

Standard 1.A.1

Description

Health Service Psychology.

The program offers broad and general doctoral 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:

- a. Integration of empirical evidence and practice: Practice is evidence-based, and evidence is practice-informed.
- b. Training is sequential, cumulative, graded in complexity, and designed to prepare students for practice or further organized training.
- c. The program engages in actions that indicate respect for and understanding of cultural and individual differences and diversity.

Focused Questions

Briefly describe the means by which the doctoral training achieves an integration of science and practice.

Briefly describe how training is sequential, cumulative, graded in complexity, and designed to prepare students for practice or further organized training. Training refers to all aspects of the curriculum, including coursework, practicum, research and any other major program requirements.

Narrative Response

Q1) The USF PsyD Program is a competency-driven practitioner-scholar model (Vail Model, Peterson, 1976) that achieves the integration of science and practice through all components of the Program: academic coursework, clinical training, and research. The Program was developed based on frameworks established by the American Psychological Association (APA) Commission on Accreditation's (COA's) Standards of Accreditation for Health Service Psychology (SOA; APA, 2015), the Board of Educational Affairs Competency Benchmarks (Fouad et al., 2009; Hatcher et al., 2013), the Health Service Psychology Education Collaborative (HSPEC; Health Service Psychology Education Collaborative, 2013), and the APA Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists (APA, 2003). Additionally, the program is aligned with the SOA's (2015) nine core

competency areas in clinical training including ethical and legal standards, individual and cultural diversity, professional values, attitudes and beliefs, communication and interprofessional skills, assessment, intervention, supervision, consultation, and interprofessional and interdisciplinary skills.

Q2) The USF PsyD Program subscribes to a developmental paradigm that supports and enhances the knowledge and skills students possess while providing didactic and experiential learning in an increasingly challenging, sequential, and cumulative manner. Over the course of the Program, students are taught progressively advanced academic and clinical competencies. Below are descriptions of how USF PsyD Program training activities are structured in a sequential, cumulative, and graded format. See also the PsyD Progression Chart (Appendix I.A.1.1.1), the Clinical Training Sequencing document (Appendix I.A.1.1.2), and the PsyD Curriculum Pattern (I.A.1.1.3).

In year one, students take foundational courses, which include Professional Ethics, Laws, & Standards; Culture and Mental Health; Human Development; and Advanced Psychopathology 1 & 2. They take a 2-semester pre-practicum series, which includes a Socialization to Clinical Training Seminar in the fall and Clinical Interviewing in the spring, to prepare them for clinical placements, which commence in year two.

In the second year of study, students build on the foundation work from year one, delving into research courses (Quantitative Research Design; Statistics; and Qualitative Research Design, Measurement and Analysis) as well as evidence based clinical courses (Psychodynamic, Humanistic, and Interpersonal; Cognitive Behavioral; and Relationship and Family). Students commence practicum training in the community and are provided Program Faculty supervision in a weekly, 3-hour course (Practicum 2a and 2b).

Third year is a continuation of clinical courses and other coursework aimed at preparing students for careers working with underserved populations in integrated healthcare settings (i.e., Groups; Leadership, Consultation, and Interprofessional Collaboration; Psychopharmacology). Students participate in advanced P3 level practicum training, supported by Program Faculty supervision in a weekly, 3-hour course (Practicum 3a and 3b). Building on their research coursework from second year, students embark on the development of their clinical dissertation proposal and are supported by Program Faculty through the Clinical Dissertation Proposal Seminar.

In the third year, students also complete two qualifying examinations to demonstrate Program competencies in order to advance to candidacy. In fall semester, students sit for the Doctoral Comprehensive Qualifying Examination (DCQE) and in the end of spring semester, they take a Standardized Patient Evaluation Examination (SPEE). Additional information is provided in Standard 1B1 and 1B2.

Fourth year concludes students' rigorous academic preparation with a course on Theory and Practice of Clinical Supervision and the opportunity to take 2 Electives, which are built into the curriculum. Students are encouraged to complete their research and dissertation writing and are supported by Program Faculty through the Clinical Dissertation Seminar. Student complete a fourth year advanced P4 practicum in the community and are supervised and mentored by Program Faculty in the weekly, 3-hour Practicum 4a and 4b series.

References:

- American Psychological Association. (2003). Guidelines on multicultural education, training, research, practice, and organizational change for Psychologists. *American Psychologist*, 58(5), 377-402.
- American Psychological Association. (2015). *Standards of accreditation for health service psychology*. Retrieved on July 18, 2015 from American Psychological Association Web site: <http://www.apa.org/ed/accreditation/about/policies/standards-of-accreditation.pdf>
- Fouad, N. A., Grus, C. L., Hatcher, R. L., Kaslow, N. J., Hutchings, P. S., Madson, M. B., Crossman, R. E. (2009). Competency benchmarks: A model for understanding and measuring competence in professional psychology across training levels. [Supplemental material]. *Training and Education in Professional Psychology*, 3(4), 5-26. DOI 10.1037/a0015832
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- Health Service Psychology Education Collaborative. (2013). Professional psychology in health care services: A blueprint for education and training. *American Psychologist*, 68(6), 411-426. DOI 10.1037/a0033265
- Peterson, D. R. (1976). Need for the doctor of psychology degree in professional psychology. *American Psychologist*, 31(11), 756–764.

Standard 1.A.2

Description

Practice 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 developed practice areas.

Focused Questions

Identify the program's area of practice.

Narrative Response

The Program's area of practice is Clinical Psychology with an emphasis in interprofessional practice in integrated care settings working with underserved populations.

Standard 1.B.1

Description

Administrative Structure.

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

- a. 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.
- b. 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.

Focused Questions

Identify the regional accrediting body that recognizes the sponsoring institution and current accreditation status with this body.

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

Briefly describe the mission(s) of the agency or institution which sponsors/hosts the doctoral training program and explain how the training program fits within this mission. How is it viewed/valued by the sponsor institution and its administration?

Discuss the adequacy and stability of the doctoral program's budget.

Narrative Response

Q1) The University of San Francisco is accredited by the WASC Senior College and University Commission (WSCUC), an accreditation first granted in 1950 by the Western College Association (WCA), the antecedent of WASC. In 2010, WASC reaffirmed USF's accreditation for 9 years. The USF PsyD Program was initially accredited by the Western Association of Schools and Colleges (WASC) in 2012. The university's next accreditation visit is scheduled for fall 2018 and WSCUC will make the decision on reaffirming accreditation in February 2019.

Q2) The PsyD Program is housed in the School of Nursing and Health Professions' (SONHP) Department of Integrated Healthcare with two other clinical doctoral

programs: Family Nurse Practitioner (FNP) and Psychiatric Mental Health Nurse Practitioner (PMHNP). The PsyD Program is integral to the School of Nursing and Health Professions's (SONHP's) goal to become a leader in the provision of interprofessional training and practice. The mission of the School of Nursing & Health Professions is to "advance nursing and health professions education within the context of the Jesuit tradition" (See Appendix I.B.1.1.1). The School uses dynamic and innovative approaches in undergraduate and graduate education to prepare professionals for current and future practice domains. The goal is to effectively link classroom, clinical, and field experiences with expectations for competence, compassion, and justice in health care, protection and promotion within the context of the highest academic standards. The PsyD Program's position within the School of Nursing and Health Professions (SONHP) is integral to the School's ability to provide interprofessional education and clinical training opportunities to students, which will enable them to have a competitive edge in the evolving healthcare system. The PsyD Program faculty also make important contributions to the School through their involvement in the School's standing committees, including Curriculum, Program Evaluation, and Academic Standards. PsyD Program faculty have also been integral in the development of a new standing committee on diversity, equity, and inclusion, which is an important growth area for the school. Additionally, the social justice mission of the PsyD Program is essential to supporting the Jesuit values of the institution itself, which will be outlined further in the next question.

Q3) The PsyD Program focuses on integrated behavioral health with underserved populations, which perfectly aligns with the Vision, Mission, and Values of the University of San Francisco (see Appendix I.B.1.1.1) and the University's Strategic Priorities (see Appendix I.B.1.1.2). Central to the mission of this non-profit university is the preparation of men and women to shape a multicultural world with generosity, compassion, and justice. The University's Vision, Mission, and Values Statement speaks to the institution's commitment to actively serving local, national, and international communities: "The University's core values include a belief in and a commitment to advancing a culture of service that respects and promotes the dignity of every person" (see Appendix I.B.1.1.1). This mission permeates all aspects of the institution, including student learning and faculty development, curriculum design, program and degree offerings, alumni relations, publications, and a host of other institutional features. Likewise, the University's current Strategic Priorities call for "an academically excellent education that offers the knowledge, skills, values, sensitivities and motivation to succeed in a chosen profession, field or career and contribute to a more humane and just world for all" (see Appendix I.B.1.1.2).

Consistent with the University's and based on Jesuit values, the mission of the PsyD Program is "to offer a rigorous program of study that emphasizes clinical and scholarly

work with underserved populations and focuses on training culturally responsive health service psychologists to work in interprofessional, integrated behavioral health settings” (see Appendix I.B.1.1.1).

The institution and administration highly value the addition of the PsyD Program to the School of Nursing and Health Professions (SONHP). This has been demonstrated by the administration’s ongoing commitment to providing necessary resources to ensure the successful development and accreditation of the PsyD Program. The University values quality programs and has invested significant resources in the accreditation processes of various academic programs across schools as well as investing in the APA Accreditation of the Doctoral Internship Program in the University’s Counseling and Psychological Services. Please see a letter of support for the Psy.D. program from the University President in Appendix I.B.1.1.3.

Q4) The fiscal resources regularly made available to the Program are more than sufficient to enable it to fulfill its mission and goals. Revenue data for each academic year informs the University’s central budget for the planning process described below. The yearly budget, including the Program’s financial resources, is based on a 5-year projection.

The PsyD Program budget included an incremental appointment for each of the first 4 years of the Program, representing a 1:8 ratio of core faculty to doctoral students. Four of these appointments are in tenure-track lines, again demonstrating the stability of the University’s vision for the Program within its fiscal structure. The University has demonstrated a strong commitment of resources to the Program since the early stages of Program planning, with the very first steps toward implementation consisting of a significant contribution of resources.

Standard 1.B.2

Description

Administrative 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.

Focused Questions

Provide a brief general orienting narrative statement regarding how the program engages in actions that indicate respect for and understanding of cultural and individual differences and diversity. Include here references to any existing policies, plans, or procedures related to cultural and individual differences and diversity for the institution or program under review. A more detailed, in depth response will occur within Standards III and IV.

Does this program 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.

Narrative Response

Q1) The Program uses a cultural accountability training model to describe the overarching frame of the Program. The term cultural accountability encompasses two

major aspects of clinical training: cultural competence (Comas-Diaz, 2012) and cultural humility (Fisher-Borne, Cain, & Martin, 2015). This training model includes the recruitment and retention of diverse faculty and students, academic coursework, clinical training, research, and program evaluation.

This cultural respect and understanding is reflected in the Program's policies for recruitment (see attached Student Handbook in Appendix I.B.2.1.1, p. 47), admissions (see attached Student Handbook, p. 50), and retention (see Student Handbook, p. 54), as well as in all aspects of academics and clinical training. Additionally, the Program conforms to the University's nondiscriminatory policies and operating conditions, and avoids any actions that would restrict program access on grounds that are irrelevant to success in a doctoral program or the profession (see non-discriminatory statement in Appendix I.B.2.1.2).

Q2) Although the University and Program are inspired by Jesuit ideals, the Program does not adhere to any religious affiliation or purpose that impacts its admission and or employment policies. Although affiliated with the Jesuit Catholic order, the University of San Francisco is legally and financially separate from the Catholic Church, is governed by a largely lay Board of Trustees, and has never had an academic freedom issue raised by any accreditation body because of its Jesuit affiliation.

Comas-Diaz, L. (2012). *Multicultural care: A clinician's guide to cultural competence*. Washington, DC: American Psychological Association.

Fisher-Borne, M., Cain, J. M., & Martin, S. L. (2015). From mastery to accountability: Cultural humility as an alternative to cultural competence. *Social Work Education, 34*(2), 165-181.

Standard 1.C.1

Description

Program Administration and Structure

- a. **Program Leadership.** The program has consistent and stable leadership with a designated leader who is a doctoral-level psychologist and 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.
- b. **Program Administration.** The program has designated procedures and personnel responsible for making decisions about the program, including curriculum, 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.

Focused Questions

Describe the administrative structure of the program, including the leadership structure and leader credentials, personnel involved in program administration, and procedures for decision-making.

Narrative Response

Administrative and Leadership structure of the program:

Members of the PsyD Program leadership team are doctoral-level psychologists and members of the core faculty. The administrative and leadership structure of the PsyD Program consists of the following: PsyD Program Director and PsyD Program Director of Clinical Training, who are responsible for oversight of all aspects of the Program. In addition to these two positions, the Program utilizes a shared governance model of administration, comprised of the following committees, each chaired by a member of the core faculty: Admissions and Recruitment, Curriculum and Clinical Training, and Program Evaluation. The PsyD Program also employs a Program Assistant to oversee all administrative support associated with program development, implementation, and evaluation.

Leader credentials:

The PsyD Program maintains consistent and stable leadership with two designated leaders who are doctoral-level psychologists and members of the core faculty. The Program Director, Michelle Montagno, Psy.D., oversees all academic and administrative aspects of the Program and has been involved with the program since its inception. The Director of Clinical Training, Dr. Konjit Page, was hired in 2015 and oversees development and administration of all aspects of practicum and internship training. The Program leaders' credentials and expertise are in areas covered by health service psychology accreditation and are consistent with the aims of the Program.

Michelle Montagno holds a PsyD in Clinical Psychology from an APA-accredited institution and is a practicing licensed psychologist in the state of California. She is an Associate Professor and Chair of the Department of Integrated Healthcare in the School of Nursing and Health Professions. Additionally, she has a background as an administrator in the non-profit and government sectors. Consistent with the mission and aims of the Program, Dr. Montagno has been committed to social justice advocacy and work with the underserved for over twenty years.

The Director of Clinical Training, Dr. Konjit Page, holds a Ph.D. in Counseling Psychology from the University of North Dakota (APA-accredited) and completed her APA-accredited doctoral internship at the Center for Multicultural Training in Psychology at Boston University Medical School/Boston Medical Center. Dr. Page has a background in mental health organization and leadership. She is a former fellow of the Connecticut Health Foundation's Health Fellows Program and of the Supportive Housing and Public Sector Mental Health Administration Program in the department of psychiatry at Yale University School of Medicine. Dr. Page has a long-standing history serving in various governance roles within the American Psychological Association (APA), with a focus on doctoral training and graduate students, including serving as a voting member on the Board of Directors of the APA, Council of Representatives, and as the Chair of the American Psychological Association of Graduate Students (APAGS). Within APA, she has served as a member of the Good Governance Project (APA presidential appointment, 3 year term) and as the liaison to various training groups affiliated with the organization, including the Association of State and Provincial Psychology Boards (ASPPB) and the Council of Chairs of Training Council (CCTC).

Personnel involved in program administration

The Program is administratively supported by a Program Assistant. Additional personnel are involved in various aspects of program administration at the Program, Departmental, and School levels. Please see Appendix I.C.1.1.1 for a chart of staff, Program faculty, and administrators involved in the administration of the PsyD Program.

Decision-making procedures

With regard to decision-making procedures, the members of the core faculty discuss and vote on program decisions and policies, including curriculum, student selection, student evaluation, program maintenance and improvement, during core faculty and committee meetings. Core faculty decisions related to curriculum are also reviewed by the School of Nursing and Health Professions' (SONHP) Curriculum Committee. Additionally, the PsyD Program's overall program evaluation process is routinely reviewed by the School of Nursing and Health Professions' (SONHP) Program Evaluation Committee.

Standard 1.C.2

Description

Length of Degree and Residency.

The program has policies regarding program length and residency that permit faculty, training staff, supervisors, and administrators to execute their professional, ethical, and potentially legal obligations to promote student development, socialization and peer interaction, faculty role modeling and the

development and assessment of student competencies. Residency provides students with mentoring and supervision regarding their development and socialization into the profession, as well as continuous monitoring and assessment of student development through live face-to-face, in-person interaction with faculty and students. These obligations cannot be met in programs that are substantially or completely online. At a minimum, the program must require that each student successfully complete:

- a. a minimum of 3 full-time academic years of graduate study (or the equivalent thereof) plus an internship prior to receiving the doctoral degree;
- b. at least 2 of the 3 academic training years (or the equivalent thereof) within the program from which the doctoral degree is granted;
- c. at least 1 year of which must be in full-time residence (or the equivalent thereof) at that same program. Programs seeking to satisfy the requirement of one year of full-time residency based on "the equivalent thereof" must demonstrate how the proposed equivalence achieves all the purposes of the residency requirement.

Focused Questions

Review: [IR C-5 D: Academic residency for doctoral programs](#); and [IR C-15 D: Awarding the doctoral degree prior to completion of the internship](#).

Outline the length and residency requirements of the program. In doing so, the program needs to specifically address how it meets the following criteria: a) requires a minimum of 3 full-time academic years of graduate study (or the equivalent) plus internship prior to receiving the doctoral degree; b) at least 2 of the 3 academic training years (or the equivalent) must be at the program from which the doctoral degree is granted; and c) at least 1 year must be in full-time residence at the program. Provide the location (e.g., web address or link) of the description of these requirements in the program's public materials.

Standard 1.C.3

Narrative Response

The length of the PsyD Program is four years of full-time academic coursework plus one year of full-time internship (or two years of half-time internship). The residency requirements of the program are as follows: Four years of full-time academic study plus one year full-time or two years half-time internship prior to receiving the doctoral degree. Three of the required four academic training years must be completed within the USF PsyD Program, a minimum of one year of which must be in full-time residence at the USF PsyD Program. The description of the Program's residency requirements can be found in the student handbook in Appendix I.C.2.1.1, p. 10, as well as on the website at

the following link:

<https://www.usfca.edu/nursing/programs/doctoral/clinical-psychology/program-details>.

Description

Partnerships/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.

Focused Questions

Is this program a consortium? If yes, please address the following:

- Provide a list of all member entities of the consortium.
- Describe the relationship and responsibilities of each of the consortial partners.
- Discuss how resources are pooled in order to administer the program.
- Upload a current copy of the consortia agreement, **SIGNED BY ALL MEMBERS**, that includes all required information. Label this upload **CONSORTIUM AGREEMENT**.

Narrative Response

This program is not a consortium.

