

The American Board of Couple and Family Psychology

Manual for Obtaining Board Certification

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INTRODUCTION

As a constituent specialty group of the American Board of Professional Psychology (ABPP), the American Board of Couple and Family Psychology (ABCFP) offers certification opportunities to psychologists who present the requisite training and experience. Candidates for board certification in couple and family psychology complete an application, submit credentials, provide a work sample, and sit for an oral examination administered by the ABCFP. Candidates who successfully complete the process earn board certification in couple and family psychology.

Specialty of Couple and Family Psychology

Definition & Description

“Couple and Family Psychology (CFP)¹ is a broad and general specialty in professional psychology that is founded on a systemic epistemology, including explicit awareness of the importance of context, diversity, and developmental perspectives, to understand, assess, and treat the comprehensive issues of psychological health and pathology, including affective, cognitive, behavioral, and dynamic factors across individuals, couples, families, and larger social systems. The crucial element of the specialty is a thorough systemic conceptualization and the application of systemic concepts to human behavior. CFP includes a body of knowledge and evidence-based interventions that require specialty competence” (Stanton & Welsh, 2011).

Specialists in Couple and Family Psychology acquire knowledge in content areas such as:

- ❖ Systems theory and its applications to couples, families, and other social systems
- ❖ Theories of couple and family dynamics, structure, functioning, and treatment.
- ❖ Life-span human development
- ❖ Assessment and testing
- ❖ Personality theory
- ❖ Psychopathology
- ❖ Couple and family intervention and treatment
- ❖ Group and organizational dynamics

¹ The abbreviation CFP will substitute for “Couple and Family Psychology” and “Couple and Family Psychologist”

- ❖ Ecological psychology
- ❖ Communication theory
- ❖ Individual and cultural diversity
- ❖ Family life cycle events and transitions
- ❖ Legal and ethical issues that influence couples/families and couple/family psychologists
- ❖ Multi-generational and extended families
- ❖ Methods of couple/family research
- ❖ Human sexology and the methods of sex therapy

Historical Development of Couple and Family Psychology

Couple and Family Psychology (CFP) is historically rooted in the Child Guidance movement in the early 1900s. In this early movement, the focus of treatment was on the child's family environment where the child's symptoms were seen to be the result of tensions within the family.

The field of CFP was further organized when, at the 1958 convention of the American Psychological Association, the Academy of Psychologists in Marital, Sex and Family Therapy was formed. The 1960s and 1970s saw growth of theoretical orientations and training institutes in couple and family therapy. In 1984 the APA Council of Representatives approved the Division of Family Psychology as APA Division 43.

In 1991 the American Board of Professional Psychology (ABPP) recognized Family Psychology as a specialty and the American Board of Family Psychology (ABFamP) and the American Academy of Family Psychology (AFP) were created. The board has responsibility for establishing criteria related to the definition, education, training, competencies, and the examination process leading to board certification in couple and family psychology. AFP provides a forum for board certified couple and family psychologists, and works to advance couple and family psychology as a science and profession and as a means of promoting family welfare. The AFP also recruits candidates and actively advocates for couple and family psychology with other organizations. A further evolution in family psychology occurred in April 2007 when the ABPP Board of Trustees overwhelmingly approved a name change to The American Board of Couple and Family Psychology (ABCFP), which reflects and encompasses more accurately the focus of education, research and practice in the specialty area. In 2002 the APA's Council for the Recognition of Specialties and Proficiencies in Professional Psychology (CRSPPP) approved family psychology as a specialty.

Couple and Family Psychology Today

From the child guidance movement, CFP retained the notion that psychological problems emerge in part as a result of dysfunctional interpersonal relationships, particularly within the family. CFP incorporated the treatment of individual problems via relationship-focused interventions, and the treatment of distressed relationships, particularly with couples and

parent-child relationships. The specialty evolved further with an expanded model of psychological problems that considered the effects of intrapersonal, interpersonal, environmental, and macro-systemic factors. CFP will play a central role in health care systems. For instance, the VA is expanding its training and clinical program in CFP to provide greater involvement within health care. Hospitals also are recognizing the role of CFP in the treatment of patients.

Why Seek Board Certification in Couple and Family Psychology?

Board certification assures the public and the profession that the couple and family psychologist specialist has successfully completed the education, training, and experience requirements of the specialty in the following areas: assessment and intervention, knowledge of the scientific and research base of the specialty and its application in practice, ethical and legal issues involved in practicing couple and family psychology, identification with the specialty, and, when applicable, consultation and supervision in the specialty. Certification in CFP under the aegis of ABPP:

- ❖ Board certification is the expected highest standard of professional practice and is respected in the job market for Psychologists who work with Couples and Families.
- ❖ Becoming Board Certified helps consumers and systems to differentiate us as holding the highest certification.
- ❖ The military and Veterans Administration Hospitals provide a 5% pay increase for those with ABPP status and professional recognition.
- ❖ APA looks favorably on faculty with a Diplomat from APBB when accrediting a program. All divisions are respected depending on the faculty member's area of scholarship.
- ❖ Hospitals conferring Privileges often require an ABPP.
- ❖ Increases visibility with potential for enhanced collegiality.
- ❖ Malpractice insurance uses this information to verify expert status.
- ❖ Offers a high level of licensure mobility in cooperation with the Association of State and Provincial Psychology Boards (ABPP).

Finally, the board certification process in CFP Psychology helps psychologists crystallize their theoretical views and assessment/intervention strategies and integrate them into a coherent model of CFP.

BOARD CERTIFICATION PROCESS

All candidates for board certification in CFP must meet general eligibility requirements set by ABPP. Once approved by ABPP, candidates can choose one track depending upon their background and experience –standard track or one senior track (15 years of practice and additional documentation of specialization-- please see below for more detail). Regardless of track, the Board certification process proceeds through three stages.

1. Stage I: Application for candidacy
2. Stage II: Submission of professional statement and/or work sample (depending upon standard or senior track application)
3. Stage III: Oral examination

Stage I: Application for candidacy

The **application** provides the primary data for determining board certification candidacy based on education and training credentials and endorsements. The applicant's doctoral degree and program verification is accomplished by requesting that official transcripts be sent from their educational institution(s) directly to the ABPP central office. Endorsements are requested by the applicant as described in the application form. Once all the materials have been received, the ABPP verifies the applicant's licensing status.

Based on the information described above, the doctoral program's generic requirements are reviewed by the ABPP staff for compliance with the generic degree and professional psychology program criteria. Applicants meeting the generic requirements are then reviewed by the specialty board credentials committee for compliance with the specialty's specific doctoral and post-doctoral level education, training, and experience requirements. Applicants are informed of the results of the eligibility review by the ABPP central office following both parts of the evaluation.

General Eligibility Requirements

To attain certification in any specialty, an applicant must meet the common eligibility requirements:

- A doctoral degree from a program in professional psychology which at the time the degree was granted held accreditation by the APA, CPA, or was listed in the publication *Doctoral Psychology Programs Meeting Designation Criteria*. Applicants credentialed in the most recent directory of the *National Register of Health Service Providers in Psychology* or the *Canadian Register of Health Service Providers in Psychology* will automatically meet the doctoral degree requirements. Applicants who hold the *Certificate of Professional Qualification in Psychology (CPQ)* also qualify as automatically meeting the doctoral degree requirements. Applicants who hold a doctoral degree in psychology and have 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 respecialization). Or, the applicant qualifies for an individualized exception review based on a doctoral degree granted prior to 1983, or a degree granted outside the U.S. or Canada, or for applicants claiming equivalent doctoral degree and program requirements. Such exceptions are coordinated through the ABPP Executive Office and the appropriate specialty board.

- Licensing as a psychologist - All ABPP candidates in the U.S., its territories, or Canada must be licensed for independent practice as a psychologist at the doctoral level in a jurisdiction of the U.S., its territories, or Canada.
 - Limited exceptions exist for those receiving their doctoral degrees prior to 1983, or with degrees granted outside the U.S. or Canada, or with formal retraining or substantial equivalents to accreditation requirements, or who hold licensure in jurisdictions of practice for some Federal employees. [Exception criteria and procedures are available from the ABPP central office.]

Specialty Specific Eligibility Requirements

Applicants for certification in Couple and Family Psychology (CFP) may apply through one of two tracks. Each applicant is evaluated according to the requirements of the category in which she or he applies by a current Board member; any variance from the requirements will be evaluated on a case-by-case basis. If the applicant believes she or he is qualified but does not meet the requirements, they are urged to request an individualize review of their history.

Standard Preparation for Eligibility in CFP

The Board recognizes that obtaining training in CFP is not readily available in many settings. Therefore, training often occurs through variegated methods. Education and training is often circuitous and this fact can be reflected in the applicant's materials.

- An earned doctoral degree in professional psychology (e.g., clinical, counseling, or school) that meets the ABPP generic requirements;
- Completion of an APA or CPA accredited internship or an APPIC or CAPIC approved internship (exceptions may be granted);
- Completion of a post-doctoral residency or one year postdoctoral practice supervised by a licensed psychologist. A minimum of one hour a week of individual supervision for 48 weeks is mandatory. Additional supervision or consultation in the specialty is desirable.

Specialty specific education and training can be demonstrated through a combination of some of the following experiences:²

- An internship with a CFP track or rotation
- A postdoc with a 30-50% of supervised service delivery in CFP
- Four graduate courses and two practica in CFP
- 25 hours of didactic CFP (CE's) training post-graduation
- 25 hours or more of supervision by a Board Certified CFP
- 40 hours or more of regular supervision by a highly-experienced couple and family clinician (non-Board Certified))
- Teaching CFP courses at the undergraduate, graduate, or postdoctoral levels
- Research and publication of CFP theory and application
- 40 or more hours of supervision of CFP graduate and postdoctoral students
- Highly favorable letters of recommendation from two supervisors or colleagues

*If uncertain whether you meet the criteria to apply, please contact the Board President or a mentor.

Senior Couple and Family Psychologist Eligibility

Senior eligibility recognizes the accomplishments and contributions of those who have worked in the field of couple and family psychology for a minimum of 15 years after receiving their doctoral degree. Post-doctoral residencies count toward this 15 year total.

Every senior candidate must demonstrate having a professional identity as a couple and family psychologist, in addition to meeting the generic qualifications required by ABPP (this does not preclude other professional identifications). Candidates may demonstrate professional identity in the specialty by submitting a concise summary of evidence, using the illustrative examples provided below as guidance for the type of evidence desired.

Evidence of Professional Identity-- candidates will be able to articulate and describe the application of conceptual competency in systemic epistemology in one's work (e.g., ability to use systems theory to inform CFP). The senior track is reserved for psychologists who have made substantial, recognized contributions to the field. One can demonstrate professional identity in CFP through a combination of the following:

² EDUCATION AND TRAINING GUIDELINES: A Taxonomy for Education and Training in Professional Psychology Health Service Specialties. **COMMISSION FOR THE RECOGNITION OF SPECIALTIES AND PROFICIENCIES IN PROFESSIONAL PSYCHOLOGY**

- Fellow status in the APA Society for Couple and Family Psychology
- Membership and service in a CFP organization
- Presentations on CFP at professional conferences
- Teaching CFP courses at the graduate and undergraduate level
- Consultation concerning CFP issues
- Research that has made national or international contributions to the field
- Contributions to professional journals
- Service on CFP professional journal editorial boards
- Conducting clinical case consultations at facilities in your community
- Supervision of graduate students, junior staff members, or independent practitioners who have sought your services
- Documented systematic and sustained engagement in social policy, programs, and legislation on behalf of CFP

If the applicant is deemed not to meet all requirements for senior track eligibility, he/she will be advised to seek certification through the standard track.

Passing Stage I (Achieving candidacy)

Upon favorable review and verification of the applicant's credentials by the ABPP central office, the central office will notify the candidate of acceptance (or rejection). Favorable review means the candidate moves on to Stage II, at which point the ABPP office will provide the candidate with the name and contact information of the CFP examination coordinator (the President). The examination coordinator will assign two Board members to initiate contact with the candidate to continue into Stage II.

To assist the candidate to succeed with the process from candidacy through oral examination, a mentor also will be assigned by the American Academy of Couples and Family Psychology.

Steps in moving from Stage 1 to Stage II:

1. After passing stage 1, the ABPP central office will notify the candidate and provide contact information for the CFP examination coordinator.
2. The examination coordinator contacts the candidate.
3. The examination coordinator connects the candidate with the mentor from the Academy.
4. The candidate submits his or her work sample (digitally) and fee to the ABPP central office. The ABPP central office will forward the work sample to the President.

Stage II: The Work Sample

The work sample and the related professional statement represent the initial part of the examination process. The work sample provides the candidate with the opportunity to present a sample of her or his practice in the specialty in support of candidacy together

with a professional statement that puts the sample in context and tells the committee more about the candidate's philosophy of practice. Requirements vary depending on whether the candidate is applying based on the Standard or Senior tracks. Details for each track follow.

Overview of Steps in Stage II:

1. The candidate submits her or his work sample and fee to the ABPP central office.
2. The work sample is received by the coordinator from the ABPP central office.
3. The coordinator convenes the work sample review committee who evaluate the work sample for adequacy and completeness.
4. If additional information is required from the candidate, the coordinator may request this information and the candidate will have a maximum of 90 days to supply this information. Failure to provide the requested information will result in non-approval of the work sample.
5. If the materials are determined to pass Stage II, the coordinator contacts the ABPP Central Office to let them know that the candidate has passed Stage II and is ready to move to Stage III. The candidate has one year from notification to submit the work sample. With attenuating circumstances, the candidate may request an exception.
6. The coordinator appoints an examination committee chair.
7. The chair coordinates an exam date with the candidate and the examination committee.
8. If the work sample is not approved, the candidate is asked to submit revisions, in collaboration with his/her mentor and feedback from the coordinator. If the work sample is deemed entirely insufficient in content, the Stage II process is terminated, and the coordinator returns the materials indicating verbally and in writing the specific ways that the materials do not meet the criteria, and informing the candidate that he or she may reapply in six months (paying a new Stage II fee for evaluation of a new sample).

