



COUNCIL ON SOCIAL WORK EDUCATION  
Commission on Accreditation

# 2008 EPAS Handbook

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The CSWE Handbook of Social Work Accreditation Policies and Procedures (Handbook) for the 2008 Educational Policy and Accreditation Standards (EPAS) is designed to be user friendly and provide more information about accreditation policies and procedures.

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# 1 Overview

## 1.1 SOCIAL WORK ACCREDITATION

### 1.1.1 Commission on Accreditation

In social work education, the [Commission on Accreditation \(COA\)](#) of the Council on Social Work Education (CSWE) is recognized by the Council on Higher Education Accreditation (CHEA) to accredit baccalaureate and master's degree programs in the United States and its territories. Since its inception in July 1952, CSWE has accredited master's degree programs in social work. In 1974 it began accrediting baccalaureate programs. CSWE does not accredit doctoral programs, associate arts degree programs, or minors in social work.

As explained in its [Bylaws](#) (Article IV, Section 7, 1, a) (link works) CSWE delegates autonomous authority and responsibility for all accreditation activities to the COA. This authority extends to judgments regarding the accredited status of educational programs and includes the formulation and implementation of accreditation standards and procedures. The decisions of the COA are based on the [Educational Policy and Accreditation Standards \(EPAS\)](#), written by the [Commission on Educational Policy](#) (link stays the same) and the COA.

The COA is composed of a minimum of 25 members, including a chair, appointed by the chair of CSWE Board of Directors. In making appointments, the chair considers previous site team experience, years and nature of experience in faculty and administrative positions at the baccalaureate and master's levels, as well as the [CSWE affirmative action guidelines](#). Members are appointed for 3-year terms and may be reappointed to second 3-year terms. Most of the commissioners hold full-time faculty or administrative appointments in accredited programs. The remaining commissioners are public members.

The COA reviews all programs in a fair and impartial manner. Material submitted to the COA relative to a program's review is available to any commissioner, unless a conflict of interest exists. Members of the COA, site visitors, and former commissioners representing the COA treat accreditation materials as confidential in their discussions and decision-making.

Commissioners may not go on site visits or consult with social work programs on matters of accreditation during their terms on the COA. They make commissioner visits to programs that have applied for or are in candidacy.

The COA chair or the chair's designee is solely responsible for communicating the COA's decisions in writing to the program and institutional administrators. The COA may be required to communicate its decision to the regional accrediting agency that accredits the program's

institution. Following the COA's decisions, the program's accreditation status is published in CSWE Focus and posted on the [CSWE Web site](#).

### **1.1.2 2008 EPAS**

CSWE uses the [2008 Educational Policy and Accreditation Standards \(EPAS\)](#) to accredit baccalaureate- and master's-level social work programs. EPAS supports academic excellence by establishing thresholds for professional competence. It permits programs to use traditional and emerging models of curriculum design by balancing requirements that promote comparability across programs with a level of flexibility that encourages programs to differentiate.

The educational policy and the accreditation standards are conceptually linked. The educational policy section describes each curriculum feature, and the derivative accreditation standards specify the requirements used to develop and maintain an accredited baccalaureate or master's social work program.

EPAS describes four features of an integrated curriculum design: (1) program mission and goals; (2) explicit curriculum; (3) implicit curriculum; and (4) assessment.

1. The program's mission and goals address the profession's purpose, are grounded in the profession's values, and are informed by its context.
2. The explicit curriculum is the program's formal educational structure and includes its courses and curriculum design. Core competencies (which define generalist practice or are applied in advanced practice) and field education (as the signature pedagogy of social work education) are the key elements of the explicit curriculum. Competency-based education is an outcome performance approach to curriculum design. Competencies are measurable practice behaviors that are comprised of knowledge, values, and skills. The goal of the outcome approach is to demonstrate the integration and application of the competencies in practice with individuals, families, groups, organizations, and communities.

The explicit curriculum at the BSW level is designed to prepare graduates for generalist practice through mastery of the core competencies. The MSW curriculum prepares graduates for advanced practice through mastery of the core competencies augmented by knowledge and practice behaviors specific to a concentration. The program's mission and goals, as these reflect professional purpose and values and the program's context, are consistent with the program's competencies. The program's competencies are operationalized in the explicit curriculum and in program assessment through measurable practice behaviors.

3. The implicit curriculum refers to the educational environment in which the explicit curriculum is presented. It is composed of the following elements: the program's commitment to diversity; admissions policies and procedures; advisement, retention, and termination policies; student participation in governance; faculty; administrative structure; and resources. The implicit curriculum is as important as the explicit curriculum in shaping the professional character and competence of the program's graduates. Heightened awareness of the importance of the implicit curriculum promotes an educational culture that is congruent with the values of the profession.
4. Assessment is an integral component of competency-based education. To evaluate the extent to which the competencies have been met, a system of assessment is central to this model of education. Data from assessment continuously inform and promote change in the explicit and implicit curriculum to enhance attainment of program competencies. (EP 4.0)

### 1.1.3 Compliance, Concern, and Noncompliance Statements

The COA uses the [Compliance, Concern, and Noncompliance Statements](#) as a guide to consistent and complete review of a program for candidacy status or reaffirmation of accreditation. Statements of compliance, concern, and noncompliance are provided for each accreditation standard (AS) and related educational policy (EP).

Statements in the compliance column address the minimum requirements for completely and clearly meeting an accreditation standard and related educational policy. Statements in the concern column indicate how the narrative addressing an accreditation standard or related educational policy is unclearly and inadequately addressed. Statements in the noncompliance column note how an accreditation standard or related educational policy statement has not been met and has not been addressed.

### 1.1.4 Candidacy Benchmarks

The benchmark model is a systematic, incremental approach to developing a social work program and writing a comprehensive self-study. There are three benchmarks; the first portion of each benchmark consists of specific accreditation standards that the program must be in compliance with, and the second portion consists of standards that must be addressed in draft form.

Program development is guided by four visits from the COA commissioners. During each visit the commissioner makes a recommendation about the program's compliance with standards in the first portion of the benchmark and provides consultation on the standards in the second portion.



Programs progress through several stages of program development: applying for candidacy status, completing candidacy, and receiving initial accreditation status. There are several products, forms, and accreditation fees associated with each stage (a current list of fees is available in the candidacy section of the CSWE Web site).

### **1.1.5 Reaffirmation of Accreditation**

After its initial receipt, a program's accreditation is reaffirmed every 8 years. The five steps in reaffirming a program's accreditation are completing an eligibility application; setting up a site visit; writing and submitting the self-study; the COA letter of instructions to the site visitor(s), conducting a site visit, and responding to its report; and the COA review to determine if the program's accreditation will be reaffirmed

### **1.1.6 COA Decision Making**

At each COA meeting, programs are reviewed in one of four work groups, each of which has six to eight commissioners. Each work group is chaired by a commissioner and staffed by an accreditation specialist or associate.

Prior to a COA meeting, the accreditation specialist or associate assigns two commission readers—commissioners from the work group—to read the program's materials. After reading the program materials, the commission reader makes a recommendation regarding the program's compliance with EPAS and submits the recommendation to the accreditation specialist or associate.

During the COA meeting, all of the commissioners in the work group review the readers' recommendations, formulate a work group recommendation for consideration by the full COA, and draft a letter of instructions to the site visitor or a decision letter. The recommendations from each work group are discussed and ratified by the full COA at its final plenary session. The COA letters are signed by the chair of the COA.

Thirty (30) days after the conclusion of the COA meeting, official COA decision letters and letters of instruction to the site visitor(s), along with the COA decision and rationale for the decision, are mailed. Letters of instruction are addressed to the site visitor(s) with a copy to the chief administrator of the program. Decision letters are addressed to the president or chancellor, and a copy is sent to the chief administrator of the program.

### **1.1.7 The COA Executive Committee**

The COA has one standing committee, the Executive Committee, which serves in place of the COA between commission meetings. The committee is composed of the COA chair, the work

group chairs, and the director (ex officio) of the Office of Social Work Accreditation (OSWA). At COA meetings the Committee's work includes the following.

- Monitor and make recommendations for the revision of accreditation standards.
- Review updates from the director of OSWA.
- Evaluate the processes and procedures of COA meetings.
- Monitor the COA's quality assurance.
- Develop and consider policies for the COA and direct office staff in maintaining a record of instituted policies (including a COA Policy Manual).
- Oversee staff training of site visitors and programs seeking candidacy, initial accreditation, or reaffirmation.
- Oversee and review staff recommendations on waiver and postponement applications.

### 1.1.8 Office of Social Work Accreditation (OSWA)

The staff of OSWA consists of accreditation specialists and associates, a site visit coordinator, an office manager, and a director. Accreditation specialists and associates provide technical assistance to programs in preparing their eligibility application, benchmark documents, and self-studies. They staff the COA work groups and participate in site team, candidacy, and reaffirmation trainings. The site visit coordinator works with the site visitor(s) and the program to arrange each site visit. The office manager/executive secretary supports OSWA staff in preparation for meetings and trainings, prepares minutes from COA meetings, prepares the COA meeting agenda book, and manages the daily operations of OSWA. The director staffs the executive committee, supervises the accreditation staff, coordinates trainings, and consults with individuals who wish to file complaints.

### 1.1.9 Whom to Contact About What

Office of Social Work Accreditation (OSWA)	Contact Regarding:
Jo Ann Regan, MSW, PhD Director, OSWA Telephone: 703.519.2048 E-mail: <a href="mailto:jregan@cswe.org">jregan@cswe.org</a>	<ul style="list-style-type: none"> <li>• Starting a new program</li> <li>• An agenda adjustment</li> <li>• Reconsideration of a COA decision</li> <li>• Consideration of a waiver</li> <li>• Filing a complaint</li> </ul>
Monica Wylie, Accreditation Office Manager/	<ul style="list-style-type: none"> <li>• Assistance in contacting Director or staff</li> <li>• Available accreditation training</li> </ul>

Assistant to the Director, OSWA Telephone: 703.519.2073 E-mail: mwylie@cswe.org	<ul style="list-style-type: none"> <li>• (ReaffirmWorkshop@cswe.org)</li> <li>• Accreditation fees</li> <li>• (FeesAccred@cswe.org)</li> </ul>
Sheila Bell, Site Visit Coordinator Telephone: 703.519.2042 E-mail: sbell@cswe.org	<ul style="list-style-type: none"> <li>• Commissioner / Candidacy Site Visits</li> <li>• Site Visit Procedures</li> <li>• Site Visitor Training</li> </ul>
<p><u>Accreditation Specialists and Associates</u></p> <p>Each program is assigned one of the following staff:</p> <p>Anna R. Holster, MSW, MPhil Telephone: 703.519.2044 E-mail: aholster@cswe.org</p> <p>Mary Deffley Kurfess, MSSW Telephone: 703.519.2046 E-mail: mkurfess@cswe.org</p> <p>Lynne Taylor, MSW, PhD Telephone: 703.519.2047 E-mail: <a href="mailto:ltaylor@cswe.org">ltaylor@cswe.org</a></p>	<ul style="list-style-type: none"> <li>• Guidance and interpretation of 2008 Educational Policy and Accreditation Standards (EPAS)</li> <li>• Candidacy and Initial Accreditation <ul style="list-style-type: none"> <li>○ Planning</li> <li>○ Timetables</li> <li>○ Process</li> <li>○ Guidelines for writing Benchmark documents</li> <li>○ The accreditation cycle</li> </ul> </li> <li>• Guidance regarding the policies and the role of the Commission on Accreditation (COA)</li> <li>• Understanding COA decisions</li> <li>• Program Changes <ul style="list-style-type: none"> <li>○ Addition of new campus</li> <li>○ Addition of online program</li> <li>○ Substantive (as defined in section 1.2.4 of the 2008 EPAS Handbook)</li> </ul> </li> <li>• Personnel Changes <ul style="list-style-type: none"> <li>○ Program Director</li> <li>○ Field Director</li> <li>○ Dean</li> <li>○ Chair</li> <li>○ Institution's President or Chancellor</li> </ul> </li> </ul>

### 1.1.10 Mailing Instructions for Programs

It is important that the materials you mail to OSWA are delivered to the correct staff member.

Please find the item you are mailing on the list below and make sure the envelope or package is addressed to the attention of the corresponding staff member. Our address is:

Attention of: \_\_\_\_\_

Council on Social Work Education

1701 Duke Street, Suite 200  
Alexandria, VA 22314

<b><i>Programs Send the Following Materials:</i></b>	<b><i>To the Attention of:</i></b>
<p>Candidacy Review</p> <ul style="list-style-type: none"> <li>• Benchmark I</li> <li>• Program Response to Benchmark I Review Brief</li> <li>• Benchmark II</li> <li>• Program Response to Benchmark II Review Brief</li> <li>• Benchmark III</li> <li>• Program Response to Benchmark III Review Brief</li> </ul> <p>Reaffirmation Review</p> <ul style="list-style-type: none"> <li>• Reaffirmation Eligibility Application</li> <li>• Self-Study</li> <li>• Program Response to the Site Visit Report</li> <li>• Postponement Request</li> </ul> <p>Program or Individual Waiver Request Progress Report</p> <ul style="list-style-type: none"> <li>• Progress Report and Any Supporting Materials</li> </ul> <p>Restoration Report</p> <ul style="list-style-type: none"> <li>• Restoration Report</li> </ul> <p>Notification of Program Changes Modified Site Visit</p> <ul style="list-style-type: none"> <li>• Clarifying Materials</li> </ul> <p>Reconsideration Hearing</p> <ul style="list-style-type: none"> <li>• Clarifying Materials</li> </ul>	<p>Your Accreditation Specialist or Associate: Anna R. Holster Mary Kurfess Lynne Taylor Joyce White</p>
Site Visit Planning Form	Sheila Bell, Site Visit Coordinator
<p>Other correspondence</p> <ul style="list-style-type: none"> <li>• Complaint Correspondence</li> <li>• Request for an Agenda Adjustment</li> <li>• Letter Requesting a Reconsideration Hearing</li> <li>• Letter of Institutional Intent and Candidacy Eligibility Application</li> <li>• Alternative Reaffirmation Proposal</li> </ul>	Jo Ann Regan, OSWA Director

Programs Send the Following Fees (With a Copy of the Invoice):	To the Attention of:
Accreditation Fees <ul style="list-style-type: none"> <li>• Letter of Intent and Candidacy</li> </ul> Eligibility Fee <ul style="list-style-type: none"> <li>• Commissioner Visit I</li> <li>• Commissioner Visit II</li> <li>• Commissioner Visit III</li> <li>• Initial Accreditation Eligibility</li> <li>• Initial Accreditation</li> <li>• Reaffirmation Eligibility</li> <li>• Reaffirmation</li> </ul>	Finance and Administration

## 1.2 COA POLICIES AND PROCEDURES

### 1.2.1 Complaints Regarding Program Compliance

Formal complaints to the COA must pertain to matters related to program compliance with accreditation standards and educational policy. Persons, groups, or organizations related to the program are considered recognized complainants and may file a complaint.

The COA is not authorized to adjudicate, arbitrate, or mediate individual faculty or student grievances against a program. Complainants must use all appropriate institutional and professional channels of appeal before filing a formal complaint with CSWE. The institutions in which programs are housed assume responsibility for implementing and enforcing their own policies in these areas. When alleged violations cannot be resolved within the institution, appellate procedures within state systems of higher education or state judicial courts should be used to assess and enforce institutional compliance with policies.

#### Instructions to File a Complaint

Before filing a formal complaint, a complainant may seek informal consultation from the director of OSWA. After reviewing the complaint procedures and consulting with the director of OSWA, the complainant decides whether to file a formal complaint.

Formal complaints must be submitted in writing to the director of OSWA with evidence that the complaint meets the following criteria:

- Filing is by a recognized complainant.

- The complaint is accompanied by documentation showing that the complainant has exhausted all appropriate institutional and professional channels for resolution.
- The complaint is related to a possible violation of one or more [accreditation standards or educational policies](#).
- The documentation submitted in the formal complaint must be connected to a possible violation of one or more accreditation standards or educational policies.
- The complainant must provide evidence that the chief administrator of the program named in the complaint was given a copy of the complaint, including all materials submitted to the COA.

### **Evaluation to Determine if Criteria Have Been Met**

On receipt of the formal complaint, the director of OSWA determines whether the criteria for formal complaints have been fully met and whether the complaint falls within the COA's authority.

If the director determines the complaint meets the criteria for a formal complaint, the complainant and the program concerned are notified within 10 business days. The program has 30 calendar days from receipt of the complaint to respond. When the program response arrives, it is shared with the complainant, who is given 10 business days to respond. The director of OSWA presents the formal complaint, the program's response, and the complainant's response to the COA during its next regularly scheduled meeting and recommends a decision.

The COA may decide to take one of the following actions.

