



Masters in Psychology and Counseling Accreditation Council

## POLICIES AND PROCEDURES MANUAL

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[www.mpcacaccreditation.org/](http://www.mpcacaccreditation.org/)  
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## Table of Contents

TABLE OF CONTENTS.....	<b>Error! Bookmark not defined.</b>
FOREWORD.....	4
SCOPE, MISSION STATEMENT AND GENERAL POLICIES.....	4
MISSION STATEMENT.....	4
GENERAL POLICIES.....	5
OVERVIEW OF THE MPCAC ACCREDITATION PROCESS.....	6
INITIAL ACCREDITATION PROCESS.....	6
STAGE 1: PROGRAM EVALUATION.....	6
A. Eligibility Requirements (Pre-Application).....	6
B. Program Self-Study.....	7
C. Submission of Application Materials.....	7
D. Formation of Accreditation Review Committee (ARC).....	8
STAGE 2: SITE VISIT.....	9
A. Site Visit.....	9
B. Site Visit Report.....	9
STAGE 3: ACCREDITATION DECISIONS.....	10
A. Accreditation Review Committee Recommendations.....	10
B. MPCAC Board Decision.....	10
C. Notification of the Academic Unit.....	11
D. Appeals Procedure.....	11
MAINTENANCE OF ACCREDITED STATUS.....	12
ANNUAL DATA REPORTING.....	12
RE-ACCREDITATION AFTER EIGHT YEARS.....	13
PUBLICATION OF ACCREDITATION STATUS AND CONFIDENTIALITY.....	14
FINANCIAL SUPPORT OF ACCREDITATION.....	14
MPCAC FUNCTION AND STRUCTURE.....	15

FUNCTION.....	15
STRUCTURE.....	15
REVISION OF MPCAC STANDARDS.....	19
GLOSSARY.....	20

## **FOREWORD**

The Masters in Psychology and Counseling Accreditation Council (MPCAC) Policies and Procedures Manual is intended to present the process and procedures involved in seeking and obtaining accreditation for psychology and counseling master's programs in the United States. As such it is a valuable guide for the development of the self-study that is a fundamental part of the process of seeking accreditation from MPCAC.

## **SCOPE, MISSION STATEMENT AND GENERAL POLICIES**

### **SCOPE**

MPCAC accredits counseling and psychology master's programs, located in regionally accredited colleges and universities in the United States that educate students in the science-based practice of counseling and psychological services.

### **MISSION STATEMENT**

The mission of the MPCAC is to accredit academic programs that provide science-based education and training in the practice of counseling and psychological services at the master's level, using both counseling and psychological principles and theories as they apply to specific populations and settings. Although programs may vary in the specific model of training and professional development utilized, commitment to science-based education is emphasized in the interest of providing services that are culturally responsive and that promote the public good.

MPCAC objectives are as follows:

- To promote master's level preparation in the practice of scientifically-based, culturally responsive counseling and psychological services that promote the public interest of all people.
- To promote the integration of science and practice as a goal for practitioners working in the areas of counseling and psychological services.
- To encourage academic programs to conduct continuing review, evaluation, and improvement of their education and training, utilizing measurable outcome criteria.
- To encourage flexibility through experimentation and innovation in the design and implementation of training programs.
- To cooperate with other agencies and organizations in promoting education and training in the practice of master's level counseling and psychological services.
- To provide accreditation for training programs in counseling and psychological services which can be viewed by professional and regulatory bodies, as well as the public, as an indicator of quality preparation.

## GENERAL POLICIES

The following general policies guide the work of MPCAC:

