1) Professionalism (professional values attitudes and behavior).
   a. Demonstrate knowledge, skills, values, and attitudes reflective of professionalism and competencies in the practice of CFP, as evidenced by:
      • Application of a client-centered perspective when identifying and describing the problem, conducting the assessment, and giving feedback
      • Healthcare practice guided by principles of safe, effective, timely, and equitable care
   b. Value and communicate to the public and other health professionals one’s identity as a couple and family psychologist, as evidenced by:
      • Membership and involvement in specialty organizations
      • Articulation of a plan to maintain and improve CFP competencies and contribute to the evolving CFP knowledge base
   c. Value constructive relations, including collaborative relationships with other health care professionals and within health care teams, as evidenced by:
      • Demonstration of awareness of and tolerance for differences in perspective across disciplines

2) Individual and Cultural Diversity
   a. Demonstrate understanding of how self and others, and health problems, are shaped by individual and cultural diversity factors and context, as evidenced by:
      • Awareness through cultural self-assessment about the ways in which one’s cultural values, beliefs, perceptions and experiences are different from those of clients, students, or research participants
   b. Perform culturally-centered CFP functions, including clinical services and training, as evidenced by:
      • Demonstration of respect for individual and/or familial differences (including but not limited to: language, culture, ethnicity, disability, sexual orientation, SES, marital status, etc.) when providing training, supervision, or clinical services.
      • Provision of clinical services and education that are culturally centered, i.e., guided by a conceptualization of behavior as influenced by culture and perceived though a socially constructed lens.
      • Implementation of behavioral health services that are culturally acceptable to the family via adapted or adaptive interventions that customize treatment to a particular family based on assessment of specific ICD tailoring variables
   c. Develop and maintain a culturally centered perspective, including a commitment to social justice, as evidenced by:
• Advocating for policies that promote equity for marginalized individuals, families, and communities

3) Ethical, Legal Standards, and Policy
   a. Demonstrate command of ethical and legal knowledge related to CFP, including the APA Ethics Code, and professional standards and laws for health care practice, as evidenced by:
   • Demonstration of understanding of the ethics literature and guidelines applicable to CFP practice, including ethical issues related to provision of services to several people who have a relationship with one another, changes in treatment format, and information disclosed by one family member in the absence of others.
   • Demonstration of knowledge of the state and local laws and rules for health care practice and specialty CFP practice
   • Application of an ethical decision making model and relevant ethical and legal principles to identify, analyze, and proactively address ethical conflicts that arise in specialty practice
   • Demonstrate commitment to ethical development and improvement in the competency by participating in continuing education and professional development initiatives addressing ethics related to CFP

4) Reflective Practice, Self-Assessment, and Self-Care
   a. Engage in reflective practice conducted with personal and professional self-awareness, attending to one’s health behaviors and well-being, and their potential impact on specialty practice, as evidenced by:
   • Performance of self-assessments to improve CFP competencies
   • Demonstration of specific methods to self-assess adherence to evidence-based CFP treatment models through collection and analysis of fidelity data.
   • Modeling of self-care for clients, students, trainees, and colleagues
   • Implementation of a decision making model to determine potential impaired practice and strategies to seek consultation and peer feedback when needed within a hypothetical case context

5) Relationships
   a. Demonstrate knowledge of systems theory and research about interpersonal relationships, as evidenced by:
   • Conceptualization of interpersonal interaction from systemic perspective
   • Demonstration of knowledge of systems and contexts relevant to CFP practice
b. Demonstrate interpersonal, affective, and expressive skills in applying the knowledge and attitudes to facilitate communication and manage interpersonal conflict in all professional interactions, as evidenced by:
   - Effective development and maintenance of relationships with clients, families, trainees, supervisors, and colleagues using evidence-based strategies
   - Clear and effective communication in professional interactions

6) Commitment to facilitating positive and constructive interpersonal relations, as evidenced by:
   - Active initiation of steps to repair ruptured therapeutic alliances and damaged relationships with colleagues, trainees, and supervisors
   - Demonstration of openness and receptivity to feedback about one’s own contribution to relationship ruptures or tension

