

American Board of Clinical Health Psychology
Candidate Manual

American Board of Professional Psychology (ABPP)

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NOTE: For easy access to information about the Certification process, including key procedural steps, fees, registration, and application forms, go to www.abpp.org.

Introduction

The American Board of Clinical Health Psychology (ABCHP) is a member Specialty Board of the American Board of Professional Psychology (ABPP). The examination in Clinical Health Psychology, for Board Certification by ABCHP, is intended to certify that the successful candidate has completed the educational, training, and experience requirements of the specialty, including a performance examination designed to assess the competencies required to provide quality services in the specialty of Clinical Health Psychology. The primary objective of the ABCHP is to establish a Board Certification process that recognizes, certifies, and promotes specialty level standing in the field of Clinical Health Psychology. Specialty level standing is conceptualized as higher than the basic level of competence certified by jurisdictional licensure, but within the reach of most practitioners of professional psychology. The ABCHP expects that most clinical health psychologists should qualify for board certification.

Definition of the Specialty

Clinical Health Psychology is the specialty that applies scientific knowledge of the inter-relationships among behavioral, emotional, cognitive, social and biological components in health and disease to the promotion and maintenance of health; the prevention, treatment and rehabilitation of illness and disability; and the improvement of the health care system. It is dedicated to the development of knowledge regarding the interface between behavior and health, and to the delivery of high quality services based on that knowledge to individuals, families, and health care systems.

The specialty, as defined, serves as the basis for the examination, including the practice sample submission and review, and the oral examination. The specialty definition is further elaborated through the competencies characteristic of the specialty, and serve as the basis for the evaluation of the candidate's performance in the oral examination. The four core competency domains are assessment, intervention, consultation, and program development. The five cross-cutting competency domains are science base and application, interpersonal interactions, individual and cultural diversity, ethical and legal foundations, and professional identification.

Core Competency Domains

Assessment

A successful candidate conducts assessments that can range from the administration and interpretation of standardized tests to behavioral observations and clinical interviews. Assessment cases may come from any developmental level across the lifespan. In some forms of professional practice, assessment and intervention are integral parts of the same process. Examiners explore the candidate's level of sophistication in discussing choice of assessment methods or approaches to address diagnostic issues and/or case formulation consistent with whatever theoretical foundation and evidence base is proposed as guiding assessment work. Attention is paid to interpersonal interactions, individual and cultural diversity, ethical and legal foundations, and professional identification as related to assessment.

Intervention

A successful candidate performs interventions that may take the form of any modality of psychotherapy, health and behavior intervention or environmental modification. Intervention cases may come from any developmental level across the lifespan. In some forms of professional practice, assessment and intervention are integral parts of the same process. Examiners explore the candidate's level of sophistication in discussing choice of therapeutic or

environmental interventions to address therapeutic or systemic/organizational issues consistent with whatever theoretical foundation and evidence base is proposed as guiding intervention work. Attention is paid to interpersonal interactions, individual and cultural diversity, ethical and legal foundations, and professional identification as related to intervention.

Consultation

A successful candidate demonstrates the ability to serve as a consultant and communicate and apply his/her knowledge in consultation to others such as other persons who provide psychological services, health care professionals from other disciplines, social service agencies, nursing homes, rehabilitation centers, industry, legal systems, public policy makers, and individuals in other institutions and settings. Clinical health psychologists, additionally, serve as consultants regarding clinical research. Attention is paid to interpersonal interactions, individual and cultural diversity, ethical and legal foundations, and professional identification as related to consultation.

Program Development

This competency domain will be addressed for those candidates who submit practice samples that demonstrate the design and implementation of clinical health psychology programs within larger systems or communities. A successful candidate demonstrates the ability to conduct a needs assessment, and apply his/her knowledge in the design, evaluation, modification and improvement of programs, and to understand systems, organization structures and institutional cultures. A successful candidate demonstrates the ability to effectively carry out administrative activities and to meet the requirement for documenting program effectiveness and goal and legal attainment. Attention is paid to interpersonal interactions, individual and cultural diversity, ethical foundations, and professional identification as related to program development.

Cross-cutting Competency Domains

Science Base and Application

A successful candidate is aware of and conversant with scientific and scholarly developments in clinical health psychology and applies them in professional practice. Examiners explore the candidate's awareness of and ability to discuss critically the implications and applications of contemporary knowledge in the practice of clinical health psychology. This includes knowledge of the integration of theory, research, and practice concerning interpersonal interactions, issues of individual and cultural diversity (e.g., ethnicity, race, gender, age, sexual orientation, disability status, and special populations), ethical and legal foundations, and professional identification. Also necessary is familiarity with the fundamentals of physical illness and the professional techniques and systems providing treatment for them. If applicable, attention is paid to the candidate's own scholarly contributions as they inform the practice of clinical health psychology.

Interpersonal Interactions

A successful candidate demonstrates sensitivity to the welfare, rights, and dignity of others and an ability to relate to clients/patients and others in ways that enhance the effectiveness of services provided. Successful candidates must be aware of their own impact on others (i.e., patients, colleagues, families, health care teams) and how others impact them in their interpersonal interactions.

Individual and Cultural Diversity

Successful candidates demonstrate awareness of all aspects of individual and cultural diversity (e.g., ethnicity, race, gender, age, sexual orientation, disability status, and special populations)

as these influence their understanding of the science base and its application, assessment, intervention, consultation, supervision/teaching/management, and interpersonal interactions. A candidate conveys awareness of his/her own individual and cultural diversity characteristics as these influence functioning across competency domains and interpersonal interactions.

Ethical and Legal Foundations

A successful candidate is aware of: (1) current ethical principles and practice standards of the APA; (2) current statutory and regulatory provisions applicable to professional practice; and (3) implications of these principles to protect clients/patients, the profession, and society.

Professional Identification

A successful candidate identifies with the profession by appropriate memberships and involvement in international, national, state, and/or local professional organizations and by awareness of current issues facing the profession. The candidate pursues continuing professional education commensurate with licensure requirements and professional development in the specialty of Clinical Health Psychology. The candidate seeks consultation and supervision when necessary and engages in ongoing training and continuing professional education.

Certification Process Overview

The certification process consists of the following phases:

- I. Application to Establish Candidacy
- II. Practice Samples
- III. Oral Examination

The Board of Trustees of the ABPP sets and verifies minimum generic standards for candidacy. The Board of Directors of ABCHP sets and verifies minimum specialty standards for Clinical Health Psychology. The application phases include verification of both sets of standards. First, the application is reviewed by the ABPP Central Office to verify doctoral degree, licensure, and professional standing (absence of current disciplinary actions). Second, the application is forwarded to the ABCHP Credentials Reviewer for review by the specialty board.

Once an applicant's application has been approved (Phase I), he or she is considered a "candidate" for board certification and proceeds to the Practice Sample phase (Phase II) of the evaluation. During this phase, a professional statement and practice samples (or professional portfolio for Distinguished Senior Psychologist candidates; described below) are submitted. The Practice Sample Review Committee reviews practice samples for substantive adequacy to determine the candidate's eligibility to sit for the oral examination. The candidate's practice sample serves as a basis for demonstration of competencies in at least two of the following specialty specific domains: assessment, intervention, consultation and program development. The Practice Sample Review Committee also evaluates competencies in the following crosscutting domains: science base and application, interpersonal interactions, individual and cultural diversity, ethical and legal foundations, and professional identification.

Once the candidate passes the practice sample phase (Phase II), the Practice Sample Coordinator notifies ABPP Central Office and the candidate. The candidate then must send the oral examination fee to the ABPP Central Office before an oral examination date can be finalized. The oral examination portion (Phase III) is conducted by four members of an examination committee comprised of board certified clinical health psychologists. The ABCHP follows the Assessment Center Model for the oral examination: the candidate spends 45-50 minutes at each of four exam stations, each staffed by one examiner. (In some instances, an

examiner in training may be present as an observer or participant-observer, or may be conducting the examination under the observation of a senior examiner.) The four exam stations include practice sample, standardized clinical case assessment and integration, ethics, and professional issues.

Distinguished Senior Psychologist Option

Psychologists who meet the degree, internship and postdoctoral criteria described below, AND have 15 years or more of postdoctoral experience following licensure AND have made a significant contribution to the development of the field of Clinical Health Psychology or to clinical health psychology practice in their own communities are eligible for the Distinguished Senior Psychologist option. Additional information is included below regarding specific submission requirements for Distinguished Senior Candidates, namely the submission of a professional portfolio in lieu of practice samples.

