**2026 Self-Study – MASTERS**

**Standard I: Institutional and Program Content**

**I.A. Type of Program**

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

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

1. Integration of psychological science and practice: Practice is evidence-based, and research is practice informed.
2. Training is sequential, cumulative, graded in complexity, and designed to prepare students for practice at the master's level.
3. The program engages in actions that indicate respect for and understanding of cultural and individual differences and diversity.

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

**Provide a brief orienting statement of the program's mission and aims. More specific**

**detail regarding your program’s aims and required**

**competencies will be requested in Standard II.**

Click or tap here to enter text.

**Concisely describe the means by which the master’s training achieves an integration**

**of science and practice at the master’s level to provide**

**orienting context to the detailed information in subsequent standards.**

Click or tap here to enter text.

**Concisely describe how training is sequential, cumulative, graded in complexity, and**

**designed to prepare students for practice to provide orienting context to the detailed**

**information in subsequent standards. Training refers to all aspects of the curriculum,**

**including coursework, clinical training experiences, and any other major program**

**requirements.**

Click or tap here to enter text.

**Concisely describe the program’s overall commitment to respect for and**

**understanding of cultural and individual differences and diversity to provide context to**

**the detailed information in subsequent standards.**

Click or tap here to enter text.

**I.A.2Practice Area**

Health service psychology includes several practice areas in which an accredited program may focus, including the areas of clinical psychology, counseling psychology, school psychology, combinations of these areas, and other practice areas (e.g., addiction, forensic, marriage and family therapy, rehabilitation)*.*

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

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

Click or tap here to enter text.

**I.B Institutional and Administrative Structure**

**I.B.1Administrative Structure**

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

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

Supporting Material

**UPLOAD OPTIONAL**

Focused Questions

**Identify the regional (institutional) accrediting body that accredits the sponsoring institution and the institution’s current accreditation status with this body.**

Click or tap here to enter text.

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

**institution.**

Click or tap here to enter text.

**Briefly describe the mission(s) of the institution which sponsors/hosts the master’s**

**program and explain how the program fits within this mission. How is it viewed/valued**

**by the sponsor institution and its administration?**

Click or tap here to enter text.

**Discuss the adequacy and stability of the master’s program's budget, including how**

**the program receives its budget.**

Click or tap here to enter text.

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

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

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

**---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------**

Click or tap here to enter text.

**Discuss how the program avoids any actions that would restrict program access on grounds that are irrelevant to success in graduate training.**

Click or tap here to enter text.

**Does the program/institution adhere to a religious affiliation or purpose that informs**

**its admission and/or employment policies? If so, describe how these policies are made**

**known to applicants, students, faculty, and staff before their application to or affiliation**

**with the program.**

Click or tap here to enter text.

**I.C Program Context and Resources**

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

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

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

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

Click or tap here to enter text.

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

Click or tap here to enter text.

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

Click or tap here to enter text.

**I.C.2 Length of Degree, Delivery Method, and Design**

The program’s length, delivery method, and design must permit faculty, training staff, supervisors, and administrators to execute their professional, ethical, and potentially legal obligations to promote student development, peer interaction, faculty mentoring, and faculty role modelling to a sufficient degree that students are successfully socialized into the profession. The program design and delivery method must include continuous monitoring and assessment of the development of required student competencies and of achievement of program training aims. Any program delivery method or design must demonstrate how each training obligation listed in this section is being fulfilled. All programs must require each student successfully complete:

1. A minimum of 2 academic years of graduate-level study (or the equivalent thereof) prior to receiving the master’s degree appropriate with the program’s aims and jurisdiction of licensure;
2. At least half of the training (or the equivalent thereof) earned in the program from which the master’s degree is granted.

