section 11 remain in effect. By serving on CoA, members are precluded from testifying in an adversarial proceeding against CoA or APA on behalf of any program that was reviewed during the period the member served on CoA until the program begins its next review cycle. Program review consultants are similarly precluded from testifying.

15. AVOIDANCE OF ANTITRUST LIABILITY. Each CoA member shall be familiar with and adhere to "Guidelines for Board/Commission Members on Avoiding Antitrust Liability." Program review consultants, although not members of the CoA, shall also be familiar with and adhere to such Guidelines.

16. ANNUAL REPORT. The CoA, with assistance of Office of Program Consultation and Accreditation staff, shall prepare a non-confidential annual report of its activities for the BEA, the APA governance, and the general public.

E.2-1(a). Procedures for Panel Review of Programs at CoA Meetings

(Commission on Accreditation, January 2006)

Each program to be reviewed is assigned two readers who are independently responsible for preparing a presentation in advance of the CoA meeting based upon the self-study report (provided to the primary reader in advance of the meeting and to the secondary reader upon request), the preliminary review letter and program response, the site visit report and program response, as well as any other information provided by the program during the course of review. The presentation of each reader is made first to a review panel (one of the subsets of the CoA formed on an *ad hoc* basis for a particular CoA meeting); on the basis of that presentation, the review panel forms a recommendation to present to the entire CoA. Although the primary and secondary readers are expected to review that program's materials thoroughly, each program's review materials, with the exception of the self-study report, are provided to all CoA members prior to the meeting. All program self-study reports are made available upon request to all CoA members during the meeting. In the case of programs that have been invited to "show cause" why an adverse decision should not be made, both the primary and secondary readers are provided with the entire self-study in advance of the meeting. In using this system of review, the CoA has sought to ensure the reliability of the review by assigning major review responsibility for a program to more than one reader, while streamlining the process of program review.

E.2-2. Nomination and Election Procedures for CoA Chair/Associate Chairs

(Commission on Accreditation, November 2003; revised July 2007)

Nomination Procedures

- The CoA Nominations Committee (NC) will be appointed annually by the Commission on Accreditation Chairperson. The NC will consist of at least three (3) members who are going off the CoA at the end of the year and/or who are willing to exempt themselves from the pool of candidates for Chair, Associate Chair for Program Review and Associate Chair for Quality Assurance.
- A call for nominations will go out on September 1, along with a description outlining the scope of the Chair's and Associate Chairs' responsibilities. The NC will accept nominations from September 1 to October 1.
- All CoA members are encouraged to make nominations for CoA Chair, Associate Chair for Program Review and Associate Chair for Quality Assurance. Self-nominations are welcome. Those nominating others must assure that the candidate agrees to serve if elected. Individuals may be nominated for more than 1 of the positions.
- You can submit your nomination to any member of the NC. All nominations will be forwarded to the NC chair for compiling. The NC itself will not make nominations, but members of the NC may make nominations as individuals. Members of the NC are either ineligible to serve as chair, because they are rotating off the Commission, or they have declared their ineligibility for chair by agreeing to serve on the NC. Hence members of the NC are not eligible for nomination for chair. All other members of CoA are qualified to be nominated except the student member.
- Through consultation with the office and the current and recent former chairs, the NC will review the description of the scope of the Chair's and Associate Chairs' responsibilities. The NC will distribute the description of the Chair's and Associate Chairs' responsibilities with its Call for Nominations.
- Nominations will close on October 1. All nominees who indicate a willingness to serve will be put on the designated slate. The slates will be announced 2 weeks prior to the start of the fall CoA meeting. All nominees will be asked to make statements prior to elections at the fall meeting.

Election Procedures

- The elections will be directed by the Chair of the NC.
- At the fall meeting, the floor will be opened for any additional nominations for each position.
- After nominations have been closed, the election will be held by secret ballot.
- The Chair will be elected first, followed by the Associate Chair for Program Review, followed by the Associate Chair for Quality Assurance.
- Candidates appearing on more than 1 ballot will be removed from subsequent ballots after being elected to another position.
- Voting – "Low Total" Plan: Each CoA member will rank the nominees according to preference. The choices for each nominee will be added and the nominee with the lowest total votes will be the winner.
- Votes will be tallied by the NC.