Standard Preparation for Specialists

Overview

The candidate submits the following items to the ABPP central office in electronic form for Stage II:

- A current curriculum vitae
- A professional statement of one's philosophy of couple and family psychology
- A work sample video (with audio) in electronic format (to be sent in encrypted form)
- Contextual and supplementary information for each session (as described below)

The work sample evaluators will assess whether the candidate demonstrates mastery of the foundational and functional competencies of the specialty at Stage II as follows:

Foundational Competencies

- Relationships
- Individual and Cultural Diversity
- Ethical Legal Standards Policy
- Professionalism
- Reflective Practice/Self-Assessment, Self-Care
- Scientific Knowledge and Methods
- Interdisciplinary Systems
- Evidence-based Practice

Functional Competencies

- Assessment*
- Intervention*
- Consultation*
- Science and Research/Evaluation
- Supervision
- Teaching
- Management/Administration
- Advocacy

The Professional Statement

Candidates must provide in electronic form a professional statement in which they describe their professional training, experience, and identification with CFP. The professional statement should highlight the applicant's specific training and background in the area of CFP. The board recommends **no more than 2,500 words**. This statement should provide the candidates with the opportunity to communicate with the examining committee about their identity and work as a CFP and serve as a basis for the discussion during the opening portion of the oral examination. The information given by the candidate regarding theoretical orientation and expertise should be congruent with the candidate's actions throughout the examination process. Candidates have the responsibility for developing a statement that captures their theoretical orientation and articulates how they translate that orientation into work. The professional statement should also include a description of the full scope of the candidate's professional activities beyond his/her employment.

Instructions for completing the professional statement

1. Tell the committee about the professional work you are engaged in at this time. Be sure to focus on your current 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. Provide evidence of your identification with CFP.
2. Discuss your current assessment, intervention, consultation, and/or supervision/teaching/management activities and both the theoretical and empirical basis for these activities. This should include a description of your professional theoretical framework and a discussion of how researchers and theorists in the field have influenced you. If you call yourself eclectic or integrative, describe at least three major themes in your eclecticism or integrative model. Address ways in which your theoretical model informs your attitude toward individual and cultural diversity considerations as these affect your assessment, intervention, consultation, and/or supervision/teaching/management activities.
3. Provide evidence for the ways in which you utilize or contribute to the current science base by addressing one of the two following points: (a) discuss the evidence base that informs your practice, including how you determine if your activities as a CFP are effective; or (b) describe your own current clinical and/or research activities and how these inform practice.
4. Provide examples of complex professional interactions that you have handled skillfully, in one of the following professional domains: scholarship, assessment, intervention, consultation, and/or supervision/teaching/management. In particular, share examples of incidents in which it was important for you to respond appropriately to issues stemming from individual and cultural diversity.
5. Describe a challenging ethical dilemma encountered in your work as a CFP. Address how the relevant aspects of the *APA Ethical Principles of Psychologists and Code of Conduct* informed your thinking about it and describe how you handled the dilemma. If applicable, address any diversity considerations that arose in resolving this dilemma.
6. Verify that no ethical/legal disciplinary action has taken place since your admission to candidacy. You may do this by attaching a one line statement, specifying that no disciplinary action has been taken against you and sign it.

Along with the electronic copies of your professional statement, your curriculum vitae, provide copies of your clients' authorization (**names/signatures obscured**) to use their interview recordings for your examination (unless applying as a Senior Psychologist without videos), and a copy of the *Health Information Portability and Privacy Act* (HIPPA) documents you used with the clients. Names should be obscured on **all** submitted material.

Work Sample

The work sample serves as an example of the candidate's couple and family practice for exploration and evaluation during the oral examination. The work sample typically focuses

on assessment or intervention. It is possible to provide a work sample in consultation, teaching, or supervision, but a video and contextual material are still needed when one of these elective competencies is the focus of the exam. Candidates are required to submit:

- Digital Video Recordings containing the work sample video of approximately 50 minutes, typically depicting an unrehearsed psychological assessment or an unrehearsed clinical intervention, drawn from their typical clinical practice during the year prior to their submission. The candidate may elect to replace this with a consultation, teaching, or supervision video. If the assessment work sample depicts a family evaluation, the recording should cover the first hour of the evaluation since that is the portion during which rapport-building and critical, initial interviewing take place.
- The contextual and supplementary information for each session should be provided in electronic form, with notation of key segments in the session and selective commentary by the candidate that gives the rationale for his/her questions and comments. Rationale should be consistent with the theoretical orientation described in the professional statement.

Sessions shall be recorded in one continuous, unedited 50 minute run, and shall continuously depict visible and audible interactions between Candidate and clients. The focus should be on the face and body of the therapist. Good audio quality is important and the candidate should ensure that all discussion is audible. *Client authorization forms (Form E or the equivalent) shall be obtained by the candidate for his/her case records and a copy brought to the oral exam in a sealed envelope for placement in the candidate's examination file in the ABPP central office. Form E appears at the end of the current section of this manual.*

Some technical suggestions for the recording:

Please observe the following requirements and techniques:

- Video will clearly show the face and body of the therapist
- Avoid pointing camera at lamps, bright lights, sunny windows, etc. , as doing so may close the camera aperture making the video quality too dark for effective viewing.
- Ensure that the audio has good sound quality.
- Position all chairs for all clients and test the setup with the camera with some friends or colleagues to assure that you will be clearly in range of the camera and that everyone will be recorded well be audible.

The work sample must include copies of all source documents and contextual statements which describe the general facts of the case presented in the sample:

- The rationale for the procedures used
- Notation of key segments in the session
- A selective, running commentary on the therapy process and the candidate's own behavior in the sample and
- Any relevant developments for the candidate or client subsequent to the recorded work sample

Assessment Sample Details

An assessment work sample should include the following contextual and supplementary information (1000-1500 words):

- Dates of family member/family contacts
- Non-identifying descriptive information
- Presenting problem
- Brief history
- Rationale for procedures used
- Formulation and discussion of the problem
- Role of individual or cultural diversity issues in conducting the case assessment and making the formulation
- A reflective comment on the candidate's own behavior in the Work Sample
- A copy of the full professional, written report that captures the family member/family diagnoses and recommendations

Where standardized assessment instruments are used, the Candidate should have a thorough knowledge of the construction, administration, and interpretation of such instruments.

Intervention, Supervision, or Consultation Sample Details (Practice Sample II)

An intervention, supervision, or consultation Work Sample should include the following contextual information (1000-1500 words) including:

- Contact dates
- Session number in total sequence
- Non-identifying descriptive information
- Presenting problem
- Diagnosis
- Brief history
- Formulation and discussion of the problem
- Rationale for interventions utilized

- Role of individual or cultural diversity issues in developing and implementing an intervention
- Goals for present intervention
- A reflective comment on the candidate's own behavior in the sample

Senior Work Sample

Candidates for the senior track submit the following in electronic format for Stage II:

- An updated curriculum vitae
- A professional statement of one's philosophy of couple and family psychology (see below)
- An essay that presents a strong case demonstrating competence in couple and family psychology and copies of supporting materials (see below; any questions about the suitability of supporting materials may be resolved with the exam coordinator). The board has adopted the competency framework presented in Stanton & Welsh (2011), *Specialty competencies in couple and family psychology*, Oxford University Press for the examination process. Other literature may extend the material provided in the book and reflect on-going research and clinical practice innovations. Candidates are encouraged to review recent issues of specialty journals (e.g., *Journal of Family Psychology*; *Couple and Family Psychology: Research and Practice*) in preparation for the exam.

Specific instructions for completing the professional statement

1. Tell the committee about the professional work you are engaged in at this time and how it relates to the specialty. Focus on your current 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.
2. Describe your professional theoretical framework and how researchers and theorists in the field have influenced you. If you call yourself eclectic or integrative, describe at least three major themes in your eclecticism or integrative model. Address ways in which your theoretical model informs your attitude toward individual and cultural diversity considerations as these affect your assessment, intervention, consultation, and/or supervision/teaching/management activities.
3. Describe a challenging ethical dilemma encountered in your work as a CFP. Address how relevant aspects of the *APA Ethical Principles of Psychologists and Code of Conduct* informed your thinking and how you handled the dilemma. If applicable, address any diversity considerations that arose in resolving this dilemma.
4. Verify that no ethical/legal disciplinary action has taken place since your admission to candidacy. You may attach a one line signed statement, specifying that no disciplinary action has been taken.

Specific instructions for completing the competency essay

Senior track applicant must demonstrate a significant and sustained impact on the field of Couple and Family Psychology. For this part of the work sample senior candidates must present a strong case demonstrating their competence in couple and family psychology, using examples or descriptions, such as the illustrative examples listed below. The applicant should provide a brief summary of evidence for specific competencies, naming the competency and citing evidence demonstrating their level of proficiency or excellence. Actual copies of materials or publications and other supporting evidence will form part of the work sample, after admission to candidacy.

Evidence of Scientific or Research competence in couple and family psychology:

- Articles published on couple and family psychology topics in professional refereed journals;
- Books on couple and family psychology subjects published by scholarly publishers (i.e., not self-published or published by a vanity press)
- Service on relevant professional journal editorial boards
- Service as a journal editor of a relevant peer-reviewed professional journal
- Presentations on couple and family psychology at professional conferences
- Chairing theses or dissertations in couple and family psychology
- Other evidence of application of current research to clinical practice

Evidence of Assessment and Intervention competence in couple and family psychology:

- Completion of coursework or continuing education in couple and family assessment or intervention
- Publications or presentations on couple and family assessment or intervention
- Supervision or consultation on couple and family assessment or intervention
- Qualified use of couple and family assessment instruments or application of general psychometric instruments to clinical assessment with couples, families, or larger systems
- Description of the systematic evaluation of individual clients in their the relational context
- Systematic treatment plan development
- Knowledge and use of couple and family evidence-based interventions
- Knowledge and use of common factors in couple and family interventions

Evidence of Teaching competence in couple and family psychology:

- Completion of coursework or continuing education in teaching
- Teaching classes in couple and family psychology (high school, undergraduate, or graduate)
- Presenting workshops in couple and family psychology
- Delivering seminars in couple and family psychology

- Conducting psychoeducation in organizations
- Presenting on couple and family psychology at professional conferences
- Authoring articles, book chapters, or books on teaching or education in couple and family psychology

Evidence of Supervision competence in couple and family psychology:

- Completion of coursework or continuing education in couple and family supervision
- Publications or presentations on couple and family supervision
- Conducting couple and family clinical case consultations
- Supervision of graduate students or unlicensed individuals
- Consultation with independent practitioners
- Supervisee or consultee evaluations of supervision or consultation
- Supervision of supervision of couple and family assessment or intervention
- Service as an administrator of a couple and family oriented program, agency, clinic, health care center, or hospital program
- Presentations on supervision of couple and family psychology at professional conferences

Evidence of Consultation competence in couple and family psychology:

- Completion of coursework or continuing education in couple and family consultation
- Supervised experience in systemic consultation
- Publications or presentations on systemic consultation
- Conducting consultations in organizations or family businesses
- Demonstrated ability to conduct needs assessment using appropriate methodologies
- Consultation reports (needs assessment, recommendations, intervention outcomes)

Evidence of Management/Administration Competence [This competency domain will only be addressed for those Candidates who engage in management/administration] A successful Candidate engages in effective management and administrative activities of organizations, programs, and/or agencies.

- demonstration of leadership that ensures appropriate organizational assessment with measurable outcomes
- development and implementation of written policies and procedures
- effective communication at all levels in the system
- attention to state or provincial guidelines for compliance with mental health statutes
- implementation of effective personnel hiring and management strategies.

Evidence of Advocacy Competence [This competency domain will only be addressed for those Candidates who engage in Systemic Advocacy designed to impact policy, law, and public reform activities] The successful Candidate engages in activities that publically promote change at the level of institutions, communities or society. Clinical psychologists engage in activities that advocate for or empower the individual recipients of the services they provide.

- development of strategic alliances for the purpose of effecting change
- organizing diverse affiliates (including institutions and agencies) for the purpose of a common cause
- development and implementation of action plans for targeted change or progress toward a social, political, economic or cultural goal
- evaluation of the effectiveness of those action plans.

Note: Assessment of the foundational competencies, such as those addressing ethical and legal, diversity, and interpersonal interaction competency will occur during Stage III, the oral examination of the senior candidate.

Passing Stage II (Work sample)

1. If the materials are determined to pass Stage II, the President contacts the ABPP Central Office to let them know that the candidate has passed Stage II and is ready to move to Stage III.
2. The President appoints an examination committee chair.
3. The examination committee chair coordinates an exam date with the candidate and the examination committee.
4. If the work sample is not approved, the Stage II process is terminated, and the coordinator indicates verbally and in writing the specific ways that the materials do not meet the criteria, and informing the candidate that he or she may reapply in six months (paying a new Stage II fee for evaluation of a new sample). Candidates in this circumstance will have the opportunity to request assignment of a mentor to assist them in preparing a more acceptable work sample.

Stage III: The Oral Examination

The final stage of the board certification process in CFP is the oral examination. For the oral exam, the candidate meets with the chair of his/her committee and two other ABPP certified psychologists with CFP or other relevant specialization, who direct questions to the candidate about any and all aspects of his/her professional statement and work sample. Candidates should prepare to answer questions regarding their demonstration of the following CFP competencies and the framework for these competencies described in Stanton & Welsh (2011), *Specialty competencies in couple and family psychology*, Oxford University Press. The board has adopted that framework for the examination process, in addition to the core foundational and functional competencies required for all board certified specialists. Other literature may extend the material provided in the book and reflect on-going research and clinical practice innovations. Candidates are encouraged to review recent issues of specialty journals (e.g., *Journal of Family Psychology*; *Couple and Family Psychology: Research and Practice*) in preparation for the exam. All board certified specialists are expected to demonstrate competencies in the following:

The eight foundational competencies include:

- Individual and Cultural Diversity
- Relationships
- Ethical Legal Standards Policy
- Professionalism
- Reflective Practice/Self-Assessment, Self-Care
- Scientific Knowledge and Methods
- Interdisciplinary Systems
- Evidence-based Practice

The eight functional competencies include:

- Assessment*
- Intervention*
- Consultation*
- Research/Evaluation
- Supervision
- Teaching
- Management/Administration
- Advocacy

Competencies with an asterisk indicate those that are required of all candidates. The other functional competencies may be part of a candidate's professional work and self-statement.