1. The Accreditation Standards in the *MPCAC Accreditation Manual* are used as criteria for evaluation by the Accreditation Review Committee (ARC) and the Board. Programs must meet all standards to receive and maintain accreditation.
2. The accreditation process is not to be used as an attempt to control the number of practitioners in the profession or those in preparation programs on the basis of predetermined limits relating to supply and demand.
3. MPCAC accreditation encourages responsible experimentation and innovation within training programs. MPCAC acknowledges a healthy variety in achieving excellence; homogeneity of accredited programs (adhering to particular theoretical positions or methods, etc.) is not a MPCAC objective. MPCAC acknowledges that programs have the ability to organize themselves structurally and decide the best use of their resources to attain their programmatic goals.
4. An applicant program may withdraw the application for accreditation at any time prior to final action.
5. A program may withdraw from the status of accredited at any time by forwarding such notice in writing to MPCAC. Such a withdrawal will be posted on the MPCAC website.
6. Programs accredited by MPCAC must display integrity and responsibility when publicizing their accreditation status. Programs are required to provide information about their accredited status and data about their students and graduates to the public on their website.
7. Programs are expected to maintain ongoing communication with MPCAC, including notifying MPCAC of changes in program management.
8. Programs not reviewed by the Board, even within the same institutional department, should not be represented as accredited. Statements suggesting future accreditation of programs when MPCAC has not made such decisions are not permissible. All reports developed by the ARC will remain confidential, with details released only to the institution and program involved, except in the event that disclosure of the report is legally required.
9. A program is permitted no more than eight (8) years of accreditation per review. MPCAC may grant a one-year extension under exceptional circumstances.
10. MPCAC will maintain a listing of accredited programs that is available to the public.
11. A meeting of accredited programs will be held every six (6) years.

## OVERVIEW OF THE MPCAC ACCREDITATION PROCESS

Accreditation is a voluntary process of evaluation of the program by itself and by MPCAC. The self- evaluation process entails an assessment of the program's resources, objectives, strengths, and limitations. The ultimate purpose of this aspect of the evaluation process is to improve the educational effectiveness of the program by those individuals responsible for the program's operations. Evaluation by MPCAC involves a review of the self-study document against a set of established standards using program assessment procedures.

The MPCAC accreditation process entails the assessment of a program's ability to meet all of the standards established by the profession and adopted by the MPCAC Board. This process involves: 1) submission of a programmatic self-study documenting the program's compliance with the standards; 2) review and confirmation of the submitted documentation by site visitors via an on-site visit; 3) recommendation of the ARC plus two additional reviewers, based upon the written self-study documentation, Accreditation Review Committee (ARC) reports, institutional corrections to the ARC report; and 4) presentation of program to the MPCAC Board, with discussion and decision by the MPCAC Board.

To ensure that the integrity of this accreditation process is maintained and that this process remains an effective catalyst for continuous growth and educational quality, the application process must be based on clearly and accurately stated documentation of the program's operation. The self-study narrative and accompanying materials must accurately represent the program and not claim or imply resources, objectives, strengths, or limitations that exceed the program's level of operations. If intentional misrepresentation is found to have occurred, the MPCAC Board reserves the right to withhold or rescind accreditation.

### INITIAL ACCREDITATION PROCESS

- 1.A. Eligibility review to submit Pre-application →
  - B. Conduct self-study →
  - C. Submit self-study and relevant materials →
  - D. Review by Accreditation Review Committee (ARC) →
- 2.A. Site visit →
  - B. ARC report →
- 3.A. ARC+2 recommendation →
  - B. MPCAC board decision

### STAGE 1: PROGRAM EVALUATION

#### A. *Eligibility Requirements (Pre-Application)*

The program faculty should compare their program against the following Accreditation Eligibility Requirements and submit the [Pre-Application form](#) to the Executive Director. If the Executive Director determines that the program meets these eligibility requirements, the pre-application will be approved and will be valid for a period of two (2) years. The Executive Director will send the program notice six (6) months prior to the expiration of the eligibility period.

1. The academic unit is identifiable as educating counseling and psychological service practitioners and supported by an educational institution accredited by a regional accrediting body.
2. The academic unit must have students currently enrolled, and have graduated a minimum of two classes, with a minimum of a total of four students, prior to submission of the self-study.
3. The program must comprise a minimum of 48 semester credit hours or the equivalent.

**B. *Program Self-Study***

1. A self-study shall be conducted to determine if the program meets or exceeds the [Accreditation Standards](#). Evaluation shall include a review of the program's goals and objectives, resources, evaluation methods, program outcome measures, and plans for continuous improvements. This process shall include representatives of the faculty, students, graduates, supervisors, administrators, and employers. If the program is delivered in its entirety on more than one campus or through more than one modality, the self-study should clearly present student, supervisor, faculty, and resource data separately by location and modality.
2. The self-study shall result in a detailed report that clearly documents the program's compliance with the Accreditation Standards. Institutions are permitted to hire independent external advisors to review the self-study report, to visit the institution, and/or provide feedback regarding compliance with the standards.
3. It is the responsibility of each training program to provide sufficient evidence of quality, science-based training and demonstration of student competence in each area. Each program must provide student outcome data and demonstrate students' readiness to work with the public. Such evidence would include data such as practicum/internship supervisor ratings, capstone passing rates, and licensure rates.