E.2-3. CoA Chair and Associate Chair Responsibilities

(Commission on Accreditation, November 2003; revised January 2007, July 2007, October 2008)

From IR, A-1: Policies for Accreditation Governance, Section 6, Policy and Procedural Authority, d., "…On an annual basis, the Commission shall elect its own chair."

The duties of the Chair are as follows:

Internal to the Commission:

a. Chair the regular and Executive Committee meetings of the Commission. The Chair is responsible for moving items through the Commission and Executive Committee by summarizing discussions and calling for votes, as appropriate.

b. Appoint the members of the Executive Committee according to the specifications of the internal Implementing Regulations.

c. Work with appropriate staff to prepare an agenda for all meetings which shall be distributed among the Commission members.

d. Work with staff and the Research Committee to prepare an annual report for review of all constituencies.

e. Oversee all CoA-appointed task forces and liaisons of the Commission.

f. Work with Associate Chair for Quality Assurance in the training of new Commission members, site visitors, and training directors.

g. Appoint special site visit teams and CoA appeals teams.

h. Appoint members to liaisons, task forces, and committees both within the Commission and APA and externally, this includes inter-organizational groups such as CCTC, CCOPP, and CoS.

i. Work with Associate Chair for Program Review on program review process, including ensuring high-quality communication with the programs, e.g., providing final approval of written communication to programs (in collaboration with legal review).

j. Facilitate problem resolution and communication regarding the full range of issues related to the accreditation process and the business of the Commission.

k. Work with the Executive Committee or a sub-group within the Executive Committee to review extension and delay of cycle requests from programs.

l. Function as a member of the Commission on Accreditation.

m. Work with the Director in coordinating and integrating the work of the Commission on Accreditation and the Office of Program Consultation and Accreditation.

n. Oversee the work of the Associate Chairs and appoint other CoA members to assist those individuals as appropriate.

External to the Commission:

a. Be responsible for the representation of the Commission to APA Governance groups including the Council of Representatives, Board of Directors, Board of Educational Affairs, and appropriate Boards and Committees.

b. Be responsible for the representation of the Commission to other external non-psychological organizations that interface with the work of the Commission, including CHEA and the U. S. Department of Education.

c. Serve as the interface between the Commission and the Office of Program Consultation and Accreditation.

d. Serve as the representative of the Commission to constituent groups at their annual meetings or by invitation from those groups, or appoint other CoA members as appropriate to serve in this capacity.

e. Serve as the representative of the Commission in other psychology professional public forums or appoint other CoA members as appropriate to serve in this capacity.

The duties of the Associate Chair for Program Review are as follows:

a. Coordinate program review, flag review, and panel assignments of members of the Commission on Accreditation in consultation with the CoA Chair and relevant staff of the Office of Program Consultation and Accreditation.

b. Oversee staff preliminary reviews of applicant programs. The Associate Chair for Program Review will conduct a thoughtful evaluation of staff recommendations and determine whether the program is ready for a site visit, should be asked for additional information, or should be sent to CoA for further review.

c. Lead CoA self-evaluation and enhancement efforts on program review in consultation with the Associate Chair for Quality Assurance.

d. Manage the voting process for program review.

e. Oversee the work of CoA sub-committees as assigned by the Chair, including the group(s) responsible for the annual revision of self-study instructions.

f. Chair CoA meetings in the absence of the Chair.

g. Serve as a member of the Executive Committee of the Commission on Accreditation.

h. Assist the Chair and the Office Director in coordinating and integrating the work of the Commission on Accreditation and the Office of Program Consultation and Accreditation.

i. Function as a member of the Commission on Accreditation.

