AASW
Australian Association
of Social Workers

AASW ASWEAS

GUIDELINES FOR ACCREDITATION

V.4

Version Number	Approval Date	Approved By	Amendment
1.0	Feb 2021	CEO	New document
2.0	Oct 2023	CEO	Reflect new framework
3.0	Nov 2024	CEO	New Standards
4.0	Sept 2026	CEO	Updates to conditions

This AASW Guidelines for Accreditation assessment for social work programs is informed by professional competencies as outlined in the AASW Australian Social Work Education and Accreditation Standards (ASWEAS), AASW Practice Standards, and AASW Code of Ethics.

Australian Association of Social

Workers ABN 93 008 576 010

Registered office - Lvl 7, 14-20 Blackwood Street

North Melbourne VIC 3051

PO Box 2008,

Royal Melbourne Hospital

VIC 3050 Tel: 03 9320 1000

Email:

education@aasw.asn.au

Website: aasw.asn.au

ISBN: 978-0-909255-06-0

Contents

Definitions

AASW: Australian Association of Social Workers, the professional body nominated by members, Providers and the broader professional community to set and maintain standards of professional conduct for social workers educated or seeking to work in Australia.

AASW Practice Standards 2023: Standards that outline how social workers demonstrate their professional identity through their practice and ensure trust and confidence in the profession for the public and service users. They provide a reference point for assuring the quality of practice and ensuring social workers' accountability to the people they serve.

AASW Code of Ethics 2020: The Code expresses the principles and responsibilities that are integral to, and characterise, the social work profession and to act in ethically accountable ways in the pursuit of the profession's aims.

Accreditation: The process through which a Higher Education Provider demonstrates compliance with the ASWEAS and that the social work program provides or will provide competent social workers.

Accreditation Application: The application submitted by a Provider to AASW to have a social work program assessed for accreditation.

Accreditation Assessment Panel: AASW contracted individuals who as panel members on behalf of the AASW assess Provider's application for accreditation, reaccreditation or change to their social work programs and through their report make recommendations to the Accreditation Council.

Accreditation Council: An independent body appointed by the AASW providing a determination for each accreditation report tabled, thus ensuring the Provider satisfies the requirements of the ASWEAS.

Accreditation Expiry date: The date the social work program ceases to be accredited for the purpose of enrolling new students. Accreditation expiry dates are determined by the AASW and are based on when the social work program is approved by the Accreditation Council.

Accreditation Final Report: Is the report prepared by the AASW Accreditation Assessment Panel for the AASW Accreditation Council which details the assessment and recommendations on a Provider's accreditation application.

Accreditation Status: Equates to 'Provisional Accreditation', 'Full Accreditation', and 'Reaccreditation' separately as applicable and where appropriate. Each of these statuses may also have conditions attached.

Accreditation Team: AASW employees who liaise with Providers, students, Accreditation Assessment Panel Members, Accreditation Council and other AASW teams and coordinate the accreditation process.

ASWEAS: Australian Social Work Education and Accreditation Standards which ensures Providers design and deliver social work programs that clearly equip entry-level social workers to practice safely and effectively, thus making them eligible for membership of AASW.

Curriculum: Incorporates the social work program's total planned learning experience, including teaching and learning strategies, unit/subject outlines, educational and professional philosophies, program structure, and delivery mode, practice experience and links between their assessment and the standards.

Delivery Mode: Means by which the programs are made available to students: on-campus or in blended mode, by distance or by e-learning methods.

Desktop assessment: A desktop assessment consists of analysis of the evidence supplied in an Accreditation Application and whether this evidence demonstrates adherence to the Standards. This format will often be used when a site visit is deemed not necessary.

Discipline Lead/Head of School: Academic responsible for the design and delivery of the program on behalf of the education provider, a level of leadership required to develop and promote the discipline and teaching program.

Graduate Attributes: The high-level intended capabilities that a student - should gain through completion of their learning and experiences they engage with, while at their Higher Education Provider.

Program or Course or Degree: The full program of study and experience that are required to be undertaken before a qualification recognised under the Australian Qualifications Framework, such as a Bachelor of Social Work, can be granted.

Provider: A Higher Education Institution, or a recognised training organisation, accredited by the Tertiary Education Quality and Standards Agency (TEQSA) responsible for a program at AQF Level 7, 8 and 9 and who meets the requirements set out in the ASWEAS.

Recommendation: Suggestions that a Provider is required to report on as part of their next Accreditation Application.

Site Visit: Means the attendance by the Accreditation Assessment Panel at a Provider's campus/es to clarify and verify with Provider staff and students, statements made in the Accreditation Application regarding the demonstration of compliance with the Standards.

SWAOU: Social Work Academic Organisation Unit.

TEQSA: The Agency responsible for regulating and assuring the quality of all providers of higher education in Australia.

1 Accreditation Overview

The AASW developed the AASW Guidelines for Accreditation Assessment of Social Work Programs (the Guidelines) to assist Higher Education Providers (Providers), AASW Accreditation Assessment Panels and the Accreditation Council with the accreditation process, where Providers are seeking accreditation or reaccreditation of their social work education and training programs. The Guidelines outline the process the AASW follows to accredit a social work program, and the roles and responsibilities of all parties involved throughout that process.

1.1 Objectives of accreditation reviews

Accreditation is intended to ensure that graduates from social work programs are equipped to achieve the professional competencies and learning outcomes necessary to practice safely and for entry into professional practice (ASWEAS).

The accreditation process aims to determine, with reasonable confidence, the extent to which:

- the program submitted by a Provider is capable of producing social work graduates with the skills and attributes identified by the ASWEAS
- graduates possess the capabilities specified by the Provider
- the integrity and quality of the program is sustainable over the period for which it is accredited.

In accrediting a social work program, the AASW signifies that it expects the Provider to produce graduating students with the knowledge, skills, and professional competencies necessary to practice in Australia safely.

Graduation from a program of study accredited by the AASW enables the graduate to apply for membership of the AASW.

1.2 Structure of the AASW Accreditation Standards

The Australian Social Work Education and Accreditation Standards (ASWEAS) comprise three domains and eight standards:

Domains

1. Readiness for professional practice
2. Alignment of theory and practice
3. Policies, processes and resources

Standards

1. Knowledge skills and attributes
2. Professional identity

3. Knowledge for practice
4. Practice education
5. Assessment
6. Equity, access and student support
7. Admissions, credit decisions and degree requirements
8. Leadership, staffing and resources

The ASWEAS additionally includes Graduate Attributes and the Practice Standards

1.3 Courses accredited by the Australian Association for Social Workers

Under TEQSA, Australian social work programs are academically accredited to award degrees at Level 7 (Bachelor), 8 (Honours) and 9 (Master) of the Australian Qualifications Framework (AQF). Degree titles specifically are

- Bachelor of Social Work (BSW)
- Bachelor of Social Work (Honours) (BSW (Hons))
- Master of Social Work (Qualifying) (MSW(Q))

Unless precluded by the regulations of the Provider, master's degrees should apply the terminology Master of Social Work (Qualifying) to differentiate them from programs offering advanced social work degrees by research. TEQSA may approve a Master of Social Work without the qualifying tag until the Provider has obtained AASW accreditation.

Regardless of academic status, graduates of all AASW accredited social work programs are professionally qualified as entry-level social workers.

Where the Higher Education Provider offers multiple social work programs at different AQF levels, these will be separately accredited.

1.4 Approach to accreditation

The AASW, in its role as a professional accreditor, notes the:

1. AASW supports flexibility and responsiveness of social work programs to change in response to the professional workplace
2. ASWEAS seeks to complement the role of the Tertiary Education Quality and Standards Agency (TEQSA) or the Higher Education Providers operating under the regulatory Higher Education Standards Framework (HESF). Any overlap that may need to occur, the AASW will work to keep to a minimum
3. AASW is committed to a collegial approach in working with Providers with the aim of ensuring that graduate social workers are ready for professional practice

4. Approach of the review should seek a balance of summative and formative evaluation
5. Accreditation process is guided by the principles of transparency, fairness and collaborative engagement with Providers and other stakeholders
6. Accreditation Standards aim to accommodate a range of educational models and variations in curriculum design and teaching methods
7. Review recommendations must be based on clear evidence that the program is producing, or, in the case of new programs, can produce, graduates with the knowledge and practice outcomes expected for entry level social work professionals.

1.5 Accreditation status identification

The Provider is, and the AASW is not, responsible for keeping its students informed about:

a) Each program's accreditation status

b) The progress of an application for accreditation status

c) The impact of any absence of progress of an application for accreditation, including where that results from suspension, withdrawal, revocation or termination of any accreditation process and

d) The impact of those matters on each student's eligibility to join the AASW.

The AASW reserves the right to review a Provider's website, especially program related pages to ensure accurate reflection of the Provider's accreditation status.

If a Provider has a program granted an accreditation status, then AASW may list the program and the Provider on its own website confirming that status, including any relevant conditions or limitations on that status.

1.6 Confidentiality

All documentation and materials provided by the Provider will be treated confidentially by the AASW and their employees, including the Accreditation Assessment Panel members.

Any draft reports related to the accreditation will be confidential between the Provider and AASW. When the accreditation process is complete, AASW will maintain a clean copy of all documentation related to the accreditation process within the Association's designated platform, and other copies of accreditation material will be destroyed.

1.7 Withdrawing and resubmitting an application

A Provider may request that their application be withdrawn from the accreditation process by writing to the AASW Accreditation team. A program application can be withdrawn at any stage of the process until a final accreditation outcome has been provided by the Accreditation Council.

Once the accreditation assessment has taken place, a Provider or Panel may decide to request the withdrawal so that further work can be undertaken to meet the ASWEAS. In this instance, the Provider will discuss with

the Accreditation team and may subsequently resubmit the program for consideration with further additional evidence and information.

If the program application is resubmitted within one calendar year of the withdrawal, a site visit may not be required if already undertaken. The decision regarding this will be at the AASW discretion after consultation with the nominated Accreditation Assessment Panel Chair, looking at identified concerns from the initial assessment. If ASWEAS have been revised in the interim, a new site visit may be required.

Please note that, depending on the timing the withdrawal occurs, the accreditation fee may still be required as the Assessment Panel and assessment process may have already occurred thereby requiring time and workload of the Panel and AASW staff. A Provider is not eligible for a refund after AASW has conducted a site visit. All refunds are at the CEO's discretion.

1.8 Accreditation outcomes

The AASW may accredit a program if reasonably satisfied that either:

1) The program meets the ASWEAS, or
2) The program substantially meets the ASWEAS, and the placement of conditions will ensure the program meets the ASWEAS fully within a defined timeframe. In these instances, regular monitoring (the length will be determined by the Panel and Council) may be imposed.
3) New providers will be subject to enhanced monitoring during the provisional accreditation period and the first full-accreditation period, in the form of yearly reporting, to assure AASW they remain compliant. If standards are not maintained, AASW will commence a formal review which may include an additional site visit. The cost of these reviews will be responsibility of the Provider.

The table below outlines the accreditation outcomes for a program seeking to be accredited. These outcomes apply to all programs, whether newly accredited or existing.

Accreditation Status	Definition
Full accreditation	AASW has determined that accreditation is granted to a new program or a program undergoing reaccreditation or expansion and the Provider has demonstrated it has met all the ASWEAS requirements.
Conditional accreditation	AASW has determined a program substantially meets the requirements for accreditation, however there are identified areas of deficit or weakness which can be addressed within a specified limited time. Providers will be required to resubmit against specific conditions within the noted timeframe. This outcome can also be applied to Provisional accreditation status.
Provisional accreditation	Accreditation status for a new Provider offering a program for the first time, or an existing Provider adding a new social work course that has not yet delivered its first graduates. It may be applied in cases where a Provider has significantly changed an existing accredited social work program and the AASW would like to see a cohort of students graduate from the changed program. The Provisional status applies for the duration of the first cohort, before a sample of graduates has emerged. Full accreditation would be sought upon the next full Provider submission.
Suspended accreditation	AASW determines the social work program is no longer considered accredited for the duration of the suspension period and would notify the Provider of reasons. AASW

	requires the Provider to advise the AASW of the management of currently enrolled students and TEQSA of the suspension status. This approach is followed when the program is deemed to have serious weaknesses and deficiencies and fails to meet key areas of the ASWEAS, which would disadvantage students currently enrolled, and the Provider is deemed not able to meet the non-compliant issues within the stipulated timeframe.
Revoked accreditation	AASW determines the social work program is no longer considered accredited and would notify the Provider of reasons. AASW requires the Provider to advise the AASW of the management of currently enrolled students and TEQSA of the revocation status. This approach is followed when the program is deemed to have serious weaknesses and deficiencies and fails to meet key areas of the ASWEAS, which would disadvantage students currently enrolled, and the Provider deemed not able to meet the non-compliant issues.
Refused accreditation	AASW has determined that a new program or a program undergoing reaccreditation or expansion has a serious weakness or deficiency in one or more ASWEAS areas that cannot be corrected within a reasonable timeframe. Further discussion will take place with the Provider and in time they may resubmit if appropriate.
Approve/Not approve	AASW has determined that approval be given or not for a Provider's request to approve a variation to an existing social work accredited program. This is normally for an existing program which would be already accredited, and the Provider wishes to add a location or change of minor components of the program.
Accredited teach out	When a Provider has made the decision to no longer offer a social work program and may either transfer students into a similar program to complete their studies or allow students to complete the course with no further intakes to be permitted. The Provider is to notify the AASW formally of change to program status, any additional information and the records would reflect the 'teach-out' of the program noting the final completion date of the final students. No further full accreditation cycle process for the program is required for ongoing accreditation purposes. The Provider would need to update the AASW on ongoing process until completion through the annual reporting process, so that the course remains accredited until teach out is complete.

The period of accreditation granted **is up to** 5 years. However, AASW retains the right to reduce this period, where Council has concerns about sustained compliance with the applicable standards. The Provisional accreditation depending on the program will be until the first graduates, usually 2 years from the delivery commencement date for MSW(Q) and 4 years for the BSW/BSW(H). The accreditation period will consider any conditions placed on the programs.

1.9 Additional campus application

A Provider can only seek the addition of a new campus for delivery of their social work program where the program has already achieved full accreditation status with no conditions. The accreditation process will be assessed separately to any other accreditation program process. In this case the Provider must discuss with the AASW Accreditation team the requirements to seek approval for the addition.

A Panel will be convened to assess the appropriateness of the addition, and a formal report and accreditation outcome will be recommended to the Accreditation Council.

The outcome for an additional campus will be

- That the Panel seek approval from the Council for the additional campus – in this case the Panel have found the new campus to be equivalent to the primary campus and therefore the program at new campus will inherit the accreditation status of the primary social work program and be incorporated into the next accreditation cycle.

- That the Panel seek approval from the Council for the additional campus to have a provisional or conditional accreditation status placed upon the social work program – in this case the Panel have found that the new campus has substantial concerns to that of the primary campus and therefore recommend that a different status be granted so that the Provider has a specific time to ensure alignment with the Standards.

- That the Panel seek that the Council do not approve the additional campus – in this case several significant issues or concerns, which may disadvantage students if they were to commence at this campus and the Panel believe the Provider is not ready to expand the social work program to a new campus facility.

- Delivery online is considered an additional application, for the purpose of this process.

- Third-party delivery (where the Provider wishes to engage a third-party partner to deliver all/part of the curriculum for a fully accredited course) is considered an additional application, for the purpose of this process.

1.10 Recommendations, commendations and opportunities for improvement

The assessment of accreditation applications should be viewed as a learning activity, with all parties wanting to ensure that the social work program being delivered is one of high quality for the benefit of the student experience. To this end the final accreditation report will include recommendations, commendations and opportunities for improvement, as well as clearly outline any conditions placed on the program. Where applicable timelines will be clearly outlined.

A recommendation is placed in the report by the Accreditation Assessment Panel and is something that may be linked to conditions placed on the program accreditation outcome. The recommendations consist of guidance that highlights actions to be taken by management to mitigate risk and enhance performance and should be acted on by the Provider prior to the next accreditation cycle. If they are linked to conditions placed on the program, there will be a timeframe noted in the outcome letter for evidence of correction.

The Accreditation Assessment Panel may also identify areas for commendation where identified aspects of the assessment exceed the minimum requirements of the Standards or engagement occurring within the Provider that the Panel believes is an area of good practice.

The final area reported are opportunities for improvement, which is where the Accreditation Assessment Panel have identified areas or components of the Provider processes or practices and suggested potential ways to improve or enhance the program delivery. The opportunities for improvement are not required to be acted on; however, it is encouraged that the Provider does review these and take them into consideration as a way of demonstrating a commitment to the overall quality improvement of the program.

2 Accreditation Process

2.1 Initial Program, accreditation, reaccreditation and program variation approvals

The aim of the accreditation process is not simply to ensure quality but to support continuous quality improvement of professional social work education and training to meet community and practice. The accreditation process is conducted in a positive, constructive manner based on peer review.

In the AASW role as accreditor of Provider's social work programs, the Accreditation Assessment Panel will be asked to assess submissions regarding the following scenarios:

Initial Program Accreditation: The evaluation requested for a new educational program offered either for the first time by a Provider or in conjunction with another accredited social work program.

Reaccreditation: The evaluation requested for a renewing or extension of the accreditation status of a social work program delivered by the Provider after a specific period.

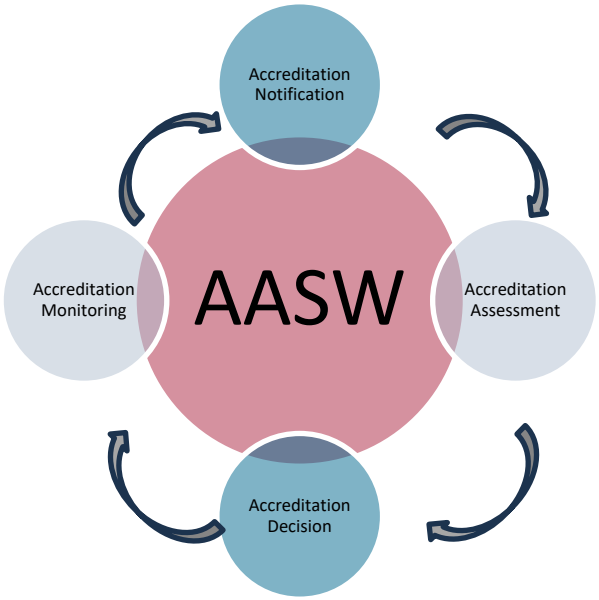
Program Variation: The request for assessment of a proposed change or significant modification to an existing social work program offered by the Provider.