Ethics Vignettes and Dilemmas

All candidates will be asked to respond to ethical dilemmas commonly encountered in the practice of couple and family psychology by means of vignettes and dilemmas that the examination chair will bring to the examination. To enable a measure of standardization in the ethics portion of the examination, a file of prepared vignettes and dilemmas is maintained and updated by ABCFP. The Candidate has also been asked to submit, in the professional statement, an ethics quandary from his/her own professional experience, suitably disguised to protect the clients' confidentiality.

During the Ethics segment of the examination, the candidate will be given two vignettes/dilemmas to review and discuss that were not specifically reviewed in the Candidate's ethics quandary. The examining committee does not expect a particular "right" answer from the candidate, but rather expects to hear the candidate present relevant options and demonstrate the ability to evaluate the issues and options in light of the APA ethics principles and relevant statutes. Candidates will discuss their own vignette in the

same manner. Candidates will have the opportunity to take a break in order to think through the dilemma if they so choose.

At the conclusion of the examination, the examiners' vignettes are collected by the chair. Both examiners and candidates will treat the vignettes as confidential.

Passing Stage III (The oral examination)

At the completion of the oral exam the candidate will receive copies of forms for rating the conduct of the examination and the three examiners; these should be completed within a month after the exam and sent to the ABCFP President.

Successful (passing) candidates will receive a congratulatory letter from ABPP central office. The report will welcome the newly certified CFP specialist to the ABPP and invite membership as a fellow in the American Academy of Couple and Family Psychologists.

The unsuccessful candidate will receive a descriptive report from the central office, including comments provided by chair, reflecting the judgment of the whole examining committee, giving specific reasons why the candidate did not pass. Identification of specific areas of weakness manifested in the candidate's performance will be addressed along with suggestions for how the candidate might address these areas in order to confidently and successfully approach re-examination. Re-examination requires an additional fee.

American Board of Couple and Family Psychology (ABCFP) Diversity Statement

The ABCFP is firmly committed to advancing diversity of all types in its selection, screening, and maintenance of certification procedures. In order to achieve its ultimate objective, the demonstrated competency of Family Psychologists, the Board seeks to represent American society in its membership, and to serve all aspects of an increasingly diverse multicultural population with regard to race, ethnicity, gender, sexual orientation, immigration status, geographic or religious identification, or disability.

The ABCFP does not discriminate against candidates on the basis of individual characteristics (e.g., gender, culture, religion, socioeconomic status, ethnic background, sexual orientation, developmental age, stage of life cycle and/or any disability, and its contextual situations). ABCFP will strive to make examination accommodations based upon the nature of a candidate's special circumstances.

Qualified Applicants with Disabilities

The board encourages qualified individuals with disabilities to apply for CFP certification status. The board recognizes that such individuals may encounter particular difficulties and will make efforts to provide reasonable accommodations for these applicants. The board will consider requests for accommodations by individuals with disabilities and

encourage such candidates to self-identify when making application or during the Stage 1 process. A qualified individual with disabilities can request reasonable accommodation, but must make a formal request to the board, and support the request with documentation of the disability and identifying the specific reasonable accommodations and the basis for the need. 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 pertinent to the unique needs of each disability.

CANDIDATE APPEALS

Candidates may appeal, on procedural grounds only, an application Stage II, Stage III or MOC decision by the requisite examination committee (i.e., rejection of the application, rejection of the work sample, failure of the oral examination or failure to pass the Maintenance of Certification). Any appeal must be filed within 60 days of notification of rejection of the application, work sample, failure of the oral examination or failure of the Maintenance of Certification. Candidates should send appeals to the ABPP central office, following all instructions found on *Form F-1*. The candidate may not communicate directly with the examiners about an appeal and the examiners may not communicate directly with the candidate during the appeal process.

After an appeal has been filed, all communication between the committee and the candidate will flow through the Appeals Committee of the ABPP Board of Trustees (see Form F-2).

FORM E: Client/Family Authorization for Video Recording and Review of the Interview

COUPLE AND FAMILY BOARD CERTIFIED) ORAL EXAMINATION
AMERICAN BOARD OF FAMILY PSYCHOLOGY

I, (We) _____, agree to participate in psychological service

which includes video recording of interviews and/or psychological assessment.

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

I understand that the interview and/or assessment will be video recorded and viewed observed by three psychologists who will be evaluating this interview. The videos will be destroyed following the conclusion of the examination process.

I understand that the interviewer is a licensed, doctoral level psychologist who has applied for status as an American Board of Couple and Family Psychology (ABCFP) board certified specialist in couple and family psychology. I further understand that the observers will keep all information revealed in the course of the session confidential. A copy of the signed authorization form will be placed in ABCFP's central office in a sealed envelope, to be opened only in cases of future questions or challenges.

I recognize that participation in the board certification examination procedure is not a requirement to receive treatment at _____. My agreement and participation or that of the listed family members is completely voluntary.

Signed by Interviewee: _____ Date: _____

Signed by ABCFP Candidate: _____ Date: _____

**CANDIDATE'S GUIDE FOR APPEALING AN ADVERSE ORAL EXAMINATION
COUPLE AND FAMILY CERTIFICATION EXAMINATION
AMERICAN BOARD OF COUPLE AND FAMILY PSYCHOLOGY**

In order to facilitate a reasonable and meaningful response to your appeal, you are asked to prepare a letter to the Chief Executive Officer of ABPP consistent with these guidelines:

The acceptable grounds for appeal include the following:

1. Conditions of the examination were not consistent with the principles and policies stated in the current manual for examinations. Please list the conditions that you believe were not met by the examiners.
2. Inappropriate behavior occurred on the part of one or more of the examiners (e.g. discourteous, argumentative, disinterested). Please list the name of the examiner and the behavior you believe was inappropriate.
3. There was a lack of opportunity for you to demonstrate your skills, relative to the areas of the examination. Please indicate how this occurred.

Unacceptable grounds for appeal by the candidate include:

1. The candidate disagrees with the Committee's judgment.
2. Citations of performance or achievement in professional work not directly related to the examination situation.
3. No examiner matched the stated theoretical orientation of the candidate.

Process:

1. If a candidate fails the examination, the chair of the examining committee will then forward the report of the examination committee to the central office for placement in the candidate's file to be used in the event of an appeal.
2. An appeal, using Form F-1, must be submitted to central office within 60 days of the receipt of the fail notice in order to be eligible for review. An appeal raised before receipt of a fail notice will not be considered.
3. Appeals should be sent directly to the ABPP Executive Officer who will forward them to the ABCFP Board, and will notify the examination committee chair and the national examination committee chair that such an appeal has been made. The Appeals Committee will use all information on file in the central office, as well as the Form F-2's which have been filled out by exam committee members and may seek whatever information it deems appropriate. An Appeals Committee Review sheet (See Form F-2) will be filled out independently by each member of the Appeals Committee. A majority vote of Appeals Committee is sufficient to determine whether to sustain or deny an appeal.
4. The Chair of the Appeals Committee will notify the Executive Officer of the committee's decision. The Executive Officer will inform the candidate, all members of the Appeals Committee, the Chair of the National Examination Committee and the members of the Examining Committee of the outcome. If an appeal is to be sustained, specific reasons for that decision will be included.

**Overview for Examiners:
Board Certification Process in Couple and Family Psychology**

1. After an applicant has filed an application with the ABPP central office (CO) the materials are sent to the credentials review chair. If the application is approved, the candidate is notified by the CO to submit work sample materials by a specified date. The CO will send a copy of the work sample review form to let the coordinator know the fee has been paid. Materials should not be sent for review until the fee has been received. The coordinator may contact the CO by phone if time is of the essence. The work sample is to be reviewed by the review committee.

The coordinator may stay in contact with the candidate to answer questions and provide encouragement as the candidate completes the Stage II requirements. The coordinator may also contact the President (or designate) of the Academy of Couple and Family Psychology so the candidate can knowledgeably decide if her or she wishes to have a mentor.

2. When the work sample reviews are returned, the coordinator notifies the candidate of the results: 1) approved, 2) need to submit additional materials, or 3) rejected and may submit new practice after a six-month waiting period. All communication should be copied to the ABPP CO.
 - a. If the work sample was rejected, the Coordinator should carefully craft a letter to the candidate detailing what was lacking and how it might be improved upon. This letter should include a deadline for submitting a new work sample (a year from date of letter).
 - b. If the work sample is approved, the Coordinator sends two (2) copies of the Oral Registration Form with the letter. These are to be returned to the CO by the candidate with the examination fee. The CO will inform the coordinator when the fee has been paid and the exam may be scheduled.
3. The coordinator identifies an exam chair and they collaboratively identify committee members. Once the committee is determined, the chair then confers with the candidate to set the date, time, location and other details of the oral exam.
4. After the oral exam the CO is notified by email of the exam results. If the candidate passes, comments are not needed. If the candidate fails the oral exam, a detailed comment sheet should be included for the CO to send with the fail letter to the candidate. It should be based on the examiners' scoring sheets and comments. Examiners are asked to complete the co-examiner forms and turn in to the chair, who then sends them to the ABCFP President.
5. At the completion of the oral exam the candidate should be given copies of Forms G & H to complete within a month after the exam and mail to the ABCFP President.

6. It is important that the exam chair file a copy of the ABCFP routing sheet with the ABCFP President at the specified times on the form.
7. Copies of all correspondence with the candidate should be sent to the ABCFP President and the CO to keep everyone informed. When candidates become anxious or confused, they often call the Board President and/or the CO. If they are uninformed, it gives our board and ABPP the appearance of not being coordinated organizations.
8. It is the responsibility of the review committee chair to forward work sample results to the CO and the examination chair must communicate the oral exam results to the CO.
Note: The ABPP Central Office will send the official letter of acceptance or failure to the candidate.

FORMAT FOR THE STAGE III ORAL EXAMINATION

The ABPP Examining Committee

The couple and family oral examination (Stage III) is conducted by a committee of three specialty certified examiners, one of whom serves as chair. If possible, the chair or a committee member should be a current board member. The examining committee must be comprised of examiners who have no significant prior, or current, personal, professional, or administrative relationship with the candidate or the clients in the work sample.

The board recognizes that specialists in CFP use a variety of approaches and techniques and have differing conceptual frames of reference, and that the effectiveness of professional practice is a function of many factors, including level of experience and theoretical understanding. The coordinator will make every reasonable effort to obtain an examination committee chair and member examiners whose areas of theoretical orientation, knowledge base, and professional interest are similar to those the candidate has set forth in his/her professional statement. The coordinator will then send the candidate the name and telephone number of the examination chair. The examiners will seek to confirm the candidate's competence within her/his espoused theoretical frame. One examiner may be certified in another related specialty, like clinical psychology. A fourth examiner should be identified to participate if one of the three examiners is unable to be at the examination. The candidate should be informed that, given the increasing number of specific theoretical positions and specialized techniques developing within the specialty of CFP, the candidate should anticipate a committee with examiners who share the candidate's broad theoretical orientation but may not have had wide experience with his/her particular focus or approach. A particular area of focus conveys specific competency/expertise in a subspecialty area of couple and family practice such as family violence, bicultural marriages, divorce mediation, couple and family forensic issues,

gay/lesbian couples, families with medical issues, etc. Therefore, the candidate should be prepared to discuss his/her area of focus (if any) with a minimum of technical jargon so as to easily communicate with board certified psychologists who may have less experience with this area of the candidate's practice. Nothing in these policies shall be construed as ascribing greater importance to any specific theory, orientation, intervention or technique over any other.

In order to assure as much standardization as possible of the examination process across the nation, the American Board of Couple and Family Psychology has established the following Stage III oral examination schedule. The general pace and sequence of topics must be followed so as to reduce to a minimum the possibility that candidates might receive differential treatment. Within each segment, however, there is room for variation in the immediate situation, as the best judgment of the examination committee warrants. Many topics will be interwoven throughout the examination, related topics may enter into a given subject's time slot, and there is no need to exclude these rigidly if they are relevant to the discussion. A topic may receive more cursory exploration in its time slot on the schedule only if it has been sufficiently covered earlier.

Sample Schedule for Examination Stage III

(Any consecutive 2 ½ to 3 ½ -hour period can be utilized by mutual agreement adapting to this format)

This schedule requires that the examiners have viewed the videos and reviewed all the written materials in advance.	Time period	Duration in minutes
Committee meets, organizes, members introduce Themselves and describe procedure	9:00-9:15	15
Exam on professional statement; general professional knowledge of CFP	9:15-10:45	90
Break	10:45-11:00	15
Exam on ethical and legal issues	11:00-11:30	30
Exam wrap-up discussion, questions, further information Candidate wishes to provide, return work sample	11:30-12:00	30
Committee votes and writes reports	12:00-12:30	30

Note: Any significant variations in this schedule must be for professional purposes, by mutual agreement between candidate and exam chair, and documented by mutual verbal

agreement on the audiotape of the exam describing the alterations and stipulating that they shall not serve as grounds for the appeal of a failed examination.

Conducting the Oral Examination

The Examiners' Responsibility

Examiners are requested to conduct the examination in a courteous, professional and collegial manner. The board expects that examiners will arrange and conduct an examination that is consistent with the policies and procedures stated in this manual. An examiner, in serving as a representative of the ABCFP and the ABPP, accepts responsibility to protect the welfare of the candidate, the work sample clients' confidentiality, and the integrity of the examination.

