

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 have the capability to 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, which serve as the basis for the evaluation of the Candidate's performance during the oral examination. The eight functional competency areas are 1) assessment, 2) intervention, 3) consultation, 4) management/administration, 5) research and/or evaluation, 6) supervision, 7) teaching, and 8) advocacy. The eight foundational competency areas are 1) professionalism, 2) reflective practice, self-assessment and self-care, 3) scientific knowledge and methods, 4) relationships, 5) diversity, 6) ethical legal standards and policy, 7) interdisciplinary systems, and 8) evidence-based practice.

Functional Competencies

It is recognized that professional psychologists use a variety of approaches, techniques, and theoretical orientations. The examiners will seek to establish the Candidate's level of competence within his or her own frame of reference. It is understood that assessment has a variety of forms ranging from the administration of standardized tests to observations and interviews. Similarly, intervention may take the form of counseling, psychotherapy, appropriate referral, follow-up assessment, and treatment recommendations. Management and administration activities likewise require understanding of institutions, systems, organizations and cultures that guide program development and the psychologist's management contributions. All candidates will be expected to demonstrate the functional competencies of assessment, intervention, and consultation throughout practice sample and oral examination stages. For those who submit a practice sample that focuses on program development, the management and administration competency will also be assessed.

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. A successful Candidate will demonstrate the ability to conduct a comprehensive biopsychosocial evaluation appropriate for the patient's health, illness, and injury and/or disability, and through this process the successful Candidate:

- Assesses and integrates biological, emotional, cognitive, and social/environmental factors.
- Selects, administers and integrates evidence-based biopsychosocial measures appropriate for assessing risk factors and/or presenting problems across healthcare settings.
- Obtains and integrates collateral sources of information, such as from significant others, other medical and allied health providers, and electronic health records.
- Integrates medical assessment results (e.g. labs, imaging), treatment strategies (e.g. medications, surgeries, procedures) and their biopsychosocial impact into evaluations.
- Communicates key assessment results and recommendations to patients and referring medical and/or allied health providers.
- Appropriately uses assessment and evaluation data to inform conceptualization, diagnosis and recommendations.

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. A successful Candidate will demonstrate the ability to implement appropriate evidence-based biopsychosocial interventions to treat or prevent health and behavioral health-related issues, and through this process the successful Candidate:

- Selects and implements prevention and intervention efforts informed by the current evidence.
- Considers appropriate use of new and emerging health technologies in the development and implementation of prevention and intervention efforts.
- Develops the treatment plan in collaboration with the patient.
- Selects, administers, and/or integrates appropriate physical and psychological assessments for the purpose of monitoring treatment progress.
- Collaborates with interprofessional healthcare team to ensure appropriate treatment goals, methods, and outcomes.

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 people who provide psychological services, healthcare 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. A successful Candidate will demonstrate the ability to interact and collaborate with professionals from other disciplines in the healthcare setting, and therefore:

- Displays understanding of role and expectations of a clinical health psychologist providing consultation within the context of intradisciplinary and interprofessional healthcare settings.
- Ensures a shared understanding of the purpose of the consultation and roles of involved parties (i.e. agencies, healthcare providers, patients).
- Applies existing health-related theory and research to conceptualize consultation questions, and selects and implements methods appropriate to the context and consultation question(s).
- Translates and communicates accurate conclusions and recommendations in the healthcare setting.

Management/Administration: 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 effectively carry out administrative activities and to meet the requirement for documenting program effectiveness. A successful Candidate will demonstrate the ability to use appropriate methods to develop, implement, or enhance a Clinical Health Psychology practice, educational program, and/or program of research, and through this process:

- Provides a rationale for the program (e.g. needs assessment) and conducts program outcome evaluation for considering all relevant stakeholders.
- Develops and implements written policies and procedures related to a Clinical Health Psychology practice, educational program, and/or program of research.
- Demonstrates leadership within an interprofessional team or organization in the healthcare setting.
- Demonstrates knowledge of the mission and organizational structure, relevant historical factors, and position of Clinical Health Psychology in healthcare organization and system.

Research and/or Evaluation: (This competency domain will only be addressed for those candidates who engage in research in health psychology).

- Conducts scholarly research using appropriate research design, measures, data analysis, and interpretation of the results.
- Applies scientific methods best suited to the diverse research questions and levels of analysis to examine psychosocial and biological processes as they relate to health promotion, illness prevention, or disease progression or maintenances.

Supervision. (This competency domain will only be addressed for those candidates who engage in supervision of clinical health psychology activities).

- Articulates supervision models and practices that take into account the level of professional development of the supervisee
- Applies knowledge of supervision models and practices in supervision of clinical health psychology activities for psychologists, psychology trainees and health providers for other health professions.
- Demonstrates an understanding of the ethical, legal, and contextual issues of the supervisor role

Teaching. (This competency domain will only be addressed for those candidates who regularly engage in teaching in the area of clinical health psychology, e.g. graduate courses or seminars, teaching other health professionals, undergraduate courses.)

- Integrates the most current research and literature specific to the subject matter and method of instruction
- Evaluates their teaching effectiveness and modifies material and strategy based feedback.
- Demonstrates knowledge of diverse learning strategies and how to accommodate individual differences.