Phase I: Application to Establish Candidacy

Submission of Application and Fees

The Application Form for Clinical Health Psychology is completed online through the ABPP Web site, www.abpp.org. Click on “Applicants” icon, then click on “Click Here for Online Application.” Please follow instructions for completing the online generic application and the specialty specific application for Clinical Health Psychology, including payment of the application fee (\$125) and uploading required supporting documents. The Clinical Health Psychology specific application form should be downloaded from the website, completed, and then uploaded to the website with supporting documentation as part of the application process. A copy of the applicant’s doctoral transcript should be arranged to be sent directly to the ABPP Central Office (CO). Two endorsement forms may be sent directly to the CO or may be uploaded as part of the application process (depending on preference of the endorser). The CO shall verify licensure and professional standing (disciplinary status).

The application provides the base of information by which candidacy for the examination is determined. The generic requirements are reviewed for compliance at the CO by the ABPP Executive Officer. Applicants meeting the generic requirements are then reviewed by the specialty board for compliance with the specialty’s specific doctoral level and post-doctoral education, training, and experience requirements. Applicants meeting the generic and specialty requirements become Candidates qualified to continue with the remaining phases of the examination process. Applicants are informed of the results of the eligibility review by the Executive Officer upon final recommendation of the Specialty Board.

Eligibility for Candidacy and Specialty Specific Requirements

Applicants submit the following education and training accomplishments to the ABPP Central Office in order to establish completion of the following professional accomplishments:

Generic Degree and Program Requirements

The degree and program requirements are met if:

- A doctoral degree from a program in professional psychology which at the time the degree was granted, was accredited by the APA or the Canadian Psychological Association (CPA), OR

- A doctoral degree, which at the time the degree was granted, was from a program listed in the publication Doctoral Psychology Programs Meeting Designated Criteria

Or the degree requirement can be met if:

- The applicant is credentialed as a health service provider in the current Directory of the National Register of Health Service Providers in Psychology (NRHSPP), or the current Canadian Register of Health Service Providers in Psychology (CRHSPP), OR
- The applicant holds a current Certificate of Professional Qualifications in Psychology (CPQ) from the Association of State and Provincial Psychology Boards (ASPPB), OR
- The applicant holds a doctoral degree in psychology and has subsequently been certified as completing the requirements of a formal, doctoral level, professional program that meets the APA accreditation requirements in clinical, counseling, or school psychology (re-education-often referred to as re-specialization), OR
- The applicant qualifies for an individualized exception review. Individualized exception reviews are available for degrees granted outside the U.S. or Canada, doctoral degrees granted prior to 1983, or for applicants claiming equivalent doctoral degree and program requirements. Such exceptions are coordinated through the ABPP Executive Office and the appropriate specialty board.

Specialty Specific Program Requirements

In addition to the generic foundation requirements delineated above, the Clinical Health Psychology specialty requires completion of an organized doctoral education and training program in Professional Psychology, which includes an internship. The specialty also requires postdoctoral supervised practice and experience in the specialty.

The specialty's specific program requirements are met if:

- The doctoral degree program was in Professional Psychology from a program accredited by the APA or CPA, OR
- The doctoral degree program qualifies as equivalent to an APA or CPA accredited program in Professional Psychology as determined by the ABCHP. This option is particularly applicable to degrees awarded outside the U.S. or in Canada.

Internship Requirements

A one-year full-time or two-year half-time internship program is required. The internship requirement is met if:

- Accredited by the APA or CPA, OR
- Listed in the Association of Psychology Postdoctoral and Internship Centers (APPIC) Directory for the year the internship was completed, OR
- The applicant is listed in the NRHSPP or CRHSPP Directory or holds the CPQ

Postdoctoral Practice Experience and Supervision Requirements

By its nature, the specialty of Clinical Health Psychology denotes a level of practice requiring preparation beyond doctoral requirements. An individual whose degree is from an APA or CPA accredited program in Professional Psychology must have completed one of the three following training experiences:

- The applicant can apply for certification after one postdoctoral year upon successful completion of at least one year of an APA/CPA accredited Clinical Health Psychology postdoctoral fellowship, OR

- The applicant can apply for certification after two postdoctoral years upon successful completion of either:
 - a. An APA/CPA accredited postdoctoral fellowship in an area other than clinical health psychology if at least 50% of the training was in clinical health psychology, and one additional postdoctoral year of clinical health psychology experience, OR
 - b. A non-accredited but APPIC listed clinical health psychology fellowship and one additional postdoctoral year of clinical health psychology experience, OR
- The applicant can apply for certification after three postdoctoral years including a one-year postdoctoral supervised experience in professional psychology, and two additional years of post-doctoral experience in clinical health psychology.

Licensure/Certification Requirements

The Applicant must be licensed or certified as a psychologist at the independent practice level by the State, Province, or Territory of the U.S. or Canada in which the psychologist practices. Exceptions for the above are recognized for active duty federal uniformed service psychologists and Veterans Administration psychologists when practicing in those roles. Such psychologists may be licensed in a State, Province or Territory other than the one in which the psychologist currently is practicing.

Phase II: Practice Samples

All candidates, whether they are applying through the Standard candidate option or through the Distinguished Senior candidate option, are required to submit a current curriculum vitae and a professional statement. Standard candidates are also required to submit practice samples, while Distinguished Senior candidates must submit a professional portfolio. The following sections describe each of these required materials.

1. Curriculum Vitae

All candidates must include a curriculum vitae (CV) that details the candidate's professional contributions. The CV must include educational and training background, professional roles and responsibilities, professional contributions (e.g., service activities, publications, presentations, grants, and memberships and involvement in professional organizations). The CV provides the candidate with the opportunity to communicate about him/herself as a clinical health psychologist, and serves as a basis for discussion in the oral examination.

2. Professional Statement

All candidates must submit the professional statement. The professional statement provides the candidate a further opportunity to describe his/her work and professional contributions as a clinical health psychologist and serves as a basis for discussion in the oral examination. The professional statement is typically at least 10 double-spaced pages, although there is no upper limit in length. It must address in separate sections each of the following items:

- A. Description of current professional work (employment and professional activities at the local, state, and national level), continuing professional education activities, long-term plans in psychology, and reasons for board certification
- B. Evidence of science base and application by addressing (a) discussion of evidence base that informs one's practice as a clinical health psychologist OR (b) description of one's own current clinical research activities
- C. Assessment, intervention, consultation, and program development activities, along with the theoretical and empirical basis for these activities

- D. Examples of handling of complex interpersonal interactions (i.e., conflicts or disagreements in work relationships, challenging relationship dilemmas with patients) in one or more of the domains of assessment, intervention, consultation, and/or program development
- E. Examples of awareness of individual and cultural diversity as pertinent to one's assessments, interventions, consultations, and/or program development
- F. Description of a meaningful and challenging ethical dilemma personally encountered, the aspects of the APA Ethical Principles of Psychologists and Code of Conduct pertinent to the dilemma, and how the dilemma was managed
- G. Verification that no ethical/legal action has been taken against the candidate since candidacy

3a. Practice Samples (Standard Candidates)

The practice samples demonstrate the candidate's practice at the specialty level and are reviewed by the Specialty Board to ensure that level is met and to serve as an important part of the oral examination. Practice samples are required of candidates who are applying through the Standard candidate option. Distinguished Senior candidates are not required to submit practice samples.

Quality of Practice Samples

The practice samples should reflect that the candidate is practicing clinical health psychology at the specialist level of competency. The specialty requires a biopsychosocial understanding of human behavior. Candidates are expected to be familiar with and comfortable in medical settings, skilled in a wide variety of diagnostic techniques, capable of providing treatment for a broad range of conditions, knowledgeable of and experienced in disease prevention/health promotion strategies, competent in consultation, and committed to interdisciplinary collaboration. It is expected that they will be aware of psychological presentations of organic disease, psychological conditions which may occur secondarily to organic diseases, somatic presentations of psychological dysfunction, and somatic complications of psychological dysfunction.