2.2 The accreditation cycle

The accreditation cycle begins from initial contact with AASW either through a request regarding an initial accreditation for a proposed social work program or through a trigger for reaccreditation. In each phase of the process (reflected in Figure 1 below) there are identified process steps that are required to be completed to ensure the accreditation cycle is effective and robust.

The Accreditation Standards (ASWEAS) assess a Provider's social work program in terms of its governance, students, and curriculum. The focus is on how the delivered program ensures the graduates are job-ready to enter the profession.

Figure 1: Accreditation Cycle



2.3 Accreditation programs

New Social work Programs
The AASW Accreditation team must be notified when a Provider is looking to offer a new social work program. The Accreditation team will require the completion of an ***Intent to Submit*** form and will then commence discussions with the Provider to note the process steps, timeframes, application requirements, accreditation format, fees, reporting, panel and site visit. For a new program the process may take extra time to ensure all requirements are met and therefore the AASW ask a Provider to allow 10-18 months prior to students enrolling.

For a new Provider and new program, it is good practice for the Provider to utilise an external consultant to develop the curriculum content, practice education, and required components of the program.

Where the Provider chooses to seek TEQSA approval concurrent with the AASW accreditation process, any delay with the TEQSA approval longer than 12 months from the accreditation outcome date (determined by the Council's accreditation outcome letter), will rend the AASW accreditation void and the Provider having to re-start the accreditation process, including new submission, site visit and relating fees. Shorter delays may also require additional review and documentation, if so determined by AASW, to ensure the accredited program remains in line with the ASWEAS.

Accredited programs
The AASW Accreditation Team will notify the Provider that their social work program is due for reaccreditation within the next twelve-month cycle. The Accreditation team will require the Provider's confirmation of the program continuing through the completion of the ***Intent to Submit*** form. Once this has been confirmed further discussion will take place to note all accreditation process steps and start the process for confirming application due date and site visit dates.

Variation to accredited program
The AASW supports continuous quality improvement and realises that over an accreditation period a program is likely to undergo change. Higher Education Providers are requested to notify the Accreditation

Team either through the Annual Report (each February) or earlier within the year if significant change has occurred, especially if the change impacts on the program's ability to comply with the ASWEAS.

The AASW is to be immediately notified by the Provider if TEQSA or another regulator proposes or commences an investigation, implementation of conditions or changes the Provider accreditation status.

Significant changes which should be noted, and which have occurred since the previous accreditation review include but are not limited to:

- Changes to academic staff delivery team, SWAOU, governance or organisational structure within the provider
- Practice Education changes to structure, governance, and arrangements of the Practice Education component of program delivery
- Change to program structure, course/unit codes or names
- Introduction of new units of study since your last accreditation cycle or replace units submitted within the previous course accreditation
- Change to program objectives, duration, format, structure, or delivery mode
- Addition of an existing accredited program to a dual degree
- Additional new location for delivery, including online delivery and third-party arrangement for curriculum delivery *(Expansion of programs applies to fully accredited programs with no conditions)*
- If a program is moving to or has moved to teach out status. (If so, please provide a teach out/ student-transition plan).

Depending on the size and details of the change an assessment may be requested by the AASW and the convening of an Accreditation Assessment Panel. This will be confirmed through discussion between the Provider and the Accreditation team.

In situations where AASW becomes aware of significant changes in the accredited course that have resulted in misalignment with the standards and risk of non-compliance, AASW reserves the right to seek further clarification from the Provider at any time. If non-compliance is evidenced and AASW's concerns are not resolved in the interaction with the Provider, AASW may initiate a full review, including a site visit. The costs related to this additional review, will be charged to the Provider.

2.4 Accreditation applications

The accreditation application is the Provider's self-assessment demonstrating how the social work program meets the Australian Social Work Education and Accreditation Standards (ASWEAS). The application will include various pieces of supporting evidence to demonstrate how the provider believes they meet the Standards.

The Accreditation application includes an Evidence Guide to assist with a general outline of potential evidence which the Accreditation Assessment Panel would be expecting to view as part of the submission. Providers can submit further evidence and information as they wish to support their application, it may also be material that has been used for other purposes, such as a TEQSA audit.

The Accreditation *Application for program accreditation* is available on the website along with several templates which a Provider should use to assist with the application completion. Electronic submissions are the preferred option, and Providers may include hyperlinks with key documents, please just ensure that hyperlinks are active and accessible by AASW staff and Accreditation Assessment Panel members. Where application for multiple programs takes place, the Provider may combine sections and indicate/highlight where applicable, to facilitate the review and avoid duplication.

The Accreditation Team may provide Annual Reports completed throughout the accreditation cycle (if an existing Provider) to the Accreditation Assessment Panel and provide additional information, or previous accreditation report (if relevant), TEQSA status, and information to assist with the assessment process.

For social work programs delivered across more than one site, each site will be viewed as a separate entity and therefore the application should clearly delineate each site's evidence of compliance with the standards. Information that is common across all sites can be submitted together noting that it is for all locations. However, if there are differences in staffing, teaching space, practice education or other practices, the Provider needs to clearly identify.

2.5 Accreditation advertising

The Provider must ensure that all advertising material used to inform prospective students contains accurate information on the accreditation status of the program being advertised.

Advertising before the accreditation process is complete must include a notation that states:
"This social work program is not yet accredited by the AASW and will therefore not allow AASW membership eligibility for graduating students."

There are risks involved if a Provider was to commence social work programs outside of the AASW accreditation process, and potential complications for enrolled students and Provider alike should the review process find there are areas of development/ non-compliance identified within the program. There is the risk that the program will not be accredited by the time the first cohort graduates.

2.6 Accreditation agreement

The Provider accreditation agreement is initiated by the AASW Accreditation Team and outlines the fees, roles and responsibilities of all parties in the accreditation of social work programs in Australia.

Notification of intent to submit for a social work program will signal to AASW to commence the process for completion of the accreditation agreement. The agreement will enable AASW to discuss accreditation timelines, process, fees, and reporting requirements and, upon completion, have the program listed on the AASW website along with all accredited social work programs.

2.7 Accreditation key dates

There are two important dates within the accreditation process which should be mutually agreed upon by the Provider and AASW Accreditation Team in the initial phase: The date for the accreditation application submission and the site visit date.

The dates will be influenced by the AASW accreditation schedule, the volume of preparation and the

number of sites to be visited. Currently the accreditation process notes the site visit timings, below Figure 2, however this may be varied after discussion with the accreditation team.

Figure 2

Accreditation	**Site Visit**	**Assessment Panel** (Number may vary as required)
New Program & Provider	1.5 day	2 members
Existing Provider & new course	2 days	3 members
One program reaccreditation	2 days	3 members
Two or three programs reaccreditation	3-4 days	3 members
Conditional accreditation	Depends on conditions	Min 2 members
Notification of Change Addition of dual degree offering	May not be required, to be discussed with AASW	2-3 members to be discussed
Addition of delivery location *(applies to fully accredited programs only no conditions)*	1 day may be required to review campus or virtual mtg If addition is online delivery a site visit may not be needed.	2 members
* Additional site-visit determined by AASW (where non-compliance have been identified within the accreditation cycle and evidence submitted and reviewed to demonstrate compliance does not suffice)	Depends on the extent of non-compliance	2-3 members to be discussed

Please note: The days quoted are actual on-site days, the panel would travel before those dates, e.g., for a 2-day site visit, panel members would fly the night prior. Therefore, an extra day would be required.

2.8 Accreditation fees

AASW charges Providers to accredit social work programs through an accreditation fee and an annual fee. The cost is determined by factors including:

- Type of accreditation – full submission, changes to existing program
- Complexity of accreditation – if a program is offered across multiple sites or via dual degrees
- Volume of program - whether this is the first, second or third social work program offered.

Further details can be found in the AASW Accreditation Fees Policy. The Provider will be invoiced from the AASW Finance team at an early stage within the accreditation process. If a review is required for a significant change, or an appeal relating to a Provider, or accredited program leads to a decision to hold a formal assessment, the AASW will invoice the Provider then to recover associated costs. All Providers who have accreditation with the AASW will be invoiced for the annual fee due each year in December. This is introduced on a rolling schedule. Therefore, the year a Provider enters into an agreement for a program with the AASW, the fee will commence for that program that same year and each subsequent

year.

Irrespective of the stage within the accreditation process at which the Provider may withdraw an application, the accreditation fee may remain.

2.9 Accreditation expenses

All reasonable expenses (including but not limited to relevant travel, accommodation, and meals) incurred by the Accreditation Panel in connection with this Agreement shall be met by the Provider. The reimbursement or prepayment of such expenses should be managed directly between the individual Panel members and the nominated representative of the Provider.

The Panel travel and accommodation is the responsibility of the Provider to arrange with the Panel members (may be coordinated by the Chair) as they are travelling from across Australia.

2.10 Accreditation site visit

The site visit provides the opportunity for the Accreditation Assessment Panel to verify and clarify the application and evidence provided, to gain a holistic understanding of the social work program being delivered.

The site visit enables the Accreditation Assessment Panel to meet with a range of individuals and groups, for example Discipline Lead, social work academic team, staff, students, practice education team, graduates and external stakeholders, to discuss the program and view the facilities available to students. Please see ***Appendix 1 Site Visit Supplement*** for further information.

The agenda for the site visit is jointly coordinated by the Accreditation Assessment Panel Chair and the Discipline Lead, with an agenda template available on the AASW website. The Provider should consider requests of the Panel and the focus of the assessment site visit which will be provided by the Chair approximately a month post the application submission. The Provider (after reviewing their structures/staffing/roles) will nominate attendees for each of the Panel sessions, in accordance with their abilities to answer Panel questions, to ensure the Panel can understand their social work program in full detail.

It is strongly recommended that the Provider commences the planning for the site visit as soon as the application has been submitted. Once the nominated Chair and Panel have met to discuss the application, the Chair will notify the Provider of the focus of the site visit and request any further information, to refine the agenda before it is finalized by the Chair. It would be helpful if a campus map and any other information could be provided to the Chair to assist with orientation of the first day of the visit, including taxi rank locations and parking areas, and fee information if relevant.

At the end of the site visit the Accreditation Assessment Panel will normally hold a concluding meeting where the Chair would outline a summary of their assessment to date, and which may cover:

- Strengths of the program and commendations
- Indicating whether accreditation standards have been met or not met
- Identification of potential recommendations and conditions that may apply within the final

report.

The Accreditation Assessment Panel may note the accreditation decision that the Panel will recommend to the Accreditation Council; however, they are not required to advise the Provider of their full recommendations and accreditation outcome at that time.

2.11 Accreditation desktop assessment

AASW may choose to use a desktop assessment instead of a site visit in instances of notification of change, e.g., adding online delivery for program and/or addition of third-party delivery arrangements offered at an alternate site. In this case, there is no campus to view and limited details requiring an in-person visit.

In these circumstances the Accreditation Assessment Panel will assess the application and evidence provided depending on the specifics of the individual case. The members will advise the Provider of any further evidence/information they may require including a timeframe. Depending on the circumstance of assessment, the panel may wish to hold a virtual meeting with key stakeholders to gain clarity of the situation. A report would be drafted and provided for factual checking. The report will then be tabled with the Accreditation Council for outcome decision and notification communicated to the Provider.

2.12 Accreditation Standards review and approval

A review of the AASW Approved accreditation standards (ASWEAS) for social work education programs will be conducted every four or five years, or earlier as required.

The review will consider and determine if the existing standards remain fit-for-purpose to achieve a level of social work graduates who are entering the professional environment competent and confident in their role, with the necessary foundational knowledge, professional attitudes, and essential skills. AASW reserves the right to nominate a shorter accreditation period for new providers during their accreditation period. This decision will be made in conjunction with the Accreditation Council, where there are legitimate concerns of non-compliance.

A review would be orchestrated by the AASW with the engagement of Providers, students, industry, and sector stakeholders. The Standards will be tabled at the Accreditation Council for feedback before proceeding to the AASW Board for final approval. Then published on the website with all parties notified of the decision.

3 Accreditation Roles and Responsibilities

3.1 AASW Accreditation Assessment Panel

The AASW Accreditation Assessment Panel (the Panel) is the name given to AASW contracted members appointed to act as accreditors of social work programs for the purpose of determining whether the programs demonstrate the required standards for social work education.

The efficacy of the Accreditation Assessment Panels and their decision-making stands as a cornerstone of the accreditation process. Vital to this effectiveness is an unwavering commitment to integrity and a process that remains replicable and consistent, leading to comparable outcomes regardless of the specific Accreditation Assessment Panel involved.

3.2 Appointment of the Accreditation Assessment Panel

Accreditation Assessment Panels are AASW members appointed to act as assessors of social work programs for the purpose of determining whether the programs demonstrate the required standards for social work education. The number of Panel members may vary from two to four depending on the focus of the accreditation process and the Provider location and context. Each Panel is chaired by an experienced member of AASW Accreditation Assessment Panel Membership.

Previously accredited social work programs are reviewed by a Panel of three members, one of whom will be a chairperson. The Chairperson and one other member will be appointed by the AASW. The names of at least two other available Panel members will be provided to the Provider Social Work Academic Organisation Unit (SWAOU) so that they may select the third member of the Panel. The member selected by the Provider SWAOU is not a representative or advocate for the Provider SWAOU and the Panel members are additionally asked to identify any potential conflicts of interest be actual or perceived.

When appointing members of a Panel, the following will be considered:

- Specific expertise relevant to any special needs of the school as identified by the Provider and AASW
- potential conflict of interest
- representation on the Panel of an academic/practitioner with experience in practice education.

The AASW maintains a register of accreditation assessment panel members from which the panels will be selected. AASW will appoint a Panel Chair from amongst those on the register who are identified as qualified to chair a Panel. The panel will be formed given the availability of suitable potential panel members.

Chairs have extensive experience as AASW accreditation panel members and receive specific training in the role, before being appointed. All Panel members are required to attend relevant training.

3.3 Procedures for appointment to Panel Membership

The following steps are required for the appointment of Accreditation Assessment Panel members:

1. A call for applications from AASW members will be advertised across a range of platforms as required
2. AASW members with a minimum of seven years' experience since qualification can apply for appointment as a Panel member
3. Applications should be addressed to the AASW Accreditation team at education@aasw.asn.au

and should be accompanied by the member's curriculum vitae and a statement addressing the selection criteria for appointment to the Panel

4. Applicants are asked to nominate two referees, and the Accreditation team may interview applicants regarding clarification or for further information
5. Successful applicants will be notified in writing and will participate in an induction conducted by the AASW.
6. Attended panel member training organised by AASW and satisfactorily completed all compliance requirements/modules.

3.4 Term of appointment

Appointment to the Accreditation Assessment Panel is initially for a period of five years. After that time, the Accreditation team will contact existing Panel members to determine if they wish to continue for a further five years. The Accreditation team will ensure that the AASW maintains a current curriculum vitae.

3.5 Chairperson appointment

As noted above under 3.2, the AASW will appoint a Panel Chair from amongst those on the register who are identified as qualified to chair a Panel.

The criteria for selecting a Chair of an Accreditation Assessment Panel may include but are not limited to the following:

- have previous experience as a panel member
- ability in skillfully negotiating with high-ranking executives and management within the realm of higher education institutions
- proficiency in rigorously analysing substantial volumes of data and evidence and adeptly prioritising tasks
- demonstrated capacity to effectively lead and manage a freshly established team
- comprehensive understanding of social work education within higher education environments
- experience as a social worker or academic of social work programs
- ability to summarise conditions and recommendations and provide feedback to Providers and Final Report to Council in a clear and timely manner
- maintains active involvement in the social work field and remains up to date with contemporary practice issues, developments, and trends.
- ongoing experience as a panel member with a depth of expertise and knowledge.

The Chairperson's responsibilities include:

- coordinating the arrangements and task allocation for the assessment including site visits

- ensuring all timelines are met
- notifying the Provider post initial application review of the site visit focus and requesting further information
- chairing the site visit meetings
- maintaining the Panel's independence throughout the duration of the assessment, to ensure that the Panel as a whole behaves ethically and professionally
- coordinating the work of the Panel, including regular briefing of the Panel on arrangements and developments
- recording and documentation of all discussions
- leading the drafting of the initial and final reports
- preparing the final accreditation report for submission to the AASW Accreditation team
- clearly outlining conditions in a clear, concise manner which includes timelines, where relevant.

Chairs are expected to attend specific training session organised by AASW.

Note: Where applicable, the Accreditation Team is available to work with the Panel chair to confirm the wording of recommendations and conditions and clarify timelines to ensure the findings are clearly conveyed to the Accreditation Council and the Provider.

3.6 Members of the Accreditation Assessment Panel

The primary responsibilities of accreditation assessment panelists in the accreditation process are to assess whether a program meets each of the Standards, based on the evidence provided. The accreditation process will include, at a minimum, time for reading and analysing the initial submission application and supporting documentation, engagement in an application review panel meeting and one with the Accreditation team, attendance at the site visit and collaboration of the draft accreditation report. There may additionally be time required for evaluating subsequent documentation, for example, responses by the provider to evidence gaps, issues or changes identified by the panel. Additionally, where required for clarity, on occasion the final report may need to be revised for clarity.

The Panel members will:

- undertake a rigorous examination and assessment of the program against the ASWEAS requirements
- be available for and actively participate in all aspects of the review process
- read all documentation in advance of meetings and report writing
- declare any conflict of interest prior to and during the review
- behave collegially and professionally with other panel members, respecting the Chair's leadership, and with the Provider
- ensure that they do not engage in activities that compromise their roles and responsibilities as reviewers
- take a balanced approach to their roles in the review process as assessors, facilitators and

contributors to innovation and enhancement of good practice.

3.7 Independent Experts

In the pursuit of fortifying the accreditation process, the integration of external independent experts or even external to the social work profession as a potential strategy, may be utilised to elevate the quality and rigor of professional education programs. The landscape of accreditation is evolving, and with it, the judicious utilisation of external expertise offers a dynamic avenue for enhancing practices and outcomes. The independent experts, for example, may be engaged to review a particular accreditation only, assess the quality of evidence, program design and delivery, quality assurance, and program evaluation or engaged for an appeal process.