Standard 1.C.4

Description

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:

- 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 practicum experiences to allow a program to effectively achieve the program's training aims.

Focused Questions

Provide a narrative describing each of the resources identified in Standard I.C.4. Include a comprehensive listing of all student support services (available through the program or institution) designed to facilitate progress through the program. Describe how students are made aware of the availability of these services.

financial support for training and educational activities;

clerical, technical, and electronic support;

training materials and equipment;

physical facilities;

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

sufficient and appropriate practicum experiences to allow the program to effectively achieve the program's training aims.

Narrative Response

Q1) The School of Nursing and Health Professions (SONHP) budget allocates funding for program faculty and staff salaries, accreditation fees, association dues, recruitment expenses, training materials, supplies, and other miscellaneous expenses of the Program. The School of Nursing and Health Professions (SONHP)/university operating budget also finances computer and other technological equipment, furnishings, and space-related costs. Costs associated with student colloquia, the Program's Annual Distinguished Lecture in Clinical Psychology, holiday and end-of-year socials, student scholarships to attend conferences, faculty development funds for teaching effectiveness and/or scholarship are part of the School of Nursing and Health Professions budget.

Q2) The School of Nursing and Health Professions (SONHP) employs a full-time PsyD Program Assistant who is available during office hours to provide clerical support to students and faculty. Additionally, students are supported by a number of staff in the School of Nursing and Health Professions (SONHP) office of academic affairs (see Appendix I.C.4.1.6 staff and faculty support chart). The Presidio campus is equipped with three computers for student use, as well as a copier and printer. Students are provided with USF email accounts and on-campus wi-fi and have access to technical support that is provided through the University's Information Technology Services (ITS). During student orientation, students are trained by ITS staff in the use of the email system as well as the University's learning platform, CANVAS.

Q3) Students have access to the university libraries, which contain print and electronic books, journals, multiple databases, interlibrary loan, as well as a collection of psychology videos (see Appendix I.C.4.1.1). The School of Nursing and Health Professions (SONHP) provides three computers for student use at the Presidio, which include hardware and software (microsoft office suite and SPSS) as well as audio-visual equipment used for training purposes. Students also have access to 8 computer labs on the hilltop campus. The Information Technology Services (ITS) office provides the option for students to purchase spreadsheet and statistical software at a heavily discounted price (e.g., Microsoft Office and SPSS, discounted 70-90% and certain software options are free (e.g., R). Students also have access to psychological assessment and testing materials. See Appendix I.C.4.1.2 for a detailed list of software and Appendix I.C.4.1.3 for list of psychological assessment and testing materials.

Q4) The PsyD Program is located at the Presidio campus and shares the facilities with the School of Nursing and Health Profession's Master of Science in Behavioral Health and Master of Public Health Programs. The co-location of these Programs provides access to interprofessional education, networking, and other collaboration opportunities for students. In addition to three classrooms (size 693ft², 693ft², and 1084ft²), the Presidio campus houses a comfortable and spacious common area for students to gather and socialize as well as faculty office space for each PsyD core faculty member. Total square footage of the building is 8,122ft². There is a library and designated technology area, which consists of three computers and printer/copier access. There is a kitchen that is stocked with coffee, tea, and snacks as well as basic appliances (refrigerator, microwave, toaster, dishwasher, coffee maker). Located on Crissy Field in the Presidio, which is part of the Golden Gate National Recreation Area, the campus provides not only stunning views of the Golden Gate Bridge, the San Francisco Bay, and Alcatraz, but also provides students easy access to outdoor recreation and walking trails for stress management/self-care.

Q5) Academic support is provided by the Learning and Writing Center and University Library Services. Financial support is provided by the Financial Aid/One Stop office and

the Graduate Student Housing office. Health and personal support is provided by the Counseling and Psychological Services Center, Student Disability Services, and Health Promotion Services. For a detailed list of student services and the departments that provide them, please see Appendix I.C.4.1.4.

Q6) The PsyD Program is a member of the Bay Area Practicum Information Collaborative (BAPIC, see Appendix I.C.4.1.5), which is a partnership between Doctoral Psychology Programs and practicum agencies in the San Francisco Bay Area. BAPIC was organized in 2008 with the primary goal of centralizing practicum training information and streamlining the practicum application process for doctoral students and agencies. As a member of BAPIC, the USF PsyD Program has established affiliation agreements with over 60 practicum training agencies in the Bay Area, providing an extensive breadth of training opportunities for our students. BAPIC membership includes access to a variety of training settings (i.e., schools, hospitals, community clinics, university counseling centers) as well as a variety of populations and communities (i.e., children, adolescents, adults, older adults, ethnic minority communities, and LGBTQ communities). PsyD faculty, under the direction of the Director of Clinical Training (DCT), monitor sites to ensure that appropriate training experiences are occurring and to address any issues in a timely manner. The practicum training program is monitored through three procedures. First, practicum instructors gather feedback from students during practicum classes each week. Second, each fall, practicum instructors conduct formal site visits and fourth, each spring practicum instructors conduct a follow-up check-in call with all agencies where students are placed. Any issues or updates pertaining to clinical training are discussed promptly with the DCT as well as during Core Faculty meetings and Curriculum and Clinical Training Committee meetings.

Standard I.D.1

Description

Areas 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:

- a. academic recruitment and admissions, including general recruitment/admissions and recruitment of students who are diverse;
- b. degree requirements;
- c. administrative and financial assistance;
- d. student performance evaluation, feedback, advisement, retention, and termination decisions;
- e. due process and grievance procedures;

- f. student rights, responsibilities, and professional development;
- g. nondiscrimination policies. The program must document nondiscriminatory policies and operating conditions and avoidance of any actions that would restrict program access or completion on grounds that are irrelevant to success in graduate training or the profession.

Focused Questions

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.

Narrative Response

Please see attached:

1. Table 1, which includes links to all program policies (Appendix I.D.1.1.1)
2. The PsyD Program Brochure (Appendix I.D.1.2.1)
3. The PsyD Student Handbook (Appendix I.D.1.2.2)
4. The PsyD Clinical Training Manual (Appendix I.D.1.2.3)
5. The PsyD Clinical Dissertation Guide (Appendix I.D.1.2.4)

Standard I.D.2

Description

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.

Focused Questions

Describe how the program ensures that it reflects psychology's ethical principles, legal codes, and professional conduct standards.

Narrative Response

Program faculty providing oversight of the PsyD program keep themselves current on the field's ethical principles, legal codes, and professional conduct standards through Continuing Education, conferences, review of pertinent literature, and consultation with colleagues and senior faculty within the University. Program faculty adhere to these principles, codes, and standards in implementing all aspects of the program, including program decision-making, academic coursework, clinical training, student evaluation, due process and grievance issues, and in their development of qualifying examination questions. When an ethical issue arises or when a potential ethical issue arises, Program faculty discuss the issue in Core Faculty meetings. Additionally, the Program Director and Director of Clinical Training consult as needed with psychologists who have expertise in legal and ethical issues to ensure compliance in all areas. When ethical issues arise with individual students, students consult with their advisors, instructors, supervisors, or dissertation chairs to help guide them in ethical decision making and implementation of ethical actions. In some cases, this level of involvement is sufficient. When it is insufficient, Program faculty are appropriately involved in the ethical issue. If individual Program Faculty members face a program-related ethical issue, they consult with Program faculty colleagues and the Program Director as well as the Associate Dean of Graduate Programs as needed.

Standard I.D.3

Description

Availability 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.

Focused Questions

Briefly discuss how the program communicates its written policies and procedures to current students and potential applicants.

Narrative Response

I.D.3.1.1. Core faculty review the handbook with all incoming students at at fall orientation, prior to the start of the program. Students are then required to sign a written confirmation that they have read and understand the policies in the entire handbook. The program also communicates its written policies and procedures to potential applicants via the student handbook, which is available for download on the PsyD website

<https://www.usfca.edu/nursing/programs/doctoral/clinical-psychology/program-details>.

Standard I.D.4

Description

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.

- a. **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.
- b. **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.

Focused Questions

Review: IR C-6 D: 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.

Describe the program's system for maintaining student records and complaints, including whether there is a confidential location for storing this information. Site visitors will review this information as a part of the site visit.

Narrative Response

Q1) To date there have been no formal student complaints or grievances received by, or known to, the program against the program and/or against individuals associated with the program.

Q2) Printed copies of student records are kept in a locked file in the faculty cubicle area at the Presidio campus. There is only one key to the file cabinet, which is kept in a locked drawer in the desk of the Program Assistant. Electronic files are kept in a confidential database, which are only able to be accessed by staff and faculty of School of Nursing and Health Professions (SONHP). Students are able to access only their personal electronic files. Although there have been no formal complaints to date, all future complaints or grievances will be kept in the same locked file cabinet.

Standard I.(AI)

Description

Additional Information relevant to Section I.

Focused Questions

(IF CURRENTLY ACCREDITED): In the program's last decision letter and/or other correspondence since the last review, did the CoA note any **Section I** issues to specifically address "*in the next self-study*"? If so, provide the response here.

(IF CURRENTLY ACCREDITED): In the program's last decision letter and/or other correspondence since the last review, did the CoA note any other **Section I** issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the CoA and whether the CoA determined that the issue was satisfactorily addressed or required additional information. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

Narrative Response

Program is not currently accredited.

Standard II.A.1-2

Description

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.

Focused Questions

Describe the program's aim(s) and how they reflect the program's approach to training and the outcomes (including career paths) that the program targets for its graduates. Briefly explain how the aim(s) are consistent with health service psychology, the program's area of psychology, and the degree conferred.

Narrative Response

Program Aims

Aim 1: To prepare students to become health service psychologists who a) have a broad knowledge of scientific psychology; b) engage in evidence-based conceptualization, assessment, and treatment of human problems using individual, developmental, contextual, and sociocultural perspectives; and c) focus on the delivery of interprofessional, integrated healthcare with underserved populations.

Aim 2: To prepare students to be health service psychologists who a) have a broad scientific knowledge base and b) employ scientific principles to consume, produce, and disseminate psychological research, with an emphasis on underserved populations.

Aim 3: To prepare students as health service psychologists who possess a) professional values and attitudes b) strong communication, collaboration, and consultation abilities and c) self-awareness and reflective practice skills.

The Program's aims reflect the Program's mission to offer a rigorous program of study that emphasizes clinical and scholarly work with underserved populations and focuses on training culturally responsive health service psychologists to work in interprofessional, integrated behavioral health settings. These aims are aligned with the Program's practitioner-scholar model (Vail Model) of training in clinical psychology and reflect the desired outcomes of the Program: to produce culturally-competent health service psychology practitioners who have foundational discipline-specific knowledge from which further training in the practice of health service psychology can build. The emphasis on interprofessional training and practice with underserved populations reflects the realities of the evolving health care system and the Program's desire to produce clinicians who have the breadth of skills necessary to succeed in careers encompassed under the health service psychologist umbrella. As a PsyD Program, the aims and competencies have been designed to place relatively greater emphasis on clinical training for health service practice than on generating original research. Students are also required to demonstrate fundamental understanding of and competency in research activities, however, there is a greater emphasis placed on evidence-based professional practice than on conducting science.

Standard II.B.1.a

Description

1. Discipline-specific knowledge serves as a cornerstone for the establishment of identity in and orientation to health services 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.

- a. Discipline-specific knowledge represents the requisite core knowledge of psychology an individual must have to attain the profession-wide competencies. Programs may elect to demonstrate discipline-specific knowledge of students by:
 - i. Using student selection criteria that involve standardized assessments of a foundational knowledge base (e.g., GRE subject tests). In this case, the program must describe how the curriculum builds upon this foundational knowledge to enable students to demonstrate graduate level discipline-specific knowledge.
 - ii. Providing students with broad exposure to discipline-specific knowledge. In this case, the program is not required to demonstrate that students have specific foundational knowledge at entry but must describe how the program's curriculum enables students to demonstrate graduate-level discipline-specific knowledge.

Focused Questions

Review: [IR C-7 D: Discipline-Specific Knowledge](#)

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.

Narrative Response

The Program meets this requirement by providing students with exposure to all of the discipline-specific knowledge categories through graduate-level academic coursework. As part of the required curriculum students take:

PSYD 702 History and Systems of Psychology, which includes the origins and development of major ideas in the discipline of psychology and fulfills Category 1: History and Systems of Psychology;

PSYD 713 Biological Psychology, which includes the biological underpinnings of behavior such as neural, physiological, anatomical, and genetic aspects of behavior and fulfills Category 2: Biological Aspects of Behavior;

PSYD 704 Human Development, which includes transitions, growth, and development across an individual's life and fulfills Category 2: Developmental Aspects of Behavior;

PSYD 733 Sociocultural Bases of Behavior, which includes coverage of group processes, attributions, discrimination, and attitudes and fulfills Category 2: Social Aspects of Behavior;

PSYD 726 Cognitive and Affective Bases of Behavior, which includes learning, memory, thought processes, decision-making, affect, mood, and emotion and fulfills 2 content areas of Category 2: Cognitive Aspects of Behavior and Affective Aspects of Behavior. The course also develops student competence in integrating the cognitive and affective domains, which satisfies Category 3: Advanced Integrative Knowledge of Basic Discipline-Specific Content Areas.

PSYD 723 Quantitative Methods in Research Design, which includes these topics: strengths, limitations, interpretation, technical aspects of rigorous case study; correlational, descriptive, and experimental research designs; measurement techniques; sampling; replication; theory testing; meta-analysis; and quasi-experimentation as well as Psychometrics, including including these topics: theory and techniques of psychological measurement, reliability, validity, evaluation of measurement quality, and standardization. This course fulfills Category 4: Research Methods and Psychometrics.

PSYD 721 Statistics for Social Sciences, includes topics such as linear modeling and analysis of psychological data, descriptive statistics and inference, univariate and multivariate analysis, null-hypothesis testing and its alternatives, power, estimation, correlation, linear regression, multivariate hypothesis testing, which fulfills Category 4: Quantitative Methods.

Please see the following appendices for additional information:

II.B.1.a.1.1 for a table that maps the Curriculum to Profession Wide Competencies and Discipline Specific Knowledge Areas

Appendix II.B.1.a.1.2 for a table of Discipline-Specific Knowledge Outcome Measures and Minimum Levels for Achievement

Appendix II.B.1.a.1.3 for the course descriptions and objectives of all required PsyD courses

Appendix II.B.1.a.1.4 for copies of the current syllabi for each required course in the curriculum pattern.

Standard II.B.1.b

Description

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. Although in general, the competencies appearing at or near the top of the following list serve as foundations upon which later competencies are built, each competency is considered critical for graduates in programs accredited in health service psychology. 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:

- i. Research
- ii. Ethical and legal standards
- iii. Individual and cultural diversity
- iv. Professional values, attitudes, and behaviors
- v. Communication and interpersonal skills
- vi. Assessment
- vii. Intervention
- viii. Supervision
- ix. Consultation and interprofessional/interdisciplinary skills

Focused Questions

Review: [IR C-8 D: Profession-Wide Competency](#)

Complete Table 2 Profession-Wide Competencies.

Describe the opportunities provided for all students to achieve and demonstrate each required profession-wide competency.

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

Demonstrate 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.

Narrative Response

Q1) Students are provided with opportunities to achieve and demonstrate required competencies through a variety of modalities, including academic coursework and clinical training, as well as through the requirements for Advancement to Candidacy: the Doctoral Comprehensive Qualifying Examination (DCQE), the Standardized Patient Evaluation Examination (SPEE), and the Clinical Dissertation. Please see Table 2 in Appendix II.B.1.b.1.2 for details.

Q2) The Program's focus on preparing students to work in interprofessional integrated care settings requires that students are trained in evidence-based practice (EBP). The PsyD Program's unique setting within the Department of Integrated Healthcare within the School of Nursing and Health Professions provides a rich and supportive environment for evidence-based practice. To achieve our goal of preparing health service psychologists, evidence-based practice is written into all relevant aspects of the curriculum, including course descriptions and objectives. Additionally, relevant syllabi include required readings that are current (2005 to present) and assignments that assess students' knowledge of EBPs. With regard to the profession-wide competencies, the program relies on the current evidence base as follows:

1. Evidence-based intervention: The four courses in psychotherapy (PSYD 725 Evidence Based Practice I: Humanistic, Psychodynamic, Interpersonal

Psychotherapy; PSYD 730 Evidence Based Practice II: Cognitive Behavioral Therapy; PSYD 735 Evidence Based Practice III: Relationships and Families; PSYD 745 Evidence Based Practice IV: Groups) rely on EBPs and focus on current research and interventions. Courses associated with the development of students' clinical training (PSYD 708 Socialization to Clinical Training Seminar; PSYD 718 Clinical Interviewing; PSYD 720 Practicum 2A; PSYD 740 Practicum 2B; PSYD 750A Practicum 3A; PSYD 760 Practicum 3B; PSYD 770 Practicum 4A; PSYD 780 Practicum 4B) are focused on the current evidence base as well.

2. Evidence-based assessment: The courses on intellectual and personality assessment (PSYD 716 Intellectual Assessment and PSYD 732 Personality Assessment) reflect state of the art scholarship in assessment and focus on empirically-supported assessment approaches and techniques.
3. Ethical and legal standards: The course on ethics and law (PSYD 722 Professional Ethics, Law, and Standards) reflects the current APA ethical code and current California law.
4. Individual and cultural diversity: The two classes dedicated exclusively to individual and cultural diversity (PSYD 703 Culture and Mental Health and PSYD 714 Community Mental Health and Health Disparities) rely on the latest empirical evidence to train students. Additionally, the program utilizes an infusion model, which is operationalized through the inclusion of aspects of individual and cultural diversity in course descriptions and objectives in all except four courses. The four courses that constitute the exceptions are: PSYD 713 Biological Psychology; PSYD 717 Clinical Neuropsychology and Neuropsychological Screening; PSYD 726 Cognitive Affective Bases of Behavior; and PSYD 765 Internship Seminar. This infusion model of cultural diversity addresses all professional roles, including research, consultation, and supervision.
5. Research: The latest approaches to research design and data analysis, including cutting-edge training on the use of R for data analysis, are included in the three courses devoted to research methods and data analysis (PSYD 723: Quantitative Methods in Research Design; PSYD 721: Statistics for Social Sciences; PSYD 724 Qualitative Research Design, Measurement, and Analysis).