Advocacy. (This competency domain will only be addressed for those candidates who routinely engage in clinical health psychology related systematic advocacy activities designed to impact policy, law, and/or public reform).

- Develops and organizes strategic alliances (including institutions and agencies) for the purpose of effecting systemic change at level of institutions, communities, and/or society.
- Develops and implements action plans for targeted change or progress toward a social, political, economic or cultural goal.
- Describes differences between the role of practitioner and role of advocate.

Foundational Competencies

Eight foundational competency areas are interwoven throughout all domains of professional activity in Clinical Health Psychology and must be demonstrated by all Candidates. Each of these eight competency areas is described below:

Professionalism: A successful Candidate will conduct oneself in a manner consistent with the values and integrity of Clinical Health Psychology, and therefore:

- Maintains identification as a clinical health psychologist who values involvement in professional organizations to enhance professional development and knowledge of issues integral to Clinical Health Psychology.
- Establishes and differentiates the unique contributions of a clinical health psychologist from other members of the health team.
- Demonstrates awareness of current issues facing the Clinical Health Psychology profession.
- Addresses the unique issues, needs, and challenges of working in various healthcare environments.
- Conducts oneself in a professional manner across settings and situations, including monitoring and resolving situations that challenge professional values and integrity.

Reflective Practice, Self-Assessment, and Self-Care: A successful Candidate will engage in on-going self-reflection, routinely assess Clinical Health Psychology competencies, and demonstrate appropriate self-care, and thereby:

- Demonstrates evidence of continued development based on self-reflection and self-assessment.
- Demonstrates awareness of limits of competence and operates within those limits in particular populations or settings.
- Seeks supervision and consultation when needed.
- Reads relevant literature and regularly engages in continuing education activities to maintain competencies in Clinical Health Psychology.
- Engages in and values self-care.

Scientific Knowledge & Methods: A successful Candidate will demonstrate knowledge of relevant scientific literatures as they bear on health, behavioral health, and healthcare, and therefore:

- Demonstrates knowledge of pathophysiology of disease and biomedical treatments specific to medical specialty or environment in which services are provided.
- Demonstrates knowledge of the pathways and reciprocal interactions among biological, behavioral, cognitive, emotional, and social/environmental phenomena as they relate to health promotion, health behaviors, illness prevention, and disease progression across the lifespan.
- Demonstrates knowledge of scientific foundations and research methods of other relevant health disciplines.

Relationships: A successful Candidate will demonstrate the ability to establish and maintain working alliances and effective communication with individuals, groups, and communities in ways that enhance the effectiveness of services provided. The successful Candidate therefore:

- Demonstrates sensitivity to the welfare, rights, and dignity of others.
- Develops and sustains collaborative relationships with individuals such as patients, families, caregivers, colleagues, trainees/students, and communities across inter-professional settings.
- Maintains appropriate professional and personal boundaries with others.
- Addresses and resolves interpersonal conflicts in a proactive manner.
- Integrates and explains Clinical Health Psychology concepts and interpretations in a manner best suited to a particular audience.

Individual and Cultural Diversity: A successful Candidate will demonstrate knowledge of diversity factors in all Clinical Health Psychology services across settings, and as such:

- Conveys an awareness of one's own diversity variables and how these influence the people with whom, and contexts within which, one functions as a clinical health psychologist.
- Appreciates the individual and cultural diversity of beliefs and attitudes toward health and wellness held by patients and healthcare providers.
- Demonstrates knowledge of diversity factors that influence healthcare and access to healthcare.
- Uses culturally inclusive measures and procedures when conducting Clinical Health Psychology services.
- Ensures appropriate accommodations to enable effective delivery of Clinical Health Psychology services.
- Pursues professional development opportunities related to individual and cultural diversity.

Ethical Legal Standards and Policy: The successful Candidate will demonstrate awareness and application of ethical and legal principles and standards as applied to Clinical Health Psychology, and thereby:

- Demonstrates knowledge and application of ethical principles of psychologists and code of conduct.

- Recognizes potential or actual unethical situations and has awareness of appropriate actions to take.
- Demonstrates and applies knowledge of ethical and legal ramifications of Clinical Health Psychology services related to health and behavioral health conditions.
- Identifies and addresses the distinctive ethical issues encountered in clinical health practice, particularly if these are in conflict with the ethical code of other members of the healthcare team.
- Demonstrates familiarity with healthcare setting bylaws, credentialing, privileges, and staffing responsibilities.

Interdisciplinary Systems: The successful Candidate will demonstrate the ability to interact with fellow healthcare professionals in ways that facilitate improved services based on the unique contributions that Clinical Health Psychology can make, and therefore:

- Demonstrates knowledge, appreciation and support of the roles, responsibilities, and resources of other healthcare professionals in providing services both in general and specialty medical settings.
- Understands and functions within formal and informal organizational structures relevant to his/her professional activities.
- Accesses, evaluates, and uses information from other healthcare providers, including use of methods that involve new and emerging health technologies.
- Possesses knowledge of strengths and potential challenges associated with interdisciplinary collaborative activities (e.g., research, education, clinical care, administration).