3.8 Academic Organisational Unit (AOU)

The Provider AOU is the academic unit (sometimes referred to as SWAOU) within a Higher Education Provider responsible for developing and delivering the social work program submitted for AASW accreditation. The AOU's responsibilities include:

- declaring any conflict of interest prior to and during the review
- organising arrangements for accreditation site visits and meetings
- providing all information and supporting materials in the agreed format
- meeting the costs associated with the review, including Panel travel, accommodation, meals and all reasonable costs associated with site visits.

Following its initial assessment, the Accreditation Panel may request further information to be provided prior to the site visit. The site visit may be postponed if the documentation is not made available in advance.

3.9 AASW Board

The AASW Board maintains a role in the oversight of the Accreditation Framework and program Standards. The Board will monitor and manage risk with respect to final decision-making processes. The Board will approve the Accreditation Council Terms of Reference.

The final decisions determined by the Accreditation Council of Higer Education Providers accreditation reports will be noted to the Board and in the case of the Council recommending the accreditation of a Provider be revoked, the Board will ensure that due process was followed throughout the Accreditation process by all stakeholders before approving the decision or not.

3.10 AASW Accreditation Council

The primary responsibility of the Accreditation Council is to provide oversight of the accreditation process of the Australian Association of Social Workers (AASW) with the objective of ensuring that

graduates from social work programs have achieved the professional competencies and learning outcomes identified as necessary for entry into professional practice by the Australian Social Work Education Accreditation Scheme (ASWEAS).

The Council will provide the outcome decision for all accreditation reports tabled at meetings which will occur bi-monthly across the year. The goal is to maintain consistency and fairness in the accreditation process without interfering with the Panel's autonomy. By maintaining this approach, the Council will contribute to the credibility and integrity of the accreditation framework whilst respecting the expertise of the Assessment Panel members in carrying out their responsibilities.

3.10 AASW Chief Executive Officer (CEO)

Maintaining the overall integrity of the accreditation process is a cornerstone of the CEO's role. The CEO ensures that the Association adheres to the highest standards of transparency, fairness, and ethical conduct.

Operational excellence is a hallmark of effective educational management. In the accreditation landscape, the CEO has the operational responsibility for the Accreditation Council and the implementation of the Accreditation Framework and Standards. It is the role of the CEO to ensure the AASW commitment to quality is reflected in every facet of the accreditation journey.

3.11 AASW Accreditation Team

The Accreditation Team employed by the AASW to ensure the completion of the ongoing accreditation cycle for all Providers.

In this role the AASW Accreditation Team is responsible for:

- Establishing and maintaining contact between the Provider and the Association
- Providing advice and support to all stakeholders involved in the process
- Providing advice to the Panel, Providers and Council on ASWEAS, AASW templates, guidelines and other AASW relevant information, and overall, provide additional information and support to all stakeholders
- Completing a desktop assessment, in conjunction with the Accreditation Assessment Panel of each application from the Provider
- Track and schedule the accreditation cycle of all accredited Providers
- Developing templates, guidelines, and training manuals, to assist with the process
- Conducting induction and training of the Accreditation Assessment Panel Members
- Facilitating document management and the accreditation reporting process
- Maintaining the register of Accreditation Assessment Panel Members and Chairs, whilst ensuring all members' details are current
- Facilitating the ongoing engagement of Accreditation Assessment Panel Members

- Developing accreditation papers, for tabling the accreditation reports to the Accreditation Council and attending as an observer, to answer operational questions
- Monitoring, assessing and tracking the completion of the AASW Provider Annual Reports and other monitoring activities and report on data collated through the reports.

The Accreditation Team will work closely and provide ongoing support to the Accreditation Council.

4 Accreditation Reporting & Monitoring

4.1 Accreditation draft and final report

Once the site visit has been completed, the Panel will draft an accreditation report on the findings of the site visit, including recommendations, conditions, commendations, and opportunities for improvement.

The draft report will be based on the assessment of the initial documentation, all evidence and further information provided as requested, the site visit discussions with stakeholders, and any additional documentation requested by the Panel, as post visit follow-up. The Panel Chair will keep the Accreditation Team updated on all aspects of the drafting of the report, and can seek advice on ASWEAS, guidelines, clear wording of conditions, and other information, as required.

The draft report will then be sent to the Provider by the Chair (copying in AASW) for a ten (10) day factual checking period. The Provider may choose to provide a written response. The response is limited to the correction of any errors of fact, to any matters to which a response is specifically requested or to any issue that the Provider feels the Panel may have misunderstood.

The draft report additionally provides early sighting by the Provider of the proposed recommendations, commendations, conditions or monitoring requirements. This may have already happened at the conclusion of the site visit, as noted earlier under 2.10.

Any comment or further evidence pertaining to factual changes as noted above will be considered by the Accreditation Assessment Panel and, once the report has been finalised by the Chair, including the addition of the signatures of all the Panel members, it will be forwarded to the AASW Accreditation Team.

The Accreditation Team will then table the final report to the Accreditation Council for an outcome decision. Once an outcome has been determined by the Accreditation Council this will be communicated formally to the Provider.

4.2 Accreditation Council outcome options

Council has the right to include additional interim reporting conditions to assist with enhanced monitoring. These interim reports will be monitored and reviewed by the Accreditation Team as applicable. Where non-compliance is identified, the Accreditation Team will follow up with the Provider for clarification. Failure to respond to the satisfaction of the AASW and/or demonstrating continued compliance with the ASWEAS throughout the accreditation period, may lead to an off-cycle accreditation site visit, with additional costs liable by the Provider.

Conditional Decision

Conditions may be approved by the Council for a social work program through the final report recommendations, including a shortened period of accreditation. Any requirements relating to conditional accreditation will accompany the formal notification of the outcome decision from the AASW.

There is more detailed information regarding this accreditation status outlined in the **Guide to Conditional**

Accreditation (accessible on the AASW Website).

Conditions should reflect the area of non-compliance and may include:

- Curriculum Updates: Requiring specific modifications to course structure and syllabi if gaps are identified against competency standards.
- Progressive Reporting: Mandating interim or annual reports on curriculum rollout and student progression as the program expands.
- Resource and Staffing Updates: Requiring proof of adequate academic appointments, supervision, staffing levels, and academic resources to maintain a high faculty-to-student ratio, including leadership qualifications in line with ASWEAS, throughout the accreditation period.
- Targeted Site Visits: Scheduling mandated interim or final-year site (or virtual site) visits to assess physical facilities and program delivery.
- Intake Suspension: The Provider must suspend new enrolments in the program for a period of 12 months from the date of this decision. Such a condition would generally be treated as a restriction on enrolment or course delivery, rather than a cancellation of accreditation. The objective of this condition is to allow the Provider time to address concerns relating to staffing, student outcomes, governance, resources, work-integrated learning placements, assessment integrity, or other quality issues impacting their ability to comply with ASWEAS.

Where conditions remain unmet for a sustained period to be determined by the Accreditation Panel, the next escalation point is program suspension or revocation.

Accreditation suspension

Suspension is a corrective mechanism to allow Providers an opportunity to address identified areas of non-compliance where conditions have not been sufficiently addressed.

AASW may, at its discretion, suspend the accreditation of a course, for a specified length of time, in any of the following circumstances:

- Where the Provider has repeatedly failed to meet conditions after it was given
    - a) the chance to correct any misalignment with the ASWEAS; and
    - b) a final warning by the AASW that failure to meet the conditions would result in suspension
- Where AASW has requested the provision of information relating to the accredited course and the Provider has failed to provide such information to the satisfaction of the AASW within the appropriate timeframe
- Where AASW has notified the Provider of issues which require improvement and the Provider has failed to rectify those issues by the required deadline
- Where the AASW has determined that the Provider has failed to comply with its obligations in relation to conducting an approved course in line with the relevant ASWEAS, by the deadline provided in the final warning to comply.

If a Provider has its accredited course status suspended, it will be notified by the AASW of this decision,

including the date on which the suspension took effect.

Notification of the suspension of an accredited course status may be published at AASW's discretion.

It is at the discretion of the Accreditation Assessment Panel and the Accreditation Council to determine if a single extension to the conditions' deadline should be granted before recommending suspension. This decision would be taken in consultation and after seriously considering the impact on the current student cohort.

Accreditation revocation

Revocation should be reserved for the most serious cases where, after a period of conditional accreditation, where the conditions remain unresolved.

The accreditation of any social work program may be revoked by the AASW after the Provider was given the opportunity to correct the identified issues through accreditation conditions and a period of suspension. Revocation may also take place in situations where the Provider is being investigated by TEQSA for wrongdoing or where TEQSA has revoked their approval.

When a decision is made to revoke, this would mean that the social work program is no longer considered accredited. At that stage, all students need to be advised, and all marketing materials should reflect this decision.

After a nominated period, no shorter than 12 months, a Provider may re-start the accreditation process which, if successful, would result in a Provisional accreditation outcome.

AASW may, at its discretion, revoke the accreditation of a course offered by a Provider at any time in any of the following circumstances:

- Where a Provider has repeatedly engaged in conduct which, in the AASW's reasonable view, is in breach of the obligations contained in this application and/or the AASW's requirements; or
- Where a Provider has failed to remedy identified deficiencies during a period of suspension.

If a Provider has its accredited course status revoked, it will be notified by the AASW of this decision, including the date on which the revocation took effect. Notification of the revocation of accredited course status may, at the AASWs discretion, be published.

Accreditation not granted

The final report may recommend to not grant accreditation to a Provider. In this case the decision will be made for one or more of the following reasons:

- The social work program application was not deemed to be sufficient by the Accreditation Assessment Panel
- The social work program application does not comply with several crucial requirements of the ASWEAS, and the Panel and the Accreditation Council are, therefore, not confident that the program will deliver the required outcomes

- The Provider is unable to demonstrate that their processes and practices meet the Standard requirements
- The Panel and the Accreditation Council do not believe in the quality of the social work program and, therefore, that graduating students would meet the required Standards.

If a social work program is not granted accreditation, the AASW will notify the Provider of the decision by the Accreditation Council and any specific action or requirements from that decision. The Provider must then:

- Accurately inform current students and prospective students of the program status and decision, noting their non-eligibility for AASW membership
- Accurately reflect this decision in any marketing material of the social work program
- Submit a new application for accreditation following a suitable timeframe, after making necessary changes or redevelopment to the non-accredited program.

In these cases, discussion would need to take place with the AASW Accreditation Team regarding any new submission timeframe. New applications would need to follow the outlined new application accreditation process.

4.2 Accreditation status publication

The AASW maintains a listing of accredited programs on its website, which is updated post the Accreditation Council outcome decisions. Each program is provided with an accreditation expiry date which is captured in an AASW database. For an initial program, the expiration date will be the date of the Accreditation Council decision.

The Provider is responsible for maintaining on their published material the accurate accreditation status of each social work program. The Accreditation team will provide for new and fully accredited programs the logo which can be used on the Providers website. From time to time the accreditation status currently displayed by Providers will be monitored by the AASW.

The AASW requires that the Provider's publications and marketing material correctly displays an acknowledgement of accreditation for each accredited program.

> *This is an AASW-accredited qualification. It is an entry qualification into the social work profession and has been determined to meet the Australian Social Work Education and Accreditation Standards.*

4.3 Accreditation annual report

The Annual report is a mandatory yearly document due by February which must be submitted by all Providers to AASW. The template for this can be located on the website and will be included in AASW communications requesting its completion in advance of the February deadline. The SWAOUs are requested to nominate any changes or developments which have occurred over the previous twelve months. The Annual reports for the accreditation cycle will be provided to the Accreditation Assessment Panel as part of the evidence for assessment of any program.

The AASW Accreditation Team will review and track the provision of the annual report to identify potential risks, non-compliance or concerns at an early stage, so they can be addressed within the accreditation cycle. The AASW Accreditation Team may request further information to clarify, if noted or proposed changes significantly impact or may impact the existing accreditation or the Provider's ability to provide the course as accredited.

There may be instances identified through the annual report that a planned or future change brings into question whether a program will continue to meet the accreditation standards. In this instance it may be appropriate for monitoring or conditions to be imposed, such as a report to be submitted or a further review to be undertaken. This would be done in communication with the Provider and, if conditions are applied, undertaken with approval of the Accreditation Council. Where this non-compliance is investigated and AASW deems additional early review is required, additional costs are the responsibility of the Provider.

4.4 Accreditation monitoring

There are three circumstances where the AASW will undertake monitoring and quality assurance processes within the accreditation cycle.

4.4.1 As part of routine monitoring and quality assurance practice, the AASW will instigate requests for updates and evidence of compliance with ASWEAS. This will be additional to the Annual Reporting requirement.

4.4.2 The AASW may apply conditions or additional monitoring requirements to a social work program at any time if a program does not meet the standards. In situations where conditions are in place, an additional site visit and/or desktop review of additional documentation and in some circumstance a Panel would need to be convened. Additional costs relating to this additional review would apply.

4.4.3 There may be an occasion where the AASW receives a communication raising a concern(s) which may bring into doubt certain aspects of whether an accredited social work program continues to meet the accreditation standards. The AASW will consider such concerns and undertake further investigation where appropriate. In those instances, the AASW will inform the Provider of the basis for the concerns, and the Provider will have the opportunity to respond. The outcome would note any action that may be necessary, and this may result in monitoring requirements or undertaking a desktop review or site visit. Additional costs relating to this, will be the responsibility of the Provider.

At all times the Provider would be kept informed of the process being undertaken.

4.5 Accreditation appeals process

Once a final decision is made and the Provider has been formally notified of the outcome, the Provider has the right to appeal the accreditation process or outcome within thirty (30) business days. This process is detailed in the *AASW Accreditation Appeals Policy* which is accessible on the website and outlines the process in detail.

An appeal may be sought on one or more of the following grounds:

a) Relevant procedures when making the initial accreditation decision were not observed

b) Relevant and significant evidence or information was not considered (or not properly considered) in making the initial accreditation decision

c) Irrelevant information was considered in making the initial accreditation decision

d) An error was made in relation to a finding on a material fact

e) The manner in which the accreditation process was conducted was procedurally unfair.

The AASW applies a fee for this process.

5 Accreditation Stages

Overview of stages

The process for the review of AASW-accredited social work programs is divided into six stages. The stages for all accreditation categories are as follows:

1. Planning
2. Initial review
3. Site visit including preparation and response
4. Draft report and provider response
5. Ratification of final report
6. Appeal process

5.1 Stage 1: Planning

1) Initiating the review

A review of a previously accredited program starts with:

1) a written reminder from the AASW to the AOU at least 12 months prior to the expiry of the current accreditation period
2) confirmation by the AOU that it seeks accreditation.

For Providers seeking provisional accreditation of a program the review is initiated by an application to

AASW at least 12-18 months before the program is to be offered by the AOU. Application forms are available from the AASW website.

2) Process management

The planning process involves the AOU and AASW staff until such time that an Accreditation Assessment Panel and Chair are appointed. At that point the details of the review are largely managed by the AOU and the Panel, consistent with this document, with AASW staff providing process and policy support and advice as needed.

5.1 Stage 1: Planning

At the conclusion of Stage 1, all parties will be contracted to the accreditation review, dates for the site visit will be agreed and the SWAOU and the review Chairperson will work together to plan the remaining details of the review.

Party responsible	Activity
AASW Accreditation Team **Or** **Provider/AOU**	Twelve months prior to expiry of accreditation period Previously accredited program: notify Provider of impending expiry of current accreditation and invite intent to submit, including any information relevant to special needs of the program.
	New Program: Notify the AASW of proposal to apply for accreditation of new social work program, including as much detail as possible. Provide TEQSA approval status to AASW. New Provider: AASW will convene a virtual meeting to discuss the accreditation process.
Provider/AOU	Completes and forwards to AASW for program accreditation, reaccreditation or provisional accreditation an **Intent to Submit** form, indicating any particular requirements of the Program for Panel knowledge.
AASW Accreditation Team	Acknowledgment of Intent to Submit and provided with links to Accreditation Application template and Appendices.
Provider/AOU	Commence preparation of application and provide suggested dates for submission and site visit.
AASW Accreditation Team	Confirm with Provider duration of site visit and panel size. Identify available members for the Accreditation Assessment Panel. Suggest names for the Provider to select third panel member.
Provider/AOU	Selection of third Accreditation Assessment Panel member.
AASW Accreditation Team	Confirm the Accreditation Assessment Panel members, including Chair. Confirm site visit dates and application due dates. Distribute contact information and details to Panel members, Chair and Provider AOU.
AASW Accreditation Team	Prepare and distribute contracts to Provider and Accreditation Assessment Panel members.
Provider/AOU	Return completed contract agreement.
Panel Members	Return completed contract agreement.
AASW Accreditation Team	Confirm to Provider the Panel Members who require a hard copy of application submission.

5.2 Stage 2: Initial review

The initial review enables the Panel to evaluate the program based on the documentation submitted by the Provider. It provides an opportunity for the Panel to seek clarification of details from the Provider and to then prepare and note to the Provider the focus of the site visit and where further information is required.

At least eight weeks before the scheduled site visit, the Provider will submit the application to for assessment.

The Accreditation team will provide the Panel copies of

- Annual Reports for the duration of the accreditation cycle received from the Provider
- Compliance requirements/recommendations of the prior accreditation report, any conditions applied by AASW or TEQSA.

The AASW Accreditation team will support the Provider with any additional advice regarding accreditation requirements during the process.

Party responsible	Activity
Provider/AOU	At least eight weeks prior to site visit, submit application and supporting evidence to the AASW and the Accreditation Assessment Panel Members
Provider/Chair	Finalise all administrative details for travel, accommodation. Commence the draft site visit schedule
Panel Members & AASW Accreditation Team	Assess the Provider application, prepare notes on initial thoughts, findings and details requirements for further information required prior to or at site visit. Note the themes for focus of site visit. A virtual meeting is convened of AASW Accreditation team and Panel members and is Chaired by the Chairperson.
Chairperson	Provides feedback to the Provider on the initial response, findings, requests any further information and details the focus of the site visit.
Provider/Chair	Collaborate and work to confirm the site visit agenda. Agenda distributed to all parties.
Provider/AOU	Compiles further information requested by Panel and submits to the AASW and Accreditation Assessment Panel members.
Panel Members	Meet virtually to discuss the further information submitted and finalise site visit details.

AASW Accreditation Team	Provide the Chair with the template for Final Report and any further information if requested.