The duties of the Associate Chair for Quality Assurance are as follows:

a. Coordinate training workshops and related training activities for new members of the Commission on Accreditation, site visitors, and training directors. Prepare and revise training materials as needed and

monitor the assignment of CoA members conducting the trainings.

b. Meet with external groups and fulfill various administrative assignments as requested by the Chair.

c. Oversee the work of all work groups and policy panels, including but not limited to the Complaints and Research subcommittees. Know and understand the progress of each group in relation to current tasks and projects. Facilitate discussion within and between groups and ensure that tasks and relevant issues move forward in an efficient manner.

d. Oversee CoA self-assessment and research projects. The Associate Chair for Quality Assurance will develop mechanisms to obtain feedback from current CoA members as necessary.

e. Work with the Chair and Office staff in addressing problematic CoA reviewers and site visitors and mechanisms to improve the process.

f. Serve as a member of the Executive Committee of the Commission on Accreditation.

g. Assist the Chair and the Office Director in coordinating and integrating the work of the Commission on Accreditation and the Office of Program Consultation and Accreditation.

h. Function as a member of the Commission on Accreditation.

i. Chair CoA meetings in the absence of the Chair and Associate Chair for Program Review.

j. Serve as CoA Parliamentarian or appoint other CoA members as appropriate to serve in this capacity.

Note: As appropriate, the Chair will ensure that the Chair and Associate Chairs will have reduced program review workloads.

E.3. Regulations related to conflict of interest

E.3-1. Conflict of Interest Policy for Commission on Accreditation Members

(Commission on Accreditation, April 1993; revised December 1998, January 2001, April 2023)

Members of the Commission on Accreditation participate in a range of decisions regarding applicant and accredited programs. It is essential that these decisions appear to third parties and in fact are fair, based on accurate data, and are guided by the Commission members' best judgment. These qualities—fairness, expertise, and accuracy—can be eroded if Commission members vote on program decisions in which they have an actual or potential conflict of interest. For purposes of this policy, "potential conflict of interest" means circumstances that could be perceived by a reasonable third party as creating an apparent conflict of interest.

Because members of the Commission on Accreditation are chosen based on active involvement in the profession of psychology, it is likely that program decisions occasionally will be made by the Commission for which the member holds a dual interest. Since the Commission may not know fully the previous experience of its members, it is incumbent that Commission member exercise good faith and avoid participating in program decisions where an actual or perceived conflict of interest exists. Examples of relationships that pose conflict of interest concerns include: (1) the member has had or has a working relationship with the institution; (2) a former advisee directs the master's or doctoral program; (3) a Commission member's master's or doctoral student is in an internship program under review; or (4) the member has had a consulting relationship with the training program.

In addition, there are broader issues of conflict of interest which apply to consideration of policy and procedure. Commission members may experience a conflict of interest when they serve on more than one board or committee within the APA or within more than one organization. The Commission on Accreditation and its constituencies assume that Commission members will discharge their duties in good faith recognizing their fiduciary duty to the Commission on Accreditation and with the care that an ordinarily prudent person in like position under similar circumstances would exercise. Therefore, Commission members serving on other committees or boards in the APA or in other associations with overlapping interests in accreditation must be attentive to instances of possible conflict of interest due to dual service.

The decision regarding whether a member should be recused from participating in a given decision belongs to the Commission. Any Commission member who is aware of circumstances that they believes could pose a conflict of interest either for themselves or for another Commission member should inform the chair of the Commission of the underlying facts and their assessment of the appropriate resolution of the potential or actual conflict. If the Commission member who has the potential or actual conflict advises the Chair that they wishes to be recused from the decision making process, the Chair will honor the member's decision and the recusal will be noted in the minutes. If the Commission member is uncertain about the appropriate resolution or believes they can make an unbiased decision despite the appearance of conflict of interest, the Chair shall refer the matter to the full Commission on Accreditation for resolution. If it is determined that there is an actual or potential conflict of interest regarding a Commission decision, the member will be recused during discussion and decision making. The minutes of the meeting will reflect any decision regarding a possible conflict of interest. When there is any doubt in the member's mind as to whether a conflict exists or may appear to exist, the member should refer the issue to the Commission or Commission Chair. In addition to recusal, a Commission member may abstain from voting on a matter at any time.

There may be other times when nonparticipation in program decisions is called for, even when conflict of interest is not involved. For example, Commission members may receive *ex parte* communications by a program or by others on the program's behalf presenting material that is beyond the record. Voting on the

program after receiving these communications would be inappropriate.