**C. *Submission of Application Materials***

1. The program must submit the appropriate application fee(s) prior to the commencement of program review. Application fees are not refundable.
2. The program shall submit electronically the self-study and supporting documents per instructions of the MPCAC Executive Director.
3. The self-study must bear the signature of the institution's President or CEO, or his or her designee, to verify the institution's commitment to the accreditation review.
4. The Executive Director is responsible to ensure that the Associate Chair for Accreditation is notified that application materials have been received and are

available for review. The Executive Director also notifies the Associate Chair for Information who ensures that the application program is listed on the MPCAC website with the designation Under Review.

**D. Formation of Accreditation Review Committee (ARC)**

1. Upon receipt of the application materials and fees, the Associate Chair for Accreditation will propose three (3) ARC members. The selection of ARC members will be based on availability, willingness, and lack of conflict of interest. The Associate Chair for Accreditation or a designee will send the list of proposed ARC members with their CVs to the program for review and approval.
2. One of the ARC members will be selected as Chair and at least two ARC members will be designated as site visitors. Departments with more than one program, modality, or campus seeking accreditation may require additional site visitors.
3. Upon approval of the program to be reviewed, the Executive Director will make the self-study documents available to the ARC.
4. The ARC will review the materials for completeness and may ask for additional information within sixty (60) days from date of access to materials. The institution must respond to the ARC's request for more information within sixty (60) days from the date of the ARC's request. The ARC will review the additional information within sixty (60) days.
5. The process of asking for clarification can proceed a second time, in which case the site is given thirty (30) days to respond to the second set of ARC questions. When the ARC receives the additional information requested, they have thirty (30) days to review it.
6. When the ARC deems the self-study materials provide documentation that the program meets all MPCAC Accreditation Standards, the process will proceed with the scheduling of the site visit (see #7 and #8 below). When the ARC deems that the self-study does not sufficiently represent that the program meets all the Standards, the ARC Chair will inform the Associate Chair for Accreditation, providing a list of deficits to be addressed. The Associate Chair for Accreditation will notify the program that they will be given a maximum of two years (24 months), considered a deferral, to correct the deficits. All deficits must be corrected before the site visit can be scheduled. The Associate Chair for Accreditation will inform the Executive Director and the Board of such a decision.

If the deficits are not fully corrected by the end of the two years, the application for accreditation shall be considered denied. Such a decision shall be made by the MPCAC Board and shall be posted on the website for 12 months. To be re-considered for accreditation, the institution shall submit a new self-study as well

as application fee after one-year or more has passed.

7. If the ARC recommends proceeding with the site visit, the program and site visitors shall provide a range of acceptable visitation dates. The Chair of the ARC will help to coordinate arrangements for the visit.
8. At least thirty (30) days prior to the scheduled visit, the program will submit to the ARC Chair a draft detailed schedule of site visit activities including meetings with individuals listed below in Stage 2. The ARC may require changes to the schedule to assure that the site visitors are meeting with all individuals necessary to determine that the program meets MPCAC Standards.

## **STAGE 2: SITE VISIT**

### ***A. Site Visit***

1. The site visitors will meet with faculty, administrative officers, students, graduates, off-site supervisors and others deemed related to the program. If the program is delivered in its entirety on more than one campus, the site visitors will visit all campus locations seeking accreditation. If the program is delivered in its entirety through more than one modality, site visitors will assess all modalities separately.
2. Before leaving, the site visitors will present an oral exit report that conveys general impressions of program strengths and weaknesses. The visitors will not convey specific recommendations concerning accreditation status during this oral report, as this is determined by the MPCAC Board.
3. Site visitor expenses are paid by the institution seeking accreditation and must be received prior to the notification of the program of the MPCAC Board decision.

### ***B. Site Visit Report***

1. Site visitors shall provide a written draft of a final report that represents a consensus of the visitors' views. The report shall contain analysis of the program's compliance with Accreditation Standards and may contain other observations or recommendations.
2. The site visitors' draft report shall be forwarded to the Chair of the ARC within thirty (30) days of the conclusion of the site visit.
3. The Chair of the ARC shall send a copy of the draft of the site visitors' report to the program. The program shall have the opportunity to correct any errors of fact by responding to the Chair of the ARC within thirty(30) days.