5.3 Stage 3: Site visit

Please see ***Appendix 1 Site Visit Supplement*** for further information to assist with the site visit.

The Accreditation Assessment Panel Chair and Provider Discipline Lead/Head of School are responsible for preparing the meeting agenda. It is important to ensure key stakeholders are included in the site visit to provide a balanced overview of the social work program and to allow the Panel to clarify statements made within the accreditation application and to answer questions raised through the supporting documentation.

Party responsible	Activity
Chair/Panel	Panel will meet upon arrival (normally night before site visit commences) to develop protocols, allocate tasks, and identify key questions to explore with the Provider, AOU and stakeholders.
Provider AOU and Panel	Site visit activities as scheduled. Provider to supply any additional information requested by the Panel, this may be additionally requested throughout the site visit, if discussions raise further questions. Panel may advise the Provider AOU of initial findings including areas of non-compliance that will require attention over the next accreditation cycle or within a timeframe if conditions are suggested.
Chair/Panel	Review the site visit outcomes, confer on revision of decisions and recommendations of assessment report. Collaborate on the completion of the draft final report.
Chair & AASW Accreditation team	Notify Accreditation team on initial findings, including any areas of non-compliance and overall view of site visit.

5.4 Stage 4: Draft report and provider response

The primary focus of the accreditation report is on whether the social work program meets, or can meet, the ASWEAS criteria.

The final decision of the Panel on accreditation of the program should be unanimous, and the report co-signed by all members. If the Panel cannot agree, the Chairperson will request that AASW appoint a mediator to assist.

Party responsible	Activity
Chair	With input from the Panel members, complete draft final report and distribute to the Provider for factual checking period of ten (10) business days. The draft final report is provided to the Accreditation team.
Provider AOU	Provide response to the Chair at end of timeframe. Please copy the Accreditation team into any response.
Accreditation Team	Review report and request clarification where required.
Chair	Review the response and make adjustments if required and agreed. Finalise assessment panel report and confirm recommendations, conditions or opportunities for improvement. Consult with AASW staff where required. Submit final report to the AASW Accreditation team along with the final site visit agenda noting stakeholders met.

5.5 Stage 5: Ratification of report

The final review report is considered by the AASW Accreditation team who then prepare a Decision Paper for the AASW Accreditation Council. The Decision Paper will include a summary of the assessment process.

The Accreditation team may assist the Panel Chairperson in the formulation of clear wording for a recommendation statement. The Council will convene to deliberate on the final accreditation report and determine an outcome.

Following the Council's ratification of the Panel's recommendation for accreditation the AASW Accreditation team will advise the Provider, AOU and Accreditation Assessment Panel of the outcome of the accreditation review.

Party responsible	Activity
Accreditation Team	Advise the Panel Chair on the process post provision of the final report. Provide the AASW Council Executive Officer with final accreditation report and Decision Paper to be tabled at Accreditation Council for outcome decision.
Accreditation Council	Consider tabled accreditation final report and Decision paper including the Accreditation Assessment Panel recommendations. The Council determines if through reading the report and Panel assessment, the Provider has met the required standards and that all required accreditation procedures were followed.

Accreditation Team	Formally notify the Provider SWAOU and Accreditation Assessment Panel members of the Accreditation Council outcome decision of the accreditation assessment. Note the final decision on internal AASW database and AASW website.

5.6 Appeal process

Please see Section 4.6 of this document or the AASW Appeals Policy for further information regarding this process.

Appendix 1: Site Visit Supplement

This supplement is to assist in the preparation of the site visit schedule prepared by the Provider in conjunction with the Accreditation Assessment Panel Chair and each schedule will differ according to the focus identified for the site visit and availability of parties. The Provider should try to ensure that all requested parties are available for the duration of the site visit. The supplement is not developed to provide a mandatory listing for a site visit but to assist in how the visit may be conducted.

The Provider is to prepare a list of names and titles of attendees for each meeting to assist the panel and to assist with details of the report. (A draft schedule is accessible on the AASW website)

The accreditation site visit should provide opportunities for interactive and comprehensive discussions with staff, students and all relevant stakeholders to allow them to represent their views and so the Panel have the chance to verify statements made within the application.

It is important that all parties are encouraged to speak freely and provide honest answers to questions from the Panel. There is also a need to ensure that the Panel have suitable time during the visit for confidential discussions to review and reflect on their observations and findings over the course of the site visit.

General Venue
It is always good to have a dedicated room which is assigned to the Panel for the duration of the site visit and have as many sessions as possible within that assigned room to reduce the level of time lost in transit moving locations. It is very helpful to have displayed or requested documentation and student materials ready in this room and available for the entire site visit. The Panel additionally may request to have the full set of application documentation provided at the site visit for reference.

To assist with the running of the site visit, the following equipment if available may be provided in this room:

- Computer with USB capability, internet access and access to Provider website, learning management platform etc.
- Access to printing facilities if required
- Ability to hold virtual meetings or presentations, if required.

Liaison Staff
It can be very helpful during the site visit to have the assistance of a Provider staff member to act as liaison for the Panel for additional requests regarding documentation, unscheduled meetings, changes to the agenda or general questions.

Typically, an administrative staff member would take on this role for the duration of the site visit, and they may assist the Panel in navigating the campus or completing printing as requested.

The Academic or Discipline Lead or senior member of the social work team may also act as a resource for the Panel to provide further information, if sought, regarding the program delivery. The same staff member is often in attendance at all meetings except for student or graduate meetings and, possibly, the practice educator discussions. This assists in the transparency of the site visit and provides additional support for the Panel.

Opening Session with leadership team, including Vice Chancellor/Deputy Vice Chancellor/CEO
The purpose of this meeting is to establish the position of the Social Work discipline within the Provider overall structure. The Chair will confirm the agenda, participant attendance and raise themes identified for further discussion. The Panel will discuss issues with regards to leadership, strategic positions, staffing levels, Provider level quality assurance mechanisms especially in relation to external input into the program design, frameworks for setting and monitoring educational outcomes, staff management and development.

Panel members may look at the overall education culture at a Provider level and items such as diversity, gender, culture and social differences, funding, marketing position for program(s) and partnerships. The Panel will also evaluate the requirements for program approval and how the Provider ensures quality of teaching and learning.

The Dean or Discipline Lead may wish to commence this session with a brief (no more 10-15 minutes) presentation on the Provider and where the social work program fits in. The Panel can then ask questions regarding educational design, review and continuous improvement processes, leadership, research, industry engagement, targeted outcomes and structure of the program.

Concluding Session with leadership team and senior academic staff
A concluding session on the final day of the site visit will provide an opportunity for the Panel to present a summary of progress towards the interim recommendation(s) or conditions the Panel intends to make regarding the accreditation and note commendations and any opportunities they may like to suggest continuing the improvement for the program for the next accreditation cycle.

Discussion at this meeting should encourage correction of any factual errors and specifically address any issues of contention. A formal decision is not announced at this time (this is for the Accreditation Council to determine). At their discretion, the Panel may choose not to present interim recommendations at this time, as they may need to discuss further.

Meetings with Program Leaders
In this session, the Panel will have a detailed discussion with staff members such as Program Coordinator/Director or Convenors who have specific accountability for leadership of the academic teaching team(s) for each of the programs seeking accreditation.

In this session the Panel may wish to discuss interests such as:

- Program objectives and graduate outcome targets
- Program design, including practice education set up and format
- Student profile
- Staffing levels to support the delivery of the program
- Quality systems
- Detailed curriculum mapping against graduate attributes
- Industry or Course Advisory input
- Students input into the processes of continuous improvement and how their voice is included.

It is good practice that the Discipline Lead and Program Leaders be on call during times of private meetings of the Panel, in order to respond to any specific query or concern that may arise.

Meetings with academic staff
These sessions, including meetings with full-time academic staff who deliver the program across multiple sites (if applicable) even if the Panel is not visiting all the delivery sites, are used to discuss in detail the program structure, unit/subject content, graduate profiles, research, practice education, program objectives, required curriculum and staffing, among other areas.

An additional session may be required with academic staff after other meetings have been held with other stakeholders as additional information may be sought by the Panel to clarify or verify statements.

The Panel will notify relevant stakeholders as the site visit proceeds.

If the accreditation application is for more than one social work program, it may be appropriate to discuss each program separately, especially if one is reaccreditation and one application is for new program delivery. This allows the Panel to maintain clear parameters around each program. Sections duplicated across the submissions can be highlighted and or combined, with a clear note to that effect, to simplify the review process.

Practice Educator team
This session will enable discussion of themes relating to the practice education placement component of the program. It may also include representatives from employers which partner with the Provider for placement completion.

The Panel may wish to discuss:

- Induction, training and support from the Provider of the practice educators
- Roles and responsibilities of all parties and the process for placements
- The delivery and sequencing of the practice education components of the program
- The Provider requirements regarding assessment of students during their placements, including, if applicable, a brief demonstration of their assessment platform
- The support provided to placement staff and students if the student is at risk of failing
- How the Provider overcomes the challenges associated with finding placements, especially if more than one program
- The levels of internal and external supervision which occurs
- Skills and knowledge of the students undertaking placements
- Documentation requirements of both students and educators during the placement
- Any other issues that the Panel wish to clarify from the application.

This session usually occurs without Provider staff present to allow educators willingness to openly share their views.

Student Support and Indigenous staff or community representatives
The Panel welcomes the opportunity to meet with the student support services staff, to gain an insight into the services offered to students. These services may be for students who are struggling academically due to curriculum or English language, especially within the international student cohort, wellbeing and mental health support, or general assistance.

This may also be a good opportunity for the Panel to discuss with staff regarding the engagement of

community representatives in relation to the Aboriginal and Torres Strait Islander People required within the curriculum content and general involvement with the Provider.

Campus Site Tour
During the site visit a tour of facilities should be planned, with staff available for discussion. This provides an opportunity for the Panel to visit the library or inspect classrooms, simulation labs, practical labs and learning and teaching support facilities noted in the application.

Student Work
Often at a site visit the Panel will view education materials and deidentified student work examples, which should be made available at the site visit.

Examples of teaching and learning materials, resources and samples of assessment materials and marked student work from units/subjects across the relevant program and differing year levels should be provided, especially where the Provider notes 'capstone' or 'advanced'.

Any materials should be clearly identified for year levels and units and displayed to demonstrate the delivery of the full range of graduate attributes, especially practice education and practical skills.

The Panel would expect to have access to the student learning management system in place to assess student experience.

It can assist with records of proceedings of the following organisational internal committees which may be relevant:

- Faculty/School Teaching and Learning Committee
- Academic Board
- Student Consultative Committee or similar
- Faculty/School/Course Industry Advisory Committee
- Any Program Evaluation that the students may complete
- Any records that reflect follow up action from meetings held regarding the program to see the process for continuous improvement.

Students and Graduates
The Panel will request to speak with current students (across all levels of the program) and graduates from the program. The Panel may wish to convene these meetings separately, so please discuss with the Chair when planning. The Provider should attempt to invite graduates who are currently working in the social work sector rather than those that have moved into further study, however, please discuss with the Chair in the planning phase.

The Panel will meet with the students without any academic staff present and all comments are treated with the strictest confidence. The report format will not identify any individual or sub-group of the student body.

Catering
The Provider is asked for the duration of the site visit to provide catering for the Panel, this would be to cover lunch, morning and afternoon teas. The Chair can advise the Provider of any dietary requirements of the panel.

The Panel quite often will use the lunch period to discuss their observations in private, however it may be used to invite the Course Advisory Committee members to join the Panel for a discussion.

There is no expectation of the Provider to arrange a joint dinner for the Panel and academic staff. It is AASW's preference for this activity not to occur to maintain a level of independence during site visit. As stated above under Section 2.9 and in the Provider Contract, any expenses incurred by the Panel are to be reimbursed by the Provider and arranged via the individual panel members.

Appendix 2: Accreditation Assessment Considerations

Please note this is not an exhaustive listing. However, a guide to assist with planning, please contact the AASW Accreditation team when planning any change to your social work programs.	
Accreditation Descriptor	**Assessment Process Requirement**
New Program Delivery	
a) New Provider & new course (Provisional Review)	Application and 1.5 - day site visit (2 Member Panel if one program, 3 if two programs)
b) Existing Provider & new course (New Course will be Provisional)	Application and 2-day site visit (3 Member panel)
c) Existing Provider existing fully accredited course added to dual degree	Application and desktop review (*scale will depend on submission details*)
Reaccreditation (Existing Providers)	
d) One program	Application and 2-day site visit (3 Member Panel)
e) Two or more programs	Application and 3-day site visit (3 Member Panel)
Program Expansions (Existing Providers)	**Will be assessed as a separate process**
f) Addition of online delivery for existing fully accredited course with no conditions	Application and desktop review
g) Existing accredited online program delivery and adding face-to-face delivery for a fully accredited program no conditions	Application and potential 1- or 2-day site visit (*dependent on submission scale*)
h) Additional new delivery location to existing fully accredited program with no conditions	Application and desktop review and/or potential site visit *(Dependent on how resources are being coordinated, centrally or whole new team)*
i) Significant restructure of existing accredited program *(Change may be noted through the Annual Report & Provider contacted by AASW)*	Application and desktop review (*scale will depend on submission details*)
j) Expansion (new delivery method or location, including third-party delivery addition) is not of provisional status and the program must have no conditions placed on it.	Application and desktop review (*scale will depend on submission details*) *Note: In some instances, a site visit may be required*

For Program Expansions (Discussion to take place with AASW Accreditation Team)

The AASW advises that for accreditation purposes, a formal submission containing further information about the proposed expanded Program or notification of change is required.

For a provider looking to expand a social work offering, the program must have ***no conditions*** placed on it, and the program must have a fully accredited status and not be within provisional status, it should have completed at least the initial cohort.

This is consistent with other ASWEAS review precedents. This submission will be assessed by members of the AASW Accreditation Assessment Panel, with a recommendation to be presented to the AASW Accreditation Council.

Following discussion with the Accreditation team it may not require a full review of the existing program and curriculum where expansion/change is to occur, rather specific information about the expansion/change is requested. AASW will provide the Panel with the last submitted annual report(s) and last accreditation review report to assist with decision making.

It is required that the submission for expansion includes the following information:

1. Background information about the program – such as the location choice, school design and projected student numbers
2. Rationale for expansion.
3. Projected timing plans for delivery.
4. Plans for staffing social work across the full SW program proposed against the ASWEAS. Will staff be teaching F2F, online, blended. Will Staffing numbers be elevated?
5. Is the curriculum being adapted in any way?
6. Information about teaching and shared modes of teaching across campus locations etc.
7. Planning and support for practice placements, including the potential challenges the Provide may face with the increase in student numbers.
8. Plans for governance and course coordination.
9. How the intensive units and practice skills training will be conducted, especially if moving to or incorporating more online delivery
10. How any formal mechanisms for ongoing review and input of external stakeholders be utilised regarding the expansion? E.g. expansion of membership, new committee(s) formed etc.
11. Ensuring equivalence across the sites regarding moderation, assessment and curriculum
12. Information about teaching and learning facilities, including student support and accessibility for students in new state.
13. Any other relevant information – i.e. proposed new MSW(Q) or BSW

This submission can be presented on Provider Letterhead. Use of a particular AASW report template is not required. An accreditation review fee will be payable for this review. This will be contained in a contract and invoiced to the Provider.

Notification of Change (Existing Provider)	Assessment Process Requirement
Change to program offering	Application and desktop review **Depending on the size and details of the change the convening of an Accreditation Assessment Panel may be required.**

Conditional assessment	Application and desktop review Minimum 2 panel members (Preferably from original panel) Virtual meeting or site visit may be required depending on conditions

The AASW supports continuous quality improvement and realises that over an accreditation period a program is likely to undergo change. Higher Education Providers are requested to notify the Accreditation team either through the Annual Report (each December) or earlier within the year if significant change has occurred. The AASW is to be immediately notified by the Provider if the TEQSA or another regulator proposes or commences an investigation, implementation of conditions or changes the Provider accreditation status.

Other significant changes which should be noted, and which have occurred since your previous accreditation review include (but are not limited to):

- Change to course structure.
- Introduction of new units of study since your last accreditation cycle or replacement of units since the previous course accreditation.
- Change to course objectives, duration, format, structure, or delivery mode.

- Addition of an existing accredited course to a dual degree.
- Additional new location for delivery.
- Change to academic staff delivery team, AOU, governance or organisational structure within the provider.
- Course/unit codes or names.
- If a course is moving to or has moved to teach out status. (If so, please provide a teach out plan)
- Practice Education changes to structure, governance, and arrangements of the Practice Education component of program delivery.

2 Accreditation Overview

The AASW developed the AASW Guidelines for Accreditation Assessment of Social Work Programs (the Guidelines) to assist Higher Education Providers (Providers), AASW Accreditation Assessment Panels and the Accreditation Council with the accreditation process, where Providers are seeking accreditation or reaccreditation of their social work education and training programs. The Guidelines outline the process the AASW follows to accredit a social work program, and the roles and responsibilities of all parties involved throughout that process.

2.1 Objectives of accreditation reviews

Accreditation is intended to ensure that graduates from social work programs are equipped to achieve the professional competencies and learning outcomes necessary to practice safely and for entry into professional practice (ASWEAS).

The accreditation process aims to determine, with reasonable confidence, the extent to which:

- the program submitted by a Provider is capable of producing social work graduates with the skills and attributes identified by the ASWEAS
- graduates possess the capabilities specified by the Provider
- the integrity and quality of the program is sustainable over the period for which it is accredited.

In accrediting a social work program, the AASW signifies that it expects the Provider to produce graduating students with the knowledge, skills, and professional competencies necessary to practice in Australia safely.

Graduation from a program of study accredited by the AASW enables the graduate to apply for membership of the AASW.