- Find the program in compliance with the accreditation standard or educational policy and dismiss the complaint. If the COA dismisses the complaint, the chair notifies the complainant and the program, stipulating the reasons for the COA's action.
- Find the program out of compliance with one or more accreditation standards or educational policies and place it on conditional accreditation. The program is placed on conditional accredited status if the COA believes that noncompliance issue(s) can be resolved by the program within 1 year. Conditional status is an adverse decision, and programs may request reconsideration. If the program accepts the COA's decision, it submits a restoration report.
- Find the program out of compliance with one or more accreditation standards or educational policies and initiate withdrawal of accredited status. The COA initiates withdrawal of accredited status if it believes that the program cannot take corrective action within 1 year. The program is required to work with its accreditation specialist or

associate to make arrangements for the graduation or transfer of its students and determine the date the accreditation will be withdrawn. The decision to initiate withdrawal of accredited status is an adverse one, and programs may request reconsideration.

- Defer action. If the COA finds evidence that the program has made reasonable progress in rectifying the situation, it can defer the decision to a COA meeting within the next year.
- Appoint an investigating committee. If the COA needs more information to make a decision, it will appoint an investigating committee to conduct a confidential investigation with full knowledge and consultation of those concerned. The program pays expenses relating to the investigative visit. The investigating committee reports its findings to the full COA at its next regularly scheduled meeting, and the COA decides if the program is in compliance with the accreditation standards or educational policies in question.

If the OSWA director determines that the complaint does not meet the criteria for formal complaints or is not within the COA's jurisdiction, the complainant is notified and given specific reasons for the refusal within 10 business days. The director of OSWA also informs the COA of the complaint and determination at the next COA meeting. The complainant may appeal the OSWA director's decision at the following COA meeting.

### **1.2.2 Postponement of Reaffirmation Review**

The COA recognizes the need of some programs, under special circumstances, to postpone their reaffirmation review. Examples of these special circumstances include

- recent administrative changes in the program;
- institutional restructuring;
- current or anticipated addition of new faculty or loss of faculty key to developing the self-study;
- physical relocation of the program;
- unusual conditions requiring faculty attention;
- natural or human-made disasters;
- health problems of key faculty members; or

- the program's desire to synchronize the review dates of its baccalaureate and master's social work programs.

The COA's Executive Committee oversees and reviews staff recommendations on waiver and postponement applications. A staff member reviews and considers requests for postponements throughout the year.

### **Instructions**

A written request, supported by documentation, is sent to the staff member explaining why the program is seeking a postponement of its accreditation review.

### **Postponement Policies**

The following policies guide the decision making of the staff and Executive Committee.

- A postponement can be granted to a single program for 1 year.
- Postponements are granted only once during each reaffirmation period. After postponement of a review, the program's reaccreditation date is calculated from the year in which the previous accreditation expired.
- The program remains accredited during the period of postponement.
- An accredited program that is scheduled for its reaffirmation review for the first time after receiving initial accreditation is not eligible for postponement of its review.
- Programs with both accredited baccalaureate and master's programs may request that the reaffirmation reviews of their baccalaureate and master's programs take place at the same time. A postponement may be granted for up to 2 years to establish a single review date.
- A site visit for initial accreditation of one degree-level program cannot take place at the same time as the site visit for the reaffirmation of another degree-level program.

### **Postponement Actions**

Prior to deliberating on a request, the program's accreditation history is reviewed, with special attention to recent COA actions and the program's response to any concerns. The program is notified in writing of the COA decision. One of four decisions may be reached:

1. Approve a request and establish, for the current review only, a new schedule for submission of materials for accreditation review.
2. Defer a decision pending the receipt of additional information.



3. Recommend that the COA order a modified site visit to make a fully informed decision regarding postponement. The program pays the cost of the visit.
4. Deny a request, providing in writing the reasons for denial and avenues of redress if the program disagrees.

### **Postponement Appeals Procedures**

Programs dissatisfied with the decision may appeal, in writing, to the chair of the COA and request a review by the COA as a whole at its next scheduled meeting. The COA decision on the appeal is final, and there is no further appeal.

### **1.2.3 Agenda Adjustments**

The director of OSWA may approve an adjustment of a program's review date for one meeting only.

### **1.2.4 Program Changes**

Although ongoing change is necessary to improve the educational quality of a program, initial accreditation or reaffirmation of accreditation covers only the components that existed and were reviewed at the time of the COA review. Changes may take place within the program prior to its next scheduled accreditation review. Some of these changes may affect the program's compliance with [EPAS](#) and need to be reported. Some of these changes do not affect the [program's compliance with EPAS](#) and do not need to be reported.

#### **Changes that Affect Compliance with EPAS**

A waiver request is required before the program makes a change that would place it out of compliance with EPAS. Any program proposing a substantive change that affects its compliance with EPAS must obtain the COA's approval prior to implementing the change. The program submits a waiver request as described in the next section.

#### **Changes that Potentially Affect Compliance with EPAS**

Written notification is required when programs make changes that potentially affect compliance with EPAS, such as adding a dual-degree program; offering an off-campus program; initiating a new part-time program; starting an entire distance education or online program; revising the program's mission and goals in a way that critically restructures the curriculum; reduction in resources; the closing of a program or off-campus site; faculty workload policy changes; and institutional shifts in admission policies and procedures. Written notification should be addressed to the program's accreditation specialist and include a detailed description of the change and a standard-by-standard discussion of how compliance with EPAS is affected. The

program's accreditation specialist or associate reviews the notification and may, if necessary, seek clarifying information.

### **Changes that Do Not Affect Compliance with EPAS**

Written notification is not required when programs make changes that do not affect their compliance with EPAS, such as revision of the program's mission and goals or curriculum (syllabi, electives, course sequencing, prerequisites, definition of generalist practice, liberal arts requirements, field courses, concentrations, assessment plan, addition of off-campus courses); changes in qualified faculty or the composition of faculty, students, or both; and changes in the program's policies and procedures relative to admission, assessment, transfer, advisement, grievance, or termination.

### **Changes that Affect Communication with CSWE**

Change in qualified program director does not affect the program's compliance with EPAS, but still needs to be reported to CSWE so that communication about accreditation and other vital information can be delivered to the correct person. The program should notify its accreditation specialist or associate of such changes by sending a letter on institutional letterhead along with a copy of the new program director's most recent CV.

### **Conclusion**

It is the program's responsibility to notify the COA of changes to ensure compliance with EPAS. Failure to report such changes places the program's accredited status in jeopardy. If a program questions whether notification of a program change is required by the COA, it should discuss the change with the accreditation specialist or associate assigned to the program.

## **1.2.5 Waivers to Accreditation Standards**

Application letters must be in narrative form and provide full documentation of the program's justification for its waiver request on behalf of the program or on behalf of an individual faculty member. Applications must specify the [accreditation standard\(s\)](#) for which a waiver is sought.

Applications for waivers must be submitted by the chief administrator of a social work education program that is fully accredited. Applications must be submitted prior to the implementation of the proposed waiver. If the waiver is being requested on behalf of the chief administrator, the request must come from the administrator to whom the chief administrator answers.

### **Accreditation Standards B3.4.4(a) and M3.4.4(a)**

A waiver may be granted to an individual or to an institution. In either case, the institution has identified an individual to administer its accredited social work program who does not have the credentials specified in Accreditation Standards B3.4.4(a) or M3.4.4(a).

***Individual Waiver***

This waiver is granted to an individual appointed as chief administrator of an accredited social work program whose credentials are considered the equivalent of those required in the standard. Because the waiver is granted on the basis of equivalency, it remains in effect if the individual becomes the chief administrator of another accredited social work program.

To request an individual waiver the institution is asked to provide a curriculum vitae and information regarding the equivalent leadership qualities of the individual as demonstrated through

- teaching social work courses;
- conducting scholarship and research in social work;
- developing curriculum social work;
- administrative experience in social work;
- presenting at professional social work meetings; and
- other academic and professional activities in the field.

***Institutional Waiver***

This waiver is granted to the institution for a particular individual whose credentials are not considered equivalent to the requirements specified in the standards, but whom the institution believes best meets its current administrative needs. Because the institutional waiver is granted to the institution to meet institutional needs, the waiver expires when the individual for whom it was granted leaves the position.

To request an institutional waiver the institution is asked to provide information regarding its rationale for selecting this individual as chief administrator of the social work program.

**Accreditation Standards 3.3.1 and 3.4.5(b)**

The COA has established guidelines to assist programs in preparing waiver applications for accreditation standards regarding faculty or field program director credentials. The guidelines apply only to accredited programs. When a waiver is approved for an individual faculty member, approval continues to be in effect if the faculty member moves to another accredited social work program.

***Request for a Waiver to the Requirement for a Master's Degree in Social Work.***

The program's chief administrator seeks a waiver for a faculty member by presenting information that demonstrates the individual's competence to teach in the specified area of social work practice or to coordinate field education. The application must include a curriculum

vitae of the faculty member, specify the social work practice area for which the waiver is sought, and provide information on the individual's credentials in the following areas:

1. Demonstration of knowledge of the professional literature, theories, practice innovations, and emerging knowledge in the area of practice for which a waiver is sought.
2. Documentation of at least 2 full-time years of practice experience in a social work setting under professional social work supervision.
3. Documentation should include the dates of such experience, frequency of social work supervision, clientele served, intervention techniques employed, and the ways in which this experience supports the request for waiver.
4. If a candidate holds a clinical doctorate in social work, discussion of course and practicum requirements that address the area of practice for which a waiver is sought.
5. Evidence of active membership in and contributions to professional organizations and attendance and active involvement at professional social work meetings that relate to the practice content area for which the waiver is sought.
6. Publication in juried social work and related journals or through monographs and edited works in the area of practice content for which the exception is sought.

***Request for a Waiver to the Requirement for a Minimum of 2 Years of Post-baccalaureate or Postmaster's Degree Practice Experience.***

The minimum requirement of 2 years post-baccalaureate or postmaster's social work practice experience is calculated in relation to the total number of hours of full-time and equivalent professional practice experience. Social work practice experience is defined as providing social work services to individuals, families, groups, organizations, or communities.

Please provide information on the following items:

1. Documentation of hours employed under professional social work auspices, the nature of the work performed, and documentation that work was done under the supervision of professional social work supervisors.
2. Documentation of hours of volunteer practice experience in a social service agency.
3. Documentation of hours of paid experience as a consultant in the areas of the individual's practice expertise.
4. If licensed, documentation of hours required for licensure or other certification.

5. Academy of Certified Social Workers certification.
6. Supervision by professional social workers in a social service agency.
7. Agency-based field instruction of social work students in their practica.
8. Demonstration of practice-based, qualitative, or quantitative research.
9. Empirical applied field research in teaching practice (not solely a literature review).
10. Practice-related research or scholarly publication in social work journals.

### **1.2.6 Appeals of COA Decisions**

The following COA decisions are adverse actions and are eligible for appeal.

- Deny Candidacy Status
- Remove from Candidacy Status
- Deny Initial Accreditation
- Place the program on Conditional Accredited Status
- Initiate withdrawal of Accredited Status

If a program receives an adverse decision, the COA provides two appeals procedures: reconsideration and panel review. Reconsideration must be completed before moving to the panel review.

#### **Reconsideration**

Programs may challenge an adverse decision if, in the opinion of the program, the COA's decision is arbitrary, capricious, or violates procedures. The program's written request to the director of OSWA must be made within 30 days following its receipt of notice of the adverse action (all adverse decision letters are certified).

A request for reconsideration must relate to the conditions that existed in the program at the time of the COA's adverse action and state specific reasons why the reconsideration should be granted.

When reconsideration is requested, the director of OSWA sets the date and time for the hearing and appoints a reconsideration committee of three commissioners. The program may send, at its own expense, the program's chief administrator, program faculty members, and

representatives from the institution. Legal counsel, students, or other interested parties are not permitted to attend.

The reconsideration committee reviews the documentation on which the COA based its decision and any written or verbal clarifying information the program provides. No new documentation is considered. The reconsideration committee makes one of three decisions:

1. **Uphold the original COA decision.** If the reconsideration committee believes that the original COA decision was correct, it decides to uphold the original decision. The program will then respond as originally required in the original COA decision letter.
2. **Revise the decision.** If the committee believes that the COA decision was in error, the committee may revise the COA decision and issue a letter with the revised decision and instructions to the program regarding the next step it should take.
3. **Uphold the original decision and revise the decision.** The committee may uphold the COA decision based on the original program documentation and revise the decision as a result of the clarifying information provided by the program at the reconsideration hearing.

The COA's decision is reported in writing to the institution's chief executive officer and the chief administrator of the social work program. If the program accepts the decision of the committee, it is expected to follow the instructions contained in the letter informing the program of the adverse decision. If the program does not accept the decision of the reconsideration committee, it may request a panel review. An accredited program retains its accredited status until all appeals have been exhausted.

### **Panel Review**

The final appeal for the program is a panel review, which is an independent consideration of the COA's decision. The program's written request for a panel review must be made within 30 days of receipt of the COA's certified letter upholding an adverse decision. If the program fails to respond within 30 days, it waives the right to further review. The program requests a panel review if, after the reconsideration findings are presented, it believes the COA's action was arbitrary, capricious, or otherwise not in accordance with the COA accreditation standards or procedures; or the COA action was not supported by substantial evidence in the record.

The panel will review evidence in the record, including documentation and witness statements directly related to the COA's adverse action and the reconsideration hearing. The record includes the program's self-study or candidacy documentation, any additional material submitted to the site team or commissioner, the report of the commissioner or site team chair, the program's response to the commissioner or site team report, the COA decision letter detailing the adverse decision; and materials from the reconsideration hearing.

Within 30 calendar days of receipt of the panel review request, the chair of the CSWE Board of Directors appoints a chair and two or more review panel members from the list of active certified site visitors. Members of the review panel may not include current members of the COA or former commissioners serving at the time of the COA's adverse action. The chair of the review panel specifies the time and place of the review. All costs related to the panel review are paid by the program. These include any legal expenses of the COA, travel and accommodations for the review panel and participants in the proceedings, reproduction of materials presented at the hearing, and other related expenses.

The COA submits the record to the review panel and the program's written request, including additional evidence challenging the COA's procedures or its facts. The chair of the review panel presides at the review hearing and rules on procedure, conducting the hearing in a manner that allows the program a fair opportunity to present its case and explain its position without resort to formal rules of evidence. The program may be represented by counsel during the hearing, and counsel may question any witnesses who speak at the hearing. Review panel members may question any witnesses or parties to the appeal.

After considering the record, the review panel may make either of the following determinations:

1. uphold the COA action, or
2. remand the decision back to the COA for further consideration.

The chair of the review panel reports the panel's action in writing to the institution's chief executive officer, the chief administrator of the social work program, the chair of COA, the president of CSWE, and the director of OSWA.

### **1.2.7 Information Sharing and Release of COA Decision Letter**

The COA is required by the [Council for Higher Education Accreditation \(CHEA\)](#) to release the [COA decisions](#) and [programs' accreditation status](#) to the public. The COA will use the text of its decision letters for research and evaluation purposes in aggregate. The COA's policy is not to release the full text of letters. If an institution or program releases parts of the site visit report or the COA letter that distorts the decision, the COA reserves the right to release the full text of such reports or letters to correct the perceived distortion.

### **1.2.8 Accreditation Fees and Related Policies**

To maintain candidacy or accredited status, programs are expected to be members of CSWE in good standing. Good standing means that programs have paid all [current membership dues](#) and [candidacy](#) and [reaffirmation](#) accreditation fees. Programs that fail to maintain good standing are subject to having their accreditation status suspended. Direct any questions regarding program

membership to the Member Services Coordinator at [membership@cswe.org](mailto:membership@cswe.org) or 703.519.2067. Direct any questions regarding accreditation fees to [feesaccred@cswe.org](mailto:feesaccred@cswe.org).

### **1.2.9 Program Closure and Withdrawal of Accredited Status**

If a program wishes to withdraw from accredited status, the program's chief administrator sends a formal letter to its accreditation specialist or associate notifying the COA of its intention to close the program. The program is expected to make arrangements for the graduation or transfer of its students and should work closely with its accreditation specialist during this planning process, at the conclusion of which the date of the program's accreditation will be decided. A program is expected to remain in full compliance with all standards during the withdrawal process.

### **1.2.10 Dissolution of Collaborative Programs**

A collaborative program is a baccalaureate or master's social work education program operated by two or more colleges or universities. The collaborative design recognizes the collective experience of two academic units and creates a distinctive organizational structure. Some collaborative programs have one chief administrator who is accountable to a bi-institutional board that functions as a dean or academic vice president would in a traditional program, such as making budgetary or personnel decisions regarding the hiring of the program director. Others have one chief administrator who is accountable to appropriate academic administrators at each campus. Another model may designate two persons, one from each institution, to serve alternating terms as chief administrator. The collaborative program may be located on one campus, both campuses, or separate from both institutions.

Typically, collaborative programs are formed to pool resources (faculty, library, information technology, expenses for operating costs), enhance opportunities for interdisciplinary collaboration, and to increase student and faculty campus-based resources (bookstores, cafeterias, and fitness centers). Collaborative programs are generally found to enhance programs by enabling them to serve a broader pool of students. Collaborative programs offer new opportunities while also creating new demands for increased coordination and teamwork among faculty and administrators.