4. If agreement on errors of fact between the site visitors and the program representative cannot be reached within sixty (60) days, the Chair of the ARC will consult the Associate Chair for Accreditation concerning the discrepancies. If the discrepancies are perceived to be vital to the granting of accredited status, the Associate Chair for Accreditation may appoint another MPCAC Board member as a mediator between the ARC and the program representative, or may decide to arrange another site visit.

### **STAGE 3: ACCREDITATION DECISIONS**

#### ***A. Accreditation Review Committee Recommendations***

In making its accreditation recommendation, the ARC will take into consideration the following data: the application, the self-study report, any pertinent correspondence from the institution, the site visitors' report, and the program's response to the visitors' report. ARC recommendations are determined by consensus; any ARC variations in those recommendations will be communicated to the MPCAC Board. The ARC report may also contain recommendations for the program's consideration. For programs with more than one campus or modality, recommendations may vary by location or modality.

The Associate Chair for Accreditation appoints two additional reviewers who provide a second review of the site visit report. The ARC+2 will participate in a conference call for the ARC to answer questions or clarify points for the additional reviewers. The ARC+2 must come to a consensus that the program either meets all the Accreditation Standards and can be forwarded to the Board for a final decision, or should be given a deferral for a maximum of two years (24 months) to make the necessary modifications to be in compliance with all of the Standards.

Notice of a deferral will be posted on the website and will include a brief indication as to the reason for the deferral.

The final ARC report will be forwarded to the Associate Chair for Accreditation for placement on the next Board agenda.

#### ***B. MPCAC Board Decision***

MPCAC meets (in person, by phone or by computer conferencing) to vote on the accreditation decision following the site visit and completion of the report. All members of MPCAC will receive electronic copies of the ARC report prior to the meeting for their review. The chair of the ARC, or designee, presents the report which indicates if a program meets or does not meet all Standards, any recommendations, and other relevant information. No MPCAC Board member will be present for deliberation on any program for which that person has a conflict of interest. All final votes are recorded in the minutes. Programs with more than one campus or modality will receive separate accreditation decisions by location or modality.

**The three possible decisions are:**

1. **ACCREDITATION:** The MPCAC Chair will notify the program of the accreditation for a period of 8 years.

The accreditation decision is posted on the MPCAC website and includes the years of accreditation.

2. **DEFERRAL:** If the Board determines that a program must make modifications to come into compliance with all the Standards, a decision of Deferral for a period of two years will be granted. The MPCAC Chair will provide the program with specific information regarding the changes, clarifications, or other factors that would bring the program into compliance.

The deferral decision is posted on the MPCAC website with the reason(s) for the deferral.

The program must submit documentation that all Standards have been met to the Associate Chair for Accreditation at any point within the deferral period and by no later than the end of the deferral period. The Associate Chair provides the ARC+2 with the submitted materials to review to make a recommendation to the Board prior to its review. The Board makes the final accreditation decision.

3. **DENIAL:** After a deferral, MPCAC Board denies accreditation to a program that fails to provide evidence that they have met all the Standards.

A denial decision is posted on the MPCAC website for a period of 12 months. Programs denied accreditation can re-apply after a period of 12 months after notification of the decision.

**C. *Notification of the Academic Unit***

Only the MPCAC Chair is authorized to release any information regarding accreditation decisions. Accreditation decisions, actions to be taken, and the ARC report are forwarded by the MPCAC Chair, in writing, to the program represented in the application.

In the event of deferral or denial of accreditation, the report will include a specific statement of reasons for that action. The program will be informed of the right to appeal and of the deadline for filing an appeal.

**D. *Appeals Procedure***

Denial or rescinding of accreditation can be appealed to the Chair of MPCAC or, if the Chair is a member of the ARC responsible for review of the applicant program, to the Executive Director. A letter of intent to appeal must be submitted by the appealing program and

received by the Board Chair no later than thirty (30) days after the MPCAC decision has been communicated to the program. All materials to be reviewed in the appeal are to be received no later than sixty (60) days following the Board's decision. The appeal process authorizes continuation of current accreditation status of the program until an appeal decision has been rendered.

A decision by MPCAC Board to deny or rescind accreditation may be appealed on the following grounds:

1. The MPCAC decision was not justified based on the information available at the time of the decision.
2. MPCAC did not follow its established procedures in rendering its decision, and this caused the decision to be unfair.
3. The decision by MPCAC was based on inferior, false, or incomplete information.