2.2 Structure of the AASW Accreditation Standards

The Australian Social Work Education and Accreditation Standards (ASWEAS) comprise three domains and eight standards:

Domains

4. Readiness for professional practice
5. Alignment of theory and practice
6. Policies, processes and resources

Standards

9. Knowledge skills and attributes
10. Professional identity
11. Knowledge for practice
12. Practice education
13. Assessment

14. Equity, access and student support
15. Admissions, credit decisions and degree requirements
16. Leadership, staffing and resources

The ASWEAS additionally includes Graduate Attributes and the Practice Standards

2.3 Courses accredited by the Australian Association for Social Workers

Under TEQSA, Australian social work programs are academically accredited to award degrees at Level 7 (Bachelor), 8 (Honours) and 9 (Master) of the Australian Qualifications Framework (AQF). Degree titles specifically are

- Bachelor of Social Work (BSW)
- Bachelor of Social Work (Honours) (BSW (Hons))
- Master of Social Work (Qualifying) (MSW(Q))

Unless precluded by the regulations of the Provider, master's degrees should apply the terminology Master of Social Work (Qualifying) to differentiate them from programs offering advanced social work degrees by research. TEQSA may approve a Master of Social Work without the qualifying tag until the Provider has obtained AASW accreditation.

Regardless of academic status, graduates of all AASW accredited social work programs are professionally qualified as entry-level social workers.

Where the Higher Education Provider offers multiple social work programs at different AQF levels, these will be separately accredited.

2.4 Approach to accreditation

The AASW, in its role as a professional accreditor, notes the:

8. AASW supports flexibility and responsiveness of social work programs to change in response to the professional workplace
9. ASWEAS seeks to complement the role of the Tertiary Education Quality and Standards Agency (TEQSA) or the Higher Education Providers operating under the regulatory Higher Education Standards Framework (HESF). Any overlap that may need to occur, the AASW will work to keep to a minimum
10. AASW is committed to a collegial approach in working with Providers with the aim of ensuring that graduate social workers are ready for professional practice
11. Approach of the review should seek a balance of summative and formative evaluation
12. Accreditation process is guided by the principles of transparency, fairness and collaborative engagement with Providers and other stakeholders
13. Accreditation Standards aim to accommodate a range of educational models and variations in curriculum design and teaching methods
14. Review recommendations must be based on clear evidence that the program is producing, or, in

the case of new programs, can produce, graduates with the knowledge and practice outcomes expected for entry level social work professionals.

2.5 Accreditation status identification

The Provider is, and the AASW is not, responsible for keeping its students informed about:

e) Each program's accreditation status

f) The progress of an application for accreditation status

g) The impact of any absence of progress of an application for accreditation, including where that results from suspension, withdrawal, revocation or termination of any accreditation process and

h) The impact of those matters on each student's eligibility to join the AASW.

The AASW reserves the right to review a Provider's website, especially program related pages to ensure accurate reflection of the Provider's accreditation status.

If a Provider has a program granted an accreditation status, then AASW may list the program and the Provider on its own website confirming that status, including any relevant conditions or limitations on that status.

2.6 Confidentiality

All documentation and materials provided by the Provider will be treated confidentially by the AASW and their employees, including the Accreditation Assessment Panel members.

Any draft reports related to the accreditation will be confidential between the Provider and AASW. When the accreditation process is complete, AASW will maintain a clean copy of all documentation related to the accreditation process within the Association's designated platform, and other copies of accreditation material will be destroyed.

2.7 Withdrawing and resubmitting an application

A Provider may request that their application be withdrawn from the accreditation process by writing to the AASW Accreditation team. A program application can be withdrawn at any stage of the process until a final accreditation outcome has been provided by the Accreditation Council.

Once the accreditation assessment has taken place, a Provider or Panel may decide to request the withdrawal so that further work can be undertaken to meet the ASWEAS. In this instance, the Provider will discuss with the Accreditation team and may subsequently resubmit the program for consideration with further additional evidence and information.

If the program application is resubmitted within one calendar year of the withdrawal, a site visit may not be required if already undertaken. The decision regarding this will be at the AASW discretion after consultation with the nominated Accreditation Assessment Panel Chair, looking at identified concerns from the initial assessment. If ASWEAS have been revised in the interim, a new site visit may be required.

Please note that, depending on the timing the withdrawal occurs, the accreditation fee may still be required as the Assessment Panel and assessment process may have already occurred thereby requiring time and workload of the Panel and AASW staff. A Provider is not eligible for a refund after AASW has conducted a site

visit. All refunds are at the CEO's discretion.

2.8 Accreditation outcomes

The AASW may accredit a program if reasonably satisfied that either:

1) The program meets the ASWEAS, or
2) The program substantially meets the ASWEAS, and the placement of conditions will ensure the program meets the ASWEAS fully within a defined timeframe. In these instances, regular monitoring (the length will be determined by the Panel and Council) may be imposed.
3) New providers will be subject to enhanced monitoring during the provisional accreditation period and the first full-accreditation period, in the form of yearly reporting, to assure AASW they remain compliant. If standards are not maintained, AASW will commence a formal review which may include an additional site visit. The cost of these reviews will be responsibility of the Provider.

The table below outlines the accreditation outcomes for a program seeking to be accredited. These outcomes apply to all programs, whether newly accredited or existing.

Accreditation Status	Definition
Full accreditation	AASW has determined that accreditation is granted to a new program or a program undergoing reaccreditation or expansion and the Provider has demonstrated it has met all the ASWEAS requirements.
Conditional accreditation	AASW has determined a program substantially meets the requirements for accreditation, however there are identified areas of deficit or weakness which can be addressed within a specified limited time. Providers will be required to resubmit against specific conditions within the noted timeframe. This outcome can also be applied to Provisional accreditation status.
Provisional accreditation	Accreditation status for a new Provider offering a program for the first time, or an existing Provider adding a new social work course that has not yet delivered its first graduates. It may be applied in cases where a Provider has significantly changed an existing accredited social work program and the AASW would like to see a cohort of students graduate from the changed program. The Provisional status applies for the duration of the first cohort, before a sample of graduates has emerged. Full accreditation would be sought upon the next full Provider submission.
Suspended accreditation	AASW determines the social work program is no longer considered accredited for the duration of the suspension period and would notify the Provider of reasons. AASW requires the Provider to advise the AASW of the management of currently enrolled students and TEQSA of the suspension status. This approach is followed when the program is deemed to have serious weaknesses and deficiencies and fails to meet key areas of the ASWEAS, which would disadvantage students currently enrolled, and the Provider is deemed not able to meet the non-compliant issues within the stipulated timeframe.
Revoked accreditation	AASW determines the social work program is no longer considered accredited and would notify the Provider of reasons. AASW requires the Provider to advise the AASW of the management of currently enrolled students and TEQSA of the revocation status. This approach is followed when the program is deemed to have serious weaknesses and deficiencies and fails to meet key areas of the ASWEAS, which would disadvantage students currently enrolled, and the Provider deemed not able to meet the non-compliant issues.
Refused accreditation	AASW has determined that a new program or a program undergoing reaccreditation or expansion has a serious weakness or deficiency in one or more ASWEAS areas that

	cannot be corrected within a reasonable timeframe. Further discussion will take place with the Provider and in time they may resubmit if appropriate.
Approve/Not approve	AASW has determined that approval be given or not for a Provider's request to approve a variation to an existing social work accredited program. This is normally for an existing program which would be already accredited, and the Provider wishes to add a location or change of minor components of the program.
Accredited teach out	When a Provider has made the decision to no longer offer a social work program and may either transfer students into a similar program to complete their studies or allow students to complete the course with no further intakes to be permitted. The Provider is to notify the AASW formally of change to program status, any additional information and the records would reflect the 'teach-out' of the program noting the final completion date of the final students. No further full accreditation cycle process for the program is required for ongoing accreditation purposes. The Provider would need to update the AASW on ongoing process until completion through the annual reporting process, so that the course remains accredited until teach out is complete.

The period of accreditation granted **is up to** 5 years. However, AASW retains the right to reduce this period, where Council has concerns about sustained compliance with the applicable standards. The Provisional accreditation depending on the program will be until the first graduates, usually 2 years from the delivery commencement date for MSW(Q) and 4 years for the BSW/BSW(H). The accreditation period will consider any conditions placed on the programs.

1.9 Additional campus application

A Provider can only seek the addition of a new campus for delivery of their social work program where the program has already achieved full accreditation status with no conditions. The accreditation process will be assessed separately to any other accreditation program process. In this case the Provider must discuss with the AASW Accreditation team the requirements to seek approval for the addition.

A Panel will be convened to assess the appropriateness of the addition, and a formal report and accreditation outcome will be recommended to the Accreditation Council.

The outcome for an additional campus will be

- That the Panel seek approval from the Council for the additional campus – in this case the Panel have found the new campus to be equivalent to the primary campus and therefore the program at new campus will inherit the accreditation status of the primary social work program and be incorporated into the next accreditation cycle.

- That the Panel seek approval from the Council for the additional campus to have a provisional or conditional accreditation status placed upon the social work program – in this case the Panel have found that the new campus has substantial concerns to that of the primary campus and therefore recommend that a different status be granted so that the Provider has a specific time to ensure alignment with the Standards.

- That the Panel seek that the Council do not approve the additional campus – in this case several significant issues or concerns, which may disadvantage students if they were to commence at this campus and the Panel believe the Provider is not ready to expand the social work program to a new campus facility.

- Delivery online is considered an additional application, for the purpose of this process.

- Third-party delivery (where the Provider wishes to engage a third-party partner to deliver all/part of the curriculum for a fully accredited course) is considered an additional application, for the purpose of this process.

3.10 Recommendations, commendations and opportunities for improvement

The assessment of accreditation applications should be viewed as a learning activity, with all parties wanting to ensure that the social work program being delivered is one of high quality for the benefit of the student experience. To this end the final accreditation report will include recommendations, commendations and opportunities for improvement, as well as clearly outline any conditions placed on the program. Where applicable timelines will be clearly outlined.

A recommendation is placed in the report by the Accreditation Assessment Panel and is something that may be linked to conditions placed on the program accreditation outcome. The recommendations consist of guidance that highlights actions to be taken by management to mitigate risk and enhance performance and should be acted on by the Provider prior to the next accreditation cycle. If they are linked to conditions placed on the program, there will be a timeframe noted in the outcome letter for evidence of correction.

The Accreditation Assessment Panel may also identify areas for commendation where identified aspects of the assessment exceed the minimum requirements of the Standards or engagement occurring within the Provider that the Panel believes is an area of good practice.

The final area reported are opportunities for improvement, which is where the Accreditation Assessment Panel have identified areas or components of the Provider processes or practices and suggested potential ways to improve or enhance the program delivery. The opportunities for improvement are not required to be acted on; however, it is encouraged that the Provider does review these and take them into consideration as a way of demonstrating a commitment to the overall quality improvement of the program.

4 Accreditation Process

2.1 Initial Program, accreditation, reaccreditation and program variation approvals

The aim of the accreditation process is not simply to ensure quality but to support continuous quality improvement of professional social work education and training to meet community and practice. The accreditation process is conducted in a positive, constructive manner based on peer review.

In the AASW role as accreditor of Provider's social work programs, the Accreditation Assessment Panel will be asked to assess submissions regarding the following scenarios:

Initial Program Accreditation: The evaluation requested for a new educational program offered either for the first time by a Provider or in conjunction with another accredited social work program.

Reaccreditation: The evaluation requested for a renewing or extension of the accreditation status of a social work program delivered by the Provider after a specific period.

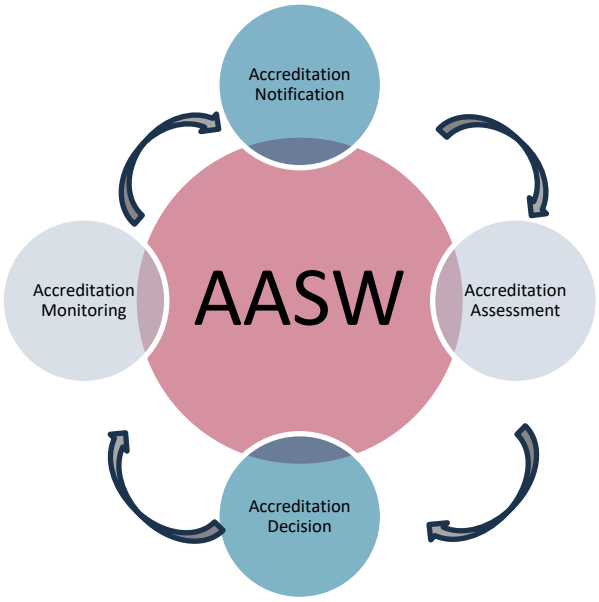
Program Variation: The request for assessment of a proposed change or significant modification to an existing social work program offered by the Provider.

2.2 The accreditation cycle

The accreditation cycle begins from initial contact with AASW either through a request regarding an initial accreditation for a proposed social work program or through a trigger for reaccreditation. In each phase of the process (reflected in Figure 1 below) there are identified process steps that are required to be completed to ensure the accreditation cycle is effective and robust.

The Accreditation Standards (ASWEAS) assess a Provider's social work program in terms of its governance, students, and curriculum. The focus is on how the delivered program ensures the graduates are job-ready to enter the profession.

Figure 1: Accreditation Cycle



2.3 Accreditation programs

New Social work Programs

The AASW Accreditation team must be notified when a Provider is looking to offer a new social work program. The Accreditation team will require the completion of an ***Intent to Submit*** form and will then commence discussions with the Provider to note the process steps, timeframes, application requirements, accreditation format, fees, reporting, panel and site visit. For a new program the process may take extra time to ensure all requirements are met and therefore the AASW ask a Provider to allow 10-18 months prior to students enrolling.

For a new Provider and new program, it is good practice for the Provider to utilise an external consultant to develop the curriculum content, practice education, and required components of the program.

Where the Provider chooses to seek TEQSA approval concurrent with the AASW accreditation process, any delay with the TEQSA approval longer than 12 months from the accreditation outcome date (determined by the Council's accreditation outcome letter), will rend the AASW accreditation void and the Provider having to re-start the accreditation process, including new submission, site visit and relating fees. Shorter delays may also require additional review and documentation, if so determined by AASW, to ensure the accredited program remains in line with the ASWEAS.

Accredited programs
The AASW Accreditation Team will notify the Provider that their social work program is due for reaccreditation within the next twelve-month cycle. The Accreditation team will require the Provider's confirmation of the program continuing through the completion of the ***Intent to Submit*** form. Once this has been confirmed further discussion will take place to note all accreditation process steps and start the process for confirming application due date and site visit dates.

Variation to accredited program
The AASW supports continuous quality improvement and realises that over an accreditation period a program is likely to undergo change. Higher Education Providers are requested to notify the Accreditation Team either through the Annual Report (each February) or earlier within the year if significant change has occurred, especially if the change impacts on the program's ability to comply with the ASWEAS.

The AASW is to be immediately notified by the Provider if TEQSA or another regulator proposes or commences an investigation, implementation of conditions or changes the Provider accreditation status.

Significant changes which should be noted, and which have occurred since the previous accreditation review include but are not limited to:

- Changes to academic staff delivery team, SWAOU, governance or organisational structure within the provider
- Practice Education changes to structure, governance, and arrangements of the Practice Education component of program delivery
- Change to program structure, course/unit codes or names
- Introduction of new units of study since your last accreditation cycle or replace units submitted within the previous course accreditation
- Change to program objectives, duration, format, structure, or delivery mode
- Addition of an existing accredited program to a dual degree
- Additional new location for delivery, including online delivery and third-party arrangement for curriculum delivery *(Expansion of programs applies to fully accredited programs with no conditions)*
- If a program is moving to or has moved to teach out status. (If so, please provide a teach out/ student-transition plan).

Depending on the size and details of the change an assessment may be requested by the AASW and the convening of an Accreditation Assessment Panel. This will be confirmed through discussion between the Provider and the Accreditation team.

In situations where AASW becomes aware of significant changes in the accredited course that have resulted in misalignment with the standards and risk of non-compliance, AASW reserves the right to seek further clarification from the Provider at any time. If non-compliance is evidenced and AASW's concerns are not resolved in the interaction with the Provider, AASW may initiate a full review, including a site visit. The costs related to this additional review, will be charged to the Provider.

2.4 Accreditation applications

The accreditation application is the Provider's self-assessment demonstrating how the social work program meets the Australian Social Work Education and Accreditation Standards (ASWEAS). The application will include various pieces of supporting evidence to demonstrate how the provider believes they meet the

Standards.

The Accreditation application includes an Evidence Guide to assist with a general outline of potential evidence which the Accreditation Assessment Panel would be expecting to view as part of the submission. Providers can submit further evidence and information as they wish to support their application, it may also be material that has been used for other purposes, such as a TEQSA audit.

The Accreditation *Application for program accreditation* is available on the website along with several templates which a Provider should use to assist with the application completion. Electronic submissions are the preferred option, and Providers may include hyperlinks with key documents, please just ensure that hyperlinks are active and accessible by AASW staff and Accreditation Assessment Panel members. Where application for multiple programs takes place, the Provider may combine sections and indicate/highlight where applicable, to facilitate the review and avoid duplication.

The Accreditation Team may provide Annual Reports completed throughout the accreditation cycle (if an existing Provider) to the Accreditation Assessment Panel and provide additional information, or previous accreditation report (if relevant), TEQSA status, and information to assist with the assessment process.

For social work programs delivered across more than one site, each site will be viewed as a separate entity and therefore the application should clearly delineate each site's evidence of compliance with the standards. Information that is common across all sites can be submitted together noting that it is for all locations. However, if there are differences in staffing, teaching space, practice education or other practices, the Provider needs to clearly identify.

2.5 Accreditation advertising

The Provider must ensure that all advertising material used to inform prospective students contains accurate information on the accreditation status of the program being advertised.

Advertising before the accreditation process is complete must include a notation that states:
"This social work program is not yet accredited by the AASW and will therefore not allow AASW membership eligibility for graduating students."

There are risks involved if a Provider was to commence social work programs outside of the AASW accreditation process, and potential complications for enrolled students and Provider alike should the review process find there are areas of development/ non-compliance identified within the program. There is the risk that the program will not be accredited by the time the first cohort graduates.

2.6 Accreditation agreement

The Provider accreditation agreement is initiated by the AASW Accreditation Team and outlines the fees, roles and responsibilities of all parties in the accreditation of social work programs in Australia.

Notification of intent to submit for a social work program will signal to AASW to commence the process for completion of the accreditation agreement. The agreement will enable AASW to discuss accreditation timelines, process, fees, and reporting requirements and, upon completion, have the program listed on the AASW website along with all accredited social work programs.

2.7 Accreditation key dates

There are two important dates within the accreditation process which should be mutually agreed upon

by the Provider and AASW Accreditation Team in the initial phase: The date for the accreditation application submission and the site visit date.