Accreditation is awarded to the collaborative program as a whole, not to the member institutions. If one or more of the member institutions of a collaborative program wish to separate or withdraw accredited status, the chief administrator of the collaborative program notifies the program's accreditation specialist or associate (with a copy to the president of each member institution) of its intention in writing. This action results in the dissolution of the collaborative program and ends its accreditation status. The collaborative program's chief administrator is expected to make arrangements for the graduation or transfer of its students



and should work closely with its accreditation specialist or associate during this planning process, at its conclusion the date the program's accreditation will be decided. A program is expected to remain in full compliance with all standards during the withdrawal process.

If either member institution wants to have its own accredited program, the chief administrator of the collaborative program should consult with its accreditation specialist or associate regarding the - process.

### **1.2.11 Failure to Submit Materials by the Due Date**

If a program fails to submit accreditation materials by the due date, the COA may initiate withdrawal of accreditation.

### **1.2.12 Programs Found Out of Compliance Between Reviews**

When there is a possibility that a program may be out of compliance with one or more educational policy and accreditation standard, the matter is referred to the Executive Committee for substantiation and possible action (e.g., order a modified site visit, place on conditional accredited status, or initiate withdrawal of accredited status).

### **1.2.13 Use of Consultants**

CSWE does not recommend the use of external paid consultants. External consultants hired by programs to assist in their reaffirmation of accreditation or progression through candidacy status are not employees or agents of CSWE. CSWE is in no way responsible for the services provided by such consultants, and in no way does CSWE guarantee, recommend, or endorse the services of any consultant.

## 2 Reaffirmation

### 2.1 REAFFIRMATION TIMETABLES AND POLICIES

At the end of a program's 4 years of initial accreditation the Commission on Accreditation (COA) reviews the program for reaffirmation of accreditation. If the program is found in compliance with all Educational Policy and Accreditation Standards (EPAS), its accreditation will be reaffirmed for 8 years. The COA will continue to review the program for reaffirmation of accreditation every 8 years.

#### 2.1.1 Failure to Submit Reaffirmation Materials by the Due Date

If a program fails to apply for reaffirmation or postponement, or fails to submit a complete self-study by the due date for the submission of reaffirmation materials, the COA may initiate withdrawal of accreditation.

#### 2.1.2 Timetable for Reaffirmation

There are five steps in reaffirming a program's accreditation: 1-) the Reaffirmation Eligibility Application; 2-) Site Visit Planning and Hosting; 3-) the Self-Study; 4-) the COA Letter of Instructions to the Site Visitor(s), the Site Visit Report, and the Program's Response to the Site Visit Report; and 5-) the COA Review for Reaffirmation Determination. These five steps are reflected in the Timetable for Reaffirmation, which provides a detailed list of due dates, accreditation fees, materials, and activities, and the number and kind of copies needed and who should receive them.

There are three versions of the Timetable for Reaffirmation with dates that correspond to the three COA Meetings held each year:

- [February Timetable for Reaffirmation](#)
- [June Timetable for Reaffirmation](#)
- [October Timetable for Reaffirmation](#)

To use the Timetable for Reaffirmation, determine the program's reaffirmation date; select the corresponding February, June, or October timetable; go to the last row of the timetable; and insert the year in the middle column next to "COA Review for Reaffirmation Determination." That is when the COA will decide whether the program is in compliance with EPAS and if the program's accreditation should be reaffirmed. From there, work up to the top and fill in the year

for each step in the reaffirmation process. Contact your accreditation specialist or associate if you have any questions.

## **2.2 REAFFIRMATION ELIGIBILITY**

The reaffirmation of accreditation process begins by evaluating the institution's ability to maintain an accredited social work program and meet the COA's Reaffirmation Eligibility Standards. The program's chief administrator completes the [Baccalaureate Reaffirmation Eligibility Application form](#) and/or [Master's Reaffirmation Eligibility Application form](#) to demonstrate compliance with the Reaffirmation Eligibility Standards. This information is reviewed and approved by the program's accreditation specialist or associate, who will decide to approve the eligibility application or return it to the program for additional information.

### **2.2.1 Reaffirmation Eligibility Application**

Baccalaureate programs address six Reaffirmation Eligibility Standards, and master's programs address seven. Reaffirmation Eligibility Standards 1 through 5, and the required supporting documentation, are the same for the baccalaureate and master's programs. Standards 6 and 7 apply only to master's programs.

The Baccalaureate Reaffirmation Eligibility Application and Master's Reaffirmation Eligibility Application forms list each eligibility standard, ask a series of questions, and/or require the submission of materials to determine compliance.

Information about when the Reaffirmation Eligibility Application is due and where it should be sent is on the Timetable for Reaffirmation.

### **2.2.2 Baccalaureate Reaffirmation Eligibility Standards**

#### **Eligibility Standard 1**

The chief executive officer of the institution authorizes the COA's review of the social work program.

Submit the [Authorization of Program Review form](#) completed and signed by the chief executive officer of the institution.

Programs have their president or chancellor complete and sign the [Authorization of Program Review](#) form, which documents that the institution has given the COA permission to come to the campus and conduct a site visit.

**Eligibility Standard 2**

The institution's accreditation has been awarded by a regional accrediting agency recognized by the Council for Higher Education Accreditation. The institution is authorized to award the baccalaureate degree in social work.

Answer questions 4–6 on the [Baccalaureate Reaffirmation Eligibility Application](#).

**Eligibility Standard 3**

The institution has a written affirmative action policy, plan, or program and procedures and a stated policy against discrimination based on race, color, religion, creed, gender, ethnic or national origin, disability, or age. The institution complies with requirements of the Americans with Disabilities Act.

Answer questions 7–8 on the [Baccalaureate Reaffirmation Eligibility Application](#).

Submit the portions of your institution's affirmative action plan that articulate its stated policy against discrimination based on race, color, religion, creed, gender, ethnic or national origin, disability, or age. Programs may submit a copy of relevant materials if the original is online or in a catalog. If online, please identify the URL.

Some private universities do not have affirmative action plans. In that instance programs need to obtain a letter from the provost that states that the university's affirmative action procedure is to delegate affirmative action responsibility to the program. The program would then submit its own affirmative action plan.

Submit the institution's ADA compliance plan or other proof of the institution's compliance with the ADA.

This information may be found in different places, depending on the structure of the institution, including the offices of disabilities services and human resources; from the office of the affirmative action compliance officer; and the office of the president, provost, academic vice president, or university counsel. Programs may submit a hard copy of relevant pages if materials are online only or in a large catalog. If online, please identify the URL.

**Eligibility Standard 4**

The institution has appointed a social work program chief administrator who has a full-time appointment in the institution, and the person's principal assignment is to the social work program. The program chief administrator has a master's degree in social work from a CSWE-accredited program with a doctoral degree preferred or a baccalaureate degree in social work from a CSWE-accredited program and a doctoral degree, preferably in social work.

Answer questions 9–12 on the [Baccalaureate Reaffirmation Eligibility Application](#).

Submit the program chief administrator's curriculum vitae.

### **Eligibility Standard 5**

The institution identifies and describes the social work program in its catalog or similar publication. Program purposes and requirements are specified. The same document specifies the educational level(s) of the program(s) for which CSWE accreditation has been received or is being sought.

Answer questions 13–21 on the [Baccalaureate Reaffirmation Eligibility Application](#).

Submit the catalog (or similar publication documenting that the program is described in the catalog) to ensure that the program's purposes and requirements are described, and that the institution specifies the educational level of the program for which CSWE accreditation has been received. If the catalog is on the Web page, a hardcopy of this information and the URL should be provided.

### **Eligibility Standard 6**

The institutional transcript for students who complete the accredited social work program confirms that a major in social work was completed and a baccalaureate degree awarded.

Answer questions 22–23 on the [Baccalaureate Reaffirmation Eligibility Application](#).

Attach a sample transcript of a student who has graduated from the program. The transcript must indicate that the major was social work and the name of the degree awarded. Remove identifying information.

## **2.2.3 Master's Reaffirmation Eligibility Standards**

### **Eligibility Standard 1**

The chief executive officer of the institution authorizes the COA's review of the social work program.

Submit the Authorization of Program Review form completed and signed by the chief executive officer of the institution.

Programs have their president or chancellor complete the Authorization of Program Review form, which documents that the institution has given the COA permission to come to the campus and conduct a site visit.

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**Eligibility Standard 2**

The institution's accreditation has been awarded by a regional accrediting agency recognized by the Council for Higher Education Accreditation. The institution is authorized to award the master's degree in social work.

Answer questions 4–6 on the [Master's Reaffirmation Eligibility Application](#).

**Eligibility Standard 3**

The institution has a written affirmative action policy, plan, or program and procedures, and a stated policy against discrimination based on race, color, religion, creed, gender, ethnic or national origin, disability, or age. The institution complies with requirements of the Americans with Disabilities Act.

Answer questions 7–8 on the [Master's Reaffirmation Eligibility Application](#).

Submit the portions of your institution's affirmative action plan that articulate its stated policy against discrimination based on race, color, religion, creed, gender, ethnic or national origin, disability, or age. Programs may submit a hard copy of relevant materials if the original is online or in a catalog. If online, please identify the URL.

Some private universities do not have affirmative action plans. In that instance programs need to obtain a letter from the provost that states that the university's affirmative action procedure is to delegate affirmative action responsibility to the program. The program would then submit its own affirmative action plan.

Submit the institution's ADA compliance plan or other proof of the institution's compliance with the ADA.

This information may be found in different places, depending on the structure of the institution, including the offices of disabilities services and human resources; the office of the affirmative action compliance officer; and office of the president, provost, academic vice president, or university counsel. Programs may submit a copy of relevant materials if the original is online or in a catalog. If online, please identify the URL.

**Eligibility Standard 4**

The institution has appointed a social work program chief administrator who has a full-time appointment in the institution, and the person's principal assignment is to the social work program. The program chief administrator has a master's degree in social work from a CSWE-accredited program. In addition, it is preferred that the MSW program director have a doctoral degree, preferably in social work.

Answer questions 9–12 on the [Master's Reaffirmation Eligibility Application](#).

Submit the program chief administrator's curriculum vitae.

### **Eligibility Standard 5**

The institution identifies and describes the social work program in its catalog or similar publication. Program purposes and requirements are specified. The same document specifies the educational level(s) of the program(s) for which CSWE accreditation has been received or is being sought.

Answer questions 13–21 on the [Master's Reaffirmation Eligibility Application](#).

Submit the catalog (or similar publication that documents that the program is described in the catalog) to assure that the program's purposes and requirements are described, and that the institution specifies the educational level of the program for which CSWE accreditation has been received. If the catalog is on the Web page, a hardcopy of this information and the URL should be provided.

### **Eligibility Standard 6**

The educational institution provides its organizational chart to document the position of the social work program in the governance structure of the institution and to demonstrate its position relative to other professional education programs offered by the institution.

Answer question 22 on the [Master's Reaffirmation Eligibility Application](#).

Submit an organizational chart that documents the position of the social work program in the governance structure of the institution and its position relative to other professional education programs at the institution.

### **Eligibility Standard 7**

The institution must ensure that the master's program in social work can be completed in 2 calendar years of full-time study or a maximum of 4 calendar years of part-time study. Answer question 23–29 on the [Master's Reaffirmation Eligibility Application](#).

The catalog or similar publication submitted for Eligibility Standard 5 must contain, in the description of the program, explicit statements that say (1) that the full-time program can be completed in 2 years, and (2) that the part-time program can be completed in a maximum of 4 years.

## **2.2.4 Permission to Use Data for Research**

From time to time CSWE staff use self-study (or reaffirmation compliance audit) data for the purposes of quality assurance for the COA and for research, both about the field in general and for the specific purpose of preparing information for the revision of EPAS. Results are reported

in aggregate form only, so programs will not be individually identifiable in any reports. There will be no repercussions on the program's accreditation status. Requests by non-CSWE staff for use of self-study (or reaffirmation compliance audit) data are subject to institutional review board review and program approval. Such research may significantly improve our understanding of the current state of social work education, and we thank you in advance for your contribution. If you do not want to include your program's data for use in CSWE research you can opt out at the end of the [Baccalaureate Reaffirmation Eligibility Form](#) and/or [Master's Reaffirmation Eligibility Form](#)

## **2.3 LETTER OF INSTRUCTION, SITE VISIT PLANNING, AND SITE VISIT HOSTING**

### **2.3.1 Purpose and Overview of the Site Visit**

The COA reviews the program's self-study before the site visit and sends a letter of instructions to the site visitor(s) specifying the accreditation standards that the visitor(s) should address. This ensures the visit is focused and guided by the initial COA review. Site visitors are expected to conduct visits so that programs have the opportunity to provide information that clarifies, corrects, or supplements those parts of the self-study about which the COA has questions. As representatives accountable to the COA, site visitors have authority to request, examine, and report any information and materials relevant to the letter of instruction.

Every site visitor is expected to discuss general questions related to three accreditation standards (AS) from the [2008 EPAS](#) with programs: AS 1 (Program mission and goals), AS 3.1 (Nondiscrimination and Human Diversity), and AS 4 (Program Assessment and Continuous Improvement). Site visitors explore these standards with relevant constituents by asking broad questions about program, mission and goals and how these relate to the level of practice for which they prepare students and insights the program may have reached based on its assessment of student outcomes. In addition, site visitors ask general questions about the challenges and achievements programs have experienced in making specific and continuous efforts to provide a learning context in which respect for all persons and understanding of diversity are practiced.

Beyond these standards, site visitors address standards about which the COA raised specific questions. The COA expects site visitors to submit comprehensive and thorough reports of their findings about which specific questions were raised.



### 2.3.2 Site Visit Planning Form

Approximately 1 year in advance the program should email the Site Visit Planning form to the site visit coordinator

- [Reaffirmation Site Visit Planning Form -February Agenda](#)
- [Reaffirmation Site Visit Planning Form -June Agenda](#)
- [Reaffirmation Site Visit Planning Form -October Agenda](#)

On the Reaffirmation Site Visit Planning Form the program indicates the number, if any, of off-campus sites and whether the site visitor(s) will visit a single baccalaureate or master's program or both a baccalaureate and master's program. This information affects the number of site visitors and length of the site visit.

Single degree programs (baccalaureate or master's only) require one site visitor for a visit. Two site visitors are required when both a baccalaureate and a master's degree program are being evaluated. An additional site visitor may be necessary, depending on the complexity of the program(s) and whether there is an off-campus site. Similarly, single degree programs (baccalaureate or master's only) require 1 day for a site visit. When both a baccalaureate and a master's degree program are visited, 1 to 2 days are needed. An extra day may be necessary, depending on the complexity of the program and whether there is an off-campus site.

The program also specifies three separate sets of dates for the site visit on the Reaffirmation Site Visit Planning Form. Programs on the February COA agenda must provide dates between September 1 and November 15. Programs on the June COA agenda must provide dates between December 1 and February 28. Programs on the October COA agenda must provide dates between March 1 and May 31. The three separate sets of dates must be discussed and cleared by the president and any other significant persons before they are submitted. All three sets of dates should be kept open on the program's calendars until the site visitor(s) and the date of the visit have been confirmed.

### 2.3.3 Site Visitor Qualifications and Selection

#### Qualifications

To become a certified site visitor an individual must be a full- or part-time social work faculty member at a CSWE-accredited social work program, have a letter of recommendation from that program's chief administrator, and maintain CSWE membership. Site visitors are required to have 5 years of teaching experience. Every site visitor participates in training on EPAS before being certified. Site visitors must attend an update session whenever new standards are developed.

### **Site Visitor Selection**

The site visit coordinator and the director of the Office of Social Work Accreditation (OSWA) use the information on the Reaffirmation Site Visit Planning form to select several potential site visitors from the roster of certified site visitors. Certified site visitors are not eligible to participate in the site visit if they participated in the program's last site visit; work or reside in the same state as the program; are current or former faculty members or students; previously applied for a position at the program; are current or former consultants to the program; or have other conflicts of interest brought to CSWE's attention by the program or potential site visitor.

Potential site visitors are not selected according to their experience at the program level (baccalaureate or master's); its religious affiliation, size, administrative structure of institution, or program; area of expertise; or other similar criteria that are not germane to the collection of accurate information. Program directors are able to refuse specific site visitors only on the basis of a conflict of interest.

The site visit coordinator sends an e-mail with the names of the potential site visitors to the chief administrator of the program to review for possible conflicts of interest. The program's chief administrator replies to the e-mail and indicates whether there is any conflict of interest with each potential site visitor and if so, the nature of the conflict.

The site visit coordinator uses that information to select a site visitor or visitors, and when site visitors are confirmed, sends the names, mailing addresses, e-mail addresses, and telephone numbers to the program.

### **2.3.4 Program Preparation for the Site Visit**

Advance preparation for site visits is essential and involves close collaboration among OSWA staff, site visitors, and programs.

#### **Travel and Accommodations**

Program directors should communicate with the site visitors about arrangements such as travel plans, work space requirements in the hotel and on campus, and the schedule for the site visit. The program's chief administrator or designee should confirm all arrangements with the site visitor(s) in writing.

Programs are to provide prepaid airline tickets to site visitors and should consult with the site visitors about the most convenient airline carrier and flight times. Coach fare is expected. The program should also inform site visitors about transportation from the airport to the campus.