Candidate's practice samples should demonstrate the integrated application of the broad range of psychological and allied clinical and research literature and concepts required of the specialized practitioner in the field. If applicable, practice samples should demonstrate understanding of biological and social bases of behavior, individual differences, human anatomy and physiology, pathophysiology, psychological and neuropsychological assessment, applied pharmacology, social systems theory, human development, social and psychological bases of health and disease, psychopathology, intervention techniques (to include short-term psychotherapy, behavior therapy, family therapy, and specific interventions for specific problems), epidemiologic and prospective research, health assessment and intervention, health policy, health care organizations, and ethics and professional responsibility.

Specific Instructions for Practice Samples

Candidates should submit two practice samples. Practice samples should demonstrate competence in two of four different core areas, namely assessment, intervention, consultation, or program development. The candidate must choose two of these areas and apply them to two different client categories or problem areas. For example, one candidate may provide an individual psychological assessment of a diabetic patient, and a consultation with medical staff regarding pain management. Another might describe the development of an HIV prevention program for at risk youth, and an intervention with a patient with anxiety status post implantation of an automatic cardioverter defibrillator. The client may be an individual, a group, or an institution.

The heart of the practice sample is a document describing your work (assessment, intervention, consultation, or program development) with the client, the theoretical and empirical bases of your approach (citing literature where appropriate), the rationale for your actions, and awareness of relevant ethical issues. In this document, you should identify the relevant characteristics of the problem; background information provided by previous psychological, medical and other examiners; salient aspects of problem; and other relevant material obtained. You should describe the evaluative procedures and the intervention, consultation, or program development competencies used (if these are part of the practice sample), and the rationale for employing them. You should be explicit about any opinions, conclusions, or recommendations. Practice samples must be in compliance with APA ethical and professional standards, and demonstrate appreciation of and responsiveness to diversity issues relevant to the population served.

Practice samples should be developed from current (within the last two years) professional activities and should be prepared specifically for the purposes of your examination. In providing case materials it is important that you "sanitize" the text and supporting materials so that you have properly protected the identity of those involved.

Copies of original reports, case notes, referral notes, psychological test data, and other relevant material should be included as supplementary information (but not as a substitute for the description of your work outlined in the above paragraphs). Often these data will be most appropriately found in appendices to the practice sample. If psychological test reports are submitted, the raw data on which the reports are based should be submitted as an appendix. Including a Summary Data Sheet on which all relevant psychological test scores are reported in an organized, readily understandable format is also recommended. Please ensure you also include copies of your Informed Consent and Health Information Portability and Accountability Act (HIPAA) documents (with patient identifying information removed) in an appendix.

Audio or video recorded practice samples are not required for the clinical health psychology practice sample. If you nevertheless wish to submit an audio or video document as part of your practice sample, please discuss with the Practice Sample Coordinator the requirements for formatting and submitting that material. If any materials such as recorded samples are used which might lead to identification of the client, the candidate should obtain (and include in an appendix) the client's written informed consent for use of material in the examination process. This includes an explanation of the nature and purpose of the examination, and the fact that those involved in the examination process will review the practice sample.

While the length of each practice sample is left to the discretion of the candidate, it should be of sufficient length to satisfy the specific criteria listed in these guidelines. Each should be sufficiently comprehensive to demonstrate breadth of competency and should incorporate a question or set of questions appropriate for practice by a clinical health psychologist.

It is appropriate for candidates to review their practice samples with an ABPP Specialist prior to formal submission.

Submission of the Practice Samples

1. Send the Practice Sample Registration Form and fee to the ABPP Central Office.
2. Prepare the following written materials to be submitted electronically:
 - a. CV
 - b. Professional Statement
 - c. Practice Samples (standard candidates)

Please put your name, address, email and phone number on the materials you send. Electronic submissions are required, and should be appropriately encrypted if they

contain audio or video files that might lead to identification of a client or patient. Paper submissions are not acceptable.

3. Send electronic copies of all materials to the ABCHP Practice Sample Coordinator. The name and contact information (including email) of the Practice Sample Coordinator will be provided by the Central Office when you are notified of having successfully completed the application phase of the process.

Evaluation of the Practice Samples

The practice samples, CV, and professional statement will be reviewed by a minimum of two ABPP clinical health psychology specialists designated by the Board. Criteria used to judge the adequacy of practice samples are noted on the practice sample rating form (Appendix 1). Each sample will be rated as either “Pass – Proceed to Oral Examination”, “Fail – Revise and Resubmit Practice Sample,” or “Fail – New Practice Sample Required”. The following section describes the processes taken for each of these rating categories.

“Pass – Proceed to Oral Examination”

If both reviewers rate the submission as “Pass,” the candidate will pass the practice sample phase of the evaluation and proceed to the oral examination phase. He or she will be invited to sit for an upcoming oral examination, which typically is held two to three times per year. If a submission receives one “Pass” and one “Fail – Revise and Resubmit” or “Fail – New Practice Sample Required” rating, the practice sample will be submitted to a third independent reviewer for evaluation. Candidates whose submission is rated “Pass” by this third reviewer (i.e., “Pass” rating by 2 of 3) will pass the practice sample phase of the evaluation and proceed to the oral examination phase. They will be invited to sit for an upcoming oral examination.

“Fail – Revise and Resubmit”

If a submission is rated by two reviewers as “Fail – Revise and Resubmit Practice Sample,” the candidate may revise and resubmit the current sample(s) for re-evaluation, based on specific feedback and suggestions provided by the reviewers. In some cases, a revised CV or professional statement may be required. Revised practice samples must be resubmitted within 6 months of notification. A new practice sample fee is not required. The resubmitted practice sample(s) will be reviewed by the same specialists who conducted the original review, whenever possible. The resubmitted practice sample(s) must receive a “Pass” rating from two reviewers for the candidate to proceed to the oral examination.

If a resubmitted practice sample does not receive a “Pass” rating from at least two reviewers, the candidate must develop a new, independent practice sample (one new sample required if one resubmitted sample did not receive a “Pass;” two new samples required if neither resubmission received a “Pass”). The new practice sample(s) must be submitted within 6 months of notification. A new practice sample fee will be required. The new sample(s) will be reviewed by different specialists without knowledge of the candidate’s prior practice sample failure.

“Fail – New Practice Sample Required”

If a submission is rated as “Fail – New Practice Sample Required,” the candidate must develop a new, independent practice sample for resubmission. One new practice sample is required if only one original sample received a “Fail” rating; two new practice samples are required if both original samples received a “Fail” rating. In some cases, a revised

CV or professional statement may be required. The new sample(s) must be submitted within 6 months of notification. A new practice sample fee will be required. The new sample(s) will be reviewed by different specialists without knowledge of the candidate's prior practice sample failure rating.

New practice samples must receive a rating of "Pass – Proceed to Oral Examination" upon first review by the new reviewers. If one or both new practice samples are rated as "Fail" (either category), the candidate reverts to applicant status. His/her application will be reviewed again by the Board at that time and he/she will be given specific instructions following that review. In cases of a second practice sample failure, the Board may require additional training and, following that training, reapplication for board certification candidacy. Recommended training may involve mentoring from an ABCHP Specialist.

3b. Practice Samples (Standard Candidates - Primary Care Focus)

Overview of Delivery Model in Primary Care Practice Samples:

Increasingly, clinical health psychologists are working in primary care settings. There are multiple models of how these psychologists may integrate into primary care settings. Some models of integration, such as the Primary Care Behavioral Health Model, require that psychologists serve as consultants and conform to the standards of care within the primary care environment. Patients are typically seen 1 to 4 times for brief 20-30 minute appointments. Furthermore, in this model the behavioral health provider, known as the behavioral health consultant, and primary care provider work together on a single treatment plan that targets any behavioral health issues that the primary care provider has identified as a concern and potentially impacting the patients' life. These behavioral health issues range from traditional mental health concerns such as depression and anxiety to more health related behavioral problems such as obesity and diabetes.

Working in a primary care setting does not necessarily define a psychologist as a clinical health psychologist. It is expected that a clinical health psychologist is practicing according to the definition presented at the beginning of this manual. However, clinical health psychologists working in primary care may not have sufficient opportunity to demonstrate their skills using the standard practice sample submission described above. Therefore, those clinical health psychologists working in primary care (i.e., consistent with the Primary Care Behavioral Health model or similar models) may use the following guidance to develop their work samples.

