

U.S. Department of Education Staff Report

to the

Senior Department Official on Recognition Compliance Issues

Recommendation Page

1. **Agency:** American Psychological Association (1970 / 2016)
(The dates provided are the date of initial listing as a recognized agency and the date of the agency's last grant of recognition.)
2. **Action Item:** Compliance Report
3. **Current Scope of Recognition:** The accreditation in the United States of doctoral programs in clinical, counseling, school and combined professional-scientific psychology; doctoral internship programs in health service psychology; and postdoctoral residency programs in health service psychology; and the preaccreditation in the United States of doctoral internship programs in health service psychology; and postdoctoral residency programs in health service psychology.
4. **Requested Scope of Recognition:** Same as above.
5. **Date of Advisory Committee Meeting:** 05/22/2018
6. **Staff Recommendation:** Renew the agency's recognition for three years.
7. **Issues or Problems:** None

Executive Summary

PART I: GENERAL INFORMATION ABOUT THE AGENCY

The American Psychological Association (APA), Commission on Accreditation (CoA or the agency) is a programmatic accreditor. It currently accredits over 900 professional education and training programs at the doctoral and postdoctoral level in psychology. The agency has identified multiple Federal programs that require the Secretary's recognition of its accredited programs as a prerequisite for programs to participate in non-Title IV federal programs and/or federal employment. These include, for example--

- The Graduate Psychology Education (GPE) Program administered by the United States Department of Health and Human Services (DHHS),
- The Federal Center for Medicare/Medicaid Services (CMS) program for postdoctoral residency programs in medical settings, and
- The Predoctoral Fellowship offered by the Mental Health and Substance Abuse Services Administration (SAMSHA).

In addition, the Department of Veterans Affairs and the Federal prison system cite the APA's CoA accreditation as the standard both for admission to its internship training programs in professional psychology and for employment as a psychologist at all VA medical centers (VAMCs).

Recognition History

The American Psychological Association (APA), Commission on Accreditation (CoA or the agency) received initial recognition by the Secretary in 1970, and has received continued recognition since that time. The agency was last reviewed for renewal of recognition at the spring 2016 meeting of the National Advisory Committee on Institutional Quality and Integrity (NACIQI or the Committee). Both Department staff and NACIQI recommended to the senior Department official to continue the agency's recognition and require it to come into compliance within 12 months, and submit a compliance report within 30 days thereafter that demonstrates the agency's compliance with the issues identified in the staff report. The senior Department official concurred with the recommendations. Following the receipt of a complaint letter in 2016, addressing an additional issue of compliance, the agency was asked to respond to an additional regulation, in addition to the sections that were identified in the senior Department official letter. That compliance report is the subject of the current analysis.

Since the agency's last review, the Department has received one complaint and no 3rd party comments.

PART II: SUMMARY OF FINDINGS

602.19 Monitoring and reevaluation of accredited institutions and programs.

These approaches must include periodic reports, and collection and analysis of key data and indicators, identified by

the agency, including, but not limited to, fiscal information and measures of student achievement, consistent with the provisions of §602.16(f). This provision does not require institutions or programs to provide annual reports on each specific accreditation criterion.

Previous issue: When the agency's petition was reviewed in June 2016, Department staff found that the agency did not demonstrate that it had, and effectively applied, a set of monitoring and evaluation approaches that enables the agency to identify problems with a program's continued compliance with agency standards, specifically with regards to student achievement thresholds.

Discussion: As stated in the agency narrative, the Commission on Accreditation (CoA) has several mechanisms for monitoring accredited and pre-accredited programs that are in accordance with APA Standards of Accreditation (Exhibit 2, Standards of Accreditation for Health Service Psychology (SoA)). The CoA annually reviews program-submitted information, including narrative annual reports, data provided in the Annual Report Online (ARO), and a signed attestation of compliance (Standard 1.1, Exhibit 1, Accreditation Operating Procedures of the American Psychological Association Commission on Accreditation (AOP)). If any of the requested information is not submitted, or if the information is incomplete, missing, or questionable, the CoA may request additional information from the program and/or the CoA may request to conduct a special site visit. As stated in APA Standard V.B.2, the CoA may additionally monitor any decisions rendered by regional accrediting bodies and state authorization agencies, reports of financial changes to a program, reports of substantive change, and complaints submitted against the accredited programs (Exhibit 2). The agency noted that complaints are handled according to Section 3 of the AOP (Exhibit 1), in which review and consideration of complaint materials may prompt CoA to request an invitation for site visit to investigate the complaint. Furthermore, substantive changes, and their potential impact on program quality are addressed under Standard V.B.2 (Exhibit 2).

