STANDARDS FOR ACCREDITATION OF DOCTORAL PROGRAMMES IN CLINICAL NEUROPSYCHOLOGY

I. Eligibility

The CPA and its Accreditation Panel:

- concur with the findings of the Wellner Report (1978), which recognizes that the basic body of knowledge of psychology is the foundation of professional practice and, accordingly, its instruction should remain within departments of psychology,
- believe that university departments of psychology can best support professional programmes in maintaining the highest standards of scholarship and teaching,
- advocate for the doctorate as the national standard for education and training in clinical neuropsychology, and
- endorse both the scientist-practitioner (Ph.D., Ed.D) and the scholar-practitioner (Psy.D.) models of doctoral training in professional psychology (as these models are articulated in the CPA Psy.D. task force report, November 1998).

Although all programmes accredited by the CPA are typically accredited in a single professional area (i.e. clinical psychology or counselling psychology or school psychology or clinical neuropsychology), the Standards and Criteria governing the accreditation of clinical neuropsychology differ somewhat from those governing the accreditation of the other professional areas. As is explained in the introduction to this manual, the community standards that developed to govern the accreditation of clinical neuropsychology were initiated by the neuropsychology community to reflect the training in science and practice that is unique to the practice of clinical neuropsychology.

Despite the recommendations of the Wellner report, the Accreditation Panel acknowledges that there may be routes to obtaining training in clinical neuropsychology that do not necessarily occur within departments of psychology. These may include:

- a clinical neuropsychology programme that exists within another area of professional psychology (e.g., clinical psychology),
- a free-standing clinical neuropsychology programme in a department of psychology, and
- a clinical neuropsychology programme that exists within an interdisciplinary neuroscience training programme.

All programmes seeking accreditation in clinical neuropsychology must meet the following eligibility requirements:

A. Institution

1. The clinical neuropsychology programme is at the doctoral level and is offered in or through a provincially or territorially chartered Canadian university.
2. The university demonstrates its commitment to the programme by providing it with appropriate financial support.
3. The university's support for professional education and training is evident in the recognition, value, and rewards the university accords to its faculty for the knowledge, skill and commitment necessary to educate and train professionals.

B. Programme

1. The programme is a doctoral-level clinical neuropsychology programme typically within a department of psychology that assumes responsibility for it or within another interdisciplinary training programme as outlined above.

2. The programme has an identifiable body of students who are matriculated in the clinical neuropsychology programme for the doctoral degree.
3. Doctoral programmes typically accept students post-honours baccalaureate (or its equivalent) but may vary in the way in which they define and operationalize master's degree training and requirements en route to the doctoral degree. If a programme admits a student with advanced standing (i.e., a student who enters with a master's degree or a student who enters with a doctoral degree in a non-professional area of psychology), the programme must have mechanisms for assessing and assigning credit for previous graduate achievements. The programme ensures that all students fulfill all the programme's doctoral degree requirements.
4. The programme abides by the CPA policy, as defined in its Graduate Guide, allowing students until April 15th to accept an offer of programme admission and/or financial support.
5. The programme requires a minimum of three academic years of full-time, resident graduate study.

II. Philosophy, Mission and Curriculum

A programme's **mission represents** the total of its **values and principles**, and its **goals and objectives**. It is important that the programme's mission is consistent with the mission of its host institution. It is also important that the programme's mission respects the scientific basis of practice in clinical neuropsychology and explicitly recognizes how science both informs and is informed by practice.

It is CPA's position that there are criteria that are necessary to ensure sound training in professional psychology - these are largely the criteria related to curriculum and detailed here in Standard II. However, every programme has a philosophy of training that reflects its own values and principles about teaching and training in clinical neuropsychology. It is possible for a programme to meet the prescriptions of the Accreditation Standards and Criteria within the context of its unique philosophy of training.

It is the programme's responsibility in addressing Standard II to clearly and comprehensively convey its values and principles about teaching and training as well as demonstrate how it meets the prescriptions of the criteria of Standard II. Values and principles tell us such things as:

- why the programme exists,
- what skills, knowledge, and functions the programme holds essential to the teaching, training and practice of neuropsychology, and
- how the programme defines its roles and responsibilities to the various publics it serves (e.g., students, the academic and healthcare communities, its host institution, the profession of psychology).

Taken together, a programme's values and principles determine its goals and objectives – put another way, a programme's goals and objectives should operationalize the programme's values and principles. A programme may have many goals, each of which may have several constituent objectives[6].

The critical question that a programme asks of itself when addressing Standard II is:

What do we do (training model) and how do we do it
(how do we put our training model into practice)?

As models of training and accreditation shift to focus on outcomes, the qualifications identified for professional practice no longer centre only on degrees or types of programmes but also on the competencies expected at the completion of the degree or programme. It is the CPA's view that its prescriptive criteria, as defined in Standard II and elsewhere (e.g., the type and content of courses, the number of practicum hours), enable programmes and their graduates to readily demonstrate how they have trained to professional competencies as nationally defined by the profession in the Mutual Recognition Agreement (MRA).