The relationship between the candidate and the examiners should be a peer relationship in which the candidate is considered a mature professional psychologist.

Since the candidate has already passed many requirements and has demonstrated expertise in the specialty in order to be seated for the oral exam, it is appropriate for examiners to presume an ability to pass unless the candidate clearly demonstrates otherwise.

Examiners should recognize that most candidates will experience anxiety in a face-to-face situation in which they are being evaluated by peers. Each examiner should behave in a supportive manner, thus creating the most favorable situation in which the candidate can demonstrate his/her high quality specialized competencies. The candidate will have read the *Manual for Oral Examinations* and should understand the guidelines for the examination.

Before the oral examination, the examiners are responsible for:

- ❖ Becoming familiar with the professional statement and other data furnished by the candidate (examiners must not write on the materials, as they are returned to the candidate);
- ❖ Carefully studying the recording of the Work Sample;
- ❖ Selecting the ethics vignettes, and the one submitted by the candidate;
- ❖ Preparing meaningful questions that relate to important concepts, issues, and problems generated by the Work Sample and the professional statement.
- ❖ Preparing a multicultural competency question should the issue not arise organically in the oral exam process.

The examination is a confidential, professional event. An examiner will never disclose what is learned about the candidate during the examination, except in the official report to the Board of Trustees of ABPP. All communications concerning the results of the examination shall be by Fax to the Executive Officer of ABPP via the chair of the examination committee. *It is not appropriate for a candidate to communicate with the examiners about the outcome of the examination.* If an examiner receives a letter from a candidate, it should be

forwarded to the Executive Officer of ABPP via the committee chair. Committee members shall adjust their expectations and questions so that they are appropriate to the candidate's practice context. If the candidate and/or his/her primary clientele are drawn from an American minority population (e.g., African/American, Asian/American, Latino, physically challenged) or from a particular setting (e.g., forensic, educational, county clinic, Christian counseling center), then questions and judgments of competency should be appropriate to that context.

The Senior Exam

The oral examination for the Senior Track is conducted in similar fashion to that of the two traditional tracks, with the major difference being the focus on the candidate's professional statement (since there typically is not a video work sample, although this continues to remain an option for the candidate) and history of contributions to the specialty of CFP. As a result, some of the ballot categories which apply to observed interviews (e.g., assessing the candidate's ability to form rapport with clients) may not apply.

Examiners should focus on directing the senior candidate to provide information which reflects his or her specialty competency from extended professional experience. This should include areas of consultation, contracted service responsibilities, special grants, program administration/supervision, graduate school, internship, or residency contributions, continuing professional education program presentations, program evaluation or research, professional publications in the practice of the specialty, and the candidate's current practice in CFP. The examination questions should reflect the candidate's knowledge of the CFP competencies and evidence based practice/evidence-based treatment strategies in the specialty.

Role of the Examination Chair

The chair is an experienced senior psychologist board certified in CFP by the ABCFP and is responsible for:

1. Communicating with the candidate about the time, place and other details of the examination arrangements. It is the responsibility of the chair to make the initial contact with the candidate.
2. Work with the coordinator to set up the examination committee. Committee selection should be done with consideration of diversity in regard to gender and ethnic background, as well as the general professional orientation of the candidate. The chair should contact the other members and is responsible for ensuring that all can arrange to be present at the designated time and place for the exam
3. Arrange for the audiotaping of the oral examination
4. Disseminating examination materials
5. Guiding the examination process to relevant subject matters that facilitate the exploration of each domain

6. Assuring that the exam is conducted in a courteous, collegial manner and in accordance with the timetable and procedures set forth in this Manual. The chair is encouraged to use the first few minutes of the examination period for introductions, putting the candidate at ease, giving directions to restrooms and drink machines, and giving the schedule of the day, including breaks. The chair is obligated to call a break in the exam at any time to advise the other examiners if the examination process ever falls below ABCFP's high standards for collegiality and courtesy.
7. Offering to give the candidate a break to think about his or her answer to the ethics dilemmas presented by the committee.
8. Leaving a few minutes at the end of the exam for questions from the candidate
9. Immediately following the conclusion of the oral exam, guiding the committee's writing of feedback materials for the candidate and transmitting these promptly to the central office
10. Communicating with ABPP Central Office and the ABCFP Board President about the details and results of the exam by sending in the completed rating forms.

Additional instructions for work sample reviewers, examiners, and chairs:

1. The review chair should hold a conference call among all three work sample reviewers if one committee member rejects the work sample in order to clarify the decision made by the committee member.
2. The exam chair should arrange for a fourth examiner to be ready as a "contingency" backup if one examiner must cancel at the last minute because of illness or another emergency.
3. The candidate's credentials should be available for the exam committee members to peruse, so they may have a better idea of the candidate's professional experience and be able to ask more informed questions at the examination.
4. Audio recording. Begin recording when the candidate enters room, and stop when the candidate leaves the room. Taping may be paused during the break.

Examiners may ask questions that are not specific to the professional statement or work sample, such as:

1. What are the candidate's criteria for making a referral to another provider of services?
2. What journals does the candidate read? What has been a significant article that influenced the candidate's clinical/professional practice?

The Training of Chairs and Examiners

The high-quality, collegiality, relevance, and standardization of the ABCFP certification process will be maximized by a clear and explicit examiner's manual, and the training and orientation of chairs and examiners drawn from a wide range of CFP certified specialists. The ABCFP shall conduct periodic training and orientation sessions for board certified specialists who wish to become examiners. The ABCFP shall conduct such training in a fiscally responsible manner with an attempt to coincide training with other board functions or examinations that may be scheduled.

- The ABCFP makes available a clear and detailed examination manual which discusses and explains the procedures and responds to questions and issues that have been raised frequently in the past.
- The ABCFP may provide training at professional meetings (in order to be fiscally responsible) for its board certified specialists who wish to serve as an exam chairperson or desire to improve their examination skills, if they have already served in this capacity. Preferably a chairperson has served as an examiner on a minimum of three committees.
- Each examination committee may have one "novice" examiner as a member so that he/she may obtain "on-the-job training." A fourth trainee may sit in and observe.

Scoring Competencies and Subdomains Criteria

The following competency domains are evaluated and constitute the examination. The board has adopted the competency framework presented in Stanton & Welsh (2011), *Specialty competencies in couple and family psychology*, Oxford University Press for the examination process. Other literature may extend the material provided in the book and reflect on-going research and clinical practice innovations. Candidates are encouraged to review recent issues of specialty journals (e.g., *Journal of Family Psychology*; *Couple and Family Psychology: Research and Practice*) in preparation for the exam.

Foundational Competencies

- Relationships
- Individual and Cultural Diversity
- Ethical Legal Standards Policy
- Professionalism
- Reflective Practice/Self-Assessment, Self-Care
- Scientific Knowledge and Methods
- Interdisciplinary Systems

- Evidence-based Practice

The eight functional competencies include:

- Assessment*
- Intervention*
- Consultation*
- Research/Evaluation
- Supervision
- Teaching
- Management/Administration
- Advocacy

Scoring the Oral Exam. In the oral examination candidates must be rated as functioning acceptably in *the first 8 competencies* in order for an examiner to vote to award the diploma. Failure in any one area requires a non-award (failure) decision by that examiner.

NOTE: Before arriving at a pass/fail decision, the examiner will carefully consider all of the examination areas to be rated and the examples provided. That is, examiners should wait until the end of the examination before determining their pass/fail decisions for any area.

Scoring the Senior Candidate's Performance

The evaluation of the Senior Candidate focuses on the professional statement and the candidate's demonstration of specialty competency and her/his contributions to the field rather than a clinical work sample. As such, the oral exam needs to focus on the candidate's contributions to the specialty of CFP and how his or her practice and research forms a nexus with each of the competencies. The Competency Essay specifies that the senior candidate must demonstrate excellence in two and proficiency in one of the competencies by providing a narrative and materials that support those levels of the knowledge, skills, and attitudes for the specified competence. The examination will verify the demonstration of the expected level of competency.

Since there is typically no work sample to directly observe the candidate's level of competency in each of the scales and domains, the examiners will need to take special care in eliciting sufficient information/data for scoring the candidate on each scale. This data should be contained within the professional statement (including ethical dilemma) and the competency essay, as well as professional activities. In some examination situations it may become necessary to present hypothetical clinical situations that help to more clearly understand the candidate's assessment methodology, intervention strategies, and how the candidate uses interpersonal relationships to maximize strengths and minimize limitations

within a couple or family context. Two hypothetical ethical vignettes (in addition to the candidate's submission of an ethical dilemma) will also be presented during the oral exam.

Committee Scoring Process

The examination committee shall use the following procedure to come to a consensus score for the candidate. Each committee member shall complete Form D to denote their evaluation of the candidate's demonstration of the specialty competencies.

First Ballot. Each examiner independently fills out the ballot prior to discussion with the other examiners. The candidate is assigned a pass, fail, or borderline rating. If the candidate receives passing scores on each of the competencies, then he/she has passed the oral examination. If the candidate receives failing scores on any of the first eight competencies, then he/she has failed the oral examination. If there is not a clear pass or fail, the examiners discuss their ratings with each other and then move to the second ballot.

Second Ballot. If a second ballot is necessary, it follows this discussion among the examiners. During this discussion, the examiners should explain their ratings and offer their assessments of the candidate's strengths and weaknesses. The examiners then fill out ballot #2, using the same system as for ballot #1.

Communication of A Candidate's Performance

It is inappropriate for an examiner to communicate to other people as to the performance of a candidate and as to whether he/she has passed or failed. The chair should inform the candidate at the end of the exam that the notification of pass or fail will come from the ABPP office within six weeks of the exam.

The Examining Committee's Report to the Candidate

Successful (passing) candidates will receive a congratulatory letter from the ABPP central office noting that they have invested a great deal in this process. The report should serve to relieve anxiety, reinforce competence, and welcome the newly certified couple and family psychology specialist to the ABPP and invite membership as a fellow in the American Academy of Couple and Family Psychologists.

For the unsuccessful candidate, it is important for the chair to be sensitive, diplomatic, and constructive in writing the report, as it is certain to be read very carefully by the candidate. The report should be objective, descriptive, and prescriptive. The prescriptions should be realistic and appropriate to the extent that if the candidate follows the recommendations, he/she would likely be in a position to fare better upon re-examination. Likewise, it is important not to be judgmental, inflammatory, or pejorative in words or tone.

The report of the examining committee that is sent to the unsuccessful candidate is to be written by the chair of the examining committee (in order to avoid having the ABPP

Executive Officer take responsibility for translating committee ratings for the candidate). Any other issues that the examining committee wishes to identify should be stated in the letter to the coordinator.

1. The report of the examining committee about an unsuccessful candidate should reflect the ratings and comments of the committee as a whole. It should be written with the clear understanding that the report will be sent unedited by the ABPP central office to the candidate, and will also become a part of the candidate's file in the ABPP central office.
2. The report should be written to achieve three essential objectives:
 - a. Documentation of the outcome of the examination and the rationale or support for that outcome. This should include comments of the examiners related to the ratings on the six oral examination areas.
 - b. Identification of specific areas of weakness manifested in the candidate's performance, along with suggestions for how the candidate might address these areas in order to confidently and successfully approach re-examination.
 - c. Identification of specific areas of strength in the candidate's performance, to emphasize the competence of the candidate and to provide appropriate balance in the report.
3. The general structure and format of the report should be:
 - a. An opening statement which sets a positive and constructive tone regarding the candidate's overall professional competence and interaction in the examination. It should be realistic and not include unjustified positive statements.
 - b. The report should address in sequential order each of the scores in the examiners manual. For each scoring category that is rated a weakness, specific suggestions for remediation should be offered.
 - c. Finally, if the preceding has been sufficiently lengthy that a summary is needed, the summary should address the candidate's overall performance, a review of weakness areas and suggestions for remediation, and a review of strength areas to reiterate the collegial and constructive intent of the report.
4. Some caveats to keep in mind when writing a report to an unsuccessful candidate:
 - a. The report from the chair should focus on the candidate's performance on the examination, without any assumption that the unsuccessful performance is necessarily characteristic of the candidate's usual practice.
 - b. For the purposes of the report, the chair should assume that all unsuccessful candidates will want to improve their performance and re-take the exam in the near future. If the chair encounters problems in terms of reporting on a candidate's performance, the chair should consult the other members of the examining committee first, then the coordinator if concerns still exist.
 - c. Unsuccessful candidates have a right to know why they failed the examination. For this purpose it is important for the chair to provide clear examples, but avoid being overly specific. Although the chair need not provide an example for each problem identified in the report, the chair

should have such examples available in clear, concise, and accurate documentation, in the event of an appeal or inquiry. The chair should not report problems that cannot be supported by the documentation available to the chair. In using examples, the chair should feel confident that it has been understood exactly what the candidate did and what the problem was. If this is not accurate, the candidate may have a legitimate basis for a complaint that the fail judgment was based on inaccurate information.

- d. The committee should not offer undue encouragement to the candidate if the committee believes that the candidate is unlikely to remedy the weaknesses that were responsible for the failure.

Letters to successful and unsuccessful candidates should be sent on ABPP (or ABCFP) letterhead rather than on letterhead from the examiner's university, practice, etc.

APPEAL GUIDE

BOARD CERTIFICATION EXAMINATION IN CLINICAL PSYCHOLOGY AMERICAN BOARD OF PROFESSIONAL PSYCHOLOGY

A. **Specialty Board Appeals Committee:** The ABCP President appoints one member of the Board of Clinical Psychology to coordinate appeals. For each appeal an *ad hoc* committee is appointed to review the merits of the appeal.