1. Professional values and attitudes are specifically addressed in all the Practicum courses, as well as the following: PSYD 708 Socialization to Clinical Psychology Seminar; 718 Clinical Interviewing and PSYD 703 Culture & Mental Health.
1. Communication and interpersonal skills: Demonstrates ability to communicate effectively, to interact appropriately, and to develop meaningful and helpful relationships in all professional roles. Communication and interpersonal skills are specifically addressed in PSYD 708 Socialization to Clinical Psychology Seminar; 718 Clinical Interviewing, and all Practicum Courses.
1. Consultation/interprofessional/interdisciplinary: The course on consultation (PSYD 753 Leadership, Consultation, and Interprofessional Collaboration) provides students the latest theory and evidence regarding effective consultation practice. Additionally, students take PSYD 714 Community Mental Health and Health Disparities and PSYD 728 Integrated Behavioral Health Practice in Primary Care Settings, which focus on cutting-edge models and best practices of interprofessional behavioral health practice.
1. Supervision: The course on supervision (PSYD 756 Theory and Practice of Clinical Supervision) provides students the latest theory and evidence regarding effective supervision practice.

See the Curriculum Map (Appendix II.B.1.b.1.1) for a list of program courses that are mapped with the profession-wide competencies and discipline-specific knowledge areas. Please see Table 2 in Appendix II.B.1.b.1.2 for a breakdown of outcome measures mapped by profession-wide competencies. Please also see Appendix II.B.1.b.1.3 to reference the current required syllabi, including all the courses listed above.

Q3) The PsyD Program is rooted in the Jesuit social justice values of the University. In order to fully execute the Program's mission and aims, it has been imperative to integrate issues related to diversity and social justice into every aspect of the Program. The core faculty have operationalized the frame of cultural accountability through the development of an infusion model based on the work of Fouad and Arredondo (2007) and D'Andrea and Daniels (1991), in order to effectively execute the program's mission, specifically with regard to working with underserved communities. Infused into all aspects of the Program, students have opportunities to grapple with complex

diversity-related issues, including value conflicts and other intersectionality tensions, throughout the duration of their program, both in academic coursework and practicum training and related courses.

References

D'Andrea, M. & Daniels, J. (1991). Exploring the different levels of multicultural counseling training in counselor education. *Journal Of Counseling & Development*, 70(1), 78-85.

Fouad, N. A., & Arredondo, P. (2007). *Becoming culturally oriented: Practical advice for psychologists and educators* (Vol. VIII). Washington, DC: American Psychological Association.

Standard II.B.2

Description

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.

Focused Questions

Describe the program's curriculum and provide a list of required courses and other required learning activities.

Include syllabi for all required courses and courses used to provide knowledge in discipline specific knowledge, profession-wide competencies, and program-specific competencies (as applicable).

If coverage is distributed across multiple training experiences, describe how/where this is provided (e.g. please identify/cite specific content and not just syllabus titles). Provide a curriculum map that clearly demonstrates how/where coverage is distributed and how it is assessed within the distributed coverage (upload "CURRICULUM MAP" if applicable).

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.

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

- 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.
- Describe the methods by which the program identifies the person 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.
- Describe how the methods described above protect student privacy.
- Describe how students are informed in a timely manner of any additional program fees associated with verification of student identity.

Narrative Response

Q1) The curriculum has been built in a sequential, graded, and cumulative fashion, commencing with foundational courses and building each year with course sequences in assessment, evidence-based practice, practicum, and research. Additionally, students complete three years of graded practicum training, starting in year 2. For a complete listing of required courses, please see Appendix II.B.2.1.1 Curriculum Mapping with Profession Wide Competencies & Discipline Specific Knowledge Areas.

Q2) Please see Appendix II.B.2.2.1 for syllabi for all required courses, including courses used to provide knowledge in discipline-specific knowledge and profession-wide competencies.

Q3) Please see the Curriculum Mapping with PWCs and DSKs document (Appendix II.B.2.1.1), the Discipline-Specific Knowledge Outcome Measures and Minimum Levels for Achievement table (Appendix II.B.2.1.2) and Table 2 (Appendix II.B.2.1.3), which all outline how profession-wide competencies and discipline-specific knowledge areas are covered through courses and practicum training.

Q4) At the time of this writing, the Program offers one or two sections of each practicum course, depending on cohort size. These courses are (PSYD 720 Practicum 2A; PSYD 740 Practicum 2B; PSYD 750A Practicum 3A; PSYD 760 Practicum 3B; PSYD 770 Practicum 4A; and PSYD 780 Practicum 4B). Syllabi are reviewed by the PsyD Program Curriculum and Clinical Training committee to determine comprehensive coverage of course descriptions, objectives, as well as related competencies, while maintaining the core values of the program as a whole. Syllabi for these courses can be found in Appendix II.B.2.2.1.

Q5a) The PsyD Program uses electronically-mediated education methodologies for two courses, PSYD 728 Integrated Behavioral Health in Primary Care and NURS 760 Psychopharmacology. Faculty teaching these courses utilize the university's online learning platform, Canvas as well as Zoom conferencing. Canvas is a tool used by students and faculty to facilitate easier communication. Canvas contains syllabi of courses, instructor details, upcoming assignments, grades for the courses, etc. The staff and faculty use Canvas to post announcements and to inform the students about developments in the class. Canvas also displays statistics for each assignment for the students, where students can see their highest grade scored, their lowest scored, and see where they rate related to classmates. Canvas also carries the contact details of every student enrolled in the course making it easier for students to interact amongst each other.

The program also uses Zoom conferencing to conduct online course sessions and virtual office hours. Zoom allows for multiple people to be online at once. The in built chat and raise hand options make it convenient for peer to peer collaborations and student/faculty interactions. Screens can be shared and controlled with the help of

Zoom, which allows faculty to provide detailed input to the students, without being physically present.

One course is Hybrid: PSYD728 Integrated Behavioral Health Practice in Primary Care, which means that 49% or less of the content in the course is delivered online (synchronously or asynchronously) and 51% or more of the content in the course is delivered in person/within the classroom setting. One course, NURS 760 Psychopharmacology is fully online, meaning that 100% of the content is presented online via Canvas and/or Zoom.

Q5b) Students must log in to their personal USFCA account in order to access their courses (via myUSF).

Q5c) Each student's account is password protected. Students regularly update the password for their dedicated accounts. Students are prohibited from sharing the passwords with anyone.

Q5d) There are no fees for verification of student identity. If additional fees are required in the future, students will be notified via Canvas announcement.

Standard II.B.3

Description

Required Practicum Training Elements

- a. Practicum must include supervised experience working with diverse individuals with a variety of presenting problems, diagnoses, and issues. The purpose of practicum is to develop the requisite knowledge and skills for graduates to be able to demonstrate the competencies defined above. The doctoral 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 by the time the student applies for internship the student has attained the requisite level of competency.

- b. 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.
- c. Supervision must be provided by appropriately trained and credentialed individuals.
- d. 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 practicum student and her/his developing skills (either live or electronically).

Focused Questions

Review: IR C-12 D: Practicum guidelines for doctoral programs, IR C-13 D: Telesupervision, and IR C-14 D: Direct Observation.

Provide narrative to describe practicum sites. The description of practicum sites should include the nature of the training provided, practicum availability, and the other content noted in II.B.3.

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

Discuss how the program ensures practicum evaluations are based in part on direct observation.

Narrative Response

Q1) The PsyD Program is affiliated with over 60 practicum training sites in the Bay Area through our membership in the Bay Area Practicum Information Collaborative (BAPIC). These sites are committed to training health service psychologists and are in line with the USF PsyD Program's aims. Types of sites include hospital settings, community mental health clinics, school based placements, and university counseling centers. The Program has a high level of practicum availability, with over 200 positions across the 60

sites. Typically, practicum contracts are between 9-12 months and average 20 hours per week. The nature of training includes direct service, such as individual, family, and group psychotherapy, diagnostic assessment, psychological testing, didactic training, and individual and group supervision. Students have the opportunity to work with a range of presenting issues with diverse populations including children, adolescent, adults, and the older adult population.

Each site provides a minimum of 1 hour of face-to-face individual supervision weekly, by a licensed mental health practitioner in State of California, preferably a licensed psychologist.

The USF PsyD program provides a training plan through the practicum sequencing process, which ensures that each student's practicum training is graded in complexity, sequential, and cumulative. The sequence starts in the fall semester of the first year with PSYD 708 Socialization to Clinical Psychology Seminar, which includes an introduction to the field of clinical psychology, development of students' theory of change, and professional development topics. During the second semester of the first year, students take the PSYD 718 Clinical Interviewing class, which includes foundations of major psychological theories, basic clinical interviewing skills, introduction to cultural guidelines and frameworks used in clinical practice, and professional development topics. Starting in the second year, students commence formal practicum training. They work with their advisors, practicum instructors, and the Director of Clinical Training to insure demonstration of basic clinical competence, and to develop individual training plans that reflect their level of skills and abilities, as well as their clinical interests, and professional goals (see Practicum Learning Goals document in Appendix II.B.3.1.1, which was used from 2013-2016 and see the Individual Clinical Training Plan document, which will go into effect in fall 2017 in Appendix II.B.3.1.2). These individual training plans enable the Program to track students' goals and ensure that students are meeting clinical competencies to ensure readiness for internship.

Q2) Telesupervision: Not applicable

Q3) The Program provided information to each clinical placement in early fall 2016, describing the new direct observation requirement. In addition, this information was disseminated to all BAPIC member practicum sites, through which our program is affiliated (Appendix II.B.3.1.3). The Program also updated the clinical supervisor evaluation of practicum student (CSEPS) form to include a description of the new requirement, questions requiring the supervisor to describe the date and type of direct observation, as well as specific feedback from the observation (see CSEPS in Appendix II.B.3.1.4). The Program will also monitor compliance with the direct observation requirement through annual site visits conducted by Program faculty teaching the practicum courses.

Please see Table 4 in Appendix II.B.3.1.5 for a description of the Program's practicum settings.

Standard II.B.4.a-b

Description

Required Internship Training Elements

The program must demonstrate that all students complete a one year full-time or two year part-time internship. The program's policies regarding student placement at accredited versus unaccredited internships should be consistent with national standards regarding internship training.

- a. **Accredited Internships.** Students are expected to apply for, and to the extent possible, complete internship training programs that are either APA- or CPA-accredited. For students who attend accredited internships, the doctoral program is required to provide only the specific name of the internship.
- b. **Unaccredited Internships.** When a student attends an unaccredited internship, it is the responsibility of the doctoral program to provide evidence demonstrating quality and adequacy of the internship experience. This must include information on the following:
 - i. the nature and appropriateness of the training activities;
 - ii. frequency and quality of supervision;
 - iii. credentials of the supervisors;
 - iv. how the internship evaluates student performance;
 - v. how interns demonstrate competency at the appropriate level;
 - vi. documentation of the evaluation of its students in its student files.

Self Assessment

Focused Questions

Review: IR C-17 D: Expected Internship Placements for Students in Accredited Doctoral Programs

Describe the program's internship placement policy.

If students do not complete an accredited internship, the program must provide the following:

- i. the nature and appropriateness of the training activities;*
- ii. frequency and quality of supervision;*
- iii. credentials of the supervisors;*
- iv. how the internship evaluates student performance;*
- v. how interns demonstrate competency at the appropriate level;*
- vi. documentation of the evaluation of its students in its student files.*

Narrative Response

Q1) The Program's internship placement policy states that students complete either a one-year, full-time, or two year, half-time, intensive, supervised, 1500 to 2000 hours work experience. The goal of the internship is to help students further develop, practice, and integrate clinical skills.

All students are required to apply for doctoral internships listed on 1) the Association for Psychology and Post-Doctoral Internship Centers (APPIC) website, which contains APA-accredited and APPIC-member internship sites; or 2) the California Psychology Internship Council (CAPIC). All students are required to apply to and complete an APA-accredited, APPIC-member, or CAPIC-member internship. Students are required to complete a Request to Apply for Doctoral Internship form (see II.B.4.a-b.1.2), which is reviewed with their faculty advisors, the Curriculum and Clinical Training Committee, and the Director of Clinical Training for approval. Please see the Clinical Training Manual in II.B.4.a-b.1.3 for more detailed information about the USF PsyD Program's internship policies.

Q2) If a student decides to complete an unaccredited internship (APPIC-member or CAPIC-member internships), they must complete the Non-Accredited Internship Request to Apply Form (see appendix II.B.4.a-b.1.1), which includes sections on the nature and appropriateness of the training activities; frequency and quality of supervision; supervisor credentials; the internship student performance evaluation process; and how interns demonstrate the appropriate level of competencies. This document is reviewed by the Curriculum and Clinical Training Committee and the Director of Clinical Training to insure that the student will have an internship experience comparable in all critical elements to an accredited internship.

If the unaccredited internship site is approved, students must complete the following documentation: 1) the student will complete and submit the Non-APA Accredited Internship Tracking Form (Appendix II.B.4.a-b.1.4) to the USF PsyD Program DCT, one month after the start of the internship; 2) the primary supervisor will complete and sign the agency's intern evaluations at mid-year and end-of-year and submit to the USF PsyD Program DCT; 3) the student will submit a Time2Track hour log summary (see appendix II.B.4.a-b.1.5) for each month, submitted to the USF PsyD Program DCT; and 4) the student and primary supervisor will sign and submit the Time2Track hours log for the entire internship experience at the end of the internship year.

The Program maintains students' evaluations in students' electronic and printed files.

Table 5 can be found in Appendix II.B.4.a-b.1.6.

Standard II.C.1

Description

Degree Type.

All accredited programs in psychology support the development of disciplinary knowledge and core competencies associated with the profession, and support the acquisition and integration of knowledge, skills, and attitudes from two major domains within the discipline: research and evidence-based practice. Programs are accredited either to offer the PhD degree or to offer the PsyD degree. Other doctoral degree designations that meet these general parameters may be eligible for consideration as appropriate.

Although all doctoral degrees contain all the required elements common to programs accredited in HSP, they differ in the balance among, and relative emphasis on, program components, based on specific training aims or likely career paths of their graduates.

In general, PhD programs place relatively greater emphasis upon training related to research, and PsyD programs place relatively greater emphasis on training for engaging in professional practice. Graduates of each type of program or other doctoral degree designations, however, must demonstrate a fundamental understanding of and competency in both research/scholarly activities and evidence-based professional practice.

Programs that confer the PhD must have a substantial proportion of faculty who conduct empirical research in the discipline (or related disciplines and fields) and a substantial proportion of faculty who have been trained for the practice of psychology. Thus, students in PhD programs are trained to both create and disseminate the scholarly research upon which science and practice are built, as well as utilize such research to engage in evidence-based practice.

Programs that confer the PsyD must have a substantial proportion of faculty who engage in scholarship and/or empirical research in the discipline (or related disciplines and fields) and a substantial proportion of faculty who have been trained for the practice of psychology. Thus, students in PsyD programs are trained to engage in evidence-based practice, as well as in scientific inquiry and evaluation.

Focused Questions

Describe how training is in line with the chosen degree type.

Narrative Response

As a PsyD Program, the curriculum is designed to place relatively greater emphasis on training for engaging in professional, health psychology service practice. Students are required to demonstrate fundamental understanding of and competency in both research activities and evidence-based practice. The Program is comprised of faculty members who engage in scholarship and empirical research in clinical psychology. Additionally, 83% of the core faculty are licensed psychologists, and 66% are engaged in part-time clinical work.

Standard II.C.2

Description

Program-Specific Competencies and Related Curriculum.

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

- a. 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).
- b. Additional competencies must be consistent with the ethics of the profession.

Self Assessment

Focused Questions

Complete this section only if the program requires program-specific competencies and related *curriculum*.

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).

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

Complete Table 3 Program-Specific Competencies.

Narrative Response

Not Applicable. The USF PsyD Program does not have any program-specific competencies.

Standard II.D.1.a

Description

Evaluation of Students' Competencies.

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:

- i. 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.
- ii. 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.
- iii. Present formative and summative evaluations linked to exit criteria, as well as data demonstrating achievement of competencies, for each student in the program.

Self Assessment

Focused Questions

Review: [IR C-18 D: Outcome data for doctoral programs.](#)

Describe the program's self-assessment process in detail.

Describe the expected program outcomes and the outcomes that were achieved.

Summarize the data that demonstrate achievement of competencies. This description should supplement the more detailed data (described below) which should be uploaded as an attachment.

Applicant programs applying for "accredited, on contingency" do not need to provide complete aggregated data. Rather these programs should provide the data collected to date and a plan and evaluation mechanisms to collect outcome data.