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[6] If, for example, a programme's values and principles articulate the need for psychologists to meet and exceed provincial, territorial and national standards for ethical practice, then an appropriate goal for this principle would be that students should learn and apply all such standards. The objectives which constitute this goal reasonably might be that all students take a course in professional ethics offered by the programme and that all students review the programme's holdings on legislation and standards relevant to the practice of clinical neuro psychology. An illustration of an appropriate outcome for this goal is footnoted under Standard IX.

CPA's accreditation standards for training in professional psychology include degree requirements, prescriptive criteria, and outcome or competency accountabilities. The Competencies for the practice of psychology, as defined in the MRA by the regulatory bodies of psychology in Canada, are subsumed in Standard II. Each Competency is listed below, along with the Standard II Criterion to which it corresponds. In some instances, a Competency is reflected in more than one Criterion. At the student level, it is Standard II.E which articulates the need for programmes to develop means and mechanisms for evaluating the competencies to which students are trained in Standard II. At the programme level, it is Standard IX through which programmes demonstrate how they have met the accountabilities, or trained to the professional competencies, they report in Standard II.

1. Interpersonal Relationships. MRA Competency on Interpersonal Relationships corresponds to Standard II.F.3.v. The programme may develop courses or seminars that explicitly focus on interpersonal relationships as defined in Standard II.F.3.v or may teach to this competency in other didactic offerings (e.g., an introductory course in psychotherapy or ethics). Standard III.B in its attention to training students to work with diverse client groups and characteristics also speaks to the interpersonal relationships competency.
2. Assessment and Evaluation. MRA Competency on Assessment and Evaluation corresponds to Standard II.E.4 which requires core coverage of individual differences to include human development, II.F.2 which details coverage of research design and test construction, and II.F.3.i which details coverage of psychological assessment. Standard III speaks to the necessity of understanding how the diversity of human characteristics and conditions must be considered for any assessment or intervention.
3. Intervention and Consultation. MRA Competency on Intervention and Consultation corresponds to Standard II.F.3. Standard III speaks to the necessity of understanding how the diversity of human characteristics and conditions must be considered for any assessment or intervention.
4. Research. MRA Competency on Research corresponds to Standard II.B, C, and D, as well as II.F.2.
5. Ethics and Standards. MRA Competency on Ethics and Standards corresponds to Standard II.F.1.
6. Supervision. MRA Competency on Supervision corresponds to Standard II.F.3.vi.

The Accreditation Standards and Procedures are founded upon a belief that, in its substance, graduate education in professional psychology should be delivered through in-person, face-to-face instructional formats. However, the Accreditation Panel is aware of the emerging role of new technologies in education and training. While these technologies are rapidly evolving, very little empirical research has investigated their efficacy and outcomes.

The Accreditation Standards and Procedures continue to require that doctoral programmes maintain 3 years of full-time resident graduate study (Standard I.B.5). Programmes that incorporate distance education or electronically mediated formats into their programmes need to ensure that in so doing they continue to comply with this 3-year residency standard. Additionally, programmes that incorporate distance education or electronically mediated formats must do so in compliance with any emerging guidelines from relevant professional or regulatory bodies, including but not limited to CPA. These programmes must also evaluate the outcomes of these methods of education and training and provide this data to the Accreditation Panel. The CPA makes use of the definitions of distance and electronic education developed by the APA and as footnoted below[7].

Standard II criteria are:

A. Programmes develop and articulate their values, principles, goals, and objectives.

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[7] The American Psychological Association has adopted the following definitions for distance and electronically mediated education:

Distance education is defined as a formal educational process in which the majority of the instruction occurs when student and instructor are not in the same place. Instruction may be synchronous (students and instructors present at the same time) or asynchronous (students and instructors access materials on their own schedule). Distance education may employ correspondence study, or audio, video, or computer technologies.

Electronically mediated education covers a wide set of electronic applications and processes such as Web-based learning, computer-based learning, virtual classrooms, and digital collaboration. It includes the delivery of content via Internet, intranet/extranet (LAN/WAN), audio and videotape, satellite broadcast, interactive TV, and CD-ROM.

American Psychological Association, Principles of good practice in distance education and their application to professional education and training in psychology (2002). Report of the Task Force on Distance Education and Training in Professional Psychology. Retrieved from http://www.apa.org/ed/resources/finalreport.doc

B. Practice, theory and research are integrated early in the programme. Training in these areas proceeds in sequence and presents information, and exacts requirements, which are cumulative and increasingly complex over the course of the programme. In advancing these requirements, a programme ensures that it offers an integrated, organized plan of study and ensures a breadth of exposure to the field of psychology. Further, the programme helps to ensure that its students are sufficiently prepared for advanced professional training (e.g., predoctoral internships, postdoctoral fellowships) and postdoctoral employment.

