INTRODUCTION

BACKGROUND

Clinical psychology programmes were the first of the professional programmes to become accredited by the Canadian Psychological Association. Following the Second World War, Canadian universities began to provide formal training in clinical psychology. Twenty years later, such training continued to be offered by only a few universities. By the end of the 1960s, however, formal training programmes in clinical psychology had been developed in about 20 Canadian departments of psychology. The development of these programmes was made possible, at least in part, by staffing entitlements generated by burgeoning undergraduate psychology course enrolments. Although existing programmes have grown, and some new ones have been developed since, it was the 1960s, which saw the major growth of clinical psychology training in Canada.

A directive to set accreditation standards and procedures in Canada developed from the First Opinicon Conference (1960), the Couchiching Conference (1965), and the Second Opinicon Conference (1984) and led to the establishment of the Accreditation Panel of the Canadian Psychological Association in 1984. Recommendations following from this directive included that training should be at the doctoral level and should take place under the direction of university departments of psychology. Further, recommendations included that "The CPA should set up a board similar to the APA Education and Training Board to undertake accreditation of applied psychology programmes at the doctoral level" (Webster, 1967, p. 111).

Although the Canadian Psychological Association did not undertake its role in accreditation until some time after these 1967 recommendations were made, several Canadian programmes sought and obtained accreditation from the American Psychological Association and, in Ontario, training programmes sought and obtained accreditation from the Ontario Psychological Association.

At the 1980 Annual Meeting of the Canadian Psychological Association held that year in Calgary, the Canadian Council of Clinical Psychology Programme Directors (CCCPPD) established a working group to draft accreditation criteria to be undertaken by the Canadian Psychological Association. That accreditation initiative, and the efforts of the CCCPPD in drafting criteria, were supported by the Board of Directors of CPA via a subcommittee of the Standing Committee on Professional Affairs. Prior to the CPA Annual Convention in Toronto in 1981 and in Montreal in 1982, a first and second draft of accreditation criteria were prepared and presented to directors of clinical psychology training programmes and to other interested professional and academic psychologists. Amidst little negative response and some important and constructive critical comment, the membership of the CCCPPD offered widespread support for the emerging accreditation criteria.

FORMAL ADOPTION OF CRITERIA

The CPA Board of Directors approved the **Accreditation Criteria for Clinical Psychology Programmes and Internships** at its meeting of June 1983 and the first meeting of the interim Accreditation Panel was held in June 1984.

In January, 1988, a "Memorandum of Understanding" was signed between the Ontario Psychological Association's and the Canadian Psychological Association's bodies of accreditation to set out the conditions and procedures for concurrent site visits to university training programmes and internship settings accredited by both organizations. However, in 1990 the Accreditation Council of the Ontario Psychological Association decided to terminate its accreditation activities.

Another "Memorandum of Understanding" was signed in March 1989 among the chief executive officers of the American Psychological Association and the Canadian Psychological Association and the chairs of the APA Committee on Accreditation and CPA Accreditation Panel. This agreement allowed for a single and coordinated accreditation process and procedure for those programmes wanting accreditation from both the CPA and the APA. This coordinated process and procedure reduced the time, paperwork and expense demanded of programmes were they to seek accred-

itation from each association separately but allowed each accreditation body to render its own separate and independent accreditation decision (see Appendix A for APA/CPA "Memorandum of Understanding"). This memorandum was reviewed with minor revisions to accommodate the award of discordant terms in 2002. In 2007, following a review of their accreditation activities in Canada, the Committee on Accreditation of the APA decided to stop accrediting outside of the U.S. as of 2015. No new applications for accreditation would be accepted after 2008 and any currently accredited programmes could only be reaccredited up to 2015, at which point all terms of APA accreditation in Canada would expire.

The first mandated review of the CPA accreditation criteria took place in 1988-89. Revisions following from that review incorporated invited comments from training programmes and the membership at large. The revised criteria were approved by the CPA Board of Directors in February 1989 (1st revision).

In response to the concerns about professional training in psychology brought forward by various CPA Sections, the CPA Board of Directors approved, in principle, the expansion of the scope of accreditation with the proviso that plans for expansion be budget-neutral. A meeting of interested parties took place during the CPA annual convention in June 1989 during which the feasibility of using the present accreditation model to accredit training in other areas of professional psychology was explored. As a result of that meeting, the name of the Accreditation Panel for Doctoral Programmes and Internships in **Clinical** Psychology was changed to Accreditation Panel for Doctoral Programmes and Internships in **Professional** Psychology by the CPA Board of Directors in October 1989. Also in 1989, the Board considered and approved a request made by the Section on Counselling Psychology to be included in the accreditation process under the same criteria adopted for clinical psychology (2nd revision).

In August of 1990, Sections 1 and 23 submitted a proposal to the Board of Directors which had as its objective the accreditation of doctoral and internship programmes in clinical neuropsychology. At the Board's request, the Accreditation Panel reviewed this proposal at their March 1991 meeting. The Panel's review relied upon the recommendations made by those psychologists in the larger training community who had been asked to review the proposal. The Board in turn accepted the objective of the proposal in June 1991 and struck up a task force to work towards its implementation. This task force also met during the 1991 convention and was successful in refining the proposed criteria for accreditation in clinical neuropsychology (3rd revision).