The following guidance is not appropriate for those applicants who have a specialty clinical health psychology service that may be "co-located" with a primary care clinic. A "co-located" service generally maintains similar standards as an outpatient mental health service (e.g., 50 minute appointments, separate patient records, comprehensive evaluations). Applicants may choose to submit a primary care focus sample and a non-primary care focus sample.

Introduction to Practice Samples:

These instructions provide the requirements for practice samples for those psychologists working in primary care. The quality of the practice samples are expected to meet the same standard as described in section 3a.

Specific Instructions for Practice Samples from Integrated Primary Care Settings:

As with all standard candidates for board certification, the candidate is required to submit practice samples. The candidate must choose **two** different core areas to demonstrate competency in and specifically includes: intervention, consultation, and/or program development. Given the brief nature of the consultative role, it is unlikely that clinical health psychologists in primary care settings could demonstrate work to meet the requirements for the assessment core area.

Intervention: If the candidate selects intervention for a practice sample the following is required: **five** cases, four of which must be a clinical health psychology presenting problem (e.g., chronic pain, diabetes) while one case may be traditional mental health (e.g., depression). Each of the clinical health presenting problems must be different. These four cases must have been seen for a minimum of three appointments and should include primary care appropriate assessment and outcome measures. It should be clear how the candidate promoted and monitored change.

Consultation: Consultation within the primary care behavioral health model typically occurs over one to two appointments. These are brief in nature and are referral focused. Consequently, if a candidate selects consultation for a practice sample the following is required: **ten** cases, **eight** of which must be a clinical health psychology presenting problem (e.g., chronic insomnia, chronic pain, diabetes) while two cases may be traditional mental health (e.g., depression). Further, only **two** of the clinical health presenting problems may similar presenting problems. The candidate must describe how the candidate consulted with/provided feedback to the health care team regarding the patient's presentation.

Program Development: Program development within primary care may involve many different efforts to target the health of particular populations. Specifically, the candidate may discuss any classes, clinical pathways, clinical practice guidelines, disease management strategies, or other programs that they personally developed.

Evaluation of the Practice Samples

The practice samples, CV, and professional statement will be reviewed by a minimum of two ABPP clinical health psychology specialists designated by the Board. Criteria used to judge the adequacy of practice samples are noted on the practice sample rating form (Appendix 1). Each sample will be rated as either "Pass – Proceed to Oral Examination", "Fail – Revise and Resubmit Practice Sample," or "Fail – New Practice Sample Required". The following section describes the processes taken for each of these rating categories.

"Pass – Proceed to Oral Examination"

If both reviewers rate all of the practice samples as "Pass," the candidate will pass the practice sample phase of the evaluation and proceed to the oral examination phase. He or she will be invited to sit for an upcoming oral examination, which typically is held two to three times per year. If a practice sample receives one "Fail – Revise and Resubmit" or "Fail – New Practice Sample Required" rating, the practice sample will be submitted to a third independent reviewer for evaluation. Candidates whose practice sample is rated "Pass" by this third reviewer (i.e., "Pass" rating by 2 of 3) will pass the practice sample phase of the evaluation and proceed to the oral examination phase. They will be invited to sit for an upcoming oral examination.

“Fail – Revise and Resubmit”

If a practice sample is rated by two reviewers as “Fail – Revise and Resubmit Practice Sample,” the candidate may revise and resubmit the current sample(s) for re-evaluation, based on specific feedback and suggestions provided by the reviewers. In some cases, a revised CV or professional statement may be required. Revised practice samples must be resubmitted within 6 months of notification. A new practice sample fee is not required. The resubmitted practice sample(s) will be reviewed by the same specialists who conducted the original review, whenever possible. The resubmitted practice sample(s) must receive a “Pass” rating from two reviewers for the candidate to proceed to the oral examination.

If a resubmitted practice sample does not receive a “Pass” rating from at least two reviewers, the candidate must develop a new, independent practice sample for each failed resubmitted sample (i.e. one new sample required if one resubmitted sample did not receive a “Pass;” two new samples required if neither resubmission received a “Pass”). The new practice sample(s) must be submitted within 6 months of notification. A new practice sample fee will be required. The new sample(s) will be reviewed by different specialists without knowledge of the candidate’s prior practice sample failure.

“Fail – New Practice Sample Required”

If a submission is rated as “Fail – New Practice Sample Required,” the candidate must develop a new, independent practice sample for resubmission. For each “Failed- New Practice Sample Required” practice sample, the candidate must submit a new practice sample. For example, if one practice sample is rated as “Fail- New Practice Sample Required,” one new practice sample is required if only one original sample received a “Fail- New Practice Sample Required” rating; two new practice samples are required if both original samples received a “Fail- New Practice Sample Required” rating. In some cases, a revised CV or professional statement may be required. The new sample(s) must be submitted within 6 months of notification. A new practice sample fee will be required. The new sample(s) will be reviewed by different specialists without knowledge of the candidate’s prior practice sample failure rating.

New practice samples must receive a rating of “Pass – Proceed to Oral Examination” upon first review by the new reviewers. If one or both new practice samples are rated as “Fail” (either category), the candidate reverts to applicant status. His/her application will be reviewed again by the Board at that time and he/she will be given specific instructions following that review. In cases of a second practice sample failure, the Board may require additional training and, following that training, reapplication for board certification candidacy. Recommended training may involve mentoring from an ABCHP Specialist.

3c. Professional Portfolio (Distinguished Senior Candidates)

Candidates for the Distinguished Senior candidate option must demonstrate that they have a mastery of the scientific and theoretical basis of clinical health psychology, as demonstrated by a significant contribution to the field of clinical health psychology or to the practitioner’s community. They must demonstrate awareness of ethical principles and issues related to diversity. Thus, achieving the benchmark of 15 years post-licensure does not by itself qualify one for the Distinguished Senior candidate option.

Distinguished Senior candidates must demonstrate advanced competence and significant contribution to the field through submission of their CV and professional statement (described above). The practice sample is not required of Distinguished Senior candidates. Instead, submission of a professional portfolio serves to replace this requirement. The portfolio must reflect a body of work that demonstrates advanced competence and significant contribution to

the field of clinical health psychology or the practitioner's community. It may include the following: professional publications, brochures, outlines, presentations, or portfolios regarding scholarship, assessments, interventions, consultations, or supervision/teaching/management activities related to the practice of clinical health psychology. Specifically, candidates qualifying through the Distinguished Senior candidate option may provide information reflecting more distinctive practice patterns resulting from extended professional experience, e.g., areas of consultation; contracted service responsibilities; special grants; program administration/supervision; graduate school, internship, or residency program contributions; clinical teaching and supervision; Continuing Professional Education program presentations; program evaluation or research; professional publications related to the practice of the specialty, or the organization and pattern of the candidate's current clinical practice.

The portfolio should contain sufficient materials and detail to document the candidate's significant contributions and allow the reviewers to make a reasoned and informed decision as to the candidate's competence in the specialty. A single published article or presentation without the context of a body of work in a given area is not likely to be sufficient. Many advanced practitioners with decades of experience might best demonstrate competence via the standard examination process with preparation of traditional practice samples.

Submission of the CV, professional statement, and portfolio provides the candidate with the opportunity to communicate with the committee about who she or he is as a clinical health psychologist, demonstrate advanced competency, outline significant contributions to the field of clinical health psychology, and serve as a basis for the discussion in the Practice Sample Module of the oral examination. The statement and portfolio should represent the typical professional functioning of the applicant, such that he or she can discuss it in depth with the examiner, rather than reflecting a unique experience that is less representative. The information given by the candidate regarding orientation and expertise should be congruent with the candidate's actions throughout the examination process.

It is appropriate for candidates to review their professional portfolio with an ABPP Specialist prior to formal submission.

Submission of the Professional Portfolio

1. Send the Practice Sample Registration Form and fee to the ABPP Central Office.
2. Prepare the following written materials to be submitted electronically:
 - a. CV
 - b. Professional Statement
 - c. Professional Portfolio (Distinguished Senior candidates only)

Please put your name, address, email and phone number on the materials you send. Electronic submissions are required, and should be appropriately encrypted if they contain audio or video files that might lead to identification of a client or patient. Paper submissions are not acceptable.