Narrative Response

Q1) The USF PsyD Program has developed a comprehensive self-assessment process to regularly and systematically evaluate all aspects of the Program. Connections among the Program's mission, aims, competencies, and outcome measures are detailed in Standard I.B.1, II.B.1, and as follows:

Self-assessment Methods

a. Course grades: A grade of B- or above is indicative that the student has demonstrated the minimum competencies that are assessed in that course. Any student who obtains a grade below a B- will need to retake the course. Students earn a letter grade in all didactic courses and a grade of Satisfactory (S) or Unsatisfactory (U) in practicum courses. An Unsatisfactory (U) grade in a practicum course is a failing grade. Every didactic course includes graded assignments that assess competency. Individual course syllabi explain the requirements to demonstrate competencies for each course. The criteria used for grading in an individual class may include class participation, comprehensive examinations, experiential activities, presentations, quizzes, and written papers. See Outcome Measures Mapped to Profession-wide Competencies (PWCs) and Discipline-specific Knowledge categories (DSKs) in Appendix II.D.1.a.1.4.

b. Results of the Doctoral Comprehensive Qualifying Exam (DCQE). The DCQE (see Appendix II.D.1.a.1.13) is a multiple-choice examination administered yearly to students seeking doctoral candidacy. The DCQE utilizes Association for Advanced Training in the Behavioral Sciences (AATBS) comprehensive exam program. The exam was designed to measure students' knowledge in areas covered in their completed coursework, including clinical psychology, community psychology, psychopathology, diversity, ethical and legal issues, social psychology, psychopharmacology, physiological psychology, learning theory, psychological assessment, statistics, and research design. In 2016, the students were evaluated using the total score. With the roll-out of the profession-wide competencies and discipline-specific knowledge categories in the new Standards of Accreditation (SOA), starting in January 2017, the Program began using the exam to measure the following profession-wide competencies: Intervention, Assessment, Ethical and Legal Standards, Individual and Cultural Diversity, and Research. The DSK categories assessed starting in Spring 2017

are: Biological Aspects of Behavior, Cognitive Aspects of Behavior, Developmental Aspects of Behavior, Research and Quantitative Methods, and Social Aspects of Behavior. Students who score below 60% fail the exam and are required to complete a remediation plan and retake the exam at the next administration. Students who earn an overall passing score (above 60%), but fail one or more competency domains (by achieving a score below 60%), receive a conditional pass and are required to complete a remediation plan. Students who fail to successfully complete the remediation plan are required to retake the entire DCQE at the next administration. See competencies connected to DCQE in the Outcome Measures Mapped to PWCs & DSKs document in Appendix II.D.1.a.1.4.

c. Results of the Standardized Patient Evaluation Exam (SPEE). In 2016, the SPEE was designed to assess students' overall clinical skill and their ability to integrate science and practice. With the roll-out of the profession-wide competencies in the new SOA in January 2017, this exam now measures the following profession-wide competencies starting in Spring 2017: Ethical and Legal Standards; Individual and Cultural Diversity; Communication and Interpersonal Skills; and Assessment. Students will be required to receive a score of 22 (out of 33 points) overall and a score of 2 (out of 3) or higher in every domain to demonstrate the competencies and pass the exam. Students with scores between 19-21 and/or with a score lower than 2 in at least one individual domain, and who properly identify safety, legal, and ethical concerns, receive a conditional pass and a remediation plan is created to help them meet the competencies. Students with a score of 18 or lower or those who do not properly identify safety, legal, and ethical concerns fail the exam. Students who fail the exam are required to complete a remediation plan and retake the exam at the next administration. Students who score lower than 2 in any domain will be required to complete a remediation plan to demonstrate competency. See competencies connected to SPEE in the Outcome Measures Mapped to PWCs & DSKs document in Appendix II.D.1.a.1.4. Please see Appendix II.D.1.a.1.7 for the 2016 SPEE vignette and rubric and see Appendix II.D.1.a.1.8 for a draft of the 2017 SPEE vignette and updated rubric, which will be used for the 2017 administration taking place in April.

d. Clinical Supervisor Evaluation of Practicum Student (CSEPS): Clinical supervisors of practicum students provide twice-per-year evaluations of their supervisees, once at mid-year and again at end-of-year, using the CSEPS (see Appendix II.D.1.a.1.1). On a scale from 1 (“Student's functioning in this area is significantly below average and is unacceptable”) to 5 (“Student demonstrates outstanding skill. Superior for a student at this level of training”), students are required to obtain a minimum score of 3 (“Student's functioning indicates skill typical of students at this level of training. Average and acceptable”) for each item on the CSEPS. Scores below 3 require a remediation plan. Practicum instructors, and the DCT review students’ CSEPS evaluations. Only the end-of-year critical item CSEPS scores starting in year two of training (when students begin their practicum training) are reported in the program evaluation section (Q2). See competencies connected to CSEPS in the Outcome Measures Mapped to PWCs & DSKs document in Appendix II.D.1.a.1.4.

e. Yearly Comprehensive Written Evaluation (YCWE). The YCWE (Appendix II.D.1.a.1.5) is a comprehensive evaluation of a student’s performance and overall professional development for the academic year. The evaluation includes a review of the student’s course grades, clinical work, program progression timeline, research experiences, conference presentations, publications, professional memberships, awards, and professional values competencies. See competencies connected to the YCWE in the Outcome Measures Mapped to PWCs & DSKs document in Appendix II.D.1.a.1.4.

f. Clinical Dissertation. The clinical dissertation is set to be completed between Years 3 and 5 of the program. Students complete a clinical dissertation that meets the requirements outlined in the clinical dissertation guide (Appendix II.D.1.a.1.6). Successful completion the dissertation will indicate that students have met this requirement. See competencies connected to the Clinical Dissertation in the Outcome Measures Mapped to PWCs & DSKs document in Appendix II.D.1.a.1.4.

g. Multicultural Awareness, Knowledge, and Skills Survey (MAKSS): Because the Program is focused, in part, on training students to work with underserved populations and cultural awareness and cultural competency are essential to the practice of

psychology, the Program decided to use the MAKSS to assess students' multicultural awareness, knowledge, and skills as students' progress through the Program. See the survey in Appendix II.D.a.1.1.2.

h. Clinical internship match: This program outcome measure will be determined by internship match rate. Students will be expected to match to APA accredited internships, however, students may also match to non-APA accredited internships (APPIC and CAPIC). The Program expectation is that 50% of students will match to APA accredited internships each year. If the match rate falls below 50%, the core faculty will discuss, identify causes, and develop a plan to address the issue.

i. Satisfactory completion of doctoral internship: The program's internship policy states that students must complete either a one-year, full-time, or two year, half-time, intensive, supervised, 1500 to 2000 hours work experience.

Q2) Expected program outcomes and the outcomes that were achieved include the following:

a. Course Grades: Expected outcome is a grade of B- or higher in each course.

Overall Course Grades Outcomes Achieved: Since the inception of the Program, only three of the students currently enrolled in the Program have each failed a course. Two of these students have taken the course once again and passed. The third student is currently on a Leave of Absence and therefore has not yet retaken the course. Please see the Proximal Data: Program Outcomes Document Appendix II.D.1.a.10 as well as the summary below (in question Q3) for more detailed data.

b. Doctoral Comprehensive Qualifying Examination (DCQE): Starting with Cohort 2 in 2017, the expected outcome is a minimum overall score of 60% and a minimum score of 60% on each individual domain.

Overall DCQE Outcomes Achieved: One hundred percent of the students passed the DCQE in 2016. This indicates that all 15 students who completed the DCQE had the

minimum level of knowledge in the areas assessed. Of the 9 students who completed the DCQE in 2017, one student passed the exam and eight students received a conditional pass, indicating that although they earned an overall passing score, they each failed 1-4 competency or discipline-specific knowledge domains. The core faculty will discuss, identify causes, and develop a plan to address this low passing rate at the faculty meeting on April 4th, 2017. The students who obtained a conditional pass will complete remediation plans written by content experts in one or more of the following domains: Abnormal Psychology, Ethics and Professional Issues, Lifespan Development, Physiological Psychology, Psychological Assessment, Social Psychology, and Statistics and Research Design. Students who fail to complete the remediation plan will be required to retake the exam at the next administration. See competencies connected to the DCQE in the Outcome Measures Mapped to PWCs & DSKs document in Appendix II.D.1.a.1.4. Please see the Proximal Data: Program Outcomes Document in see Appendix II.D.1.a.1.10 as well as the summary below (in Question Q3) for more detailed data.

c. Standardized Patient Evaluation Examination (SPPE): Starting with Cohort 2 in Spring 2017, the expected outcome is a minimum score of 2 on all domains of the SPEE.

Overall SPEE Outcomes Achieved: For the 2016 exam, there was a pass rate of 93% on the SPEE, with one student failing the exam. See competencies connected to the SPEE in the Outcome Measures Mapped to PWCs & DSKs document in Appendix II.D.1.a.1.4. Please see the Proximal Data: Program Outcomes Document in Appendix II.D.1.a.1.10 and the summary below (in question Q3) for more detailed data.

d. Clinical Supervisor Evaluation of Practicum Student (CSEPS): The expected outcome is a minimum rating of 3 on the critical items of the CSEPS.

Overall CSEPS Outcomes Achieved: Practicum supervisors' mean ratings of students have been 3.77 across all critical items. Supervisors are also asked to complete a "global assessment" of supervisees in response to this request, "Please rate this student on the Critical Items (VI-VII) as compared to other students with similar levels of

clinical experience that you have trained. Please use the same rating scale (1-5).” The average “global assessment” score for student performance is 4.02, with a rating of 4 defined as, “Student can function in a highly competent manner under direct supervision. Above average for a student at this level of training.” Please see the Proximal Data: Program Outcomes Document in see Appendix II.D.1.a.1.10 and summary below (in question Q3) for more detailed data.

e. Yearly Comprehensive Written Examination (YCWE): The expected outcome is a Satisfactory rating on all Professional Values items and the Overall Evaluation score on the YCWE.

Overall YWCE Outcomes Achieved: Data are collected on professional values competencies (F.3A1, F.3A2, F.3B1, F.3C1) as well as an Overall Evaluation score. All but one, of the current students have received satisfactory scores on all YCWE professional values competencies. All current students have also received Satisfactory ratings on the Overall Evaluation item, except the same student who received a Pre-Probation Status score. The student received an unsatisfactory rating in the Professional Communication and Openness to Feedback item (F.3A2) during the student’s first year of training. The student demonstrated improvement following the evaluation, met the requirements of the pre-probationary status plan, and obtained satisfactory scores in all YCWE competencies the following academic year. Please see the Proximal Data: Program Outcomes Document in see Appendix II.D.1.a.1.10 and the summary below (in question Q3) for more detailed data.

f. Profession-wide Competencies (PWC) and Discipline-specific Knowledge Categories (DSK): Students are expected to meet minimum levels of achievement for each PWC and DSK.

Overall PWC & DSK Outcomes Achieved: Please see question Q3 below for a narrative summarizing the students’ demonstration of each PWC and DSK category. Outcome data are presented in the Proximal Data: Program Outcomes Document in Appendix II.D.1.a.1.10.

g. Clinical internship Match Rate: The Program expectation is that 50% of students will match to APA accredited internships each year.

Overall Clinical Internship Match Rate: A total of 11 students applied for doctoral internships through the APPIC Match during the 2016-2017 cycle. A total of eight of students matched to an APPIC internship in Phase I, 50% of which are APA-accredited internships. A total of 3 students participated in Phase II of the match. One student withdrew and 2 students matched to an internship site (one matched to an APA-accredited site and the other matched to an APPIC site).

h. Doctoral Internship: The expected outcome is the demonstration of the minimum level of competency at the doctoral internship experience, which is assessed on the internship site's evaluations. Students are expected to receive satisfactory ratings on their internship evaluations.

Overall Doctoral Internship Outcomes Achieved: The Program's first cohort of students will start internship in fall 2017, therefore there are no internship outcomes achieved to date.

i. Multicultural Awareness, Knowledge, and Skills Survey (MAKSS) outcomes achieved: The Program does not yet have data to assess these outcomes. The Program first administered the MAKSS in fall 2015. The MAKSS will be administered to new students on orientation day at the start of the Program, at the end of the 4th year of training, and will be administered upon completion of doctoral internship. See copy of the MAKSS in Appendix II.D.1.a.1.2. This measure is scored by calculating the mean (scores range = 1 – 4) for each subscale (awareness, knowledge, and skills). Higher scores indicate a higher level of multicultural awareness, knowledge, and/or skills.

Q3) Students are consistently demonstrating competency across all areas, including meeting minimal levels of achievement in the areas of course grades, doctoral qualifying examinations (Doctoral Comprehensive Qualifying Examination and Standardized Patient Evaluation Examination), the Yearly Comprehensive Written Evaluation (YCWE), and clinical training, as assessed by clinical supervisors using the

Clinical Supervisor Evaluation of Practicum Student (CSEPS). Below is a narrative summarizing the data that demonstrate achievement of profession-wide competencies and discipline-specific knowledge categories.

PROFESSION-WIDE COMPETENCIES

Assessment

Overall, 100% of the students have demonstrated the minimum level of competency via coursework. Students demonstrate assessment competency in three courses (PSYD 711, PSYD 716, PSYD 732). Eleven students transferred course credit for one or more of these 3 courses (3 students for PSYD 716, 5 students for PSYD 711, and 3 students for PSYD 732).

Starting in spring 2017, the Doctoral Comprehensive Qualifying Examination (DCQE) was used to assess specific competencies. For the Psychological Assessment domain, 78% of students (7 out of 9) demonstrated competency and 33% of students (3 out of 9) demonstrated competency in the Abnormal Psychology domain. The core faculty will discuss, identify causes, and develop a plan to address the low pass rate for the Abnormal Psychology domain at the faculty meeting on April 4th, 2017. Students who did not demonstrate the minimum level of competency will be given remediation plans written by the content expert in that area. Students who fail to successfully complete the remediation plan will be required to retake the DCQE at the next administration. Successful completion of the remediation plan will indicate that the students have demonstrated the minimum level of competency.

Overall, 100% of students have demonstrated the minimum level of this competency at their practicum placements, which is assessed on the Clinical Supervisor Evaluation of Practicum Student (CSEPS) in Assessment item VI.1A7.

Starting in Spring 2017, the Standardized Patient Evaluation Exam (SPEE) will also be used as a measure of this competency. The exam is scheduled for April 2017.

Communication and interpersonal skills

Overall, 100% of the students have demonstrated the minimum level of competency in six out of eight courses that assess this competency (PSYD 708 [starting fall 2016], PSYD 720, PSYD 740, PSYD 750A, PSYD 760, PSYD 770). The two remaining courses (PSYD 718 & PSYD 780) where this competency is assessed are in progress this semester.

Students also demonstrate this competency at their practicum placements, which is assessed on the Clinical Supervisor Evaluation of Practicum Student (CSEPS) in items VII.3B1 and VII.3C1. One hundred percent of the students have achieved this competency to date.

Students also demonstrate this competency in the Yearly Comprehensive Written Evaluation (YCWE) in item F.3B1. One hundred percent of students have achieved this competency since the inception of the program. Starting in Spring 2017, the Standardized Patient Evaluation Exam (SPEE) will also be used as a measure of this competency. The exam is scheduled for April 2017.

Consultation and interprofessional skills

Overall, 100% of the students have demonstrated the minimum level of competency in eight out of nine courses that assess this competency (PSYD 714, PSYD 720, PSYD 728, PSYD 740, PSYD 750A, PSYD 753, PSYD 760, PSYD 770). The remaining course (PSYD 780) where this competency is assessed is currently in progress. One student transferred credit for one of the courses (PSYD 714).

Overall, 100% of the students have achieved this competency on the Clinical Supervisor Evaluation of Practicum Student (CSEPS) in the Consultation and Interprofessional Skills item VI.1D1.

Ethical and legal standards

Overall, 100% of the students have demonstrated the minimum level of competency for the course assessing this competency (PSYD 722). Four students transferred course credit for this course.

Starting in spring 2017, the Doctoral Comprehensive Qualifying Examination (DCQE) was used to assess specific competencies. For the Ethics & Professional Issues domain, 78% of students (7 out of 9) demonstrated competency. Students who did not demonstrate the minimum level of competency will be given remediation plans written by the content expert in that area. Students who fail to successfully complete their remediation plans will be required to retake the DCQE at the next administration. Successful completion of the remediation plan will indicate that the students have demonstrated the minimum level of competency.

Students also demonstrate this competency at their practicum placements, which is assessed on the Clinical Supervisor Evaluation of Practicum Student (CSEPS) in items VI.1C1 and VII.3C1. One hundred percent of the students have achieved this competency to date.

Starting in spring 2017, the Standardized Patient Evaluation Exam (SPEE) will also be used as a measure of this competency. The exam is scheduled for April 2017.

Individual and cultural diversity

Overall, 100% of the students have demonstrated the minimum level of competency in six out of nine courses that measure this competency (PSYD 703, PSYD 720, PSYD 740, PSYD 750A, PSYD 760, PSYD 770). In one course (PSYD 714), 97% of the students demonstrated competency. The student who failed the course is required to retake it during the next academic year. The remaining two courses used to assess this competency are currently in progress (PSYD 780 and PSYD 718). One student transferred course credit for PSYD 703 and a second student transferred course credit for PSYD 714.

Starting in spring 2017, the Doctoral Comprehensive Qualifying Examination (DCQE) was used to assess specific competencies. For the Individual and Cultural Diversity domain, 100% of students (9 out of 9) demonstrated this competency.

Students also demonstrate this competency at their practicum placements, which is assessed on the Clinical Supervisor Evaluation of Practicum Student (CSEPS) in items VI.1A6 and VII.3C1. One hundred percent of students have demonstrated competency to date.

Students also demonstrate this competency on the Yearly Comprehensive Written Evaluation (YCWE) item F.3C1. One hundred percent of students demonstrated competency since the inception of the program.

Starting in spring 2017, the Standardized Patient Evaluation Exam (SPEE) will also be used as a measure of this competency. The exam is scheduled for April 2017.

Intervention

Overall, 100% of the students have demonstrated the minimum level of competency in three out of four courses assessing this competency (PSYD 725, PSYD 730, PSYD 735). In one course (PSYD 745), 94% of the students demonstrated competency. One student received a grade of “incomplete.” This student is currently on a leave of absence and will work with the instructor to finish the course requirements upon their return. Three students transferred course credit for PSYD 725, one student transferred course credit for PSYD 735, and eight students transferred course credit for PSYD 745.

Starting in spring 2017, the Doctoral Comprehensive Qualifying Examination (DCQE) was used to assess specific competencies. For the Clinical Psychology and Learning Theory domains, which measure the Intervention competency, 100% of students (9 out of 9) have demonstrated this competency.

Students also demonstrate this competency at their practicum placements, which is assessed on the Clinical Supervisor Evaluation of Practicum Student (CSEPS) in item VI.1A5. One hundred percent of students demonstrated this competency to date.

Professional values, attitudes, and behaviors

Overall, 100% of the students demonstrated the minimum level of competency in six out of eight courses assessing this competency (PSYD 708, PSYD 720, PSYD 740, PSYD 750A, PSYD 760, PSYD 770). The two remaining courses are currently in progress (PSYD 718 and PSYD 780).

Students also demonstrate this competency at their practicum placements, which is assessed on the Clinical Supervisor Evaluation of Practicum Student (CSEPS) in items VII.3A1, VII.3A2, VII.3B1, VII.3C1. One hundred percent of students demonstrated competency to date.

Students also demonstrate this competency on the Yearly Comprehensive Written Evaluation (YCWE) in items F.3A1, F.3A2, F.3B1, and F.3C1. With the exception of item F.3B1, during the 2014-2015 academic year, 100% of students demonstrated competency based on their ratings since the inception of the program. For item F.3B1 (professional communication), one student received an unsatisfactory rating during the 2014-2015 academic year, which placed the student in pre-probationary status in the program. The student demonstrated improvement following the evaluation, met the requirements of the pre-probationary status plan, and obtained satisfactory scores in all YCWE competencies the following academic year.

Research

Courses: Please note the difference in courses across cohorts reflects the Program's process of continuous improvement based on data and feedback:

Cohort 1. Overall, 100% of students demonstrated the minimum level of competency for the two courses assessing this competency (PSYD 712 and PSYD 721). Three students

transferred course credit for PSYD 712 and three students transferred credit for PSYD 721.

Cohort 2. Overall, 100% of students demonstrated the minimum level of competency for the two courses assessing this competency (PSYD 724 and PSYD 755). One student transferred course credit for PSYD 755.