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

**Outline the length of the program. In doing so, please address how the program**

**meets the following criteria: a) requires a minimum of two (2) academic years of**

**graduate-level study (or the equivalent thereof) prior to receipt of the master’s degree**

**appropriate with the program’s aims and jurisdiction of licensure; and b) at least half of**

**the training (or the equivalent thereof) earned in the program from which the master’s**

**degree is granted.**

Click or tap here to enter text.

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

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

Supporting Material

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

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

Focused Questions

**Is this program a consortium? If no, write “N/A” in text box.** Click or tap here to enter text.

**If yes, please address the following:**

**Review IR C-30 M: Partnership/Consortium**

Click or tap here to enter text.

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

Click or tap here to enter text.

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

Click or tap here to enter text.

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

Click or tap here to enter text.

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

**template have been uploaded.**

Click or tap here to enter text.

**I.C.4 Resources**

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

1. Financial support for training and educational activities;
2. Clerical, technical, and electronic support;
3. Training materials and equipment;
4. Physical facilities;
5. Services to support students with academic, financial, health, and personal issues;
6. Sufficient and appropriate access to primary source and other educational materials and expertise necessary to understand current psychological science research literature; and
7. Sufficient and appropriate clinical training experiences to allow a program to effectively achieve its training aims.

Supporting Material

**UPLOAD OPTIONAL**

Focused Questions

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

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

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

**c. training materials and equipment;**

**d. physical facilities;**

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

**f. sufficient and appropriate access to primary source and other educational materials and expertise necessary to understand current psychological science research literature; and**

**g. sufficient and appropriate clinical training experiences to allow a program to effectively achieve its training aims**

Click or tap here to enter text.

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

Click or tap here to enter text.

**I.D Program Policies and Procedures**

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

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

1. academic recruitment and admissions, including general recruitment/admissions and recruitment of a diverse student body;
2. degree requirements;
3. administrative and financial assistance;
4. student performance evaluation, feedback, advisement, retention, and termination decisions;
5. due process and grievance procedures;
6. student rights, responsibilities, and professional development;
7. non-discrimination policies. The program must document non-discriminatory policies and operating conditions and avoidance of any actions that would restrict program access or completion on grounds that are irrelevant to success in graduate training or the profession.

Supporting Material:

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

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

Focused Question:

**Complete Table 1 Program Policies and Procedures and provide all public materials**

**on the program and other program-related material (brochures, letters, program manual,**

**handbooks, formal institutional policy and procedure memoranda, etc.) discussing the**

**policies requested.**

**Please describe how the program makes these policies and procedures available to**

**all interested parties.**

Click or tap here to enter text.

**I.D.2 Implementation**

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

**Describe how the program ensures that it reflects psychology's ethical principles,**

**legal codes, and professional conduct standards within its policies and procedures.**

Click or tap here to enter text.

**If policies are developed at the department or institution level, discuss how the**

**program implements these policies at the program level.**

Click or tap here to enter text.

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

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

**Briefly discuss how the program communicates its written policies and procedures**

**to current students and potential applicants.**

Click or tap here to enter text.

**I.D.4 Record Keeping**

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

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

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

**Provide a summary record of formal student complaints or grievances received by,**

**or known to, the program against the program and/or against individuals associated**

**with the program since the program's last accreditation site visit. Do not include any**

**identifying information on students. Site visitors will review the full records during the**

**site visit.**

Click or tap here to enter text.

**(Optional) If your program has had any informal complaints or grievances that you**

**believe the Commission/site visitors should be aware of, please provide that information**

**here.**

Click or tap here to enter text.

**Describe the program's system for maintaining student records and complaints,**

**including whether there is a confidential location for storing this information. Confirm**

**duration of record retention for future reference and credentialing purposes. Site visitors**

**will review this information as a part of the site visit.**

Click or tap here to enter text.

**Programs are reminded that records of complaints and grievances filed against the**

**program must be kept for whichever time period is longest as required by CoA (i.e.,**

**Since last periodic review) institutional, state, and federal policy. Please confirm that**

**records of complaints and grievances are maintained according to this requirement.**

Click or tap here to enter text.