7) Scientific Knowledge and Methods
   a. Demonstrate command of epistemology and scientific knowledge underpinning the practice of CFP, including systemic concepts and theory, as evidenced by:
      - Articulation of a systemic paradigm that conceptualizes the problems of individuals and families as embedded within a matrix of reciprocal interaction between intrapersonal, interpersonal, environmental, and macro-systemic factors, including health care teams and systems of care.
      - Application of systemic orientation to all CFP competencies
   b. Intentional inclusion of CFP concepts, scientific knowledge, and scientific methods in all aspects of specialty activity, as evidenced by:
      - Integration of relevant research findings in the practice of CFP via evidence-based assessment, treatment, and consultation.
      - Application of key systemic concepts in clinical practice
      - Incorporation of relevant CFP research findings into specialty teaching and training
   c. Scientific mindedness: values CFP theory and scientific methods, and their application to specialty practice, as evidenced by:
      - Demonstration of scientific mindedness related to practice, including adaptation of evidence-based models to new populations and service delivery settings, and evaluation of treatment progress and outcome

8) Research/Evaluation
   a. Critically evaluate relevant CFP research related to populations served and problems encountered
   b. Conduct research, guided by a systemic epistemology, contributing to the scientific and professional knowledge base in CFP, as evidenced by:
      - Implementation of research independently or in conjunction with team (i.e., team-based science)
• Evaluation of the effectiveness of various professional activities in health care/promotion (including quality improvement related to healthcare services), training, or consultation
• Application of CFP research skills for needs assessment, program development and evaluation
• Demonstrate command of quantitative and qualitative methods used in CFP research

9) Evidence-based Practice
   a. Demonstrate knowledge of CFP evidence-based practice (EBP) and specialty interventions, as evidenced by:
      • Recognition of intervention models with demonstrated efficacy in treating particular problems and populations
      • Understanding of evidence-based practice strategies, such as a systemic therapeutic alliance
   b. Effectively utilize research to guide clinical interventions, as evidenced by:
      • Implementation of an evidence-based treatment model if it is applicable to the problem and context
      • Application of conceptualizations and techniques from multiple evidence-based protocols (i.e., common factors) demonstrated to be effective or efficacious for targeted symptoms
      • Implementation of treatment approaches that fit the larger database about families (child development, family life cycle, family functioning)
   c. Value the role of research in intervention, as evidenced by:
      • Application and sequencing of techniques and strategies consistent with the evidence-based model within which they embedded
      • Evaluation of treatment progress and outcomes

10) Assessment
   a. Understands the nature and scope of CFP assessment methods, and the measurement and psychometrics of CFP assessment instruments, across the system levels of individuals, couples, families, and their broader contexts
   b. Competently applies assessment methods, using multiple methods of assessment appropriate to CFP and the population, as evidenced by:
      • Selection and competent administration and scoring of CFP assessment instruments appropriate to clients’ sociocultural context
      • Application of both nomothetic and idiographic methods to assessment of individual, couple and family functioning
   c. Integrates assessment data to produce a systemic case conceptualization, including a client-centered problem formulation, case formulation, and treatment formulation
d. Demonstrates a client-centered perspective in the case conceptualization and assessment processes, as evidenced by:
   - Communication of clinically meaningful assessment findings verbally and through written reports that are clear, concise, understandable to patients, caregivers, and other professionals

11) Intervention
   a. Understands the nature and scope of theory-driven and evidence-based CFP intervention strategies, techniques, and models, across the system levels of individuals, couples, families, and their broader contexts, as evidenced by:
      - Knowledge about the effectiveness of psychoeducation, specialty curriculum for psychoeducation, and the distinction between psychoeducation and psychotherapy
      - Understanding of the data regarding the effectiveness and efficacy of CFP interventions for a particular clinical context and population
      - Understanding of the common medical, dental, and health treatments for the targeted population as part of the medical/clinical context for CFP specialty practice
   b. Selects, implements, and evaluates CFP interventions, as evidenced by:
      - Application of CFP common factors in treatment according to a systemic case conceptualization and treatment plan, or implementation of an evidence-based intervention model with fidelity
      - Provision of CFP interventions designed to improve relationship health in individual, group, and community settings, tailoring the intervention to the context and cultural/developmental needs of the client(s)
      - Effective collaboration with other service providers, seeking consultation when needed to ensure optimal treatment outcomes
      - Evaluation of treatment progress and outcomes, modifying the intervention as needed to meet client needs or emerging circumstances