Evidence-Based Practice: The successful Candidate will demonstrate knowledge of evidence-based practice (i.e. empirical bases of Clinical Health Psychology services in conjunction with clinical expertise and patient characteristics and preferences) to health, behavioral health, and healthcare, and as such:

- Applies knowledge of scientific methodologies to examine psychosocial and biological processes as they relate to health promotion, health behaviors, illness prevention and disease progression.
- Conceptualizes presenting problems and questions based on current scientific evidence.
- Engages in evidence-based practice when conducting assessment, intervention, consultation, and other health-related activities, integrating individual and contextual factors.

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 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. A Standard Candidate (see definition in subsequent section) must submit two practice samples that are in two different domains of functional competency: 1) assessment, 2) intervention, 3) consultation or 4) management/administration. A Candidate choosing the Standard Candidate-Primary Care option will submit the primary care work sample (described in a subsequent section) and a practice sample reflecting one of the four functional domains described above. The submitted practice samples serve as a basis for demonstration of competencies. The Practice Sample Reviewers also evaluate competencies in the following foundational domains: 1) professionalism, 2) reflective practice, self-assessment and self-care, 3) scientific knowledge and methods, 4) relationships, 5) diversity, 6) ethical legal standards and policy, 7) interdisciplinary systems, and 8) evidence-based practice.

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 50 to 55 minutes in each of four exam stations (practice sample, standardized clinical case assessment and integration, ethics and legal issues, and professional issues), 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. A Candidate will be informed prior to the exam if there will be observers and will be given the option to decline or consent to having an observer present before arriving for the oral examination. Written consent using the Authorization for Observation Form (Appendix 4) will be obtained by ABPP Central Office staff. Declining to be observed is not viewed negatively.

Phase I: Application to Establish Candidacy

Submission of Application and Fees

The Application Form for Clinical Health Psychology is completed online through the ABPP website, 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 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 education and training requirements listed below 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 year of Clinical Health Psychology experience following the fellowship, OR
 - b. A non-accredited but APPIC-listed Clinical Health Psychology fellowship and one additional year of Clinical Health Psychology experience following the fellowship, 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 experience in Clinical Health Psychology following the year of supervised experience.

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 are required to submit a current curriculum vitae and a professional statement practice samples. 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 during 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 during 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 seeking board certification
- B. Evidence of science base and application by addressing (a) discussion of current evidence base that informs one's practice as a clinical health psychologist and (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. Two examples of handling complex interpersonal interactions (i.e., conflicts or disagreements in work relationships, challenging relationship dilemmas with patients), representing two of the following domains: assessment, intervention, consultation, and management/administration
- E. Examples of awareness of individual and cultural diversity as pertinent to one's assessments, interventions, consultations, and/or management/administrative program development activities
- 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

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.

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.

Specific Instructions for Practice Samples

Candidates should submit two practice samples. Practice samples should demonstrate competence in two of four functional competency areas, namely assessment, intervention, consultation, or management/administration. 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 patient, a group, or an institution.

The heart of the practice sample is a document describing your work (assessment, intervention, consultation, or management/administration) with the patient(s) or client(s), the theoretical and empirical bases of your approach (citing literature where appropriate), the rationale for your actions, discussion of relevant ethical issues, and consideration of diversity factors. 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 the problem; and other relevant material obtained. You should describe the evaluative procedures and the intervention, consultation, or management/administration 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 must 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 institutional constraints prevent the Candidate from providing copies of original reports and notes, this material can be provided in a document if the Candidate attests to it being the accurate transcription of the original note. 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.

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. There is

an upper limit of 15 pages single-spaced, not including references or appendices, for each practice sample.

It is appropriate for Candidates to review their practice samples with an ABPP Clinical Health Psychology Specialist prior to formal submission. The American Academy of Clinical Health Psychology helps Candidates link to mentors if desired. However, even if a board certified clinical health psychologist mentor or other ABPP-certified specialist provides favorable feedback prior to submission, this this does not guarantee that the Candidate will pass this phase of the certification process.

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)
3. Send digital copies of all materials, in PDF format, to the ABCHP Practice Sample Coordinator at abchp2013@gmail.com.

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. 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 “Proceed to Oral Examination”, “Revise and Resubmit Practice Sample,” or “New Practice Sample Required.” The following section describes the processes taken for each of these rating categories.

“Proceed to Oral Examination”

If both reviewers rate the submission as “Proceed to Oral Examination” the Candidate has completed 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 three times per year. If a submission receives one “Proceed” and one “Revise and Resubmit” or “New Practice Sample Required” rating, the practice sample will be submitted to a third independent reviewer for evaluation. Candidates whose submission is rated “Proceed to Oral Examination” by this third reviewer (i.e., “Proceed” rating by 2 of 3) will have successfully completed the practice sample phase of the evaluation and will proceed to the oral examination phase. They will be invited to sit for an upcoming oral examination.

“Revise and Resubmit”

If a submission is rated by two reviewers as “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 “Proceed to Oral Examination” rating from two reviewers for the Candidate to proceed to the oral examination.

If a resubmitted practice sample does not receive a “Proceed” 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 “Proceed to Oral Examination” rating, or two new samples required if neither resubmission received a “Proceed”). 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 history.

“New Practice Sample Required”

If a submission is rated as “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 “New Practice Sample Required” rating; two new practice samples are required if both original samples received a “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 history.

