

ABAP

American Board
for Accreditation
in Psychoanalysis

Handbook for Accreditation

Handbook Last Revised: April 8, 2017

Standards Updated to 2024 Version:
August 20, 2025

SECTION I. INTRODUCTION

A. Scope

The American Board for Accreditation in Psychoanalysis, Inc. (ABAP, Inc.) accredits psychoanalytic training programs granting post-graduate certificates, diplomas, or degrees in psychoanalysis. Programs may be free-standing, that is, the sole offering of a training institute, or may be part of a larger entity. In either case, the program, not the entity, is accredited. Therefore, this document refers only to “accredited programs,” and not “accredited institutes.” However, ABAP, Inc. requires the endorsement of the entity’s CEO and Board of Directors in order for a program to seek accreditation. For this reason, procedures in this Handbook will occasionally refer to the institution and/or its CEO.

B. Definition

Psychoanalysis is a comprehensive theoretical framework for understanding the human mind. When used as a treatment process, psychoanalysis is based on an intensive verbal, therapeutic relationship between an analyst and an analysand; the process aims for symptom relief, emotional growth, and personal integration. The psychoanalytic treatment process includes, but is not limited to, the recognition of unconscious processes and conflicts, the significance of developmental influences, and the impact of resistances, defenses, transference, and countertransference phenomena. Treatment is enhanced by an the analyst’s understanding, developed through coursework, supervision, and the analyst’s own training analysis, of unconscious manifestations, such as dreams, slips of the tongue, fantasies and day dreams. Psychoanalytic technique varies in relation to theoretical orientation.

C. Mission

Accreditation is a unique, time-tested feature of American education. Its purposes are to maintain and improve the quality of education and to safeguard the public from educational programs of unacceptable quality and from inadequate educational practices. Accreditation of psychoanalytic training programs thus ensures integrity in psychoanalytic education and training.

The mission of the American Board for Accreditation in Psychoanalysis, Inc. (ABAP) is to accredit psychoanalytic training programs in the interests of the students who are being educated and the general public. ABAP establishes standards and procedures by which psychoanalytic institutes are accredited, or by which such accreditation is withdrawn, and provides an appropriate means for dealing with issues of overriding public interest and concern in psychoanalytic education.

Accreditation is achieved through the voluntary association of psychoanalytic educators and other professional peers. Member psychoanalytic programs collectively exercise substantial control over the accrediting process, as is consistent with voluntary accreditation’s self-regulatory character. Through the development and implementation of peer standards, accreditation allows for the careful scrutiny of educational practices, the

recognition of programs that meet standards, and the imposition of sanctions to push programs toward those standards, while allowing psychoanalytic programs to operate with autonomy and academic freedom.

ABAP’s governance structure ensures the involvement and acceptance of responsibility for accreditation and its coordination by psychoanalytic programs as represented by responsible academic officials. Full and equitable participation of psychoanalytic programs as well as representatives of the public provide

integrity to the accreditation process and ensure the public's best interest. ABAP thus provides an effective forum for psychoanalytic programs to deal with their mutual and separate concerns in psychoanalytic accreditation and to debate, formulate, and implement policy positions.

ABAP, Inc. accredited psychoanalytic programs are encouraged to state in published documents that they are accredited by ABAP, Inc. and to display their Certificates of Accreditation in a public area of the institute.

D. Purposes

The ABAP, Inc. is a non-profit corporation organized under the State of New York Non-Profit Corporation Act exclusively for educational, scientific, research, mutual improvement, and professional purposes and has the necessary and incidental powers to carry out its corporation purposes, among which are to:

1. Promote, improve, and assure the quality and diversity of psychoanalytic education in the United States.
2. Review and accredit psychoanalytic programs on the basis of standards related to the effectiveness of the policies, practices, and educational outcomes of each program.
3. Provide national leadership for psychoanalytic accreditation and the enhancement of educational quality by:
 - a. Cultivating an understanding of the role, nature, and significance of psychoanalytic accreditation;
 - b. Serving as an official voice for psychoanalytic accreditation at national and state levels;
 - c. Initiating conferences and activities for the purposes of improving understanding of psychoanalytic education and the processes of assessment; and
 - d. Promoting active collaboration and/or interaction among educational leaders, psychoanalytic institutions, and federal and state agencies.
4. Provide services by:
 - a. Assisting psychoanalytic programs to improve the implementation of accrediting standards, policies and procedures;
 - b. Offering professional development programming to the membership and interested parties;
 - c. Providing a forum and vehicle for discussion and development of national recognition of psychoanalytic education accreditation;
5. Facilitating coordination among psychoanalytic institutes;
 - a. Encouraging, sponsoring, conducting and publishing research related to the understanding and improvement of psychoanalytic education;
 - b. Monitoring federal and state activities related to psychoanalytic accreditation and informing the psychoanalytic community; and

- c. Publishing annual lists of accredited psychoanalytic programs.

E. History

The American Board for Accreditation in Psychoanalysis originally began in the 1970s as a body within the National Association for the Advancement of Psychoanalysis (NAAP), a national membership association of psychoanalysts. Although housed within NAAP, the former ABAP conducted the accreditation of psychoanalytic training programs at freestanding psychoanalytic institutes, rendering autonomous accreditation decisions independent from the NAAP Board. However, in the late 1980s and early 1990s, the legal counsel for NAAP advised that the organization should have only one autonomous and independent Board in its corporate structure. As ABAP prepared petitions for recognition with the federal government during that time, the concern of separating and incorporating the accreditation process from the national membership association was reinforced.

Thus, ABAP, Inc. was founded and incorporated in 1997 in New York. When ABAP Inc. became incorporated separately, its Board of Trustees voted to honor previous accreditation decisions and actions of the former ABAP.

ABAP, Inc. became a member of the Association of Specialized and Professional Accreditors (ASPA) in 1999 and continues to invest in this membership and its professional development programs.

SECTION II. GOVERNANCE STRUCTURES AND RESPONSIBILITIES

A detailed description of the governance structures and responsibilities of the American Board for Accreditation in Psychoanalysis, Inc. can be found in the Bylaws published by ABAP. The Bylaws describe specific composition and numbers, qualifications, duties, quorum, manner of acting, meetings, reporting, compensation, and reports of the agency's component bodies. The following brief descriptions are to introduce and orient the reader of this Handbook so that the following pages are more understandable.

A. The Board of Trustees

The Board manages the activities of ABAP as the agency's decision-making body. Its general powers and duties include policy-making, fiscal oversight, and accreditation actions and decisions. The Board meets at least semi-annually. The nineteen member composition of the Board is described in the Bylaws.

B. The Assembly of Psychoanalytic Institutes

The Assembly of Psychoanalytic Institutes is an integral part of ABAP. The API represents the membership that ABAP, Inc. as a professional service agency serves – the psychoanalytic training programs that are accredited by ABAP. Each accredited Psychoanalytic Member Institute has one vote in the Assembly. Candidate Members (those preparing for accreditation) participate in the Assembly with voice but without vote.

The API's powers and responsibilities include electing members to the Board, placing matters on the Board's agenda, nominating representatives to the Committee on Accreditation, and meeting semi-annually in conjunction with Board meetings. The API conducts regular reviews to determine the validity of accreditation standards. The API changes or articulates new standards or guidelines to the standards through a process of education, discussion, and consensus-building.

C. The Committee on Accreditation

The Committee on Accreditation is appointed by the Board as nominations are received from the API. The COA is composed of ten members with experience in psychoanalytic education and training from various perspectives – faculty, administration, and the analytic field of practice. The COA reviews applications of programs seeking accreditation. After reading and evaluating submitted Self Studies and subsequent On-Site Evaluation Reports, the COA reports its findings and recommendations to the Board. The COA advises the Board on matters of criteria and procedure in connection with the accreditation process.

D. The Office of Accreditation

The Office of Accreditation includes a Board-appointed Executive Director and any professional and support personnel appointed by that director, in consultation with and on terms approved by the Executive Committee of the Board. The Executive Director provides leadership in carrying out the work of ABAP, represents and expresses its views, and serves as custodian of corporate records. The Executive Director composes On-Site Evaluation teams and creates On-Site Evaluation schedules, generally facilitating the accreditation practices, policies, and procedures of ABAP. The Executive Director performs the role of staff, ensuring that accreditation is conducted according to ABAP policies, and also performs the functions of business manager.

SECTION III. STANDARDS FOR ACCREDITATION

A. Introduction

The American Board for Accreditation in Psychoanalysis, Inc. (ABAP) accredits psychoanalytic training programs, whether such programs are offered within freestanding psychoanalytic institutes or within larger educational organizations. Accreditation is a mechanism of professional peer review that provides public assurance about the educational quality and integrity of those psychoanalytic programs that seek or wish to maintain membership. Since they are developed by the members, these standards reflect the values and principles of peer institutions. In order to achieve and maintain accreditation, an institution demonstrates that its program(s) meet ABAP's standards and have the capacity to continue to meet those standards going forward.

ABAP recognizes the diversity that exists among various schools of thought and approaches to education in psychoanalysis. ABAP encourages innovative programs insofar as these are conceived and implemented in a manner that ensures the quality and integrity of psychoanalytic training, as reflected in these standards.