Following the Agency's Petition for Renewal of Recognition at the June 2016 NACIQI meeting, the agency further defined specific standards with respect to how CoA monitors measures of student achievement. Implementing Regulation (IR) D.4-7 (a), Use of Annual Reports for Reaffirmation of Accredited Status and Monitoring of Individual Programs, outlines that CoA will ensure that programs are engaging in on-going self-assessment and improvement by annually reviewing data and information provided by the program in the ARO to monitor individual program performance. The CoA has developed key thresholds, which are reviewed annually, to help determine if a program's performance is acceptable, including, number of years to complete the program, percent of students leaving the program for any reason, proportion of students accepted in the an accredited internship, and changes in faculty-student ratios. As noted in IR D.4-7(b), Thresholds for Student Achievement Outcomes in the Doctoral Programs, the agency has set benchmark thresholds to include that a student will complete the program in no less than 3 years and no more than 7 years, a 7.2% attrition rate, a 50% internship acceptance rate, and a student-faculty ratio of no more than 1.20. The CoA uses these thresholds as indicators of non-compliance with the SoA, as each threshold is connected to specific standards as outlined in IR D.4-7(a) (Exhibit 4, Implementing Regulations (IR) D.4-7 (a-c)).

The agency indicates that all programs that do not meet these thresholds will be brought to the attention of the CoA, and is cause for further action, including the deferment of reaffirmation of the program's accredited status pending receipt of additional information from the program to address the threshold(s) of concern, and receipt of information from the program to show cause, within two CoA meetings, as to why the program should not be placed on probation. If the requested additional information is not sufficient to demonstrate compliance with the identified standard(s), the program is placed on 'Accredited, on Probation', and must demonstrate compliance within the maximum timeframes outlined in Section 8.2 of the SoA (Exhibit 1). The agency indicated that these are solely supplemental key indicators that are monitored annually, in addition to the regular review of programs conducted by the CoA during the designated time for reaccreditation.

The agency has provided sufficient documentation demonstrating compliance with this standard, as reviewed in Exhibits 5-7, in which the review of financial changes to a program (Exhibit 5), an example of the review of complaints (Exhibit 6), and an example of show cause deferral and a probation decision (Exhibit 7) are documented.

602.20 Enforcement of standards

ears in length.

Previous issue: When the agency's petition was reviewed in June 2016, Department staff found that the agency did not demonstrate that it either initiates immediate adverse action or allows a program a time period, not to exceed two years, to come into compliance with its standards and requirements, when the agency's review of a program under any standard indicates that the program is not in compliance with that standard.

Discussion: As noted in the agency narrative, Section 8.2 of the Accreditation Operating Procedures (AOP), Accreditation Statuses and Decision Options (Exhibit 1), the Commission on Accreditation (CoA) has a number of actions it will take with respect to the accreditation status of a program, as well as the adverse actions taken by the CoA for programs that are non-

compliant, and the maximum timeframe to bring the program into compliance. For instance, a program is placed on "Accredited, on Probation", as an adverse action when a program is not in compliance with an AOP standards, and the program's accreditation may be revoked. A program is given an opportunity to respond to the issues of concern, and to demonstrate why the program should not be placed on probation. A program has two CoA meetings, or approximately 6 months, based on meeting dates, to give this response. If a program is still not in compliance following this meeting, the program is placed on "Accredited, on Probation" status and given a time by which to comply with the issues identified by the CoA in the probation decision. Doctoral programs are required to provide this response within four CoA meetings, or approximately 12 months, based on meeting dates. Based on this policy, it appears that a doctoral program that failed to demonstrate compliance with a standard would be given no more than 2 years to show cause as to why the program should not be placed on probation, and subsequently come into compliance following an accreditation decision of 'Accredited, on Probation. As noted in Section 8.2 (Exhibit 1), all accreditation decisions and adverse actions outline a maximum time period for which a program must come into compliance. However, it is unclear if the agency takes an adverse action or makes a determination of non-compliance in the appropriate time frame as required by the criteria.