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

Click or tap here to enter text.

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

**II.A Aims of the Program**

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

Supporting Material

**UPLOAD OPTIONAL**

Focused Question

**Describe the program's overarching aim(s) and how they reflect the approach to**

**training and outcomes (including career paths) that the program targets for graduates.**

**Briefly explain how the aim(s) are consistent with health service psychology, the**

**program's substantive area of psychology, and the degree.**

Click or tap here to enter text.

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

**II.B.1 Discipline-specific Knowledge and Profession-wide Competencies**

1. Discipline-specific knowledge serves as a cornerstone for the establishment of identity in and orientation to health service psychology. Thus, all students in accredited programs should acquire a general knowledge base in the field of psychology, broadly construed, to serve as a foundation for further training in the practice of health service psychology. Discipline-specific knowledge represents the requisite core knowledge of psychology an individual must have to attain the profession-wide competencies.
   1. Programs may elect to meet the following areas of knowledge at either the undergraduate- or graduate-level (Category 1):
      1. Affective Aspects of Behavior, including topics such as affect, mood, and emotion. Psychopathology and mood disorders do not by themselves fulfill this category.
      2. Biological Aspects of Behavior, including multiple biological underpinnings of behavior, such as neural, physiological, anatomical, and genetic aspects of behavior. Although neuropsychological assessment and psychopharmacology can be included in this category, they do not, by themselves, fulfill this category.
      3. Cognitive Aspects of Behavior, including topics such as learning, memory, thought processes, and decision-making. Cognitive testing and cognitive therapy do not, by themselves, fulfill this category.
      4. Developmental Aspects of Behavior, including transitions, growth, and development across an individual’s life. Coverage limited to one developmental period (e.g., infancy, childhood, adolescence, adulthood, or late life) is not sufficient.
      5. Social Aspects of Behavior, including topics such as group processes, attributions, discrimination, and attitudes. Individual and cultural diversity and group or family therapy do not, by themselves, fulfill this category.
   2. Programs must cover the following areas of knowledge at the graduate level (Category 2):
      1. Consumption of Research, including the reading and interpretation of primary source literature, attending to trustworthiness in qualitative and validity in quantitative research with an understanding of sampling issues, parametric assumptions, design confounds, and meta-analyses.
      2. Research related to Practice, including topics such as qualitative inquiry, single-case designs, quantitatively describing outcomes, statistical description, logic models, and basic inferential statistics.
      3. Psychometrics, including topics such as theory and techniques of psychological measurement, scale and inventory construction, reliability, validity, evaluation of measurement quality, classical and contemporary measurement theory, and standardization.

Supporting Material

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

Focused Questions

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

**Complete Table 2 Discipline-Specific Knowledge.  This table should include only *evaluated* training experiences that are required of all students. Optional training experiences or participation in activities that are not formally evaluated should not be included.**

**Demonstrate in a narrative how the program ensures that all students acquire a general knowledge base in the field of psychology, broadly construed, to serve as a foundation for further training in the practice of health service psychology for both category 1 and category 2 areas.**

Click or tap here to enter text.

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

Click or tap here to enter text.

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

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

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

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

**d. Free from discrimination on bases irrelevant to success in the master’s program.**

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

Click or tap here to enter text.

1. Profession-wide competencies include certain competencies required for all students who graduate from programs accredited in health service psychology. Programs must provide opportunities for all of their students to achieve and demonstrate each required profession-wide competency. The specific requirements for each competency are articulated in Implementing Regulations. Because science is at the core of health service psychology, programs must demonstrate that they rely on the current evidence-base when training students in the following competency areas. Students must demonstrate competence in:
   1. Integration of psychological science and practice
   2. Ethical and legal standards
   3. Individual and cultural diversity
   4. Professional values, attitudes, and behaviors
   5. Communication and interpersonal skills
   6. Assessment
   7. Intervention
   8. Supervision
   9. Consultation and interprofessional/interdisciplinary skills

Supporting Material:

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

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

Focused Questions

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

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

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

Click or tap here to enter text.