B. Standards Review

ABAP engages in continual self-study of its own standards. Every five years, ABAP undergoes a standards review process as outlined in the ABAP Handbook on Accreditation. In between formal standards reviews, ABAP may change standards if its governing bodies believe such a change is warranted, as described in the Handbook.

C. 2024 Standards

(Note: This Handbook was updated in August 2025 to reflect the 2024 Standards. Self-Study Reports prepared prior to May 17, 2024 were based on the 2013 Standards. [The 2013 Standards can be accessed here.](#))

Standard One: Mission, Organization, and Governance

- 1-1. The program seeking accreditation has a published mission statement that describes its goals for psychoanalytic training, is consistent with the overall institution's mission statement, and is endorsed by the institution's governing board.
- 1-2. The educational institution offering the program has legal authority to operate in its jurisdiction, whether through a charter, formal authority, or incorporation from a state Department of Education or other established component of a state or governmental agency. The program is in compliance with state, local, and federal, licensing, educational, and clinical practice requirements.
- 1-3. The program has been in existence for a minimum of two (2) years, is organized to train students in the practice of psychoanalysis and has demonstrated alignment with the accreditation standards.
- 1-4. The institution has a governing board, a president or chief executive officer, and other officers needed to carry out its functions.
- 1-5. The institution appoints certified psychoanalysts to leadership positions in the psychoanalytic training program.
- 1-6. The psychoanalytic training program has reasonable and sufficient autonomy within the institution, is in alignment with its mission statement, and has adequate representation of its policy- and decision-making bodies within the institution.
- 1-7. The governing board of the institution demonstrates sufficient independence to ensure it can act in the public's best interest, including the following:
 - (a.) Board membership includes at least one public member. It is recommended that board membership include one public member for every six board members.
 - (b.) Board membership includes certified psychoanalysts.
 - (c.) The board maintains and upholds conflict-of-interest policies that protect against business, market enterprises, or other arrangements that might benefit private interests of officers, directors, board members, and other governors of the institution.
- 1-8. The composition of the board and its policy- and decision-making bodies reflects the areas of competence needed to fulfill its responsibilities, including appropriate legal, financial, and other relevant expertise.
- 1-9. The authority, responsibilities, and relationships among the governing board, program administration, program faculty, and staff are clearly described in the institution's bylaws, or an equivalent document, and in an organizational chart that displays the working order of the institution.
- 1-10. The institution maintains a Corporate Care Policy that ensures the board, administration, staff, and faculty understand and fulfill their respective roles as set forth in official documents, job descriptions, and agreements and are provided with the appropriate resources to undertake their respective roles.
- 1-11. Board members act as trustees of the organization's assets and exercise due diligence and oversight to ensure that the organization is well managed and that its financial situation remains sound.
- 1-12. The institution maintains adequate written affiliation and articulation agreements with other institutions that participate in the preparation of its candidates.
- 1-13. The institution maintains adequate risk management policies, including Directors and Officers insurance, worker's compensation, and liability insurance.

Standard Two: Financial Resources

- 2-1. The institution has adequate financial resources to carry out its operations and sustain programmatic quality going forward, as demonstrated by three years of financial statements that have been reviewed or audited by a certified public accountant, as well as a three-year projected operating budget.
- 2-2. Individuals responsible for administering the financial system at the institution or program are qualified by education and/or experience to carry out their fiduciary responsibilities.

Standard Three: Library Resources

- 3-1. The institution makes available to all students and faculty readily accessible and current library and

information resources, including books, periodicals, reference materials, and electronic resources, which support the evolving instructional and research needs of the psychoanalytic training program.

Standard Four: Physical and Technological Resources

- 4-1. The institution has adequate facilities, space, equipment, and technological resources to carry out its educational, clinical, and research programs.
- 4-2. The institution has mechanisms in place to effectively monitor and implement technological advances as needed to support program learning objectives and safeguard data.

Standard Five: Student Support Resources

- 5-1. The institution provides sufficient student support services, such as academic advising, placement services for supervision, internships, or clinical work, and career guidance on the practice of psychoanalysis.
- 5-2. Personnel who advise students are knowledgeable of the program and graduation requirements, including curricular, supervisory and clinical components, as well as practice regulations for the local and other relevant jurisdictions.
- 5-3. Administrative and training personnel who have contact with students are trained to support and evaluate students on a regular basis relevant to their roles within the Institute.

Standard Six: Training Program Personnel, Resources, and Corporate Care

- 6-1. The program has sufficient faculty and supervisors, qualified by education and experience, to implement the instructional program to sustain academic quality.
- 6-2. The institution has sufficient administrative and support personnel to achieve program goals.
- 6-3. Faculty members teaching courses in theory and practice of psychoanalysis are certified psychoanalysts or highly qualified in a specific content area.
- 6-4. Faculty teaching clinical courses must be certified psychoanalysts.
- 6-5. Supervisors must be certified psychoanalysts with a minimum of three years of experience in the practice of psychoanalysis post- certification and/or licensure and legally qualified to supervise in their jurisdiction.
- 6-6. The program has well-defined policies and procedures to recruit, appoint, evaluate, and promote faculty and supervisors, as appropriate.
- 6-7. The institution maintains up-to-date job descriptions for each training and administrative position. Contracts and/or letters of appointment based on the job description are executed for all personnel.
- 6-8. The institution employs a documented and systematic evaluation of training and administrative personnel based on their job descriptions. These procedures include direct feedback gathered from relevant stakeholders about performance and allow for growth and development of instruction, and supervisory skills, or dismissal, when appropriately based on the guidelines and expectations.
- 6-9. Faculty and supervisors are afforded opportunities to have a substantive voice in matters of educational programs and other aspects of institutional policy that relate to their areas of responsibility and expertise.

Standard Seven: Public Disclosure and Institutional Integrity

- 7-1. The institution publishes accurate, clear, complete, and timely information about itself. Such information is readily accessible on the Institution's website.
- 7-2. The institution publishes:
 - (a.) A program mission statement with a commitment to training psychoanalysts;
 - (b.) A description of the ownership, control, and type of legal organization of the institution; including a declaration of its corporate registration status.
 - (c.) The names and affiliations of members of its governing board, policy- and decision-making bodies, and principal administrative personnel;
 - (d.) The names and credentials of its faculty and supervisors;

- (e.) An admissions policy and procedures;
 - (f.) A non-discrimination policy;
 - (g.) A description of the program(s) and the requirements for progression through various levels of training in the program(s) leading to graduation;
 - (h.) The procedures and criteria utilized in arriving at decisions regarding the advancement of candidates and graduation;
 - (i.) The training curriculum;
 - (j.) A description of the educational and student support resources available;
 - (k.) Grievance and appeal policies and procedures for faculty, staff, and students for presenting grievances to the institution;
 - (l.) A tuition and fee schedule including refund policies;
 - (m.) A policy for academic credit transfer;
 - (n.) A records release policy;
 - (o.) A records retention policy;
 - (p.) A description of program delivery modalities (e.g. face-to-face, online, hybrid, synchronous, asynchronous);
 - (q.) All physical location(s) including the phone number(s) and email address(es) of the administrative and clinical offices;
 - (r.) A statement that the institute is fully compliant with local, state, and federal guidelines for education and clinical practices, and;
 - (s.) A statement that accreditation by the American Board for Accreditation in Psychoanalysis is eligible for all psychoanalytic programs within and not beyond US boundaries and territories.
- 7-3. The institution does not discriminate with regard to race, color, national origin, ethnic origin, gender, gender identity, sexual orientation, ability, age, religion, or employment status in any aspect of its psychoanalytic programs, including the selection and assignment of faculty and administrative staff, student admissions, class and field placement, and referral services.
- 7-4. The institution is guided by the federal Family Educational Rights and Privacy Act (FERPA), with respect to the release of information regarding a student and the student's rights to inspect, review, and amend his or her record. The institution has policies regarding the kinds of information that will be included in the permanent record of students. The institution has policies regarding the release, retention, safety, security, and disposal of student records. Its information-retention and release policies respect the rights of individual privacy, the confidentiality of records, the best interests of students, the institution, including local jurisdiction, and applicable laws.
- 7-5. The institution understands and complies with legal requirements regarding medical records, e.g. Health Insurance Portability and Accountability Act (HIPAA) and is in compliance with the local jurisdiction.
- 7-6. The institution applies its standards, policies, and procedures fairly; its evaluations are conducted, and decisions rendered under conditions that ensure impartial and objective judgments.
- 7-7. The institution has published procedures for the review of complaints by faculty, staff, and students pertaining to its program and practices. Such procedures are adequate to treat complaints in a manner that is fair and equitable to the complainant as well as to the institution. The complaint procedures include an appeals process. Institutions and programs retain the records of all complaints and how they were adjudicated and make them available for inspection by site visitors in a way that respects the confidentiality and privacy of those involved.
- 7-8. The institution safeguards the rights of students in that:
- (a.) Prior to any adverse action, a statement of the reason(s) for the action is provided.
 - (b.) A formal response to the adverse action, to be incorporated into the record, may be made by the student.
 - (c.) An appeal of the decision may be made by the student.
 - (d.) An impartial appeal procedure is published and includes the right to a hearing.
- 7-9. Changes in Requirements:

- (a.) The institution provides advance notice of revised requirements to students and allows adequate opportunity for comment on the requirements, prior to adoption.
 - (b.) Continuously enrolled students are permitted to adhere to the requirements of the catalog under which they matriculated.
- 7-10. The program allows students to practice psychoanalysis for training purposes only under qualified supervision.
- 7-11. The institution maintains an equitable student tuition refund policy.
- 7-12. The institution maintains an equitable transfer of academic credit policy.
- 7-13. The institution maintains a records release and retention policy.
- 7-14. The institution graduates only students who meet its published requirements for graduation.
- 7-15. Faculty, trustees, administrators, and students of an accredited program are governed by a Code of Ethics that reflects best practices in the field of psychoanalysis represented by the NAAP Code of Ethics.
- 7-16. The institution has a contingency plan to assure that currently enrolled candidates will have an opportunity to complete their training should the program, for any reason, cease to function.