Site visitors should be housed in hotels, not in dormitories or other campus housing. Programs should arrange for hotels to bill the program for site visitors' expenses minus personal expenses.

Hotel accommodations should be arranged so that site visitors have a place to work on the site visit report.

Ground transportation and meals not taken at the hotel are likely to be out-of-pocket expenses for the site visitors. Programs should inform the site visitors how reimbursement for these expenses will be managed.

### **Communication Guidelines**

Program directors are responsible for all communication with the site visitors. Faculty members, students, or others should not communicate with the site visitors before their arrival on campus nor after their arrival until the appointed time in the site visit schedule. Constituent groups desiring to meet with site visitors should request that the program's chief administrator arrange time on the site visit agenda. It is inappropriate for site visitors to receive anonymous documents, telephone calls, or other similar information. Site visitors are instructed to discuss any such incidents with the program's chief administrator and to refuse written or verbal information that cannot be shared openly.

## **2.3.5 Letter of Instruction and the Site Visit Schedule**

The site visit schedule, including visits to off-campus sites, must be arranged in advance of the visit by the site visitor and program directors.

### **Letter of Instructions to the Site Visitor(s)**

A copy of the Letter of Instructions to the Site Visitor(s) is provided to program directors for guidance in working with site visitors to set up the visit and for informational purposes. The site visitors and program directors use the letter to create the site visit schedule, including with whom the visitors will meet and the specific times and locations where the meetings will occur.

The program prepares for the visit by considering how it might respond to the questions raised in the letter during the site visit. The COA does not expect the program to take formal action on the letter of instructions nor to submit a response to it before the site visit. Site visitors are instructed not to request the Program Response in advance of the site visit.

### **Site Visitor(s) Arrival**

During the first evening site visitors generally work alone to prepare for the visit. Program directors may meet with site visitors to extend a brief welcome, explain the itinerary, answer any questions, and outline the arrangements to escort them to the campus. During the site visit, evenings are reserved for site visitors to work on the site visit report and prepare for the exit interview. No social events should be planned for the site visitors.

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### **Meeting with the Institutional Administrators**

The COA expects the site visit to begin with the institution's chief executive officer and other institutional administrators. The program director should escort the site visitor(s) to the office of the chief executive officer of the institution and, after introductions, permit the site visitor(s) to meet alone with the chief executive officer or his or her designee. The purpose of this meeting is to explain the accreditation process, learn more about the role and place of the program within the institution's system, answer any questions the president or chancellor may have, and to collect any information related to EPAS listed in the COA Letter of Instructions to the Site Visitor(s). When it is impossible to meet with the institution's chief executive officer, it is acceptable to meet with his or her designee.

### **Meetings with the Social Work Program**

The schedule may also include meetings with the program director, faculty members, the director of the field practicum, field instructors, students, the librarian, and other individuals whose presence is relevant (such as faculty concerned with ethnic or gender issues) to the issues raised in the Letter of Instructions to the Site Visitor(s). The purpose of these meetings is to assess the program in relation to the instructions given in the COA Letter of Instructions to the Site Visitor(s).

The COA does not require or recommend dismissing classes during the site visit. It is advised that the schedule be planned to permit participation by all constituents without disrupting the academic schedule.

### **Additional Materials**

If the program provides additional information to the site visitor(s) during the site visit, three copies of those materials must be sent to the program's accreditation specialist or associate. The COA uses the site visit report and the program's response to it to make a decision on the program's reaffirmation. Site visitors should not forward program materials to CSWE for the program.

### **Exit Interview**

Site visitors hold exit interviews that are open to the people who met with them during the site visit (institutional administrators, program leadership, faculty, students, and other constituencies) to convey the findings that will be in the site visit report. Site visitors then invite the participants to ask questions, comment on the findings, and/or correct any inaccuracies. Site visitors may respond to questions but not make judgments of whether the program is in compliance with EPAS, because that judgment rests with the COA.

Site visitors should remind programs that the findings, along with the programs' response to site visit reports, are reviewed by the COA before making a decision about compliance. Site visitors should explicitly inform the institution and program that the COA will notify them of its decision

about program compliance and concerns, and that it is possible that the COA's analysis will differ from that of the site visitors.

After the visit has concluded, contact between the program and site visitor(s) should end. If the program has additional questions or comments after the visit, the program should contact its accreditation specialist or associate. The program does not provide a copy of its response to the site visitor.

### **2.3.6 Emergencies or Questions During the Site Visit**

Site visitors or a program's chief administrator may call the OSWA director at any time during a site visit to clarify an accreditation standard or procedure. This includes any concerns about boundary issues pertaining to the site visitors. Should an emergency arise requiring a site visitor to leave the visit early, OSWA staff should be notified immediately.

### **2.3.7 Site Visitor Ethical Guidelines**

When accepting an appointment to visit a program, each site visitor is required to subscribe to the Site Visitor Ethical Guidelines to ensure that the site visitor duties are carried out fairly, impartially, and responsibly by avoiding actual or apparent conflicts of interest and other improprieties. Adherence to these guidelines is essential to maintaining and preserving the integrity and effectiveness of the accreditation process.

## **2.4 THE SELF-STUDY**

### **2.4.1 Purpose of the Self-Study**

The term self-study refers to the program's process of self-examination during the creation of the self-study, as well as to the self-study document itself. The purpose of the self-study document is to demonstrate the program's compliance with all of the [2008 Educational Policy and Accreditation Standards](#). Given the conceptual differences between the 2008 and 2001 EPAS, programs should start writing a new self-study rather than trying to revise the previous self-study. The self-study process should begin approximately 2 years prior to the COA Review for Determination of Reaffirmation.

### **2.4.2 COA Guidelines for Writing the Self-Study**

These guidelines are intended to make the process of writing and compiling the self-study easier for programs and make the evaluation of the self-study easier for COA readers. The COA encourages a clear and succinct narrative. The self-study should be divided into three volumes as described below.

### **Volume 1 –EPAS**

Volume 1 contains a series of narratives that demonstrates the program’s compliance with [2008 EPAS](#). Each accreditation standard (AS) should be addressed in a separate narrative headed by the number and full text of each standard for easy identification by the COA reader. The [Program Expense Budget form](#) should be included near the narrative for AS 3.5.1 and the [Librarian’s Report](#) near AS 3.5.4

Programs should refer to the compliance column of the Compliance, Concern, and Noncompliance Statements (previously discussed in section 1) while writing the self-study. It explains the minimum requirements for completely and clearly meeting an accreditation standard and related educational policy and why the COA would cite either as an area of concern or noncompliance.

In institutions with both an accredited baccalaureate and an accredited master’s social work program, a complete self-study must be submitted for each program.

### **Volume 2 – Syllabi**

Volume 2 contains all of the program’s course syllabi. Elective courses not taken by all students do not need to be included. Dual degree courses, other than those for the MSW degree, need not be included. The syllabi need to be uniform. If there is more than one section of a course, a common syllabus may be submitted that contains all the components required for the course.

### **Volume 3 – Supporting Documentation**

Volume 3 is the appendix and contains the student handbook, the field education manual, and any other supporting documentation.

## **2.4.3 Submitting Electronic and Paper Versions of the Self-Study**

As described in the Timetable for Reaffirmation, the program mails an electronic version and three paper copies of the self-study to its accreditation specialist or associate. The electronic version of the self-study will be used for research on social work education and accreditation quality assurance. The electronic version of the self-study should be mailed to CSWE on a CD-ROM or USB drive at the same time the paper copies are mailed. Self-study files should not be e-mailed to CSWE. Because the text from the self-study will be imported into a text analysis program, self-study files should be MS Word documents. Volume I should be double-spaced, in 12 point or higher typeface, in black type. Syllabi in Volume II may be single-spaced and should be uniform in format. Materials in Volume III may be scanned or photocopies from original documents. All volumes should have a table of contents, page numbers, and be spiral-bound.

## 2.4.4 Accreditation Review Brief

The [Accreditation Review Brief form](#) is a tool used by the COA commission reader to report his or her evaluation of the program. Section 2 of the Accreditation Review Brief lists each accreditation standard, related educational policies, and compliance statements from the [Compliance, Concern, and Noncompliance Statements](#).

In the location column of section 2, the program indicates the document name and page number where each compliance statement for an accreditation standard is addressed in the program's self-study. In section 1 the program completes identifying information. The program fills out one Accreditation Review Brief for each program level that is being reviewed for reaffirmation during the site visit.

Include an unbound, paper-clipped copy in Word of the Accreditation Review Brief with the self-study.

## 2.5 SITE VISIT REPORT AND PROGRAM RESPONSE

As described in the [purpose and overview of the site visit \(2.2.1\)](#), the COA reviews the program's self-study before the site visit and sends a Letter of Instruction to the site visitors and program director specifying the accreditation standards that the visitors should address so the visit is more focused and guided by the initial COA review.

### 2.5.1 Site Visit Report

The beginning of the site visit report must include the name, date, and state of the program visited, the program level, and the name(s) of the site visitor(s). The report should include either a copy of the site visit schedule or a list of people who met with the site visitor(s) during the visit (e.g., groups and individuals from the program and institution).

The next part of the report is a brief summary of the conversation with the program on general questions related to AS 1 (Program mission and goals), AS 3.1 (Nondiscrimination and Human Diversity), and AS 4 (Program Assessment and Continuous Improvement).

In the last part of the report the site visitors list each accreditation standard and question raised by the COA in its letter of instructions with a thorough discussion of findings for each.

Information about when the site visit report is due and where it should be sent is on the Timetable for Reaffirmation.

## 2.5.2 Program Response to the Site Visit Report

The program is required to submit a response to the site visit report within 2 weeks of receiving the report. The beginning of the response must include the name and state of the program visited, the program level visited, the name(s) of the site visitor(s), and the date of the response.

Next, the program lists each accreditation standard and question raised by the COA in its letter of instructions and states whether it agrees or disagrees with site visit finding, corrects any errors of fact, and clarifies information that may have been incorrectly understood by the site visitor(s). Disagreements with the site visit report should be stated clearly, and additional documentation should be provided if necessary.

Information about when the program response to the site visit report is due and where it should be sent is on the Timetable for Reaffirmation.

## 2.6 COA REAFFIRMATION DETERMINATION AND DECISIONS

### 2.6.1 Reaffirmation Determination Decisions

The COA reviews the site visit report, the program's response to the site visit report, and any other materials submitted by the program. The COA makes one of seven decisions:

1. **Reaffirm Accreditation for 8 Years.** The COA finds the program in compliance with all educational policy and accreditation standards.
2. **Reaffirm for 8 Years with a Progress Report to be Reviewed by the Program's Accreditation Specialist or Associate.** The COA finds the program in compliance with all educational policy and accreditation standards but identifies one or more areas of concern that must be addressed in a progress report. The COA's letter identifies specific areas of concern and a due date for the progress report.
3. **Reaffirm for 8 Years with a Progress Report to be Reviewed by the COA.** The COA finds the program in compliance with all educational policy and accreditation standards but identifies one or more areas of concern that must be addressed in a progress report. The COA's letter identifies specific areas of concern and a due date for the progress report.
4. **Defer a Decision on Reaffirmation to the Next Meeting and Request Clarifying Information.** The COA finds that the program's documentation is insufficient to make a decision, so the program must submit documentation or clarification necessary for the COA to make a decision at the next meeting.



5. **Place the Program on Conditional Accredited Status.** The COA finds the program out of compliance with one or more educational policy and/or accreditation standard and places it on conditional accredited status if it believes that noncompliance issues can be resolved by the program within 1 year. The COA's letter identifies specific areas of noncompliance. Conditional status is an adverse decision, and programs may request reconsideration. If the program accepts The COA's decision, it submits a restoration report.
6. **Initiate Withdrawal of Accredited Status.** The COA initiates withdrawal of accredited status if the program is found to be out of compliance with one or more educational policy or accreditation standards and the COA does not believe that noncompliance issues can be resolved within 1 year. The COA's letter identifies specific areas of noncompliance and instructs the program to work with its accreditation specialist or associate to arrange for the graduation or transfer of its students and determine when the program's accreditation will be withdrawn. The decision to initiate withdrawal of accredited status is an adverse one, and programs may request reconsideration. After its official withdrawal date, a program may apply for candidacy status.
7. **Order a Modified Site Visit.** If the COA believes that a program may be out of compliance with one or more educational policy or accreditation standards, the COA can order a modified site visit to collect more information. A site visitor is sent, at the program's expense, to review specific compliance issues. This program is reviewed at the next COA meeting after the site visit.

### 2.6.2 First Progress Report Decisions

After hearing the accreditation specialist or associate's review of the first progress report, or after reviewing the first progress report itself, the COA takes one of six actions, regardless of who reviewed the report:

1. **Accept the First Progress Report.** All of the areas of concern were addressed in the progress report, and no further action by the program is required.
2. **Request a Second Progress Report to be Reviewed by the Program's Accreditation Specialist or Associate.** The COA finds that one or more of the concerns in the first progress report are still areas of concern and requests a second progress report. The COA's letter identifies specific areas of concern and a due date for the progress report. If the second progress report is not accepted, the program is automatically placed on conditional accreditation.
3. **Request a Second Progress Report to be Reviewed by the COA.** The COA finds that one or more of the concerns in the first progress report are still areas of concern and

requests a second progress report. The COA's letter identifies specific areas of concern and a due date for the progress report. If the second progress report is not accepted, the program is automatically placed on conditional accreditation.

4. **Place the Program on Conditional Accredited Status.** The COA finds the program out of compliance with one or more educational policy or accreditation standards and places the program on conditional accredited status if the COA believes that noncompliance issues can be resolved by the program within 1 year. Conditional status is an adverse decision, and programs may request reconsideration. If the program accepts The COA's decision, it submits a restoration report.
5. **Initiate Withdrawal of Accredited Status.** The COA initiates withdrawal of accredited status if the program is found to be out of compliance with one or more educational policy or accreditation standards and the COA does not believe that noncompliance issues can be resolved within 1 year. The COA's letter identifies specific areas of noncompliance and instructs the program to work with its accreditation specialist or associate to arrange for the graduation or transfer of its students and determine when the program's accreditation will be withdrawn. The decision to initiate withdrawal of accredited status is an adverse one, and programs may request reconsideration. After its official withdrawal date a program may apply for candidacy status.
6. **Order a Modified Site Visit.** If the COA believes that a program may be out of compliance with one or more educational policy or accreditation standards, the COA can order a modified site visit to collect more information. A site visitor is sent, at the program's expense, to review specific compliance issues. This program is reviewed at the next COA meeting after the site visit.

### 2.6.3 Second Progress Report Decisions

After reviewing the first progress report, the COA takes one of four actions:

1. **Accept the Second Progress Report.** All areas of concern were addressed in the progress report, and no further action by the program is required.
2. **Place the Program on Conditional Accredited Status.** If the second progress report is not accepted, the program is automatically placed on conditional accreditation. Placement on conditional status is an adverse decision, and programs may request reconsideration. If the program accepts the COA's decision, it submits a restoration report.
3. **Initiate Withdrawal of Accredited Status.** The COA initiates withdrawal of accredited status if the program is found to be out of compliance with one or more educational

policy or accreditation standards and the COA does not believe that noncompliance issues can be resolved within 1 year. The COA's letter identifies specific areas of noncompliance and instructs the program to work with its accreditation specialist or associate to arrange for the graduation or transfer of its students and determine when the program's accreditation will be withdrawn. The decision to initiate withdrawal of accredited status is an adverse one, and programs may request reconsideration. After its official withdrawal date a program may apply for candidacy status.

4. **Order a Modified Site Visit.** If the COA believes that a program may be out of compliance with one or more educational policy or accreditation standards, the COA can order a modified site visit to collect more information. A site visitor is sent at the program's expense to review specific compliance issues. This program is reviewed at the next COA meeting after the site visit.

#### 2.6.4 Restoration Report Decisions

When the program accepts the COA decision to place it on conditional accredited status or when the outcome of the reconsideration hearing is to uphold the COA decision (see reconsideration policy), the program must submit a restoration report. When the restoration report is received, the COA reviews it along with all previously submitted materials. The COA takes one of four actions:

1. **Restore Accredited Status.** The COA review of the program's restoration report finds that the program has taken corrective action and is in compliance with all standards. No further action is required.
2. **Restore Accredited Status and Request a Progress Report.** The request includes a due date and indicates whether the report will be reviewed by the program's accreditation specialist or associate and/or the COA.
3. **Order a Modified Site Visit.** A modified site visit is ordered when the restoration report fails to clarify program compliance. A site visitor is sent at the program's expense to review specific issues. This program is reviewed at the next commission meeting following the site visit. After its review of the site visit report, the COA either returns the program to accredited status or initiates withdrawal of its accredited status.
4. **Initiate Withdrawal of Accredited Status.** The COA initiates withdrawal of accredited status if the program is found to be out of compliance with one or more standards and the program cannot take corrective action within 1 year. The COA's letter identifies specific areas of noncompliance and instructs the program to work with its accreditation specialist or associate to determine the effective date of the withdrawal of

accreditation. The decision to initiate withdrawal of accredited status is an adverse one, and the program may request reconsideration (see Reconsideration Policy).