**Describe how the program ensures that it prepares students to navigate cultural and individual differences in research and practice, including those that may produce value conflicts or other tensions arising from the intersection of different areas of diversity.**

Click or tap here to enter text.

**Describe how the training is sufficient to demonstrate preparation for entry level practice and licensure or appropriate credential to practice at the master’s level, consistent with the program’s aims.**

Click or tap here to enter text.

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

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

Supporting Material:

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

**Important Reminders for providing syllabi:**

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

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

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

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

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

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

Focused Questions:

**Review IR C-10 M: Distance Education**

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

Click or tap here to enter text.

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

1. **Describe specifically when and how distance/online/electronically mediated education methodologies are used. If specific courses (in part**

**or whole) or educational experiences are offered using distance education methods, each must be explicitly identified as such.**

1. **Describe how the program is authorized to provide distance education by their institutional accreditor and any pertinent jurisdictional**

**authority such as a state or province.**

1. **Describe the method, processes, and/or mechanisms used to verify the identity of students participating in the education or training activity**

**that uses distance education methodologies. In other words, the program must report how it ensures that a student registering or receiving credit for a course is the same person that participates in and completes the course.**

1. **Describe how the methods described above protect student privacy.**
2. **Describe how the program provides and ensures regular and substantive interaction with students in any distance education experience.**
3. **Describe how program faculty are appropriately prepared and qualified to offer the distance education experiences provided by the program.**
4. **Describe how the program clearly discloses all pertinent information regarding distance education to students so they are able to make**

**informed decisions about the program. Examples of required disclosures include: the jurisdictions where the program is authorized to provide distance education, the method of verifying student identity in distance education experiences, and an explanation of any fees or other costs specific to the modality.**

Click or tap here to enter text.

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

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

Supporting Material:

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

Focused Questions:

**Review: IR C-12 M: Clinical Experience Guidelines for Master’s programs, IR C-13 M: Telesupervision, and IR C-14 M: Direct Observation**

**Describe the nature of clinical experiences training provided, including:**

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

Click or tap here to enter text.

**Discuss how the program ensures clinical training experience evaluations are based in part on direct observation, consistent with IR C-14 M. Clarify how the program verifies the occurrence of direct observation.**

Click or tap here to enter text.

**If students' clinical experiences training utilizes any amount of telesupervision, discuss how it is used and provide the reference for the policy addressing this supervision modality.**

Click or tap here to enter text.

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

**II.C.1 Program-Specific Elements – Degree Type, Competencies and Related Curriculum**

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

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

Supporting Material:

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

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

Focused Questions:

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

Click or tap here to enter text.

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

Click or tap here to enter text.

**Describe how the minimum levels of achievement (MLAs) are sufficient to demonstrate general preparation for practice at the master’s level.**

Click or tap here to enter text.

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

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

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

Supporting Material:

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

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

**Applicant programs seeking full accreditation must provide detailed, aggregate PROXIMAL outcome data for students as they progress through the program (from past 10 years).**

**Proximal, competency-based outcomes are measures obtained while the student is in the program. Examples include course grades, evaluations from clinical experiential training, and other master’s program evaluations. Student self-evaluation data are welcomed but are not considered competency-based and therefore are not sufficient on their own.**

**Upload REQUIRED TABLE: Download SoA PROXIMAL DATA TABLE. Use this template to provide required SoA-based proximal data. Please label upload as – Proximal data table. Proximal data should be provided for all outcome measures described for the discipline-specific knowledge areas, profession-wide and program-specific competencies (if applicable). Data must clearly demonstrate that all students have met the MLAs identified in Tables 2, 3, and 4 (if applicable).**

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

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

Focused Questions:

**Review: IR C-18 M: Outcome data for master’s programs.**

**Describe the program's outcome assessment process in detail, including how the program defines its cohorts as presented in the proximal data table.**

Click or tap here to enter text.