Standard Eight: Education and Training Program

8-1. Admission

- (a.) The program's admission policies and procedures are clear and consistent with its mission.
 - (b.) Admitted students are demonstrably qualified for advanced academic study; specifically, the program requires that students possess a master's degree or higher from an accredited institution. The master's degree must be completed before entering the clinical component of training.
 - (c.) Admitted students demonstrate their suitability for psychoanalytic training through interviews and other procedures determined by the program.
 - (d.) The institution conforms to the reporting and disclosure requirements as outlined in federal law.
- 8-2. The psychoanalytic training program is organized to prepare students to attain psychoanalytic competencies as represented by the ABAP Core Competencies and meets the following educational goals:
- (a.) To understand the theory and practice of psychoanalysis through classroom instruction, case conferences, and seminars;
 - (b.) To engage in psychoanalytic self-awareness through a personal psychoanalysis;
 - (c.) To develop proficiency in the technique of psychoanalysis, including assessments, diagnosis, and treatment, through supervised clinical experience;
 - (d.) To cultivate and apply ethical standards of professional practice.
- 8-3. The program requires the student to complete the following requirements prior to graduation:
- (a.) A minimum of thirty-six (36) credit hours (450 clock hours) of post-master's level coursework in psychoanalytic studies. Typical coursework includes personality development; socio-cultural influences on growth and psychopathology; psychopathology, diagnosis, and treatment; practice techniques (including use of dreams and symbolic processes, work with resistance, transference, and countertransference); case seminars; clinical practica; professional development; and psychoanalytic research methodology.
 - (b.) A minimum of fifteen hundred (1,500) hours of clinical experience including the following:
 - (i) A personal psychoanalysis of a minimum of three hundred (300) hours with a certified psychoanalyst(s).
 - (ii) At least two hundred (200) hours of individual psychoanalytic supervision with a minimum of 3 psychoanalyst supervisors, of which at least fifty (50) hours shall be with one psychoanalyst supervisor working on one case, and at least fifty (50) hours shall be with a second psychoanalyst supervisor working on an additional one or more cases. The program requires that a supervisor may not have been and may not currently be one's personal analyst.
 - (iii) At least one thousand (1000) hours of supervised clinical experience with a variety of

patients within the full spectrum of psychological disorders, of which two hundred fifty (250) hours of experience may consist of group supervision, case conference supervision, and continuing clinical education experience.

- 8-4. The program includes evaluations of students at designated points throughout the training cycle that support incremental professional development with meaningful feedback to students at each stage. The evaluations and outcomes must be documented.
- 8-5. The program has policies and mechanisms in place to address situations in which a student does not meet program requirements and for terminating a student who fails to meet program requirements. These outcomes are reviewed by the administration and faculty for the purpose of program improvement by instituting curricular and programmatic changes.
- 8-6. The institution provides a means for comprehensive systematic self-evaluation of its requirements, curriculum, faculty, supervisors and other training personnel, standards, policies, and procedures, to determine how well it is meeting its stated educational outcomes.
- 8-7. The institution has a plan for program improvement that includes measures of student achievement, such as student progression, meeting learning objectives, graduation rates, licensure and certification rates, and other accomplishments.
- 8-8. The institution provides for student input for suggesting enhancements of its educational program.
- 8-9. The institution provides for student participation in accreditation self-studies and site visits of the institution.

Standard Nine: Distance Education

- 9-1. ABAP recognizes that institutes may elect to provide distance psychoanalytic training. In that case, distance education meets all ABAP standards for all three components of the psychoanalytic training: coursework, supervised clinical experience, and personal analysis.
- 9-2. Distance education programs have established a policy and process for complying with local, state, and federal regulations for education and clinical practices and for establishing a student program participation agreement with out-of-state students prior to admission.
- 9-3. The program ensures that distance-learning students and in-person students receive the same quality of training.
- 9-4. Faculty, supervisors, and other training personnel are competent in distance learning pedagogical methods.
- 9-5. Faculty, supervisors, and other training personnel have resources available to maintain quality distance education modalities in the format(s) offered (e.g. face-to-face, online, hybrid, synchronous, asynchronous).
- 9-6. Distance training programs provide technology and IT support, including adequate training for personnel, for effective distance learning.
- 9-7. The program makes equivalent resources (e.g. library, registration, advisement) available to distance learners. The quality and quantity of the online resources is robust.
- 9-8. The program has clear policies and guidelines concerning the virtual clinical experience:
 - (a.) Program guidelines designate what proportion of the clinical experience must take place in person.
 - (b.) Program guidelines delineate the acceptable venues for virtual clinical experience—e.g., via telephone, video, or other technologies.
 - (c.) The program ensures that any virtual clinical experience adheres to HIPAA guidelines.
 - (d.) The program ensures that any virtual clinical experience adheres to local, state, and federal regulations for clinical practice.

Standard Ten: Equity and Inclusion

- 10-1. The institution employs policies and practices that reflect contemporary understanding of issues that impact diversity, equity, and inclusion within institute organization and governance as they impact students, faculty, and staff.

- 10-2. The institution critically evaluates historical biases related to diversity, equity, and inclusion in the field of psychoanalysis and within its institution.
- 10-3. The institution actively encourages an open environment for feedback from students, faculty, and supervisors related to diversity, equity, and inclusion in its goals for program and institutional improvement.
- 10-4. The institution upholds processes that support efforts to reconcile unanticipated consequences of integrating equity and inclusion measures.

SECTION IV. APPLICATION PROCEDURES FOR ACCREDITATION

A. Letter of Intent

When a psychoanalytic training program seeks to become accredited, the chief executive officer of the program's institution sends a "Letter of Intent" to the ABAP Office of Accreditation stating that the program plans to initiate steps toward accreditation and indicating that the governing board of the institution has authorized the program's application for accreditation.

B. Application Materials

Included with the Letter of Intent are:

1. An executed "Official Authorization" form
2. A copy of the institution's articles of incorporation, charter, or state authority
3. A copy of the institution's Bylaws
4. A copy of the organization's official CPA-reviewed financial statements for the last three years
5. The current catalog for the program seeking accreditation
6. An application processing fee of \$250.00

C. Determination of Eligibility

Once the application materials are received, the Office of Accreditation will review the application to determine whether the program falls within the scope of ABAP's accreditation. If so, the program is invited to begin the self-study process.

D. Consultation

Program leadership may request assistance at any stage in the accreditation process, including submission of the self-study report or preparing for an on-site evaluation visit. The Office of Accreditation is available for consultation with the program leadership throughout the application process.

SECTION V. THE SELF-STUDY PROCESS

- A. The most important part of the accreditation process is the submission of a self-study report and a subsequent site visit by peer evaluators. The self-study is a mechanism for the training program to evaluate its own performance with respect to each of ABAP's standards and to make improvements based on its self-assessment.
- B. Because the self-study should be a true self-assessment leading to institutional and programmatic improvement, program leaders should expect that a full year or more of work will be necessary to complete the self-study.

- C. Programs applying for re-accreditation should start the process two years before their expiration date in order to allow time for the development of the self-study, the review of the Committee on Accreditation, and the scheduling of the site visit.
- D. ABAP expects a representative portion of the institution's administrative staff, teaching faculty, students, and governing body to be involved in developing the self-study. Through a thorough assessment of the program's strengths and limitations, the self-study process should not only document existing conditions, but also evaluate to what extent the program meets ABAP, Inc. standards. The self-study should identify strengths, problem areas, and goals and objectives in relation to each standard. This is an educational process, and the resultant document should be helpful to the program in achieving its potential.
- E. ABAP, Inc. provides a Guide to Writing the Self-Study in order to assist program leaders developing self-studies. The outline helps the program do the following:
 - a. Describe what exists relative to each standard.
 - b. Assess the adequacy of what exists in relation to each standard, including strengths and areas for growth.
 - c. Project how the program will improve in relation to each standard, specifically in terms of any deficiencies discovered as part of its self-analysis, and also more generally over the short and long terms.