## 3 Candidacy

### 3.1 INTRODUCTION TO CANDIDACY

Italicized documents or forms in this section can be found on the CSWE Web site at <http://www.cswe.org/Accreditation/Candidacy.aspx>.

#### 3.1.1 Benchmark Model

The benchmark model is a systematic, incremental approach to developing a social work program and writing a comprehensive self-study. There are three benchmarks; the first portion of each benchmark consists of specific accreditation standards the program must be in compliance with and the second portion consists of standards that must be addressed in draft form.

Program development is guided by three visits from the COA commissioners. During each visit the commissioner makes a recommendation about the program's compliance with standards in the first portion of the benchmark and provides consultation on the standards in the second portion.

Programs progress through several stages of program development: applying for candidacy status, completing candidacy, and receiving initial accreditation status. There are several products, forms, and accreditation fees associated with each stage (a current list of fees is available on the CSWE Web site).

Applying for candidacy status involves completion of the Letter of Institutional Intent and the Candidacy Eligibility Application and payment of the Letter of Intent and Candidacy Eligibility Fee. After the accreditation specialist or associate approves the application materials, the program completes and submits its Benchmark I document. When the specialist or associate approves the Benchmark I document the program is assigned to a COA agenda (February, June, or October) and arrangements are made for commissioner visit I. The program remains on that agenda as it progresses through the remaining steps.

Completing candidacy involves the completion of the Benchmark II document and its evaluation during commissioner visit II as well as the completion of the Benchmark III document and its evaluation at commissioner visit III. Receipt of initial accreditation involves completion of the Benchmark III document, assembled to give the appearance of a self-study, which is evaluated during commissioner visit III.

Master's of social work programs are typically designed to be completed by full-time students in 2 years. Master's programs may elect to develop a part-time only program, designed to be

completed by part-time students in up to 4 years. In either case, by the time a program is reviewed by the COA for initial accreditation, the self-study will be completed, at least one class graduated, and assessment data collected from program graduates.

Typical 2-year master's programs and part-time only master's programs follow the same basic timetable for the completion and review of their benchmark documents. Depending on the number of years students in the part-time only master's programs require to graduate, one or two follow-up commissioner visits are scheduled after commissioner visit III. The follow-up commissioner visits allow the COA to follow one cohort of students as it progresses through the curriculum.

## 3.2 BENCHMARK MODEL CHART

The Benchmark Model chart illustrates which features of the Educational Policies and Academic Standards (EPAS) and which accreditation standards (AS) the program is working on during each commissioner visit.

The compliance column lists which accreditation standards the program must be in compliance with during each commissioner visit to move to the next benchmark and commissioner visit. The draft column, shaded gray, lists which accreditation standards must be addressed in draft form during the commissioner visit. The commission visitor gives the program feedback on how to improve the draft portion, which later becomes the compliance portion in the next benchmark. For example, the draft standards in Benchmark I are the same as the compliance standards in Benchmark II.

The rows of the chart are divided by the EPAS feature—(1) program mission and goals, (2) explicit curriculum, (3) implicit curriculum, and (4) assessment—and then subdivided by the accreditation standards within the feature. For example, implicit curriculum (the third EPAS feature) is subdivided by AS 3.1 Diversity, AS 3.2 Student Development, AS 3.3 Faculty, AS 3.4 Administrative Structure, and AS 3.5 Resources.

Once COA finds the program in compliance with the accreditation standards in a benchmark, the program is expected to remain in compliance with those standards as it progresses through the rest of the benchmarks. For example, during Benchmark III programs should still be in compliance with the accreditation standards from Benchmarks I and II. The commission visitor will ask the program whether there have been any changes since the last visit and determine whether any of those changes affect the program's compliance.

CANDIDACY PROCESS: 3-YEAR BENCHMARK GRID

	Commissioner Visit I	Commissioner Visit II	Commission
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	Benchmark I		Benchmark II		er Visit III Benchmark III
	Compliance	Draft	Compliance	Draft	Compliance
1.Program Mission and Goals	AS 1.0.1 AS 1.0.2				
2.Explicit Curriculum B 2.0 – Curriculum	AS B2.0.1 AS B2.0.2 AS B2.0.3 AS B2.0.4	AS B2.0.5 Syllabi	AS B2.0.5 Syllabi		
M2.0 – Curriculum	AS M2.0.1 AS M2.0.2 AS M2.0.3 AS M2.0.4 AS M2.0.5	AS M2.0.6 Syllabi	AS M2.0.6 Syllabi		
2.1 – Field Education		AS 2.1.1	AS 2.1.1	AS B2.1.2 AS M2.1.2 AS 2.1.3 AS 2.1.4 AS 2.1.5 AS 2.1.6 AS 2.1.7 AS 2.1.8 Field Manual	AS B2.1.2 AS M2.1.2 AS 2.1.3 AS 2.1.4 AS 2.1.5 AS 2.1.6 AS 2.1.7 AS 2.1.8 Field Manual
3.Implicit Curriculum 3.1 – Diversity				AS 3.1.1 AS 3.1.2 AS 3.1.3	AS 3.1.1 AS 3.1.2 AS 3.1.3
3.2 – Student Development: Admissions		AS B3.2.1 AS M3.2.1 AS 3.2.2 AS M3.2.3 AS 3.2.4 AS 3.2.5	AS B3.2.1 AS M3.2.1 AS 3.2.2 AS M3.2.3 AS 3.2.4 AS 3.2.5		
Advisement, retention, and termination		AS 3.2.6 AS 3.2.7 AS 3.2.8	AS 3.2.6 AS 3.2.7 AS 3.2.8		
Student participation		AS 3.2.9 AS 3.2.10	AS 3.2.9 AS 3.2.10		

		Student Handbook	Student Handbook		
3.3 – Faculty	AS B3.3.3 AS M3.3.3 (3 faculty)	AS M3.3.3  AS 3.3.4	AS M3.3.3 (5 faculty) AS 3.3.4	AS 3.3.1 AS 3.3.2  AS M3.3.3  AS 3.3.5 AS 3.3.6	AS 3.3.1 AS 3.3.2  AS M3.3.3 (6 faculty)  AS 3.3.5 AS 3.3.6
3.4 – Administrative Structure	AS 3.4.4 AS B3.4.4(a) AS B3.4.4(b) AS B3.4.4(c) AS M3.4.4(a) AS M3.4.4(b) AS M3.4.4(c) AS 3.4.5 AS 3.4.5(a) AS 3.4.5(b) AS B3.4.5(c) AS M3.4.5(c)	AS 3.4.1 AS 3.4.2 AS 3.4.3	AS 3.4.1 AS 3.4.2 AS 3.4.3		
3.5 – Resources		AS 3.5.1  AS 3.5.4 AS 3.5.5 AS 3.5.6	AS 3.5.1  AS 3.5.4 AS 3.5.5 AS 3.5.6	AS 3.5.2 AS 3.5.3	AS 3.5.2 AS 3.5.3
4. Assessment		AS 4.0.1	AS 4.0.1	AS 4.0.2 AS 4.0.3 AS 4.0.4 AS 4.0.5	AS 4.0.2 AS 4.0.3 AS 4.0.4 AS 4.0.5



### **3.2.1 Compliance, Concern, and Noncompliance Statements**

The COA uses the Compliance, Concern, and Noncompliance Statements as a guide to consistent and complete review of a program's candidacy or reaffirmation of accreditation. Statements of compliance, concern, and noncompliance are provided for each accreditation standard (AS) and related educational policy (EP).

Each benchmark has a corresponding Benchmark Review Brief form that lists the accreditation standards the program must be in compliance with and the related compliance statement from the Compliance, Concern, and Noncompliance Statements. The commission visitor uses the brief to evaluate the program's compliance with the benchmark and make a recommendation to the COA.

### **3.2.2 Timetable for Candidacy**

The Timetable for Candidacy—2008 EPAS provides a detailed chronological list of accreditation fees, materials, and activities with the deadline, number and kind of copies needed, and who should receive them as the program progresses through the steps of obtaining candidacy, completing candidacy, and receiving initial accreditation. Be sure to use the timetables marked "2008 EPAS," because they are different from the timetables for the 2001 EPAS.

There are three versions of the Timetable for Candidacy—2008 EPAS with dates that correspond to the February, June, and October COA meetings held each year. Once the program has been assigned an agenda, select the corresponding Timetable for Candidacy—2008 EPAS (February, June, October) on the Web site, then go to the last row of the first page and insert the year the program will be reviewed for candidacy in the middle column next to "Commission Review for Candidacy". That is when the COA will decide whether the program is in compliance with Benchmark I and whether the program should be granted candidacy status. From there, work up to the top of the page and fill in the year for each step in the candidacy process. Contact your accreditation specialist or associate if you have any questions or need assistance.

### **3.2.3 Candidacy Policies**

#### **Student Admission**

Only students admitted during or after the academic year in which the program is granted candidacy will be recognized as having graduated from an accredited program. Students admitted prior to the academic year in which the program was granted candidacy would not be recognized as having graduated from a CSWE-accredited social work education program.

#### **Foundation Content and Advanced Content for MSW Programs**

Programs in candidacy must develop and offer foundation content and advanced content for the master's program. They cannot offer an advanced-standing only program.

**Delivery of the Curriculum**

All means of delivery of the curriculum (part-time, distance education off-site or online), being implemented currently or planned in the near future, should be included in the Benchmark I document.

**Failure to Submit**

If a program fails to submit a Benchmark document by the due date, COA may remove the program from candidacy or deny initial accreditation.

**3.3 BENCHMARK I — OBTAINING CANDIDACY STATUS****3.3.1 Overview of Applying for Candidacy Status**

The program submits a Letter of Institutional Intent, the Candidacy Eligibility Fee, and a Candidacy Eligibility Application form with supporting materials. The director of the Office of Social Work Accreditation (OSWA) assigns an accreditation specialist or associate to review the submission. When the specialist or associate approves the Letter of Institutional Intent and Candidacy Eligibility Application, the program is asked to submit a Benchmark I document. The accreditation specialist or associate reviews the Benchmark I document and works with the program to make certain it has fully addressed all of the requirements of the Benchmark I. After approving the Benchmark I document, the specialist or associate recommends that the director of OSWA arrange Commissioner Visit I. The date of Benchmark I approval determines the program's agenda date (February, June, October).

**3.3.2 Letter of Institutional Intent**

The Letter of Institutional Intent is a narrative that provides clear, complete, and sufficient information regarding the program and institution's intent to start a social work program. The letter must include the following:

- A discussion of the institution's mission and the relationship of the social work program to that mission
- An analysis of the relationship of the proposed program to the institution's strategic or long-range plan
- A discussion of the costs (including a projected budget) of the program and the benefits or advantages that the institution expects to receive relative to these costs
- Preliminary ideas about the mission and goals of the social work program

- A summary of the program’s initial development activities

Note: If a program is part of a “collaborative,” both programs’ institutions must meet eligibility requirements and turn in separate Letters of Institutional Intent and Candidacy Eligibility Applications.

### **3.3.3 Candidacy Eligibility Application**

The Candidacy Eligibility Application form lists each eligibility standard, asks a series of simple questions, and/or requires the submission of materials to determine compliance.

Information about when the Candidacy Eligibility Application is due and where it should be sent is on the Timetable for Candidacy—2008 EPAS.

#### **Eligibility Standard 1**

The review of the social work program by the Commission on Accreditation is authorized by the chief executive officer of the institution.

#### **Eligibility Standard 2**

The program is located in an educational institution recognized by a regional accrediting body approved by the Commission on Higher Education Accreditation.

#### **Eligibility Standard 3**

The institution must be legally organized and authorized to operate as a postsecondary educational institution under the laws of the relevant state. The program has been approved by the appropriate higher education authority.

#### **Eligibility Standard 4**

The institution has a written affirmative action policy, plan or program, and procedures, and a stated policy against discrimination based on race, color, religion, creed, gender, ethnic or national origin, disability, or age. The institution complies with requirements of the Americans with Disabilities Act.

#### **Eligibility Standard 5**

The institution has appointed a chief administrator who has demonstrated leadership ability through teaching, scholarship, curriculum development, administrative experience, and other academic and professional activities in the field of social work.

At the baccalaureate level the social work program director who is the chief administrator, or the designee of the chief administrator, has a master’s of social work degree from a CSWE-accredited program (doctoral degree preferred) or a baccalaureate degree in social work from a CSWE-accredited program and a doctoral degree.

At the master's level the social work program director who is the chief administrator, or the designee of the chief administrator, has a master's of social work degree from a CSWE-accredited program. In addition, it is preferred that the MSW program director has a doctoral degree.

### **Eligibility Standard 6**

The institution documents sufficient and firm institutional supports to create, build, and maintain the social work program. Include faculty, staff, budget, and other resources necessary to build and maintain the program.

### **3.3.4 Progressing to Benchmark I**

The Letter of Institutional Intent and Candidacy Eligibility Application must be approved by an accreditation specialist or associate before Benchmark I is submitted. Once the letter of intent and application are approved, the program will receive a letter regarding the next step, which is the submission of the Benchmark I document for initial review and approval.

### **3.3.5 Writing the Benchmark I Document**

The Benchmark I document should be divided into three volumes as described below.

#### **Volume 1 – Educational Policy and Accreditation Standards (EPAS)**

##### ***Section 1-Compliance Accreditation Standards***

The first section of volume 1 contains a series of narratives that demonstrate the program's compliance with the first portion of Benchmark I. This portion of Benchmark I, labeled "Benchmark I—Compliance with the Following Accreditation Standards," consists of specific accreditation standards the program must be in compliance with during Commissioner Visit I. The commissioner uses this section to make a recommendation to the full COA.

##### ***Section 2-Draft Accreditation Standards***

The second section of volume 1 contains a series of draft narratives that address the second portion of Benchmark I. This portion of Benchmark I, which is shaded and labeled "Benchmark I—Draft of the Following Accreditation Standards," consists of specific standards that must be addressed in draft form during Commissioner Visit I. The commissioner consults with the program on how to develop this section further for their Benchmark II document and Commissioner Visit II.

##### ***Format***

Each accreditation standard should be addressed in a separate narrative headed by the number and full text of each standard for easy identification by the COA reader. Programs should refer to the compliance column of the Compliance, Concern, and Noncompliance Statements while writing Volume I of the Benchmark I document. It explains the minimum requirements for

completely and clearly meeting an accreditation standard and related educational policy and why the COA would cite either as an area of concern or noncompliance.

### **Volume 2 – Syllabi**

Volume two contains drafts of the program’s course syllabi.

### **Volume 3 – Supporting Documentation**

Volume three is the appendix and contains a draft of the student handbook and any other supporting documentation.

### **Submission of the Draft and Final Benchmark I Document**

The program submits a draft Benchmark I document to their accreditation specialist or associate for review and approval per the instructions in the Candidacy Eligibility Approval Letter. This ensures that the program is progressing appropriately. The final version of the Benchmark I document is submitted 1 month before the commissioner visit; see the Timetable for Candidacy—2008 EPAS for submission instructions.

## **3.3.6 Program Completion of the Benchmark I Review Brief**

The Benchmark I Review Brief form is a tool used to guide the program in writing a complete Benchmark I document and by the commission visitor to review the program for compliance with Benchmark I and to make a recommendation to COA. In the Location column of sections 2 and 3, the program indicates the document name and page number where each compliance statement is addressed in the program’s Benchmark I document. See the Timetable for Candidacy—2008 EPAS for submission instructions.

## **3.3.7 Benchmark I**

### **Benchmark I—Compliance With the Following Accreditation Standards:**

<b>1. Program Mission and Goals</b>	
<i>Accreditation Standard 1.0—Mission and Goals</i> The social work program's mission and goals reflect the profession's purpose and values and the program's context.	
1.0.1	The program submits its mission statement and describes how it is consistent with the profession's purpose and values and the program's context.
1.0.2	The program identifies its goals and demonstrates how they are derived from the program's mission.
<b>2. Explicit Curriculum</b>	
<i>Accreditation Standard B2.0—Curriculum</i> The 10 core competencies are used to design the professional curriculum.	
B2.0.1	The program discusses how its mission and goals are consistent with generalist practice as defined in EP B2.2.

