

# GUIDANCE: OPERATION OF THE ACCREDITATION REVIEW PANEL . . .

## PLANNING TIMEFRAMES

The standard length of time for an Accreditation Site Visit as part of the Accreditation Review Panel is three days. Additional days for the Accreditation Site Visit may be required if assessment of multiple locations or multiple programs is required (e.g. campuses in different cities, states or countries). The alternative to additional days is an expanded Panel. In such cases, this will need to be negotiated with the program provider and the Accreditation Management Committee when communication first commences to arrange the Accreditation Review Panel. Additional fees will apply in these circumstances.

The Secretariat will commence communication with the Provider a minimum of nine months prior to the anticipated timing of the Accreditation Site Visit as part of the Accreditation Review Panel.



**Guidance: Planning Timeframes for Accreditation Review Panels**

## FORMATION OF THE ACCREDITATION REVIEW PANEL

Each Accreditation Review Panel comprises six members appointed by the Accreditation Management Committee from the Accreditation Standing Panel.

Accreditation Review Panels are composed so that:

- a majority of the membership has had prior experience on an Accreditation Review Panel
- there are generally three academic and three practitioner members, including two members from the relevant jurisdiction
- membership as far as possible reflects the diversity of the Australian population
- two Panel members are selected by the Accreditation Management Committee to serve as the Panel Chair and Deputy Chair (the Panel

Chair will usually have participated in at least three Accreditation Review Panels)

- ideally the Panel will include at least one member that participated in the previous Panel and Accreditation Site Visit for that provider.

The six members of the panel have equal standing (i.e. the Chair and Deputy Chair do not have additional authority in the accreditation recommendation).

Due to the potential of the late withdrawal of members of the Panel due to unforeseen circumstances, the Accreditation Management Committee will instigate protocols regarding the selection of reserve panel members identified at the same time as the appointed panel.

## ROLE AND RESPONSIBILITIES OF ACCREDITATION REVIEW PANEL MEMBERS

Panels work on consensus basis. Irrespective of which body has endorsed a person to join the Accreditation Standing Panel, once that person agrees to participate in an Accreditation Review Panel they are not considered as representative of that endorsing organisation.

The primary responsibilities of Accreditation Review Panel members are to:

- participate in up to two Panel teleconferences during the eight weeks in advance of the Accreditation Site Visit
- review all reports provided by the Secretariat (including the Provider Accreditation Submission, previous Accreditation Review Panel Report (or equivalent), and last Provider Annual Report) in advance of the first teleconference (to be scheduled approximately six to eight weeks prior to the scheduled commencement of the Accreditation Site Visit)
- report back to the Panel Chair on any deficiencies or issues identified in the Provider Accreditation

Submission in advance of the Accreditation Site Visit and in accordance with key reporting dates agreed by the Panel

- participate in a face-to-face meeting to confirm final preparations on the evening before the commencement of the Accreditation Site Visit
- participate in the Accreditation Site Visit, which will normally be a period of three days
- answer queries about the conduct of the Accreditation Review Panel and detail of the Accreditation Review Panel Report, and participate in evaluation activities following the conclusion of the Accreditation Site Visit.

## RESPONSIBILITIES OF THE CHAIR OF THE ACCREDITATION REVIEW PANEL

The additional responsibilities for the Panel Chair are to:

- lead the panel for the duration of the Accreditation Review Panel activity and to manage the task allocation and focus of the members of the Panel
- control the direction and focus of Panel teleconferences and the Accreditation Site Visit
- lead the drafting of correspondence back to the Provider (through the Secretariat) detailing omissions, queries or issues identified, and describing any information that is required in advance of the commencement of the Accreditation Site Visit, to be provided for the Accreditation Review Panel as a Supplementary Report to the Provider Accreditation Submission
- facilitate Panel discussion and agreement as to the recommendation for accreditation and any necessary Action Items, and to lead the preparation of the Accreditation Review Panel Report during the Accreditation Site Visit
- work with the Secretariat to finalise the Accreditation Review Panel Report via email in the five working days following the Accreditation Site Visit, with a focus on consistency and language.

## MANAGING CONFLICTS OF INTEREST

Panel members are required to advise the Secretariat of any potential conflicts of interest associated with a program provider at the time of being asked to join the panel, or immediately upon them becoming aware of the potential conflict of interest.

Those ineligible to participate as members of an Accreditation Review Panel include:

- individuals who received payment from the program provider as a full-time or regular part-time member of staff or consultant in the 24 month period before the conduct of the Accreditation Site Visit
- individuals who may be in negotiation with the Provider regarding future employment of any nature
- recent students or graduates (less than three years) of the program being visited
- people who have members of their immediate families as students or staff at the program provider being visited.

As part of the scheduling of the Accreditation Review Panel, the program provider under review and the relevant Architect Registration Board will be issued with a list of nominated panel members and may object to one or more members based upon a defined potential or actual conflict of interest. Any conflict of interest raised will be reviewed by the Accreditation Management Committee.

## TRAVEL AND REMUNERATION OF PANEL MEMBERS

All flights and accommodation will be booked through and paid for directly by the Secretariat. The Secretariat will reimburse any direct and authorised costs incurred by Panel Members. Travel Administration and Reimbursement Guidelines will be provided to Panel Members by the Secretariat.