New practice samples must receive a rating of “Proceed to Oral Examination” upon first review by the new reviewers. If one or both new practice samples are rated as “Revise and Resubmit” or “New Practice Sample Required,” 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 where a Candidate cannot proceed to the oral exam after two submissions of practice samples, the Board may require candidate to receive additional training in specific areas reapplying for board certification candidacy. Recommended training may involve mentoring from an ABCHP Specialist.

3b. Practice Samples (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 patient’s 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 is expected to meet the same standards 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 submit practice samples that represent two of the functional competency domains. Given the brief nature of the consultative role, it is unlikely that clinical health psychologists in primary care settings could sufficiently demonstrate the assessment functional competency with primary care samples. Therefore, it is recommended that primary care clinical practice samples focus on two of the following: intervention, consultation, and/or management/administration. Aspects of assessment that occur within these other domains should certainly be included, as relevant.

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. The upper page limit for each case is three single-spaced pages, not included citations or appendix materials.

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: **six** cases, **four** 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 be similar presenting problems. Aspects of assessment that occur within context of the consultation should be described. The Candidate must also describe how the Candidate consulted with/provided feedback to the health care team regarding the patient’s presentation and provided feedback to the patient. The upper page limit for each case is three single-spaced pages, not included citations or appendix materials.

Management/Administration, with focus on 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 he/she 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 “Proceed to Oral Examination”, “Revise and Resubmit Practice Sample,” or “New Practice Sample Required”. The following section describes the processes taken for each of these rating categories.

“Proceed to Oral Examination”

If both reviewers rate the submission as “Proceed to Oral Examination” the Candidate has completed 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 three times per year. If a submission receives one “Proceed” and one “Revise and Resubmit” or “New Practice Sample Required” rating, the practice sample will be submitted to a third independent reviewer for evaluation. Candidates whose submission is rated “Proceed to Oral Examination” by this third reviewer (i.e., “Proceed” rating by 2 of 3) will have successfully completed the practice sample phase of the evaluation and will proceed to the oral examination phase. They will be invited to sit for an upcoming oral examination.

“Revise and Resubmit”

If a submission is rated by two reviewers as “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 “Proceed to Oral Examination” rating from two reviewers for the Candidate to proceed to the oral examination.

If a resubmitted practice sample does not receive a “Proceed” 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 “Proceed to Oral Examination” rating, or two new samples required if neither resubmission received a “Proceed”). 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 history.

“New Practice Sample Required”

If a submission is rated as “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 “New Practice Sample Required” rating; two new practice samples are required if both original samples received a “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 history.

New practice samples must receive a rating of "Proceed to Oral Examination" upon first review by the new reviewers. If one or both new practice samples are rated as "Revise and Resubmit" or "New Practice Sample Required," 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 where a Candidate cannot proceed to the oral exam after two submissions of practice samples, the Board may require additional training and, following that training, reapplication for board certification candidacy. Recommended training may involve mentoring from an ABCHP Specialist.

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 a 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. 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 modules: Practice Sample, Standardized Clinical Case and Integration, Professional Issues, and Ethical and Legal Issues. These four areas allow examiners to assess the functional competencies (assessment; intervention; consultation; management/administration; research and/or evaluation; supervision; teaching; and advocacy) and foundational competencies (professionalism; reflective practice, self-assessment and self-care; scientific knowledge and methods; relationships; individual and cultural diversity; ethical legal standards and policy; interdisciplinary systems; and evidence-based practice). Each examiner will assess many of these competencies, though they may not be evaluated in the same depth in each part of the examination.

Before beginning, Candidates will be required to sign a statement of confidentiality (Appendix 3) that they will not discuss any specifics about the exam content with others. The time allotted for each part of the oral examination is about 50 to 55 minutes. Candidates should ask questions if they are unclear about any aspect of the examination. Candidates will be provided with a pen and paper during the examination to take notes and organize their thoughts, though any notes taken must be left in the examination room. We recommend bringing a watch and water to the exam. Cell phones will not be permitted as substitutes for watches. For the Practice Sample module, Candidates may bring any relevant data to the exam in order to refresh their memory.

Candidates may bring an interview outline to the Standardized Clinical Case and Integration module.

The examiners will meet after all four components of the oral exam have been completed, discuss their assessment, and render an overall decision (that the Candidate successfully completed the oral, or did not demonstrate sufficient competency to complete the oral exam). 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).

Oral Examination Modules

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

1. Ethical and Legal Issues Module

A file of prepared vignettes is maintained for standardization of the Ethical and Legal Issues segment of the Oral Examination. The module examiner will present the Candidate with written material to generate discussion of ethical and legal issues. The Candidate has also submitted, in the Professional Statement, a non-identifying ethical quandary from his/her own professional experience. During the Ethical and Legal issues segment of the Oral Examination, the Candidate will be given a written material with ethical and legal concerns to discuss. The examiner does not necessarily expect a “right” answer, but anticipates that the Candidate will identify potential ethical and legal issues and demonstrate the ability to thoughtfully weigh relevant options in 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 written material are collected by the examiner and destroyed. 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 will be provided with pen and paper. First, you will be given written material. Read it carefully. You may take notes. Issues of professional practice, behavior, legal/regulatory concerns and ethics are embedded in the material. After reviewing the material, you will be asked to address those issues which present ethical, legal 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 this portion of the examination. The examiner may also ask you about ethical and legal issues that you may face in the usual course of your practice and how you think about and deal with these issues. Psychologists who practice in military settings are expected to respond to questions about the unique ethical issues faced in these settings.