The agency has provided sufficient documentation outlining these procedures, as well as sample documentation of accreditation decisions that have taken place in the past twelve months, including any adverse actions that were taken (Exhibit 8, CoA decisions (7/2016-7/2017): Show Cause Deferral and Probation), as well as how the CoA has monitored a program that has provided a show-cause notice and subsequently been placed on probation (Exhibit 7, Example CoA letter of Show Cause Deferral (DFC) and Probation Decision). A final decision will not be made on the accreditation status of this program until the next CoA meeting in the fall of 2018, as outlined in Exhibit 7. As a final decision has not been made as of yet, this data does not demonstrate that the agency met the requirements of this section - to either initiate immediate adverse action or allow a program a time period, not to exceed two years, to come into compliance with its standards and requirements. The agency must provide examples of the full cycle of review (i.e. first determination that the institution was out of compliance to final action) to demonstrate that it enforces the required time period.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided information and documentation to demonstrate compliance with this section. As noted in the agency narrative the agency takes adverse actions during a CoA meeting for programs that are in noncompliance, and gives a program 2 years, if a doctoral program or two-year postdoctoral residency, and 18 months, if a one-year internship or a one-year postdoctoral program, to come into compliance with the identified issues of noncompliance (Section 8.2 of the Accreditation Operating Procedures (AOP), Accreditation Statuses and Decision Options (Exhibit 1)). As additionally noted in the agency narrative the agency also engages in continuous monitoring of their programs, with which programs are given a time frame by which to comply with any issues identified by the CoA. As noted in Section 8.2 (Exhibit 1), all accreditation decisions and adverse actions outline a maximum time period for which a program must come into compliance. The agency has noted that, of the 25 programs that have been reviewed for the current accreditation cycle, a final accreditation decision will not occur for 13 programs until the next CoA meeting, which will not take place until after the May 2018 NACIQI meeting. According to the agency, the remaining 12 programs have been reviewed and 2 programs were placed on "Accredited, on Probation", as noted in Exhibit 3, CoA Decisions (7.2016 to 1.2018) Show Cause Deferral (DFC) and Probation. Although the agency has not provided a full cycle review, it has provided sufficient information and documentation to demonstrate that it enforces the required time period.

602.23 Operating procedures all agencies must have.

al administrative staff.

Previous issue: During the review of a recent complaint, Department staff found that the agency was awarding accreditation retroactively to the final day of the site visit preceding the agency's decision, which does not meet the Secretary's Criteria for Recognition. (See attached resolution letter).

Discussion: As noted in the agency narrative, the agency takes every step necessary to ensure that its public, forward-facing information, is easily accessible to all. Section 5 of the Accreditation Operating Procedures outlines the Confidentiality and Public Disclosure of Information Standards that delineate the disclosure of information used in the accreditation process (Exhibit 1). Furthermore, Implementing Regulation D.8-2, Procedures for Notification of CoA Actions in Accordance with the Secretary of Education's Standards for Recognition of Accrediting Agencies, outlines the information of recognition bodies that it provides for public notice. This requirement specifically outlines that the agency provides the accreditation standards (Exhibit 9), the procedures undertaken to reach accreditation decisions in the Accreditation Operating Procedures (AOP) (Exhibit 1), and the Implementing Regulations (IR) (Exhibit 4) for public notice. Furthermore, as outlined in Exhibit 11, the CoA additionally makes public a list of accredited and pre-accredited programs, including the programs accredited status, the date of the programs initial accreditation, and the date the next site visit will take place. This search tool is updated on the Office of Program Consultation and Accreditation (OPCA) website within 30 days of a CoA meeting. Moreover, as outlined in Exhibit 12, a list of the Commissioners,

the agency's principal administrative staff, and their qualifications and affiliations are additionally made public, and updated in the month of January to reflect the current applicable term.

As noted by the agency, all information is current, and can be found on the landing page of the OPCA website (Exhibit 10). Specifically, the agency notes that OPCA staff follow a timeline for disseminating publicly-available information, to ensure that all materials provided for public access on the website are up to date. Exhibit 15 outlines a quarterly web-publication found on the OPCA website that informs the public of policy-related updates. As noted in Exhibit 14, CoA additionally provides mass-communication of updates that are available on the OPCA website to its membership and interested parties.

Furthermore, the agency noted that it made a revision to its policy, changing the Effective Date of a Decision to award accreditation, pre-accreditation, and other non-appealable accreditation decisions effective the date of the adjournment of the CoA meeting in which the decision was made and not, as was previously noted, on the second day of the site visit. The agency provided sufficient documentation demonstrating this revision (Exhibit 17).

As noted in Exhibit 18, the agency additionally made revisions to its policies regarding public notice and comment to reflect a 30-day period for public comment, starting in May 5, 2017.

PART III: THIRD PARTY COMMENTS

The Department did not receive any written third - party comments regarding this agency.