The dates will be influenced by the AASW accreditation schedule, the volume of preparation and the number of sites to be visited. Currently the accreditation process notes the site visit timings, below Figure 2, however this may be varied after discussion with the accreditation team.

Figure 2

Accreditation	Site Visit	Assessment Panel (Number may vary as required)
New Program & Provider	1.5 day	2 members
Existing Provider & new course	2 days	3 members
One program reaccreditation	2 days	3 members
Two or three programs reaccreditation	3-4 days	3 members
Conditional accreditation	Depends on conditions	Min 2 members
Notification of Change Addition of dual degree offering	May not be required, to be discussed with AASW	2-3 members to be discussed
Addition of delivery location *(applies to fully accredited programs only no conditions)*	1 day may be required to review campus or virtual mtg If addition is online delivery a site visit may not be needed.	2 members
* Additional site-visit determined by AASW (where non-compliance have been identified within the accreditation cycle and evidence submitted and reviewed to demonstrate compliance does not suffice)	Depends on the extent of non-compliance	2-3 members to be discussed

Please note: The days quoted are actual on-site days, the panel would travel before those dates, e.g., for a 2-day site visit, panel members would fly the night prior. Therefore, an extra day would be required.

2.8 Accreditation fees

AASW charges Providers to accredit social work programs through an accreditation fee and an annual fee. The cost is determined by factors including:

- Type of accreditation – full submission, changes to existing program
- Complexity of accreditation – if a program is offered across multiple sites or via dual degrees
- Volume of program - whether this is the first, second or third social work program offered.

Further details can be found in the AASW Accreditation Fees Policy. The Provider will be invoiced from the AASW Finance team at an early stage within the accreditation process. If a review is required for a significant change, or an appeal relating to a Provider, or accredited program leads to a decision to hold a formal assessment, the AASW will invoice the Provider then to recover associated costs. All Providers who have accreditation with the AASW will be invoiced for the annual fee due each year in December. This is introduced on a rolling schedule. Therefore, the year a Provider enters into an agreement for a program with the AASW, the fee will commence for that program that same year and each subsequent

year.

Irrespective of the stage within the accreditation process at which the Provider may withdraw an application, the accreditation fee may remain.

2.9 Accreditation expenses

All reasonable expenses (including but not limited to relevant travel, accommodation, and meals) incurred by the Accreditation Panel in connection with this Agreement shall be met by the Provider. The reimbursement or prepayment of such expenses should be managed directly between the individual Panel members and the nominated representative of the Provider.

The Panel travel and accommodation is the responsibility of the Provider to arrange with the Panel members (may be coordinated by the Chair) as they are travelling from across Australia.

2.10 Accreditation site visit

The site visit provides the opportunity for the Accreditation Assessment Panel to verify and clarify the application and evidence provided, to gain a holistic understanding of the social work program being delivered.

The site visit enables the Accreditation Assessment Panel to meet with a range of individuals and groups, for example Discipline Lead, social work academic team, staff, students, practice education team, graduates and external stakeholders, to discuss the program and view the facilities available to students. Please see ***Appendix 1 Site Visit Supplement*** for further information.

The agenda for the site visit is jointly coordinated by the Accreditation Assessment Panel Chair and the Discipline Lead, with an agenda template available on the AASW website. The Provider should consider requests of the Panel and the focus of the assessment site visit which will be provided by the Chair approximately a month post the application submission. The Provider (after reviewing their structures/staffing/roles) will nominate attendees for each of the Panel sessions, in accordance with their abilities to answer Panel questions, to ensure the Panel can understand their social work program in full detail.

It is strongly recommended that the Provider commences the planning for the site visit as soon as the application has been submitted. Once the nominated Chair and Panel have met to discuss the application, the Chair will notify the Provider of the focus of the site visit and request any further information, to refine the agenda before it is finalized by the Chair. It would be helpful if a campus map and any other information could be provided to the Chair to assist with orientation of the first day of the visit, including taxi rank locations and parking areas, and fee information if relevant.

At the end of the site visit the Accreditation Assessment Panel will normally hold a concluding meeting where the Chair would outline a summary of their assessment to date, and which may cover:

- Strengths of the program and commendations
- Indicating whether accreditation standards have been met or not met
- Identification of potential recommendations and conditions that may apply within the final report.

The Accreditation Assessment Panel may note the accreditation decision that the Panel will recommend

to the Accreditation Council; however, they are not required to advise the Provider of their full recommendations and accreditation outcome at that time.

2.11 Accreditation desktop assessment

AASW may choose to use a desktop assessment instead of a site visit in instances of notification of change, e.g., adding online delivery for program and/or addition of third-party delivery arrangements offered at an alternate site. In this case, there is no campus to view and limited details requiring an in-person visit.

In these circumstances the Accreditation Assessment Panel will assess the application and evidence provided depending on the specifics of the individual case. The members will advise the Provider of any further evidence/information they may require including a timeframe. Depending on the circumstance of assessment, the panel may wish to hold a virtual meeting with key stakeholders to gain clarity of the situation. A report would be drafted and provided for factual checking. The report will then be tabled with the Accreditation Council for outcome decision and notification communicated to the Provider.

2.12 Accreditation Standards review and approval

A review of the AASW Approved accreditation standards (ASWEAS) for social work education programs will be conducted every four or five years, or earlier as required.

The review will consider and determine if the existing standards remain fit-for-purpose to achieve a level of social work graduates who are entering the professional environment competent and confident in their role, with the necessary foundational knowledge, professional attitudes, and essential skills. AASW reserves the right to nominate a shorter accreditation period for new providers during their accreditation period. This decision will be made in conjunction with the Accreditation Council, where there are legitimate concerns of non-compliance.

A review would be orchestrated by the AASW with the engagement of Providers, students, industry, and sector stakeholders. The Standards will be tabled at the Accreditation Council for feedback before proceeding to the AASW Board for final approval. Then published on the website with all parties notified of the decision.

5 Accreditation Roles and Responsibilities

5.2 AASW Accreditation Assessment Panel

The AASW Accreditation Assessment Panel (the Panel) is the name given to AASW contracted members appointed to act as accreditors of social work programs for the purpose of determining whether the programs demonstrate the required standards for social work education.

The efficacy of the Accreditation Assessment Panels and their decision-making stands as a cornerstone of the accreditation process. Vital to this effectiveness is an unwavering commitment to integrity and a process that remains replicable and consistent, leading to comparable outcomes regardless of the specific Accreditation Assessment Panel involved.

5.3 Appointment of the Accreditation Assessment Panel

Accreditation Assessment Panels are AASW members appointed to act as assessors of social work programs for the purpose of determining whether the programs demonstrate the required standards for social work education. The number of Panel members may vary from two to four depending on the focus of the accreditation process and the Provider location and context. Each Panel is chaired by an experienced member of AASW Accreditation Assessment Panel Membership.

Previously accredited social work programs are reviewed by a Panel of three members, one of whom will be a chairperson. The Chairperson and one other member will be appointed by the AASW. The names of at least two other available Panel members will be provided to the Provider Social Work Academic Organisation Unit (SWAOU) so that they may select the third member of the Panel. The member selected by the Provider SWAOU is not a representative or advocate for the Provider SWAOU and the Panel members are additionally asked to identify any potential conflicts of interest be actual or perceived.

When appointing members of a Panel, the following will be considered:

- Specific expertise relevant to any special needs of the school as identified by the Provider and AASW
- potential conflict of interest
- representation on the Panel of an academic/practitioner with experience in practice education.

The AASW maintains a register of accreditation assessment panel members from which the panels will be selected. AASW will appoint a Panel Chair from amongst those on the register who are identified as qualified to chair a Panel. The panel will be formed given the availability of suitable potential panel members.

Chairs have extensive experience as AASW accreditation panel members and receive specific training in the role, before being appointed. All Panel members are required to attend relevant training.

5.4 Procedures for appointment to Panel Membership

The following steps are required for the appointment of Accreditation Assessment Panel members:

7. A call for applications from AASW members will be advertised across a range of platforms as required
8. AASW members with a minimum of seven years' experience since qualification can apply for appointment as a Panel member
9. Applications should be addressed to the AASW Accreditation team at education@aasw.asn.au and should be accompanied by the member's curriculum vitae and a statement addressing the selection criteria for appointment to the Panel
10. Applicants are asked to nominate two referees, and the Accreditation team may interview applicants regarding clarification or for further information
11. Successful applicants will be notified in writing and will participate in an induction conducted by the AASW.
12. Attended panel member training organised by AASW and satisfactorily completed all compliance

requirements/modules.

5.5 Term of appointment

Appointment to the Accreditation Assessment Panel is initially for a period of five years. After that time, the Accreditation team will contact existing Panel members to determine if they wish to continue for a further five years. The Accreditation team will ensure that the AASW maintains a current curriculum vitae.

5.6 Chairperson appointment

As noted above under 3.2, the AASW will appoint a Panel Chair from amongst those on the register who are identified as qualified to chair a Panel.

The criteria for selecting a Chair of an Accreditation Assessment Panel may include but are not limited to the following:

- have previous experience as a panel member
- ability in skillfully negotiating with high-ranking executives and management within the realm of higher education institutions
- proficiency in rigorously analysing substantial volumes of data and evidence and adeptly prioritising tasks
- demonstrated capacity to effectively lead and manage a freshly established team
- comprehensive understanding of social work education within higher education environments
- experience as a social worker or academic of social work programs
- ability to summarise conditions and recommendations and provide feedback to Providers and Final Report to Council in a clear and timely manner
- maintains active involvement in the social work field and remains up to date with contemporary practice issues, developments, and trends.
- ongoing experience as a panel member with a depth of expertise and knowledge.

The Chairperson's responsibilities include:

- coordinating the arrangements and task allocation for the assessment including site visits
- ensuring all timelines are met
- notifying the Provider post initial application review of the site visit focus and requesting further information
- chairing the site visit meetings
- maintaining the Panel's independence throughout the duration of the assessment, to ensure that the Panel as a whole behaves ethically and professionally
- coordinating the work of the Panel, including regular briefing of the Panel on arrangements and developments
- recording and documentation of all discussions
- leading the drafting of the initial and final reports

- preparing the final accreditation report for submission to the AASW Accreditation team
- clearly outlining conditions in a clear, concise manner which includes timelines, where relevant.

Chairs are expected to attend specific training session organised by AASW.

Note: Where applicable, the Accreditation Team is available to work with the Panel chair to confirm the wording of recommendations and conditions and clarify timelines to ensure the findings are clearly conveyed to the Accreditation Council and the Provider.

5.7 Members of the Accreditation Assessment Panel

The primary responsibilities of accreditation assessment panelists in the accreditation process are to assess whether a program meets each of the Standards, based on the evidence provided. The accreditation process will include, at a minimum, time for reading and analysing the initial submission application and supporting documentation, engagement in an application review panel meeting and one with the Accreditation team, attendance at the site visit and collaboration of the draft accreditation report. There may additionally be time required for evaluating subsequent documentation, for example, responses by the provider to evidence gaps, issues or changes identified by the panel. Additionally, where required for clarity, on occasion the final report may need to be revised for clarity.

The Panel members will:

- undertake a rigorous examination and assessment of the program against the ASWEAS requirements
- be available for and actively participate in all aspects of the review process
- read all documentation in advance of meetings and report writing
- declare any conflict of interest prior to and during the review
- behave collegially and professionally with other panel members, respecting the Chair's leadership, and with the Provider
- ensure that they do not engage in activities that compromise their roles and responsibilities as reviewers
- take a balanced approach to their roles in the review process as assessors, facilitators and contributors to innovation and enhancement of good practice.

5.8 Independent Experts

In the pursuit of fortifying the accreditation process, the integration of external independent experts or even external to the social work profession as a potential strategy, may be utilised to elevate the quality and rigor of professional education programs. The landscape of accreditation is evolving, and with it, the judicious utilisation of external expertise offers a dynamic avenue for enhancing practices and outcomes. The independent experts, for example, may be engaged to review a particular accreditation only, assess the quality of evidence, program design and delivery, quality assurance, and program evaluation or engaged for an appeal process.

5.9 Academic Organisational Unit (AOU)

The Provider AOU is the academic unit (sometimes referred to as SWAOU) within a Higher Education Provider responsible for developing and delivering the social work program submitted for AASW accreditation. The AOU's responsibilities include:

- declaring any conflict of interest prior to and during the review
- organising arrangements for accreditation site visits and meetings
- providing all information and supporting materials in the agreed format
- meeting the costs associated with the review, including Panel travel, accommodation, meals and all reasonable costs associated with site visits.

Following its initial assessment, the Accreditation Panel may request further information to be provided prior to the site visit. The site visit may be postponed if the documentation is not made available in advance.

5.10 AASW Board

The AASW Board maintains a role in the oversight of the Accreditation Framework and program Standards. The Board will monitor and manage risk with respect to final decision-making processes. The Board will approve the Accreditation Council Terms of Reference.

The final decisions determined by the Accreditation Council of Higer Education Providers accreditation reports will be noted to the Board and in the case of the Council recommending the accreditation of a Provider be revoked, the Board will ensure that due process was followed throughout the Accreditation process by all stakeholders before approving the decision or not.

5.11 AASW Accreditation Council

The primary responsibility of the Accreditation Council is to provide oversight of the accreditation process of the Australian Association of Social Workers (AASW) with the objective of ensuring that graduates from social work programs have achieved the professional competencies and learning outcomes identified as necessary for entry into professional practice by the Australian Social Work Education Accreditation Scheme (ASWEAS).

The Council will provide the outcome decision for all accreditation reports tabled at meetings which will occur bi-monthly across the year. The goal is to maintain consistency and fairness in the accreditation process without interfering with the Panel's autonomy. By maintaining this approach, the Council will contribute to the credibility and integrity of the accreditation framework whilst respecting the expertise of the Assessment Panel members in carrying out their responsibilities.

3.10 AASW Chief Executive Officer (CEO)

Maintaining the overall integrity of the accreditation process is a cornerstone of the CEO's role. The CEO ensures that the Association adheres to the highest standards of transparency, fairness, and ethical conduct.

Operational excellence is a hallmark of effective educational management. In the accreditation landscape, the CEO has the operational responsibility for the Accreditation Council and the implementation of the Accreditation Framework and Standards. It is the role of the CEO to ensure

the AASW commitment to quality is reflected in every facet of the accreditation journey.

5.12 AASW Accreditation Team

The Accreditation Team employed by the AASW to ensure the completion of the ongoing accreditation cycle for all Providers.

In this role the AASW Accreditation Team is responsible for:

- Establishing and maintaining contact between the Provider and the Association
- Providing advice and support to all stakeholders involved in the process
- Providing advice to the Panel, Providers and Council on ASWEAS, AASW templates, guidelines and other AASW relevant information, and overall, provide additional information and support to all stakeholders
- Completing a desktop assessment, in conjunction with the Accreditation Assessment Panel of each application from the Provider
- Track and schedule the accreditation cycle of all accredited Providers
- Developing templates, guidelines, and training manuals, to assist with the process
- Conducting induction and training of the Accreditation Assessment Panel Members
- Facilitating document management and the accreditation reporting process
- Maintaining the register of Accreditation Assessment Panel Members and Chairs, whilst ensuring all members' details are current
- Facilitating the ongoing engagement of Accreditation Assessment Panel Members
- Developing accreditation papers, for tabling the accreditation reports to the Accreditation Council and attending as an observer, to answer operational questions
- Monitoring, assessing and tracking the completion of the AASW Provider Annual Reports and other monitoring activities and report on data collated through the reports.

The Accreditation Team will work closely and provide ongoing support to the Accreditation Council.

6 Accreditation Reporting & Monitoring

6.1 Accreditation draft and final report

Once the site visit has been completed, the Panel will draft an accreditation report on the findings of the site visit, including recommendations, conditions, commendations, and opportunities for improvement.

The draft report will be based on the assessment of the initial documentation, all evidence and further information provided as requested, the site visit discussions with stakeholders, and any additional documentation requested by the Panel, as post visit follow-up. The Panel Chair will keep the Accreditation Team updated on all aspects of the drafting of the report, and can seek advice on ASWEAS, guidelines, clear wording of conditions, and other information, as required.

The draft report will then be sent to the Provider by the Chair (copying in AASW) for a ten (10) day factual checking period. The Provider may choose to provide a written response. The response is limited to the correction of any errors of fact, to any matters to which a response is specifically requested or to any issue that the Provider feels the Panel may have misunderstood.

The draft report additionally provides early sighting by the Provider of the proposed recommendations, commendations, conditions or monitoring requirements. This may have already happened at the conclusion of the site visit, as noted earlier under 2.10.

Any comment or further evidence pertaining to factual changes as noted above will be considered by the Accreditation Assessment Panel and, once the report has been finalised by the Chair, including the addition of the signatures of all the Panel members, it will be forwarded to the AASW Accreditation Team.

The Accreditation Team will then table the final report to the Accreditation Council for an outcome decision. Once an outcome has been determined by the Accreditation Council this will be communicated formally to the Provider.

4.2 Accreditation Council outcome options

Council has the right to include additional interim reporting conditions to assist with enhanced monitoring. These interim reports will be monitored and reviewed by the Accreditation Team as applicable. Where non-compliance is identified, the Accreditation Team will follow up with the Provider for clarification. Failure to respond to the satisfaction of the AASW and/or demonstrating continued compliance with the ASWEAS throughout the accreditation period, may lead to an off-cycle accreditation site visit, with additional costs liable by the Provider.

Conditional Decision

Conditions may be approved by the Council for a social work program through the final report recommendations, including a shortened period of accreditation. Any requirements relating to conditional accreditation will accompany the formal notification of the outcome decision from the AASW.

There is more detailed information regarding this accreditation status outlined in the **Guide to Conditional Accreditation** (accessible on the AASW Website).

Conditions should reflect the area of non-compliance and may include:

- Curriculum Updates: Requiring specific modifications to course structure and syllabi if gaps are identified against competency standards.
- Progressive Reporting: Mandating interim or annual reports on curriculum rollout and student progression as the program expands.
- Resource and Staffing Updates: Requiring proof of adequate academic appointments, supervision, staffing levels, and academic resources to maintain a high faculty-to-student ratio, including leadership qualifications in line with ASWEAS, throughout the accreditation period.
- Targeted Site Visits: Scheduling mandated interim or final-year site (or virtual site) visits to assess physical facilities and program delivery.
- Intake Suspension: The Provider must suspend new enrolments in the program for a period of 12 months from the date of this decision. Such a condition would generally be treated as a restriction on enrolment or course delivery, rather than a cancellation of accreditation. The objective of this condition is to allow the Provider time to address concerns relating to staffing, student outcomes, governance, resources, work-integrated learning placements, assessment integrity, or other quality issues impacting their ability to comply with ASWEAS.