**Describe the expected program outcomes and the outcomes that were achieved. In so doing, summarize the data that demonstrate the extent to which all**

**MLAs have been met for all required outcome measures for discipline-specific knowledge areas and profession-wide and program-specific competencies**

**upon program completion.  This description should supplement the more detailed data which are to be uploaded as an attachment.**

Click or tap here to enter text.

**If any MLAs were not met, please provide narrative to address remediation efforts and whether the competency was successfully achieved.**

Click or tap here to enter text.

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

Click or tap here to enter text.

1. For program graduates, the program must provide distal evidence of student's competencies and program effectiveness and must evaluate graduates' career paths in health service psychology after they have left the program.
   * + - 1. Two years after graduation, the program must provide data on how well the program prepared students in each profession-wide and program-specific competency. The program must also provide data on student's job placement and licensure rates.
         2. At 5 years post-graduation, the program must provide data on graduates, including data on graduate’s licensure, certification, and employment.

Supporting Material:

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

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

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

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

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

**Upload REQUIRED TABLE: Download Table 6 Program Graduates Licensure,**

**Certification and Employment template. Use this template to provide graduate**

**employment data. Please label upload as - TABLE 6 Program Graduates Licensure,**

**Certification and Employment.**

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

Focused Questions:

**Review: IR C-18 M: Outcome data for master’s programs.**

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

Click or tap here to enter text.

**Describe the formal process employed to collect distal data (e.g., timing, frequency, format, etc.). If the program uses a survey to measure alumni perceptions of program preparation in the profession-wide competencies or the program-specific competencies, describe the survey response rate (e.g., percentage of respondents). If the response rate is low, discuss efforts made to improve the response rate.**

Click or tap here to enter text.

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

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

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

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions

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

Click or tap here to enter text.

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

Click or tap here to enter text.

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

Click or tap here to enter text.

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

Click or tap here to enter text.

**How has the program monitored all areas noted in Section II.D.1.a-b and made programmatic changes, as appropriate?**

Click or tap here to enter text.

**II.D.3** **Documenting Students’ Achievements and Outcomes that Demonstrate the Program’s Effectiveness**

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

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Review: IR C-19 M: Licensure, Credentialing, and Employment Rates for Master’s Programs**

**Discuss the licensure or credentialing and employment rates of program graduates in health service psychology. Include the licensure or credentialing and employment rates that appear in the program's "Student Admissions, Outcomes, and Other Data" section of its public documents in the narrative, and ensure that the rates listed in the narrative and in the disclosure data are consistent.**

Click or tap here to enter text.

**Standard III: Students**

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

1. The program has an identifiable body of students at different levels of matriculation who are consistent with the following:
   1. The students constitute a number that allows opportunities for meaningful peer interaction, support, and socialization.
   2. The students are reflective of a systematic, multiple-year plan, implemented and sustained over time, designed to attract students from a range of diverse backgrounds.
      1. The program must implement specific activities, approaches, and initiatives to increase diversity among its students. It may participate in institutional-level initiatives aimed toward achieving diversity, but these alone are not sufficient.
      2. The program should document the concrete actions it is taking to achieve diversity, identifying the areas of diversity recruitment in which it excels as well as the areas in which it is working to improve. The program should demonstrate that it examines the effectiveness of its efforts to attract students who are diverse and document any steps needed to revise/enhance its strategies.
2. By prior achievement, students have demonstrated appropriate preparation for the program's aims as well as expectations for a master’s program. The program has admission criteria and processes that ensure students’ preparation for graduate-level education and training in psychology. The program will demonstrate how it evaluates the effectiveness of its admission criteria and processes with regard to maximizing student success.
3. By interest and aptitude, students are prepared to meet the program’s aims.
4. The students reflect, through their intellectual and professional development and intended career paths, the program’s aims and philosophy.