C. The goal of all programmes in clinical neuropsychology is to train scientist-practitioners who graduate with a doctoral degree, and who have completed a doctoral dissertation. All training related to practice is completed within a faculty, school or department of psychology or supervised by a member of a psychology programme. Students' dissertations, however, may be supervised by any faculty member of the university that grants them their doctoral degree.

D. The programme is responsive to the needs of clinical neuropsychology graduates to achieve registration/licensure as psychologists in their jurisdiction of practice.

E. Training Curricula

Competent professional practice in clinical neuropsychology requires training in three basic areas:

- core knowledge in general psychology and the basic neurosciences,
- knowledge and skills in neuropsychological and psychological assessment and intervention, and
- research.

Clinical neuropsychology programmes may place different degrees of emphasis on these three areas (i.e. core knowledge in psychology and the neurosciences, neuropsychological assessment and intervention, research). However, the training focus of any accredited clinical neuropsychology programme is neuropsychological assessment and intervention.

1. Core knowledge required for practice in clinical neuropsychology is derived from general psychology as well as from the basic neurosciences (i.e., neuroanatomy, physiology, pharmacology), clinical neurology, and theoretical and experimental neuropsychology.

   Competence can be demonstrated by:

   - passing suitable evaluations in each of the nine core areas defined below,
   - successful completion of at least one half-year graduate course or undergraduate course work, and
   - other suitable means determined by the programme.

   The nine core areas are:

   i. General Psychology
      a) statistics and methodology,
      b) learning, cognition, and perception,
      c) life span development, and
      d) personality.

   ii. Neurosciences and Basic Human and Animal Neuropsychology
      a) basic neurosciences: full neuroanatomy course, preferably taught by anatomists with lab; clinical neuroanatomy,
      b) behavioural neurosciences: physiological psychology and pharmacology[8],
      c) basic human neuropsychology,

[8] The current standards provide for psychopharmacology as one of the ways in which students can demonstrate proficiency in the core content area of the biological basis of behaviour. However, as per the 2010 report of CPA's Task Force on Prescriptive Authority, the CPA believes that training in clinical psychopharmacology should form part of the core knowledge of every professional psychologist. Subsequent, and possibly interim, editions of the Accreditation Standards and Procedures will require specific examination or course training in this area. For its part, over the coming years, CPA will advance and promote pre and post graduate degree training options in clinical psychopharmacology for all professional psychologists.

d) principles of rehabilitation, and
e) research master's thesis or an equivalent written independent research project in neuropsychology.

2. Clinical Training in clinical neuropsychology includes the acquisition of knowledge and skill in assessment and intervention. Although there is some overlap in the assessment instruments used by clinical psychologists and clinical neuropsychologists (e.g., tests of personality and intellectual functioning), there are many specialized instruments that are specific to practice in clinical neuropsychology (e.g., tests that assess disorders in language, memory, and cognition). The proper use of these specialized instruments and testing techniques requires training and supervised experience in clinical neuropsychology.

   Intervention in clinical neuropsychology includes:
   i. the use of cognitive rehabilitation techniques devised for, and specific to, patients with neurological disorders,
   ii. education and counselling to patients and their families about the cognitive and psychological consequences of neurological disorders, and
   iii. consultation to the community and other institutions (e.g., schools, other health or residential care facilities) and inter-professional teams about the cognitive and psychological functioning and needs of patients with neurological disorders.

   Instruction in the following topics and skills of assessment and intervention are included in graduate-level instruction in every doctoral programme in clinical neuropsychology:
   iv. clinical neurology and neuropathology,
   v. principles of clinical neuropsychology,
   vi. psychometric theory and principles of test construction,
   vii. specialized neuropsychological tests and assessment techniques,
   viii. personality assessment,
   ix. history taking and interviewing techniques,
   x. evidence-based intervention and consultation techniques used by clinical neuropsychologists which include cognitive remediation of neurological disorders,
   xi. psychopathology,
   xii. basic instruction in the interventions of clinical, counselling, and school psychologists (e.g., counselling and psychotherapy, which include behavioral and cognitive-behavioral therapies),
   xiii. scientific and professional ethics and standards to include CPA's Canadian Code of Ethics for Psychologists and Practice Guidelines for Providers of Psychological Services as well as relevant provincial and territorial codes of ethics and professional standards,
   xiv. programme development and evaluation (e.g., methodology for total quality management, inter-disciplinary service development and evaluation),
   xv. interpersonal relationships (e.g., treatment relationships, therapeutic alliance and professional rapport, self knowledge and the impact of therapist characteristics on professional relationships, effective communication),
   xvi. supervision.

3. Research Training
   i. Research training enables students to formulate and solve problems, acquire new knowledge and evaluate practice. Accordingly, students are trained to employ the methodological paradigms appropriate to their research questions and the merits of their research are evaluated on the basis of the paradigm indicated and employed.
   ii. Research training includes the techniques and methods of inquiry appropriate to applied research questions making use of practice, natural and laboratory settings. Students are encouraged and supported in choosing research topics (thesis and otherwise) that enhance the field of neuropsychology.

iii. The dissertation meets the scientific standards of the university granting the doctoral degree, is an original contribution to knowledge in neuropsychology and meets the standards of neuropsychological research in Canada.