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 specialty of Clinical Health Psychology and to be able to speak about the reasons for controversy and the various viewpoints that have been expressed. Finally, the Candidate is asked to answer questions related to professional development and interdisciplinary team functioning and interpersonal interactions.

Professional involvement is expected to demonstrate the Candidate's identification as a clinical health psychologist who values involvement in professional organizations and uses professional organizations and activities to enhance professional development and knowledge of issues in Clinical Health Psychology. Mere membership in professional organizations may not show sufficient involvement. Examples of involvement may include service on committees and leadership roles, service as journal reviewers or site visitors, or provision of community education with voluntary health organizations.

In discussion of issues of concern facing the specialty of Clinical Health Psychology, Candidates should be able to articulate arguments on both sides of the issue and discuss barriers and potential solutions to the problem. Candidates will not be scored based on personal views. Examples of topics that might be covered include changes in the ethics code, education and training issues, technology issues as telehealth, and the role of psychology under health care reform.

Finally, Candidates will be asked questions related to their understanding of and practices related to interdisciplinary healthcare team functioning, approach to self-assessment and continued professional development, ability to establish and maintain effective working alliances, and approaches to self-care.

Instructions to the Candidate

This is the Professional Issues section of the exam. The purpose of this component is to broadly assess the nature of your professional functioning. We'll discuss your contributions to the specialty of Clinical Health Psychology, your involvement in professional organizations, your interactions with patients and other members of interprofessional healthcare teams, and your approach to self-assessment and maintaining competency in Clinical Health Psychology. We'll also discuss your views about important issues facing Clinical Health Psychology, and your strategies for working within various healthcare environments. No outside notes or materials may be used during this portion of the exam.

3. Practice Sample 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.

During this module, the Candidate will be asked about how Clinical Health Psychology is the same or different from other specialties. Inquiry will address the evidence base for clinical practice, the role of biopsychosocial factors in clinical care and assessment, interprofessional relations and interdisciplinary teamwork, and diversity considerations in practice. Candidates can also expect to be asked about ways the Candidate stays abreast of new developments or research that informs Clinical Health Psychology. The questions are designed to assess one's professional knowledge and skills.

Instructions to the Candidate

For Standard candidates: *“You may use your practice samples during this part of the exam. The practice samples are used as a point of departure from which I will quiz you about your professional activities. My questions are designed to assess your general knowledge of clinical health psychology. You will be asked how your practice samples exemplify your professional functioning and you must demonstrate a reasonable, rational, and defensible approach to your practice of clinical health psychology.”*

4. Standardized Clinical Case 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

“This is the standardized case section of the exam. You will be given brief statements describing presenting problems in two different cases. You will need to choose one of these cases. You can use a pad and paper to take notes and you may use your own assessment outline, but you will need to leave those with me at the end to preserve the confidentiality of the exam.

“I have a considerable amount of information regarding the patient. The information includes anything that would be readily available in the medical record and captured during the course of a clinical health psychology interview, including relevant historical, demographic, and medical data. The information available may also include psychological test data. Request all relevant information by asking me specific

questions. I will provide what information I have, I may ask you to ask a more specific question, and I may ask you to provide a rationale for your question.

“The total time allotted is about 55 minutes. You may take 5 minutes to prepare your questions as we begin, and you may take notes throughout the examination. You will then have about 30 minutes to ask whatever questions you wish. Then you will have about 10 minutes to present your conclusions to me. Your conclusions should include your:

1. *case formulation*
2. *differential diagnosis*
3. *recommendations,*
4. *and, an initial treatment plan*

You should explain your reasoning in presenting your conclusions.

After you present your conclusions, we will spend about 10 minutes discussing several follow-up questions.”

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 conducts oral examinations at least 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 and locations 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 eight foundational competency domains. They must also demonstrate competency in the functional competencies of assessment, intervention, and consultation (and Management/administration when a corresponding practice sample is submitted). However, the practice samples provided need to be only in two of the domains (i.e., assessment, intervention, consultation, or management/administration).

A Candidate may have received the Proceed to Oral Examination rating during practice sample or portfolio review (Phase II), but the oral exam provides the most comprehensive assessment of competencies, and information derived during the oral examination process may result in a Candidate not successfully completing the oral examination.

The decision to award a Candidate board certification must be unanimous. All four examiners must agree that all required functional and foundational competencies were achieved in order for the Candidate to pass the oral examination and achieve board certification.

Notification of Results

The Chair of the Examination Committee sends oral examination decision to the ABPP Central Office. Candidates will receive written notification of the results from ABPP Central Office and the ABCHP within two weeks of the oral examination. If they successfully completed the process, 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.

For Candidates who did not achieve board certification, each will receive specific reasons for the examining committee decision, including positive aspects of the oral examination, and information regarding contacting a mentor through the Academy of Clinical Health Psychology (ACHP).

Options After Not Successfully Completing the Oral Examination

If a Candidate does not successfully complete 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 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 successfully complete the practice sample (or professional portfolio) before being admitted to a second oral examination. OR

If the Candidate applies to retake the oral exam (Stage III) after one year of having not successfully completed the oral exam, they 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 successfully complete the practice sample (or professional portfolio) before being admitted to a second oral examination.