In summary, Commission members should conduct themselves in a manner that avoids any appearance of partiality or bias and should deal with ambiguous situations in a manner that avoids the potential conflict. It is essential that the process at every level be conducted honestly, objectively, and fairly and that the perception of external parties is congruent with this high standard.

E.3-2. Conflict of Interest Policy for Site Visitors

(*Site Visitor Workbook*, 1997; Commission on Accreditation, date unknown; revised January 2001, April 2023)

To maintain the integrity and credibility of the accreditation process, the CoA and office of program consultation and accreditation (OPCA) attempt to avoid actual and perceived conflicts of interest between site visitors and the program being visited. However, all relationships between individuals and programs cannot be known by the CoA and OPCA. Therefore, the responsibility to disclose any actual and perceived conflicts of interest lies equally with the program and site visitors. The CoA will not consider a site visit report in which it detects the appearance of or an actual conflict of interest.

Possible conflicts of interest include (but are not limited to):

- A site visitor being formerly employed by the program
- A site visitor having a family connection with the program
- A site visitor having a current or past close professional or personal relationship with an individual at or in the program
- A site visitor being a previous site visitor to the program within the past 5 years
- A site visitor's program having been visited within the past 5 years by an individual at the program

E.3-3. Conflict of Interest Policy for Staff of the Office of Program Consultation and Accreditation

(Commission on Accreditation, April 1999; revised January 2001, April 2023)

Permanent staff of the Office of Program Consultation and Accreditation (OPCA) do not have direct involvement in decision-making regarding applicant and accredited programs (e.g., they do not participate directly in site visits nor do they take part in discussing and voting on accredited and applicant programs). Staff, however, do provide consultation to programs and individuals on matters such as developing applications and filing complaints; conducting preliminary reviews of program self-study reports; and attending program review and decision making meetings of the CoA. It is possible that a staff member, in the course of their work, may be involved with a program for which that staff member holds a dual interest. Examples of such situations include former employment at the program (including consulting); currently a student *in* the program or made application to the program; family connection with the program; having a close professional or personal relationship with a program faculty/staff member or student; and having an adverse relationship with the program or its personnel.

Temporary staff (e.g., interns, administrative temps, and consultants) have very limited interaction with representatives of accredited programs in matters concerning the accreditation process, and they have no access to confidential program information (except for research interns, who may be granted supervised access to confidential information to enable them to perform their duties). Situations may arise, however, in which temporary staff may be privy to accreditation information that may lead to or create an undue advantage for that staff member. Such situations might occur, for instance, when a temporary staff member is in the process of applying for admission to, or is seeking permanent employment in, master's, doctoral, or internship programs or postdoctoral residencies.

It is essential that the accreditation process be fair, unbiased, and based on accurate data in both actuality and appearance. Since the CoA or other office staff may not know fully the previous experience of each staff member, it is incumbent on the staff member, whether permanent or temporary, to avoid participating in any accreditation-related activity regarding a program where there is an actual or perceived conflict of interest. When there is any doubt in the staff member's mind as to whether a conflict exists, or may appear to exist, they should refer the issue to their immediate supervisor or to the Director of the Office of Program Consultation and Accreditation.

If an actual or perceived conflict of interest exists, staff will take appropriate steps to avoid involvement with the relevant program's interaction with the CoA or the Office of Program Consultation and Accreditation, including leaving the room when the program is being discussed/and or a decision is being made with regard to the program.

E.3-4. Conflict of Interest Policy for Officially Designated Liaisons to the Commission on Accreditation

(Commission on Accreditation, January 2000; revised January 2001)

Pursuant to the Board of Directors/Committee (Commission) on Accreditation agreement approved by the Board in December 1999 and to the "Policies for Accreditation Governance" dated August 18, 1991 and amended February 18, 1996), official liaisons to the Commission on Accreditation from the APA Board of Directors and the Board of Educational Affairs are permitted to attend both open and closed sessions of CoA meetings. They may be present during review and decision making regarding applicant and accredited programs and will be privy to information of a confidential nature. It is possible that a liaison, in the course of their involvement, may be party to a discussion on a program for which that liaison holds a dual interest. Examples of such situations include (1) current or former employment at the program (including consulting); (2) a liaison's doctoral student is in an internship program under review; (3) family connection with the program; (4) having a close professional or personal relationship with a member of the staff of the program; and (5) having an adverse relationship with the program or its personnel.