F. Based on students' needs and individual interests, the programme facilitates students' access to appropriate instruction in related fields in science and social science.

G. The specific competencies expected of graduates may vary with the goals of the programme. The competencies defined by the MRA (see Standard II, 1 through 6, above) can be useful to programmes in defining and operationalizing their programmatic competencies. Further, the goals and expectations of students are thoroughly developed and communicated. Students are also provided ongoing support and opportunity as they determine, plan and meet their own professional goals. The programme has developed policies and procedures for student evaluation, and students are made aware of how and when they will be evaluated. At minimum, students' performance and progress in the programme is evaluated on an annual basis. The evaluation of professional competence is the responsibility of the practitioners on the faculty and augmented, when appropriate, by practitioners from the community. Evaluation of professional competence encompasses those areas that are required by provincial and territorial licensure or registration requirements and/or other formal standards for psychological practice.

H. Students are given formal opportunity to provide feedback and evaluation of the doctoral programme and its faculty. The format and timing of students' evaluations of the programme and its faculty respects students' rights and the position of trust assumed by the programme and its faculty. Wherever possible, students are able to submit evaluations anonymously, and after they themselves have been evaluated and received their course grades.

I. The programme has developed policies and procedures for handling students' academic, practice and/or interpersonally related difficulties. These policies and procedures require mechanisms for developing, implementing and monitoring remediation plans. These policies and procedures are communicated, in writing, to each student at the start of his or her graduate training. In addition, these policies and procedures are reviewed verbally within orientation training provided to new students. When a student experiences academic, practice, and/or interpersonally-related difficulties, he or she is counselled early and offered a remediation plan. Students whose difficulties persist, despite counselling and remediation, are made aware of career alternatives and, if necessary, withdrawn from the programme.

J. The programme has developed policies and procedures for students to lodge a complaint, grieve an action, and appeal a decision or evaluation made by the programme. These policies and procedures are communicated, in writing, to each student at the start of his or her graduate training. In addition, these policies and prodedures are reviewed verbally within orientation training provided to new students.

K. In collecting and disseminating information about its operations, in particular as these concern information about its faculty and students, as well as any clients provided service under the auspices of the programme, the programme acts in accordance with relevant federal and provincial privacy legislation.

III. Diversity

The Canadian mosaic represents one of the world's most culturally diverse nations. The nature of Canada's diversity (e.g., types of linguistic, cultural, lifestyle and racial groups) is unique. It is based on First Nations heritage, two linguistic groups with roots in European culture (i.e., French and English), international immigration, and a commitment to multiculturalism recognized in provincial and territorial and federal statutes. The very nature of our academic and practical activity requires psychologists to address and attend to the complete range of human diversity.

It is our professional and social responsibility to understand and respect the range of human diversity, which includes, but is not limited to, variability in culture, religion, heritage, nationality, language, sexual orientation, physical and psychological characteristics, lifestyle, gender and socioeconomic status.

Programmes, and their host institutions that train psychologists, demonstrate their understanding and respect for human diversity and demonstrate a commitment to human dignity and civil rights in all aspects of their operations including, but not limited to, the treatment of clients, faculty and students.

A. The programme actively demonstrates its understanding and respect for the variability in human diversity as it recruits and promotes faculty, and as it recruits and evaluates students. In recruiting and promoting faculty and in recruiting and evaluating students, the programme avoids any actions on grounds that are irrelevant to success as a faculty member or as a graduate student. The programme has developed recruitment, promotion and evaluation policies and procedures that comprehensively and systematically detail and evidence its attention to and respect for diversity.

B. The programme comprehensively and systematically provides its students with didactic instruction and practical experience about the variability in human diversity as it affects and is affected by psychological phenomena and professional practice. The procedures that the programme employs to ensure such instruction and experience, the goals the programme sets relative to diversity instruction, and its success in meeting its goals are communicated via the programme's attention to Standards II, III and IX.

C. The programme makes reasonable accommodations for students and faculty with needs unique to their diverse status. When these accommodations require additional resources from the host organization (Standard I.A.2), they are given the same importance as any other facility or resource (Standard VI) needed by the programme to meet its goals. The Panel supports programmes in their efforts to make accommodations for people with disabilities or other unique needs.

IV. Faculty: Professional Supervisors and Instructors

Supervisors and instructors include faculty members of university departments that house clinical neuropsychology programmes as well as the professional and research staff appointed to hospitals, institutes and clinics that are affiliated with the university in which the programme is housed.

Faculty, supervisors and instructors are essential to the development and maintenance of a programme. As a group, they are sufficiently skilled to provide instruction in the core areas of psychology and neuroscience, in assessment and intervention in clinical neuropsychology as well as research as detailed in Standard II.E. Further, faculty, supervisors and instructors are grounded in the knowledge and skills demanded by the diversity of settings in which clinical neuropsychologists are employed and in the knowledge and skills necessary to understand, assess and treat the problems clinical neuropsychologists face. Finally, at least some of the programme's faculty have the skills and experiences in practice that enable them to train students to work in applied settings and with specific problems and populations of clients.