B2.0.2	The program identifies how its competencies consistent with EP 2.1 through 2.1.10(d).
B2.0.3	The program provides an operational definition for each of its competencies used in its curriculum design and its assessment [EP 2.1 through 2.1.10(d)].
B2.0.4	The program provides a rationale for its formal curriculum design demonstrating how it is used to develop a coherent and integrated curriculum for both classroom and field (EP 2.0).
<i>Accreditation Standard M2.0—Curriculum</i>	
The 10 core competencies are used to design the foundation and advanced curriculum. The advanced curriculum builds on and applies the core competencies in an area(s) of concentration.	
M2.0.1	The program identifies its concentration(s) (EP M2.2).
M2.0.2	The program discusses how its mission and goals are consistent with advanced practice (EP M2.2).
M2.0.3	The program identifies its program competencies consistent with EP 2.1 through 2.1.10(d) and EP M2.2
M2.0.4	The program provides an operational definition for each of the competencies used in its curriculum design and its assessment [EP 2.1 through 2.1.10(d); EP M2.2].
M2.0.5	The program provides a rationale for its formal curriculum design (foundation and advanced), demonstrating how it is used to develop a coherent and integrated curriculum for both classroom and field (EP 2.0).
<b>3. Implicit Curriculum</b>	
<i>Accreditation Standard 3.3-Faculty</i>	
B3.3.3	The baccalaureate social work program identifies no fewer than two full-time faculty assigned to the program, with full-time appointment in social work, and whose principal assignment is to the baccalaureate program. The majority and no fewer than two of the full-time faculty has either a master's degree in social work from a CSWE-accredited program, with a doctoral degree preferred, or a baccalaureate degree in social work from a CSWE-accredited program and a doctoral degree preferably in social work.
M3.3.3	The master's social work program identifies no fewer than six full-time faculty with master's degrees in social work from a CSWE-accredited program and whose principal assignment is to the master's program. The majority of the full-time master's social work program faculty has a master's degree in social work and a doctoral degree preferably in social work. >> <i>Three faculty at Commissioner Visit (CV) I (5 at CV II, 6 at CV III)</i>
<i>Accreditation Standard 3.4—Administrative Structure</i>	
3.4.4	The program identifies the social work program director. Institutions with accredited BSW and MSW programs appoint a separate director for each.
B3.4.4(a)	The program describes the BSW program director's leadership ability through teaching, scholarship, curriculum development, administrative experience, and other academic and professional activities in social work. The program documents that the director has a master's degree in social work from a CSWE-accredited program with a doctoral degree preferred or a baccalaureate

	degree in social work from a CSWE-accredited program and a doctoral degree, preferably in social work.
B3.4.4(b)	The program provides documentation that the director has a full-time appointment to the social work program.
B3.4.4(c)	The program describes the procedures for determining the program director's assigned time to provide educational and administrative leadership to the program. To carry out the administrative functions of the program, a minimum of 25% assigned time is required at the baccalaureate level. The program demonstrates this time is sufficient.
M3.4.4(a)	The program describes the MSW program director's leadership ability through teaching, scholarship, curriculum development, administrative experience, and other academic and professional activities in social work. The program documents that the director has a master's degree in social work from a CSWE-accredited program. In addition, it is preferred that the MSW program director have a doctoral degree, preferably in social work.
M3.4.4(b)	The program provides documentation that the director has a fulltime appointment to the social work program.
M3.4.4(c)	The program describes the procedures for determining the program director's assigned time to provide educational and administrative leadership to the program. To carry out the administrative functions of the program, a minimum of 50% assigned time is required at the master's level. The program demonstrates this time is sufficient.
3.4.5	The program identifies the field education director.
3.4.5(a)	The program describes the field director's ability to provide leadership in the field education program through practice experience, field instruction experience, and administrative and other relevant academic and professional activities in social work.
3.4.5(b)	The program documents that the field education director has a master's degree in social work from a CSWE-accredited program and at least 2 years of post-baccalaureate or post-master's social work degree practice experience.
B3.4.5(c)	The program describes the procedures for determining the field directors assigned time to provide educational and administrative leadership for field education. To carry out the administrative functions of the field at least 25% assigned time is required for baccalaureate programs. The program demonstrates this time is sufficient.
M3.4.5(c)	The program describes the procedures for determining the field director's assigned time to provide educational and administrative leadership for field education. To carry out the administrative functions of the field at least 50% assigned time is required for master's programs. The program demonstrates this time is sufficient

### **Benchmark I—Draft of the Following Accreditation Standards:**

#### ***2. Explicit Curriculum***

**Submit drafts of all syllabi in Volume 2.**

*Accreditation Standard B2.0—Curriculum*

The 10 core competencies are used to design the professional curriculum.	
B2.0.5	The program describes and explains how its curriculum content (knowledge, values, and skills) implements the operational definition of each of its competencies.
<i>Accreditation Standard M2.0—Curriculum</i> The 10 core competencies are used to design the foundation and the advanced curriculum. The advanced curriculum builds on and applies the core competencies in an area(s) of concentration.	
M2.0.6	The program describes and explains how its curriculum content (relevant theories and conceptual frameworks, values, and skills) implements the operational definition of each of its competencies.
<i>Accreditation Standard 2.1—Field Education</i> The program discusses how its field education program	
2.1.1	Connects the theoretical and conceptual contribution of the classroom with the practice setting, fostering the implementation of evidence-informed practice.
<b>3. Implicit Curriculum</b>	
<i>Accreditation Standard 3.2—Student Development: Admissions; Advisement, Retention, and Termination; and Student Participation</i> <b>&gt;&gt; Submit a draft of the student handbook in Volume 3.</b> Admissions	
B3.2.1	The program identifies the criteria it uses for admission.
M3.2.1	The program identifies the criteria it uses for admission. The criteria for admission to the master’s program must include an earned bachelor’s degree from a college or university accredited by a recognized regional accrediting association.
3.2.2	The program describes the process and procedures for evaluating applications and notifying applicants of the decision and any contingent conditions associated with admission.
M3.2.3	BSW graduates entering MSW programs are not to repeat what has been mastered in the BSW programs. MSW programs describe the policies and procedures used for awarding advanced standing. These policies and procedures should be explicit and unambiguous. Advanced standing is awarded only to graduates holding degrees from baccalaureate social work programs accredited by CSWE, those recognized through its International Social Work Degree Recognition and Evaluation Service, or covered under a memorandum of understanding with international social work accreditors.
3.2.4	The program describes its policies and procedures concerning the transfer of credits.
3.2.5	The program submits its written policy indicating that it does not grant social work course credit for life experience or previous work experience. The program documents how it informs applicants and other constituents of this policy.
Advisement, retention, and termination	



3.2.6	The program describes its academic and professional advising policies and procedures. Professional advising is provided by social work program faculty, staff, or both.
3.2.7	The program spells out how it informs student of its criteria for evaluating the academic and professional performance, including policies and procedures for grievance.
3.2.8	The program submits its policies and procedures for terminating a student's enrollment in the social work program for reasons of academic and professional performance.
Student participation	
3.2.9	The program describes its policies and procedures specifying students' rights and responsibilities to participate in formulating and modifying policies affecting academic and student affairs.
3.2.10	The program demonstrates how it provides opportunities and encourages students to organize in their interests.
<i>Accreditation Standard 3.3—Faculty</i>	
M3.3.3	The master's social work program identifies no fewer than six full-time faculty with master's degrees in social work from a CSWE-accredited program and whose principal assignment is to the master's program. The majority of the full-time master's social work program faculty has a master's degree in social work and a doctoral degree preferably in social work. <i>&gt;&gt; Five faculty at Commissioner Visit II (6 at CV III).</i>
3.3.4	The program describes its faculty workload policy and discusses how the policy supports the achievement of institutional priorities and the program's mission and goals.
<i>Accreditation Standard 3.4—Administrative Structure</i>	
3.4.1	The program describes its administrative structure and show how it provides the necessary autonomy to achieve the program's mission and goals.
3.4.2	The program describes how the social work faculty has responsibility for defining program curriculum consistent with the Educational Policy and Accreditation Standards and the institution's policies.
3.4.3	The program describes how the administration and faculty of the social work program participate in formulating and implementing policies related to the recruitment, hiring, retention, promotion, and tenure of program personnel.
<i>Accreditation Standard 3.5—Resources</i>	
3.5.1	The program describes the procedures for budget development and administration it uses to achieve its mission and goals. The program submits the budget form to demonstrate sufficient and stable financial supports that permit the program planning and faculty development.
3.5.4	The program submits the library form to demonstrate comprehensive library holding and/or electronic access and other informational and educational resource necessary for achieving its mission and goals.
3.5.5	The program describes and demonstrates sufficient office and classroom space and/or computer-mediated access to achieve its mission and goals.

3.5.6	The program describes its access to assistive technology, including materials in alternative formats (e.g., Braille, large print, books on tape, assistive learning systems).
<b>4. Assessment</b>	
<i>Accreditation Standard 4.0—Assessment</i>	
4.0.1	The program presents its plan to assess the attainment of its competencies. The plan specifies procedures, multiple measures, and benchmarks to assess the attainment of each of the program's competencies (AS B2.0.3; AS M2.0.4).

### 3.3.8 Commissioner Visit I

The commission visitor's primary task is to discuss the Benchmark I document and identify areas of compliance and noncompliance with the first portion of Benchmark I. The visitor also reviews the draft standards in the second portion of Benchmark I and identifies areas of further development that the program can use in writing the compliance section of Benchmark II.

#### Qualifications

Commissioner Visit I is conducted by a current member of the COA. Commissioners have a minimum of 5 years of teaching experience and have been experienced site visitors prior to serving on the COA.

#### Selecting the Commission Visitor

The director of OSWA and site visit coordinator select a commissioner to make Commissioner Visit I after the program's accreditation specialist or associate approves the Benchmark I document. The date the Benchmark I document is approved determines when (February, June, or October) the program will be reviewed for candidacy status. The commission visitor contacts the program to arrange a date for the visit and lets the site visit coordinator know when the visit will occur. Commissioner visits for programs on the February agenda take place between September 1 and November 15, on the June agenda between November 15 and February 28, and on the October agenda between March 1 and May 31.

#### Program Preparation for the Commissioner Visit

The program director should communicate with the commission visitor about arrangements such as travel plans, work space requirements in the hotel and on campus, and the schedule for the commissioner visit. The program's chief administrator or designee should confirm all arrangements with the commission visitor in writing. Programs are to provide prepaid airline tickets and should consult with the commission visitor about the most convenient airline carrier and flight times. Coach fare is expected. The program should also inform the commission visitor about transportation from the airport to the campus.

The commission visitor should be housed in a hotel, not in a dormitory or other campus housing. The program should make arrangements with the hotel to pay the bill, minus any of the commission visitor's personal expenses, directly. Hotel accommodations should be arranged so that the commission visitor has a place to work on the Benchmark I Review Brief.

Ground transportation and meals not taken at the hotel are likely to be out-of-pocket expenses for the commission visitor, and the program should inform the commission visitor how reimbursement for these expenses will be managed.

### **Communication Guidelines**

The program director is the person responsible for all communication with the commission visitor. Faculty members, students, or others should not communicate with the commission visitor before the arrival on campus, nor after the arrival until the appointed time in the commissioner visit schedule. Constituent groups desiring to meet with the commission visitor should request that the program's chief administrator arrange time on the commissioner visit agenda. It is inappropriate for the commission visitor to receive anonymous documents, telephone calls, or other similar information. The commission visitor is instructed to discuss any such incidents with the program's chief administrator and to refuse written or verbal information that cannot be shared openly.

### **Commission Visitor Arrival**

During the first evening the commission visitor works alone to prepare for the visit. The program director may meet with the commission visitor to extend a brief welcome, explain the schedule, answer any questions, and outline the arrangements to escort them to the campus. During the commissioner visit, evenings are reserved for the commission visitor to work on the Benchmark I Review Brief and prepare for the exit interview. No social events should be planned for the commission visitor.

### **Meeting With the Institutional Administrators**

The commissioner visit should begin with a meeting with the institution's chief executive officer and other institutional administrators. The program director should escort the commission visitor to the office of the chief executive officer of the institution and, after introductions, permit the commission visitor to meet alone with the chief executive officer. The purpose of this meeting is to explain the accreditation process, learn more about the role and place of the program within the institution's system, and answer questions from the president or chancellor. When it is impossible to meet with the institution's chief executive officer, it is acceptable to meet with his or her designee.

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### **Meetings With the Social Work Program**

The schedule may also include meetings with the program director, faculty members, the director of the field practicum, field instructors, students, librarians, and other individuals whose presence is relevant (such as faculty concerned with ethnic or gender issues) to Benchmark I.

The COA does not require or recommend dismissing classes during the commissioner visit. It is expected that the schedule be planned to permit participation by all constituents without disrupting the academic schedule.

### **Additional Materials**

If the program provides additional information to the commission visitor during the visit, three copies of those materials must be sent to the program's accreditation specialist or associate.

### **Exit Interview**

The commission visitor holds an exit interview, open to the people who met with the commission visitor during the visit (institutional administrators, program leadership, faculty, students, and other constituencies) to convey the findings that will be in the Benchmark I Review Brief. The commission visitor then invites the participants to ask questions, comment on the findings, and/or correct any inaccuracies. The commission visitor may respond to questions but not make judgments of whether the program is in compliance with the Educational Policy and Accreditation Standards, because that judgment rests with the COA.

The commission visitor should remind the program that the findings, along with the program's response to the Benchmark I Review Brief, are reviewed by the COA before making a decision about compliance. The commission visitor should explicitly inform the institution and program that the COA will notify them of its decision about program compliance and concerns, and that it is possible that the COA's analysis will differ from that of the commission visitor.

After the visit has concluded, contact between the program and commission visitor should end. If the program has additional questions or comments after the visit, the program should contact its accreditation specialist or associate.

### **Emergencies or Questions During the Commissioner Visit**

The commission visitor or the program's chief administrator may call the OSWA director at any time during the commissioner visit to clarify an accreditation standard or procedure. This includes any concerns about boundary issues pertaining to the commission visitor. Should an emergency arise requiring a commission visitor to leave the visit early, OSWA staff should be notified immediately.

### **3.3.9 Commission Visitor Completion of the Benchmark I Review Brief**

The Benchmark I Review Brief form is a tool used to guide the program in writing a complete Benchmark I document and by the commission visitor to review the program for compliance with Benchmark I and make a recommendation to the COA. Section 2 lists each accreditation standard and related educational policy under “Compliance with the Following Accreditation Standards” in Benchmark I. Section 3 lists each accreditation standard and related educational policy under “Draft of the Following Accreditation Standards” in Benchmark I. The Compliance Statement column in each section lists the related compliance statement from the Compliance, Concern, and Noncompliance Statements.

#### **Commission Visitor Reporting of Findings**

In the C/NC column of section 2 the commission visitor types “compliance” or “noncompliance” next to each compliance statement to report how well the program meets and addresses each item. The commission visitor indicates her or his reasoning in the Comments column for any compliance statement marked noncompliance. In section 4 of the Benchmark I Review Brief the commission visitor recommends a decision to the COA, lists areas of noncompliance with the corresponding accreditation standard, and writes a brief discussion of the problem and how the program can fix it.

Information about when the Benchmark I Review Brief is due and where it should be sent is on the Timetable for Candidacy—2008 EPAS.

### **3.3.10 Program Response to the Benchmark I Review Brief**

The program is required to submit a response to the Benchmark I Review Brief within 2 weeks of receiving the brief. The response must include the name and state of the program visited, the program level visited, the name of the commission visitor, and the date of the response.

The program should list each commissioner visit finding and clearly state whether it agrees or disagrees with the finding, correct any errors of fact, and clarify information the program thinks may have been incorrectly understood by the commission visitor. Disagreements with the Benchmark I Review Brief visit should be stated clearly and additional documentation should be provided if necessary.

Information about when the program’s response to the Benchmark I Review Brief is due and where it should be sent is on the Timetable for Candidacy—2008 EPAS.

### **3.3.11 COA Decisions for Commissioner Visit I**

After reviewing the program’s Benchmark I document, the Benchmark I Review Brief submitted by the commissioner making Commission Visit I (including the commissioner’s

recommendation), and the program's response to the Benchmark I Review Brief, the COA makes one of three decisions:

1. **Grant Candidacy Status.** The COA finds that the program is in compliance with Benchmark I and grants the program candidacy status. The decision letter instructs the program to prepare Benchmark II in preparation for its Commissioner Visit II. A commissioner will contact the program to arrange the visit.
2. **Defer a Decision on Candidacy Status to the Next Meeting and Request Clarifying Information.** The COA decides to defer a decision when the program's documentation is insufficient to make a decision. A deferral is for one meeting only. Before the next commission meeting the program is expected to submit the documentation or clarification necessary for the COA to make a decision.
3. **Deny Candidacy Status.** A program is denied candidacy if the COA finds the program's Benchmark I document to be inadequate. The program has two options in response to the decision: (1) to accept the decision and apply for candidacy by submitting a Benchmark I document or (2) to appeal by requesting a reconsideration of the decision. The program must notify their accreditation specialist or associate in writing which option it intends to pursue. If the program accepts the decision it may submit a Benchmark I document and apply for candidacy status no earlier than the second COA meeting following the one at which the COA made its decision.

## 3.4 BENCHMARK II — CANDIDACY

### 3.4.1 Writing the Benchmark II Document

The Benchmark II document should be divided into three volumes as described below.

#### **Volume 1 – Educational Policy and Accreditation Standards (EPAS)**

##### ***Section 1-Compliance Accreditation Standards***

The first section of volume 1 contains a series of narratives that demonstrate the program's compliance with the first portion of Benchmark II. This portion of Benchmark II, labeled "Benchmark II—Compliance with the Following Accreditation Standards," consists of specific accreditation standards the program must be in compliance with during Commissioner Visit II. The commissioner uses this section to make a recommendation to the full COA.