Supporting Material:

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

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**Upload REQUIRED TABLE: Download Table 7 Student Statistics template. Please label upload as - TABLE 7 Student Statistics.**

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**Upload REQUIRED TABLE: Download Table 9 Educational History of Students Enrolled in Master’s Program template. Please label upload as - TABLE 9 Educational History of Students Enrolled in Master’s Program.**

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Focused Questions:

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

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

Click or tap here to enter text.

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

Click or tap here to enter text.

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

Click or tap here to enter text.

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**III.B Supportive Learning Environment**

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

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

Click or tap here to enter text.

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

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

Click or tap here to enter text.

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

Click or tap here to enter text.

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

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Click or tap here to enter text.

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**Discuss how the program ensures a supportive and encouraging learning environment for all students.**

Click or tap here to enter text.

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

**III.C.1 Timely Completion of Program**

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

Supporting Material:

**Upload REQUIRED TABLE: Download Table 10 Students Present Status template. Please label upload as - TABLE 10 Students Present Status.**

**Upload REQUIRED TABLE: Download Table 11 Current Students Matriculating Beyond Their Tenth Year in the Program template. Please label upload as - TABLE 11 Current Students Matriculating Beyond Their Tenth Year in the Program.**

Focused Questions:

**Review: IR C-22 M: Student Attrition Rates for Master’s Programs**

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

Click or tap here to enter text.

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

Click or tap here to enter text.

**III.C.2 Program Engagement**

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

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**III.C.3 Routine Feedback**

Students receive, at least annually and as the need is observed for it, written feedback on the extent to which they are meeting the program’s requirements and performance expectations. Programs are also required to collect and retain formal evaluations from clinical training sites and supervisors.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Referencing any relevant formal policy and procedure statements, the program should discuss policies that address how feedback is provided at least annually to all individual students on their performance in the program, including how they are meeting program requirements and expectations.**

Click or tap here to enter text.

**Describe how the program collects and retains formal evaluations from clinical training sites and supervisors for each student completing clinical experiential training.**

Click or tap here to enter text.

**III.C.4 Remediation Process**

When problems in student progress emerge, timely feedback must be provided, along with an opportunity to redress the concern in order to continue progress in the program. Such feedback should include:

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

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

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

Click or tap here to enter text.

**Standard IV: Faculty**

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

1. Leadership of the program is stable. There is a designated leader who is a member of the core faculty whose primary academic responsibility is to the master’s program (i.e., with at least 50% of the leader’s time devoted to program-related activities). The program leader's credentials and expertise are consistent with the program's mission and aims, and with the substantive area of health service psychology in which the program provides training. More than one individual can hold this leadership position.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

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

Click or tap here to enter text.

1. The program leader(s) and the core faculty have responsibility for the arrangement and evaluation of clinical training experiences, including maintaining communication with each training site.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Describe how the program leader(s) and core faculty members function as a unit to make decisions and provide oversight for the design, implementation, and evaluation of the program’s clinical training experiences.**

Click or tap here to enter text.

**Describe how the program leader(s) and core faculty members function as a unit to communicate with each clinical training site.**

Click or tap here to enter text.

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

**Describe how core faculty members function as a unit to make decisions and provide oversight for the design, implementation, and evaluation of the program’s administrative activities and for its educational offerings.**

Click or tap here to enter text.

**IV.B Faculty Qualifications and Role Modeling**

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

1. **Additional Core Faculty Professional Characteristics**
2. Core faculty must be composed of individuals whose education, training, and/or experience are consistent with their roles in the program in light of the program’s aims.
3. Core faculty must be composed of members to whom the institution has demonstrated a multiyear commitment.
4. Core faculty must be identified with the program and centrally involved in program development, decision making, and student training. "Identified with the program" means that each faculty member is included in public and departmental documents as such, views themselves as core faculty, and is seen as core faculty by the students.
5. Core faculty activities directly related to the program include program-related teaching, research, scholarship, and/or professional activities; mentoring students' professional development; providing clinical supervision; monitoring student outcomes; and developing, evaluating, and maintaining the program.
6. Core faculty activities not directly related to the master’s program and not seen as aspects of the core faculty role include undergraduate- and doctoral-level teaching in general and related activities; teaching and related activities in other graduate programs; and clinical work or independent practice not directly associated with training.