B. **Appealable Decisions:**

The following decision of the Specialty Board may be appealed:

1. Denial of meeting specialty specific qualifications (Candidacy Determination).
2. Failure of the Work Sample (Examination: Work Sample Component).
3. Failure of the Oral Examination (Examination: Oral Component).
4. Failure of Maintenance of Certification MOC).

Note: An appealable decision shall not be final until the appeal process has been completed.

Filing an Appeal: The Appellant may challenge an appealable decision within 30 days of the receipt of 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 Specialty Board's **procedures**.

The appeal should be addressed to the President of the Specialty Board who, in turn, shall refer it to the Coordinator of Appeals who will appoint an *ad hoc* Appeals Committee. The Appeals Committee reviewing the appeal must complete its review within 60 days after receipt of the request for appeal letter.

Appeals related to the denial of meeting general requirements for candidacy shall be forward to the Executive Officer for resolution by the ABPP Standards Committee, whose decision on these requirements is final.

C. **Score and Conduct of Appeal.** The procedural issues addressed by the Appeals Committee shall be limited to those stated in the appeal request letter and which meet the requirement of an appealable procedural issue. If legal issues appear to be involved, the Appeals Committee may consult with the ABPP legal counsel.

The Appeals Committee shall implement a process of review primarily based upon information before the Specialty Board at the time of the decision. The Appeals Committee may seek further information from the Chair and members of the Examination Committee, the Credentials Review Committee, the Maintenance of Certification Director, the Appellant, or others as appropriate to the issues raised. The process is not a *de novo* review, but a review of the challenge to the Specialty Board decision.

The Appeals Committee shall confer as soon as possible upon the Specialty Board's receipt of the Appellant's letter requesting an appeal and shall complete its review and decision

addressing each issue(s) raised by the Appellant, within 60 days. Failure to complete the review in the 60-day period shall move the appeal to the Board of Trustees for resolution.

D. Decision and Report of Appeals Committee. The decision of the Specialty Board should be affirmed unless there was a failure by the Specialty Board to adhere to its procedures. In any case, the procedural error would have to be such that it may substantially affect the decision.

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 ABCP Board will depend on what is being appealed. For example, if an appeal is upheld regarding a Work Sample or Oral Examination, the outcome will be voided and a new Work Sample or Oral Examination will be offered with no additional fee assessed to the Appellant. It is also possible to refer the matter back to the Examination Committee. With the exception of the Committee Chair, the new committee formed for reexamination will remain blind to the past failure of the Appellant and all members, including the Chair, will remain blind to the reasons for the past failure. From the time the new committee is established, there will be 60 days for the exam to be held, which will be stated in the letter from CO.

If an appeal is upheld regarding Maintenance of Certification, the remedy will be to allow the Appellant to resubmit MOC materials with no additional fee assessed to the Appellant. A new MOC Reviewer will be appointed to review the Appellant's materials, and that individual will be unaware of the previous failure decision. The review process will begin anew. From the time the new Reviewer is identified, he/she will have 60 days to complete the new review and this will be stated in the letter from CO.

In extraordinary circumstances, another remedy may be provided. The Appeals Committee, however, may not "pass" an Appellant or re-grade an examination or MOC materials.

The report of the Appeals Committee shall address each issue raised by the Appellant and its decision related thereto and the basis for that decision. The report shall be forwarded to the Executive Officer through the Specialty Board President. The report shall then be forwarded to the Appellant under the Executive Officer's signature on the ABPP stationary. Editing for format and for legal considerations on advice of the ABPP legal counsel may be undertaken by the Executive Officer if necessary.

MAINTENANCE OF CERTIFICATION: Couple and Family Psychology

Maintenance of Certification (MOC) involves a process of self-examination that is reflected in the documentation of a specialist's professional development since last examination or last review. In the course of this self-examination, specialists will survey their professional activities and document their ongoing professional development using the Continuing

Professional Development Grid combined with a written Narrative. The Specialist must pass both requirements to maintain board certification (see Forms I, J, K and L in the Appendices).

MOC COMPONENTS

Specialists document their ongoing professional development using two structured methods: 1) the ABCFP *Specialty Continuing Professional Development Grid (SPCDG)* and 2) a written narrative. Both MOC components must meet established ABPP and ABCFP criteria to maintain board certification.

MOC REQUIREMENTS

- 1) ABCFP Continuing Professional Development Grid:
 - a. Specialists will record their involvement in the designated categories: collaborative consultation, teaching & training, ongoing education, development and application of research and innovative methodologies/programs, and professional leadership. A **total** of 40 hours/credits of continuing development are required (see Form I).
 - b. Specialists are expected to complete the ABCFP continuing professional development grid by indicating the number of continuing professional development credits in the above-referenced categories for the previous two year period. In all categories, a maximum number of allowable credits are designated. To avoid receiving dual or multiple credits for the same activity, the specialist should document an activity only once and only in one category even though it may fit under several categories.
 - c. The total number of credits recorded on the grid must be equal to or greater than 40 across all categories for the two year time period. While specialists may apply the maximum number of continuing professional development credits in each category to reach the 40 hours of required continuing professional development, they are also encouraged to include all their activities on the Grid in order to convey a better understanding of their professional activities as they relate to the foundational and functional competencies. Specialists must demonstrate evidence of continued competence in each of the nine foundational competencies as well as in at least two of the functional competencies in order to be successful in the MOC process. The foundational competencies include: professional identity as a couple and family psychologist, relationships, individual and cultural diversity, ethical and legal standards/policy, professionalism, reflective practice/self-assessment and self-care, scientific knowledge & methods, interdisciplinary systems, and evidence-based practice.

The functional competencies include: assessment/diagnosis/ conceptualization, intervention, consultation, research and/or evaluation, supervision, teaching, management/administration, and advocacy

Specific instructions for filling out the excel grid. Please note, the grid may be filled out directly in the Excel file or may be printed out and filled out by hand, then scanned into an electronic document suitable for submission.

A. Excel Grid Instructions:

- There are five tabs on the Excel file, one for each professional activity: collaborative consultation; teaching and training; ongoing education; development and application of research and innovative methodologies/programs; and professional leadership.
- To complete the grid, the specialist must open each tab and proceed to enter descriptions of activities, indicate the credit hours in each activity, and check which competency domain they refer to (foundational or functional). Please note that some activities may cross several of the competencies. Check all that apply.

		FOUNDATIONAL										FUNCTIONAL												
		Foundational	Individual & Cultural Diversity	Ethical/legal Standards/Practices	Professionalism	Behavioral/Practical Assessment	Scientific Knowledge & Methods	Measurement Systems	Evidence-Based Practice	Professional Use Of P	Assessment	Intervention	Consultation	Research/Evaluation	Supervision	Teaching	Management/ Administration	Advocacy						
Research and Methodologies																								
Publishing Peer Reviewed Articles	20						X						X											
Publishing Book Chapter	10																							
Other Engagement in the Development and/or Application of Research and Innovative Programs	10																							
Practice Outcome Monitoring (i.e., strategies for assessing client outcomes involvement in institutional QA monitoring)	10																							
Reviewing Professional Manuscripts (i.e., books, J)	10																							
Total	20																							
Please describe the specific activities in which you participated to obtain credits in research and Methodologies:																								
Peer Reviewed Publications:																								
Smith, J., (2014). An examination of competency in senior psychologists.										Psych Journal					, 6, 254-258					= 10 pts.				
Robins, M. & Smith, J. (2014). Comparison of paid evidence-based therapies.										Science for Us,					13, 40-45					= 10 pts.				

- See example above, for the research and methodologies section. This specialist has published two peer-reviewed articles worth 10 credit hours each. They entered a total of 20 hours in the cell across from “Publishing Peer Reviewed Articles”. They have checked one foundational competency (scientific knowledge and methods) and one functional competency (research/evaluation) for this entry.
- The specific credit amounts per activity are noted in comments which can be accessed by running/hovering the cursor over the upper right hand section of the cell (red triangle) of each subdomain. For example, in the collaborative consultation section, the first subdomain is: case consultation (provided or received). For this subdomain-5 hours of consultation equals one credit (see example below).

		Profe:	Scier	Ethi						M
1										
2	Collaborative Consultation									
3	Case Consultation (provided or received)									
4	Journal Club									
5	Research Groups									
6	Mentoring									
7	Total									
8										
9	Please describe the specific activities in which you partic									
10										
11										
12										
13										
14										

5 consultations as consultant or consultee = 1 credit

- Write the number of hours for each subdomain in the yellow cell directly adjacent to it. When you write in a number, the cell will turn white to indicate it has been completed. The Total will be automatically calculated for you and placed in the Total column.
- Remember to click on each of the 5 tabs and fill in your information for each area.

2) ABCFP Narrative:

The Narrative is 750 words maximum and includes a brief description of:

- a) Current professional practice

- b) An ethical issue the Specialist has considered and how it affected his/her behavior or thinking
- c) How the Specialist evaluates the effectiveness of his/her professional work
- d) Activities in which the Specialist has participated in order to maintain competence within the foundational competencies for which he/she did not seek credit on the Grid
- e) How the Specialist maintains his/her skills in two of the ABCFP functional competencies
 - If the specialist has “drifted” from an identity with the clinical specialty, the specialist needs to provide a brief description of how he/she is maintaining the specialty-related functional competencies.
 - Please note, if the specialist submits a narrative that is too long, all the materials will be returned un-scored and the specialist will be instructed to shorten the narrative to the allowed 750 words.

SCHEDULING

MOC reviews will be regularly conducted. One year before the Specialist is due for MOC, the ABPP Central Office will notify the Specialist and ABCFP so that the Specialist and ABCFP may successfully satisfy their required activities in a timely manner.

Specialists boarded before January 1, 2015 may waive their obligation to participate in maintenance of certification. Specialists awarded certificates subsequent to January 1, 2015 must complete maintenance of their certificates at 10 year intervals, unless they seek and obtain a “retired” status from the ABPP Central Office.

REVIEW PROCESS

ABCFP will use the following *Review Process* to evaluate MOC submissions:

- 1) A trained “MOC reviewer” will rate the specialist’s material (Grid and Narrative) by the established ABCFP MOC standards. If the MOC reviewer rates the materials as a pass, then the specialist is awarded a MOC Certificate.
- 2) If the reviewer rates the specialist’s material as a non-pass, the reviewer forwards the outcome results to the ABCFP director of MOC, who will designate review by a second MOC reviewer. The second MOC reviewer will not be aware of the initial reviewer’s outcome decision.

- a. If the second reviewer rates the specialist's material a non-pass, the specialist will be notified that his/her certificate is at risk to not be maintained. The specialist will then be given the opportunity to remediate the grid and/or narrative, re-submit, and begin the MOC evaluation process anew, with a new set of reviewers.
 - b. If the second reviewer rates the specialist's material as a pass, the reviewer forwards the materials to a third (blind) reviewer, designated by the ABCFP director of MOC.
 - c. If the third reviewer rates the material as a pass, the specialist's certificate is maintained.
 - d. If the third reviewer rates the material as a non-pass, the specialist is given the opportunity to remediate his or her grid and/or narrative, resubmit the grid and/or narrative, and then begin the MOC process again with a new set of reviewers.
- 3) The specialist who does not successfully pass the process as defined above (rated as a "non-pass" by two of the three Reviewers) is allowed one year to resubmit the MOC material (grid and narrative) to the ABCFP for reconsideration. When the specialist resubmits the grid and narrative, the evaluation follows the same process.
- a. If the specialist's resubmitted grid and narrative passes this second complete submission, the certificate is maintained.
 - b. If the specialist's second submission is reviewed and determined not to meet the foundational and/or functional competencies set by the ABCFP, the specialist does not maintain MOC certification.
 - c. If the specialist does not submit a second grid and narrative for review within one year of notice of not passing the first submission review, the specialist does not maintain MOC certification.

SCORING

ABCFP will evaluate the specialists' grid and narrative, using criteria developed by ABCFP and approved by the Standards Committee of the Board of Trustees (BOT).

At any point during the review process, if reviewers are unable to determine whether a specialist meets the standards for MOC, the specialist may be asked to engage in a conversation with the reviewer about the activities documented in the grid and narrative.

Specialists completing the MOC process will be provided summary feedback on their MOC effort. Their feedback will consist of a brief letter for pass decisions and a more extensive

one for non-pass decisions. For non-pass decisions, feedback will be specific, concise, and relative to MOC criteria. The executive officer of ABPP will execute the pass notification letters.

The ABCFP will prepare the notification for specialists who do not pass and then send it to the executive officer of ABPP, who will review, edit, and, if necessary, seek legal counsel for these notifications. In no instance may substantive changes be made to the ABCFP decision by the executive officer. Although the central office of ABPP will send notifications to Specialists who do not pass, the ABCFP reviewer will have provided a balanced summary of the non-pass decision regarding MOC that will be attached to the notification.

ABCFP will conduct MOC procedures with fair and reasonable pass/no pass criteria, with opportunity for remediation before determining failure, and with a fair appeal process.

- Specialists are to be treated in a constructive, respectful, and collegial manner. Feedback to the specialist concerning MOC is part of the MOC process.
- Accommodations will be made consistent with the Americans with Disabilities Act.
- ABCFP reviewers will show impeachable impartiality in the review process.
- In the event of a specialist's appeal of an ABCFP decision regarding MOC, appeal team members having a significant personal or professional relationship with the Specialist must recuse themselves from serving as appeal team members.

APPEAL PROCEDURE

There are two levels of examination MOC decision appeal, one at the ABCFP level, and the other at the Board of Trustee level.

1) American Board of Couple and Family Psychology Level:

A specialist may appeal the decision regarding MOC certification on procedural grounds. See Form F-1 in the Examination Manual for details. Additional information on the appeal process may be found on page 35 in the Section: Appeals Guide.

2) Board of Trustee Level:

Specialists may appeal specialty board level decisions to the Board of Trustees if there is an allegation that ABCFP did not follow the specialty board's MOC procedures or their own specialty board appeal procedures. The Board of Trustee level appeal is the final level of appeal (see: ABPP Policy and Procedures: Sections AC and L).