The Chair of the MPCAC, or the Executive Director if required, shall appoint an Appeal Review Team (ART). The ART shall comprise three (3) reviewers selected from the roster of former MPCAC Board members or other impartial individuals who are knowledgeable about the MPCAC Accreditation Standards and processes. One shall be a representative of the public. The ART will review the self-study, the ARC report, and the corrections of factual errors submitted by the program. The ART will conduct one meeting via conference call with the program to allow for a discourse regarding concerns about the original Board decision. The original ARC team will attend this meeting, and may provide information regarding the original decision to the ART. If the appealing program wishes to be represented by legal counsel, it must notify MPCAC at least two (2) weeks prior to the conference call meeting. Such legal representation is allowed only in an advisory, not participatory, role. Following this meeting, the ART will make a recommendation to MPCAC and that recommendation will be voted upon. That vote will be the final decision. This process shall occur within a ninety (90) day time frame. The applicant is responsible for any costs associated with the appeal. In all cases the burden of proof regarding the appeal rests with the program making the appeal.

## **MAINTENANCE OF ACCREDITED STATUS**

### **ANNUAL DATA REPORTING**

Each year all MPCAC-accredited programs shall submit the information listed below and other information as solicited by the MPCAC Board. Each program's data shall also be posted on its website with a link to [www.mpcacaccreditation.org](http://www.mpcacaccreditation.org). The aggregated data will be reported on the MPCAC website.

- Number of applicants, accepted, and enrolled students
- Total number of students in the program
- Number of graduates

- Graduation rate: percent of students enrolled five years previous who graduated from the program
- Percent graduates from the last five years licensed or credentialed
- Percent of courses taught by adjuncts or part-time faculty during the previous year
- Number, ethnicity and gender of faculty
- Other information as required by MPCAC

## **NOTIFICATION OF SUBSTANTIVE CHANGES**

Programs shall notify MPCAC of any substantive changes to their programs. may include but are not limited to: required credit hours, delivery modality, program director, faculty (increase/decrease), explanation of consequence of change and/or modifications to address such changes. Such changes may be included in the reporting of annual data or as a separate document if the changes occur more than four months prior to the due date for the annual data report, sent to the Executive Director.

Programs failing to submit their annual data by December 1<sup>st</sup> of each year will be sent a warning letter. After February 1<sup>st</sup> of the next year, if no data have been submitted, the warning will be posted on the website and the status will be reviewed at the February Board meeting. If data are not received by April 1<sup>st</sup>, the program will put on probation which will also be posted on the website. If no data are submitted by June 30<sup>th</sup> a notice of accreditation withdrawn may be sent to the program and posted on the MPCAC website and the notice of accreditation must be removed from the program's website.

## **UNDER-PERFORMING PROGRAMS**

MPCAC considers a steady, appropriately high graduate rate (percent of students who graduate within five years of enrolling) of at least 70% as a minimum marker of a successful MPCAC-accredited program. A decline in the graduation rate as reported in the Annual Data, to less than 70% will be a trigger for an investigation which will begin with a request from the Executive Director for an explanation of the decline. The notice of the decline and the explanation will be provided to the MPCAC Board. The Board will decide whether further investigation, potential review, or other actions are appropriate. The Associate Chair for Accreditation will be responsible for implementing any Board decisions regarding under-performing programs.

Programs considered under-performing may be given probationary status for a period of two years (24 months) after which accreditation may be withdrawn if improvements are not made. Such a notice of probationary status and the reason for it will be posted on the website. Continued failure to address the reason for the probationary status may result in a MPCAC Board decision to withdraw accreditation. That decision will also be posted on the website for a period of 12 months.

## **RE-ACCREDITATION AFTER EIGHT YEARS**

At least 21 months prior to the expiration of its accreditation, the Executive Director will send a courtesy notification to programs of their status. Programs wishing to continue their accredited status must follow the accreditation process in effect at that time. The ensuing self-study must be received at least one year (12 months) prior to the accreditation expiration date.

## **PUBLICATION OF ACCREDITATION STATUS AND CONFIDENTIALITY**

The Board MPCAC regards the text of the self-study report, site visit report, institutional response, and accreditation notification letter to the program representative as confidential material. Upon request from the institution, however, the program may make the information available where they deem appropriate. Likewise, the information may be disclosed only if it is legally required to do so, or as is required to maintain its status as an accrediting agency.