SECTION VI. THE ON-SITE EVALUATION VISIT PROCESS

A. Review by the COA

After a program submits its self-study to the Office of Accreditation, ABAP's Executive Director forwards it to the Committee on Accreditation. The COA reviews the self-study to determine whether it satisfactorily describes and evaluates the program's compliance with the Standards for Accreditation. If the COA either (a) requires more data, (b) believes that the self-study needs to be more fully developed or concise, or (c) in the case of programs applying for Candidacy or Initial Accreditation, concludes that the self-study demonstrates blatant non-compliance with multiple standards, the COA asks that the Executive Director communicate with the program leadership to work on remedying the situation before scheduling a site visit. When the report is satisfactory to the COA, the Director schedules an on-site evaluation visit at a time mutually convenient to the institution and the team. In most cases, the COA will articulate specific questions or concerns for the site visitors to address.

B. Selection of Site Visitors

1. The Executive Director develops a team of individuals to serve as on-site evaluators, checking with the program to eliminate any site visitors with conflicts of interest.
2. The composition of on-site evaluation teams includes at least three site evaluators as listed below:
 - a. At least one practicing certified psychoanalyst with at least five years of experience in practice;
 - b. At least one faculty member with at least three years of teaching experience at an ABAP accredited psychoanalytic training program;
 - c. At least one member with at least three years of experience in finance and governance, either as an administrator of an ABAP accredited psychoanalytic program or as a practicing professional, e.g., an accountant, with experience in educational settings.

- d. One person may fulfill more than one of the above criteria.
3. ABAP may invite additional on-site evaluators to address specific areas of focus relevant to a particular program, such as distance learning or specific populations. These evaluators should demonstrate education and experience in the particular area of focus.
4. ABAP strives to select a team that includes representatives of the theoretical orientation of the program, balanced by members from other schools of psychoanalytic thought. Ideally the team includes members from other cities, states, or marketing areas from the program being evaluated.
5. All on-site evaluators are trained by ABAP on its standards, policies, and procedures in the conduct of on-site evaluations prior to conducting a site visit.

C. Conducting the On-Site Evaluation Visit

1. ABAP then conducts a site visit in keeping with the Guide to the On-Site Evaluation Visit. After the visit, the visiting team writes an On-Site Evaluation Report. The on-site evaluation report provides the program, the COA, and the Board with a detailed written assessment of the program. The evaluation report describes the extent to which the applicant meets or exceeds the Standards of ABAP, because the Standards are the criteria against which ABAP, Inc. makes accreditation decisions. Specifically, in its report, the on-site evaluation team evaluates the extent to which the program complies with each of ABAP's standards, noting strengths, areas of compliance, areas of partial compliance, and areas of apparent non-compliance. The team may note areas where improvement is indicated and may offer constructive solutions. However, the program is not required to meet the standard in any one particular way. Advice should be clearly distinguished as such and may be used by the applicant accordingly. Advice has no bearing on accreditation status.
2. The team leader sends a draft evaluation report to the program director for review, no later than thirty (30) days after the evaluation visit. At this point, the program director has the opportunity, within fifteen (15) days, to point out any errors of fact for correction by the team chair. The team leader then sends a final copy of the report to the program director and the Executive Director.
3. Upon receipt of the report, the Director invites the institute's chief executive officer to respond to the evaluation report in writing within fifteen (15) days of receipt. The Director then sends the evaluation report and program's response to the COA, which schedules a meeting to review the program and recommend an accreditation action to the Board. The COA invites the team leader and a representative of the program to be present for the discussion of the report, but not for a vote.

D. Committee on Accreditation (COA) Recommendation

1. The Chair of the COA ensures that the COA makes an in-depth analysis of the program's educational process, student outcomes, and compliance with accreditation standards through a careful reading of the self-study and supporting documents, the on-site evaluation report, and the program's response to the report. The Chair of the COA ensures that the Committee bases its assessment and recommendations on ABAP's published standards and that it consistently applies those standards in reaching its recommendations. The COA then develops a recommendation to the ABAP Board of Trustees for action.
2. The program may withdraw its application at any time prior to the COA's meeting.

3. The program is notified within thirty days of the COA's recommendation to the agency's decision-making Board.
4. The institution is free to distribute the on-site evaluation visit report and the Committee on Accreditation's recommendation as well as the Board's final decision on the report. If the institution chooses to make only a portion of these documents available to its constituencies, it should also inform those constituencies where they may obtain a complete copy of the documents.

E. Board Action

The ABAP Board of Trustees is responsible for taking action on the accreditation of psychoanalytic training programs at the next scheduled meeting after receiving the COA recommendation.

The Executive Director will immediately inform the CEO of the institution upon the Board's accreditation action

SECTION VII. ACCREDITATION ACTIONS AND CHANGES IN STATUS

A. Actions

The Board of Trustees may take the following actions on programs applying for accreditation:

1. Candidate Status:

- a. The Board may grant Candidate Status to programs applying for initial accreditation. Candidacy indicates that the program appears to be progressing toward, but is not assured of, accreditation. Candidate status is awarded to those programs which:
 - 1) are accomplishing their immediate educational purposes,
 - 2) meet a preponderance of the Standards for Accreditation, including all standards on Public Disclosure and Integrity, and
 - 3) appear to be capable of fully meeting the Standards for Accreditation within five years.
- b. Candidate Status is awarded for up to five years, by which time the program is expected to apply for full accreditation. Programs with Candidate Status are eligible to participate in ABAP, Inc.'s Assembly of Psychoanalytic Institutes without vote.
- c. Denial of Candidate Status: Candidate Status is denied to a program when the program fails to meet a preponderance of the Standards for Accreditation and/or does not appear capable of meeting the Standards within five years. Programs may appeal Denial of Candidate Status according to the policy on adverse actions and may reapply for Candidate Status two years after denial.
- d. Continuation in Candidate Status: Candidate Status is continued when a program continues to meet a preponderance of the Standards for Accreditation.
- e. Termination of Candidate Status: Candidate Status is terminated when it is determined that

the program no longer meets a preponderance of the Standards for Accreditation or has failed to meet the Standards for Accreditation within five years after achieving Candidate Status. Programs may appeal Termination of Candidate Status according to the policy on adverse actions and may reapply for Candidate Status two years after termination.

2. For Institutions Seeking Initial Accreditation:

- a. Initial Accreditation: Initial Accreditation is awarded to those programs which meet the Standards for Accreditation. Initial Accreditation is awarded for up to seven years. Accredited programs have Psychoanalytic Institute Member status in ABAP, Inc. with a vote in its Assembly of Psychoanalytic Institutes.
- b. Denial of Accreditation: Accreditation is denied to a program applying for initial accreditation when the program fails to meet the Standards for Accreditation. Programs may appeal Denial of Accreditation according to the policy on adverse actions and may reapply for initial accreditation two years after denial.

3. For Institutions Seeking Continued Accreditation:

- a. Continued Accreditation: Accreditation is continued for those programs which continue to meet the Standards for Accreditation. Continued accreditation is awarded for up to seven years. Accredited programs have Psychoanalytic Institute Member status in ABAP, Inc. with a vote in its Assembly of Psychoanalytic Institutes.
- b. Conditional Accreditation: The Board may award Conditional Accreditation when an accredited program partially fails to meet one or more accreditation standards and/or ABAP, Inc. policies (such as payment of dues, submission of Annual Reports, or submission of a self-study), but the issues of partial compliance can reasonably be addressed within two years.

A decision to grant Conditional status serves as a warning that stated conditions must be addressed in order to avoid an adverse action. Programs with conditional accreditation status submit scheduled Interim Reports to the COA and may require site visits to monitor greater compliance with standards. Conditional accreditation is given for up to two years, after which time further accreditation action is required by the Board. The Board may specify a shorter period of time during which the institution must demonstrate greater compliance with the standards or policies.

- d. Probation: A program is placed on probation when it fails to meet one or more Standards for Accreditation and/or ABAP, Inc. policies (such as the submission of a self-study or the reception of a visiting team), but the condition can be remedied within a specific period. A program on probation must bring itself into compliance with ABAP, Inc.'s Standards and policies within the time period specified by the Board; failure to do so will result in the revocation of accreditation. Programs on probation submit specified reports to the COA and may require site visits. If conditions at the institution worsen significantly during the period of probation, the Board may take action revoking accreditation.

Probation is a public status that is obliged to be disclosed by the program. Programs may appeal Probation according to the policy on adverse actions.

- e. Revocation of Accreditation: The Board will revoke accreditation when a psychoanalytic

training program on probation has not come into compliance with the Standards for Accreditation or policies within the specified time. The Board may also revoke the accreditation of a program not on probation if it finds that the program is not meeting one or more Standards for Accreditation and that this non-compliance is fundamental to the program's integrity.

Programs may appeal Revocation of Accreditation according to the policy on adverse actions and may reapply for initial accreditation two years after revocation.

f. **Deferral of Action:** The Board may defer its accreditation decision for up to one year. In this case, the program's accreditation status is extended for the period of the deferral. The Board defers its decision when there are concerns about noncompliance with ABAP, Inc. standards, but either more information is needed in order to formulate an action, or immediate action on the part of the program may inform the accreditation decision. In the event of a deferred action, the Board provides a statement of reasons for the deferral and indicates what steps need to be taken in order to reach an accreditation decision.