- (c) Appeal having not successfully completed the 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 does not successfully complete 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. 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)
- Not Successfully Completing the Practice Sample (Examination: Practice Sample Component)
- Not Successfully Completing the 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 all modules of the oral examination 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 successfully complete 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. 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
Standard Sample

Candidate:

Reviewer:

Date:

Instructions for Reviewers

(1) Complete Functional Competency tables that correspond to the Practice Sample Submission. If the candidate does not clearly demonstrate a component it should be rated as “No” (minimum standards)

(2) Complete Foundational Competency table using all materials submitted (CV, professional statement & practice samples).

(3) Review total (2 Functional competency tables, 1 Foundational competency table; 3 total).

- All Yes Responses: Proceed to Oral Exam determination. Denote pass in the final table and add questions recommended for Oral Examiners.
 - Any No Responses: Determine, using descriptions of determination, if candidate can rewrite the sample and resubmit, or if the candidate will need to submit a new sample. Provide competency-based feedback for the candidate to revise samples, and questions for Oral Examiners.
-

Functional Competencies

Assessment

Components	Yes	No
1. Assesses and integrates biological, behavioral, emotional, cognitive, and social/environmental factors.		
2. Selects, administers and integrates evidence-based biopsychosocial measures appropriate for assessing risk factors and/or presenting programs across healthcare settings.		
3. Obtains and integrates collateral sources of information, such as from significant others, other medical and allied health providers, and electronic health records.		
4. Integrates medical assessment results (e.g. labs, imaging), treatment strategies (e.g. medications, surgeries, procedures) and their biopsychosocial impact into evaluations		
5. Communicates key assessment results and recommendations to patients and referring medical and/or allied health providers.		
6. Appropriately uses assessment and evaluation data to inform conceptualization, diagnosis and recommendations.		

Consultation

Components	Yes	No
1. Displays understanding of own and others' professional roles and expectations within the context of intra-disciplinary and interprofessional consultation in the healthcare setting.		
2. Ensures agreement or mutual understanding of the purpose and roles of the consultation with involved parties (i.e., agencies, health care providers, patients).		
3. Applies existing health-related theory and research to conceptualize consultation questions and select and implement methods appropriate to the context and consultation question(s).		
4. Translates and communicates accurate conclusions and recommendations in the healthcare setting.		

Intervention

Components	Yes	No
1. Selects and implements prevention and intervention efforts informed by the current evidence.		
2. Considers appropriate use of new and emerging health technologies in the development and implementation of prevention and intervention efforts.		
3. Develops the treatment plan in collaboration with the patient.		
4. Selects, administers, and/or integrates appropriate physical and psychological assessments for the purpose of monitoring treatment progress.		
5. Collaborates with interprofessional healthcare team to ensure appropriate treatment goals, methods, and outcomes.		

Management-Administration

Components	Yes	No
1. Provides rationale for the program (e.g., needs assessment) and conducts program outcome evaluation considering all relevant stakeholders.		
2. Develops and implements written policies and procedures related to a clinical health psychology practice, educational program, and/or program of research.		
3. Demonstrates leadership within an interprofessional team or organization in the healthcare setting.		
4. Demonstrates knowledge of the mission and organizational structure, relevant historical factors, and position of clinical health psychology in the health care organization and system.		

Foundational Competencies

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

Foundational Competencies

	Yes	No
<p>1. Individual & Cultural Diversity:</p> <ul style="list-style-type: none"> • Conveys an awareness of one's own diversity and how this influences the people with whom and contexts within which one functions as a clinical health psychologist. • Appreciates the individual and cultural diversity of beliefs and attitudes toward health and wellness held by patients and healthcare providers. • Demonstrates knowledge of diversity factors that influence healthcare and access to healthcare. 		

<ul style="list-style-type: none"> • Uses culturally inclusive measures and procedures when conducting clinical health psychology services. • Ensures appropriate accommodations to enable effective delivery of clinical health psychology services. • Pursues professional development opportunities related to individual and cultural diversity. 		
<p>2. Ethical/Legal Standards & Policy:</p> <ul style="list-style-type: none"> • Demonstrates knowledge and application of ethical principles of psychologists and code of conduct. • Recognizes potential or actual unethical situations and awareness of appropriate actions to take. • Demonstrates and applies knowledge of ethical and legal ramifications of clinical health psychology services addressing health and behavioral health conditions. • Identifies and addresses the distinctive ethical issues encountered in clinical health practice, particularly if these are in conflict with the ethical code of other members of the health care team. • Demonstrates familiarity with health care setting bylaws, credentialing, privileges, and staffing responsibilities. 		
<p>3. Evidence Based Practice:</p> <ul style="list-style-type: none"> • Applies knowledge of scientific methodologies to examine psychosocial and biological processes as they relate to health promotion, health behaviors, illness prevention, and disease progression. • Conceptualizes presenting problems and questions based on current scientific evidence. • Engages in evidence-based practice when conducting assessment, intervention, and consultation, and other health-related activities, integrating individual and contextual factors. 		
<p>4. Interdisciplinary Systems:</p> <ul style="list-style-type: none"> • Demonstrates knowledge, appreciation and support of the roles, responsibilities, and resources of other healthcare professionals in providing services both in general and specialty medical settings. • Understands and functions within formal and informal organizational structures relevant to their professional activities. • Accesses, evaluates, and uses information from other healthcare providers. • Knowledge of strengths and potential challenges associated with interdisciplinary collaborative activities (e.g., research, education, clinical care, administration). 		