Forms Used in Board Certification Process

At the end of this Examination Manual readers will find the forms that must be filled out as a candidate progresses through the board certification process in CFP. The purposes of the forms are as follows:

1. Form A is used by the ABPP office to track the candidate's progress from his/her Stage I application and fees until board certification.
2. Form B is used by the ABPP office and the ABCFP coordinator to track the candidate's progress in submitted the materials for Stage II: The Work Sample.
3. Form C describes the scoring procedures for the examination process. Detailed information about the scoring process to be used by the committee are included with this form.
4. Form D is used by the oral exam committee to score the candidate's performance on the oral examination. Form D will be filled out, signed, and submitted to the oral examination chair by each member of the oral exam committee.
5. Form E (included above in the section of this manual that is given to candidates) is used to obtain permission from clients whose videotaped sessions will be used in Stage II of the candidate's application.
6. A candidate's appeal guide is included and will be sent to unsuccessful candidates in order that they might appeal a committee's decision, describing the appeal process.
7. Form F-1 is completed by the examiners in the event that a negative decision is appealed by the candidate.
8. Form G is used to get the candidate's feedback on how the Stage III Oral Examination was handled by the examining committee.
9. Form H allows examining committee members to rate one another's handling of the oral examination.

A Reimbursement Request Form should be obtained from ABPP Central Office for examiners to complete.

FORM A: Steps in the ABCFP Certification Process

STEPS	DATE
Applicant	
STAGE 1: Applicant completes Application Form and submits to Central Office with necessary supporting documentation and application fee.	
The ABPP central office reviews the application for generic criteria. If criteria met, application file sent to CFP credential review chair.	
CFP review chair identifies committee and they check eligibility against specialty specific criteria. If criteria met, applicant becomes a candidate for the examination. Central office is notified of decision.	
If applicant is not approved, ABPP central office informs applicant of the fact and the reasons.	
STAGE II: If application is approved, applicant begins the preparation of <u>work sample</u> , which must be submitted to the ABCFP Review Chair. The work sample must be submitted within one year of notification.	
Utilizing the contents of the submitted professional statement, the Review Chair and the Review Committee, who review the work sample. If the work sample is found acceptable, the candidate is notified by the Review Chair. The Review Chair appoints an examination chair and begins to work out details of Stage III with the chair. The candidate must send the fee/registration for the oral examination to central office before final exam arrangements are verified. Central office is notified of the decision re: acceptance of work sample.	
If the work sample is found unacceptable, the applicant is notified by the central office of the reasons for the decision, and the current examination process is terminated at that point. With payment of a new fee, a new sample may be submitted after six months have elapsed.	
STAGE III: Oral examination is held according to details worked out by chair and candidate.	

<p>If Stage III of the examination is passed, the candidate is notified through ABPP Central Office, and may begin immediately to use the title and benefits. Central office is notified by Fax of the decision re: the oral examination. For successful candidates the diploma is conferred by mail in about 45 days.</p>	
<p>The newly certified couple and family specialist is encouraged and expected to become active in the ongoing evolution and execution of the ABCFP Examination process (see the notes at the end of the application form) and to participate in the various projects of the <u>American Academy of Couple and Family Psychology (AACFP)</u>. Materials about AACFP are automatically sent to the new Board Certified) by the central office in the examination results letter.</p>	

FORM B: CFP Board Certified) Work Sample Checklist

Candidate	Central Office	Examiner	Materials
			An electronic copy of the professional statement
			An electronic copy of the intervention or assessment contextual and supplementary information, plus family member(s) authorization Form E; alternatively material for a teaching, supervision, or consultation sample
			An unedited video, submitted digitally, which is comprising the work samples, in which both the Candidate and all others are visible and audible
			All raw materials and protocols, with any answer sheets, profiles and computer printouts in electronic form.
		ASSESSMENT WORK SAMPLE (See text for detail)	
			Theoretical rationale for procedures used
			Formulation and discussion of the problem
			Diagnosis (according to some formal system in standard use)
			Candidate's evaluation of the assessment
		INTERVENTION WORK SAMPLE (See text for detail)	
			Theoretical rationale for interventions used
			Formulation of goals and rationale for selecting this particular interview for work sample
			Discussion of ethical issues involved
			Candidate's evaluation of this intervention
			Materials must have been collected within two years of submission and submitted within one year after Stage I acceptance.

FORM C: ABCFP Oral Examination Scoring Procedure

Specialty Competency Evaluation

Board Certification is awarded to individuals who demonstrate specialty level competency in couple and family psychological practice. We are looking for evidence of both depth and breadth of knowledge. The successful candidate is one who demonstrates specialty level knowledge, skills, and attitudes in the competency domains. The board has adopted the competency framework presented in Stanton & Welsh (2011), *Specialty competencies in couple and family psychology*, Oxford University Press for the examination process. Other literature may extend the material provided in the book and reflect on-going research and clinical practice innovations. Candidates are encouraged to review recent issues of specialty journals (e.g., *Journal of Family Psychology*; *Couple and Family Psychology: Research and Practice*) in preparation for the exam.

Foundational Competencies

1. Professional Identity as a Couple and Family Psychologist
2. Ethical and Legal Competency
3. Diversity Competency
4. Interpersonal Interaction Competency

Functional Competencies

5. Conceptual and Scientific Competency
6. Case Conceptualization Competency
7. Assessment Competency
8. Intervention Competency
9. Consultation Competency (if elected by the applicant)
10. Supervision Competency (if elected by the applicant)
11. Teaching Competency (if elected by the applicant)

Each competency area is scored as Passing, Borderline, or Failing.

FORM D – Ballot for Rating Competencies in Oral Examination

Evaluate whether the candidate evidences the knowledge, skills, and attitudes in the competencies, but note that in the case of Senior examinations, some categories may not apply. Specifications of KSAs and the behavioral anchors are quoted from Stanton & Welsh (2011).

Candidate's Name:

1. PROFESSIONAL IDENTITY AS COUPLE AND FAMILY PSYCHOLOGIST	Pass	Border-line	Fail
<p><i>Knowledge</i> (A) Knowledge of the specialty of CFP (A.1) Command of specialty knowledge (A.1.1) Understands and capably articulates advanced specialty knowledge in the foundational competencies (A.1.2) Understands and capably articulates advanced specialty knowledge in the functional competencies</p> <p><i>Skills</i> (B) Evidence specialty skills (B.1) Command of skills and techniques in the CFP (B.1.1) Ability to demonstrate advanced specialty skills in the foundational competencies (B.1.2) Ability to demonstrate advanced specialty skills in the functional competencies (B.1.3) Ability to present and publish in the specialty (B.1.4) Ability to teach or supervise CFP</p> <p><i>Attitudes</i> (C) Identification as a CFP (C.1) Identifies as a CFP based upon demonstration of competence (C.1.1) Aware of the ethical requirements for identification as a CFP (C.1.2) Independently pursues involvement in specialty organizations (C.1.3) Completes ABPP examination in the specialty (C.1.4) Develops or leads education and training programs in the specialty (C.1.5). Pursues CFP continuing education” (Stanton & Welsh, 2011, p. 247)</p>			

2. ETHICAL AND LEGAL COMPETENCY	Pass	Border-line	Fail
<p><i>“Knowledge</i> (A) Ethical and legal knowledge (A.1) Command of ethical and legal knowledge related to CFP</p> <p><i>Skill</i> (B) Awareness and application of ethical decision-making model (B.1) Intentional inclusion of relevant ethical and legal principles in all aspects of professional activity in CFP</p> <p><i>Attitudes</i> (C) Commitment to ethical and legal development (C.1) Strives to continually improve in the competency (A.1.1) Understands the APA code of ethics as applicable to the practice of CFP, with awareness of the limitations of the code when applied to work with couples and families (A.1.2) Understands the attendant ethics literature and applicable guidelines applicable to the practice of CFP (A.1.3) Awareness of the scope of family law relating to CFP in the specialist’s area of practice (A.1.4) Understands common legal and ethical issues in the specialty and demonstrates advanced knowledge of the literature regarding management of those issues (B.1.1) Ability to articulate the ethical decision-making model used to reason through ethical dilemmas (B.1.2) Ability to reasonably foresee ethical and legal conflicts that present with some regularity in the practice of couple and family psychology (B.1.3) Able to identify, analyze, and proactively address legal and ethical conflicts that arise during the course of providing couple and family psychology services (B.1.4) Professional writings, presentations, research, teaching, supervision, intervention, and consultation will represent efforts to include ethical principles and standards related to couple and family psychology (C.1.1) Evidence of continued development in the competency (C.1.2) Would be characterized as managing rather than avoiding risk (C.1.3) Takes responsibility for continuing professional development of knowledge, skills, and attitudes in relation to ethical-legal-standards and policies relevant to couple and family psychology” (Stanton & Welsh, 2011, p. 196)</p>			

3. DIVERSITY COMPETENCY	Pass	Border-line	Fail
<p><i>“Knowledge</i> (A) Self and others shaped by ICD and context (A.1) Understands the individual, interpersonal, and contextual factors that shape one’s perception of ICD factors in others (A.2) Understands the factors that shape the cultural experiences of others. (A.3) Knowledge of the CFP literature for working with multicultural clients</p> <p><i>Skill</i> (B) Perform culturally centered CFP functions (B.1) Ability to provide culturally centered CFP clinical services (B.2) Ability to provide culturally centered CFP training (A.1.1) Knowledge of factors that contribute to individual and societal perceptions about individual and cultural diversity factors in others. (A.1.2) Awareness through cultural self-assessment about the CFP specialists’ perceptions of others that are different from their own (A.2.1) Knowledge of cultural diversity elements in couples and families, including normal family cultural patterns, worldviews and values, and macrosystemic factors (A.2.2) Knowledge of factors that contribute to intracultural variations between family members and their contexts, including identity models, acculturation difference, and multiple identities. (A.3.1) Knowledge of the major theoretical and empirical contributions to providing CFP clinical services to multicultural populations. (B.1.1) Conducts culturally centered CFP assessment (B.1.2) Conducts culturally centered CFP intervention (B.1.3) Provides cultural centered CFP consultation (B.2.1) Provides culturally centered CFP teaching (B.2.2) Provides culturally centered CFP supervision (B.2.3) Conducts culturally centered CFP research</p> <p><i>Attitudes</i> (C) Culturally centered attitude and commitment (C.1) Strives to develop and maintain a culturally centered perspective (C.2) Demonstrates commitment to social justice (C.1.1) Commitment to perennial development (C.1.2) Promotes multiculturalism within CFP (C.2.1) Commitment to serving marginalized couples and families (C.2.2) Commitment to advocate for policies that promote equity for marginalized (C.2.3) Commitment to intervene in oppressive macrosystems” (Stanton & Welsh, 2011, p. 212)</p>			

4. INTERPERSONAL INTERACTION COMPETENCY	Pass	Border-line	Fail
<p><i>“Knowledge</i> (A) Knowledge of interpersonal relations (A.1) Knowledge of systems, relationship, group, conflict, and communication theory (A.1.1) Understands, conceptualizes, and evaluates interpersonal interaction from systemic perspective (A.1.2) Understands and capably articulates key concepts of relationship, couple, family, group, conflict, and communication theory (A.1.3) Demonstrates knowledge regarding the complex nature of CFP role in interpersonal interactions in treatment</p> <p><i>Skills</i> (B) Interpersonal, affective, and expressive skills (B.1) Creates and maintains effective relationships with clients, including the ability to manage interpersonal conflict and model effective communication (B.1.1) Ability to create therapeutic relationships with the range of clients in CFP (individuals, couples, families, and larger social organizations), including multigenerational systems (B.1.2) Ability to manage conflict, complexity, and multiple perspectives with equity in professional interactions (B.1.3) Ability to communicate clearly and effectively in professional interactions (B.1.4) Ability to monitor interpersonal interactions in vivo and correct problems (B.1.5) Ability to facilitate treatment termination effectively</p> <p><i>Attitudes</i> (C) Values constructive relations (C.1) Commitment to facilitating positive interpersonal relations (C.1.1) Aware of differences in perspective and tolerant of differences (C.1.2) Comfortable with ambiguity in interpersonal relations (C.1.3) Values each person in professional relationships and is committed to equitable treatment (C.1.4) Personally receptive to feedback ” (Stanton & Welsh, 2011, p. 229)</p>			

5. CONCEPTUAL AND SCIENTIFIC COMPETENCY	Pass	Border-line	Fail
<p><i>“Knowledge</i> (A) Scientific foundation of CFP (A.1) Command of specialty epistemology, scientific knowledge, and scientific methods (A.1.1) Demonstrates advanced knowledge and capably articulates a systemic epistemology, including a systemic paradigm and key concepts, as well as the critiques and contemporary variations on a systemic orientation (A.1.2) Demonstrates advanced level of CFP scientific knowledge and scientific methods (A.1.3) Demonstrates advanced level of understanding regarding application of CFP epistemology and science to specialty practice</p> <p><i>Skills</i> (B) Scientific foundation of CFP practice (B.1) Intentional inclusion of CFP concepts, scientific knowledge, and scientific methods in all aspects of specialty activity (B.1.1) Ability to think systemically and demonstrate systemic mental habits (B.1.2) Ability to apply systemic orientation to all CFP competencies (B.1.3) Ability to apply specialty scientific knowledge and scientific methods to all CFP competencies</p> <p><i>Attitudes</i> (C) Scientific mindedness (C.1) Independently values and applies CFP theory and scientific methods to specialty practice (C.1.1) Aware of epistemological options and ability to transition between paradigms in specialty practice (C.1.2) Independent attitudes that demonstrate scientific mindedness related to specialty practice (C.1.3) Conducts self-evaluation and invites peer review of specialty practice” (Stanton & Welsh, 2011, p. 17)</p>			