##### ***Section 2-Draft Accreditation Standards***

The second section of volume 1 contains a series of draft narratives that address the second portion of Benchmark II. This portion of Benchmark II, which is shaded and labeled "Benchmark II--Draft of the Following Accreditation Standards," consists of specific standards that must be

addressed in draft form during Commissioner Visit II. The commissioner consults with the program on how to develop this section further for their Benchmark III document and Commissioner Visit III.

#### **Format**

Each accreditation standard should be addressed in a separate narrative headed by the number and full text of each standard for easy identification by the COA reader. Programs should refer to the compliance column of the Compliance, Concern, and Noncompliance Statements while writing Volume I of the Benchmark II document. It explains the minimum requirements for completely and clearly meeting an accreditation standard and related educational policy and why the COA would cite either as an area of concern or noncompliance.

#### **Volume 2 – Syllabi**

Volume two contains the program’s course syllabi.

#### **Volume 3 – Supporting Documentation**

Volume three is the appendix and contains a draft of the field education manual, the final version of the student handbook, and any other supporting documentation.

#### **Submission of the Benchmark II Document**

The Benchmark II Document is submitted 1 month before the commissioner visit (see the Timetable for Candidacy—2008 EPAS for submission instructions).

### **3.4.2 Program Completion of the Benchmark II Review Brief**

The Benchmark II Review Brief form is a tool used to guide the program in writing a complete Benchmark II document and by the commission visitor to review the program for compliance with Benchmark II and to make a recommendation to the COA. In the Location column of sections 2 and 3, the program indicates the document name and page number where each compliance statement is addressed in the program’s Benchmark II document. See the Timetable for Candidacy—2008 EPAS for submission instructions.

### **3.4.3 Benchmark II**

#### **Benchmark II—Compliance With the Following Accreditation Standards:**

<b>2. <i>Explicit Curriculum</i></b>	
>> <b>Submit all syllabi in Volume 2.</b> <i>Accreditation Standard B2.0—Curriculum</i> The 10 core competencies are used to design the professional curriculum.	
B2.0.5	The program describes and explains how its curriculum content (knowledge, values, and skills) implements the operational definition of each of its competencies.

<i>Accreditation Standard M2.0—Curriculum</i>	
The 10 core competencies are used to design the foundation and advanced curriculum. The advanced curriculum builds on and applies the core competencies in an area(s) of concentration.	
M2.0.6	The program describes and explains how its curriculum content (relevant theories and conceptual frameworks, values, and skills) implements the operational definition of each of its competencies.
<i>Accreditation standard 2.1-Field Education</i>	
The program discusses how its field education program	
2.1.1	The program connects the theoretical and conceptual contribution of the classroom with the practice setting, fostering the implementation of evidence-informed practice.
<b>3. Implicit Curriculum</b>	
<i>Accreditation Standard 3.2-Student Development: Admissions; Advisement. Retention, and Termination; and Student Participation</i>	
Admissions	
<b>&gt;&gt; Submit the student handbook in Volume 3.</b>	
B3.2.1	The program identifies the criteria it uses for admission.
M3.2.1	The program identifies the criteria it uses for admission. The criteria for admission to the master's program must include an earned bachelor's degree from a college or university accredited by a recognized regional accrediting association.
3.2.2	The program describes the process and procedures for evaluating applications and notifying applicants of the decision and any contingent conditions associated with admission.
M3.2.3	BSW graduates entering MSW programs are not to repeat what has been mastered in their BSW programs. MSW programs describe the policies and procedures used for awarding advanced standing. These policies and procedures should be explicit and unambiguous. Advanced standing is awarded only to graduates holding degrees from baccalaureate social work programs accredited by CSWE, those recognized through its International Social Work Degree Recognition and Evaluation Service, or covered under a memorandum of understanding with international social work accreditors.
3.2.4	The program describes its policies and procedures concerning the transfer of credits.
3.2.5	The program submits its written policy indicating that it does not grant social work course credit for life experience or previous work experience. The program documents how it informs applicants and other constituents of this policy.
Advisement, retention, and termination	
3.2.6	The program describes its academic and professional advising policies and procedures. Professional advising is provided by social work program faculty, staff, or both.
3.2.7	The program spells out how it informs students of its criteria for evaluating their academic and professional performance, including policies and



	procedures for grievance.
3.2.8	The program submits its policies and procedures for terminating a student's enrollment in the social work program for reasons of academic and professional performance.
<b>Student participation</b>	
3.2.9	The program describes its policies and procedures specifying students' rights and responsibilities to participate in formulating and modifying policies affecting academic and student affairs.
3.2.10	The program demonstrates how it provides opportunities and encourages students to organize in their interests.
<b>Accreditation Standard 3.3—Faculty</b>	
M3.3.3	The master's social work program identifies no fewer than six full-time faculty with master's degrees in social work from a CSWE-accredited program and whose principal assignment is to the master's program. The majority of the full-time master's social work program faculty has a master's degree in social work and a doctoral degree preferably in social work. <i>&gt;&gt; Five faculty at Commissioner Visit II (6 at CV III).</i>
3.3.4	The program describes its faculty workload policy and discusses how the policy supports the achievement of institutional priorities and the program's mission and goals.
<b>Accreditation Standard 1.4-Administrative Structure</b>	
3.4.1	The program describes its administrative structure and shows how it provides the necessary autonomy to achieve the program's mission and goals.
3.4.2	The program describes how the social work faculty has responsibility for defining program curriculum consistent with the Educational Policy and Accreditation Standards and the institution's policies.
3.4.3	The program describes how the administration and faculty of the social work program participate in formulating and implementing policies related to the recruitment, hiring, retention, promotion, and tenure of program personnel.
<b>Accreditation Standard 3.5-Resources</b>	
3.5.1	The program describes the procedures for budget development and administration it uses to achieve its mission and goals. The program submits the budget form to demonstrate sufficient and stable financial supports that permit program planning and faculty development.
3.5.4	The program submits the library form to demonstrate comprehensive library holdings and/or electronic access and other informational and educational resources necessary for achieving its mission and goals.
3.5.5	The program describes and demonstrates sufficient office and classroom space and/or computer-mediated access to achieve its mission and goals.
3.5.6	The program describes its access to assistive technology, including materials in alternative formats (e.g., Braille, large print, books on tape, assistive learning systems).
<b>4. Assessment</b>	
<b>Accreditation Standard 4.0—Assessment</b>	
4.0.1	The program presents its plan to assess the attainment of its competencies.

	The plan specifies procedures, multiple measures, and benchmarks to assess the attainment of each of the program's competencies (AS B2.0.3; AS M2.0.4).
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## Benchmark II — Draft of the Following Accreditation Standards

<b>2. Explicit Curriculum</b>	
<i>Accreditation Standard 2.1—Field Education</i>	
<b>&gt;&gt; Submit a draft of the field education manual in Volume 3.</b>	
The program discusses how its field education program	
B2.1.2	The program provides generalist practice opportunities for students to demonstrate the core competencies.
M2.1.2	The program provides advanced practice opportunities for students to demonstrate the program's competencies.
2.1.3	The program provides a minimum of 400 hours of field education for baccalaureate programs and 900 hours for master's programs.
2.1.4	The program admits only those students who have met the program's specified criteria for field education.
2.1.5	The program specifies policies, criteria, and procedures for selecting field settings; placing and monitoring students; maintaining field liaison contact with field education settings; and evaluating student learning and field setting effectiveness congruent with the program's competencies.
2.1.6	The program specifies the credentials and practice experience of its field instructors necessary to design field learning opportunities for student to demonstrate program competencies. Field instructors for baccalaureate students hold a baccalaureate or master's degree in social work from a CSWE-accredited program. Field instructors for master's students hold a master's degree in social work from a CSWE-accredited program. For cases in which a field instructor does not hold a CSWE-accredited social work degree, the program assumes responsibility for reinforcing a social work perspective and describes how this is accomplished.
2.1.7	The program provides orientation, field instruction training, and continuing dialog with field education settings and field instructors.
2.1.8	The program develops policies regarding field placements in an organization in which the student is also employed. To ensure the role of student as learner, student assignments and field education supervision are not the same as those of the student's employment.
<b>3. Implicit Curriculum</b>	
<i>Accreditation Standard 3.1—Diversity</i>	
3.1.1	The program describes the specific and continuous efforts it makes to provide a learning environment in which respect for all persons and understanding of diversity and difference are practiced.
3.1.2	The program describes how its learning environment models affirmation and respect for diversity and difference.
3.1.3	The program discusses specific plans to improve the learning environment to affirm and support persons with diverse identities.

<i>Accreditation Standard 3.3—Faculty</i>	
3.3.1	The program identifies each full and part-time social work faculty member and discusses her/his qualifications, competence, expertise in social work education and practice, and years of service to the program. Faculty who teach social work practice courses have a master's degree in social work from a CSWE-accredited program and at least two years of social work experience.
3.3.2	The program discusses how faculty size is commensurate with the number and type of curricular offerings in class and field; class size; number of students; and the faculty's teaching, scholarly, and service responsibilities. To carry out the ongoing functions of the program, the full-time equivalent faculty-t-student ratio is usually 1:25 for baccalaureate programs and 1:12 for master's programs.
M3.3.3	The master's social work program identifies no fewer than six full-time faculty with master's degrees in social work from a CSWE-accredited program and whose principal assignment is to the master's program. The majority of the full-time master's social work program faculty has a master's degree in social work and a doctoral degree preferably in social work. <i>&gt;&gt; Six faculty at Commissioner Visit III</i>
3.3.5	Faculty demonstrate ongoing professional development as teachers, scholars, and practitioners through dissemination of research and scholarship, exchanges with external constituencies such as practitioners and agencies, and through other professionally relevant creative activities that support the achievement of institutional priorities and the program's mission and goals.
3.3.6	The program describes how its faculty models the behavior and values of the profession in the program's educational environment.
<i>Accreditation Standard 3.5—Resources</i>	
3.5.2	The program describes how it uses resources to continuously improve the program and address the challenges in the program's context.
3.5.3	The program demonstrates sufficient support staff, other personnel and technological resources to support itself.
<b>4. Assessment</b>	
<i>Accreditation Standard 4.0—Assessment</i>	
4.0.2	The program provides evidence of ongoing data collection and analysis and discusses how it uses assessment data to affirm and/or make changes in the explicit and implicit curriculum to enhance student performance.
4.0.3	The program identifies any changes in the explicit and implicit curriculum based on the analysis of the assessment data.
4.0.4	The program describes how it makes its constituencies aware of its assessment outcomes.
4.0.5	The program appends the summary data for each measure used to assess the attainment of each competency for at least one academic year prior to the submission of the self study.

### **3.4.4 Commissioner Visit II**

The commission visitor's primary task is to discuss the Benchmark II document and identify areas of compliance and noncompliance in the first part of the Benchmark II document. The visitor will also ask the program whether there have been any changes since the last visit and determine whether any of those changes affect the program's compliance.

The visitor also reviews the draft standards in the second part of the Benchmark II document and identifies areas of further development that the program can use in writing the compliance section of Benchmark III.

#### **Qualifications**

Commissioner Visit II is conducted by a current or recently retired member of the COA. Commissioners have a minimum of 5 years of teaching experience and have been experienced site visitors prior to serving on the COA.

#### **Selecting the Commission Visitor**

The director of OSWA and site visit coordinator select a commissioner to make Commissioner Visit II. The commission visitor contacts the program to arrange a date for the visit and lets the site visit coordinator know when the visit will occur. Commissioner visits for programs on the February agenda take place between September 1 and November 15, on the June agenda between December 1 and February 28, and on the October agenda between March 1 and May 31.

#### **Program Preparation for the Commissioner Visit**

The program director should communicate with the commission visitor about arrangements such as travel plans, work space requirements in the hotel and on campus, and the schedule for the commissioner visit. The program's chief administrator or designee should confirm all arrangements with the commission visitor in writing. Programs are to provide prepaid airline tickets and should consult with the commission visitor about the most convenient airline carrier and flight times. Coach fare is expected. The program should also inform the commission visitor about transportation from the airport to the campus.

The commission visitor should be housed in a hotel, not in a dormitory or other campus housing. The program should make arrangements with the hotel to pay the bill, minus any of the commission visitor's personal expenses, directly. Hotel accommodations should be arranged so that the commission visitor has a place to work on the Benchmark II Review Brief.

Ground transportation and meals not taken at the hotel are likely to be out-of-pocket expenses for the commission visitor, and the program should inform the commission visitor how reimbursement for these expenses will be managed.

**Communication Guidelines**

The program director is the person responsible for all communication with the commission visitor. Faculty members, students, or others should not communicate with the commission visitor before the arrival on campus, nor after the arrival until the appointed time in the commissioner visit schedule. Constituent groups desiring to meet with the commission visitor should request that the program's chief administrator arrange time on the commissioner visit agenda. It is inappropriate for the commission visitor to receive anonymous documents, telephone calls, or other similar information. The commission visitor is instructed to discuss any such incidents with the program's chief administrator and to refuse written or verbal information that cannot be shared openly.

**Commission Visitor Arrival**

During the first evening the commission visitor works alone to prepare for the visit. The program director may meet with the commission visitor to extend a brief welcome, explain the schedule, answer any questions, and outline the arrangements to escort them to the campus. During the commissioner visit evenings are reserved for the commission visitor to work on the Benchmark II Review Brief and prepare for the exit interview. No social events should be planned for the commission visitor.

**Meeting With the Institutional Administrators**

The commissioner visit should begin with a meeting with the institution's chief executive officer and other institutional administrators. The program director should escort the commission visitor to the office of the chief executive officer of the institution and, after introductions, permit the commission visitor to meet alone with the chief executive officer. The purpose of this meeting is to explain the accreditation process, learn more about the role and place of the program within the institution's system, and answer questions from the president or chancellor. When it is impossible to meet with the institution's chief executive officer, it is acceptable to meet with his or her designee.

**Meetings With the Social Work Program**

The schedule may also include meetings with the program director, faculty members, the director of the field practicum, field instructors, students, librarians, and other individuals whose presence is relevant (such as of faculty concerned with ethnic or gender issues) to Benchmark II.

The COA does not require or recommend dismissing classes during the commissioner visit. It is expected that the schedule be planned to permit participation by all constituents without disrupting the academic schedule.

### **Additional Materials**

If the program provides additional information to the commission visitor during the visit, three copies of those materials must be sent to the program's accreditation specialist or associate.

### **Exit Interview**

The commission visitor holds an exit interview, open to the people who met with the commission visitor during the visit (institutional administrators, program leadership, faculty, students, and other constituencies) to convey the findings that will be in the Benchmark II Review Brief. The commission visitor then invites the participants to ask questions, comment on the findings, and/or correct any inaccuracies. The commission visitor may respond to questions but not make judgments of whether the program is in compliance with the Educational Policy and Accreditation Standards, because that judgment rests with the COA.

The commission visitor should remind the program that the findings, along with the program's response to the Benchmark II Review Brief, are reviewed by the COA before making a decision about compliance. The commission visitor should explicitly inform the institution and program that the COA will notify them of its decision about program compliance and concerns, and that it is possible that the COA's analysis will differ from that of the commission visitor.

After the visit has concluded, contact between the program and commission visitor should end. If the program has additional questions or comments after the visit, the program should contact its accreditation specialist or associate.

### **Emergencies or Questions During the Commissioner Visit**

The commission visitor or the program's chief administrator may call the OSWA director at any time during the commissioner visit to clarify an accreditation standard or procedure. This includes any concerns about boundary issues pertaining to the commission visitor. Should an emergency arise requiring a commission visitor to leave the visit early, OSWA staff should be notified immediately.

## **3.4.5 Commission Visitor Completion of the Benchmark II Review Brief**

The Benchmark II Review Brief form is a tool used to guide the program in writing a complete Benchmark II document and by the commission visitor to review the program for compliance with Benchmark II and to make a recommendation to the COA. Section 2 lists each accreditation standard and related educational policy under "Compliance with the Following Accreditation Standards" in Benchmark II. Section 3 lists each accreditation standard and related educational policy under "Draft of the Following Accreditation Standards" in Benchmark II. The Compliance Statement column in either section lists the related compliance statement from the Compliance, Concern, and Noncompliance Statements.

### **Commission Visitor Reporting of Findings**

In the C/NC column of section 2 the commission visitor types “compliance” or “noncompliance” next to each compliance statement, to report how well the program meets and addresses each item. The commission visitor indicates her or his reasoning in the Comments column for any compliance statement marked noncompliance. In section 4 of the Benchmark II Review Brief the commission visitor recommends a decision to the COA, lists areas of noncompliance with the corresponding accreditation standard, and writes a brief discussion of the problem and how the program can fix it.

Information about when the Benchmark II Review Brief is due and where it should be sent is on the Timetable for Candidacy—2008 EPAS.

### **3.4.6 Program Response to the Benchmark II Review Brief**

The program is required to submit a response to the Benchmark II Review Brief within 2 weeks of receiving the brief. The response must include the name and state of the program visited, the program level visited, the name of the commission visitor, and the date of the response.