All members of an Accreditation Review Panel will be paid the set Sitting Fee. The Chair will be paid at a higher rate. Sitting Fees are benchmarked fees, reviewed annually, and published in the Accreditation Fee Schedule.

## PROTOCOLS OF AN ACCREDITATION REVIEW PANEL VISIT

**Communication protocols.** The only formal communication channel between the program provider and the Accreditation Review Panel is through the Secretariat prior to and after the visit, and the Accreditation Review Panel Chair during the visit.

**Observers.** Participation as a non-voting 'observer' on an Accreditation Review Panel requires pre-approval through the Accreditation Management Committee. Dependent on the reason for the observer status, the Accreditation Management Committee will require approval from the relevant Architect Registration

Board and program provider. Enquiries should be directed through the Secretariat at least three months ahead of the scheduled visit.

## PROVIDER ACCREDITATION SUBMISSION

In advance of the Accreditation Site Visit, the Provider is required to prepare a comprehensive submission addressing the specified reporting items outlined in the Guidance. This Provider Accreditation Submission (the 'Submission') represents a thorough self-assessment prepared by the Provider against the accreditation requirements. The information and evidence contained in the Submission is integral to the assessment process.

The Program Provider must ensure that the Submission is made available to the Panel Members and the Secretariat no later than ten weeks prior to the commencement of the Accreditation Site Visit.

The Submission will be reviewed extensively by the Accreditation Review Panel in advance of the Accreditation Site Visit and represents a critical step towards achieving initial or maintaining accreditation.

A Provider may be requested to prepare a Supplementary Report should there be gaps or issues identified in their Submission.

A detailed description of the requirements, structure and submission format of the Provider Accreditation Submission, inclusive of the Digital Evidence Portfolio, is described in the Guidance.



### **Guidance: Provider Accreditation Submission**

## ACCREDITATION SITE VISIT

The conduct of an Accreditation Site Visit is a critical component of the Accreditation Review Panel activity and requires administrative support from the Provider. The Program Provider is required to provide the staff support, facilities, resources and access for the Accreditation Review Panel as described in the Guidance.



### **Guidance: Administrative support during an Accreditation Review Panel Visit**

The Accreditation Review Panel is supported off-site by the Secretariat for the duration of the visit. Secretariat staff will also be available to support the compilation/editing of the Accreditation Review Panel Report.

A standard agenda is detailed to provide planning guidance for Providers when preparing for the conduct of the Accreditation Site Visit. Providers are required to submit a draft agenda for the Accreditation Site, a minimum of eight weeks in advance of the commencement of the Accreditation Site Visit. The draft agenda will be reviewed by the Secretariat and the Panel Chair, with the aim of having the Agenda agreed and finalised a minimum of two weeks in advance of the commencement of the Accreditation Site Visit.



### **Guidance: Standard Agenda for the Accreditation Site Visit**

Provision of a focussed Student Exhibition is a mandatory part of the Accreditation Site Visit. The exhibition should include a cross-section of work that ranges across grade performance levels from pass to excellent high distinction.

## ACCREDITATION REVIEW PANEL REPORT

The primary purpose of the Accreditation Review Panel Report is to provide a documented assessment of the evidence that the graduates of the program have, on balance, met the required performance criteria of the National Standard of Competency for Architects.

The Accreditation Review Panel Report is the means by which the Panel record their findings. In addition to standard provider and program information and a contextual overview, the key components of the Report are the:

- specification of the official title and code of the assessed qualification
- recommendation or otherwise for accreditation of the program
- recommended period of accreditation, including the end date for the recommended period linked to the Provider's semester or trimester system. Accreditation is specified for the students that graduate from the accredited program up to the end of the specified semester or trimester of the

- accredited period
- action items (if any) detailing a failure to demonstrate that a specific performance criterion has been met
- Program Development Advice.

Where the evidence provided for any Performance Criteria (either in the Digital Portfolio, Student Exhibition or through the discussion sessions during the visit) is insufficient to demonstrate the attainment of the threshold standard, that performance criteria will be the subject of an Action Item.

Action Items should be specific, precise and achievable within the nominated timeframe, and:

- be framed only around any failure to demonstrate threshold level of performance in respect of one or more performance criteria
- include a brief commentary about the deficiency
- clearly explain the linkage to the relevant performance criteria
- where relevant, make reference to the critical Knowledge Domains specified in the relevant performance criteria
- suggest the means by which the Provider could demonstrate rectification of the Action Item (noting that the Provider is ultimately responsible for rectification in whatever manner they deem appropriate).
- detail the anticipated timeframe for the Provider to rectify the Action Item (typically one to three years).

Program Development Advice can be used to comment on factors that have shaped or led to multiple or complex / interrelated Action Items. Any matters described in the Program Development Advice must be relevant to one or more of the Action Items identified.

Provider progress against Action Items will be reviewed and assessed as part of the Provider Annual Reporting process.

Monitoring of progress against Action Items will by default be through review of the Provider Annual Report.

The Accreditation Review Panel Report is an independent report that is submitted by the Chair of the Accreditation Review Panel to the Secretariat, which then forwards it to the relevant architect registration board.

The Report is not approved or commented upon by the Accreditation Management Committee.

Additional information regarding the steps and timeframes in finalising the Accreditation Review Panel Report are described in the Guidance.



**[Guidance: Planning Timeframes for Accreditation Review Panels](#)**