6. CASE CONCEPTUALIZATION COMPETENCY	Pass	Border-line	Fail
<p><i>“Knowledge</i></p> <p>(A) Foundational case conceptualization knowledge</p> <p>(A.1) Understands case conceptualization in the context of CFP service delivery</p> <p>(A.2) Knowledge of model for producing a case conceptualization</p> <p>(A.1.1) Understands the concept, purpose, and components of case conceptualization in the context of CFP service delivery</p> <p>(A.1.2) Understands the benefits of conducting a client-centered case conceptualization</p> <p>(A.2.1) Understands the steps in developing a problem formation</p> <p>(A.2.2) Understands the steps in developing a case formulation</p> <p>(A.2.3) Understands the steps in developing a treatment formulation.</p> <p><i>Skills</i></p> <p>(B). Able to produce a case conceptualization</p> <p>(B.1) Demonstrates the ability to construct a client-centered problem formulation</p> <p>(B.2) Demonstrates the ability to construct a client-centered case formulation</p> <p>(B.3) Demonstrates the ability to construct a client-centered treatment formulation</p> <p>(B.1.1) Able to establish a collaborative problem-solving frame</p> <p>(B.1.2) Able to clarify the couple/family’s presenting complaint and generate initial hypotheses through preliminary data-gathering functions</p> <p>(B.1.3) Ability to conduct an assessment and arrive at a clear description or diagnosis of the problem</p> <p>(B.2.1) Demonstrates the ability to identify pertinent information and organize the case information</p> <p>(B.2.2) Demonstrates the ability to apply systemic principles to explain the problem formulation data in light of the presenting problem</p> <p>(B.2.3) Able to identify and prioritize target areas</p> <p>(B.3.1) Demonstrates the ability to provide therapeutic feedback to and consensually set goals with the couple/family</p> <p>(B.3.2) Able to identify interventions and a plan for service delivery</p> <p>(B.3.3) Able to monitor couple/family progress and barriers to goal attainment</p> <p><i>Attitudes</i></p> <p>(C). Assessment perspective</p> <p>(C.1) Demonstrates a client-centered perspective in the case conceptualization process</p> <p>(C.1.1) Demonstrates a client-centered perspective when identifying the presenting problem, conducting the assessment, describing the problem, and giving feedback.</p> <p>(C.1.2) Collaborates with couple/family when developing a treatment formulation” (Stanton & Welsh, 2011, p. 44)</p>			

7. ASSESSMENT COMPETENCY	Pass	Border-line	Fail
<p><i>“Knowledge</i> (A) Foundational assessment knowledge (A.1) Understands nature of CFP assessment methodology (A.2) Understands the scope of CFP evaluation methods (A.3) Understands measurement and psychometrics of CFP assessment instruments (A.1.1) Applies a systemic paradigm to CFP assessment and understands the distinction between CFP assessment and traditional psychological assessment (A.2.1) Understands the range of CFP assessment methods (A.2.2) Demonstrates knowledge of the appropriate uses and misuses of CFP assessment methods (A.3.1) Awareness of psychometrics that constitute the various CFP assessment instruments, including strengths and weaknesses of using the tools in diverse contexts</p> <p><i>Skills</i> (B) Application of Methods (B.1) Ability to competently use multiple methods of assessment procedures appropriate to CFP (B.2) Demonstrates the ability to apply assessment methods to case conceptualization (B.1.1) Demonstrates the ability to select and use common CFP measurement instruments appropriate to the client’s sociocultural context (B.1.2) Demonstrates the ability to apply individual assessment instruments to CFP context (B.2.1) Demonstrates the ability to use CFP assessment methods to arrive at a description and explanation of individual and systemic problems that informs treatment planning. (B.3.1) Demonstrates the ability to communicate assessment findings in verbal and written feedback</p> <p><i>Attitudes</i> (C) Assessment Perspective (B.1) Has a client-centered assessment perspective (B.1.1) Values assessment as part of the therapeutic process (B.1.2) Values critical thinking, integration of information, and clear presentation of results (B.1.3) Committed to lifelong learning in the area of assessment” (Stanton & Welsh, 2011, p. 67)</p>			

8. INTERVENTION COMPETENCY	Pass	Border-line	Fail
<p><i>“Knowledge</i> (A) Knowledge of CFP evidence-based practice (EBP) and specialty interventions (A.1) Knowledge of CFP interventions and application of EBP to issues and populations (A.1.1) Understands and capably utilizes a systemic framework for specialty intervention (A.1.2) Demonstrates advanced knowledge of specialty EBP (A.1.3) Understands common factors in CFP interventions (A.1.4) Demonstrates advanced level of knowledge in the specialty interventions, including which interventions apply to particular treatment issues and/or populations</p> <p><i>Skills</i> (B) Ability to select and implement CFP interventions (B.1) Accurate selection of EBP interventions, effective implementation, and evaluation of intervention (B.1.1) Ability to review the case conceptualization, select prioritized intervention goals, and provide a rationale for the treatment plan that is understood and accepted by the client(s) (B.1.2) Ability to select interventions appropriate to the issue and/or population (B.1.3) Ability to demonstrate CFP common factors in treatment (B.1.4) Ability to provide the intervention in a manner consistent with its theoretical and/or evidence-based formulation (B.1.5) Independently evaluates treatment progress and treatment outcomes (B.1.6) Ability to modify the intervention to meet the specific needs of the client(s) and/or emerging circumstances during treatment (B.1.7) Collaborates effectively with other service providers (B.1.8) Seeks consultation when needed to ensure treatment outcomes</p> <p><i>Attitudes</i> (C) Values the role of research in intervention (C.1) Independently studies intervention research (C.1.1) Values intervention research and lifelong learning to remain current in intervention research (C.1.2) Values self-evaluation, peer review, and client feedback in specialty practice” (Stanton & Welsh, 2011, p. 86)</p>			

9. CONSULTATION COMPETENCY (if elected by the applicant)	Pass	Border-line	Fail
<p><i>“Knowledge</i> (A) Knowledge of CFP consultation (A.1) Knowledge of consultation theory, research findings, roles, assessment, and methodology (A.1.1) Understands and capably articulates the application of a systemic epistemology to consultation with individuals, groups, or organizations (A.1.2) Demonstrates theoretical and scientific knowledge of consultation models in the specialty and knowledge of the field in which the consultation is provided (A.1.3) Demonstrates understanding of the roles, assessment methodologies, and intervention methodologies for CFP consultation</p> <p><i>Skills</i> (B) Ability to conduct effective CFP consultations (B.1) Conducts needs assessments, provides reports and recommendations, conducts effective interventions, (B.1.1) Ability to apply systemic orientation and research to conduct a needs assessment using appropriate assessment methodologies and devices to provide focus to the referral questions (B.1.2) Ability to prepare written and verbal reports that include cogent recommendations to address the referral question and the results of the needs assessment (B.1.3) Ability to implement interventions based on organizational approval of recommendations using relationship skills, problem-solving, and implementation skills (B.1.4) Ability to demonstrate ethical and diversity competencies in consultation</p> <p><i>Attitudes</i> (C) Values ethical and collaborative interaction and practice (C.1) Independently values ethical practice that is culturally competent (C.1.1) Values and adopts the role of consultant as part of the CFP specialty (C.1.2). Values ethical and professional standards for consultation practice (C.1.3) Values collaboration between the consultant and the client (C.1.4) Values and respects individual and group diversity in consultation” (Stanton & Welsh, 2011, p. 112)</p>			

10. SUPERVISION COMPETENCY (if elected by the applicant)	Pass	Border-line	Fail
<p><i>“Knowledge</i> (A.1) Knowledge of supervision in CFP specialty (A.2.) Demonstrates advanced knowledge of CFP competencies (A.1.1) Knowledge of systemic concepts and theories applicable to teaching in a supervisory setting. (A.1.2) Knowledge of supervision models, theories, modalities, and research in CFP supervision (A.1.3) Knowledge of theories, research, and methods “to facilitate supervisee developmental progression in psychology competencies (A.2.1) Knowledge of foundational competencies, including ethics and diversity (A.2.2) Knowledge of functional competencies including case conceptualization, assessment, and intervention (A.2.3) Knowledge of identified developmental markers and competency levels expected of supervisees at specific stages of training</p> <p><i>Skills</i> (B) Provides effective CFP supervision (B.1) Application of systemic epistemology to CFP supervision (B.2) Ability to facilitate student development through CFP supervision (B.1.1) Skilled in applying systemic concepts, modalities, and research to teach systemic thinking about CFP practice (B.1.2) Ability to teach CFP competencies in the context of supervision (B.2.1) Able to form a supervisory alliance and accurately assess supervisee skills, developmental level, and training needs (B.2.2) Provides effective feedback and monitors progress in a supportive manner (B.2.3) Able to identify and remediate problems of CFP competence</p> <p><i>Attitudes</i> (C) Attitudes necessary for supervision in specialty (C.1) Commitment to growth in self and others (C.2) Commitment to professionalism (C.1.1) Values self-evaluation and invites peer review and supervisee feedback regarding the supervision experience (C.1.2) Committed to providing an environment where supervisees can realize their professional and personal potential. (C.2.1) Committed to displaying the highest levels of professionalism,, including integrity, respect for others, and professional courtesy (C.2.2) Values ethical and legal specialty practice and ensures personal and supervisee compliance with all relevant laws and ethical standards related to supervised experience.” (Stanton & Welsh, 2011, p. 153)</p>			

11. TEACHING COMPETENCY (if elected by the applicant)	Pass	Border-line	Fail
<p><i>“Knowledge</i> (A) Knowledge of teaching-learning in CFP (A.1) Knowledge of teaching-learning theory, methodology, and assessment in the specialty (A.1.1) Understands theoretical and applied methods of teaching a systemic epistemology, including critiques and variations on a systemic orientation; (A.1.2) Demonstrates advanced level of scientific knowledge and current evidence-based models of CFP as a foundation for teaching others (A.1.3) Demonstrates advanced level of knowledge of specialty curriculum (A.1.4) Demonstrates advanced level of understanding of CFP competencies</p> <p><i>Skills</i> (B) Education ability (B.1) Understanding, implementation, and evaluation of teaching-learning methodologies (B.1.1) Ability to facilitate understanding and adoption of a systemic orientation and specialty scientific methods (B.1.2) Ability to conceptualize and/or create comprehensive specialty curriculum (B.1.3) Ability to develop a course in a specialty content area that reflects current specialty research and methods and fits within a comprehensive CFP curriculum (B.1.4) Ability to apply teaching-learning methods appropriate to the specialty in instructional venues (B.1.5) Ability to teach specialty content in professional and applied publications and presentations</p> <p><i>Attitudes</i> (C) Values lifelong learning and teaching (C.1) Independently values ongoing learning and quality instruction of others (C.1.1) Independently identifies, reviews, and incorporates new specialty research and literature into teaching (C.1.2) Conducts self-evaluation and invites peer review and student feedback regarding the teaching-learning experience” (Stanton & Welsh, 2011, p. 171)</p>			

Circle one: Initial Ballot Second Ballot

Comments:

Examiner Signature and Date: _____

FORM F-1: CANDIDATE/EXAMINEE SUMMARY OF APPEAL

**BOARD CERTIFICATION EXAMINATION IN CLINICAL PSYCHOLOGY
AMERICAN BOARD OF PROFESSIONAL PSYCHOLOGY**

Appellant Name: _____ Region: _____

Date of Examination/MOC: _____ Location of Examination/MOC: _____

List of Appellant's Examiners (if applicable):

- 1.
- 2.
- 3.

Note: The only basis for an appeal is the consideration of procedural error. Appeal should be sent directly to the ABPP Executive Officer in the ABPP Central Office.

Appeal refers to allegations regarding: (check)

- Application: Candidacy Determination ()
- Examination: Practice Sample Component ()
- Examination: Oral Component ()
- MOC ()

Relevant procedural grounds for appeal raised by Appellant are:

- 1.
- 2.
- 3.

FORM F-3: COMMITTEE SUMMARY OF APPEAL

**BOARD CERTIFICATION EXAMINATION IN CLINICAL PSYCHOLOGY
AMERICAN BOARD OF PROFESSIONAL PSYCHOLOGY**

PAGE 1 of 2

Appellant Name: _____ Region: _____

Date of Examination/MOC: _____ Location of Examination/MOC: _____

List of Appellant's Examiners (if applicable):

- 1.
- 2.
- 3.

Appeal refers to allegations regarding: (check) Application: Candidacy Determination (),
Examination: Work Sample Component (), Examination: Oral Component (), MOC ().

Relevant grounds for appeal raised by Appellant:

- 1.
- 2.
- 3.

Decision and rationale for each allegation:

- 1.
- 2.
- 3.

FORM G: CANDIDATE'S EVALUATION
COUPLE AND FAMILY CERTIFICATION ORAL EXAMINATION
AMERICAN BOARD OF COUPLE AND FAMILY PSYCHOLOGY

The Candidate's personal appraisal of the examination experience can be of great value in ABCFP's effort continually to improve the examination process. The ABCFP National Examination Committee invites you to comment constructively about any aspect of the exam -- content, format or conduct. Nothing you write will become part of the official record of your examination. Send to ABCFP Board President within a month of the examination.

FORM H: EVALUATION BY EXAMINATION COMMITTEE MEMBER
COUPLE AND FAMILY CERTIFICATION ORAL EXAMINATION
AMERICAN BOARD OF COUPLE AND FAMILY PSYCHOLOGY

The National Examination Committee of the American Board of Couple and Family Psychology is very interested in examiner's constructive suggestions concerning the exam process. We would appreciate your specific feedback on what was good and should be retained and on anything you felt was poor or should be dropped. If you have suggestions for modifications, please try to make them as specific as you are able. Send to ABCFP Board President within a month of the examination.