It is important that faculty, supervisors and instructors who are clinical neuropsychologists help students identify with professional practice. Faculty, supervisors and instructors can do this by demonstrating their own commitment to professional practice via their research and teaching, as well as through practice activities. Other venues through which faculty, supervisors and instructors can exercise their practice commitment and expertise include supervising students' practice activities, participating in psychological associations and learned societies, obtaining licensure, and participating in practice-related continuing education.

The university and department that house the clinical neuropsychology programme are responsible for assuring that the programme faculty, supervisors and instructors have, in the aggregate, the following qualities:

A. There is an identifiable, core group of psychologists attached to the programme that has authority and primary responsibility for the programme. This core faculty is responsible for the instruction and supervision of the programme's students and have active roles in the development and governance of the programme.

B. Core faculty members have completed their own doctoral degrees in clinical neuropsychology that met the standards in place at the time of their training - standards that ideally included completion of an internship. It is preferable that core faculty, especially those administratively responsible for the programme, have completed their doctoral and internship training at programmes accredited by the CPA (or its equivalent).

C. Core faculty, supervisors and instructors are comprised of experienced and productive members whose teaching, research and other professional activities (e.g., course loads, publications, professional participation and practice) demonstrate their commitments to the intellectual, scientific and applied enterprises of clinical neuropsychology. Through their involvement in these activities, faculty can provide effective leadership, role modeling, supervision, and instruction for students. At least one of the supervisors and instructors involved in the programme specializes in neuropsychological assessment.

D. Faculty uphold relevant national and provincial/territorial professional and ethical standards and guidelines of practice, teaching and research in psychology, which include but are not limited to, CPA's Canadian Code of Ethics for Psychologists and Practice Guidelines for Providers of Psychological Services.

E. The psychology faculty, and in particular the core faculty, is sufficiently large and available to advise and supervise students' research and practice activities as well as to attend to administrative duties, serve on university, department or programme committees, maintain appropriate class sizes, and provide a sufficient diversity of course offerings. At least one faculty member (who may or may not be the Director of Training) assumes primary responsibility for monitoring and evaluating practicum facilities and internship settings and for overseeing student progress within them.

F. Faculty encourage and actively support students in the timely completion of their programme consistent with national norms for completion of graduate training in professional psychology respectful of work-life balance. Monitoring and evaluating students' timely progress forms part of their annual performance reviews (Standard II.G).

G. Given the broad and interdisciplinary knowledge base required for training in clinical neuropsychology (e.g., electrophysiology, neuroscience, gerontology), the research, didactic and practical training offered by the programme may be augmented by the contributions of faculty members whose primary affiliations are within another area of psychology (e.g., clinical, counselling or school psychology), and/or by faculty who are affiliated with other health-related specialities (e.g., neurology). Faculty whose primary affiliations are within another area of psychology or within another health-related specialty are called complementary faculty, those who are affiliated with other (often practice-related) settings are called adjunct faculty.

H. Core, adjunct, or complementary faculty who supervise students in the provision of professional service are appropriately credentialed and registered in the jurisdiction in which the service is provided.

I. A number of the core faculty combine to form a Training Committee from among whom a Director of Training is appointed. The Director of Training demonstrates effective role modelling to faculty and students through active registration in the province in which the programme is located. The Training Committee hold tenured or tenure-track appointments at the institution in which the programme is housed. The Training Committee Director holds a tenured senior appointment at the institution in which the programme is housed.

J. The Panel strongly recommends that the faculty member who assumes directorship of the training programme not also hold a position as chair or head of the department of psychology. This recommendation is made for the following reasons:

- to ensure that the programme has sufficient staff and resources to meet its research and practice needs (Standard IV.E),

- the department chair or head serves as a further source of appeal or direction for the student, especially if a problem or conflict arises between the student and the Director of Training (Standard II.J), and
- the head/chair of the department is necessarily concerned about staffing and service issues for the department as a whole, which may put him/her in a conflict of interest in advocating for the specific needs of the training programme (Standard II).

V. Students

In addition to meeting entrance requirements as defined in Standard I.B.3, students admitted to the programme have demonstrated intellectual ability and interpersonal skills. In addition, students are committed to social justice and demonstrate respect for the diversity of individual differences. As required by Standards II and III, students are helped to further develop these abilities, skills and commitments.

A. The programme has an identifiable body of students who are matriculated in the clinical neuropsychology programme for the doctoral degree.

B. Students are treated with dignity and respect. The value accorded students' input and contributions is evident within the programme's operation. Students' contributions to research or other professional projects are credited appropriately (e.g., authorship of publications). Students have representation on the programme's committees and task forces that review and evaluate the curricula, develop policy and procedure, and conduct strategic planning.