Supporting Material:

**Upload REQUIRED TABLES: Download Table 12.a Core Faculty, Table 12.b Associated Faculty, and Table 12.c Other Contributors. Use these templates to provide required faculty information. Please label uploads as - TABLE 12.a Core Faculty, TABLE 12.b Associated Faculty, and TABLE 12.c Other Contributors.**

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**Upload REQUIRED TABLE: Download Table 14 Professional Activities. Use this template to provide information on professional activities. Please label upload as - TABLE 14 Faculty Professional Activities Table.**

**Upload the Individual Professional Activities Form Template (if applicable based on whether faculty indicated “Yes” to any of the last 5 columns in Tables 12.a-c) for all core faculty and those who teach required courses and/or provide training in the competency areas identified in Standard II.**

**Important reminders for completing Tables 12 a-c:**

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

Focused Questions:

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

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

Click or tap here to enter text.

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

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

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

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

Click or tap here to enter text.

**IV.B.4 Faculty Sufficiency**

1. Consistent with the program's model, the program faculty, and in particular the core faculty, needs to be large enough to advise and supervise students' development, engage in scholarly activity, attend to administrative duties, serve on institutional or program committees, provide a sense of program continuity, provide appropriate class sizes and sufficient course offerings to meet program aims, and monitor and evaluate clinical training facilities and student progress.
2. The program faculty, and in particular the core faculty, needs to be large enough to support student engagement and success within the program, from admissions, to matriculation, to timely completion of program requirements and graduation.
3. At least one member of the core faculty needs to hold professional licensure as a psychologist to practice in the jurisdiction in which the program is located.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

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

Click or tap here to enter text.

**IV.B.5 Cultural and Individual Differences and Diversity**

**a. Recruitment of Faculty who are Diverse**

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

Supporting Material:

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Focused Questions:

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**b. Retention of Faculty who are Diverse**

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Questions:

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**Standard V: Communications**

**V.A. Public Disclosure**

**V.A.1 General Disclosures**

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

Supporting Material:

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

Focused Questions:

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

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

Click or tap here to enter text.

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

Click or tap here to enter text.

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

1. All communications with potential students should be informative, accurate, and transparent.
2. The program must be described accurately and completely in documents that are available to current students, prospective students, and other publics. This information should be presented in a manner that allows applicants to make informed decisions about entering the program. Program descriptions should be updated regularly as new cohorts begin and complete the program.
3. Descriptions of the program should include information about its requirements for:
   1. Admission, including admission criteria and processes that ensure students’ preparation for graduate-level education and training in psychology;
   2. Graduation requirements;
   3. Tuition and other costs;
   4. Curriculum requirements and expectations;
   5. Time to completion;
   6. Full-time equivalent faculty per student ratio;
   7. Facilities, and other resources, including distance learning technologies;
   8. Administrative policies and procedures;
   9. The kinds of clinical training it provides, and;
   10. Its education and training outcomes including licensure eligibility
4. The program must provide reasonable notice to its current students of changes to its aims, curriculum, program resources, and administrative policies and procedures, as well as any other program transitions that may impact its educational quality.

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

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

Click or tap here to enter text.

**V.B Communication and Relationship with the Accrediting Body**

***\*Note to applicant programs: no responses required for this Standard (for informational purposes)***

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

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

1. **Adherence**

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

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

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

Supporting Material:

**UPLOAD OPTIONAL**

Focused Question:

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

Click or tap here to enter text.