Task Domains

Domain I – Rapport, Roles, and Expectations (14%)

Tasks

- Identify the client and stakeholders.
- Establish rapport and develop working relationships with the client and relevant stakeholders.
- Explain the consulting process (building rapport, assessment, goals, planning, implementation, and evaluation).
- Discuss and clarify expectations of consultation in individual, group/team, and organizational settings including (but not limited to) the role of the consultant, competence/scope, informed consent, confidentiality, boundaries, working alliance and referrals.
- Identify cultural and contextual factors relevant to the consultation process (e.g., cultural demographic variables of both consultant and client, general environmental, societal, or global events/factors).

Relevant Knowledge Groups

L - ESTABLISHING AND MAINTAINING CONSULTING RELATIONSHIPS (5%)
A - THEORIES AND PRINCIPLES OF COUNSELING TO INCORPORATE INTO A PHILOSOPHY OF PRACTICE (3%)
I – MENTAL PERFORMANCE TRAINING (SKILLS, INTERVENTIONS, AND OUTCOMES) (3%)
OTHER KNOWLEDGE GROUPS¹ (C, D, E; 3%)

¹ Remaining relevant Knowledge Groups that were weighted 1% or less (i.e., representing one or fewer test items) were clustered together.
Domain II – Assessment (14%)

Tasks

- Identify key areas to be addressed in an initial assessment including (but not limited to):
  - Reasons for seeking mental performance consultation, current performance concerns, and goals
  - Information about the client’s performance including personal history, demands of the performance domain, injury, progression, motivation, roles, and context
  - Health and self-care practices (e.g., recovery, sleep, nutrition and hydration, medication and its impact on performance)
  - Contextual and culturally relevant factors outside the performance environment including personal characteristics (e.g., SES, social values, personality, cognitive ability, physical ability, identity, demographics, family and other relationships, support, significant life events that may be affecting performance and well-being)
  - Contextual and culturally relevant factors within the performance environment (e.g., organizational characteristics [leadership, culture, dynamics], relationships with coaches/teammates, resources)
  - Interaction between client and the environment and its impacts on performance and well-being
  - Perceived individual and organizational strengths and weaknesses
  - Performance metrics (i.e., statistical data) relevant to performance domain
  - Understanding of mental performance consultation and readiness for change

- Select and utilize culturally responsive assessment methods to collect information about individuals, groups/teams, or organizations including (but not limited to):
  - Direct interviews with client
  - Direct observation of client in various settings
  - Standardized questionnaires and tests
  - Interviews with stakeholders

- Evaluate the consultant-client fit based on the assessment data gathered; refer out as appropriate.

Relevant Knowledge Groups

B - ASSESSMENT OF INDIVIDUALS, TEAMS/GROUPS, AND ORGANIZATIONS (6%)
I - MENTAL PERFORMANCE TRAINING (SKILLS, INTERVENTIONS, AND OUTCOMES) (2%)
OTHER KNOWLEDGE GROUPS (A, D, E, G, J, M; 6%)
Domain III – Goals, Outcomes, and Planning (17%)  

Tasks

- Analyze, synthesize, and interpret assessment data, using evidence-informed practice (application of theories, models, and research) and the consultant’s philosophy of practice, to gain an initial understanding of the client and determine the client’s goals, desired outcomes, and reasons for seeking consultation.

- Collaborate with the client and stakeholders to prioritize goals and desired outcomes.

- Identify personal, professional, and systemic resources and barriers.

- Develop a mental performance plan that combines awareness, education, and action based on the assessment findings, client characteristics, context, and goals and desired mental performance outcomes, using an evidence-informed approach, applicable mental skills, and appropriate training/intervention methods.

- Determine ways of measuring client progress and impact for future planning.

Relevant Knowledge Groups

G - FOUNDATIONAL PSYCHOLOGICAL THEORIES AND MODELS (5%)
I - MENTAL PERFORMANCE TRAINING (SKILLS, INTERVENTIONS, AND OUTCOMES) (4%)
A - THEORIES AND PRINCIPLES OF COUNSELING TO INCORPORATE INTO A PHILOSOPHY OF PRACTICE (2%)
H - LEARNING AND SKILL ACQUISITION (2%)
OTHER KNOWLEDGE GROUPS (D, F, J, K; 4%)

Domain IV – Implementation (31%)

Tasks

- Implement the mental performance plan to facilitate achievement of goals and desired outcomes where the consultant and client are both actively engaged.