4. The maximum period of accreditation ABAP grants is seven (7) years.

5. Upon each accreditation decision, the Board, through the Committee on Accreditation, provides a thorough rationale for the action, including its conclusion on compliance with specific standards. Except when denying or revoking accreditation or candidacy, the COA indicates constructive corrective actions needed to come into compliance with the standards or fulfill other requirements (such as payment of dues). The Board advises the program of the possibility and means to appeal any adverse action by the ABAP Board of Trustees.

B. Annual Reports

Continuing accreditation is reliant on timely submission of Annual Reports, which are due by September 30 of each year. The program reports annual enrollment, graduation, and financial data, and is obligated to notify ABAP of any proposed substantive changes to the program or institution. The Office of Accreditation and COA review Annual Reports for any significant changes during an accreditation cycle. When the Office of Accreditation receives the Annual Report and the ABAP Treasurer confirms receipt of annual accreditation dues and any outstanding fees, the Office mails an annual Member-In-Good-Standing Card to be

affixed to the lower left hand corner of the program's Certificate of Accreditation to validate its accreditation status for both students and the public.

C. Interim Reports and Focused Visits

1. The Committee on Accreditation may continue or initiate evaluation activities within the seven-year accreditation cycle under the following conditions:
 - a. In response to concerns raised during the regular self-study and on-site evaluation process;
 - b. In response to a complaint forwarded from the Grievance Committee;
 - c. In response to a change reported on the Annual Report;
 - d. In response to a Substantive Change Report; or

- e. When it receives information from any source that suggests that the program may not be in compliance with ABAP's standards.
2. The COA may request interim reports on progress made by the program in addressing specific concerns. The COA establishes a timetable for receipt of these reports should they be requested. In addition, the COA may request a focused evaluation visit to follow up on an interim report. The COA may recommend Board action based on these evaluation activities.

D. Adverse Actions

Denial of Candidate Status, Termination of Candidate Status, Probation, and Revocation of Accreditation are considered adverse actions and are subject to the Policy on Appeals, Section VIII.

SECTION VIII. POLICY ON APPEALS

ABAP, Inc. strives to satisfy due process throughout its accrediting process. It affords programs a reasonable period of time to comply with the agency's requests for information and documents.

Following an adverse accreditation decision by the Board, the program is notified of the reasons for the decision, including specific standards it has failed to meet. The program is advised at this time of the opportunity and means of appeal.

A. Procedures for Appeal

1. If the program intends to file an appeal, a statement of this intention should be mailed within thirty days of receipt of the notification by the Board. If no statement of intention to appeal is received by the Board, the accreditation decision by the Board will take effect.
2. Should an appeal be requested, there is no change in the accreditation status of a program pending disposition of the appeal.
3. If a program notifies the Board of its intention to appeal, the Chair of the Board requests the Chair of the Assembly of Psychoanalytic Institutes (API) to appoint an impartial hearing panel consisting of a minimum of three people. The Chair of the API also appoints a chair of the hearing panel. Members of the hearing panel shall have no present or former affiliation with the program under appeal as faculty, administration, or student; shall not have been involved with prior accreditation actions with the program; shall not hold any paid or elected office in ABAP; and shall not be a member of the COA or Board. At least one member of the hearing panel will have had accreditation experience.
4. After the Board has received notice of the program's intent to appeal, the program is allowed sixty (60) days to prepare its appeal. An extension of this time may be granted by the Board. Not more than sixty (60) days after receipt of the program's appeal, a hearing date will be set by the hearing panel.
5. The program is invited to send representatives to the hearing to present testimony. The Chair of the Board or a designated representative of the Board is also invited. Legal counsel may be present.
6. The hearing panel may take the following action:

- a. Sustain the decision of the Board;
 - b. Set aside the decision and refer it back to the Board and its COA for further consideration. This could result in reversal of the Board's original decision or assignment of another on-site evaluation review team to repeat the process. Should the on-site evaluation visit report of a second on-site evaluation team result in another negative accreditation decision, there is no further appeal.
 - c. All actions of the hearing panel must be by unanimous agreement. If the hearing panel is not in unanimous agreement, the questions are referred to the Chair of the API for the appointment of a new hearing panel. The second panel may reach a decision by majority vote, and may take the actions noted above.
7. All decisions of the hearing panel are submitted to the Board. If the hearing panel votes to sustain the Board's decision, the CEO of the institution and program director are provided with a written statement including identification of specific standards the program has failed to meet. The institution also receives written notification if the appeal is granted.

SECTION IX. COMPLAINTS AND GRIEVANCES AGAINST ACCREDITED PROGRAMS

ABAP, Inc. complaint procedures are designed to ensure that standards established by ABAP, Inc. are maintained at all accredited and affiliate/candidate psychoanalytic programs by identifying significant cases of non-compliance with ABAP's Standards for Accreditation that warrant review and/or action by the Committee on Accreditation. Complaint procedures are not designed to adjudicate disputes between individuals and programs or serve as a mechanism of appeal in such disputes. ABAP, Inc., will not, for example, direct a program to re-admit a student, change a student discipline action, or reinstate a faculty member. ABAP, Inc. can and does respond to complaints regarding allegations of institutional conditions that raise significant questions about the program's compliance with ABAP's Standards for Accreditation.

ABAP, Inc.'s goal is to review in a timely and fair manner any complaint it receives against an accredited or affiliate/candidate program that identifies and substantiates a significant question about the program's compliance with one or more specific ABAP Standards, and to take follow-up accreditation action as necessary, based on the results of its review.

A. The Complaint and Grievance Committee

The Complaint and Grievance Committee is a standing committee of ABAP, Inc. charged with implementing ABAP's procedures for the disposition of complaints against accredited or affiliate/candidate programs and of hearing those complaints as defined below. The Committee consists of no less than three members elected by the ABAP, Inc. Board from its membership or representatives to its Assembly of Psychoanalytic Institutes.

Should a committee member have any substantial prior or current affiliation with the program against which a complaint is made or its parent institution, which creates an actual or apparent conflict of interest, that person must disqualify himself or herself from all matters in regard to the complaint, including but not limited to, the hearing, deliberation, and vote. An ad hoc appointment to fill the vacancy will be made by the Chair of the Board of ABAP, Inc.

B. Filing a Complaint

1. A complaint may be brought by any person or group with knowledge of alleged violations of the standards of ABAP, Inc., including the program's faculty, administration, students, or other responsible person or group.
2. The complainant may seek formal consultation from the Complaint and Grievance Committee of ABAP, Inc. to discuss the requirements for filing a formal complaint and possible means of resolving a problem without recourse to such filing. Responsibility for formal filing of an official complaint to ABAP, Inc. rests with the complainant.
3. The complaint is filed in a letter indicating the complainant's name and contact information, the complainant's relationship to the accredited or affiliate/candidate program, the substance of the complaint, and the complainant's permission for the complaint and related materials to be forwarded to the program. ABAP, Inc. does not accept anonymous complaints. Institutions and programs are explicitly prohibited from retaliating against individuals or entities filing complaints with ABAP, Inc. Such retaliation constitutes grounds for ABAP, Inc. to initiate adverse action against the institution.
4. The complaint must focus on general institutional conditions, not individual grievances.
5. The complaint must cite specific Standards of Accreditation that may be violated and provide substantial evidence of such violation. Such evidence should state relevant and provable facts beyond general allegations.
6. The complainant must demonstrate that s/he has exhausted the relevant grievance and/or complaint procedures within the institution.
7. The complainant must fully disclose any other external channels the complainant is pursuing to resolve the complaint, including legal action.
8. Except in extraordinary circumstances, ABAP, Inc. will not consider complaints if the alleged conditions occurred more than three years prior to the filing of the complaint.

C. Procedure for Hearing and Resolving Complaints

1. ABAP, Inc. will acknowledge receipt of each properly filed complaint received about an accredited or affiliate/candidate program within 15 days of receipt. The complaint will be reviewed for a determination of relevancy to ABAP's Standards for Accreditation. If the complaint or any part of it is found to be relevant, ABAP, Inc. will inform the Chief Executive Officer of the institution of the relevant aspects of the complaint within 30 days, and will request that the institution submit a written response within 30 days following the notification.
2. After receipt of the institution's written response, ABAP, Inc. may seek an informal resolution without formal action by the Complaint and Grievance Committee. Upon any informal resolution, the complaint will be closed, documented with a copy placed in the institution's file, and appropriate notice sent to the affected parties.
3. Absent an informal resolution, the complaint record is forwarded to Complaint and Grievance Committee to consider the complaint. At its discretion, the Committee may:
 - a. Seek additional information from the complainant or the institution.

- b. Schedule a hearing. The complainant and a representative of the program may be given the opportunity to testify at a hearing, and if so, either may request an opportunity to testify without the other present.
 - c. Dismiss the complaint as not establishing a significant violation of ABAP, Inc. Standards for Accreditation.
 - d. Determine that the complaint record establishes a significant violation of the Standards of Accreditation, but that the program has made reasonable progress in rectifying the situation that led to the complaint. In this case, the Committee notifies the Committee on Accreditation to revisit the violation during its next formal review of the program.
 - e. Determine that the complaint record establishes a significant violation of the Standards of Accreditation, and that corrective action is required by the Committee on Accreditation. The Complaint and Grievance Committee forwards its findings to the Committee on Accreditation for further review and potential accreditation action.
4. ABAP, Inc.'s Complaint and Grievance Committee will notify the Chief Executive Officer of the institution and the complainant of a final decision on a complaint within 30 days of the decision.