3. Send electronic copies of all materials to the ABCHP Practice Sample Coordinator. The name and contact information (including email) of the Practice Sample Coordinator will be provided by the Central Office when you are notified of having successfully completed the application phase of the process.

Evaluation of the Professional Portfolio

The CV, professional statement, and professional portfolio will be reviewed by ABPP clinical health psychology specialists designated by the Board. The Distinguished Senior Candidate Portfolio Evaluation Form (Appendix 2) is used to document evaluation of the Distinguished

Senior candidate portfolio. Two of three evaluators must rate the portfolio as meeting the criteria for the Distinguished Senior option for the candidate to proceed to the next phase, the oral examination. If the submitted materials do not demonstrate advanced competency and significant contribution to the field, the candidate will be provided specific feedback about ways it does not meet criteria. The candidate then has two options. First, the candidate may submit practice samples and proceed through the examination process as a Standard Candidate. Alternately, the candidate may opt to revise his or her Distinguished Senior candidate materials and may reapply for the Distinguished Senior exam. If the revised materials do not meet the criteria for the Distinguished Senior exam upon second submission, the candidate will be asked to submit a standard practice sample which is more likely to demonstrate the candidate's individual strengths as a clinical health psychologist.

Candidates should note that the standard examination and the distinguished senior examination are both competency-based examinations designed to enable the candidate to demonstrate specialty skills in clinical health psychology. Neither examination is considered superior to the other and candidates will find either examination challenging. Except for the Practice Sample/Professional Portfolio section of the exam, the exam is exactly the same for all candidates.

Phase III: Oral Examination

Assessment Center Model

To assure standardization of the examination process, the ABCHP uses the Assessment Center Model for the Oral Examination. The Oral Examination process is designed to be an approximately four-hour process. It is a competency-based examination and the Examination Committee is expected to explicitly address each competency domain with the candidate, although each examiner may evaluate only a limited number of competencies. Within each exam module, there is room for variation according to the judgment of the examiner, the materials supplied by the candidate, and the choices made by the candidate. Many topics will be interwoven throughout the examination, and flexibility should be allowed if relevant to the discussion. A topic may receive more cursory exploration in its scheduled time period if it has been sufficiently covered earlier. Hypothetical examples or situations may be used to ascertain if the individual meets the criterion for passing each competency domain.

The Oral Examination process is collegial in nature. The exam is not designed to be evasive or deceptive. It is straightforward and intended to represent an assessment of areas of clinical competence represented in the everyday practice of clinical health psychology.

The examination is divided into four components: Practice Sample, Standardized Clinical Case Assessment and Integration, Professional Issues and Identification, and Ethics. These four areas allow examiners to assess the core competencies (assessment, intervention, consultation, program development) and cross-cutting competencies (science base and application, interpersonal interactions, individual and cultural diversity, ethical and legal foundations, professional identification). Each examiner will assess these competencies, though they may not be evaluated in the same depth in each part of the examination.

The examiners will meet after all four components have been completed, discuss their assessment and render an overall decision as to pass or fail. The decision to pass must be unanimous (i.e., all four examiners must vote to pass a candidate in order for a candidate to pass).

Before beginning, candidates will be required to sign a statement of confidentiality (Appendix 3) that they will not discuss the examination or reveal its contents to others. The time allotted for each part of the oral examination is about 45 to 55 minutes. Candidates should ask questions if

they are unclear about any aspect of the examination. Candidates may bring pad and paper to any part of the examination to take notes and organize their thoughts, though any notes taken must be left in the examination room. For the Practice Sample component candidates may bring any relevant data to refresh their memory. Candidates may bring an interview outline to the Standardized Clinical Case Assessment and Integration component.

Oral Examination Modules

The four modules of the oral examination are described below, including the candidate instructions for each section of the exam.

1. Ethics Module

A file of prepared vignettes is maintained for standardization of the Ethics segment of the Oral Examination. One or two vignettes are selected by the Ethics examiner. The candidate has also submitted, in the Professional Statement, a non-identifying ethical quandary from his/her own professional experience. During the Ethics segment of the Oral Examination, the candidate will be given one or two standardized vignettes to discuss. The examiner does not necessarily expect a “right” answer, but anticipates that the candidate will present relevant options and demonstrate the ability to thoughtfully weigh them in the light of the APA ethical principles, professional practice standards, and relevant statutes. The candidate may discuss the specific challenges of his/her own practice in the same manner. No outside materials can be used to aid the candidate during this section of the Oral Examination. At the conclusion of the Oral Examination, all copies of the Ethics vignettes are collected by the ethics examiner and destroyed. The use of each vignette will be tracked so that in the case of a candidate’s failure, a new vignette will be used for re-examination. The APA Ethical Principles of Psychologists is required background for his portion of the examination.

Instructions to the Candidate

This part of the examination is conducted to examine your knowledge of and sensitivity to ethical issues. You may bring pad and paper but no other materials. First, you will be given a brief vignette. Read it carefully. You may take notes. Issues of professional practice, behavior, and ethics are embedded in the vignette. After reviewing the vignette, you will be asked to address those issues which present ethical or professional conflicts, what actions should be taken regarding them, and how you would improve on the situation or behave under similar circumstances. The APA Ethical Principles of Psychologists is required background for his portion of the examination. The examiner may also ask you about ethical issues that you may face in the usual course of your practice and how you think about and deal with these issues. Psychologists who are members of the armed services are also expected to respond to questions about the unique ethical issues faced by psychologists who serve in the military.

Examiners and candidates will treat the vignettes as confidential.

2. Professional Issues Module

The professional issues module provides an opportunity for the candidate to discuss his or her involvement in the profession, the workplace and the community. In addition, the candidate is expected to demonstrate familiarity with major issues of concern to the profession of psychology and to be able to speak about the reasons for controversy and the various viewpoints that have been expressed. Professional involvement is expected to be at a level developmentally appropriate. A more junior candidate may show sufficient involvement by having joined APA and relevant divisions, or state or regional organizations. A mid- to late-career candidate might be expected to have given back to the profession through service on committees and leadership roles. The appropriate level of involvement might also differ by work setting, with academics more likely to serve as journal reviewers or site visitors while those in independent practice may

be more likely to offer community education with voluntary health organizations. Candidates will not be passed or failed based on personal views. For example, whether or not a candidate favors prescription privileges for psychologists, all candidates should be able to articulate arguments on both sides of the issue and express some thoughts about the training that should be required for prescription privileges. Other topics that might be covered are likely to include current issues like changes in the ethics code, education and training issues, technology issues such as the electronic medical record, and the role of psychology under health care reform.

Instructions to the Candidate

The purpose of this component of the examination is to assess the nature of your everyday professional practice and commitment to the profession. The examiners will ask about your professional practice, professional involvement and research activities. You may be questioned on your views of important issues in psychology, your education and training background, your methods of practice and your professional and scientific involvement. In these regards, the examiners seek to understand how you function as a health psychologist on a day-to-day basis.

3. Practice Sample or Distinguished Senior Candidate Portfolio Module

The Practice Sample module allows the candidate an opportunity to discuss the practice sample in depth and to describe the context of the practice, the decisions the candidate has made in developing the practice, how the candidate collaborates with other professionals, and similar issues. The practice sample serves as the starting point for this discussion, but all issues related to clinical practice of health psychology might be addressed, sometimes as hypothetical situations.

For example, the candidate may be asked about the nature of the presenting problem, the presenting symptoms, illness or injury, the nature of and rationale for the procedures employed, justification for the conclusions reached, and rationale for the recommendations made. If one of the candidate's practice samples involves a consultation, the candidate can expect a parallel line of questioning that provides an appropriate opportunity to evaluate his or her professional knowledge and skills. The questions are designed to assess one's general knowledge of health psychology. It is imperative that the candidate have a thorough and complete knowledge of each practice sample. The candidate will be asked how the practice samples exemplify the candidate's professional functioning. As with other parts of the examination, the critical element is the candidate's ability to demonstrate a reasonable, rational, and defensible approach to the practice of clinical health psychology.