- Facilitate individual, group/team, or organizational training and interventions to build mental skills, incorporating reflection/debriefing.

- Collaborate with other stakeholders to implement interventions relevant to the client, goals and desired outcomes (e.g., working with an athletic trainer to support the injury recovery process, using the “train the trainer” model to work through the coach, consulting with a manager).

Relevant Knowledge Groups

I - MENTAL PERFORMANCE TRAINING (SKILLS, INTERVENTIONS, AND OUTCOMES) (10%)
G - FOUNDATIONAL PSYCHOLOGICAL THEORIES AND MODELS (5%)
A - THEORIES AND PRINCIPLES OF COUNSELING TO INCORPORATE INTO A PHILOSOPHY OF PRACTICE (3%)
C - COACHING DEVELOPMENT AND LEADERSHIP (3%)
H - LEARNING AND SKILL ACQUISITION (3%)
L - ESTABLISHING AND MAINTAINING CONSULTING RELATIONSHIPS (3%)
OTHER KNOWLEDGE GROUPS (D, J, K, M; 4%)
Domain V – Evaluation (12%)

Tasks

- Monitor mental performance plan effectiveness periodically as part of assisting clients in making progress toward established goals and desired mental performance outcomes.
- Reflect and reassess with the client and any relevant stakeholders regarding client utilization of mental performance training, consultant effectiveness, and progress towards established goals and desired mental performance outcomes.
- Revise the consultation approach, mental performance plan, and/or adjust goals as part of the consulting relationship as needed.
- Conclude consultation when appropriate based upon feedback, (re)assessment, and professional judgment.
- Engage in ongoing self-reflection as a part of the consultation process.

Relevant Knowledge Groups

F - EVALUATION OF CONSULTANT AND PROGRAM/SERVICE DELIVERY EFFECTIVENESS (5%)
B - ASSESSMENT OF INDIVIDUALS, TEAMS/GROUPS, AND ORGANIZATIONS (2%)
OTHER KNOWLEDGE GROUPS (D, I, J, K, M; 5%)

Domain VI – Professional Responsibilities (12%)

Tasks

- Engage in activities to maintain and enhance professional competence (e.g., continuing education, peer consultation, mentorship, use of technology).
- Practice in a manner that is consistent with applicable laws, regulations, and the AASP Code of Ethical Principles and Standards.
- Identify potential ethical situations and formulate an action plan to mitigate them appropriately.
- Act in accordance with principles and strategies (such as those addressed by SafeSport) for preventing and addressing emotional, physical, and sexual abuse to help ensure safe and positive sport environments.
- Engage in a process of self-reflective practice that includes continuous learning through formal and informal methods.
- Engage in activities that enhance awareness, knowledge, and skills as related to cultural competence and multicultural humility (e.g., recognize one’s own biases, stereotypes, and misconceptions).
- Engage in self-care and mental training activities that enhance one’s own well-being and performance.
- Educate consumers on the qualifications, expertise, and scope of practice represented by the CMPC credential and how mental performance consultation can benefit individuals, and groups/teams.
- Facilitate the referral process (e.g., based on client needs, goals, expectations, or consultant scope of practice)

Relevant Knowledge Groups

E - PROFESSIONAL ETHICS AND RESPONSIBILITIES (6%)
D - CULTURE AND DIVERSITY (2%)
L - ESTABLISHING AND MAINTAINING CONSULTING RELATIONSHIPS (2%)
OTHER KNOWLEDGE GROUPS (K, M; 2%)
13 Knowledge Groups (A - M)
Knowledge Groups are listed below with Weights\(^2\) and Component Knowledge Statements\(^3\)