Cohort 3 and beyond. Overall, 100% of students demonstrated the minimum level of competency for two of the three courses assessing this competency (PSYD 721 and PSYD 723). The remaining course (PSYD 724) is currently in progress.

Starting in spring 2017, the Doctoral Comprehensive Qualifying Examination (DCQE) was used to assess specific competencies. For the Statistics & Research Design domain 89% of students (8 out of 9) demonstrated competency. The student who did not demonstrate the minimum level of competency will be given a remediation plan written by the content expert in that area. If the student fails to successfully complete the remediation plan, the student will be required to retake the DCQE at the next administration. Successful completion of the remediation plan will indicate that the student has demonstrated the minimum level of competency.

Successful completion of the dissertation also constitutes a demonstration of this competency. Currently, 25 Program students are in the process of completing their clinical dissertations.

Supervision

Overall, 100% of students thus far have demonstrated the minimum level of competency for the course used to assess this competency (PSYD 756).

DISCIPLINE-SPECIFIC KNOWLEDGE

Affective aspects of behavior

One hundred percent of students passed the PSYD 726 course, which is the outcome measure used to demonstrate the minimum level of achievement in this DSK category.

Biological aspects of behavior

Ninety-seven percent of students passed the the PSYD 713 course, which is the outcome measure used to demonstrate the minimum level of achievement in this DSK category. The student who failed the course has taken the course once again and passed.

Starting in spring 2017, the DCQE was used to assess specific discipline-specific knowledge categories. For the Physiological Psychology domain 78% of students (7 out of 9) demonstrated the minimum level of knowledge. The students who did not demonstrate the minimum level of knowledge will be given a remediation plan written by the content expert in that area. Students who fail to successfully complete the remediation plan will be required to retake the DCQE at the next administration. Successful completion of the remediation plan will indicate that the students have demonstrated the minimum level of knowledge in this area.

Cognitive aspects of behavior

One hundred percent of students passed the PSYD 726 course, which is the outcome measure used to demonstrate the minimum level of achievement in this DSK category.

Developmental aspects of behavior

One hundred percent of students passed the PSYD 704 course, which is the outcome measure used to demonstrate the minimum level of achievement in this DSK category.

Starting in spring 2017, the DCQE was used to assess specific discipline-specific knowledge categories. For the Life Span Development domain 44% of students (4 out of 9) demonstrated the minimum level of knowledge. The core faculty will discuss, identify causes, and develop a plan to address this low pass rate at the faculty meeting

on April 4th, 2017. The students who did not demonstrate the minimum level of knowledge will be given a remediation plan written by the content expert in that area. Students who fail to successfully complete the remediation plan will be required to retake the DCQE at the next administration. Successful completion of the remediation plan will indicate that the students have demonstrated the minimum level of knowledge in this area.

History and systems

One hundred percent of students passed the PSYD 702 course, which is the outcome measure used to demonstrate the minimum level of achievement in this DSK category.

Research

Courses: Please note the difference in courses across cohorts reflects the Program's process of continuous improvement based on data and feedback:

Cohort 1. Overall, 100% One hundred percent of students passed the two courses (PSYD 712 and PSYD 721), which are the outcome measures used to demonstrate the minimum level of achievement in this DSK category. Six students transferred course credit for the 2 courses.

Cohort 2. Overall, 100% One hundred percent of students passed the two courses (PSYD 724 and PSYD 755), which are the outcome measures used to demonstrate the minimum level of achievement in this DSK category. One transferred course credit for 1 of the courses.

Cohort 3 and beyond. Overall, 100% One hundred percent of students passed two of the three courses (PSYD 721 and PSYD 723), which are the outcome measures used to demonstrate the minimum level of achievement in this DSK category. The remaining course (PSYD 724) is currently in progress.

Starting in spring 2017, the DCQE was used to assess specific discipline-specific knowledge categories. For the Statistics & Research Design domain 89% of students (8 out of 9) demonstrated the minimum level of knowledge. The student who did not demonstrate the minimum level of knowledge will be given a remediation plan written by the content expert in that area. If the student fails to successfully complete the remediation plan, they will be required to retake the DCQE at the next administration. Successful completion of the remediation plan will indicate that the student has the minimum level of knowledge.

Successful completion of the dissertation will also be used as a measurement of assessing this DSK category. Currently, there are 25 students who are in the process of completing their clinical dissertation.

Social aspects of behavior

Ninety-six percent of students passed the the PSYD 733 course, which is the outcome measure used to demonstrate the minimum level of achievement in this DSK category. The student who failed the course has taken the course once again and passed.

Starting in spring 2017, the DCQE was used to assess specific discipline-specific knowledge. For the Social Psychology domain 89% (8 out of 9) of students demonstrated knowledge. The student who did not demonstrate the minimum level of knowledge will be given a remediation plan written by the content expert in that area. If student fails to successfully complete the remediation plan, he/she will be required to retake the DCQE at the next administration. Successful completion of the remediation plan will indicate that the student has the minimum level of knowledge.

Advanced integrative knowledge of scientific psychology

One hundred percent of students passed the PSYD 726 course, which is the outcome measure used to demonstrate the minimum level of achievement in this DSK category.

Q4) The Program's aggregated data (see Proximal Data: Program Outcomes Document Appendix II.D.1.a.10) include students' grades in competency-demonstrating courses, as well as their scores on the Standardized Patient Evaluation Exam (SPEE), Doctoral Comprehensive Qualifying Examination (DCQE), Clinical Supervisor Evaluation of Practicum Student (CSEPS), and Yearly Comprehensive Written Evaluation (YCWE). These data are collected in a database that we use to track program outcomes. Data are examined in aggregate form to determine the percentage of students who pass each course, the percentage of students who pass the Standardized Patient Evaluation Exam (SPEE) and the Doctoral Comprehensive Qualifying Examination (DCQE), the percentage of students who obtain ratings of 3 ("Student's functioning indicates skill typical of students at this level of training. Average and acceptable.") or better on their CSEPS, and the percentage of students who obtain satisfactory progress on their YCWE. Data obtained from the Multicultural Awareness, Knowledge, and Skills Survey (MAKSS) are also kept in a database and will be analyzed to examine change over time in students' self perception of development in multicultural awareness, knowledge, and skills.

Data will be collected on internship completion. For accredited internships, the following procedures will be used to collect student data: 1) the primary supervisor will complete the agency's intern evaluations at mid-year and end-of-year and submit to the USF PsyD Program DCT and 2) the student and primary supervisor will sign and submit the Time2Track hours log for the entire internship experience at the end of the internship year. For non-accredited internships (APPIC-member and CAPIC-member), the following procedures will be used to collect student data: 1) the student will complete and submit the Non-APA Accredited Internship Tracking Form to the USF PsyD Program DCT, one month after the start of the internship (see Tracking form in Appendix II.D.1.a.1.9); 2) the primary supervisor will complete and sign the agency's intern evaluations at mid-year and end-of-year and submit to the USF PsyD Program DCT; 3) the student will submit a Time2Track hour log summary for each month, submitted to the USF PsyD Program DCT (see form in Appendix II.D.1.a.1.11); 4) the student and primary supervisor will sign and submit the Time2Track hours log for the entire internship experience at the end of the internship year.

The Program has also developed an Alumni Survey that will be used to collect data from graduates two years and five years post-graduation (see Appendix Appendix II.D.1.a.1.12 for Alumni Survey).

Please also find the PsyD Program minutes attached in Appendix II.D.1.a.1.3.

Standard II.D.1.b

Description

For program graduates, the program must provide distal evidence of students' competencies and program effectiveness and must evaluate graduates' career paths in health service psychology after they have left the program.

- i. 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 students' job placement and licensure rates.
- ii. At 5 years post-graduation, the program must provide data on graduates, including data on graduates' licensure (as appropriate for their current job duties) and their scholarly/research contributions (as consistent with the program's aims).

Self Assessment

Focused Questions

Review: IR C-18 D: Outcome data for doctoral programs.

Summarize what data are available to demonstrate achievement aims/competencies. This description should supplement the more detailed data which should be uploaded as an attachment.

All accredited programs must provide distal aggregate outcome data.

Applicant programs applying for "accredited, on contingency" do not need to provide aggregated distal data. Rather these programs should provide a plan and evaluation mechanisms to collect outcome data.

Narrative Response

Q1) Not applicable. Applying for accredited, on contingency.

Q2) Not applicable. Applying for accredited, on contingency.

Q3) The PsyD Program will send the PsyD Alumni Survey (see Appendix II.D.1.b.1.1) to graduates at 2 years and 5 years following graduation. The survey collects data on graduates' perceptions of the adequacy of their training in the doctoral program across all profession-wide competencies and discipline-specific knowledge areas, as well as graduates' licensure status and current employment activities.

Standard II.D.2.a-b

Description

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:
 - i. Involves program stakeholders, including faculty, students, graduates, and others involved in the training program.
 - ii. 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.
 - iii. 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.
 - iv. Identifies potential areas for improvement.

Self Assessment

Focused Questions

Discuss how students are involved in the program evaluation process.

Demonstrate how the self-assessment process and outcomes relate to and evaluate the achievement of the program's aim(s) and all required profession-wide and any required program-specific competencies.

Demonstrate how the program identifies potential areas for improvement.

Describe how outcome data are utilized to help the program evaluate and enhance its offerings and outcomes. Describe how outcome data or other feedback received as part of the program's internal self-assessment process are used to help the program evaluate and enhance its offerings and outcomes. Provide specific examples of how these data have been used to modify the program, and how these modifications, in turn, have been evaluated.

How has the program monitored all areas noted in Section II.D.2.b and made programmatic changes, as appropriate?

Discuss how the program has responded to feedback from the CoA since the last accreditation review to demonstrate how the program uses self-assessment to address these issues in general.

Narrative Response

Q1) Students participate in evaluating the Program using a variety of methods. At the end of each academic year, students anonymously complete the Yearly Program Evaluation (see Appendix II.D.2.a-b.1.2). The survey asks for student feedback on various aspects of the program, including curriculum, teaching effectiveness, and clinical training. Rating options range from 1 (Very Dissatisfied) to 5 (Very satisfied). Overall mean ratings reflect a score of 3.74 on the perceived quality of the Program, with all means above the minimum scale midpoint satisfactory rating of 3 (which suggests the respondent is satisfied), except access to research opportunities, which received a score of 2.81. Faculty on the Program Evaluation Committee review these data and, if necessary based on the data and other relevant input from students and faculty, create a program improvement plan, which is discussed with the students at the beginning of the following fall semester during the Program Update Meeting. In addition to the yearly written feedback, students have the opportunity to provide ongoing

feedback throughout the year through a number of avenues. The Program implemented a Cohort Representative program, where a representative from each cohort is elected and responsible for speaking with their cohort about questions, concerns, and feedback the students have for faculty. The Cohort Representatives attend the beginning of the Core Faculty meeting to present the feedback from each student cohort to faculty and to provide faculty responses back to students. Depending on the nature of the topic, faculty respond to student feedback at the following Core Faculty meeting or, if it is a time-sensitive matter, will respond to the students via announcement on Canvas. Additionally, students are encouraged to discuss concerns with and provide feedback about the Program to their faculty, advisors, Director of Clinical Training, and Program Director. Students also have the opportunity to provide anonymous feedback via a comment box, which is located in the common area.

Q2) As outlined in Table 2 (Appendix II.D.2.a-b.1.1) the Program's self-assessment process and outcomes relate to and evaluate all the profession-wide competencies. As explicated in the USF PsyD Program Aims, Competencies, and Outcome Measures document (Appendix II.D.2.a-b.1.6), the USF PsyD program aims and competencies are mapped onto program outcomes as well as onto the profession-wide competencies and the areas of discipline specific knowledge. The Program requires no program-specific competencies.

Q3) The Program carefully monitors all feedback from students, Program faculty, and other constituents, to identify potential areas of improvement. All instruments used to collect feedback allow for specific input in each assessed area. Survey data are categorized and analyzed in each area. The student and Program faculty feedback are combined to gain a holistic view of the performance of the Program in different contexts. Quantitative and qualitative feedback are combined to identify areas of improvement and make any changes that may be required. The Program Evaluation Committee reviews the evaluation data on an ongoing basis and proposes programmatic changes for consideration of the Core Faculty. At each of the other committee meetings (curriculum and clinical training; admissions and recruitment) Program faculty discuss areas for improvement and changes that may need to be made. Faculty feedback, program updates, and policy changes are captured and tracked through meeting minutes.

Q4) Outcome data, as well as ongoing staff, Program faculty, and student feedback are reviewed to improve all aspects of the Program. What follows are four examples of policy changes made as a result of student feedback that was then carefully considered and acted upon by the Program faculty:

A) Improved communication between students and faculty: Students expressed a desire for improved communication between the Program and students, specifically they wanted more opportunities to provide ongoing feedback as well as to receive timely feedback and updates from the Program faculty. In response to this, the Program faculty made the following changes: (1) implemented the cohort representative model (described in Q3 above), which invites a representative from each cohort to attend the monthly core faculty meeting to provide feedback to the faculty; (2) created a comment box wherein the students can leave anonymous feedback about the Program (see Comment Card attached in Appendix II.D.2.a-b.1.3); and (3) Program faculty disseminated a flowchart of communication so students know the appropriate point of contact for various addressing professional development issues (see Appendix II.D.2.a-b.1.4).

B) Change in Attendance Policy: The students put forth a recommendation to change the attendance policy. Program faculty researched, discussed, and ultimately voted to approve the recommended policy change (see Appendix II.D.2.a-b.1.5, for the students' proposal and the Program faculty response, including policy change documentation).

C) Access to Research Opportunities: On the Yearly Program Evaluation Survey, overall mean ratings reflect a score of 3.74 on the perceived quality of the Program, with all means above the minimum scale midpoint satisfactory rating of 3 (which suggests the respondent is satisfied), except access to research opportunities, which received a score of 2.81. To address this lower rating, Program faculty have actively recruited Research Assistants to help with their programs of research. Nine PsyD students have worked as, or are currently working as, Research Assistants for School of Nursing and Health Professions (SONHP) faculty. Additionally, Program faculty notify students of all relevant external research opportunities via Canvas. As a result of this, 11 students have been involved in external research projects.

D) 2017 DCQE Outcome Data: A current example of the use of outcome data to help the enhance the Program comes from this year's DCQE. Starting in spring 2017, the DCQE was used to assess specific profession-wide competencies and discipline-specific knowledge areas. When examining the data at the domain level, the Program Evaluation Committee discovered that two of the domains had low pass rates: the Lifespan Development domain, measuring the Developmental Aspects of Behavior DSK category, (44% pass rate) and the Abnormal Psychology domain measuring the Assessment PWC (33% pass rate). The Program Evaluation Committee will take this information to the Core Faculty meeting on April 4th, 2017 to discuss, identify causes, and develop a plan to address these two low pass rates.

In addition to these specific examples, the Program continually monitors student feedback (e.g., feedback on the clinical placements). This feedback, whether oral or written, is followed up, researched, and addressed as appropriate.

Q5) Program faculty use various methods to monitor all aspects of program evaluation, inclusive of the areas noted in Section II.D.2.b, on an ongoing basis. The PsyD Program's committees (Curriculum and Clinical Training, Admissions and Recruitment, and Program Evaluation) meet monthly to discuss and evaluate the effectiveness of their domain of the Program and report back at the next regular core faculty meeting (comprised of all Core Faculty) on any proposed actions designed to improve program effectiveness. Decisions made in meetings are tracked using minutes, which serve as a tool to follow up on the progress of individual items (Committee and Core Faculty meeting minutes can be referenced in Appendix II.D.2.a-b.1.9). Core faculty teaching practicum courses are also responsible for monitoring and evaluating students' clinical placements as part of the overall program evaluation process. Practicum instructors function as liaisons, which includes direct contact with the site, between the practicum training site and the Director of Clinical Training. Each fall semester, practicum instructors conduct site visits and follow-up each spring semester with a phone call (see Practicum Site Visit Form in Appendix II.D.2.a-b.1.8). Information from the practicum site visits is reviewed by the Director of Clinical Training (DCT) and the Curriculum and Clinical Training Committee to ensure high-quality and appropriately sequenced clinical training opportunities for our students. The outcome information resulting from these

practicum site visits will be reflected in faculty meeting minutes. As described in the above question, Program faculty address feedback on an ongoing basis and make programmatic changes as needed. This issue was addressed more comprehensively earlier, in response to Question 4 above.

Q6) Not applicable

Please also see attached Table 7 in Appendix II.D.2.a-b.1.7 and Table 8 in Appendix II.D.2.a-b.2.1. These tables are not applicable, as the Program does not have any students who have completed those milestones and does not yet have any graduates.

Standard II.D.3

Description

Documenting and Achieving Outcomes Demonstrating Program's Effectiveness.

All accredited doctoral 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 and the program's achievement of this should be reflected in student success in achieving licensure after completion of the program.

- a. The outcomes of program graduates including licensure rate and other proximal and distal outcomes of program graduates shall be evaluated within the context of: the requirement that all accredited doctoral programs prepare students for entry-level practice; each program's expressed and implied stated educational aims and competencies; and statements made by the program to the public.
- b. Doctoral 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 rate. Instead the Commission on Accreditation shall use its professional judgment to determine if the program's licensure 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.

Focused Questions

Review: [IR C-19 D: Licensure Rates for Doctoral Programs](#)

Discuss the program's licensure rate of program graduates. Include the licensure rate that appears in the program's "Student Admissions, Outcomes, and Other Data" section of its public documents in the narrative.

Narrative Response

Not applicable. Applicant program for accredited, on contingency.

Standard II.(A)

Description

Additional information relevant to Section II.

Self Assessment

Focused Questions

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any **Section II** issues to specifically address "*in the next self-study*"? If so, provide your response here.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any other **Section II** issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the CoA and whether the CoA determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

Narrative Response

Not Applicable. Program is not currently accredited.

Standard III.A.1

Description

The program has an identifiable body of students at different levels of matriculation who:

- a. constitute a number that allows opportunities for meaningful peer interaction, support, and socialization.
- b. are reflective of a systematic, multiple-year plan, implemented and sustained over time, designed to attract students from a range of diverse backgrounds as outlined in the Glossary.