SECTION X. PUBLIC DISCLOSURE OF INFORMATION

A. Documents Published by ABAP, Inc.

ABAP publishes its policies and procedures in its Handbook on Accreditation, which is available on request and on its website at www.abapinc.org. The Handbook describes (1) the accreditation actions ABAP may take; (2) the procedures that programs follow in applying for accreditation; (3) the standards and procedures it uses to determine whether to grant, reaffirm, reinstate, restrict, deny, revoke, terminate, or take any other action related to accreditation by ABAP. In addition, ABAP publishes in print and on its website (1) a directory of the programs that the agency accredits and, for each program, the year the agency will next review or reconsider it for accreditation; and (2) the names, academic and professional qualifications, and relevant employment and organizational affiliations of the members of the agency's policy and decision-making bodies, and the agency's principal administrative staff.

B. Information Available to the Public About Affiliated Programs

Upon inquiry, ABAP will release the following information about affiliated institutions:

1. The date of initial accreditation and/or when candidacy was granted;
2. The date of the most recent on-site evaluation and subsequent ABAP action on the institution's accredited status;
3. The date of the next scheduled on-site evaluation;
4. Submission date and action taken on the most recent written report required by ABAP;

5. The extent of, or limitations on, the status of affiliation;
6. In cases of adverse action (denial or termination of candidacy or accreditation, placing an institution on probation), ABAP's reasons for recommending that status and, in the case of probation, its plans to monitor the institution. ABAP, in consultation with the program, will prepare a written statement incorporating the above information. ABAP reserves the right to make the final determination of the nature and content of the statement. The program will also be offered the opportunity to make its official comment; if the institution does make an official comment, the comment will be made available by ABAP.
7. For institutions whose candidacy or accreditation has been terminated, the date of, and reasons for, termination.
8. Adverse actions (placement of an institution on probation, denial of candidate status or accreditation, revocation of candidacy, and termination of accreditation) are communicated after the available appeals process is completed. ABAP, at its discretion, may make the adverse action public before an appeal is completed. In so doing, ABAP will provide information about the appeal process.

C. Representation of Accreditation Status

ABAP requires that all accredited programs portray their accreditation status accurately and in a timely fashion. If a program elects to make a public disclosure of its accreditation status, it must disclose that status accurately, including the specific programs covered by that status and the name, address, and telephone number of ABAP. If a program is found to be misrepresenting its accreditation status by ABAP, the Director of the Office of Accreditation will send a certified letter to the program requesting immediate correction of the misrepresentation. In the event that such correction does not occur, ABAP will publicly correct (on its website, newsletters, and direct correspondence to interested parties) misleading or incorrect information that an accredited program releases about (1) the accreditation status of the program; (2) the contents of reports of on-site evaluation reviews; and (3) the agency's accrediting actions with respect to the program.

SECTION XI. SITE TEAM EVALUATOR TRAINING

- A. The Director of the Office of Accreditation is responsible for regular on-site evaluator training and retraining. All who serve on on-site evaluation teams receive training before serving. This training includes review and discussion of ABAP's accreditation standards and interpretations, as well as ABAP's policies and procedures. Those who chair on-site teams receive additional training before assuming that role.
- B. On occasion, evaluators-in-training may "apprentice" on an on-site evaluation team. An evaluator-in-training will not replace a qualified site visitor and will not be involved in the deliberations of the team; this person's task is to learn how to be a site evaluator. The chair of the on-site evaluation team serves as a mentor to this person during his/her first site visit.

SECTION XII. POLICY ON SUBSTANTIVE CHANGE

ABAP maintains a policy on substantive change to ensure that any substantive change to the educational program or its mission after the agency has accredited the program does not adversely affect the capacity of the program to continue to meet ABAP standards.

A. Requirements for and Definition of Substantive Change

ABAP, Inc. requires the program to submit for ABAP's review any substantive change so that ABAP may decide whether it affects the accreditation previously granted to the program. ABAP's definition of substantive changes includes the following types of change:

1. Any change in the established mission or objectives of the program.
2. Any change in the legal status, form of control, or ownership of the institution or program.
3. The addition of courses or programs that represent a significant departure, in either content or method of delivery, from those that were offered when the agency last evaluated the program.
4. A change from clock hours to credit hours.
5. A substantial increase or decrease in the number of clock or credit hours awarded for successful completion of a program.
6. The establishment of an additional location geographically apart from the main campus at which the institution or program offers at least fifty percent (50%) of an educational program.
7. The establishment of a program of distance education whereby 50% or more of the program may be completed via distance learning.

B. Procedures for Granting Approval

1. If a program is considering a substantive change, it should notify ABAP six months prior to the date it wishes to implement the change to minimize any delay in a decision on whether the change affects its accreditation status. The program submits a narrative describing the change and enough supporting documentation to provide evidence that the program has the resources (human, fiscal, and physical) to support the change and that it will still comply with ABAP's standards.
2. Substantive change proposals are submitted to the Office of Accreditation and forwarded to the Committee on Accreditation, which assesses whether the accreditation status of the program is affected by the proposed change. ABAP reserves the right to require an on-site evaluation before deciding whether substantive change affects accreditation status.

SECTION XIII. REGARD FOR DECISIONS OF STATES & OTHER AGENCIES

ABAP respects the decisions of states as well as other governmental agencies. The following policies and practices articulate this regard:

- A. ABAP does not accredit programs within institutions that lack legal authorization, if required under applicable state law, to provide a program of education beyond the secondary level.
- B. Except as provided in paragraph (C) of this section, ABAP does not grant initial or renewed accreditation to a program if ABAP knows, or has reasonable cause to know, that the institution or program is the subject of:
 1. A pending or final action brought by a state agency to suspend, revoke, withdraw, or terminate the

- institution's or program's legal authority to provide postsecondary education in the State;
 2. A decision by a recognized agency to deny accreditation;
 3. A pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or termination the program's accreditation;
 4. Probation or an equivalent status imposed by a recognized agency.
- C. ABAP grants accreditation to a program described in paragraph (B) of this section only if it provides ABAP within thirty (30) days of its action, a thorough and reasonable explanation, consistent with ABAP's standards, why the action of the other body does not preclude the agency's grant of accreditation.
- D. When ABAP learns that a program it accredits is the subject of an adverse action by another recognized accrediting agency or has been placed on probation or an equivalent status by another recognized agency, ABAP promptly reviews its accreditation of the program to determine if it should also take adverse action or require the program to show cause for accreditation to be continued.
- E. ABAP shares, upon request, with other appropriate recognized accrediting agencies and recognized state approval agencies information about the accreditation status of a program and any adverse actions it has taken against an accredited program.

SECTION XIV. REVIEW OF STANDARDS

ABAP maintains a systematic program of review which ensures that its standards are valid and adequate by which to evaluate the quality of the education and training provided by the programs it accredits and relevant to the educational or training needs of students and candidates.

ABAP ensures that its review of its standards: (1) is comprehensive; (2) occurs at regular, reasonable intervals and on an ongoing basis; (3) examines each of the ABAP's standards and the standards as a whole; and (4) involves all of ABAP's relevant constituencies in the review and affords them a meaningful opportunity to provide input into the review.

A. Biannual Reviews

1. Once every two years, the Assembly of Psychoanalytic Institutes reviews each of the Standards for Accreditation and the Standards as a whole to determine if they are adequate to evaluate the quality of psychoanalytic training programs. The API considers the implications for the Standards of changes in the field of psychoanalysis and the practices of ABAP accredited programs. It also considers the results of the other ABAP review activities described below and any other activities ABAP conducts during the year that provide input about the effectiveness, reliability, and validity of the Standards.
2. During this formal review, proposals for new or revised standards are developed, sent out for comment to the relevant constituencies, referred to the Committee on Accreditation for refinement, and voted on at a subsequent API meeting after the API analyzes the comments received. Through this formal review of standards, the Assembly of Psychoanalytic Institutes adds new standards, revises existing ones, and eliminates those that it determines are outdated or no longer appropriate to the assessment of program quality.

B. Informal Reviews of the Standards

1. Informal review of the Standards takes place by the API and COA during meetings of each body.

Accredited programs refer to the Standards during each semi-annual meeting of the API and during various workshops ABAP conducts for its programs.

2. The COA regularly discusses, based on the application of the Standards to the specific programs the COA considers during its meetings, issues with the standards that require further investigation and possible modification. Likewise, it determines whether reviews of any complaints received during the year suggest potential areas of improvement within the Standards.
3. After each site visit, ABAP informally surveys programs about their perceptions of the adequacy and relevance of the standards. ABAP recognizes that programs that have recently prepared a self-study and undergone an on-site review have a particularly keen insight into the relevance of the Standards, the effectiveness of their application during the self-study and site visit, and thus can provide useful information for ABAP to consider during its review of the standards.
4. In a similar fashion, the COA surveys on-site evaluators after each site visit to gain any insights they might have about the standards, their effectiveness in evaluating educational quality and program effectiveness, and their relevance to the education and training needs of students.
5. An important measure of the effectiveness of ABAP's standards, both individually and as a whole, is the achievement of students. ABAP asks programs to describe student outcomes such as retention rates, graduation rates, employment opportunities (such as private practice, institutional work, teaching etc.), in their self-studies and Annual Report forms.
6. The information obtained from these activities is provided to the API for use during the API's biannual review of the standards. Any proposals for changes to the Standards that result from this informal review process are subject to the usual ABAP procedures for revisions to the standards.