In view of the Board's decision of October 1989, the criteria and procedures used to accredit Doctoral Programmes and Internships in clinical psychology and counselling psychology were the same. However, the criteria and procedures for accreditation of doctoral programmes and internships in clinical neuropsychology were not. For this reason, the standards and criteria for accreditation in clinical and counselling psychology are presented separately from the standards and criteria for accreditation in clinical neuropsychology in this Manual. It should be noted, however, that in accordance with direction received from the 1996-97 survey and consultations, standards for clinical neuropsychology internships now have, as a prerequisite, 600 hours of practicum preparation and require 1600 internship hours.

It is important to note as well that the "Memorandum of Understanding" between CPA and APA allowed for the concurrent accreditation of Doctoral Programmes and Internships in clinical and counselling psychology only. APA does not accredit programmes and internships in clinical neuropsychology and, therefore, it was not possible for such programmes and internships to seek concurrent CPA/APA accreditation.

In 1996-97, the Panel undertook its fourth review of the accreditation criteria (4th revision approved by the CPA Board of Directors in 2002). Chief among those issues surveyed that impacted most directly upon accreditation and its activities, and that was of significant concern to respondents, was the relationship on accreditation between the CPA and the APA. Respondents' concern about this issue followed APA's adoption of its "Guidelines and Principles for Accreditation of Programs in Professional Psychology" in 1996.

Prior to 1996, the CPA accreditation criteria were essentially identical to the APA criteria from which the CPA criteria were derived. Both were based upon a prescriptive model, which defined and set minimum criteria and prerequisites for all facets of faculty/staff, student/intern, and programme functioning of doctoral and internship programmes in professional psychology. APA's 1996 guidelines represented a shift from a prescriptive to an outcome-based model of accreditation. Instead of defining minimum criteria and prerequisites for programme operation, the outcome-based model directs programmes to develop and explicitly state their philosophies and principles of training, to demonstrate how they objectify their philosophies and principles, and to evaluate how well they attain their training objectives. The consequent divergence in the CPA and APA models of accreditation resulted in a more protracted self-study process

for programmes which, as evident in responses to our 1996-97 survey, the majority of programmes found burdensome. In addition, programmes were concerned that the now different criteria would lead to more divergence in the decisions and terms made by the two independent, decision-making, accreditation bodies.

When asked in our survey whether programmes favoured a prescriptive or outcome-based model, respondents were equally divided in their preferences. The advantages and disadvantages of each model were reviewed and discussed in Psynopsis (see "The Changing Face of Accreditation", p.16-17, fall 1997). Empowered by the community's equal support for both models and by the recognition of value in retaining a community standard (prescriptive model) while promoting programme's self-determination and accountability (outcome model), the Accreditation Panel undertook what became its 2002 revision of its criteria. The 2002 revision had as its most significant change the incorporation of a focus on programme development and outcomes.

With the 2002 revision the Accreditation Panel revised its policy on captive internships (affiliated internships), reviewed but maintained its stance on remuneration for interns, revised the categories of accreditation, and adopted a provision for inactive but accredited status.

Another important change in the evolution of accreditation in Canada was the CPA's, and the CPA Accreditation Panel's, acceptance of the CPA Psy.D. Task Force's 1998 recommendations. The Panel anticipated the application of the 2002 Standards to Psy.D. programmes as these programmes began to emerge in Canada and seek accreditation. Prior to the 2011 revision, two Psy.D. programmes in Quebec have been accredited and inquiries have been initiated by others. Finally, the 2002 revision included a change in nomenclature.

The overarching goal of the 2011 revision was to remove redundancies, improve clarity and respond to emerging issues in the practice of Professional Psychology in Canada. Although the Panel had been accrediting school psychology programmes since 2004, this expansion in scope was not included in the text of the 2002 Standards and Procedures. Similarly, topics such as distance learning, training in psychopharmacology, conditions and requirements of practicum training, supervisory hours and changes to privacy legislation have also been addressed by the 2011 revision. Finally, the Accreditation Panel thought it important to align the Accreditation Standards with the competencies against which regulatory bodies in Canada assess candidates for practice. Accordingly, the criteria of Standard II (Philosophy, Mission and Curriculum) have been mapped on to the competencies defined by the Mutual Recognition Agreement (MRA) of the Regulatory Bodies for Professional Psychology in Canada (2001, 2004).

BASIC ASSUMPTIONS UNDERLYING ACCREDITATION

Accreditation standards have their origins in several values and beliefs.

- The Canadian Psychological Association is a national association that includes and represents psychology researchers and practitioners across Canada. By virtue of this pan-Canadian mandate and membership, CPA has an important role in the development of the discipline, the profession and their scopes.
- CPA is committed to reflecting the cultural and geographical diversity of Canada as well as committed to the scientific application of psychological knowledge to human development and functioning - the latter commitment which can know no regional boundaries.
- CPA acknowledges the primary role of provincial and territorial regulatory bodies in ensuring professional accountability for the delivery of psychological services. CPA supports this role, however, by promoting a high, community standard of training for those practitioners who will present themselves to the provincial and territorial regulatory bodies for credentialing.

The Manual that follows reflects the realized belief that psychologists across Canada can reach consensus in identifying standards for the training of clinical psychologists, counselling psychologists, school psychologists and clinical neuropsychologists. It is the application of these identified standards from the initial self-study, the site visit, through to the accreditation decision, which assures that programmes have met these standards. The Standards reflect both the prescriptive and outcome elements deemed necessary by the Canadian psychological community for training in professional psychology and, ultimately, its competent practice.