FORM I: AMERICAN BOARD OF COUPLE AND FAMILY PSYCHOLOGY
FORM TO RATE CO-EXAMINERS

Chair _____ Name of Examiner being rated: _____

Candidate who was examined: _____ Exam date: _____

Please complete this rating form for each examiner who sat on the committee with you using the reference scale shown below for your ratings:

0	1	2	3	4	5	6	7
Examiner so poor as to warrant exclusion from further exams		Must have added training before examining again		Acceptable but somewhat limited as an examiner		Outstanding examiner	

Circle the number which represents your evaluation of this examiner:

- A. **STYLE AND MANNER:**
- 1. Collegial 0 1 2 3 4 5 6 7
 - 2. Pleasant 0 1 2 3 4 5 6 7
 - 3. Professional in approach, dress, interactions 0 1 2 3 4 5 6 7
- B. **KNOWLEDGE:**
- 1. Own area of expressed expertise 0 1 2 3 4 5 6 7
 - 2. Ethics and Standards 0 1 2 3 4 5 6 7
- C. **PREPARATION:**
- 1. Prepared questions thoughtfully 0 1 2 3 4 5 6 7
 - 2. Prepared to bring out candidate's best and limited areas 0 1 2 3 4 5 6 7
- D. **INTERACTION:**
- 1. Worked effectively with other examiners 0 1 2 3 4 5 6 7
 - 2. Treated candidate with respect 0 1 2 3 4 5 6 7
- E. **OTHER COMMENTS:**

Signed _____ Date _____

Note: RETURN TO ABCFP PRESIDENT WITHIN TWO WEEKS OF EXAM

Instructions: Each examiner and the chairperson are to fill in and return the examiner rating forms. Give to chairperson at end of deliberations period. He/she should send all 6 forms to the Board President within two weeks.

FORM J-1: MOC ABCP CONTINUING PROFESSIONAL DEVELOPMENT GRID

Insert link to grid here

FORM J-2: MOC NARRATIVE

Name: _____
 Specialty: _____
 Date of Certification: _____
 MOC Materials Due: _____
 Anticipated MOC Date: _____

Narrative Instructions

The Maintenance of Certification narrative is designed to elaborate on the professional activities that you reported on the Specialty Continuing Professional Development (SCPD) Grid. It is intended to help you describe your continued professional development over the past 2 years and may become the basis for discussion of your current professional work with a peer reviewer from your specialty board. Please respond to the following questions, focusing your responses on the provision of information specific to your demonstration of the functional and foundational competencies. In order to pass, you must have answered all the questions in the narrative. Together, the Grid and the Narrative must adequately address all 8 of the foundational competencies and at least 2 of the 8 functional competencies.

1. Kind of Services Delivered: _____
 Setting: _____
 Nature of Population Served: _____

Provide a synopsis of your current professional work. This may be drawn from a broad range of your professional activities (i.e., assessment, intervention, consultation, teaching, administrative duties, leadership, or other activities central to understanding your professional work). Limit = 200 words.

2. Please describe an ethical/legal issue that you have recently considered including how it affected your behavior or thinking. Limit = 150 words.
3. By what means do you evaluate the effectiveness of your professional activities? Limit = 100 words.
4. Please summarize how you maintain your skills in each of the foundational competencies for which you did not seek credit on the grid (excluding ethics and reflective practice because they are addressed in the questions above). Limit = 150 words.
5. Please summarize how you maintain your skills in two of the functional competencies. Limit = 150 words.

6. In your professional evolution, have you refocused your professional activities from your original area of board certification? If so, describe how you have evolved in such a way that you have maintained your foundational competencies as a Clinical Psychologist. Limit =100 words.

**FORM J-3: MOC CONTINUING PROFESSIONAL DEVELOPMENT
GRID SCORING**

Specialist _____

Specialty Board _____

Rater _____

Date of Review _____

SCPD Grid Scoring

Item	Yes	No	Comment
1. Did the specialist provide documentation that there were 40 hours of continuing professional development within the two year period reviewed on the SCPD Grid?			
2. Did the specialist provide evidence of maintaining all 8 of the foundational competencies on the SCPD Grid? If no, please review question #4 in the narrative for supplemental information.			
3. Did the specialist provide evidence of maintaining a minimum of 2 specialty-specific functional competencies on the SCPD Grid?			

**FORM J-4: MOC CONTINUING PROFESSIONAL DEVELOPMENT
NARRATIVE SCORING**

Narrative Scoring

Item	Yes	No	Comment					
1. Does the synopsis provided sufficiently explain the specialist's current work?								
2. Are there indications of practice that are inconsistent with the <i>APA Ethical Principles of Psychologists and Code of Conduct</i> ?								
3. Does specialist provide evidence of effective outcome monitoring? (Only one method required)			Evaluation		Check all that apply			
			Peer review					
			Assessment Instrument					
			Client Satisfaction Surveys					
			Performance Reviews					
			360° Assessment					
			Student Ratings					
Other, Specify:								
4. Does the narrative indicate that the specialist maintains 2 functional competencies? (2 of 8)			Functional Competencies			Yes	No	n/a
			Assessment					
			Intervention					
			Consultation					
			Research/Evaluation					
			Supervision					
			Teaching					
			Management/Administration					
			Advocacy					

**FORM J-5: MOC CONTINUING PROFESSIONAL DEVELOPMENT:
OVERALL MOC SCORING**

Overall Rating

Scoring Instructions: Use the information obtained above to answer the following question.

	Yes	No							
Do the combined Grid and Narrative indicate that the specialist maintains foundational competencies (8 of 8) and no less than 2 functional competencies?			Foundational Competencies		Yes	No			
			Relationships						
			Individual and Cultural Diversity						
			Ethical & Legal Standards/Policy						
			Professionalism						
			Reflective Practice/Self-Assessment/Self-Care						
			Scientific Knowledge & Methods						
			Interdisciplinary Systems						
			Evidence-Based Practice						
			Functional Competencies				Yes	No	n/a
			Assessment						
			Intervention						
			Consultation						
			Research/Evaluation						
			Supervision						
			Teaching						
			Management/Administration						
Advocacy									

Scoring Criteria:

1. Did Specialist complete the Grid and answer questions N1 to N5 on Narrative (and N6 if applicable)? (circle one) Yes No
2. Did Specialist responses result in a “Yes” on the “Overall Rating” question? (circle one) Yes No

Does the reviewer recommend the specialist's certificate be renewed? (circle one) Yes No

Please submit your review results to Clinical Board MOC Review Chair at e-mail address:
alina.suris@va.gov

**FORM J-6: MOC CONTINUING PROFESSIONAL DEVELOPMENT
GRID ACTIVITY VALUES**

COLLABORATIVE CONSULTATION

1. Case consultation. (5 consultations as consultant or consultee = 1 credit).
 2. Journal clubs. (5 journal clubs as presenter or participant = 1 credit).
 3. Research groups. (5 group meetings as presenter or attendee = 1 credit).
 4. Mentoring. (5 hours of mentoring as mentor or mentee = 1 credit).
-

TEACHING AND TRAINING

1. Teaching students and/or trainees, including specific assessment, intervention, as well as professional program development and evaluation. (1 presentation hour = 1 credit; 1 course = 20 credits)
2. Participating in thesis/dissertation committees. (Each dissertation or thesis = 10 credits)
3. Participating as an ABPP mentor, work sample reviewer, oral examiner, or MOC reviewer. (Each item = 10 credits)
4. Training or presenting to other professionals or staff. (1 presentation hour = 1 credit)
5. Conducting full/half-day workshops to professional or consumer groups. (1 full day workshop = 10 credits; one unit/hour = 1 credit).
6. Instructing in an educational training program series. (1 presentation hour = 1 credit) (1 course = 20 credits)

7. Professional training program development (1 preparation hour = one credit; 1 program = 20 credits)
 8. Professional mentoring in some way not described above.
-

LEARNING AND ONGOING EDUCATION

1. Attendance at conferences and conventions (not earning CE). (1 day = 1 credit).
 2. Completion of continuing education provided by a recognized and approved sponsor. (1 hour = 1 credit)
 3. Completion of a graduate-level academic course related to psychology from a regionally accredited academic institution. (1 course = 20 credits)
 4. Completion of a ABPP board certification in another specialty (1 additional ABPP = 20 credits)
 5. Reading, hearing, or viewing professional materials. (1 hour = 1 credit)
 6. Participating in other self-directed professional activities for which CE credits have not been granted. (1 hour = 1 credit)
-

DEVELOPMENT AND APPLICATION OF RESEARCH AND INNOVATIVE METHODOLOGIES/PROGRAMS

1. Publishing peer-reviewed articles (1 publication = 10 credits)
 2. Publishing book chapters. (1 chapter = 5 credits)
 3. Other engagement in the development and/or application of research and innovative programs (i.e., development and implementation of grant proposals). (1 hour = 1 credit)
 4. Practice outcome monitoring (e.g., strategies for assessing client outcomes or involvement in institutional quality assurance monitoring). (1 hour = 1 credit; 1 QA monitor = 1 credit)
 5. Serving as editor, co-editor or reviewer of books or peer-reviewed journals. (10 hours = 10 credits)
-

PROFESSIONAL LEADERSHIP

1. Management and/or administration of services related to the specialty. (Each year = 10 credits)

2. Activities directed toward the promotion or adoption of evidence-based practice and assurance of quality care. (1 hour = 1 credit)
3. Holding an office or other recognized leadership position within professional psychology. (1 office for one year = 10 credits)
4. Service on professional psychology association boards or committees. (1 office for one year = 10 credits)
5. Participation in grant review. (1 grant = 5 credits)
 1. Membership on regulatory or institutional review boards. (1 term = 10 credits)

Specialty Continuing Professional Development Grid (SCPD)

Instructions: Please complete the following form by indicating the number of continuing professional development credits in each relevant category for the previous 2-year period. In all categories, a maximum number of allowable credits are designated. Any specific activity should be documented in only one category even though it might fit under several categories credit for that activity can only be documented under one activity. The total number of credits completed must be equal to or greater than 40 for the two year time period. Specialists are advised to maintain their own files, as documentation is not required for submission with this form. However, a peer review of this information may be conducted by the specialty board, which may require you to provide this documentation. Because ABPP certification is competency based, ABPP's foundational and functional competencies are listed to guide the specialist's thinking when completing the SCPD grid.

Foundational Competencies

Professionalism - Professional values and ethics as evidenced in behavior and comportment that reflects the values and ethics of psychology, integrity and responsibility.

Reflective Practice/Self-Assessment/Self-Care -- Practice conducted with personal and professional self-awareness and reflection; with awareness of competencies; with appropriate self-care.

Scientific Knowledge and Methods - Understanding of research, research methodology, techniques of data collection and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan. Respect for scientifically derived knowledge.

Relationships - Relate effectively and meaningfully with individuals, groups, and/or communities.

Ethical Legal Standards and Policy - Application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.

Individual and Cultural Diversity - Awareness, sensitivity and skills in working professionally with diverse individuals, groups and communities who represent various

cultural and personal background and characteristics defined broadly and consistent with APA policy.

Interdisciplinary systems- Knowledge of key issues and concepts in related disciplines.

Identify and interact with professionals in multiple disciplines.

Functional Competencies

Assessment – Assessment and diagnosis of problems, capabilities and issues associated with individuals, groups, and/or organizations.

Intervention – Interventions designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or organizations.

Consultation - The ability to provide expert guidance or professional assistance in response to a client's needs or goals.

Research/evaluation - Generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities.

Supervision - Supervision and training in the professional knowledge base and of evaluation of the effectiveness of various professional activities.

Teaching - Providing instruction, disseminating knowledge, and evaluating acquisition of knowledge and skill in professional psychology.

Management-administration - Manage the direct delivery of services (DDS) and/or the administration of organizations, programs, or agencies (OPA).

Advocacy – Actions targeting the impact of social, political, economic or cultural factors to promote change at the individual (client), institutional, and/ or systems level.

**Appendix A
Continuing Education Plan**

Assumptions:

2. 40-hours continuing education plan (the plan or a subset may be utilized by Track 3 applicants to demonstrate professional identity as a Couple and Family Psychologist)
3. Education plan is based on the identified specialty competencies
4. All courses must be specialty-specific (content focused on couple and family psychology; e.g., ethical issues in couple and/or family psychotherapy, couple or family assessment).
5. Courses or supervision may be presented by any CFP content expert and may be offered online, the reading of books and journals, conference attendance, or convention venues (e.g., some APA convention CE-approved sessions offered by Division 43).
6. All courses must be APA-approved continuing education courses and must be approved by the Eligibility Committee of ABCFP. A list of courses vetted or previously approved by ABCFP is available to assist potential applicants in identifying courses that are pre-approved as meeting requirements. Other courses may qualify, but they will need to be vetted upon submission.

Continuing Education Plan:

Competency Area	
CFP Scientific Foundations – Systemic Epistemology	
CFP Assessment: Case Conceptualization and Assessment	
CFP Intervention	
CFP Ethical & Legal Issues	
Diversity Issues in CFP	
CFP Interpersonal Interaction	
Professional Identity in CFP	
CFP Competency Electives:	
• CFP Consultation	• CFP Forensics
• CFP Supervision	• CFP Teaching
• Sex Therapy	

A NOTE OF THANKS

The ABPP Board of Trustees and the Directors of the American Board of Couple and Family Psychology thank all examiners for their participation in ABPP's board certifying examinations. We fully understand how difficult it is to take time away from your professional and personal lives to devote many hours of study and decision-making to the vital process of board certification in the various specialties of psychology; your willingness to underwrite your belief in this process with constructive action is the backbone of this process. You deserve the sincere gratitude of the entire profession of psychology.

Each candidate also deserves our appreciation for having acted on their sense of responsibility to the public, the profession and him/herself, as well as gathering the courage and expending the time, finances and energy to face yet another examination in a long career of training, experience and examinations. Your effort, your achievement, and your commitment to the most meaningful board certification process in professional psychology are a commendable example for your students, your trainees and your yet-to-be certified peers.

The American Board of Couple and Family Psychology welcomes comments and constructive suggestions for improvement of this manual and the examination process.