Where conditions remain unmet for a sustained period to be determined by the Accreditation Panel, the next escalation point is program suspension or revocation.

Accreditation suspension

Suspension is a corrective mechanism to allow Providers an opportunity to address identified areas of non-compliance where conditions have not been sufficiently addressed.

AASW may, at its discretion, suspend the accreditation of a course, for a specified length of time, in any of the following circumstances:

- Where the Provider has repeatedly failed to meet conditions after it was given
    - a) the chance to correct any misalignment with the ASWEAS; and
    - b) a final warning by the AASW that failure to meet the conditions would result in suspension
- Where AASW has requested the provision of information relating to the accredited course and the Provider has failed to provide such information to the satisfaction of the AASW within the appropriate timeframe
- Where AASW has notified the Provider of issues which require improvement and the Provider has failed to rectify those issues by the required deadline
- Where the AASW has determined that the Provider has failed to comply with its obligations in relation to conducting an approved course in line with the relevant ASWEAS, by the deadline provided in the final warning to comply.

If a Provider has its accredited course status suspended, it will be notified by the AASW of this decision, including the date on which the suspension took effect.

Notification of the suspension of an accredited course status may be published at AASW's discretion.

It is at the discretion of the Accreditation Assessment Panel and the Accreditation Council to determine if a single extension to the conditions' deadline should be granted before recommending suspension. This decision would be taken in consultation and after seriously considering the impact on the current student

cohort.

Accreditation revocation

Revocation should be reserved for the most serious cases where, after a period of conditional accreditation, where the conditions remain unresolved.

The accreditation of any social work program may be revoked by the AASW after the Provider was given the opportunity to correct the identified issues through accreditation conditions and a period of suspension. Revocation may also take place in situations where the Provider is being investigated by TEQSA for wrongdoing or where TEQSA has revoked their approval.

When a decision is made to revoke, this would mean that the social work program is no longer considered accredited. At that stage, all students need to be advised, and all marketing materials should reflect this decision.

After a nominated period, no shorter than 12 months, a Provider may re-start the accreditation process which, if successful, would result in a Provisional accreditation outcome.

AASW may, at its discretion, revoke the accreditation of a course offered by a Provider at any time in any of the following circumstances:

- Where a Provider has repeatedly engaged in conduct which, in the AASW's reasonable view, is in breach of the obligations contained in this application and/or the AASW's requirements; or
- Where a Provider has failed to remedy identified deficiencies during a period of suspension.

If a Provider has its accredited course status revoked, it will be notified by the AASW of this decision, including the date on which the revocation took effect. Notification of the revocation of accredited course status may, at the AASWs discretion, be published.

Accreditation not granted

The final report may recommend to not grant accreditation to a Provider. In this case the decision will be made for one or more of the following reasons:

- The social work program application was not deemed to be sufficient by the Accreditation Assessment Panel
- The social work program application does not comply with several crucial requirements of the ASWEAS, and the Panel and the Accreditation Council are, therefore, not confident that the program will deliver the required outcomes
- The Provider is unable to demonstrate that their processes and practices meet the Standard requirements
- The Panel and the Accreditation Council do not believe in the quality of the social work program and, therefore, that graduating students would meet the required Standards.

If a social work program is not granted accreditation, the AASW will notify the Provider of the decision by the Accreditation Council and any specific action or requirements from that decision. The Provider must then:

- Accurately inform current students and prospective students of the program status and decision,

noting their non-eligibility for AASW membership

- Accurately reflect this decision in any marketing material of the social work program
- Submit a new application for accreditation following a suitable timeframe, after making necessary changes or redevelopment to the non-accredited program.

In these cases, discussion would need to take place with the AASW Accreditation Team regarding any new submission timeframe. New applications would need to follow the outlined new application accreditation process.

6.2 Accreditation status publication

The AASW maintains a listing of accredited programs on its website, which is updated post the Accreditation Council outcome decisions. Each program is provided with an accreditation expiry date which is captured in an AASW database. For an initial program, the expiration date will be the date of the Accreditation Council decision.

The Provider is responsible for maintaining on their published material the accurate accreditation status of each social work program. The Accreditation team will provide for new and fully accredited programs the logo which can be used on the Providers website. From time to time the accreditation status currently displayed by Providers will be monitored by the AASW.

The AASW requires that the Provider's publications and marketing material correctly displays an acknowledgement of accreditation for each accredited program.

> *This is an AASW-accredited qualification. It is an entry qualification into the social work profession and has been determined to meet the Australian Social Work Education and Accreditation Standards.*

6.3 Accreditation annual report

The Annual report is a mandatory yearly document due by February which must be submitted by all Providers to AASW. The template for this can be located on the website and will be included in AASW communications requesting its completion in advance of the February deadline. The SWAOUs are requested to nominate any changes or developments which have occurred over the previous twelve months. The Annual reports for the accreditation cycle will be provided to the Accreditation Assessment Panel as part of the evidence for assessment of any program.

The AASW Accreditation Team will review and track the provision of the annual report to identify potential risks, non-compliance or concerns at an early stage, so they can be addressed within the accreditation cycle. The AASW Accreditation Team may request further information to clarify, if noted or proposed changes significantly impact or may impact the existing accreditation or the Provider's ability to provide the course as accredited.

There may be instances identified through the annual report that a planned or future change brings into question whether a program will continue to meet the accreditation standards. In this instance it may be appropriate for monitoring or conditions to be imposed, such as a report to be submitted or a further review to be undertaken. This would be done in communication with the Provider and, if conditions are applied, undertaken with approval of the Accreditation Council. Where this non-compliance is investigated and AASW deems additional early review is required, additional costs are the responsibility of the Provider.

6.4 Accreditation monitoring

There are three circumstances where the AASW will undertake monitoring and quality assurance processes within the accreditation cycle.

4.4.1 As part of routine monitoring and quality assurance practice, the AASW will instigate requests for updates and evidence of compliance with ASWEAS. This will be additional to the Annual Reporting requirement.

4.4.2 The AASW may apply conditions or additional monitoring requirements to a social work program at any time if a program does not meet the standards. In situations where conditions are in place, an additional site visit and/or desktop review of additional documentation and in some circumstance a Panel would need to be convened. Additional costs relating to this additional review would apply.

4.4.3 There may be an occasion where the AASW receives a communication raising a concern(s) which may bring into doubt certain aspects of whether an accredited social work program continues to meet the accreditation standards. The AASW will consider such concerns and undertake further investigation where appropriate. In those instances, the AASW will inform the Provider of the basis for the concerns, and the Provider will have the opportunity to respond. The outcome would note any action that may be necessary, and this may result in monitoring requirements or undertaking a desktop review or site visit. Additional costs relating to this, will be the responsibility of the Provider.

At all times the Provider would be kept informed of the process being undertaken.

6.5 Accreditation appeals process

Once a final decision is made and the Provider has been formally notified of the outcome, the Provider has the right to appeal the accreditation process or outcome within thirty (30) business days. This process is detailed in the *AASW Accreditation Appeals Policy* which is accessible on the website and outlines the process in detail.

An appeal may be sought on one or more of the following grounds:

f) Relevant procedures when making the initial accreditation decision were not observed

g) Relevant and significant evidence or information was not considered (or not properly considered) in making the initial accreditation decision

h) Irrelevant information was considered in making the initial accreditation decision

i) An error was made in relation to a finding on a material fact

j) The manner in which the accreditation process was conducted was procedurally unfair.

The AASW applies a fee for this process.

7 Accreditation Stages

Overview of stages

The process for the review of AASW-accredited social work programs is divided into six stages. The stages for all accreditation categories are as follows:

1. Planning
2. Initial review
3. Site visit including preparation and response
4. Draft report and provider response
5. Ratification of final report
6. Appeal process

7.1 Stage 1: Planning

1) Initiating the review

A review of a previously accredited program starts with:

1) a written reminder from the AASW to the AOU at least 12 months prior to the expiry of the current accreditation period
2) confirmation by the AOU that it seeks accreditation.

For Providers seeking provisional accreditation of a program the review is initiated by an application to AASW at least 12-18 months before the program is to be offered by the AOU. Application forms are available from the AASW website.

2) Process management

The planning process involves the AOU and AASW staff until such time that an Accreditation Assessment Panel and Chair are appointed. At that point the details of the review are largely managed by the AOU and the Panel, consistent with this document, with AASW staff providing process and policy support and advice as needed.

5.7 Stage 1: Planning

At the conclusion of Stage 1, all parties will be contracted to the accreditation review, dates for the site visit will be agreed and the SWAOU and the review Chairperson will work together to plan the remaining details of the review.

Party responsible	Activity
AASW Accreditation Team **Or** **Provider/AOU**	Twelve months prior to expiry of accreditation period Previously accredited program: notify Provider of impending expiry of current accreditation and invite intent to submit, including any information relevant to special needs of the program.
	New Program: Notify the AASW of proposal to apply for accreditation of new social work program, including as much detail as possible. Provide TEQSA approval status to AASW. New Provider: AASW will convene a virtual meeting to discuss the accreditation process.
Provider/AOU	Completes and forwards to AASW for program accreditation, reaccreditation or provisional accreditation an **Intent to Submit** form, indicating any particular requirements of the Program for Panel knowledge.
AASW Accreditation Team	Acknowledgment of Intent to Submit and provided with links to Accreditation Application template and Appendices.
Provider/AOU	Commence preparation of application and provide suggested dates for submission and site visit.
AASW Accreditation Team	Confirm with Provider duration of site visit and panel size. Identify available members for the Accreditation Assessment Panel. Suggest names for the Provider to select third panel member.
Provider/AOU	Selection of third Accreditation Assessment Panel member.
AASW Accreditation Team	Confirm the Accreditation Assessment Panel members, including Chair. Confirm site visit dates and application due dates. Distribute contact information and details to Panel members, Chair and Provider AOU.
AASW Accreditation Team	Prepare and distribute contracts to Provider and Accreditation Assessment Panel members.
Provider/AOU	Return completed contract agreement.
Panel Members	Return completed contract agreement.
AASW Accreditation Team	Confirm to Provider the Panel Members who require a hard copy of application submission.

5.8 Stage 2: Initial review

The initial review enables the Panel to evaluate the program based on the documentation submitted by the Provider. It provides an opportunity for the Panel to seek clarification of details from the Provider and to then prepare and note to the Provider the focus of the site visit and where further information is required.

At least eight weeks before the scheduled site visit, the Provider will submit the application to for assessment.

The Accreditation team will provide the Panel copies of

- Annual Reports for the duration of the accreditation cycle received from the Provider
- Compliance requirements/recommendations of the prior accreditation report, any conditions applied by AASW or TEQSA.

The AASW Accreditation team will support the Provider with any additional advice regarding accreditation requirements during the process.

Party responsible	Activity
Provider/AOU	At least eight weeks prior to site visit, submit application and supporting evidence to the AASW and the Accreditation Assessment Panel Members
Provider/Chair	Finalise all administrative details for travel, accommodation. Commence the draft site visit schedule
Panel Members & AASW Accreditation Team	Assess the Provider application, prepare notes on initial thoughts, findings and details requirements for further information required prior to or at site visit. Note the themes for focus of site visit. A virtual meeting is convened of AASW Accreditation team and Panel members and is Chaired by the Chairperson.
Chairperson	Provides feedback to the Provider on the initial response, findings, requests any further information and details the focus of the site visit.
Provider/Chair	Collaborate and work to confirm the site visit agenda. Agenda distributed to all parties.
Provider/AOU	Compiles further information requested by Panel and submits to the AASW and Accreditation Assessment Panel members.
Panel Members	Meet virtually to discuss the further information submitted and finalise site visit details.
AASW Accreditation Team	Provide the Chair with the template for Final Report and any further information if requested.

5.9 Stage 3: Site visit

Please see ***Appendix 1 Site Visit Supplement*** for further information to assist with the site visit.

The Accreditation Assessment Panel Chair and Provider Discipline Lead/Head of School are responsible for preparing the meeting agenda. It is important to ensure key stakeholders are included in the site visit to provide a balanced overview of the social work program and to allow the Panel to clarify statements made within the accreditation application and to answer questions raised through the supporting documentation.

Party responsible	Activity
Chair/Panel	Panel will meet upon arrival (normally night before site visit commences) to develop protocols, allocate tasks, and identify key questions to explore with the Provider, AOU and stakeholders.
Provider AOU and Panel	Site visit activities as scheduled. Provider to supply any additional information requested by the Panel, this may be additionally requested throughout the site visit, if discussions raise further questions. Panel may advise the Provider AOU of initial findings including areas of non-compliance that will require attention over the next accreditation cycle or within a timeframe if conditions are suggested.
Chair/Panel	Review the site visit outcomes, confer on revision of decisions and recommendations of assessment report. Collaborate on the completion of the draft final report.
Chair & AASW Accreditation team	Notify Accreditation team on initial findings, including any areas of non-compliance and overall view of site visit.

5.10 Stage 4: Draft report and provider response

The primary focus of the accreditation report is on whether the social work program meets, or can meet, the ASWEAS criteria.

The final decision of the Panel on accreditation of the program should be unanimous, and the report co-signed by all members. If the Panel cannot agree, the Chairperson will request that AASW appoint a mediator to assist.

Party responsible	Activity
Chair	With input from the Panel members, complete draft final report and distribute to the Provider for factual checking period of ten (10) business days. The draft final report is provided to the Accreditation team.
Provider AOU	Provide response to the Chair at end of timeframe. Please copy the Accreditation team into any response.
Accreditation Team	Review report and request clarification where required.
Chair	Review the response and make adjustments if required and agreed. Finalise assessment panel report and confirm recommendations, conditions or opportunities for improvement. Consult with AASW staff where required. Submit final report to the AASW Accreditation team along with the final site visit agenda noting stakeholders met.

5.11 Stage 5: Ratification of report

The final review report is considered by the AASW Accreditation team who then prepare a Decision Paper for the AASW Accreditation Council. The Decision Paper will include a summary of the assessment process.

The Accreditation team may assist the Panel Chairperson in the formulation of clear wording for a recommendation statement. The Council will convene to deliberate on the final accreditation report and determine an outcome.

Following the Council's ratification of the Panel's recommendation for accreditation the AASW Accreditation team will advise the Provider, AOU and Accreditation Assessment Panel of the outcome of the accreditation review.

Party responsible	Activity
Accreditation Team	Advise the Panel Chair on the process post provision of the final report. Provide the AASW Council Executive Officer with final accreditation report and Decision Paper to be tabled at Accreditation Council for outcome decision.
Accreditation Council	Consider tabled accreditation final report and Decision paper including the Accreditation Assessment Panel recommendations. The Council determines if through reading the report and Panel assessment, the Provider has met the required standards and that all required accreditation procedures were followed.

Accreditation Team	Formally notify the Provider SWAOU and Accreditation Assessment Panel members of the Accreditation Council outcome decision of the accreditation assessment. Note the final decision on internal AASW database and AASW website.

5.12 Appeal process

Please see Section 4.6 of this document or the AASW Appeals Policy for further information regarding this process.

Appendix 1: Site Visit Supplement

This supplement is to assist in the preparation of the site visit schedule prepared by the Provider in conjunction with the Accreditation Assessment Panel Chair and each schedule will differ according to the focus identified for the site visit and availability of parties. The Provider should try to ensure that all requested parties are available for the duration of the site visit. The supplement is not developed to provide a mandatory listing for a site visit but to assist in how the visit may be conducted.

The Provider is to prepare a list of names and titles of attendees for each meeting to assist the panel and to assist with details of the report. (A draft schedule is accessible on the AASW website)

The accreditation site visit should provide opportunities for interactive and comprehensive discussions with staff, students and all relevant stakeholders to allow them to represent their views and so the Panel have the chance to verify statements made within the application.

It is important that all parties are encouraged to speak freely and provide honest answers to questions from the Panel. There is also a need to ensure that the Panel have suitable time during the visit for confidential discussions to review and reflect on their observations and findings over the course of the site visit.

General Venue
It is always good to have a dedicated room which is assigned to the Panel for the duration of the site visit and have as many sessions as possible within that assigned room to reduce the level of time lost in transit moving locations. It is very helpful to have displayed or requested documentation and student materials ready in this room and available for the entire site visit. The Panel additionally may request to have the full set of application documentation provided at the site visit for reference.

To assist with the running of the site visit, the following equipment if available may be provided in this room:

- Computer with USB capability, internet access and access to Provider website, learning management platform etc.
- Access to printing facilities if required
- Ability to hold virtual meetings or presentations, if required.

Liaison Staff
It can be very helpful during the site visit to have the assistance of a Provider staff member to act as liaison for the Panel for additional requests regarding documentation, unscheduled meetings, changes to the agenda or general questions.

Typically, an administrative staff member would take on this role for the duration of the site visit, and they may assist the Panel in navigating the campus or completing printing as requested.

The Academic or Discipline Lead or senior member of the social work team may also act as a resource for the Panel to provide further information, if sought, regarding the program delivery. The same staff member is often in attendance at all meetings except for student or graduate meetings and, possibly, the practice educator discussions. This assists in the transparency of the site visit and provides additional support for the Panel.

Opening Session with leadership team, including Vice Chancellor/Deputy Vice Chancellor/CEO
The purpose of this meeting is to establish the position of the Social Work discipline within the Provider overall structure. The Chair will confirm the agenda, participant attendance and raise themes identified for further discussion. The Panel will discuss issues with regards to leadership, strategic positions, staffing levels, Provider level quality assurance mechanisms especially in relation to external input into the program design, frameworks for setting and monitoring educational outcomes, staff management and development.

Panel members may look at the overall education culture at a Provider level and items such as diversity, gender, culture and social differences, funding, marketing position for program(s) and partnerships. The Panel will also evaluate the requirements for program approval and how the Provider ensures quality of teaching and learning.

The Dean or Discipline Lead may wish to commence this session with a brief (no more 10-15 minutes) presentation on the Provider and where the social work program fits in. The Panel can then ask questions regarding educational design, review and continuous improvement processes, leadership, research, industry engagement, targeted outcomes and structure of the program.