The Board MPCAC publishes a list of programs that are accredited, under review, deferred, or denied accreditation on its website. The period of accreditation is included for programs that have received accreditation. Programs that voluntarily withdraw their accreditation or programs which have their accreditation status placed on probation or rescinded by the Board will have such action published in the annual report.

MPCAC accredited programs should include notice of their program specific accreditation status on their websites and in any materials made available to the public. The following wording is appropriate:

The \_\_\_\_\_ program is accredited by the Masters in Psychology and Counseling Accreditation Board (MPCAC) for the period \_\_\_\_\_ (DATE OF INITIAL ACCREDITATION) through \_\_\_\_\_ (DATE OF ACCREDITATION EXPIRATION).

If the program is delivered on more than one campus or through more than one modality, the accreditation status should be specifically and separately stated for each location or modality.

## **FINANCIAL SUPPORT OF ACCREDITATION**

Programs' application and annual fees financially support MPCAC activities. Information on current fees is available on the MPCAC website. Programs seeking accreditation will cover all site visitor travel expenses. Any reimbursement of expenses shall be received by site visitors before the institution is notified of the accreditation decision. There is no compensation for MPCAC Board members or site visitors for their work on behalf of accreditation.

Application fees are non-refundable and are due when the self-study document is submitted to MPCAC. Each degree program of an institution pays the full application fee. If a degree program has less than 50% overlap in courses with another degree program within the same institution, it is considered an additional degree program. If the program is delivered on more than one campus or through more than one modality, additional fees will be applied to cover review of the multiple sites and modalities.

The Executive Director shall recommend to MPCAC that probationary accreditation status be imposed if a program fails to pay yearly dues within three (3) months of due date. A recommendation for suspension of accreditation will be sent to the MPCAC Board if a program fails to submit payment within twelve (12) months of due date. To have accreditation reinstated

due to lack of payment, the program must pay all dues in arrears and a penalty for each delinquent year.

Notice of due date for yearly dues will be sent by the Executive Director three (3) months prior to due date.

## **MPCAC FUNCTION AND STRUCTURE**

### **FUNCTION**

The governing members of MPCAC (hereafter referred to as the Board) award accreditation to applicant programs and develop overall policies and procedures as needed. The Board is responsible for monitoring the application of standards for accreditation and for approving any changes in standards. The Board has responsibility for all financial aspects of MPCAC including collecting funds, developing a budget, and establishing fees.

Based on our values and our commitment to innovation, every three years the MPCAC Board will review the strategies used to provide public accountability to ensure that the Board is protecting the public, future clients, and students. At the same time, the Board will review procedures to eliminate unnecessary burden in reporting, either by the Board or by accredited programs.

### **STRUCTURE**

The Board consists of eleven voting members. One of these members shall be a public member and at least two members shall be individuals with a terminal master's degree and a master's level license. The Board also includes the Executive Director who serves as a non-voting member except in the case of a tie vote. A second non-voting member is the Past MPCAC Chair in the first year following completion of term as Chair.

Membership on the Board should reflect the diversity of accredited programs. All members serve a maximum of three (3) three-year terms. Individuals may serve again after a lapse of a full three-year term. The Board selects members with input from the Nominating Committee. Terms begin on July 1 of each year. In the event of a vacancy mid-term, the Board Chair will appoint a replacement to serve until the end of the vacated term. This appointment will not be counted toward the three-term maximum.

A quorum shall be required for all voting matters of the Board. A quorum is defined as greater than half of the voting membership of the Board. To promote the deliberative process, proxy votes are not permitted. Board members are expected to be present for a minimum of eight meetings a year.

The Executive Committee analyzes policies and procedures, conducts special projects, and develops proposals for the Board's consideration.

The Nomination Committee oversees the annual selection of Board members. Nominations shall be solicited from accredited programs, then vetted and ranked by the Nomination

Committee. New members will be voted on at the April Board meeting.

The Board elects five officers: Chair, Secretary, Treasurer, Associate Chair for Accreditation, and Associate Chair for Information Management. Each officer serves two-year terms, for a maximum of four terms. New officers will be voted on at the May Board meeting.