- i. 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.
- ii. 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.
- c. By prior achievement, students have demonstrated appropriate competency for the program's aims as well as expectations for a doctoral program.
 - i. If the program has criteria for selection that involve demonstration of prior knowledge (e.g., GRE subject tests), the program must discuss how these criteria influence program requirements, are appropriate for the aims of the program, and maximize student success.
 - ii. If the program has broad entrance criteria (e.g., undergraduate or graduate GPA), the program must address how students will be prepared for advanced education and training in psychology, how the curriculum is structured in accord with the goal of graduate-level competency, and how the criteria relative to the curriculum maximize student success.
- d. By interest and aptitude, they are prepared to meet the program's aims.
- e. They reflect, through their intellectual and professional development and intended career paths, the program's aims and philosophy.

Self Assessment

Focused Questions

Review: [IR C-21 D: Diversity Recruitment and Retention](#)

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

Describe the systematic, multiple-year plan, implemented and sustained over time, designed to attract students from a range of diverse backgrounds as outlined in the Glossary. Specifically, the program must describe how it meets the following criteria:

- The program must implement specific activities, approaches, and initiatives designed to increase diversity among its students. It may participate in institutional-level initiatives aimed toward achieving diversity, but these alone are not sufficient.
- The program should document the concrete actions it is taking to enhance 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.

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

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

Narrative Response

Q1) We currently take up to 18 students per year, which is well in excess of the yearly enrollment of many accredited programs. We receive feedback from students in a number of ways, including the Yearly Program Evaluation (Appendix III.A.1.1.1), cohort representative feedback at core faculty meetings, discussion of concerns and provision of feedback to Program Faculty, Advisors, DCT, and Program Director, as well as providing anonymous feedback via a comment box. Students have not raised any issues regarding student sufficiency. Beginning this year, we are modifying the Yearly Program Evaluation to include a specific question on student sufficiency.

Q2a) The PsyD Program prioritizes the **recruitment of diverse students** as central to its mission of working with underserved populations. The program attracts prospective students through a multi-level, multi-year plan as outlined below:

Program Level Diversity Recruitment Activities, Approaches, and Initiatives:

Recruitment Outreach

1. The Program Director, Director of Clinical Training, and Admissions and Recruitment Committee Chair quickly and thoroughly answer all questions received by phone or email. (Began in 2013)

2. The Program participates in a student ambassador program where current students represent the program at various recruiting events, interact with prospective students, answer prospective students' questions/queries, and provide a student's firsthand perspective about the program. The current student ambassadors for the program belong to diverse backgrounds and, hence, help signal and facilitate a friendly and welcoming environment for prospective students from diverse backgrounds interested in doctoral training in psychology. Applicants are also encouraged to communicate with student ambassadors via phone and/or email for additional information about their experiences in the program. (Began in 2014)
3. Email blasts to prospective students:(Began in 2014; See Appendix III.A.1.1.6 for marketing email blast templates).
4. Host multiple webinars and virtual sessions for prospective students who are unable to come to campus to attend an in-person information session; Faculty members present their specific, content-focused research, providing actual examples of how students can apply themselves to work with underserved populations. (Began in 2015)
5. Host live, on-site information sessions designed to provide all potential applicants with information. These sessions target diversity. (Began in 2013)

Recruitment Funding

1. The program launched the Judy F. Karshmer Scholarship Fund admissions scholarships for incoming students, with a preference given to students who demonstrate financial need, are first generation collegians, and/or come from traditionally underrepresented groups in psychology. (Began in 2014)
2. The program launched a Diversity Scholarship Program in fall 2016. Eligibility for this program includes membership in an underrepresented group in psychology and clear intention to become a clinical psychologist who will contribute to increasing diversity and cultural competence in the field (as articulated by applicants' essays). This approach, modeled after other accredited programs (e.g., University of Michigan Psychology Department), to recruitment of diverse students provides a sponsored overnight stay at USF that includes meetings with key leaders at the university, a Q & A session with a

current PsyD student panel, a presentation by psychologists of diverse backgrounds on careers in psychology, and focused information related to financial aid, grants, and diversity initiatives on campus that can support applicants' practical concerns about attending a graduate program in psychology. Overall, this program is aimed at allowing applicants from diverse backgrounds to better understand the program and get a glimpse of life as a USF PsyD student. Please see Appendix III.A.1.1.7 for more information on the 2017 Diversity Scholars Program. (Began in 2017)

Targeted Marketing/Advertising

1) **Brochure and Website:** showcase diversity of faculty and students, clinical placements, coursework, and research opportunities (Began in 2014)

2) **Targeted advertising** to the following organization and APA Divisions: Association of Black Psychologists, Division 35 (Society for the Psychology of Women), Division 44 (Society for the Psychological Study of Lesbian, Gay, Bisexual, and Transgender Issues), Division 45 (Society for the Psychological Study of Culture, Ethnicity, and Race). (Began in 2014)

Please see Appendix III.A.1.1.3 for a complete breakdown of the PsyD program's recruitment plan.

School Level Diversity Recruitment Activities, Approaches, and Initiatives:

1. **Tabling** at conferences and events that specifically target students of color (Association of Black Psychologists (ABPSI; Began in 2017), National Latino Psychological Association (NLPA, Began in 2016), Advancing Hispanics Chicanos and Native Americans in the Sciences (AHCNAS, Began in 2016)

2. **Recruiting visits** to Minority Serving Institutions (MSI)/ Historically Black Colleges and Universities (HBCUs) (Began in 2016)

3. School of Nursing and Health Professions (SONHP) Graduate Programs Annual **Open House** (Began in 2013): SONHP recruitment event for all graduate programs in the School, which provides information about the PsyD program to individuals who may not have had exposure to a PsyD as a graduate degree option.

University Level Diversity Recruitment Initiatives:

1) **The University Council on Diversity & Inclusion (UCDI)** is comprised of faculty, staff, students, and alumni across campus departments, schools, and colleges. The council works with the Vice Provost of Diversity Engagement & Community Outreach to provide advice, support, input, and recommendations on all aspects of diversity implementation at the University of San Francisco. This includes current efforts or emerging opportunities in diverse recruitment and retention, curricular and co-curricular initiatives, community outreach, campus climate, and diversity related professional development. For more information see the website at <https://myusf.usfca.edu/diversity-engagement/ucdi>. (Began in 2012)

2) **USF President's Diversity Goals:** List of action steps outlined by the president with the goal of moving toward a more inclusive USF Community. The action steps include the following: to increase student, staff, and faculty diversity; cultural competence training; student life and support services; marketing communications; and assessment and reporting. For more information see the website at <https://myusf.usfca.edu/president/diversity-goals>. (Began in 2016)

Q2b) Overall, **recruitment efforts** have been successful with 62% of matriculated students identifying as people of color compared to the national average of 34% (CoA, 2015). While our numbers in terms of gender (74%) are comparable to the national average (78%), additional student demographic variables not reported by CoA (2015) further illustrate the diverse backgrounds of students in the USF PsyD Program: 20% identify as LGBTQ and 54% identify as bilingual speakers.

The Admissions and Recruitment Committee monitors the effectiveness of its efforts to attract a diverse applicant pool. Upon review of the admissions numbers for the 2016-2017 admissions cycle, the committee noted a decrease in the percentage of diverse students enrolling in the 2016 cohort. In particular, Program faculty members noted that the majority of accepted applicants who declined admission were from diverse backgrounds. Upon this discovery, the Admissions Committee initiated conversations with the School of Nursing and Health Professions (SONHP) graduate recruitment team to review efforts to recruit diverse students and to identify revisions

needed in order to address these concerns. From that conversation, the committee and recruitment team created an enhanced recruitment plan to target more diverse applicants. The result of this work can be found in the Marketing and Recruitment Plan document in Appendix III.A.1.1.3. This year, the Program has added an innovative approach to attract students of diverse backgrounds, offering a sponsored overnight stay at USF that would allow the students to better understand the Program and get a glimpse of life as a USF PsyD student through the Diversity Scholars Program, described above and in Appendix III.A.1.1.7. This program represents an active effort to recruit a more diverse student body. Another recruitment tool is the Student Ambassador Program, also detailed in the previous question. Current students represent the Program at various recruiting events, interact with prospective students, answer prospective students' questions, and provide a firsthand student's perspective about the Program. The current student ambassadors for the Program belong to diverse backgrounds and hence, help facilitate a friendly and welcoming environment for any prospective student looking for diverse perspectives on the Program and doctoral training in psychology.

Q3) The Program uses a comprehensive and holistic approach when reviewing applications. As per the website (<https://www.usfca.edu/nursing/programs/doctoral/clinical-psychology/admission>), admission decisions are based on the overall fit of each applicant to the mission and aims of the USF PsyD Program. The Admissions Committee conducts a comprehensive review of all application materials, with particular regard for the breadth and depth of an applicant's background based on the personal statement, prior clinical and research experiences, and letters of recommendation. Scores on the Graduate Record Examination (GRE), Psychology Subject Test, and a review of the undergraduate and, where relevant, graduate transcripts provide an indication of an applicant's general knowledge and ability to succeed in the Program. Applicants who progress past the initial application stage are invited for an in-person interview day, which consists of individual interviews with PsyD faculty, a group interview with other applicants, a writing exercise, and an opportunity to learn more about the Program.

In addition to the standard online application provided through the graduate school at USF, eight application components must be included in an application for the Clinical

Psychology PsyD Program. These components have been selected to be consistent with other graduate programs at the University of San Francisco and because they are generally standard practice across accredited doctoral training programs in Clinical Psychology: 1) Bachelor's degree in any discipline; 2) pre-requisite courses, unless the applicant has bachelors and/or master's in psychology; 3) If applicant does not have a bachelor's or master's degree in Psychology, they are asked to complete 3 prerequisite courses as follows: a research methods course, and two of the following courses: a) Abnormal Psychology/Psychopathology, b) Lifespan Development, or c) Theories of Personality/Theories of Psychotherapy; 4) Transcripts from all institutions attended; 5) General GRE and Psychology Subject Test score reports, which may be waived if the student has a master's in psychology or is transferring from a doctoral psychology program; 6) three letters of recommendation; 7) Curriculum Vitae; 8) a personal statement in response to the following question: "In 1000 words or less, please write a self-reflective essay describing your ultimate goals as a licensed psychologist, including how your personal and professional experiences have contributed to your decision to pursue a doctorate in clinical psychology. In addition, please specifically address how your background, interests, and goals align with the University of San Francisco's PsyD Program and its overall mission." International applicants are also required to provide Test of English as a Foreign Language (TOEFL) scores to demonstrate English language proficiency.

Initial admissions decisions are made by the PsyD Admissions committee, which is composed of PsyD Core Faculty Members. A holistic lens is applied in reviewing applications: no applicants are turned away for low performance in a single area (e.g., lower than recommended G.P.A.; low percentile on GRE). This approach allows the Admissions Committee to engage in a comprehensive review of applicants and to discuss the strengths and fit of all potential students with the Program mission and goals, which has proven to expand the ability to admit a diverse student body. All applications are reviewed by at least 2 committee members and given a quantitative rating using the evaluation criteria listed on App Review, including the categories of Academic Achievement, Professional Employment, Letters of Recommendation, Research Experience, Leadership Potential, Interest in working with underserved

populations and any other unique attributes. For the detailed App Review Standard Rating Form (see Appendix III.A.1.1.2).

Q4) Two of the strategies used to ensure that students are a good fit with the Program are 1) the information workshops, which focus on specific details of the doctoral training program and on the Program's commitment to training students to work with diverse populations in integrated care settings, and 2) an in-person interview day.

The following criteria are prioritized when selecting applicants for the in-person interview day: 1) using the applicant's personal statement and CV, faculty assess their overall fit with PsyD Program mission (e.g., interest in working interprofessionally with underserved populations in a variety of clinical and community settings); and 2) potential to succeed in the Program, quality of character, and overall potential to represent the field of clinical psychology effectively are assessed by a careful review of an applicant's letters of recommendation, personal statement, and academic record.

Additionally, the interview day was developed to ensure a good fit with the Program. The interview day provides the opportunity to meet students in person and to conduct individual and group interviews, during which Program Faculty ask prospective students questions to determine fit with the Program (See Appendix III.A.1.1.4 for Individual Interview Questions and Appendix III.A.1.1.5 for Group Interview Questions). In person interviews provide an opportunity for the committee to assess a candidate's technical skill set as well as their ability to understand complex topics. The committee uses the group discussions as a tool to evaluate an individual's interpersonal skills. An applicant's performance in both these areas is taken into account in determining fit for the Program.

Please see the following:

Table 9 in Appendix III.A.1.1.8

Table 10 in III.A.1.2.1

Table 11 in III.A.1.3.1

Standard III.B.1

Description

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.

Self Assessment

Focused Questions

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

Narrative Response

All core faculty are also teaching faculty and advisors. In addition to meeting with students during their posted weekly office hours, the PsyD Program Core Faculty meet with students at other times face-to-face, on the phone, or electronically (i.e., Zoom, Skype), which is often most convenient for the students. Program faculty members have created a number of additional methods and opportunities for students to communicate with them, including an anonymous comment box, student cohort representative attendance at monthly core faculty meetings, mandatory advising sessions each semester, and annual program evaluations.

All PsyD faculty members prioritize mentorship and role modeling for students. Core faculty are all involved in the various functions of the PsyD Program in their roles as faculty members, including teaching, scholarship, and service, which includes extensive participation in the administration of the Program (i.e., program development, chairing committees, creating and updating policies). Five of out six of the core faculty are also licensed psychologists. Four of these five engage in part-time clinical work with underserved populations, including independent clinical practice, formal practicum training, supplemental practicum training, or volunteer opportunities. This models balancing the different roles of a psychologist and is important in the context of a practice-based PsyD Program.

In every aspect of the Program, Program Faculty demonstrate dedication to the mission of the Program through engaging in actions that promote the attainment of Program aims and competencies. With regard to teaching, Program faculty engage in actions to keep their credentials and expertise current in the subject they teach. Program faculty also demonstrate investment in the Program's aims as demonstrated by their involvement in program administration through the shared governance model, each having a significant role and time investment in the development and ongoing evaluation of the Program. Program faculty are actively engaged in producing research and scholarship related to the aims of the Program, and work with students as chairs and members of clinical dissertation committees. Additionally, Program faculty members participate with students as co-presenters at professional conferences (thus far 4 conferences with a total of 9 students) and as co-members of research teams (thus far 4 teams with a total of 13 students). In addition to individual and collaborative faculty research and scholarship projects, Program Faculty members model ongoing attention to the integration of science and practice through the systematic assessment and evaluation of the PsyD Program.

Standard III.B.2

Description

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.

Self Assessment

Focused Questions

Discuss program efforts to ensure a supportive, collegial, and respectful environment for students.

Narrative Response

The Program begins the process of creating a supportive, collegial, and respectful environment for its students during a full-day orientation at the beginning of the incoming cohort's first semester. During orientation, Program faculty review the entire handbook, which includes a description of the type of respectful environment that is facilitated and expected of our students. For instance, faculty review the mission, vision, and values statements of the School of Nursing and Health Professions (SONHP), which include the value to: Create and maintain an environment that promotes excellence in the health professions' academic endeavor based on mutual respect, transparency, collaboration compassion and caring, personal growth, responsibility, and accountability, professionalism, a passion for justice, personal health and well-being (see Student Handbook, p. 7, in Appendix III.B.2.1.1).

Additionally, as part of the Program's Professional Development Requirements, students are expected to engage in cordial, respectful relationships with students, faculty, supervisors, and staff at all levels (Student Handbook, p. 12, in Appendix III.B.2.1.1).

Our dedication to a supportive environment for students is further operationalized in our aims and competencies, specifically in Aim 3: To prepare students as health service psychologists who possess a) professional values and attitudes b) strong communication, collaboration, and consultation abilities and c) self-awareness and reflective practice skills and in Competencies 3A2 and 3C1:

3A2: Students will demonstrate an appropriate level of professionalism, including collegiality, accountability, and integrity.

3C1: Students will demonstrate cultural humility, such as awareness of impact on others, including verbal and nonverbal behavior, difference between intent vs. impact, and awareness of self and others as shaped by individual and cultural diversity, as defined by the APA ethical guidelines.

Further, these values are incorporated into the PsyD Student Code of Conduct, the purpose of which is to promote ethical standards and personal conduct of students.

Under the heading of “Interpersonal Relationships,” it states, “USF PsyD students shall interact with peers, faculty, staff and those they encounter in their professional public health capacity in a manner that is respectful, considerate, and professional. To facilitate the free and open exchange of ideas, any criticism shall be offered in a constructive manner, and the right of others to hold different opinions shall be respected” (See Student Handbook, p. 37, in Appendix III.B.2.1.1). Students are also informed at this time of their avenues of recourse if problems arise. This is outlined in our due process and grievance procedures (See Student Handbook, p. 20, in Appendix III.B.2.1.1).

Standard III.B.3

Description

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.

Self Assessment

Focused Questions

Discuss how the program ensures respect for cultural and individual diversity.

Narrative Response

Ensuring respect for cultural and individual diversity is built into the entire program, stemming from the mission and articulated through the aims and competencies, as well as factoring into all programmatic decisions. The Program avoids any actions that would restrict program access on grounds that are irrelevant to success in graduate training. If concerns arise related to cultural and individual diversity, Program faculty discuss how to handle the situation during Core Faculty meetings. The Program has nondiscriminatory policies and operating conditions based on the USF non-discrimination policy that informs all aspects of Program administration and policy enforcement. The non-discrimination policy can be found in Appendix III.B.3.1.1.

Standard III.C.1

Description

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).

Self Assessment

Focused Questions

Review: [IR C-22 D: Student Attrition Rates for Doctoral Programs](#)

Describe program efforts and procedures to ensure timely completion of program.

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

Narrative Response

Q1) Program efforts to ensure timely completion start with our admissions selection criteria. The PsyD Program utilizes a comprehensive and holistic approach to admissions as an initial means of ensuring the selection of applicants who have the necessary aptitude, experiences, and specific interest in the Program's mission and aims to complete the Program in a timely manner. During the paper review portion of the admissions process, admissions committee members utilize the application review and rating form developed by Program Faculty to ensure that applicants meet the minimum recommended standards required for successful completion of the Program. The application review and rating form can be found in Appendix III.C.1.1.1. The next step in the admissions process is an in-person Interview Day during which applicants complete a writing exercise and participate in individual and group interviews. The Program also has a list of prerequisite requirements that students must have completed to allow for a smooth transition into the Program, including the GRE, Psychologist Subject Test, a Research methods course, and two of the following courses: Abnormal Psychology/Psychopathology, Lifespan Development, and/or Theories of Personality/Theories of Psychotherapy. International students are required to provide TOEFL test scores to demonstrate English language proficiency. Additionally, students are informed orally and in writing that the Program is a full-time, cohort model wherein students complete courses and clinical training as delineated in the curriculum pattern in

a graded, sequential, and cumulative format that is structured to promote timely completion of the Program.