Concluding Session with leadership team and senior academic staff
A concluding session on the final day of the site visit will provide an opportunity for the Panel to present a summary of progress towards the interim recommendation(s) or conditions the Panel intends to make regarding the accreditation and note commendations and any opportunities they may like to suggest continuing the improvement for the program for the next accreditation cycle.

Discussion at this meeting should encourage correction of any factual errors and specifically address any issues of contention. A formal decision is not announced at this time (this is for the Accreditation Council to determine). At their discretion, the Panel may choose not to present interim recommendations at this time, as they may need to discuss further.

Meetings with Program Leaders
In this session, the Panel will have a detailed discussion with staff members such as Program Coordinator/Director or Convenors who have specific accountability for leadership of the academic teaching team(s) for each of the programs seeking accreditation.

In this session the Panel may wish to discuss interests such as:

- Program objectives and graduate outcome targets
- Program design, including practice education set up and format
- Student profile
- Staffing levels to support the delivery of the program
- Quality systems
- Detailed curriculum mapping against graduate attributes
- Industry or Course Advisory input
- Students input into the processes of continuous improvement and how their voice is included.

It is good practice that the Discipline Lead and Program Leaders be on call during times of private meetings of the Panel, in order to respond to any specific query or concern that may arise.

Meetings with academic staff
These sessions, including meetings with full-time academic staff who deliver the program across multiple sites (if applicable) even if the Panel is not visiting all the delivery sites, are used to discuss in detail the program structure, unit/subject content, graduate profiles, research, practice education, program objectives, required curriculum and staffing, among other areas.

An additional session may be required with academic staff after other meetings have been held with other stakeholders as additional information may be sought by the Panel to clarify or verify statements.

The Panel will notify relevant stakeholders as the site visit proceeds.

If the accreditation application is for more than one social work program, it may be appropriate to discuss each program separately, especially if one is reaccreditation and one application is for new program delivery. This allows the Panel to maintain clear parameters around each program. Sections duplicated across the submissions can be highlighted and or combined, with a clear note to that effect, to simplify the review process.

Practice Educator team
This session will enable discussion of themes relating to the practice education placement component of the program. It may also include representatives from employers which partner with the Provider for placement completion.

The Panel may wish to discuss:

- Induction, training and support from the Provider of the practice educators
- Roles and responsibilities of all parties and the process for placements
- The delivery and sequencing of the practice education components of the program
- The Provider requirements regarding assessment of students during their placements, including, if applicable, a brief demonstration of their assessment platform
- The support provided to placement staff and students if the student is at risk of failing
- How the Provider overcomes the challenges associated with finding placements, especially if more than one program
- The levels of internal and external supervision which occurs
- Skills and knowledge of the students undertaking placements
- Documentation requirements of both students and educators during the placement
- Any other issues that the Panel wish to clarify from the application.

This session usually occurs without Provider staff present to allow educators willingness to openly share their views.

Student Support and Indigenous staff or community representatives
The Panel welcomes the opportunity to meet with the student support services staff, to gain an insight into the services offered to students. These services may be for students who are struggling academically due to curriculum or English language, especially within the international student cohort, wellbeing and mental health support, or general assistance.

This may also be a good opportunity for the Panel to discuss with staff regarding the engagement of community representatives in relation to the Aboriginal and Torres Strait Islander People required within the curriculum content and general involvement with the Provider.

Campus Site Tour
During the site visit a tour of facilities should be planned, with staff available for discussion. This provides an opportunity for the Panel to visit the library or inspect classrooms, simulation labs, practical labs and learning and teaching support facilities noted in the application.

Student Work
Often at a site visit the Panel will view education materials and deidentified student work examples, which should be made available at the site visit.

Examples of teaching and learning materials, resources and samples of assessment materials and marked student work from units/subjects across the relevant program and differing year levels should be provided, especially where the Provider notes 'capstone' or 'advanced'.

Any materials should be clearly identified for year levels and units and displayed to demonstrate the delivery of the full range of graduate attributes, especially practice education and practical skills.

The Panel would expect to have access to the student learning management system in place to assess student experience.

It can assist with records of proceedings of the following organisational internal committees which may be relevant:

- Faculty/School Teaching and Learning Committee
- Academic Board
- Student Consultative Committee or similar
- Faculty/School/Course Industry Advisory Committee
- Any Program Evaluation that the students may complete
- Any records that reflect follow up action from meetings held regarding the program to see the process for continuous improvement.

Students and Graduates
The Panel will request to speak with current students (across all levels of the program) and graduates from the program. The Panel may wish to convene these meetings separately, so please discuss with the Chair when planning. The Provider should attempt to invite graduates who are currently working in the social work sector rather than those that have moved into further study, however, please discuss with the Chair in the planning phase.

The Panel will meet with the students without any academic staff present and all comments are treated with the strictest confidence. The report format will not identify any individual or sub-group of the student body.

Catering
The Provider is asked for the duration of the site visit to provide catering for the Panel, this would be to cover lunch, morning and afternoon teas. The Chair can advise the Provider of any dietary requirements of the panel.

The Panel quite often will use the lunch period to discuss their observations in private, however it may be used to invite the Course Advisory Committee members to join the Panel for a discussion.

There is no expectation of the Provider to arrange a joint dinner for the Panel and academic staff. It is AASW's preference for this activity not to occur to maintain a level of independence during site visit. As stated above under Section 2.9 and in the Provider Contract, any expenses incurred by the Panel are to be reimbursed by the Provider and arranged via the individual panel members.

Appendix 2: Accreditation Assessment Considerations

Please note this is not an exhaustive listing. However, a guide to assist with planning, please contact the AASW Accreditation team when planning any change to your social work programs.	
Accreditation Descriptor	**Assessment Process Requirement**
New Program Delivery	
k) New Provider & new course (Provisional Review)	Application and 1.5 - day site visit (2 Member Panel if one program, 3 if two programs)
l) Existing Provider & new course (New Course will be Provisional)	Application and 2-day site visit (3 Member panel)
m) Existing Provider existing fully accredited course added to dual degree	Application and desktop review (*scale will depend on submission details*)
Reaccreditation (Existing Providers)	
n) One program	Application and 2-day site visit (3 Member Panel)
o) Two or more programs	Application and 3-day site visit (3 Member Panel)
Program Expansions (Existing Providers)	**Will be assessed as a separate process**
p) Addition of online delivery for existing fully accredited course with no conditions	Application and desktop review
q) Existing accredited online program delivery and adding face-to-face delivery for a fully accredited program no conditions	Application and potential 1- or 2-day site visit (*dependent on submission scale*)
r) Additional new delivery location to existing fully accredited program with no conditions	Application and desktop review and/or potential site visit *(Dependent on how resources are being coordinated, centrally or whole new team)*
s) Significant restructure of existing accredited program *(Change may be noted through the Annual Report & Provider contacted by AASW)*	Application and desktop review (*scale will depend on submission details*)
t) Expansion (new delivery method or location, including third-party delivery addition) is not of provisional status and the program must have no conditions placed on it.	Application and desktop review (*scale will depend on submission details*) *Note: In some instances, a site visit may be required*

For Program Expansions (Discussion to take place with AASW Accreditation Team)
The AASW advises that for accreditation purposes, a formal submission containing further information about the proposed expanded Program or notification of change is required.

For a provider looking to expand a social work offering, the program must have ***no conditions*** placed on it, and the program must have a fully accredited status and not be within provisional status, it should have completed at least the initial cohort.

This is consistent with other ASWEAS review precedents. This submission will be assessed by members of the AASW Accreditation Assessment Panel, with a recommendation to be presented to the AASW Accreditation Council.

Following discussion with the Accreditation team it may not require a full review of the existing program and

curriculum where expansion/change is to occur, rather specific information about the expansion/change is requested. AASW will provide the Panel with the last submitted annual report(s) and last accreditation review report to assist with decision making.

It is required that the submission for expansion includes the following information:

14. Background information about the program – such as the location choice, school design and projected student numbers
15. Rationale for expansion.
16. Projected timing plans for delivery.
17. Plans for staffing social work across the full SW program proposed against the ASWEAS. Will staff be teaching F2F, online, blended. Will Staffing numbers be elevated?
18. Is the curriculum being adapted in any way?
19. Information about teaching and shared modes of teaching across campus locations etc.
20. Planning and support for practice placements, including the potential challenges the Provide may face with the increase in student numbers.
21. Plans for governance and course coordination.
22. How the intensive units and practice skills training will be conducted, especially if moving to or incorporating more online delivery
23. How any formal mechanisms for ongoing review and input of external stakeholders be utilised regarding the expansion? E.g. expansion of membership, new committee(s) formed etc.
24. Ensuring equivalence across the sites regarding moderation, assessment and curriculum
25. Information about teaching and learning facilities, including student support and accessibility for students in new state.
26. Any other relevant information – i.e. proposed new MSW(Q) or BSW

This submission can be presented on Provider Letterhead. Use of a particular AASW report template is not required. An accreditation review fee will be payable for this review. This will be contained in a contract and invoiced to the Provider.

Notification of Change (Existing Provider)	Assessment Process Requirement
Change to program offering	Application and desktop review **Depending on the size and details of the change the convening of an Accreditation Assessment Panel may be required.**
Conditional assessment	Application and desktop review Minimum 2 panel members (Preferably from original panel) Virtual meeting or site visit may be required depending on conditions

The AASW supports continuous quality improvement and realises that over an accreditation period a program is likely to undergo change. Higher Education Providers are requested to notify the Accreditation team either through the Annual Report (each December) or earlier within the year if significant change has occurred. The AASW is to be immediately notified by the Provider if the TEQSA or another regulator proposes or commences an investigation, implementation of conditions or changes the Provider accreditation status.

Other significant changes which should be noted, and which have occurred since your previous accreditation review include (but are not limited to):

- Change to course structure.
- Introduction of new units of study since your last accreditation cycle or replacement of units since the previous course accreditation.
- Change to course objectives, duration, format, structure, or delivery mode.

- Addition of an existing accredited course to a dual degree.
- Additional new location for delivery.
- Change to academic staff delivery team, AOU, governance or organisational structure within the provider.
- Course/unit codes or names.
- If a course is moving to or has moved to teach out status. (If so, please provide a teach out plan)
- Practice Education changes to structure, governance, and arrangements of the Practice Education component of program delivery.

Appendix 3: Program Reaccreditation & New Program Accreditation

Conditions:

- Full accreditation is normally granted for up to five years
- Process applies to domestic programs
- Reaccreditation and new program accreditations may be conducted jointly but separate applications
- MSW (Q)/BSW programs preferably accredited at the same time regardless of level of integration

1. Assess readiness to proceed

1. HEP notifies AASW of intent to seek accreditation or Provider will notify AASW of intent to offer new program.
2. AASW provides information to discuss process requirements, and format
3. HEP submits pre-application intent to submit form
4. AASW confirms HEP is ready to proceed with application.

2. Prepare the application

5. AASW communicates with HEP of approach to accreditation & submission
6. HEP prepares and submits application
7. Contracts arranged by AASW and signed by HEP.

3. Appoint the review panel and Chair

8. AASW selects Accreditation Assessment panel members and Chair
9. HEP nominates third review panel member from nominated pool members
10. Following appointment of Panel and Chair, AASW provide information on assessment process

4. Initial review

12. Assessment Panel & AASW assesses program application compliance, risk and evidence
13. AASW and Panel decide if site visit should proceed
14. Where applicable, AASW provides non-compliance notification to HEP with opportunity to respond
15. Panel & Accred team meet to discuss application initial findings
16. Chair provides initial thoughts on application to HEP, requests further information & focus of site visit.

5. Site visit

18. HEP and Chair identify key stakeholders for meetings
19. Chair collaborates with HEP to prepare site visit agenda schedule
20. Assessment Panel assesses additional information received and with panel identifies format and allocates tasks of site visit
21. Assessment Panel and HEP staff conducts site consultations
22. Assessment Panel presents initial findings to HEP Snr Exec & discipline team.
23. Assessment Panel debriefs AASW post site visit.

6. Final report

25. Accreditation Panel Chair prepares draft final report
26. Chair and panel consider and confirm draft report
27. HEP receives draft report for factual checking purposes
28. HEP may respond
29. Chair finalises report
30. Final report confirmed by chair and panel
31. Chair provides report to AASW Accred team
32. Accred team draft Council papers, provide to Executive Officer, for tabling at Accreditation Council.

Categories of accreditation:

- ☑ Full accreditation
- ☑ Provisional Accreditation
- ☑ Conditional accreditation

7. Ratification of report by Accreditation Council

32. Accreditation Council determines outcome
33. CEO advises AASW Board
34. Accred team advise HEP and Panel of the decision
35. Where a decision is made by the Accreditation Council to revoke accreditation, the Accreditation Council makes a recommendation to the AASW Board
36. The AASW Board verify that due process was correctly followed throughout the Accreditation process by all stakeholders in the decision-making process and approves recommendation.

Appendix 4: Program Variation

Variations:
Substantial change in program elements, balance and sequence:

- Extended/restructured program
- Existing program at an additional campus
- Change in delivery mode
- Change of program title
- Significant changes in content

Conditions:

- An application within current accreditation period
- If additional location separate application on a non-conditional fully accredited program not completed as same time as a reaccreditation of program
- Flexible process would aim to reduce the time and costs involved for all parties
- Remains in cycle with existing program
- May include variations in accreditation period

1. Assess readiness to proceed

1. HEP notifies AASW of change to accredited program
2. AASW provides information on submission requirements
3. HEP submits intent to submit form
4. AASW confirms HEP is ready to proceed with application.

2. Prepare the application

5. Accred team advises HEP of proposed approach to accreditation (including documentation and whether a site visit is required)
6. Accred team to assist HEP with advice
7. HEP prepares and submits application
8. AASW appoints Panel or independent expert assessor(s)
9. Contract signed for all parties.

3. Assessment review

10. Desktop assessment of program compliance risk and outcomes evidence
11. Focus on alignment with ASWEAS objectives and equivalence if new location
12. Assesses quality of evidence (robust, valid, auditable)
13. Independent Assessor or Chair notifies HEP if additional information required
14. Site visit conducted if required
15. Assessment report prepared and submitted to AASW & HEP for factual checking
16. Independent assessor(s) or Chair prepares final report & sends to Accred

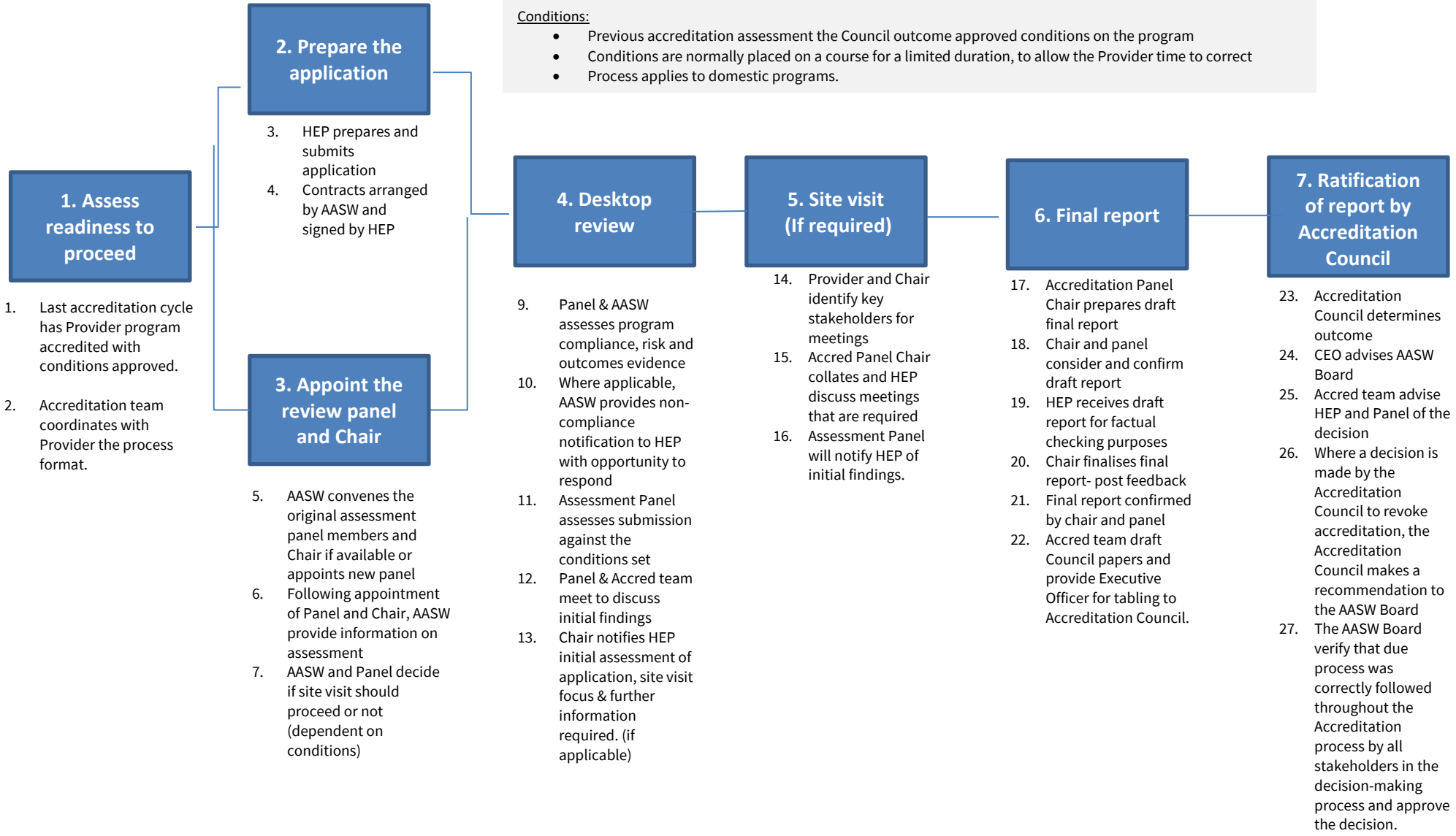
4. Ratification of report by Accreditation Council

17. Accred team prepare Accreditation Council paper and provides with report to Executive Office to table at next Council meeting
18. Accreditation Council determines outcome
19. CEO advises AASW Board of outcome
20. Accred team notify HEP, and independent assessor/Chair of the decision.

Categories of accreditation:

☑ Approved / not approved

Appendix 5: Program Conditional Accreditation



AASW

Australian Association
of Social Workers