Instructions to the Candidate

You may bring your practice samples or portfolio with you to this part of the exam. The practice samples are used as a point of departure from which the examiners will quiz you. For example, you may be asked about the nature of the presenting problem, the presenting symptoms, illness or injury, the nature of and rationale for the procedures employed, justification for the conclusions reached, and rationale for the recommendations made. If one of your practice samples involves a consultation, you can expect a parallel line of questioning that provides an appropriate opportunity to evaluate your professional knowledge and skills. The questions are designed to assess your general knowledge of health psychology. It is imperative that you have a thorough and complete knowledge of each practice sample. You will be asked how your practice samples exemplify your professional functioning. As with other parts of the examination, the critical element is your ability to demonstrate a reasonable, rational, and defensible approach to your practice of clinical health psychology. Distinguished Senior candidates will be examined regarding the contents of their professional portfolios. The examination will be tailored to the contents of the portfolio submitted and will provide the candidate with the opportunity to describe his or her contributions to the science and practice of

clinical health psychology and to respond to challenging questions about controversies, problems, and gaps in our knowledge base.

4. Standardized Clinical Case Assessment and Integration Module

This exercise provides an opportunity for the candidate to display critical knowledge and skills important in the practice of clinical health psychology, particularly skills related to biopsychosocial assessment, case formulation, differential diagnosis, consultative recommendations, and treatment planning.

The candidate will be given two brief statements describing a clinical health psychology consultation request. First, the candidate chooses one of the consultations. The candidate should consider him or herself as performing an initial psychological consultation on the problem in question. The task is to obtain additional information by questioning the examiners so as to gain a full understanding of the problem, develop a case formulation, make a differential diagnosis, and make recommendations and a treatment plan.

This is not a role-playing or acting exercise (i.e., neither the candidate nor the examiner is acting a “role” of psychologist or patient). The examiner has a considerable amount of information, all of which is available to the candidate. The information the candidate can request includes anything which would be readily available in the daily practice of clinical health psychology and consists of relevant historical, demographic, and medical data. The information available may also include psychological test data. The candidate should request all relevant information by asking the examiner specific questions. If the candidate does not ask, the examiner won't provide the information. The examiner is not allowed to volunteer information. If the questions are too general, the candidate will be asked to make them more specific. If the examiner tells the candidate there is not information in an area inquired about, the candidate should trust the examiner and move on to a more productive line of questioning. Candidates may not ask for the examiner's opinions or conclusions. The candidate is permitted to bring pad and paper to take notes during this part of the examination. In addition, the candidate may bring a standard assessment outline.

Instructions to the Candidate

You are permitted to bring pad and paper to take notes during this part of the examination, as well as a general assessment outline. No other materials are permitted. This exercise is designed to provide an opportunity for you to display some of the knowledge and skills important in the practice of health psychology. You will be given two brief statements describing clinical health psychology problems. First, choose one of the problems. Consider yourself as performing an initial psychological consultation on the problem in question. Your task is to obtain additional information by questioning the examiner so that you can gain a full understanding of the problem, arrive at your own evaluation of the situation, and make recommendations.

The examiner has a considerable amount of information, all of which is available to you. The information you can request includes anything that would be readily available in the daily practice of health psychology and consists of relevant historical, demographic, and medical data. The information available may also include psychological test data. Request all relevant information by asking the examiners specific questions. If you don't ask, you won't get the information. The examiner is not allowed to volunteer information. If your questions are too general, you will be asked to make them more specific. You may question the examiner as extensively as you wish except you may not ask for the examiner's opinions or conclusions.

*Pay attention to time. The total time allotted is about **50 minutes**. It is your responsibility to manage this time. You may take 5-10 minutes to prepare your questions and you may take notes throughout the examination. You will then have about 20-25 minutes to ask whatever*

questions you wish. Then you will have about 10 minutes to present your conclusions to the examiner. Your conclusions should include your view of the nature and severity of the problem, your case formulation, differential diagnosis, recommendations, and initial treatment plan. You should explain your reasoning in presenting your conclusions. You can expect to be challenged regarding your conclusions and questioned about domains of knowledge related to the case.

<u>The following is a summary of the steps in this exercise:</u>	<u>Approximate Time</u>
<i>Prepare your questions</i>	5 – 10 minutes
<i>Question the examiner for information</i>	20 –25 minutes
<i>Present your conclusions</i>	10 minutes
<i>Be questioned on your conclusions</i>	10 minutes
TOTAL TIME	45 – 55 minutes

All materials used in this examination module are to be treated as confidential and should not be discussed with anyone outside of the examination.

Scheduling the Oral Examination

ABCHP typically holds oral examinations two to three times per year. Candidates who have passed the practice sample phase of the examination will be contacted by the oral examination coordinator with information about dates of upcoming oral examinations.

Composition of Oral Examination Team

The Examination Committee is a committee of four Board Certified examiners, one who serves as Chair. No committee member may have had any significant prior or current personal, professional, or administrative relationship with the candidate or the clients/patients in the practice samples. Therefore, the Oral Examination coordinator will disclose the names of all candidates to the examiners and the names of examiners to the candidates when the date of the examination is finalized so that all parties can take responsibility for avoiding a pairing involving a conflict of interest.

Occasionally the Examination Committee may include Examiners-in-Training who observe or assist in conducting examinations. Prior to the oral examination, Candidates are given the opportunity to permit or decline observation by Examiners-in-Training (Appendix 4). The decision to permit observation by Examiners-in-Training is voluntary and will not affect a candidate's ABCHP candidacy.

The ABCHP recognizes that specialists in clinical health psychology use a variety of approaches and techniques and have differing conceptual frames of reference. ABCHP also recognizes that the effectiveness of professional practice is a function of many factors, including personal factors, level of experience and theoretical understanding. It may not be feasible to match candidates and examiners on all dimensions of practices style, populations served, theoretical orientation and so on. What is important is that the candidate be prepared to explain the scientific and theoretical basis for the candidate's approach to practice.

Candidates who are members of the military should make their status known to the Board. In turn, the Board will follow ABPP guidelines, which state that whenever possible, someone familiar with the conditions under which military personnel practice should serve on the examination committee.

Evaluation of Competencies

To successfully pass the oral examination, candidates must demonstrate competency in all five cross-cutting competency domains. They must also demonstrate competency in two of the four core competency areas (aligning with the two areas selected for their practice sample submissions). For example, if a candidate submitted practice samples in the areas of assessment and consultation, these will be the two areas evaluated during the oral examination.

A candidate may have passed in a given competency domain during the practice sample phase of the evaluation (Phase II), but may fail for that same competency domain during the oral examination as a result of information derived during the oral examination process.

The decision to award a candidate board certification must be unanimous. All four examiners must rate the candidate as a “pass” in each of the required areas in order for the candidate to pass the oral examination and achieve board certification.

Notification of Results

The Chair of the Examination Committee sends results to the ABPP Central Office. Candidates will receive written notification of the results from ABPP Central Office and the ABCHP within one month of the oral examination. If they pass, they can immediately use the title of Board Certified Clinical Health Psychologist. They are encouraged to participate in activities associated with the ABCHP examination process and Academy of Clinical Health Psychology (ACHP) projects.

A result involving failure will include specific reasons for the failure, positive aspects of the oral examination, and information regarding contacting a mentor through the Academy of Clinical Health Psychology (ACHP).

Options After Failure of Oral Examination

If a candidate fails the oral examination (Phase III), the candidate may:

- (a) Apply to retake this part of the exam within one year without having to submit a new practice sample (Stage II). Only the oral examination fee is paid. The second oral examination would cover the same practice sample or professional portfolio as the first oral examination. OR
- (b) The candidate may also choose to submit a new practice sample and pay a new examination fee (for Stages II and III). In this case, the candidate must again pass the practice sample (or professional portfolio) before being admitted to a second oral examination. OR
- (c) If the candidate applies to retake the oral exam (Stage III) after one year of having failed the oral exam, the must submit a new practice sample (Stage II) and pay a new examination fee for both parts of the examination. Again, the candidate must again pass the practice sample (or professional portfolio) before being admitted to a second oral examination.
- (d) Appeal of failure of Oral Exam based upon violation of Clinical Health Psychology board procedures (See below regarding Appeals).

A new committee will be formed for any candidate who previously failed the oral examination and is taking it a second time to ensure that members of second committees are unbiased by participation in the earlier examination.

Timeline

Candidates have one year to submit satisfactory practice samples (for standard candidates) or professional portfolios (for distinguished senior candidates). This one-year period begins when the applicant has been accepted into candidacy (i.e., when notified that they have successfully completed the application phase). After one year, the application will be considered to have lapsed, and any further action will require a new set of application materials to be submitted, including all relevant fees in effect at that time.