A THEORIES AND PRINCIPLES OF COUNSELING TO INCORPORATE INTO A PHILOSOPHY OF PRACTICE (9\%)  
- Theoretical orientations of counseling and consulting for use within sport/performance (e.g., cognitive-behavioral therapy, humanistic approach, acceptance and commitment therapy, person-centered therapy, mindfulness, feminist theory, solution-focused brief therapy, systems theory)  
- Change processes (e.g., trans-theoretical model, theory of planned behavior)  
- Models of performance excellence

B ASSESSMENT OF INDIVIDUALS, TEAMS/GROUPS, AND ORGANIZATIONS (8\%)  
- Processes for designing, selecting, implementing, interpreting, and debriefing assessments  
- Models or approaches of case conceptualization  
- Use of assessment data and information to inform case conceptualization  
- Quantitative assessments (e.g., available questionnaires and tests and their appropriate selection, uses, limitations, implementation procedures, scoring, and debriefing)  
- Interviewing techniques and other qualitative approaches (e.g., motivational interviewing, intake sessions, Socratic questioning, performance debriefing, performance profiling)  
- Observations (e.g., of performance and of verbal and non-verbal performance indicators such as body language, emotional displays, communication patterns, and responses to adversity)  
- Data from other sources (e.g., medications/supplements, season statistics, nutrition, stakeholders, reports)

C COACHING DEVELOPMENT AND LEADERSHIP (4\%)  
- Coaching models, methods, techniques, and evaluation  
- Leadership theories and approaches to leadership development, personal leadership, group/team, and organizational leadership  
- Communication, critical thinking, decision making, and conflict management strategies

\(^2\) The weight for a Knowledge Group appears in parentheses following each group title. The weights indicate the number of exam items out of 100 items that target that knowledge group. The weights summed for all 14 knowledge groups equal 100, reflecting the 100 items on the exam. 
\(^3\) The component knowledge statements were taken from the original Job Task Analysis. Knowledge Groups were formed and knowledge statements were revised by a group of Certified Mental Performance Consultant® (CMPC) Subject Matter Experts (SMEs). A second group of CMPC SMEs participated in a systematic quantitative process to weight the Knowledge Groups.
D CULTURE AND DIVERSITY (7%)

- Multi-cultural and diversity, equity, inclusion, and belonging considerations (individual, group/team, organization, and society)
- Contextual intelligence factors of sport/performance (e.g., culture, values, attitudes, history and language of the performance domain)
- Organizational structure including the consultant role within the performance environment
- Consultant’s understanding of their personal intersectionality, biases, and assumptions
- Athletic subculture and unique factors of sport/performance environments (e.g., transitions, injuries, athletic identity, team and organizational dynamics, managing pressure)

E PROFESSIONAL ETHICS AND RESPONSIBILITIES (8%)

- The AASP Code of Ethical Principles and Standards
- Ethical issues (e.g., scope/limits of competence, boundaries, dual roles, confidentiality, who is the client, informed consent, consultant self-care, self-disclosure, marketing, technology, collection and storage of client-related information and documentation)
- Principles and strategies (such as those addressed by SafeSport) for preventing and addressing emotional, physical, and sexual abuse to help ensure safe and positive sport environments.
- Purpose, function, and proper utilization of documents that pertain to the consulting process (e.g., informed consent, release of information form, etc.)
- Dynamics that influence collaboration with stakeholders in ethical and professional ways
- Collaborations and referrals (e.g., knowledge of possible conditions and/or situations outside the scope of practice requiring referral and how to conduct the referral process)
- Ethical decision-making models
- Peer-reviewed journals in the field of sport and performance psychology and related disciplines (how to find, read, critique, and utilize research to inform practice and professional development).
- Scope of practice and professional identity of providing mental performance services and how these differ from other sport and performance professionals (e.g., licensed mental health clinician, athletic trainer, strength and conditioning coach, nutritionist, executive coach)

F EVALUATION OF CONSULTANT AND PROGRAM/SERVICE DELIVERY EFFECTIVENESS (6%)