C. Students evidence their commitments to the intellectual, scientific and applied enterprises of psychology via their participation in teaching, research, and other professional activities (e.g., teaching and research assistantships, publications, association membership, practical and applied training opportunities).

D. Students in clinical neuropsychology commit themselves to the standards of the professional and ethical practice of psychology as per the materials outlined in the training requirements of Standard II.E.2.xiii.

E. Students set reasonable expectations to progress through the programme in a timely fashion consistent with national norms for completion of graduate training in professional psychology while mindful of work-life balance. Though not an explicit requirement of this criterion, it is CPA's position that students in professional psychology should be able to complete a doctoral degree within 7 years post-baccalaureate.

F. Students do not work more than an average of 20 hours a week in employment outside of the programme. These hours do not include teaching and research assistantships.

VI. Facilities and Resources

In addition to skilled and dedicated faculty, and knowledgeable and promising students, a successful doctoral programme relies on the adequacy of its facilities and resources. The following facilities and resources adequately support programmes' goals:

A. teaching facilities, including classrooms, seminar rooms, observational facilities, and laboratory space for studies of individuals and small groups,
B. library facilities, including books, journals, reprints, microfilms and electronic access to same,
C. office space and adequate support personnel for faculty,
D. quiet and unobstructed work space, individual or shared, for students,
E. research space for faculty and students,
F. current and relevant assessment materials and supplies, facilities for group and individual tests; specimen sets of widely used tests, test manuals, rating forms, recording forms for behavioural observations, etc.,
G. computer facilities, including Internet access, which supports communication, research, and data analysis,
H. resources, including consultants, to support data analysis,

I. audio-video recording equipment, closed-circuit television,
J. facilities and technicians for building research equipment, and
K. facilities that enable students with disabilities to access all aspects of the programme's offerings and operations.

VII. Public Disclosure

In accordance with Standard II.K, the programme ensures that any information it collects and includes in its public materials conforms to federal and provincial legislation governing the protection and privacy of personal information.

A. The programme is clearly and publicly identified and described as a clinical neuropsychology programme. Its brochure, website, and descriptive materials communicated to all applicants, describe the:
   1. programme's philosophy and mission,
   2. theoretical orientations as well as professional and research interests of the programme's faculty,
   3. goals set and outcomes obtained by the programme, as reported to the CPA Accreditation Panel in the programme's self studies and annual reports,
   4. requirements and expectations of students, including, but not limited to, the completion of a CPA-accredited internship (or its equivalent),
   5. academic and practical functions for which the student will be prepared, and
   6. training resources at the programme's disposal.

   In addition, to help students make decisions about programmes, the brochure and website include the folowing descriptive statistics to illustrate the nature of the student cohort. These may include wherever possible and available:
   7. usual size of the applicant pool,
   8. acceptance and attrition rates,
   9. percentage of male/female students who self-identify as other gendered, disabled, and/or originating from a minority/diverse background,
   10. age distribution of students,
   11. availability and nature of financial, academic, counselling and other support systems, and
   12. percentage of graduates that successfully become registered/licensed psychologists.

B. Evidence of accreditation status and term of accreditation is made available to applicants through the programme's brochure, website, and other communications. It is important when giving evidence of its accreditation status that the programme clearly indicate the name of the programme for which accreditation has been accorded. It is the programme which is accredited, not its department or host institution. In the event that there are several programmes within the host department, statements must be clear when indicating which programme(s) is accredited.

C. Include the name and address of the CPA Accreditation Office in the programme's brochure and website.

VIII. Practicum and Internship Training

Doctoral programmes in clinical neuropsychology include systematic and intensive training in the application of psychological principles and skills to human problems. This training, applied in the field, is offered sequentially as practicum and internship experience. As students proceed through their applied training, they are usually afforded experiences of increasing complexity that allow them to assume greater levels of responsibility and autonomy for their work.

A doctoral programme will actively direct its students toward field experiences (both practicum and internship) that demand the kinds of knowledge and skills students have acquired within the doctoral programme. Practicum experiences can occur within the doctoral programme's own university facilities under the supervision of its own faculty (e.g., a community health center) or in other appropriate but independent settings.

Practicum training is field experience, usually taken for academic credit, often on campus. The practicum helps students to acquire and apply psychological techniques and skills and provides exposure to client problems and populations. The practicum is intended to prepare the student for internship and is prerequisite to it.

Although some settings may train both practicum and internship students, an internship is a more advanced and intensive experience that allows students to refine the technical knowledge and skills they have already acquired in course work and practicum experiences. It is the depth and breadth of training that distinguishes the practicum from the internship experience. The internship, usually a year-long experience completed just prior to completion of the doctoral degree, provides students with the opportunity to function in the role of a professional psychologist under supervision appropriate to their level of knowledge and skill. Successful completion of the internship is a prerequisite to the award of the doctoral degree in clinical neuropsychology.