Should a candidate encounter special difficulties in completing submission of the practice samples or portfolio within the time limit allowed, he or she may request an extension by communicating with the Board President in writing. The request should explain the circumstances upon which the request is based, and indicate the candidate's plans for completing the submission of the practice samples or portfolio. The Board President will determine whether an extension will be granted, and for what length of time.

Appeals Process

Appealable Decisions:

- Denial of meeting specialty specific qualifications (Candidacy Determination)
- Failure of Practice Sample (Examination: Practice Sample Component)
- Failure of Oral Examination (Examination: Oral Exam Component)

Filing an Appeal: The appellant may challenge an appealable decision within 30 days of the written notice of that decision. The appellant must specify the grounds on which the appeal is made. The alleged grounds must be numbered and must be a violation of the Clinical Health Psychology Board's *procedures*. The appeal should be addressed to the President of the American Board of Clinical Health Psychology who in turn shall refer it to the Appeals Committee. The Appeals Committee shall complete its review and decision addressing each issue(s) raised by the appellant within 60 days. The procedural issues addressed by the Appeal Committee shall be limited to those stated in the appeal request letter and which meet the requirement of an appealable procedural issue. Failure to complete the review in the 60 day period shall move the appeal to the Board of Trustees for resolution. (Note: An appealable decision shall not be final until the appeal process has been completed.)

If the Appellant demonstrates by clear and convincing evidence that there was a procedural error that harmed the Appellant in a material way, the Committee shall provide a remedy. The remedy of the ABCHP will depend on what is being appealed. For example, if an appeal is upheld regarding a Practice Sample or Oral Examination, the outcome will be voided and a new Practice Sample review or Oral Examination will be offered with no additional fee assessed to the Appellant.

In the case of a successful appeal of an Oral Examination failure, the candidate must re-take the oral examination at the time of the next regularly scheduled oral exam, or within one calendar year from the date of notification that the appeal was granted. A new committee will be formed for the second oral examination to ensure that members of the second committee are unbiased by participation in the earlier examination. Second oral examinations cover the same

practice samples or professional portfolio as the first oral examination. However, a candidate who did not pass the oral examination may petition for permission to submit a new or enhanced practice sample or professional portfolio. If permitted, the candidate must pay the fee for evaluation of the new practice sample or portfolio and must again pass the practice sample phase before being admitted to the oral examination, which may then cover the new or enhanced practice sample or portfolio.

Disability Accommodations

The Board encourages qualified individuals with disabilities to apply for Specialty Board status. The board recognizes that these individuals may encounter unusual difficulties and will make efforts to provide reasonable accommodations for these applicants. The board will consider individual requests for accommodations by qualified applicants with disabilities. A qualified individual with disabilities can request reasonable accommodation, must formalize the request with the Board, and support the request with documentation confirming a need for reasonable accommodation and the basis of the need. At the request of the Board, applicants with special needs should be ready to document the need consistent with the applicable guidelines, and assist the Board in developing reasonable accommodations, as necessary. In its sole discretion, the Board will either grant or deny the request based on applicable guidelines. General procedures and individual case-by-case guidelines will also be developed.

Continuing Education Credit

Candidates who obtain board certification will receive 10 continuing education credits. The ABPP is approved by the American Psychological Association to sponsor continuing education for psychologists. The ABPP maintains responsibility for this program and its content.

Annual Renewal Requirement

Board certification through ABPP is an active credential. Maintaining board certification requires an annual attestation statement, renewal, and associated fee, and periodic maintenance of credential (MOC) review.

Appendix 1
Practice Sample Rating Form

Practice Sample Rating Form

American Board of Clinical Health Psychology

Candidate: _____ Reviewer: _____

Date: _____

Instructions for Reviewers: Please use this rating form to document whether the materials submitted by the candidate (two practice samples, CV, and professional statement) demonstrate competency in two of the four different core areas (assessment, intervention, consultation, and/or program development), as well as competency in all five of the required cross-cutting competencies (Science Base and Application, Interpersonal Interactions, Individual and Cultural Diversity, Ethical and Legal Foundations, and Professional Identification).

NOTE: If a candidate does not *clearly* demonstrate competency in a core area or cross-cutting domain (i.e., evidence of competency is marginal), you should rate that area “No.” Although this will result in a “Fail” decision for the candidate, it will allow the candidate to improve his or her submission prior to sitting to the oral examination, thereby increasing the likelihood of ultimate successful completion of the examination process.

Please complete ratings for the two core areas reflected by the candidate’s practice samples (i.e., a minimum of two of the four “Core Area” tables below should be completed. If you are able to make a judgment about components in other core areas based on submitted materials, please feel free to rate those areas as well). **You must also complete ratings for all five of the required cross-cutting domains.**

Core Area: Assessment

Components	Yes	No
1. Contract issues (i.e., payment issues, informed consent, boundaries of confidentiality) related to the assessment are managed responsibly		
2. Assessments selected and evaluation procedures used are appropriate for referral question and setting (e.g., measures assist with answering specific referral question; most recent test editions are used; primary care vs. tertiary care setting considered in selection of measures)		
3. Assessment and evaluation procedures selected are appropriate for patient characteristics (i.e., attention given to normative group, patient medical conditions, age, culture, other diversity variables)		
4. Evaluation includes assessment and integration of relevant biological, psychological, social, and environmental factors affecting health functioning		
5. Assessment results are scored and interpreted accurately		
6. Assessment and evaluation data are appropriately used to inform conceptualization, diagnosis, and recommendations		
7. Results of evaluation are communicated appropriately (e.g., written report is accurate, includes appropriate amount of detail, is tailored appropriately for intended audience, etc.)		
8. An issue related to legal or ethical decision-making in this assessment practice sample is explicitly and appropriately discussed		
9. An issue related to diversity variables in this assessment practice sample is explicitly and appropriately discussed		

Core Area: Intervention

Components	Yes	No
1. Intervention contract issues (client's/patient's goals, boundaries of treatment, payment resources, etc.) are managed responsibly		
2. Intervention methods chosen are appropriate for patient characteristics (e.g., consideration given to presenting problem, patient diversity variables, patient preference, resources, etc.)		
3. Interventions selected are evidence-based		
4. Intervention is guided by a treatment plan with measurable outcomes; treatment plan is developed collaboratively with the patient		
5. Interventions are appropriately implemented, integrating evidence-based research with clinical expertise		
6. Response to intervention is appropriately assessed/monitored; results used in treatment decision-making (e.g., modifying approach, termination, etc.)		
7. Results of intervention are communicated appropriately (i.e., treatment notes or consultation report are accurate, include appropriate amount of detail, and are tailored for the intended audience)		
8. An issue related to legal or ethical decision-making in this intervention practice sample is explicitly and appropriately discussed		
9. An issue related to diversity variables in this intervention practice sample is explicitly and appropriately discussed		

Core Area: Consultation

Components	Yes	No
1. Contract issues (i.e., payment issues, informed consent, boundaries of confidentiality) related to the consultative services are managed responsibly		
2. Consultation methods chosen are appropriate for client characteristics, context, and setting		
3. Consultation methods are informed by existing theory and research		
4. Consultation activities are conducted skillfully; information from various sources integrated appropriately; conclusions and recommendations are accurate		
5. Results of consultation are communicated appropriately to client and/or referral source		
6. An issue related to legal or ethical decision-making in this consultation practice sample is explicitly and appropriately discussed		
7. An issue related to diversity variables in this consultation practice sample is explicitly and appropriately discussed		

Core Area: Program Development

Components	Yes	No
1. Program development sample demonstrates that the candidate made significant primary contributions in the design and implementation of a health psychology program within a larger system or community		
2. Program development sample demonstrated proficiency in conducting a needs assessment		
3. Program development activities are skillfully conducted using existing theory and research to inform the design, evaluation, modification, and improvement of the program		
4. Program development activities include evaluation of program effectiveness and goal attainment		
5. Candidate displays appreciation for systems issues in the design and implementation of programs (e.g., skillfully working within multidisciplinary team setting; responding to multiple stakeholders, etc.)		
6. An issue related to legal or ethical decision-making in this program development practice sample is explicitly and appropriately discussed		
7. An issue related to diversity variables in this program development practice sample is explicitly and appropriately discussed		