- Mental performance plan evaluation methods (e.g., pathways for ongoing feedback, assessment)
- Consultant effectiveness evaluation methods (e.g., program evaluation, peer consultation, self-report, engagement).
- Reflective practice (e.g., self-reflection and evaluation of self within the system)
- When and how to conclude consultant-client relationship
G FOUNDATIONAL PSYCHOLOGICAL THEORIES AND MODELS (11%)
- Theories and models from various sub-disciplines in psychology that inform mental performance consultation (e.g., achievement goal theory, attribution theory, cue utilization theory, IZOF model, model of attentional styles, multidimensional anxiety model, resilience models, self-determination theory, social cognitive theory, sport confidence model)
- Theories and models that underpin mental skills (e.g., related to imagery, goal setting, self-talk, etc.)
- Theories and models that underpin group/team and organizational dynamics (e.g., shared mental model, task and social cohesion, stages of group development)

H LEARNING AND SKILL ACQUISITION (5%)
- Motor learning/biomechanics, skill acquisition, and execution
- Stages of cognitive and emotional development
- Theories of learning effectiveness (e.g., how information is absorbed, processed, and retained)
- Deliberate practice
- Systematic feedback

I MENTAL PERFORMANCE TRAINING (SKILLS, INTERVENTIONS, AND OUTCOMES) (20%)
- Application of theory and research considering demographic, setting, population, and contextual factors.
- Training and intervention contextual considerations (e.g., time of season, length of intervention, location, in-person/virtual, timing of training, individual, group/team, organization)
- Approaches to building client self-awareness
- Mental performance outcomes (e.g., focus/concentration, confidence, resilience, motivation, self-regulation, performing under pressure, team cohesion)
- Skills to facilitate mental performance outcomes (e.g., energy management, imagery, goal setting, relaxation, self-talk, mindfulness, emotional agility, routines, values, gratitude, psychological rest, sleep, communication)
- Training and interventions to build mental skills (e.g., breathing, progressive muscle relaxation, mindfulness training, outcome/performance/process goals and achievement strategies, reframing and countering thoughts, affirmations, growth mindset, confidence journaling, focus cues, developing and practicing performance routines, imagery scripts, identifying values and committed action strategies, team building, biofeedback)
- Facilitation strategies and reflection/debriefing
J PHYSIOLOGICAL BASES OF PERFORMANCE (4%)

- Physiological bases of sport/performance
- Fundamentals of neuropsychology and brain development
- Periodization and training cycles

K PSYCHOLOGY OF INJURY AND REHABILITATION (4%)

- Professional roles within interdisciplinary treatment team
- Biopsychosocial considerations of injury, recovery, rehabilitation, and return to performance
- Theoretical models and research related to injury and rehabilitation
- Mental skills needed for recovery and return to performance

L ESTABLISHING AND MAINTAINING CONSULTING RELATIONSHIPS (10%)

- Techniques for building, maintaining, and demonstrating rapport and trust (e.g., active listening, presence in the performance environment, demonstrating genuine interest, empathy, setting and respecting boundaries)
- Techniques for facilitating a consulting relationship (e.g., clarification of roles, management of multiple relationships with various stakeholders, collaboratively setting and following through on expectations, building a working alliance)
- Techniques for promoting a psychologically safe environment (e.g., non-judgmental, normalizing, neutral stance, explanation and assurance of confidentiality)
- Techniques for promoting a diverse and culturally inclusive environment (e.g., request for and appropriate use of pronouns, discussions about identity and intersectionality, understanding ability classification considerations such as when working in para sports)
- Communication skills (e.g., open communication with clients and stakeholders, developmentally appropriate, population considerations, in-person versus virtual)
- Counseling skills (e.g., effective questioning, active listening, micro skills)

M USE OF TECHNOLOGY IN MENTAL PERFORMANCE CONSULTING (4%)

- Legal and ethical components of using technology for online service provision (e.g., confidentiality considerations, informed consent, emergency preparedness, documentation, HIPAA)
- Best practices for fulfilling the online consulting process (i.e., establishing rapport, assessment, goals, planning, implementation, and evaluation)
- Use of online tools (e.g., videoconferencing, scheduling, forms/surveys) and other forms of technology (e.g., biofeedback)
- Professional considerations while using technology for online services (e.g., online presence, communication, time zone conversions, professional versus personal social media use)