The Board Chair has all the powers and performs all duties commonly incident to and vested in the office of a chairperson of the board of directors of a corporation. The Chair has the responsibility for the supervision of all the business of the Board. The Chair convenes the annual meeting (and other meetings, as necessary), prepares the agenda for all Board meetings and has one vote in all matters decided by vote, appoints standing or special committees, subcommittees, and divisions as may be required for the work of the Board. The Chair sits on the Executive Committee and is a member of the Nomination Committee.

The Secretary of the Board performs all duties commonly incident to and vested in an office of the secretary of a corporation, including but not limited to the initial approval and distributing of true minutes of the proceedings of all meetings. The Secretary is a member of the Nomination Committee.

The Treasurer is responsible for budget preparation and monitoring of income and expenditures. The Treasurer shall submit a budget to the Board for its review and approval at the annual meeting. The Treasurer, through the Executive Director, is responsible for attending to all financial matters. Additionally, the Treasurer shall ensure that the Executive Director prepares financial statements showing the financial condition (balance sheet) and results of operations (income statement) providing actual results to budgeted amounts. The Treasurer is a member of the Nomination Committee.

The Associate Chair for Accreditation oversees the accreditation review process by proposing Accreditation Review Committee (ARC) members, and ensuring the work of each ARC is completed in a timely manner. The Associate Chair for Accreditation sits on the Executive Committee and is a member of the Nomination Committee.

The Associate Chair for Information Management is responsible for maintaining internal and external information systems such as website, manual, and by-laws. The Associate Chair for Information Management sits on the Executive Committee and is a member of the Nomination Committee.

The Past Chair serves on the Executive Committee and the Nomination Committee during the first year following the end of the term as Chair.

The Executive Director, as the Chief Executive Officer (CEO), is responsible for the implementation of the work of the Board, including assisting the Treasurer with the development and management of the budget, monitoring and tracking the work of MPCAC, and supervising all staff. The Executive Director shall provide an annual report with appropriate dissemination. The role of the Executive Director may include other tasks and responsibilities as necessary and appropriate. The Executive Director has responsibility for notifying and assisting accredited programs to maintain and/or renew their accreditation status; and, with the Treasurer, authorizing MPCAC expenditures. The Executive Director is nominated and appointed by the Board and

shall receive appropriate compensation. The Executive Director chairs the Nomination Committee.

## **COMPLAINT PROCESS**

In the event that the MPCAC board receives a complaint, the complaint will be forwarded to the Executive Director (ED). If the ED is implicated in the complaint it will be forwarded to the Chair who will then follow the procedure outlined below. If the ED determines that she/he is able to resolve the complaint, the ED will inform the Executive Committee (EC) and the Board of the complaint and its resolution at the next EC and Board meetings. If not resolved by the ED, the ED will bring the complaint to the EC for discussion. If resolved by the EC the complaint will be brought to the Board for information only. If not resolved through EC discussion, the complaint will be brought to the Board for discussion, a course of action, and a vote.

## **BOARD SELF-ASSESSMENT**

The MPCAC Board has two strategies to assess its policies and procedures as follows.

- The Executive Director will send the program director of each site visited program a questionnaire soliciting input on the preparation and practices of the site visitors. This survey will be sent out after the site visit but before the MPCAC decision is conveyed to the program.
- The Board will survey accredited programs every three (3) years and then have an in-person Board meeting to review the survey results. Every other cycle, that is, every six (6) years, will precede the review of the Standards. The cycle will be: year 3 - survey programs; year 6 - survey programs; year 7 - review Standards.

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<sup>1</sup> To establish initial Board membership under this structure, members will be elected to staggered terms. In the first year of operation, four (4) will be named to a three (3) year term, four (4) will be named to a two (2) year term, and three (3) will be named to a one (1) year term. All will be considered to be in their first term of service.

## Codes for MPCAC Board

### *Code of Conduct*

All actions or decisions on the Board, or carried out on behalf of the Board, must be handled with professionalism, integrity, and accountability. Respect must be shown in all relationships, internal as well as external to the Board, based on ethical principles contained in the ACA and APA ethical codes. Board members shall not accept benefits or gifts that may be regarded as improper or may engender a sense of obligation with any parties involved in the accreditation process. Further, the only official spokespersons for the Board shall be the Executive Director and Chair; no other member shall accept a role that would indicate that they are representing the Board, unless formally designated as a representative by the Executive Director or the Chair.