Cross-Cutting Domains (Must Rate All Five Areas)

Note: Ratings should reflect entire submission, including practice samples, CV, and professional statement

	Yes	No
1. Science Base and Application: Candidate demonstrates knowledge of current, relevant empirical literature; knowledge of science base informs practice in the core competency areas (e.g., assessment, intervention, consultation, and/or program development)		
2. Interpersonal Interactions: Candidate demonstrates sensitivity to the welfare, rights, and dignity of others; relates to clients and others in ways that enhance the effectiveness of services provided		
3. Individual and Cultural Diversity: Candidate demonstrates awareness of individual and cultural diversity variables (e.g., ethnicity, race, gender, age, sexual orientation, disability status, and other special populations); diversity variables are considered and incorporated into assessment, intervention, consultation, and/or program development professional activities		
4. Ethical and Legal Foundations: Candidate demonstrates awareness and application of ethical principles and standards and relevant legal provisions; ethical decision-making informs practice		
5. Professional Identification: Candidate demonstrates appropriate involvement in and contribution to national, state, and/or local professional organizations; pursues continuing education and professional development in the specialty of Clinical Health Psychology		

Decision: (Please check one box)

	<p>Pass – Proceed to Oral Examination</p> <ul style="list-style-type: none">• Practice Sample #1 represents a different area of health psychology than Practice Sample #2; AND• Both Practice Samples successfully demonstrate all listed components in two different Core Areas; AND• Competency is demonstrated in all 5 required cross-cutting domains (as evidenced by Practice Samples, CV, and/or professional statement)
	<p>Fail – Revise and Resubmit</p> <ul style="list-style-type: none">• Practice Sample #1 represents a different area of health psychology than Practice Sample #2; BUT• Candidate did not fully demonstrate all listed components in two Core Areas and five cross-cutting domains. ABCHP standards for a clear Pass were not met• Candidate is recommended to revise and resubmit the current Practice Sample(s) based on feedback below for re-evaluation within 6 months. In some cases, revision of CV or professional statement may also be required.
	<p>Fail – New Practice Sample Required</p> <ul style="list-style-type: none">• Practice Sample #1 did not represent a different area of health psychology from Practice Sample #2; AND/OR• Candidate did not fully demonstrate all listed components in two Core Areas and five cross-cutting domains. ABCHP standards for a clear Pass were not met. One or both of the Practice Samples were not satisfactory.• Candidate is recommended to develop new, independent Practice Sample(s) for resubmission within 6 months, since one or both were unsatisfactory. In some cases, revision of CV or professional statement may also be required.

Comments: Please provide specific information and examples explaining your ratings and decision, with particular emphasis on areas in which the candidate did not demonstrate competency in a required component. Please note whether a revised CV or professional statement is required in order to demonstrate required competencies. Please also include your thoughts on areas that the Oral Examiners could pursue during the Practice Sample portion of the oral exam. Please take care to ensure your comments are constructive. Candidates who Fail this written sample will be sent de-identified exact copies of your evaluation to assist with developing sample resubmissions.

Appendix 2

Distinguished Senior Candidate Portfolio Evaluation

Distinguished Senior Candidate Portfolio Evaluation American Board of Clinical Health Psychology

Candidate Name _____ Date of Review _____

Reviewer Name _____

Instructions for Reviewers: Please use this evaluation form to document whether the materials submitted by the candidate (professional portfolio, CV, and professional statement) demonstrate competency in two of the four different core areas (assessment, intervention, consultation, and/or program development), as well as competency in all five of the required cross-cutting competencies (Science Base and Application, Interpersonal Interactions, Individual and Cultural Diversity, Ethical and Legal Foundations, and Professional Identification). Additionally, please provide an assessment of whether the candidate’s portfolio reflects a significant contribution to the field of clinical health psychology.

The Distinguished Senior Candidate Portfolio must reflect a body of work that demonstrates advanced competence and significant contribution to the field of clinical health psychology or the practitioner’s community. It may include the following: professional publications, brochures, outlines, presentations, or portfolios regarding scholarship, assessments, interventions, consultations, or supervision/teaching/management activities related to the practice of clinical health psychology.

The Distinguished Senior Candidate option may also provide information reflecting more distinctive practice patterns resulting from extended professional experience, e.g., areas of consultation; contracted service responsibilities; special grants; program administration or supervision; graduate school, internship, or residency program contributions; clinical teaching and supervision; Continuing Professional Education program presentations; program evaluation or research; professional publications related to the practice of the specialty; or the organization and pattern of the candidate’s current clinical practice.

The portfolio should contain sufficient materials and detail to document the candidate’s significant contributions and allow the reviewers to make a reasoned and informed decision as to the candidate’s competence in the specialty. If a candidate does not *clearly* demonstrate competency in a core area or cross-cutting domain (i.e., evidence of competency is marginal), you should rate that area “No.” Although this will result in a “Fail” decision for the candidate, it will allow the candidate to improve his or her submission prior to sitting to the oral examination, thereby increasing the likelihood of ultimate successful completion of the examination process.

Core Competency Areas: Minimum of 2 of 4 areas must be rated

	Yes	No
1. Assessment		
2. Intervention		
3. Consultation		
4. Program Development		

Cross-Cutting Domains: All 5 areas must be rated

	Yes	No
1. Science Base and Application: Candidate demonstrates knowledge of current, relevant empirical literature; knowledge of science base informs practice in the core competency areas (e.g., assessment, intervention, consultation, and/or program development)		
2. Interpersonal Interactions: Candidate demonstrates sensitivity to the welfare, rights, and dignity of others; relates to clients and others in ways that enhance the effectiveness of services provided		
3. Individual and Cultural Diversity: Candidate demonstrates awareness of individual and cultural diversity variables (e.g., ethnicity, race, gender, age, sexual orientation, disability status, and other special populations); diversity variables are considered and incorporated into assessment, intervention, consultation, and/or program development professional activities		
4. Ethical and Legal Foundations: Candidate demonstrates awareness and application of ethical principles and standards and relevant legal provisions; ethical decision-making informs practice		
5. Professional Identification: Candidate demonstrates appropriate involvement in and contribution to national, state, or local professional organizations; pursues continuing education and professional development in the specialty of Clinical Health Psychology		

Significant Contribution to Field:

	Yes	No
1. Candidate demonstrates a significant contribution to the clinical health psychology field or to the practitioner’s community (see description above for examples)		

Final Rating: Does the Distinguished Senior Candidate’s portfolio submission clearly demonstrate evidence of advanced competency and significant contribution to the field of clinical health psychology?

_____ Yes (2 of 4 core areas, all 5 cross-cutting domains, and the significant contribution area rated “yes”)

_____ No (any area listed above rated “no”)

Please provide narrative comments supporting your conclusion. Please also include comments and lines of questioning that you believe would be important for the oral examiners to focus on when examining this candidate.

Note: *If advanced competency and significant contribution to the field was not demonstrated, please comment on whether additional materials are necessary to make a determination*

Appendix 3
ABCHP Statement of Confidentiality

ABCHP STATEMENT OF CONFIDENTIALITY

I hereby agree that I will not disclose any of the content the ABCHP Examination to anyone other than ABCHP Board Members. I understand that I may talk with and assist others with understanding the process of the examination.

Signature

Date

Appendix 4
Authorization for Observation Form

Authorization for Observation during the Oral Examination Process

I authorize American Board of Clinical Health Psychology (ABCHP) Specialist Examiners-in-Training to participate in the oral examination that is to be conducted by the ABCHP. Specialist Examiners-in-Training are required first to observe an oral examination and second, to be observed conducting an oral exam. In the first phase of training, the Examiner-in-Training will observe the oral examination and she/he will participate in the committee's discussion of a candidate's oral exam but not have a voting role in the examination committee's final decision. In the second phase of training, the Examiner-in-Training will be observed conducting an oral exam and she/he will participate in the examination committee's final decision. Examiners-in-Training are obligated to keep confidential my identity, my participation in the examination process, and the results of the examination. I understand that my decision to permit observation by Examiners-in-Training is voluntary and will not affect my ABCHP candidacy.

I decline to authorize ABCHP Specialist Examiners-in-Training to observe the oral examination that is to be conducted by ABCHP. This decision is voluntary and will not affect my candidacy with ABPP.

Name

Signature

Date