It is essential that the accreditation process be fair, unbiased, and based on accurate data in both actuality and appearance. Since the CoA or staff of the Office of Program Consultation and Accreditation may not know fully the previous experience of each liaison, it is incumbent on the liaison to not be present during any accreditation-related activity regarding a program where there is an actual or perceived conflict of interest. If an actual or perceived conflict of interest exists, liaisons will take appropriate steps to avoid involvement with any aspect of the relevant program's interaction with the CoA or the Office of Program Consultation and Accreditation. When there is any doubt in the liaison's mind as to whether a conflict exists or may appear to exist, they should refer the issue to the Chair of the Commission on Accreditation or to the Director of the Office of Program Consultation and Accreditation.

Furthermore, consistent with the CoA meeting procedures regarding consultation services, no CoA liaison who participates in closed sessions shall offer consultation services to programs (reimbursed or non-reimbursed) for the purpose of assisting them to seek or maintain their accreditation status. Each liaison will refrain from such activity during the term of his/her appointment as a liaison and for a period of one year thereafter.

E.3-5. Conflict of Interest Policy for Program Review Consultants

(Commission on Accreditation, April 2006)

Program Review Consultants to the Commission on Accreditation (CoA) participate in the review panels during program review meetings and participate in providing expertise to assist the CoA in reaching accreditation actions regarding applicant and accredited programs. It is essential that the reviews conducted by these consultants appear to third parties and in fact are fair, based on accurate data, and are guided by the Program Review Consultants' best judgment. These qualities—fairness, expertise, and accuracy—can be eroded if Program Review Consultants participate in the discussion on program with which they have an actual or potential conflict of interest. For purposes of this policy, "potential conflict of interest" means circumstances that could be perceived by a reasonable third party as creating an apparent conflict of interest.

Since the Commission may not know fully the previous experience of its Consultants, it is incumbent that all Consultants exercise good faith and avoid participating in program discussions where an actual or perceived conflict of interest exists. Examples of relationships that pose conflict of interest concerns include:

- former employment by the program
- former student in the program
- family connection with the program
- having an "old" friend associated with the program
- having a former classmate on staff at the program
- having a close professional or personal relationship with a member of the staff at the program
- being a previous site visitor to the program
- where a staff member of a program an individual is asked to read was a member of the site visiting team to his/her program

The Commission is committed to avoiding even the appearance of a conflict of interest and maintaining the integrity and credibility of the accreditation process. It will not consider a review in which it detects an appearance of or an actual conflict of interest.

E.3-6. Conflict of Interest Policy for Appeal Panel Members

(Commission on Accreditation, January 2010; revised March 2026)

When a program appeals a decision, members of the appeal panel pool are contacted to discuss any potential conflicts of interest with the program prior to their listing as members of the appeal panel by the APA Board of Educational Affairs (BEA). In so doing, the BEA and Office of Program Consultation and Accreditation (OPCA) staff attempt to avoid even the appearance of a conflict of interest with the appellant program. This is absolutely necessary to maintain the credibility and integrity of the appeal process. However, all relationships between individuals and programs cannot be known by the BEA and staff. Thus, all appeal panel members have the important responsibility for disclosing any potential conflict of interest to OPCA staff and are required to sign a Statement of Impartiality before serving on an appeal panel.

Possible conflicts for appeal panelists include:

- former employment by the program
- former student in the program
- family connection with the program
- having an "old" friend associated with the program
- having a former classmate on staff at the program
- having a close professional or personal relationship with a member of the staff at the program
- being a previous site visitor to the program
- where a staff member of a program an individual is asked to visit was a member of the site visiting team to his/her program
- where the panelist works directly with a member of the Commission on Accreditation