Program faculty guidance to support timely completion of the Program commences during the summer prior to enrollment in the Program, with Program faculty advisors reaching out to students to address questions or concerns they have about preparing to start the Program. During the first week of classes, incoming students attend a new student Orientation, where they meet Program faculty and current students. At Orientation, Program faculty review the student handbook and provide an overview and timeline of program requirements to introduce students to the expectations and pace of the Program (See PsyD Program Progression Chart in Appendix III.C.1.1.2. New students also meet with advanced students and have the opportunity to sign up for the Peer Mentoring Program, through which advanced PsyD students provide tips on timely completion. During the first semester of the Program, students enroll in PSYD 708 Socialization to Clinical Training Seminar, which meets weekly and provides foundational information about the field of clinical psychology and further orients students to the expectations of graduate school. In subsequent years, students enroll in a Practicum course each semester, which provides another mechanism to ensure students are on track and to help Program faculty become aware of students who may need additional support. Also starting in the first semester, Program faculty advisors track students through mentorship and oversight of students' academic and clinical training plans. Program faculty advisors meet with students once per semester, at minimum, to review progress and address any barriers to successful and timely completion of the Program. This includes the timely remediation of any deficiencies so that students can, if appropriate and possible, be efficiently remediated. Part of the advising process is the Planning and Yearly Comprehensive Written Evaluation (YCWE) process that students undertake with their advisors to map out steps to achieve their yearly and long-term goals (see the Yearly Comprehensive Written Evaluation in Appendix III.C.1.1.3). Students receive additional mentorship from Program faculty, the Program Director, and the Director of Clinical Training throughout their time in the Program to ensure placement in high quality practicum training sites that will enable them to accrue the types of experiences and number of practicum hours they need to be competitive for internship in a timely fashion. The Program provides additional supports to ensure student success, including an internship preparation seminar, preparatory workshops for the doctoral qualifying examinations: Doctoral Comprehensive Qualifying Examination (DCQE) & Standardized Patient Examination Evaluation (SPEE) and access to writing support services. The university provides additional supports through a variety of student services, which Program faculty encourage students to utilize (see Appendix III.C.1.1.4 for a complete list of USF Student Services). Additionally, Program faculty meet with students once per semester

for a Program Update Meeting to inform students of updates to policies that may impact their trajectories. The Program faculty invites open communication and students are encouraged to approach the Program faculty regarding any difficulty or concerns they may have throughout the year. The Program has multiple platforms to address students' issues, concerns, and grievances, including those that impact timely completion of the Program.

Q2) Since its inception in 2013, the Program has seen a total attrition rate of 9.09% (5 students out of 55). All but one of these students were members of the first cohort. The attrition data include 3 disqualifications (asked to leave the Program) and 2 withdrawals. In reviewing each case of attrition, the Program faculty have determined the majority of the attrition to be the result of incomplete admissions selection criteria during the application process for the inaugural cohort, which was evaluated and has been modified for subsequent admissions cycles. Additionally, Program faculty implemented a more proactive advising and mentoring plan, particularly during students' first year of the Program. These systemic efforts have been effective, as there has been only one additional withdrawal to date. Please see Table 12_Students_Present_Status in Appendix III.C.1.1.6. For a list of reasons for departure for each student, please see Appendix III.C.1.1.5.

Please note, we are applying for Accreditation, on contingency status and do not have any students matriculating beyond their seventh year (see Table 13 in Appendix III.C.1.2.1).

Standard III.C.2

Description

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.

Self Assessment

Focused Questions

Review: IR C-21 D: Diversity Recruitment and Retention

Each accredited program is responsible for making systematic, coherent, and long-term efforts to retain students from differing backgrounds. Describe how the program has met the following criteria:

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

Describe how the program examines the effectiveness of its efforts to retain students who are diverse; and document any steps needed to revise/enhance its strategies.

Narrative Response

Q1a) The PsyD Program not only prioritizes the recruitment of diverse students as central to its mission of working with underserved populations, but also prioritizes their retention in the Program and their eventual graduation. The program works to retain students through a multi-level, multi-year plan as outlined below:

Program Level Diversity Retention Strategies:

Cultural Accountability Framework

1. In developing the program, faculty have been intentional about creating and implementing a culturally-accountable framework of doctoral training, including the integration of cultural competencies and an emphasis on working with underserved populations across courses, in clinical training, and in research experiences. (Began in 2013)

2. Many core faculty members include written statements in their syllabi and/or participation rubrics that explicitly acknowledge cultural differences that may exist among students in their comfort, experience, and/or ability to participate orally, especially in groups. In addition, there is a conscious effort among faculty to be as inclusive as possible when rating students' engagement in class. (Began in 2014)

Faculty/Advising/Mentoring

1. The diversity of the Program's faculty promotes diverse student recruitment as well as retention of diverse students. Faculty diversity exposes students to a range of clinical and research interests, and expertise, as well exposure to mentors with diverse perspectives, and culturally-congruent advisors. (Began in 2014)

2. Faculty are thoughtful and intentional in pairing students with academic advisors. Program faculty match students from diverse backgrounds/circumstances with faculty

they believe will be best equipped to mentor them (often because they share similar experiences and/or backgrounds). Faculty advisors initiate contact in the summer prior to the start of fall semester, to foster relationship-building and to assist incoming students with questions. There is also a student-centered culture around choice of advisor, meaning that faculty members are flexible about and accepting of making changes when students request a new advisor. (Began in 2014)

3. Faculty supported peer mentoring program: this program, initiated by faculty and now led by students, was created for first and second year students to connect with advanced students who can provide experience, insights, and support throughout the program. (Began in 2016)

Distinguished Lecture in Clinical Psychology

Speakers recruited for the annual Distinguished Lecture in Clinical Psychology event have been deliberately chosen to showcase leaders in the field who come from diverse backgrounds, as well as to inspire all students in our program (see list in Appendix III.C.2.1.1). (Began in 2013)

Research Opportunities

1. Program faculty have successfully obtained use of school-wide Faculty Development Funds to hire PsyD students as Research Assistants (RAs), which the program uses as a retention tool. Nine RAs have been hired thus far. (Began in 2014)

2. Program faculty members participate with students as co-presenters at professional conferences (thus far 4 conferences with a total of 9 students) and as co-members of research teams (thus far 4 teams with a total of 13 students). (Began in 2015)

3. Program faculty notify students of relevant external research opportunities via Canvas. As a result of this, 11 students have been involved in external research projects. (Began in 2014)

Funding Opportunities

The program also utilizes a variety of funding efforts to aid in the retention of diverse students, such as providing:

1. Scholarships for current students to participate in conferences (e.g., APA, NLPA) with preference given to students who are first generation, and/or come from a typically underrepresented group in psychology (Began in 2014)

2. Funding for students to attend special workshops, trainings, conferences and leadership institutes (Began in 2014)

3. Admissions scholarships to incoming students with a preference given to students who demonstrate financial need, are first generation, and/or come from a typically underrepresented group in psychology (Began in 2014)

4. Encouragement for students of diverse backgrounds to apply for external grants and scholarships targeting minority students as well as comprehensive assistance for

students with the application processes (i.e., proofreading applications, writing letters of recommendation) (Began in 2014)

Leadership Development/ Networking Opportunities

1. The development of a student ambassador program that allows students to represent and identify with the program and facilitates a unique networking opportunity for the students. (Began in 2014)

2. Program faculty members enthusiastically support and collaborate with the Clinical Psychology Student Union (the program's graduate student group) in retention efforts such as the development of the colloquium series and peer-mentoring program, as well as a student-led group called the Students of Color Group, which provides support for those who identify as students of color. (Began in 2015)

3. Recruiting diverse students into leadership roles both within and external to the program (e.g., Cohort Representatives, Student Ambassador Program, APAGS). (Began in 2014)

Advocacy

1) Program faculty encourage all students, and especially students from diverse backgrounds, to use the student support services available at USF, including the Gender and Sexuality Center, Intercultural Center and the umbrella organization named the Culturally Focused Clubs. (see the Diversity Resource Manual in Appendix III.C.2.1.2 for more detailed information). (Began in 2013)

2) Program faculty advocate on behalf of students when they are dealing with larger issues endemic to the profession. One recent example of this is systematically addressing when students are overburdened or misled by their practicum sites, and asked to provide services to specific populations because of their bilingual/bicultural identities, despite not yet being qualified or being inadequately supervised to do so. Faculty strategize options for student advocacy, including making site visits. Additionally, the Director of Clinical Training has brought these interrelated issues to the leadership of the Bay Area Practicum Information Collaborative (BAPIC) practicum consortium, to advocate for systemic change. (Began in 2013)

3) Program faculty also advocate for students, and thereby enhance their retention, by staying abreast of emerging trends and specific opportunities in the healthcare field, and by proactively informing students of trends and opportunities to help them excel in the Program. (Began in 2013)

Fostering meaningful peer interaction, support, and socialization

1) The Program's emphasis on socialization among students in the same cohort facilitates student bonding, peer-support, and socialization, as students move through courses and other required components together throughout the four years of the program. (Began in 2013)

2) Program faculty model and train students to value teamwork, collaboration, and productive interactions through various assessment and evaluation tools, such as group projects and presentations. These aspects of students' academic coursework facilitate socialization and meaningful interactions. (Began in 2013)

3) During orientation, students are encouraged to make meaningful social connections with their peers. Orientation activities are designed to promote cohort cohesion and to allow new students to explore ways in which they may support one another during their time in the program, with time for non-structured interaction interwoven into the schedule. (Began in 2013)

University Level Diversity Retention Strategies:

1. The University has developed and encourages students to utilize its Bias Education Response Team (BERT) <https://myusf.usfca.edu/bias>. BERT is a University-wide team that works to gather information about bias incidents and to support those individuals who have witnessed, or themselves become a target of, an act of bias. Through the provision of institutional resources and support dedicated to the advocacy of diverse students and the ongoing improvement of campus climate, the university demonstrates its commitment to a diverse student body and enhances the retention of diverse students. (Began in 2016)

2. The University Council on Diversity & Inclusion (UCDI) is comprised of faculty, staff, students, and alumni across campus departments, schools, and colleges. The council works with the Vice Provost of Diversity Engagement & Community Outreach to provide advice, support, input, and recommendations on all aspects of diversity implementation at the University of San Francisco. This includes current efforts and emerging opportunities in diverse recruitment and retention, curricular and co-curricular initiatives, community outreach, campus climate, and diversity related professional development. For more information see the website at <https://myusf.usfca.edu/diversity-engagement/ucdi>. (Began in 2012)

3. USF President's Diversity Goals: List of action steps outlined by the President with the goal of moving toward a more inclusive USF Community. The action steps include the following: to increase student, staff, and faculty diversity; cultural competence training; student life and support services; marketing communications; and assessment and reporting. For more information see the website at <https://myusf.usfca.edu/president/diversity-goals>. (Began in 2016)

Q1b) The Program Evaluation Committee meets monthly and monitors attrition and retention issues, as well as ongoing feedback, particularly issues raised by diverse students. There are a number of steps the Program has taken to enhance its strategies. Please see above Question 1a for a description of enhancements to our retention strategies.

Q2) As stated previously in Question 1b, the Program Evaluation Committee meets monthly and monitors attrition and retention issues, as well as ongoing feedback, particularly issues raised by diverse students. There are a number of steps the Program has taken to enhance its strategies. Please see above Question 1a for a description of enhancements to our retention strategies.

Standard III.C.3

Description

Feedback and Remediation.

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. Such feedback should include:

- a. timely, written notification of any problems that have been noted and the opportunity to discuss them;
- b. guidance regarding steps to remediate any problems (if remediable);
- c. substantive, written feedback on the extent to which corrective actions have or have not been successful in addressing the issues of concern.

Self Assessment

Focused Questions

Discuss policies that address:

Timely, written notification of all problems that have been noted and the opportunity to discuss them;

Guidance regarding steps to remediate each problem (if remediable); and

Substantive, written feedback on the extent to which corrective actions are or are not successful in addressing the issues of concern.

Narrative Response

Q1) The PsyD Program has comprehensive due process procedures to ensure timely, written notification to students of all problems, as well as to provide students with the

opportunity to discuss and, when possible and appropriate, remediate the issues. For the complete description of the Program's Due Process Procedures, please see the Student Handbook in Appendix III.C.3.1.1, p. 20.

Q2) Depending on the situation, the Program faculty member, Director of Clinical Training, or Program Director will institute a remediation plan for identified deficiencies, including a timeframe for expected remediation and consequences of not rectifying the deficiencies. Remediation is considered a closely supervised period that is designed to be time-limited and return the graduate student to an appropriate level of functioning. It is utilized to provide the student with additional time to respond to personal reactions and/or relevant concerns. Courses of action may include reducing the student's workload, increasing the amount or modifying the focus of supervision or training, and/or recommending personal therapy or other forms of intervention. If at any time a student disagrees with the remediation plan, they can implement the Appeals Process. For detailed information about the remediation process, please see the Student Handbook, p. 20. For a copy of the remediation template, see the Student Handbook, p. 40.

Q3) When specific remediation does not rectify the problem behavior or concerns and the student seems unable or unwilling to alter the behavior, Program faculty will discuss the possibility of disqualification from the Program. Dismissal would be invoked in cases of severe violations of the APA Code of Ethics, or when imminent physical or psychological harm to a client, faculty or staff member, or other student is a major factor, or the graduate student is unable to complete the training program due to illness. Dismissal will also be invoked when the student receives three Unprofessional Behavior Advisory (UBAs) written notices during their graduate training. The dean or associate dean will make the final decision about dismissal or administrative leave. This process is outlined in the Student Handbook under the Due Process and Grievance Procedures, Recommended Dismissal section. If at any time a student disagrees with the aforementioned sanctions, they can implement the Appeals Process. (For full text of the Program's Due Process and Grievance Procedures, see the Student Handbook, Appendix III.C.1.1.1, p. 20).

Standard III.(A1)

Description

Additional information relevant to Section III.

Self Assessment

Focused Questions

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any **Section III** issues to specifically address "*in the next self-study*"? If so, provide your response here.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any other **Section III** issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the CoA and whether the CoA determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

Narrative Response

Not applicable. Program is not currently accredited.

Standard IV.A.1

Description

Leadership of the program is stable. There is a designated leader who is a doctoral-level psychologist and a member of the core faculty. 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.

Self Assessment

Focused Questions

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

Narrative Response

Michelle Montagno, PsyD is a licensed psychologist, **Director** of the PsyD program, and member of the Core Faculty. She holds a PsyD in Clinical Psychology from an APA-accredited institution and is a practicing licensed psychologist in the state of California. She is an Associate Professor and Chair of the Department of Integrated Healthcare in the School of Nursing and Health Professions. Additionally, she has a background as an administrator in the non-profit and government sectors. She has been part of the USF PsyD Program since its inception. Consistent with the mission and aims of the Program, Dr. Montagno has been committed to social justice advocacy and work with the underserved for over twenty years.

Dr. Page holds a PhD in Counseling Psychology from the University of North Dakota (APA-accredited) and completed her APA-accredited doctoral internship at the Center for Multicultural Training in Psychology at Boston University Medical School/Boston Medical Center. She is an Assistant Professor, **Director of Clinical Training**, and member of the Core Faculty for the PsyD Program. Dr. Page has a background in mental health organization and leadership. She is a former fellow of the Connecticut Health Foundation's Health Fellows Program and of the Supportive Housing and Public Sector Mental Health Administration Program in the department of psychiatry at Yale University School of Medicine. Dr. Page has a long-standing history serving in various governance roles within the American Psychological Association, with a focus on doctoral training and graduate students, including serving as a voting member on the Board of Directors of the APA, Council of Representatives, and as the Chair of the American Psychological Association of Graduate Students (APAGS). Within APA, she has served as a member of the Good Governance Project (APA presidential appointment, 3 year term) and as the liaison to various training groups affiliated with the organization, including the Association of State and Provincial Psychology Boards (ASPPB) and the Council of Chairs of Training Council (CCTC).

Standard IV.A.2

Description

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 arrangement of practicum experiences) and for its educational offerings (e.g., coursework, practicum experiences, and research training).

Self Assessment

Focused Questions

Describe how faculty members' theoretical perspectives and experiences are appropriate for the program's aim(s).

Describe how the competence and credentials of program faculty are aligned with the program's aim(s).

Narrative Response

Q1) The core faculty members are highly trained practitioner-scholars with active research programs and/or clinical practices as well as a commitment to teaching excellence. Core faculty have a mix of training backgrounds in clinical and counseling psychology and all have expertise in the theoretical perspectives anchoring the Program, including Cognitive Behavioral, Psychodynamic, Feminist Multicultural, and Psychotherapy Integration. In line with the mission and aims of the Program, Program faculty were recruited and hired for their expertise in working with diverse populations.

Please see the core faculty's abbreviated curriculum vitae (see Appendix IV.A.2.1.1) for more detailed information about the credentials and experience of each Core faculty member.

Q2) The core faculty have the knowledge, competence, and commitment to teaching, clinical training, and research needed for the Program to achieve its aims and competencies. With an eye on ongoing professional development, core faculty are actively involved in the activities of the University's Center for Teaching Excellence.

The core faculty members have also evidenced a strong commitment to scholarly research as evidenced by their successful publication record and professional presentation of papers, as well as their successful research and training grant funding record. The core faculty have authored or co-authored 30 refereed articles, books, or

book chapters and presented 93 professional papers at regional, national, or international conferences. These core faculty members have collectively been awarded over \$300,000 in research and training grants. Additionally, the professional service work of the core faculty has been extensive and has collectively included 40 editorial board memberships and numerous editorships, co-editorships, consulting editorships, or guest editorships for scholarly journals, including *American Psychological Association*, *Society of Behavioral Medicine*, and *American Academy of Child and Adolescent Psychiatry*. The core faculty members have each also served as ad hoc reviewers for a wide range of journals.

The core faculty's commitment to service is reflected in a wide range of contributions and recognitions at Program, Departmental, School, University, community, and national levels. A selected sample of these faculty accomplishments and contributions includes National Institutes of Health Loan Repayment Program; Excellence in Educational Research Award from Sigma Theta Tau International; Board of Directors, South Asian Public Health Association; Member, APA Policy and Planning Committee; Member, APA Presidential Task Force, Diversity Education.