C. Longer-Term Reviews

1. Formal Review of the Standards

- a. Every five years, the ABAP, Inc. conducts longer-term reviews of the standards, the primary purpose of which is to determine if the current standards, when viewed as a whole and individually, are adequate to evaluate the quality of psychoanalytic education and training and relevant to the education and training needs of students.
- b. Usually, when a standard is being reviewed as part of this process, there is a general discussion at the outset by the Psychoanalytic Member Institutes of the API and ABAP's relevant constituencies about what issues are important to consider in evaluating quality in that area. This is followed by a detailed examination of the standards to determine if they adequately address all of the issues identified. If they do not, then proposals are developed to modify or, if necessary, replace one or more standards or add additional standards.

2. Reviews of the Criteria by Programs and Other Constituencies

Every five years, ABAP, Inc. also conducts a comprehensive survey of accredited programs regarding ABAP, Inc. standards, policies, and procedures. Following a review of the results of the survey, the API may implement changes to ensure that its standards, both individually and as a whole, continue to be adequate to measure program quality and effectiveness and relevant to the educational needs of students. In a similar fashion, ABAP, Inc. may survey other relevant constituencies such as federal and state agencies, employers of graduates of ABAP accredited

programs, analysts in private practice, and other accrediting agencies regarding ABAP standards, policies, and procedures.

3. Reviews of Special Issues by Task Forces and Other Groups

Periodically, the API holds meetings with relevant constituencies to address special issues. After a general discussion of the issues, participants review the relevant ABAP standards and assess their viability and validity as measures of quality related to the particular issue.

D. Revision of Standards

If ABAP, Inc. determines, at any point during its systematic program of review, that it needs to make changes to its Standards, it initiates action within twelve (12) months to make the changes and completes that action within a reasonable period of time. Before finalizing any changes to its standards, ABAP (1) provides six months' notice to all of ABAP's relevant constituencies, and other parties who have made their interest known to the agency, of the changes the agency proposes to make; (2) gives the constituencies and other interested parties adequate opportunity to comment on the proposed changes; and (3) takes into account any comments on the proposed changes submitted timely by the relevant constituencies and by other interested parties.

E. Relevant Constituencies

ABAP, Inc. considers the following to be relevant constituencies and interested parties: Accredited Psychoanalytic Institute Members of the API, Candidate Programs, Friends of ABAP, the Committee on Accreditation, psychoanalytic program leaders who have expressed interest in accreditation, leadership and members of the National Association for the Advancement of Psychoanalysis, state licensing boards and departments of professional regulation which regulate psychoanalysis, and students, faculty, and graduates of ABAP accredited programs.

SECTION XV. POLICIES REGARDING LEADERSHIP

A. Qualifications for Board Membership

Qualifications for Board membership are described in the ABAP Bylaws. The responsibility for Board member orientation is to be shared between the Board's Executive Committee and the Executive Director of the Office of Accreditation.

B. Policy on Leadership Training

ABAP, Inc. requires all individuals involved in its accreditation process (Board members, COA members, on-site evaluators) to receive training on ABAP's standards, policies, and procedures before assuming their leadership positions and to receive periodic retraining as appropriate.

C. Conflict of Interest Policy

Evaluation policies and procedures used in the accreditation process provide a system of checks and balances to ensure fairness and impartiality in all aspects of this process. Central to assuring that the procedural aspects of the Board's and agency's operations are fair to all participants and that its decision-making processes are impartial is an organizational and personal duty to avoid real or perceived conflicts of interest. The potential for conflict of interest arises when one's duty to make decisions in the

public's interest is compromised by competing interests of a personal or private nature, including but not limited to pecuniary interests. A conflict of interest exists when conditions or circumstances preclude, or interfere with, an individual's capacity to make an objective decision, or conflict with the outcome of the decision made. In these instances, individuals must recuse themselves from deliberation and voting. Conflict of interest is considered to be any relationship with an institute, institution, or program that might interfere with objectivity in the accreditation review and decision-making process.

1. Article I Purpose

The purpose of this conflict of interest policy (this "Policy") is to protect the interest of American Board for Accreditation in Psychoanalysis, Inc., a New York nonprofit corporation and a tax-exempt organization (the "Organization"), when it is contemplating entering into a transaction or arrangement that might benefit the private interest of an officer or director of the Organization (or other person listed below) or might result in a possible excess benefit transaction. This Policy is designed to ensure that the Organization's officers and directors (and other persons listed below) act in the Organization's best interest and comply with applicable legal requirements. This Policy is intended to supplement but not replace any applicable state and federal laws governing conflicts of interest applicable to nonprofit and charitable organizations.

2. Article II Enforcement

For purposes of implementing and enforcing this Policy, the Board of Directors of the Organization (the "Board") may designate and appoint a Committee on Audit comprised solely of "Independent Directors" as that term is defined in the New York State Non-Profit Revitalization Act of 2013 or, if no Committee on Audit is designated and appointed, this Policy shall be implemented and enforced by the Board (such governing body or committee, the "Governing Body").

3. Article III Definitions

a. "Affiliate."

Any entity controlled by, in control of, or under common control with the organization.

b. "Interested Person."

Any of the organization's directors, officers, Key Employees or members of a committee with governing Board delegated powers.

c. "Financial Interest."

A person has a financial interest if the person has, directly or indirectly, through business, investment, or Relative:

- 1) An ownership or investment interest in any entity with which the Organization has a transaction or arrangement;
- 2) A compensation arrangement with the organization or with any entity or individual with which the organization has a transaction or arrangement; or
- 3) A potential ownership or investment interest in, or compensation arrangement with, any

entity or individual with which the organization is negotiating a transaction or arrangement. Compensation includes direct and indirect remuneration as well as gifts or favors that are not insubstantial.

- 4) A financial Interest is not necessarily a conflict of interest. Under Article IV, a person who has a Financial Interest may have a conflict of interest only if the governing body decides that a conflict of interest exists.
- d. “Key Employee.”
Any person who is in a position to exercise substantial influence over the affairs of the organization.
 - e. “Related Party.”
Any of the following individuals or entities that has a direct or indirect financial interest:
 - 1) Any Interested Person or any Relative of any Interested Person;
 - 2) Any affiliate of the organization; or
 - 3) Any entity in which any individual described in clauses (i) and (ii) of this definition has a 35% or greater ownership or beneficial interest or, in the case of a partnership or professional corporation, a direct or indirect ownership interest in excess of 5%.
 - f. “Related Party Transaction.”
 - 1) Any transaction, agreement, or other arrangement in which a related party has a financial interest and in which the Organization or any Affiliate of the Organization is a participant; provided, however, that in the event the related party is (a) a Relative of any Interested Person or (b) an entity in which such Relative has a beneficial interest sufficient to render such entity a related party, a “Related Party Transaction” shall mean any transaction, agreement or other arrangement in which, to the knowledge of the Interested Person to which the Relative is related, a Related Party has a Financial Interest and in which the Organization or any Affiliate of the Organization is a participant.
 - 2) Examples of a Related Party Transaction could include the engagement of one of the following persons or entities to serve as a vendor, consultant, auditor, counsel or other service provider to the Organization or any Affiliate of the Organization:
 - (i) an Interested Person, (ii) a Relative of an Interested Person who would be engaged with the knowledge of the Interested Person, (iii) an entity in which an Interested Person (or a Relative, to the knowledge of the Interested Person to which such Relative is related) has a 35% or greater ownership or beneficial interest and (iv) any partnership or professional corporation in which an Interested Person (or a Relative, to the knowledge of the Interested Person to which such Relative is related) has a direct or indirect ownership interest greater than 5%.
 - 3) For the avoidance of doubt, an Interested Person does not engage in a Related Party Transaction through the receipt of reasonable financial compensation and/or benefits in connection with his or her services as a director, officer or Key Employee of the Organization or a member of a committee with governing Board delegated powers.
 - g. “Relative.” A relative of an individual means such person’s:

1) Spouse, ancestors, brothers and sisters (whether whole or half-blood), children (whether natural or adopted), grandchildren, great-grandchildren, and spouses of brothers, sisters, children, grandchildren and great-grandchildren; or

2) Domestic partner.

4. Article IV Related Party Transaction

a. Limitation on Related Party Transaction.

The Organization shall not enter into any Related Party Transaction unless the transaction is determined by the Governing Body to be fair, reasonable, and in the Organization's best interest at the time of such determination.

b. Duty to Disclose.

In connection with any actual or possible Related Party Transaction, an Interested Person must disclose in good faith to the Governing Body the existence of its financial interest and be given the opportunity to disclose all material facts concerning such interest.

c. Procedures for Addressing Related Party Transactions.