<p>5. Professionalism:</p> <ul style="list-style-type: none"> • Maintains identification as a clinical health psychologist who values involvement in professional organizations to enhance professional development and knowledge of issues integral to clinical health psychology. • Establishes and differentiates the unique contributions of a clinical health psychologist from other members of the health team. • Demonstrate awareness of current issues facing the clinical health psychology profession. • Addresses the unique issues, needs, and challenges of working in various health care environments. • Conducts self in a professional manner across settings and situations, including monitoring and resolving situations that challenge professional values and integrity. 		
<p>6. Reflective Practice, Self-Awareness, & Self-Care:</p> <ul style="list-style-type: none"> • Demonstrates evidence of continued development based on self-reflection and self-assessment. • Describes and operates within limits of competence in particular populations or settings. • Seeks supervision and consultation when needed. • Reads relevant literature and regularly engages in continuing education activities to maintain competencies in clinical health psychology. • Expresses awareness of the importance of self-care. 		
<p>7. Relationships:</p> <ul style="list-style-type: none"> • Demonstrates sensitivity to the welfare, rights, and dignity of others. • Develops and sustains collaborative relationships with individuals such as patients, families, caregivers, colleagues, trainees/students, and communities across interprofessional settings. • Maintains professional and personal boundaries with others. • Addresses and resolves interpersonal conflicts in a proactive manner. • Integrates and explains clinical health psychology concepts and interpretations in a manner best suited to a particular audience. 		
<p>8. Scientific Knowledge & Methods</p> <ul style="list-style-type: none"> • Demonstrates knowledge of pathophysiology of disease and biomedical treatments specific to medical specialty or environment in which services are provided. • Demonstrates knowledge of empirical evidence related to pathways and reciprocal interactions among biopsychosocial factors as they relate to health promotion, health behaviors, illness prevention and disease progression. • Demonstrates knowledge of the scientific foundations and research methods of other relevant health disciplines. 		

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Decision

(Check one box)

	<p>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 Functional Competencies; AND• Competency is demonstrated in all Foundational Competencies (as evidenced by Practice Samples, CV, and/or professional statement)
	<p>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 Functional and all Foundational Competencies. ABCHP standards for a clear Proceed to Oral Examination were not met AND MAY INCLUDE• Candidate's sample contains serious problems in organization or focus. Insufficient use of specific information to illustrate the experience described or to support general conclusions. The sample contains serious problems with sentence construction and writing errors (errors in grammar, spelling, punctuation, word choice) which are serious or frequent enough to distract or confuse the reader.
	<p>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 Functional and all Foundational Competencies. ABCHP standards for a clear Proceed to Oral Exam were not met. One or both of the Practice Samples were not satisfactory AND MAY INCLUDE• Candidate's sample contains serious problems in organization or focus. Insufficient use of specific information to illustrate the experience described or to support general conclusions. The sample contains serious problems with sentence construction and writing errors (errors in grammar, spelling, punctuation, word choice) which are serious or frequent enough to distract or confuse the reader.

Comments

Comments for Candidates

Explain your rating decision and what steps the candidate can take to revise for resubmission. Tie feedback to components of the competencies that the candidate was not successful in demonstrating. Specific and constructive comments are the most helpful.

Practice Sample Rating Form

Primary Care Focus

Candidate:

Reviewer:

Date:

Instructions for Reviewers

(1) Complete Functional Competency tables that correspond to the Practice Sample Submission. If the candidate does not clearly demonstrate a component it should be rated as “No” (minimum standards)

- If Assessment is chosen, the case must be a specialty Clinical Health Psychology assessment (non-primary care behavioral health practice sample).
- If Consultation is chosen, 6 cases total should be presented to meet competencies and 4 of the cases require a clinical health psychology focus.
- If Intervention is chosen, 5 cases total should be presented to meet competencies, 4 of which require a clinical health psychology focus.

(2) Complete Foundational Competency table using all materials submitted (CV, professional statement & practice samples).

(3) Review total (2 Functional competency tables, 1 Foundational competency table; 3 total).

- All Yes Responses: Proceed to Oral Exam determination. Denote pass in the final table and add questions recommended for Oral Examiners.
 - Any No Responses: Determine, using descriptions of determination, if candidate can rewrite the sample and resubmit, or if the candidate will need to submit a new sample. Provide competency-based feedback for the candidate to revise samples, and questions for Oral Examiners.
-

Functional Competencies

Assessment

Components	Yes	No
1. Assesses and integrates biological, behavioral, emotional, cognitive, and social/environmental factors.		
2. Selects, administers and integrates evidence-based biopsychosocial measures appropriate for assessing risk factors and/or presenting programs across healthcare settings.		
3. Obtains and integrates collateral sources of information, such as from significant others, other medical and allied health providers, and electronic health records.		
4. Integrates medical assessment results (e.g. labs, imaging), treatment strategies (e.g. medications, surgeries, procedures) and their biopsychosocial impact into evaluations		
5. Communicates key assessment results and recommendations to patients and referring medical and/or allied health providers.		
6. Appropriately uses assessment and evaluation data to inform conceptualization, diagnosis and recommendations.		

