

^{**}The term "focus" should be used to describe opportunities in areas of training which are not recognized specialties. Training programs should strive to provide explicit explanations of the type of training provided in these non-specialty areas.

Serious Mental Illness Psychology E & T Taxonomy was approved by CoS Board of Directors on 12- 24-2022. CoS will request an updated Taxonomy for CoS review and approval one year prior to Serious Mental Illness Psychology's next petition for renewal of specialty recognition by the Commission for Recognition of Specialties and Subspecialties in Professional Psychology (CRSSPP). The updated Taxonomy will be due at end of 2025.

Common Definitions and Criteria Across All Recognized Specialties

Clarifications to help recognized specialties use the APA-Taxonomy** in a consistent manner

- Broad and general training forms the core of education and training in health service psychology. Programs are accredited by the American Psychological Association (APA), Commission on Accreditation (CoA) or Canadian Psychological Association (CPA). Programs integrate the broad and general training with those educational and training activities related to recognized specialties as determined by the specialty and described in a specialty taxonomy. In addition, each specialty will have education and training guidelines consistent with its specialty area. Specialty training may be acquired at the doctoral, doctoral internship, postdoctoral, or post-licensure stages as defined by the specialty.
- By definition, postdoctoral education and training is a Major Area of Study in a specialty recognized by the Commission for the Recognition of Specialties and Subspecialties in Professional Psychology (CRSSPP) and requires that 80% or more of time be spent in the specialty area. At the postdoctoral training stage, as per above, it is recognized that training in the Major Area of Study will be consistent with the education and training guidelines set forth by the specialty.
- A course is typically defined as 3 semester-credit hours (or equivalent) in a health service psychology training program accredited by APA or CPA.
- A practicum is typically defined as the equivalent of one academic year (e.g., 9 months, in semester or quarter systems) consisting of supervised training for at least 8 hours per week, or its equivalent, with at least 50% of time in the provision of clinical services.
- Consistent with what is described in CoA *Standards of Accreditation*, supervision should be provided by persons with competencies in the specialty demonstrated by appropriate training, credentials, and qualifications for training in the specialty as defined by the specialty.
- Additional training experiences can also include, but are not limited to, research experiences, lab meetings, brown bags, lecture/colloquia series, and grand rounds, as defined by the specialty.
- For definitions of continuing education (CE) and continuing professional development (CPD) see the APA <u>Quality Professional Development and Continuing Education Resolution</u>. A continuing education (CE) course is defined as an organized program by the American Psychological Association or Canadian Psychological Association, a State Psychological Association, or other major provider of CE (e.g., Society of Behavioral Medicine).

^{**} Taxonomy; www.apa.org/ed/graduate/specialize/taxonomy.pdf

Specialty Specific Definitions and Criteria

¹The populations served by this specialty are those with Serious Mental Illnesses (SMI)/Serious Emotional Disturbance (SED), including individuals with psychosis manifested by disorders such as schizophrenia, schizoaffective illness, severe depression, serious bi-polar illness, severe post-traumatic stress disorder and other SMI/SEDs that result in sustained loss of functional capability. SMI didactic and experiential training and supervision focuses on persons' strengths, abilities, the need for assistance to recover and regain functional capabilities, and the provision for collaborative opportunities with consumer service user groups. Training in SMI Psychology must be consistent with the *Recovery to Practice* curriculum described and released by APA in 2014 (American Psychological Association & Jansen, 2014) which is available on the SMI Psychology Specialty Council website at www.psychtrainingsmi.com or from APA at www.apa.org/ed/graduate/specialize/serious-mental-illness

<u>2</u>Research project—Empirical investigation, extended case studies, literature critiques and analyses, or capstone projects that the graduate program requires.

³Supervised experience in the specialty at the Internship and Postdoctoral stages of training includes didactic activities (e.g., seminars, grand rounds) and clinical service delivery to adults and / or children, adolescents, and their families (e.g., assessment, treatment, consultation) with supervision by a licensed psychologist with competencies in SMI Psychology as demonstrated by appropriate training, credentials, and qualifications. Primary supervisors of SMI Psychology supervised experience and/or post licensure should have training, qualifications, or credentials (e.g., ABPP) as SMI Psychologists.

⁴Post-licensure specialization in SMI Psychology is intended to follow broad and general training in clinical, counseling or school psychology, during which some level of opportunity for training on working with individuals diagnosed with SMI/SED was received. Continuing Education (CE) is intended to build upon a completed doctoral program in psychology. It is not a substitute for the basic academic education and training needed for entry to the field of psychology, nor should it be the primary vehicle for career changes from one APA-recognized specialty to another.