1) An Interested Person may make a presentation before a Governing Body meeting with respect to an actual or possible Related Party Transaction, but after the presentation the Interested Person shall leave the meeting during the discussion of, and the vote on, the possible Related Party Transaction. The Interested Person shall not improperly influence the deliberation or voting on the possible Related Party Transaction.

2) If the Governing Body determines that a Related Party Transaction exists, the chairperson of the Governing Body shall, if appropriate, appoint a disinterested person or sub-committee to investigate alternatives to the proposed Related Party Transaction.

3) After exercising due diligence, the Governing Body shall determine whether the Organization can obtain, with reasonable efforts, a more advantageous transaction or arrangement from an individual or entity that would not constitute a Related Party Transaction.

4) If a more advantageous transaction or arrangement which does not constitute a Related Party Transaction is not reasonably available under the circumstances, the Governing Body shall determine, by a majority vote of the Governing Body members present at the meeting, whether the Related Party Transaction is in the Organization's best interest, for its own benefit, and fair and reasonable. In conformity with the above determination, the Governing Body shall make its decision as to whether to enter into the Related Party Transaction.

5) The Governing Body shall contemporaneously document in writing (including in the minutes of any meeting) the basis for the Governing Body's approval, including its consideration of any alternative transactions.

d. Violations of the Policy.

- 1) If the Governing Body has reasonable cause to believe that an Interested Person has failed to disclose an actual or possible conflict of interest, including a Related Party Transaction, it shall inform such Interested Person of the basis for such belief and afford such Interested Person an opportunity to explain the alleged failure to disclose.
- 2) If, after hearing such Interested Person's response and/or presentation and after making further investigation and conducting due diligence as warranted under the circumstances, the Governing Body determines that such Interested Person has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

5. Article V Records of Proceedings

The minutes of any meeting of the Governing Body at which a possible or existing conflict of interest, including a Related Party Transaction, was discussed or voted upon shall contain:

- a. The names of the persons who disclosed or otherwise were found to have a Financial Interest in connection with an actual or possible conflict of interest, the nature of the Financial Interest, any action taken to determine whether a conflict of interest was present, and the Governing Body's decision as to whether a conflict of interest in fact existed.
- b. The names of the persons who were present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection with the proceedings.

6. Article VI Compensation

- a. An Interested Person who receives compensation, directly or indirectly, from the Organization for services is precluded from being present at or otherwise participate in any Board or committee deliberation or vote concerning matters pertaining to that Interested Person's compensation, provided that the Board or committee may request that such Interested Person presents information as background or answers questions at a Board or committee meeting prior to the commencement of deliberations or voting relating thereto.
- b. For this purpose, the reimbursement of reasonable expenses incurred to carry out a person's duties to or for the Organization shall not be considered compensation.

7. Article VII Initial Disclosure

Contemporaneously with the initial election or appointment of any Interested Person who has not previously submitted disclosures to the Organization under this Policy, and annually thereafter, such Interested Person shall complete, sign, and submit to the Secretary of the Organization (the "Secretary") a written statement identifying, to the best of such Interested Person's knowledge, any entity of which such Interested Person is an officer, director, trustee, member, owner (either as a sole proprietor or a partner), or employee or otherwise has an affiliation or association and with which the Organization has a relationship, and any transaction in which the Organization is a participant in which such Interested Person might have a conflicting interest. The Secretary shall provide a copy of all completed statements to the chairperson of the Governing Body.

8. Article VIII Annual Statements

Each Interested Person shall annually sign a statement (the “Annual Statement”), which contains (i) any disclosure of Financial Interests required pursuant to Article VII, and (ii) an affirmation that such person:

- a. Has received a copy of this Policy;
- b. Has read and understands this Policy;
- c. Has complied, and will continue to comply, with this Policy; and
- d. Understands that the organization is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

A form of the annual statement is attached hereto as Annex A.

9. Article IX Periodic Reviews

To ensure the Organization operates in a manner consistent with charitable purposes and does not engage in activities that could jeopardize its tax-exempt status, the Board shall conduct periodic review. The periodic reviews shall, at a minimum, include the following subjects:

- a. Whether compensation arrangements and benefits are reasonable, based on competent survey information, and the result of arm’s length bargaining.
- b. Whether partnerships, joint ventures, and arrangements with management organizations conform to the Organization’s written policies, are properly recorded, reflect reasonable investment or payments for goods and services, further charitable purposes and do not result in inurement, impermissible private benefit or in an excess benefit transaction.
- c. Whether the Board and all committees are properly implementing this Policy.
- d. Whether any improvements should be made to this Policy.

10. Article X Use of Outside Experts

When conducting the periodic reviews as provided for in Article IX, the Organization may, but need not, use outside advisors. If outside experts are used, their use shall not relieve the Board of its responsibility for ensuring periodic reviews are conducted.

11. Article XI Repeal or Amendment

This Policy may be repealed or amended from time to time by the Board in accordance with the Organization’s Bylaws.

SECTION XVI. COMPLAINTS AND GRIEVANCES AGAINST THE BOARD OR THE OFFICE OF ACCREDITATION

Complaint procedures are established to ensure that high quality, ethical conduct, fairness, impartiality, and consistency are maintained by the Board of Trustees and its Office of Accreditation regarding fiscal

responsibility, institutional management, and accreditation policies, practices, and actions.

A. Considerations Preliminary to Filing a Complaint Against the Board or Office of Accreditation and Staff

1. The complainant has made every effort to present the complaint directly to either the Chair of the Board and/or the Executive Director of Accreditation or staff members.
2. If the complaint is not resolved to the complainant's satisfaction, the complainant may seek formal consultation from the Complaint and Grievance Committee of ABAP to discuss the complaint and possible means of resolving the problem without recourse to official complaint. Responsibility for formal complaint to ABAP rests with the complainant.
3. The complaint must relate to an alleged violation by the Board or Office of Accreditation of the policies, procedures, and standards of ABAP. The complaint must be reasonably well documented and based on direct and responsible information.
4. A complaint may be brought by any responsible person or group with knowledge of alleged violations of the policies, procedures, and standards of ABAP including those set forth in its Bylaws, Handbook on Accreditation, and other publications.

B. Procedure for Hearing Complaints Against the Board or Office of Accreditation and Staff

This procedure is followed, when, after a preliminary review by the Committee, the criteria noted above are met.

1. The complaint is filed in writing with the Committee.
2. The Committee notifies the Board Chair and the Board member(s) and/or staff against whom the complaint is made of the nature of the complaint and requests a response in writing within thirty (30) days. All parties are advised that a hearing will be scheduled by the Committee following receipt of the response of the person(s) against whom the complaint is made.
3. The complainant and person against whom the complaint is made are given the opportunity to testify without the other present.
4. The Committee deliberates in private. A majority vote obtains.
5. The Committee may take the following actions:
 - a. Postpone final action, if the Board or Office of Accreditation has made reasonable progress in rectifying the situation that led to the complaint. If this occurs, the question must be reconsidered by the Committee within one year from the date of postponement.
 - b. If, upon further review, the party against which the complaint was made has not made reasonable progress in rectifying the situation that led to the complaint, the Committee will summarize its findings and conclusion and forward this to the Board of Trustees as a whole to take corrective action.
 - c. Clear the Board or staff member and notify the complainant of the reasons for the decision.

- d. Summarize its findings and conclusion and forward this to the Board of Trustees as a whole to take corrective action.
6. If, after being referred the matter for corrective action, the Board of Trustees cannot address the complaint impartially, the chair of the Committee, the Chair of the Board, and the Chair of the Assembly of Psychoanalytic Institutes will appoint a mutually agreed upon, impartial, objective, and fair Mediation Panel to address the complaint and all parties involved with it. This Mediation Panel may initiate any hearings or procedures it may desire to address the complaint satisfactorily. It will make its recommendations within ninety (90) days of receiving the unresolved complaint. All parties are to abide by its conclusions and recommendations.

SECTION XVII. RECORDS MAINTENANCE POLICY

The Executive Director is responsible for the organization and maintenance of ABAP's records. The Office of Accreditation maintains complete and accurate records of (1) Its last three regularly scheduled accreditation reviews of each program, including on-site evaluation team reports, the program's responses to on-site reports, periodic review reports, any reports of special reviews conducted by the agency between regular reviews, and a copy of the program's most recent self-study; and (2) All decisions regarding the accreditation and reaccreditation of any program, including all correspondence that is significantly related to those decisions.

The Office of Accreditation also maintains permanent records of all policies and procedures, financial records, minutes of Board, API, and COA meetings

SECTION XVIII. FEES AND DUES

[Current fees can be found on the ABAP, Inc. website.](#)

- A. Application Filing Fee. An institute or program filing an application for candidacy, initial accreditation, or re-accreditation is required to submit a nonrefundable application fee, to partially defray the cost of the review of the self-study report, the on-site evaluation visit, and the on-site evaluation visit report.
- B. On-Site Evaluation Visit Fee. The on-site evaluation visit fee is the same for all institutes or programs regardless of geographic location.
- C. Accreditation Fees. Upon accreditation, an institute is admitted to regular Psychoanalytic Institute Member status (voting) in the Assembly of Psychoanalytic Institutes.