In order to best match students' interests and needs with the offerings of an internship programme, close working relationships among doctoral and internship programmes are encouraged. Evidence of the goodness of fit between a student's needs and interests and the offerings of an internship programme, as well as evidence of the student's readiness to begin internship training, are offered to the internship programme, in writing, by officials of the student's doctoral programme. The written approval assumes the doctoral programme's familiarity with the internship programme and assumes that the student and university training director have discussed the application decision.

Doctoral programmes maintain a close liaison with settings that host practicum or internship training (e.g., through conventions, conferences, membership in the Canadian Council of Professional Psychology Programmes). This liaison allows the doctoral programme to best prepare its students for internship, evaluate the nature of that preparation, monitor students' progress in the field, as well as track students' evaluations of the internship settings.

A. Practicum

Practicum training is integrated with didactic instruction via coursework and begins early in students' graduate training, typically at the master's level. Although a full-time, summer practicum is valuable in the concentration of experience it affords, part-time year-long practica allow students to get a longer-term view both of clients and their functioning and of a setting that provides psychological services. The doctoral programme helps students in locating and selecting practicum settings which offer practice experiences for which the student is prepared and that are compatible with the doctoral programme's training goals and objectives.

Practicum settings are service provision environments with training as one of their core roles. Psychological services in the practicum settings conform to all relevant CPA standards and guidelines. Each student's practicum experience is coordinated by a core faculty member or by an adjunct professor associated with the practicum setting. At this early stage of training, when students begin to identify with the profession and to acquire its necessary skills, they require ready and frequent access to professional psychologists and supervision. It is also especially important at this early stage of students' applied experience that the faculty of the doctoral programme and the psychologists at the practicum setting are in close and regular contact.

Practicum training incorporates and covers the following activities:

1. an understanding of, and a commitment to, professional and social responsibility as defined by the statutes of the ethical code of the profession (CPA's Canadian Code of Ethics),
2. the ability to conceptualise human problems,
3. awareness of, and sensitivity to, the full range of human diversity,
4. an understanding of one's own characteristics, strengths and biases and the impact these have upon professional functioning,
5. skill in psychological assessment, intervention, and consultation that includes more than one type of assessment (e.g., intelligence testing, behavioural assessment, personality testing, neuropsychological assessment) as well as more than one type (e.g., cognitive-behavioural, interpersonal) and mode (e.g., individual, group, family) of intervention,
6. skill in writing reports and progress/session notes, and

7. the use of research to inform practice and the ability to use practice experiences to inform and direct research.

The Accreditation Panel acknowledges that in the competitive marketplace, students may complete far more than the required number of practicum hours prior to applying for internship. However, the Panel strongly encourages students to focus on quality (e.g., variety of issues and populations) over quantity (e.g., amassing a large number of hours) when completing their practica. The Panel believes that the following practicum requirements could be achieved in as few as 600 and no more than 1000 hours of practicum training. The doctoral programme has full discretion over the designation of what qualifies or constitutes a practicum as long as the following requirements are met.

Over the course of practicum training prior to internship:

- At least 300 hours of supervised practicum training is devoted to direct, face-to-face patient/client contact defined as time students spend interviewing, assessing, or intervening with clients directly.
- Students should receive at least 150 hours of supervision.
- In addition to direct service and supervision, students participate in support activities during their practica. Support activities are defined as clinically relevant activities in support of the direct service, such as writing progress and process notes, report writing, case treatment planning, consultation, session review, case presentations, case-relevant literature reviews, rounds, case conferences, psychometric test scoring and interpretation, learning new psychological measures and/or interventions/treatments and professional development/continuing education that supports specific patient/client care.
- The balance between direct service, supervision and support hours required by the student will evolve with developing competence.

Seventy-five percent of the supervision provided will be **individual supervision** defined by the following criteria:

- The supervision is provided by the supervisor who is accountable for the psychological service the student delivers directly to patients/clients,
- Individual supervision consists of visual and/or verbal communication in person between a supervisor and supervisee in which:
  - the supervisor observes the supervisee deliver psychological service (i.e. either in the room with the supervisee and/or patient/client or with the use of one-way mirrors), or
  - the supervisor and supervise review audio or video tapes of the supervisee's delivery of psychological service, or
  - the supervisor and supervisee engage in case discussion (i.e., the supervisee provides an oral report of his or her delivery of psychological service to an identified patient/client).

Twenty-five percent of the supervision provided can be either individual or **group supervision** defined as activities or meetings in which:

- students participate in the supervision of psychological service received by another intern or trainee,
- some combination of interns and supervisors meet to review or discuss some method or technique of psychological service delivery, particular problems or disorders, or a professional or ethical issue affecting practice.

Individual supervision can occur between the supervisor and supervisee as the only participants or it can occur in a group format with other supervisors and supervisees present.

All practicum students are supervised by practitioners who are registered for independent psychological practice in the jurisdiction in which the services are provided. The Panel acknowledges and supports the internship programmes that allow their interns to gain supervisory experience by supervising practicum students. It is necessary, however, that the interns providing such supervision receive supervision from a doctoral level, registered psychologist specifically for this activity.