⁵Continuing Education must be approved by APA or by another major mental health or medical organization. It may be earned for verified attendance at or participation in any program given by one of the following sponsors: 1. American Psychological Association or Canadian Psychological Association or their affiliates; 2. The National Register of Health Service Providers in Psychology; 3. Association of State and Provincial Psychology Boards; 4. American Medical Association or its affiliates; 5. Any regionally accredited school, college or university; 6. State Psychological Associations with CE permission.

Examples of Program Descriptors for Each Stage of Training

Doctoral

While there is no one training model at the doctoral level, the following example of a doctoral program in SMI psychology is instructive.

The Severe Mental Illness/Psychosocial Rehabilitation doctoral training program at XXX follows the recommendations of the American Psychological Association for broad and general education and training for Health Service Psychologists and offers a *Major Area of Study* in SMI Psychology. The SMI training at XXX is completed in conjunction with the requirements of our APA-accredited clinical psychology program. Training includes evidence-based assessment and processes that can help recovery from severe mental illness from understanding issues of risk, early identification, and mechanisms of action to developing, evaluating, and implementing interventions that effectively promote and support recovery from severe mental illness. Training is afforded in collaborating with other healthcare researchers and practitioners, including physicians, nurses, social workers, and others. *Major Area of Study* in SMI Psychology at University X requires students to complete at least four courses following discipline-specific domains. Core SMI courses available in the program include: Psychiatric Rehabilitation, Schizophrenia, Clinical Neuroscience, Psychopharmacology, and Introduction to Behavioral Neuroscience. In addition, at least two practica in sites where students can work with individuals living with SMIs are required as part of the major area of study. Current practica sites include two community mental health centers and a local clubhouse. A major SMI paper or research project is also required.

Doctoral internship

Our APA-accredited internship program at XXX offers *Emphasis* level of training in SMI Psychology which consists of two six-month rotations of 45% supervised experience in the Acute Adult Unit (AAU) and the Community Transition Unit (CTU). The AAU provides treatment and the CTU provides treatment and rehabilitation services to adults with severe and persistent mental illness. An intern may also choose an *Experience* level of training with a rotation in the AAU of 20-25% time (1 to 1 ½ days per week).

During an AAU rotation, an intern conducts psychological assessment (e.g., diagnostic, cognitive, malingering, adaptive functioning) and provides brief, goal-focused individual psychotherapy. The interns participate in conducting behavioral assessments and behavioral observations, developing/implementing behavioral intervention plans, providing staff training for behavior plans, and treatment planning activities in multidisciplinary treatment team meetings. There may also be opportunities for the intern to co-lead a group in the Treatment Mall and may also have the opportunity to provide individual capacity restoration to a subpopulation of forensic patients on the AAU who have legal charges and have been found not capable to proceed to trial.

During a CTU rotation, Interns develop skills in assessing and treating a variety of psychiatric symptoms and problematic behaviors (e.g., psychosis, depression, emotional dysregulation, substance abuse, social skills deficits, aggression, self-injurious behavior) with a focus on evidence-based practice. Interns receive training in the Psychiatric Rehabilitation and Social Learning models. Interns are assigned to one or more treatment teams to

provide psychological consultation and psychological services across wards, and gain experience managing the operation of the unit's Token Economy behavior program and individualized behavior support plans. Interns obtain supervised experience leading community meetings, providing individual behavioral assessment, group and individual skills training and psychotherapy, participating in multidisciplinary treatment team meetings and treatment planning, neuropsychological screening, psychodiagnostics assessment, and functional assessment.

Post-doctoral residency

The postdoctoral fellowship at XXX offers a *Major Area of Study* in Severe Mental Illness. At least 85% of resident time will be devoted to training in psychosocial rehabilitation of people with SMI (primarily psychotic disorders) at the CARF-accredited XXX Psychosocial Rehabilitation & Recovery Center throughout the training year and a 3-month rotation at the XXX inpatient psychiatry unit. One psychology resident per year is offered an *Exposure* to clinical psychology training which involves up to 20% of supervised time working with non-SMI individuals at the XXX Wellness & Vocational Enrichment clinic. For all residents, individualized, mentored clinical and research training is combined with a curriculum that emphasizes a comprehensive psychosocial rehabilitation approach to service delivery, education, and implementing change in a mental health care setting. Our program was recognized as an "exemplary training site" in SMI Psychology with a Certificate of Commendation from Division 18 of the American Psychological Association (APA) and won the APA Division 18 President's Excellence in Training Award "in recognition as an outstanding psychology training program, preparing learners to provide recovery-oriented, evidence-based services to adults diagnosed with serious mental illness."

Post-Licensure

This VA sponsored CE course on *Cognitive Behavioral Therapy for Psychosis* will be hosted at XXX Veterans Affairs Medical Center. The course provides *Exposure* level of SMI training by offering 15 APA-approved CE hours of credit and then being offered a community of practice invitation.