Standard IV.B.1-2

Description

1. Core Faculty. The program has an identifiable core faculty responsible for the program's activities, educational offerings, and quality, who:

- a. function as an integral part of the academic unit of which the program is an element;
- b. are sufficient in number for their academic and professional responsibilities;
- c. have theoretical perspectives and academic and applied experiences appropriate to the program's aims;
- d. demonstrate substantial competence and have recognized credentials in those areas that are at the core of the program's aims;
- e. are available to function as appropriate role models for students in their learning and socialization into the discipline and profession.

2. Additional Core Faculty Professional Characteristics

- a. 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 substantive area in which the program seeks accreditation.

- b. Core faculty must be composed of individuals whose primary professional employment (50% or more) is at the institution in which the program is housed, and to whom the institution has demonstrated a multiyear commitment. At least 50% of core faculty professional time must be devoted to program-related activities.
- c. 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 himself or herself as core faculty, and is seen as core faculty by the students.
- d. Core faculty activities directly related to the doctoral program include program-related teaching, research, scholarship, and/or professional activities; supervising students' research, students' dissertations, and students' teaching activities; mentoring students' professional development; providing clinical supervision; monitoring student outcomes; teaching in a master's degree program that is an integral part of the doctoral program; and developing, evaluating, and maintaining the program.

Core faculty activities not directly related to the doctoral program and not seen as aspects of the core faculty role include undergraduate teaching in general and related activities; teaching and related activities in terminal master's or other graduate programs; and clinical work or independent practice not directly associated with training, such as at a counseling center.

Self Assessment

Focused Questions

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

Describe how core faculty members function as a unit to make decisions and provide oversight of the program.

Narrative Response

Q1) Core Faculty: Criteria for core faculty membership includes spending at least 50% of professional time associated with the Program, including teaching, service, and research/scholarship activities. Please see Table 14a_Core_Faculty in Appendix IV.B.1-2.1.1.

Associated Faculty: Criteria for Associated Faculty includes program contributors who make significant contributions to the Program, but do not meet criteria for core faculty (i.e., adjunct faculty who teach in the Program). Please see Table 14b_Associated_Faculty in Appendix IV.B.1-2.1.2.

Other Contributors: Other contributors provide peripheral, infrequent, or one-time contributions to the Program, including those who have provided infrequent supervision or assisted as raters for the Standardized Patient Evaluation Examination. Please see Table 14c_Other_Contributors in IV.B.1-2.1.3

Q2) The core faculty serve the Program in the following ways a) providing leadership, direction, and administration of the Program; b) instructing, supervising, mentoring, and advising students, chairing and serving as members of students' dissertation research committees; c) chairing or serving on program committees and participating in other relevant activities of the Program, the Department, the School of Nursing and Health Professions, or the University. The Program Director has primary responsibility for implementing and coordinating various administrative activities (e.g., course scheduling, communicating program policies to students and faculty) and the Director of Clinical Training has primary responsibility for the coordination and oversight of all aspects of practicum and internship training. Additionally, the bulk of several major administrative activities are distributed among committees, which are chaired by different core faculty members (e.g., Admissions Committee, Curriculum and Clinical Training Committee, Program Evaluation Committee). Discussion of program issues, goals, and changes occurs at monthly core faculty meetings and tasks are further broken down for work in committee meetings as necessary. Students are invited to attend and provide feedback about the Program at core faculty meetings.

Please find additional information about our faculty in the following appendices:

Table_15_Faculty_Demographics in Appendix IV.B.1-2.2.1

Table_16_Professional_Activities in Appendix IV.B.1-2.2.2

Core Faculty Abbreviated CVs in Appendix IV.B.1-2.3.1

Adjunct Faculty Abbreviated CVs in Appendix IV.B.1-2.3.2

Standard IV.B.3

Description

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.

Self Assessment

Focused Questions

Review: IR C-23 D: Faculty Qualifications

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

Narrative Response

Non-core faculty (either Associated Faculty or Other Contributors) hold the appointment of Affiliate Faculty to the PsyD Program. These affiliate faculty members contribute to the Program's education and training through teaching, providing practicum supervision, serving as raters for the Standardized Patient Evaluation Examination (SPEE), mentoring, and/or serving as chairs or members of students' research committees.

Affiliate faculty must meet the following criteria: a) hold a doctoral degree from an accredited university, b) have the expertise necessary to fulfill their responsibilities in the Program, c) value and respect science and practice as well as individual and cultural differences, d) use evidence-based clinical interventions, if they practice, and e) receive endorsement from the core faculty. To assure that affiliate faculty are executing their roles in ways that are consistent with the Program's aims and competencies, these affiliate faculty are reviewed by the PsyD Program Director.

Affiliate faculty who teach students are evaluated by students each semester and these evaluations are reviewed by the Program Evaluation Committee to ensure quality (See

Appendix IV.B.3.1.1 for the Course Evaluation). Additionally, students provide feedback on the quality of course instruction as well as practicum supervision on the Yearly Program Evaluation (Appendix IV.B.3.1.2). Throughout the year, feedback about students' experiences in the Program related to faculty, as well as other topics, can be anonymously communicated to core faculty via the comment box or through student representatives who present feedback at monthly Core Faculty meetings. This feedback is also communicated at Program Update Meetings, which occur, at minimum, twice yearly.

Standard IV.B.4

Description

Faculty Sufficiency

- a. 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' research and practice, conduct research and/or 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 practicum facilities, internship settings, and student progress.
- b. 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.
- c. 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.
- d. The program faculty must themselves be engaged in activities demonstrating the skills they are endeavoring to teach their students, such as delivering psychological services, conducting psychological research, publishing scholarly work, presenting professional work at conferences/meetings, teaching classes/workshops, and supervising the professional work of others.

Self Assessment

Focused Questions

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

Narrative Response

The PsyD Program has an identifiable core faculty of six individuals who work as a unit and hold primary responsibility for all aspects of the doctoral program. All core faculty are members the Department of Integrated Healthcare within the School of Nursing and Health Professions.

In addition to the core faculty, the Program has 15 affiliate faculty members, three who hold primary appointments in the Arts and Sciences Undergraduate Psychology Department, three who reside in different departments within the School of Nursing and Health Professions, and nine who are external to the university. These affiliate faculty members contribute to the Program through teaching, providing clinical and supervision, serving as raters for the Standardized Patient Evaluation Examination (SPEE), and serving as research supervisors or members of students' clinical dissertation committees.

The Program's original budget proposal included an incremental appointment for each of the first 4 years of the Program, representing a 1:8 ratio of core faculty to doctoral students. Four of these appointments are in tenure-track lines, demonstrating the University's commitment to a stable budgetary foundation for the Program. As enrollment grows (as we expect once we have successfully gained fully-accredited status), we will request additional core faculty lines, consistent with the aforementioned University Budget Planning Process. At capacity, the Program will admit a maximum of 18 students per year, which is an average new student-to-faculty ratio of three students per core faculty per year. Students in the Program are taught, supervised, mentored, and advised not only by the six core faculty, but the 15 affiliate faculty as well. An additional benefit of being housed in the School of Nursing and Health Professions is the opportunity for interprofessional education and training with students and faculty across different programs in the School (e.g., Family Nurse Practitioner (FNP), Psychiatric Mental Health Nurse Practitioner (PMHNP), Master of Public Health (MPH), Master of Science in Behavioral Health (MSBH), Master of Science in Health Informatics (MSHI). For instance, students are taught the PSYD 717 Clinical Neuropsychology and Neuropsychological Screening course by a neuroscientist and students are taught the NURS 760 Psychopharmacology course by a nurse practitioner. The six units of electives, which are a required part of the curriculum, can be taken at the graduate level across the university, which provides students exposure not only to

interprofessional training, but an array of diverse faculty as well. Regular feedback from students supports the conclusion that faculty are sufficient in number to meet the needs of the Program. The Program monitors faculty sufficiency through various methods including yearly feedback from students. On the 2015-2016 Yearly Program Evaluation (Appendix IV.B.4.1.1), students were asked to rate faculty on a scale of 1-5 (where 1 = very dissatisfied and 5 = very satisfied) on four items: openness, availability, guidance, and overall advising/mentoring. All of the responses to these four items had an average score greater than 3 and the overall advising/mentoring item had a mean of 3.74.

Standard IV.B.5.a

Description

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 a systematic, long-term plan to attract faculty from a range of diverse backgrounds and implemented it when possible (i.e., when there have been faculty openings). 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.

Self Assessment

Focused Questions

Review: IR C-21 D: Diversity Recruitment and Retention

Each accredited program is responsible for making systematic, coherent, and long-term efforts to attract (i.e., recruit) faculty from differing backgrounds. Describe how the program has met the following criteria:

- The program has developed a systematic, long-term plan to attract faculty from a range of diverse backgrounds and implemented it when possible (i.e., when there have been faculty openings). 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.

- The program 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.

Provide location for all documents on institutional, department, and program policies and procedures on non-discriminatory faculty recruitment policies.

Q1a) The PsyD Program prioritizes the recruitment of diverse faculty as central to the mission of educating our diverse student body. To build a high level of faculty diversity, the Program created a recruitment plan designed to attract a diverse applicant pool for faculty:

Program-level diverse faculty recruitment initiatives

1. The program targets a variety of diverse networks (e.g., LGBT in Higher Education, Asian American Psychological Association; National Latina/o Psychological Association; Association of Black Psychologists; Society of Indian Psychologists) for electronic job postings. (Began in 2013)
2. Faculty job postings include language about the program's mission, the institutional support for diverse faculty, the values of our university (including the university's commitment to social justice), and the desirability of candidates with clinical and research expertise with underserved populations. See Appendix IV.B.5.a.1.2 for a sample posting from our last search in 2012. (Began in 2012)
3. Potential faculty candidates--including potential candidates who represent diversity--are often not actively looking for a new position. In order to increase faculty diversity, current faculty network with faculty from other institutions as well as recent graduates at conferences and other events, which creates informal access to a diverse workforce who could become faculty applicants. Search committee members will be selected in part for how effectively and extensively they are networked professionally. Committee members will be charged, first and foremost, with aggressively recruiting top notch and diverse applicants, by using their professional networks. (Began in 2014)

School Level Recruitment Initiatives

1) The program was actively involved in working with the School of Nursing and Health Professions (SONHP) Faculty Association Chair to institute a standing committee on Diversity, Equity, and Inclusion, which is charged with the following: i) Recommend and implement best practices for recruitment and retention of diverse faculty, staff, and students. ii) Encourage communication and problem-solving among key stakeholders about issues influencing recruitment and retention, including admissions, advising, mentoring, and general support. iii) Serve as an advisory group to Deans, SONHP administrators, marketing, admissions, faculty, staff, departments, search committees, and others involved in recruitment, admissions, advising/mentoring, and retention. (Began in 2017)

University Level Diversity Recruitent Initiatives

1) The University Council on Diversity & Inclusion (UCDI) is comprised of faculty, staff, students, and alumni across campus departments, schools, and colleges. The council works with the Vice Provost of Diversity Engagement & Community Outreach to provide advice, support, input, and recommendations on all aspects of diversity implementation at the University of San Francisco. This includes current efforts or emerging opportunities in diverse recruitment and retention, curricular and co-curricular initiatives, community outreach, campus climate, and diversity related professional development. For more information see the website at <https://myusf.usfca.edu/diversity-engagement/ucdi>. (Began in 2012)

2) USF President's Diversity Goals: List of action steps outlined by the president with the goal of moving toward a more inclusive USF Community. The action steps include the following: to increase student, staff, and faculty diversity; cultural competence training; student life and support services; marketing communications; and assessment and reporting. For more information see the website at <https://myusf.usfca.edu/president/diversity-goals> (Began in 2016).

Q1b) According to the APA Commission on Accreditation (CoA; 2015), the nationwide averages of faculty demographics in APA-accredited PsyD programs are 56% female and 25% racial/ethnic minorities. In the USF PsyD Program, core faculty are 66% female and 66% racial/ethnic minorities, demonstrating effectiveness in attracting

diverse faculty. Additionally 50% of core faculty members identify as part of the Lesbian, Gay, Bisexual (LGB) community.

Q2) Please see Appendix IV.B.5.a.1.1 for the document on USF's equal employment opportunity and non-discriminatory recruitment policy, which can be found on the website at <https://www.usfca.edu/catalog/policies/equal-opportunity-and-non-discrimination-policy>.

Standard IV.(AI)

Description

Additional information relevant to Section IV.

Self Assessment

Focused Questions

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any **Section IV** issues to specifically address "*in the next self-study*"? If so, provide your response here.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the CoA note any other **Section IV** issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the CoA and whether the CoA determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

Not applicable. Program not currently accredited.

Standard V.A.1

Description

General Disclosures

- a. 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.
- b. 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.

Self Assessment

Focused Questions

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

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

Indicate where in the program's public documents information on education and training outcomes per IR C-20 can be found.

Ensure that the current accredited status of the program is accurately presented in all public materials, including program web pages. Please reference where (i.e., page number, visual location) in each applicable document the program's accreditation status and the CoA's contact information is so it can be verified by reviewers.

Narrative Response

Q1) Information about the PsyD Program is available to current students, prospective applicants, and interested publics through the USF PsyD website, the Prospective Student Brochure, the PsyD Student Handbook, and Clinical Training Manual. All of these documents are available on the PsyD program website (<https://www.usfca.edu/nursing/programs/doctoral/clinical-psychology>). The website is updated regularly to reflect the most current and accurate program information. The information on the website is complete, accurate, and allows applicants to make informed decisions about applying to the PsyD Program.

Applicants who request information about the Program are directed to the website. If they have limited access to a computer, hard copies can be provided upon request. New students are also provided with these documents at fall Orientation.

Q2) The education and training outcomes required in IR C-26 D can be found on the home page of our website at

https://dgmssnschws7.cloudfront.net/sites/default/files/nursing_and_health_professions/student_admissions_outcomes_and_otherdata.pdf

Q3) The Program's accreditation status is accurately presented in all public materials. Please see Appendix V.A.1.1.1 for a transcript from the website, describing our accreditation status, which can be found live at

<https://www.usfca.edu/nursing/programs/doctoral/clinical-psychology>. See also attached the program brochure (Appendix V.A.1.1.2), which contains information on our accreditation status on p. 1 of the attached PDF.

Standard V.A.2

Description

Communication With Prospective and Current Students

- a. All communications with potential students should be informative, accurate, and transparent.
- b. 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.
- c. Descriptions of the program should include information about its requirements for admission and graduation; tuition and other costs; curriculum; time to completion; faculty, students, facilities, and other resources, including distance learning technologies; administrative policies and procedures; the kinds of research, practicum, and internship experiences it provides; and its education and training outcomes.
 - i. If the program has criteria for selection that involve competence-based assessments (e.g., GRE subject tests), it must describe how those criteria are appropriate for the aims of the program, how the curriculum is structured in terms of students' initial assessed competency at entry to the program, and how the criteria maximize student success.
 - ii. If the program has broad entrance criteria (e.g., undergraduate or graduate GPA), it must address how students will be prepared for advanced education and training in psychology, how the curriculum is structured in accord with the goal of graduate-level competency, and how the criteria relative to the curriculum maximize student success.

- d. 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.

Self Assessment

Focused Questions

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

Narrative Response

Prospective students access the PsyD website for information about the Program and admissions process. The website serves as a comprehensive one-stop-shop for all the information that prospective students need to make informed decisions about all aspects of the program from admissions to financial aid to student housing. Information on the website is updated regularly to accurately reflect the current Program faculty and details about the Program.

Standard V.A.3

Description

Communication Between Doctoral and Doctoral Internship Programs

- a. Throughout the internship year, communication between the doctoral program and the internship should be maintained. This ongoing interaction can remain largely informal, depending on the needs of the program and the trainee. The doctoral program should initiate this contact at the start of the training year.
- b. Any formal, written internship evaluations must be retained in student files and used to evaluate the student competencies required for degree completion.

Self Assessment

Focused Questions

Describe the program's policy for communicating with internship programs that accept program students.

Describe the process for maintaining files of internship evaluations and have sample communications ready for site visitors to review.

Describe how internship evaluations are used to review and make program adjustments.

Narrative Response

Please note the program's 1st cohort of students will begin internship in the 2017-2018 academic year.

Q1) The Program's policy for communicating with internship programs that accept students includes an initial email confirmation from the PsyD Program DCT, including the PsyD Program DCT's contact information, background on the USF PsyD Program, and information about the University of San Francisco's Memorandum of Understanding (MOU) process. The PsyD Program DCT will encourage agency staff to contact her if any need arises. The Program will also follow-up with communication about the Program's expectations from the internship placement, which include:

For accredited internships (APA): Expectation that 1) the primary supervisor will complete the agency's intern evaluations at mid-year and end-of-year and submit to the USF PsyD Program DCT and 2) the student and primary supervisor will sign and submit the Time2Track hours log for the entire internship experience at the end of the internship year. See Appendix V.A.3.1.1 for a sample of a Time2Track Hours Log.

For non-accredited internships (APPIC-member and CAPIC-member): Expectation that 1) the student will complete and submit the Non-APA Accredited Internship Tracking Form (Appendix V.A.3.1.2), one month after the start of the internship; 2) the primary supervisor will complete and sign the agency's intern evaluations at mid-year and end-of-year and submit to the USF PsyD Program DCT; 3) the student will submit a Time2Track hour log summary for each month, submitted to the USF PsyD Program DCT; 4) the student and primary supervisor will sign and submit the Time2Track hours log for the entire internship experience at the end of the internship year. See Appendix V.A.3.1.1 for a sample of a Time2Track Hours Log.

Q2) Printed copies of internship evaluations will be maintained in students' paper files, which are kept in a locked file cabinet located in the faculty cubicle area. The Program Assistant keeps the only key in a locked desk drawer. Printed copies will also be scanned and stored in students' secure electronic files in the ProjectSONHP database.

Q3) Internship evaluations will become part of the overall PsyD Program evaluation process. Each evaluation will be reviewed by the Program Evaluation committee, which will determine necessary changes to be made to academic and clinical training components of the Program, as well as recommendations about future internship placements.

Standard V.B.1

Description

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.

- a. **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.
- b. **Nonstandard Reporting.** The program must submit timely responses to any additional information requests from the accrediting body.
- c. **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.

Standard V.B.2

Description

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.

Self Assessment

Focused Questions

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

Narrative Response

Neither the PsyD Program nor the University has any plans that would substantially change the nature, function, or mission of the Program in the foreseeable future.