B. Internship[9]

1. A CPA-accredited internship (or its equivalent) is required for graduation with a doctoral degree in clinical neuropsychology. The programme is responsible for ensuring and evaluating a student's readiness to undertake an internship and for providing references for students in application for internship as required.
2. An essential component of readiness is the student's progress and status in the doctoral programme prior to the internship year. Eligibility for internship requires that students have completed the following prior to undertaking the internship year:
   i. all requisite coursework,
   ii. a minimum of 600 hours of practicum experience in assessment and intervention strategies comprised of at least 300 hours of direct client contact and 150 hours of supervision, and
   iii. completed and received approval for their doctoral thesis proposal prior to application for internship. In addition, the Panel strongly recommends that students complete their data collection and analysis prior to beginning their internship year so that they can devote their full attention to their professional training experience. Ideally, students will also have completed a draft of their doctoral thesis or have successfully defended their doctoral thesis prior to beginning the internship year. Readiness to undertake an internship is defined under the Standards for internship programmes in I.B.2.
3. Evidence of the goodness of fit between a student's training needs and interests and the offerings of an internship programme, as well as evidence of the student's readiness to begin internship training, are offered to the internship programme, in writing, by officials of the student's doctoral programme. The written approval assumes the doctoral programme's familiarity with the internship programme and assumes that the student and university training director have discussed the application decision.
4. When a programme permits a student to complete an internship that is not CPA-accredited, the means through which the programme established that the internship is equivalent to a CPA-accredited internship must be articulated and publicly disclosed. The standards and criteria for CPA accreditation of internship programmes are detailed later in this manual.
5. Regardless of the student's doctoral thesis status, the internship is a prerequisite to the award of the doctoral degree and must be completed before the doctoral degree is conferred.

IX. Programme Evaluation and Quality Improvement

When addressing Standard IX, the critical questions a programme asks and answers are:

- **How do we know whether we are meeting our goals and objectives?**
- **What do we do with the information gained from examining our success in meeting our goals and objectives?**
- **How does the information gained from self-assessment influence the continuous quality improvement of our training model and its goals and objectives?**

A. Following the identification, articulation, and implementation of a training model, the programme has put mechanisms in place through which the programme regularly and reliably examines its success in meeting its model's goals and objectives[10]. A programme's outcomes reveal how well the programme has met its goals and objectives. It is important, therefore, that the tools used to measure outcomes are valid measures of the programme's goals and objectives. Further, the programme's mechanisms of self-assessment (i.e., the

[9] The Accreditation Panel considers the terms "internship" and "residency" and "intern" and "resident" to be equivalent in status. It is at the programme's discretion which term to use in public disclosures, as long as one term is used consistently.

[10] Following from the illustration used for Standard II, reasonable outcome measures for the goals and objectives defined for standards of ethical practice might be that students receive a passing grade in a professional ethics course and/or that students are examined on their review of the library's holdings on legislation and standards relevant to the practice of clinical neuropsychology.

programme's evaluation and quality improvement initiatives) support and are supported by the self-assessment activities of the psychology discipline and of the university of which the department is part.

The information learned from self-assessment is used by the programme to review and revise its training model as well as its goals and objectives. Furthermore, the programme is committed to reviewing its training model, its goals and objectives, as well as its curriculum, in light of:

1. the evolving body of scientific knowledge in psychology as it applies to professional practice,
2. current professional and regulatory standards of best professional practice,
3. local, regional and national needs for psychological services, and
4. the jobs and career paths attained by the programme's graduates.

B. If part of the programme's education and training is delivered via emerging technologies (e.g., distance education, online learning), the methods employed to determine impact and efficacy of obtained outcomes must be outlined in your annual reports. Specify what and how much of your education and training is delivered via emerging technologies as well as outcomes assessed and obtained.

X. Relationship with the CPA Accreditation Panel

All programmes accredited by the CPA demonstrate their commitment to the accreditation process by undertaking the following responsibilities:

A. Comply with the Standards and abide by the policies and procedures as presented in the Accreditation Standards and Procedures, which include, but are not limited to, meeting deadlines prescribed by the Accreditation Panel for:
- the submission of self-studies in preparation for a site visit. The self-studies are prepared in accordance with the reporting prescriptions of the Panel,
- scheduling and preparing for a site visit,
- the timely submission of annual reports. Annual reports are prepared in accordance with the reporting prescriptions of the Panel,
- supplying the Accreditation Panel with any other information relevant to maintaining the programme's accreditation status, and
- the submission of all fees, according to the schedule prescribed by the Panel, which include, but are not limited to, the self-study application, the site visit, and annual fees.

B. Maintain written records of their compliance with the Standards (i.e., records of annual reports, self-studies, correspondence with the CPA Accreditation Panel), and any changes or innovations the programme has made to maintain or better meet the Standards.

C. Inform the CPA Accreditation Panel, in a timely manner, of any changes in the programme's nature, structure or function that could affect the quality of training provided.