### *Confidentiality and Conflict of Interest*

Confidentiality and the absence of Conflict of Interest are necessary to preserve the credibility of the accreditation process. Members of the Board, site visitors, consultants, appeal panel members, paid staff, and other representatives of MPCAC must avoid conflicts of interest in the discharge of their duties. Because of the significant impact of the accreditation process and the accreditation decisions on the welfare of students, faculty, and the institutions to which they are attached, it is especially important that members of MPCAC and other individuals named above be objective and display the highest degree of integrity. For this reason, all of these individuals are expected to keep confidential the entire accreditation process, including applications, all records, discussions, and decisions about accredited programs or programs seeking an accreditation with MPCAC. These individuals must also avoid both the fact and the appearance of conflict of interest and must be alert to any and all situations that might involve or give the appearance of bias. Responsibility for determining and avoiding such conflicts rests primarily with the individual.

“Conflict of Interest” is defined as a situation in which personal and/or financial considerations have or appear to have the potential to influence or compromise judgment in professional activities related to accreditation (e.g., being a current or former program faculty or student; research collaborator, co-author, spouse, parent, child, or sibling of program personnel). If there is a conflict of interest of this nature, the member will be recused from all discussions and decision-making related the matter. Further, while on the MPCAC Board members shall not hold leadership positions in professional organizations whose work might directly intersect with MPCAC’s mission. In such situations, the member is expected to resign from the Board.

### *Violations of Above Codes*

Violation of the Code of Conduct or Conflict of Interest may result in termination from the Board, following a review and vote by the Executive Committee. When a member of the Executive Committee is implicated, their seat on the Executive Committee for this purpose will be replaced by the Treasurer. If the individual disagrees with the decision, they may appeal to the Board members who do not serve on the Executive Committee.

### *Affirmation of Above Codes*

Upon appointment or election to the Board, service as a volunteer, or hiring as a member of the accreditation staff, such persons shall review and sign this document.

Name PRINT \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

## **REVISION OF MPCAC STANDARDS**

To ensure the public interest is being served, MPCAC will conduct a systematic, comprehensive review of its standards every seven years, at a minimum. During this interval an open meeting of representatives from accredited programs will be held to review the existing standards and propose revisions. The Executive Director will notify all MPCAC-accredited programs and other interested parties of proposed changes. To obtain input, proposed standards changes will be posted on the MPCAC website for public comment for a minimum of 30 days. Board members will review and respond to public comments before enacting standards changes. Any changes in standards must be submitted to the Board for approval. All such changes must be approved by a positive vote of at least 71% (at least eight of eleven) of the members of the Board. A reasonable timetable will be provided for accredited programs and those under review to respond and/or make program changes to meet any alteration in the Accreditation Standards.

## GLOSSARY

**Conflict of Interest:** Any relationship which could lead to a biased evaluation of a given program (e.g. current or former program faculty or student; research collaborator, co-author, spouse, parent child, or sibling of program personnel).

**Counseling and Psychological Services:** Providing counseling and psychological services involves using science-based principles of psychology and counseling to establish effective and culturally responsive helping relationships. Providers of counseling and psychological services are skilled in the application of assessment and interventions to facilitate behavioral change and enhance functioning.

**Culturally Responsive:** Emphasis on the application of theories and scientific principles that are relevant and pertinent of specific populations and/or specific socio-cultural contexts, where the uniqueness of each individual is accounted for and each person's well-being is maximized.

**Evidence-Based:** "The integration of the best available research with clinical expertise in the context of patient characteristics, culture, and preferences" (American Psychological Association, 2005).

**Public Good:** The public good means "in the best interest of the people" and is demonstrated by the exhibition of professional ethics and a social justice perspective.

**Public Member:** An individual who is not and has never been employed in the provision of counseling and psychological services, or the training of such practitioners; and who is not connected with the practice of this profession.

**Science-Based:** The systematic understanding and application of scientific theory, empirical research, and general scientific principles through observation and experiment (e.g., objective thinking, repeated assessment for progress monitoring, delivering intervention sequentially). It includes understanding the clinical applications of research; research methodology; techniques of data collection and analysis; biological and cognitive-affective bases of behavior; development across the lifespan; and respect for scientifically derived knowledge.

**Social Justice:** "The promotion of equity for all people and groups for the purpose of ending oppression and injustice affecting clients, students, counselors, families, communities, schools, workplaces, governments, and other social and institutional systems" (American Counseling Association, 2014).