12) Consultation
   a. Demonstrate knowledge about consultation theory, research findings, roles, assessment, and methodology relevant to CFP practice
   b. Conduct effective CFP consultations, including a systemic needs assessment yielding findings and recommendations, and effective interventions based on consultation findings, if appropriate, as evidenced by:
      - Application of systemic orientation and research to the performance of a needs assessment to answer referral questions
      - Preparation of written or verbal report and skill in communicating consultation findings, including recommendations to address the referral questions
13) Teaching

a. Understand teaching-learning theory, methodology, assessment, and goals in CFP teaching, as evidenced by:
   • Advanced understanding of CFP competencies
   • Familiarity with a CFP specialty curriculum and national models for specialty education

b. Implement and evaluate teaching-learning methodologies in CFP, as evidenced by:
   • Development and adoption of a curriculum or lectures consistent with a systemic orientation and specialty scientific methods
   • Application of teaching-learning methods appropriate to the specialty in instructional venues, such as seminars, presentations, and publications
   • Communication to students and trainees of the value of lifelong learning in CFP

14) Supervision

a. Demonstrate knowledge about supervision and competencies in CFP specialty, as evidenced by:
   • Understanding that the supervisory relationship is interconnected with the relationship between the therapist and the family, and with the relational patterns within the family
   • Knowledge of professional and ethical issues (e.g., informed consent, professional boundaries) in the delivery of CFP supervision, as well as the impact of contextual factors on the supervision process

b. Provide effective competency-based CFP supervision, guided by a systemic orientation, as evidenced by:
   • Formation of an effective supervisory alliance and accurate assessment of supervisee’s skills, developmental level, and training needs
   • Provision to supervise of effective feedback, and monitoring of supervisee’s progress in supportive manner
   • Consideration of contextual factors (including culture, ethnicity, race, gender, religion, and age) that influence the therapy and supervision process

15) Interdisciplinary or interprofessional systems

a. Demonstrate knowledge about and apply core competencies for interprofessional practice in a manner consistent with the foundational CFP relationships competency, as evidenced by:
   • Development and maintenance of collaborative relationships with other health care providers, researchers, teachers/supervisors

b. Demonstrate familiarity with the various types of health care systems and delivery models providing a context for client care, and their implications for CFP practice, as evidenced by:
• Effective management of CFP practice in the context of health care system and delivery model
• Demonstration of familiarity with various models of integrated care in health care settings

16) Professional Leadership Development
   a. Identify as a couple and family psychologist, appreciating the role of the CFP specialty in implementation and leadership of team-based health care, as evidenced by:
   • Provision of leadership in health care team management, or in the development, management, and evaluation of innovative models of patient care
   • Presentation or publication in the CFP specialty
   • Development or completion of CFP continuing education

17) Advocacy
   a. Advocate for the specialty of CFP and its role as a science and profession in health care, as evidenced by:
   • Development or maintenance of a key role for CFP specialist on health care team
   • Advocacy for research that contributes to the evidence base supporting specialty practice by encouraging national research agendas and federally-funded institutes to prioritize relationship science
   b. Advocate for equitable, quality health care in the CFP specialty at the individual, institutional, community, and systems levels in public and private sectors, as evidenced by:
   • Development and implementation of policies or research that reduce health care disparities
   • Behavioral health workforce development, coordination among systems of care, and dissemination of evidence-based systemic interventions
   • Advocacy for organizational practices and policies that promote equity and prioritize the needs of families and communities

References
Health Service Psychology Education Collaborative. (2013). Professional psychology in health care services: a blueprint for education and training. The American