Consultation

Primary Care Sample: 6 cases total / 4 Clinical Health Psychology

Components	Yes	No
1. Displays understanding of own and others' professional roles and expectations within the context of intra-disciplinary and interprofessional consultation in the healthcare setting.		
2. Ensures agreement or mutual understanding of the purpose and roles of the consultation with involved parties (i.e., agencies, health care providers, patients).		
3. Applies existing health-related theory and research to conceptualize consultation questions and select and implement methods appropriate to the context and consultation question(s).		
4. Translates and communicates accurate conclusions and recommendations in the healthcare setting.		

Intervention

Primary Care: 5 cases total/ 4 Clinical Health Psychology

Components	Yes	No
1. Selects and implements prevention and intervention efforts informed by the current evidence.		
2. Considers appropriate use of new and emerging health technologies in the development and implementation of prevention and intervention efforts.		

3. Develops the treatment plan in collaboration with the patient.		
4. Selects, administers, and/or integrates appropriate physical and psychological assessments for the purpose of monitoring treatment progress.		
5. Collaborates with interprofessional healthcare team to ensure appropriate treatment goals, methods, and outcomes.		

Management-Administration

Components	Yes	No
1. Provides rationale for the program (e.g., needs assessment) and conducts program outcome evaluation considering all relevant stakeholders.		
2. Develops and implements written policies and procedures related to a clinical health psychology practice, educational program, and/or program of research.		
3. Demonstrates leadership within an interprofessional team or organization in the healthcare setting.		
4. Demonstrates knowledge of the mission and organizational structure, relevant historical factors, and position of clinical health psychology in the health care organization and system.		

Foundational Competencies

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

Foundational Competencies

	Yes	No
<p>1. Individual & Cultural Diversity:</p> <ul style="list-style-type: none"> • Conveys an awareness of one’s own diversity and how this influences the people with whom and contexts within which one functions as a clinical health psychologist. • Appreciates the individual and cultural diversity of beliefs and attitudes toward health and wellness held by patients and healthcare providers. • Demonstrates knowledge of diversity factors that influence healthcare and access to healthcare. • Uses culturally inclusive measures and procedures when conducting clinical health psychology services. • Ensures appropriate accommodations to enable effective delivery of clinical health psychology services. • Pursues professional development opportunities related to individual and cultural diversity. 		
<p>2. Ethical/Legal Standards & Policy:</p> <ul style="list-style-type: none"> • Demonstrates knowledge and application of ethical principles of psychologists and code of conduct. • Recognizes potential or actual unethical situations and awareness of appropriate actions to take. • Demonstrates and applies knowledge of ethical and legal ramifications of clinical health psychology services addressing health and behavioral health conditions. • Identifies and addresses the distinctive ethical issues encountered in clinical health practice, particularly if these are in conflict with the ethical code of other members of the health care team. • Demonstrates familiarity with health care setting bylaws, credentialing, privileges, and staffing responsibilities. 		
<p>3. Evidence Based Practice:</p> <ul style="list-style-type: none"> • Applies knowledge of scientific methodologies to examine psychosocial and biological processes as they relate to health promotion, health behaviors, illness prevention, and disease progression. • Conceptualizes presenting problems and questions based on current scientific evidence. • Engages in evidence-based practice when conducting assessment, intervention, and consultation, and other health-related activities, integrating individual and contextual factors. 		

<p>4. Interdisciplinary Systems:</p> <ul style="list-style-type: none"> • Demonstrates knowledge, appreciation and support of the roles, responsibilities, and resources of other healthcare professionals in providing services both in general and specialty medical settings. • Understands and functions within formal and informal organizational structures relevant to their professional activities. • Accesses, evaluates, and uses information from other healthcare providers. • Knowledge of strengths and potential challenges associated with interdisciplinary collaborative activities (e.g., research, education, clinical care, administration). 		
<p>5. Professionalism:</p> <ul style="list-style-type: none"> • Maintains identification as a clinical health psychologist who values involvement in professional organizations to enhance professional development and knowledge of issues integral to clinical health psychology. • Establishes and differentiates the unique contributions of a clinical health psychologist from other members of the health team. • Demonstrate awareness of current issues facing the clinical health psychology profession. • Addresses the unique issues, needs, and challenges of working in various health care environments. • Conducts self in a professional manner across settings and situations, including monitoring and resolving situations that challenge professional values and integrity. 		
<p>6. Reflective Practice, Self-Awareness, & Self-Care:</p> <ul style="list-style-type: none"> • Demonstrates evidence of continued development based on self-reflection and self-assessment. • Describes and operates within limits of competence in particular populations or settings. • Seeks supervision and consultation when needed. • Reads relevant literature and regularly engages in continuing education activities to maintain competencies in clinical health psychology. • Expresses awareness of the importance of self-care. 		
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Decision

(Check one box)

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Comments

Comments for Candidates

Explain your rating decision and what steps the candidate can take to revise for resubmission. Tie feedback to components of the competencies that the candidate was not successful in demonstrating. Specific and constructive comments are the most helpful.

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 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