The program should list each commissioner visit finding and clearly state whether it agrees or disagrees with the finding, correct any errors of fact, and clarify information it thinks may have been incorrectly understood by the commission visitor. Disagreements with the Benchmark II Review Brief visit should be stated clearly and additional documentation should be provided if necessary.

Information about when the program’s response to the Benchmark II Review Brief is due and where it should be sent is on the Timetable for Candidacy—2008 EPAS.

### **3.4.7 COA Decisions for Commissioner Visit II**

After reviewing the program’s Benchmark II document, the Benchmark II Review Brief submitted by the commissioner making Commission Visit II (including the commissioner’s recommendation), and the program’s response to Benchmark II Review Brief, the COA makes one of three decisions:

1. **Grant a Second Year of Candidacy Status.** The COA finds that the program is in compliance with Benchmark II and grants the program a second year in candidacy. The decision letter instructs the program to prepare Benchmark III in preparation for its Commissioner Visit III. A commissioner will contact the program to arrange the visit.
2. **Defer a Decision on a Second Year of Candidacy Status and Request Clarifying Information.** The COA decides to defer a decision when the program’s documentation is insufficient to make a decision. A deferral is for one meeting only. Before the next

commission meeting the program is expected to submit the documentation or clarification necessary for the COA to make a decision.

3. **Remove From Candidacy Status.** A program is removed from candidacy status if the COA finds the program's Benchmark II document to be inadequate. The program has two options in response to the decision: (1) to accept the decision and apply for candidacy by submitting a Benchmark I document or (2) to appeal by requesting a reconsideration of the decision. The program must notify its accreditation specialist or associate in writing which option it intends to pursue. If the program accepts the decision, it may submit a Benchmark I document and apply for candidacy status no earlier than the second COA meeting following the one at which the COA made its decision.



## 4 Initial Accreditation

### 4.1 INTRODUCTION

Italicized documents or forms in this section can be found on the CSWE Web site at [www.cswe.org/Accreditation/Candidacy.aspx](http://www.cswe.org/Accreditation/Candidacy.aspx).

#### 4.1.1 Benchmark Model and Initial Accreditation Overview

The benchmark model (as described in section 4) is a systematic, incremental approach to developing a social work program and writing a comprehensive self-study. The term self-study refers to the program's process of self-examination during the creation of the self-study, as well as the self-study document itself.

##### **Benchmark III**

Benchmark III contains the final group of accreditation standards the program must be in compliance with to receive initial accreditation. These standards were submitted, in draft form, in the Benchmark II document.

##### **Benchmark III Document**

Like the previous benchmarks, Volume I contains a series of narratives that demonstrate the program's compliance with EPAS. In the Benchmark III document however, the program assembles the narratives from the compliance sections of Benchmarks I, II, and III to create a self-study.

##### **Commissioner Visit III**

The commission visitor's primary task is to discuss the Benchmark III document and full self-study and identify areas of compliance and noncompliance with Benchmark III. The commissioner also reviews the self-study with the program, discussing any program changes and their effect on compliance with the standards that were covered in Commissioner Visits I and II.

##### **Commission on Accreditation (COA) Review**

In deciding whether a program should receive initial accreditation the COA reviews the

- accreditation standards in Benchmark III,
- Benchmark III Review Brief submitted by the commissioner who conducted Commission Visit III (including the commissioner's recommendation), and
- the program's response to the Benchmark III Review Brief.

### 4.1.2 Compliance, Concern, and Noncompliance Statements

The COA uses the Compliance, Concern, and Noncompliance Statements as a guide to consistent and complete review of a program's candidacy or reaffirmation of accreditation. Statements of compliance, concern, and noncompliance are provided for each accreditation standard (AS) and related educational policy (EP).

Each benchmark has a corresponding Benchmark Review Brief form that lists the accreditation standards the program must be in compliance with and the related compliance statement from the Compliance, Concern, and Noncompliance Statements. The commission visitor uses the brief to evaluate the program's compliance with the benchmark and make a recommendation to COA.

### 4.1.3 Timetable for Candidacy

The Timetable for Candidacy—2008 EPAS provides a detailed chronological list of accreditation fees, materials, and activities, with the deadline, number and kind of copies needed, and who should receive them as the program progresses through obtaining candidacy, completing candidacy, and receiving initial accreditation. Be sure to use the timetables marked 2008 EPAS

There are three versions of the Timetable for Candidacy—2008 EPAS with dates that correspond to the February, June, and October COA meetings held each year. Once the program has been assigned an agenda, select the corresponding Timetable for Candidacy—2008 EPAS (February, June, October) on the Web site, then go to the last row of the first page and insert the year the program was reviewed for candidacy in the middle column next to "Commission Review for Candidacy." That is when the COA decided whether the program was in compliance with Benchmark I and whether it should be granted candidacy. From there, work up to the top of the page and fill in the year for each step in the candidacy process. Contact your accreditation specialist or associate if you have any questions or need assistance.

### 4.1.4 Candidacy Policies

#### Student Admission

Only students admitted during or after the academic year in which the program is granted candidacy will be recognized as having graduated from an accredited program. Students admitted prior to the academic year in which the program was granted candidacy will not be recognized as having graduated from a CSWE-accredited social work education program.

#### Foundation Content and Advanced Content for MSW Programs

Programs in candidacy must develop and offer foundation content and advanced content for the master's program. They cannot offer an advanced-standing only program.

**Delivery of the Curriculum**

All means of delivery of the curriculum (part-time, distance education off-site or online) being implemented, currently or planned in the near future, should be included in the Benchmark I document.

**Failure to Submit**

If a program fails to submit a Benchmark document by the due date, the COA may remove the program from candidacy or deny initial accreditation.

## **4.2 INITIAL ACCREDITATION ELIGIBILITY**

### **4.2.1 Initial Accreditation Eligibility Application**

Initial accreditation eligibility standards 1 through 6 are the same as candidacy eligibility standards 1 through 6. Rather than writing the same material a second time, the program reviews the Candidacy Eligibility Application, submitted when applying for candidacy, to assess whether any of the information has changed. If there are changes the program submits updated Candidacy Eligibility Application and Authorization of Program Review forms.

The rest of the initial accreditation eligibility standards are different for baccalaureate and master's programs and require different documentation, as noted in the standards and on the Baccalaureate Initial Accreditation Eligibility Application and Master's Initial Accreditation Eligibility Application forms. Both forms list each eligibility standard, ask a series of simple questions, and/or require the submission of materials to determine compliance.

Information about when the Initial Accreditation Eligibility Application is due and where it should be sent is on the Timetable for Candidacy—2008 EPAS.

### **4.2.2 Baccalaureate Initial Accreditation Eligibility Standards**

#### **Eligibility Standards 1–6**

When the program applied for candidacy it submitted a Candidacy Eligibility Application and Authorization of Program Review form. The Candidacy Eligibility Application required the program to address six eligibility standards. To determine eligibility for initial accreditation, the program is required to review the six eligibility standards it addressed in the Candidacy Eligibility Application for changes that may have occurred. If there have been any changes, the program must submit updated Candidacy Eligibility Application and Authorization of Program Review forms.

**Eligibility Standard 7**

The institution identifies and describes the social work program in its catalog or similar publication. Program purposes and requirements are specified. The same document specifies the educational level(s) of the program(s) for which CSWE accreditation has been received or is being sought.

**Eligibility Standard 8**

The institutional transcript for students who complete the accredited social work program confirms that a major in social work was completed and a baccalaureate degree awarded.

**4.2.3 Master's Initial Accreditation Eligibility Standards****Eligibility Standards 1–6**

When the program applied for candidacy it submitted a Candidacy Eligibility Application and Authorization of Program Review form. The Candidacy Eligibility Application required the program to address six eligibility standards. To determine eligibility for initial accreditation, the program is required to review the six eligibility standards it addressed in the Candidacy Eligibility Application for changes that may have occurred. If there have been any changes, the program must submit updated Candidacy Eligibility Application and Authorization of Program Review forms.

**Eligibility Standard 7**

The institution identifies and describes the program in its catalog or similar publication. Program purposes and requirements are specified. The same document specifies the educational level(s) of the program(s) for which CSWE accreditation has been received or is being sought.

**Eligibility Standard 8**

The educational institution provides its organizational chart to document the position of the social work program in the governance structure of the institution and to demonstrate its comparable position relative to other professional education programs offered by the institution.

**Eligibility Standard 9**

The institution must ensure that the master's program in social work can be completed in 2 calendar years of full-time study. To meet requirements for the master's degree a program may also provide a maximum of 4 calendar years of structured part-time professional education, comprising all course work, papers or projects, and the field practicum.

## 4.3 BENCHMARK III

### 4.3.1 Writing the Benchmark III Document

The Benchmark III document should be divided into three volumes as described below. Like the previous benchmarks, Volume I contains a series of narratives that demonstrate the program's compliance with EPAS. In the Benchmark III document however, the program assembles the narratives from the compliance sections of Benchmarks I, II, and III to create a self-study.

#### **Volume 1 – Educational Policy and Accreditation Standards (EPAS)**

##### **1. Section One**

*Accreditation Review Brief.* The Accreditation Review Brief should be included in the beginning of volume one. During Commissioner Visit III the Accreditation Review Brief is used as a tool for the commission visitor to locate content on each accreditation standard within the Initial Accreditation Self Study. In the Location column of section 2, the program indicates the document name and page number where each compliance statement for an accreditation standard is addressed. In section 1 the program completes identifying information. The rest of the form is not used by the program.

*Narrative for Accreditation Standards in Benchmarks I and II.* Review the narratives in the compliance portions of Benchmarks I and II for accuracy; update as necessary; and order them by AS (see Format for Volume 1 below). Complete the Program Expense Budget form and include it near the narrative for AS 3.5.1, as well as the Librarian's Report form and include it near the narrative for AS 3.5.4

##### **2. Section Two**

*Benchmark III Review Brief.* The Benchmark III Review Brief should be included in the beginning of section two of the Benchmark III document. In the Location column of the brief in sections 2 and 3, the program indicates the document name and page number where each compliance statement is addressed.

*Narrative for Accreditation Standards in Benchmark III.* The rest of section two should be comprised of a series of narratives that demonstrate the program's compliance with the remaining accreditation standards in Benchmark III (see Format for Volume 1 below).

##### **Format for Volume 1**

Each accreditation standard should be addressed in a separate narrative headed by the number and full text of each standard for easy identification by the COA reader. Programs should refer to the compliance column of the Compliance, Concern, and Noncompliance Statements while writing Volume I of the Benchmark III document. It explains the minimum requirements for completely and clearly meeting an accreditation standard and related educational policy and why COA would cite either as an area of concern or noncompliance.

## Volume 2 – Syllabi

Volume two contains the program’s course syllabi.

## Volume 3 – Supporting Documentation

Volume three is the appendix and contains the field education manual, the student handbook, and any other supporting documentation not already included in Volume 1.

### 4.3.2 Program Completion of the Benchmark III Review Brief

The Benchmark III Review Brief form is a tool used to guide the program in writing a complete Benchmark III document and by the commission visitor to review the program for compliance with Benchmark III and to make a recommendation to the COA. In the Location column of sections 2 and 3, the program indicates the document name and page number where each compliance statement is addressed in the program’s Benchmark III document. See the Timetable for Candidacy—2008 EPAS for submission instructions.

### 4.3.3 Benchmark III

#### Benchmark III-Compliance With the Following Accreditation Standards:

<b>2. Explicit Curriculum</b>	
<i>Accreditation Standard 2.1-Field Education</i>	
<b>&gt;&gt; Submit the field education manual Volume 3.</b>	
The program discusses how its field education program	
B2.1.2	The program provides generalist practice opportunities for students to demonstrate the core competencies
M2.1.2	The program provides advanced practice opportunities for students to demonstrate the program's competencies.
2.1.3	The program provides a minimum of 400 hours of field education for baccalaureate programs and 900 hours for master's programs.
2.1.4	The program admits only those students who have met the program's specified criteria for field education.
2.1.5	The program specifies policies, criteria, and procedures for selecting field settings; placing and monitoring students; maintaining field liaison contacts with field educational settings; and evaluating student learning and field setting effectiveness congruent with the program's competencies.
2.1.6	The program specifies the credentials and practice experience of its field instructors necessary to design field learning opportunities for students to demonstrate program competencies. Field instructors for baccalaureate students hold a baccalaureate or master's degree in social work from a CSWE-accredited program. Field instructors for master's students hold a master's degree in social work from a CSWE-accredited program. For cases in which a field instructor does not hold a CSWE-accredited social work degree, the program assumes responsibility for reinforcing a social work perspective and describes how this is accomplished.

2.1.7	The program provides orientation, field instruction training, and continuing dialog with field education settings and field instructors.
2.1.8	The program develops policies regarding field placements in an organization in which the student is also employed. To ensure the role of student as learner, student assignments and field education supervision are not the same as those of the student's employment
<b>3. Implicit Curriculum</b>	
<i>Accreditation Standard 3.1—Diversity</i>	
3.1.1	The program describes the specific and continuous efforts it makes to provide a learning environment in which respect for all persons and understanding of diversity and difference are practiced.
3.1.2	The program describes how its learning environment models affirmation and respect for diversity and difference.
3.1.3	The program discusses specific plans to improve the learning environment to affirm and support persons with diverse identities.
<i>Accreditation Standard 3.3—Faculty</i>	
3.3.1	The program identifies each full and part-time social work faculty member and discusses her/his qualifications, competence, expertise in social work education and practice, and years of service to the program. Faculty who teach social work practice courses have a master's degree in social work from a CSWE-accredited program and at least two years of social work practice experience.
3.3.2	The program discusses how faculty size is commensurate with the number and type of curricular offerings in class and field; class size; number of students; and the faculty's teaching, scholarly, and service responsibilities. To carry out the ongoing functions of the program, the full-time equivalent faculty-to-student ratio is usually 1:25 for baccalaureate programs and 1:12 for master's programs.
M3.3.3	The master's social work program identifies no fewer than six full-time faculty with master's degrees in social work from a CSWE-accredited program and whose principal assignment is to the master's program. The majority of the full-time master's social work program faculty has a master's degree in social work and a doctoral degree preferably in social work. >> <i>Six faculty at Commissioner Visit III.</i>
3.3.4	The program describes its faculty workload policy and discusses how the policy supports the achievement of institutional priorities and the program's mission and goals.
3.3.5	Faculty demonstrate ongoing professional development as teachers, scholars, and practitioners through dissemination of research and scholarship, exchanges with external constituents such as practitioners and agencies, and through other professionally relevant creative activities that support the achievement of institutional priorities and the program's mission and goals.
3.3.6	The program describes how its faculty models the behavior and values of the profession in the program's educational environment.
<b>3. Implicit Curriculum</b>	
<i>Accreditation Standard 3.5—Resources</i>	
3.5.2	The program describes how it uses resources to continuously improve the program

	and address challenges in the program's context.
3.5.3	The program demonstrates sufficient support staff, other personnel, and technological resources to support itself
<b>4. Assessment</b>	
<i>Accreditation Standard 4.0—Assessment</i>	
4.0.2	The program provides evidence of ongoing data collection and analysis and discusses how it uses assessment data to affirm and/or make changes in the explicit and implicit curriculum to enhance student performance.
4.0.3	The program identifies any changes in the explicit and implicit curriculum based on the analysis of the assessment data.
4.0.4	The program describes how it makes its constituencies aware of its assessment outcomes.
4.0.5	The program appends the summary data for each measure used to assess the attainment of each competency for at least one academic year prior to the submission of the self study.

## 4.4 COMMISSIONER VISIT III

### 4.4.1 Commission Visitor Qualifications and Selection

The commission visitor's primary task is to discuss the Benchmark III document and identify areas of compliance and noncompliance. The visitor will also ask the program whether there have been any changes since the last visit and determine whether any of those changes affect the program's compliance. The visitor also reviews the self-study and identifies areas of further development that the program can use in writing its next self-study.

#### Qualifications

Commissioner Visit III is conducted by a current or recently retired member of the COA. Commissioners have a minimum of 5 years of teaching experience and have been experienced site visitors prior to serving on the COA.

#### Selecting the Commission Visitor

The director of the Office of Social Work Accreditation and Educational Excellence (OSWA) and the site visit coordinator select a commissioner to make Commissioner Visit III. The commission visitor contacts the program to arrange a date for the visit and lets the site visit coordinator know when the visit will occur. Commissioner visits for programs on the February agenda take place between September 1 and November 15, on the June agenda between December 1 and February 28, and on the October agenda between March 1 and May 31.



## **4.4.2 Program Preparation for the Commissioner Visit**

### **Travel and Accommodations**

The program director should communicate with the commission visitor about arrangements such as travel plans, work space requirements in the hotel and on campus, and the schedule for the commissioner visit. The program's chief administrator or designee should confirm all arrangements with the commission visitor in writing. Programs are to provide prepaid airline tickets and should consult with the commission visitor about the most convenient airline carrier and flight times. Coach fare is expected. The program should also inform the commission visitor about transportation from the airport to the campus.

The commission visitor should be housed in a hotel, not in a dormitory or other campus housing. The program should make arrangements with the hotel to pay the bill, minus any personal expenses for the commission visitor, directly. Hotel accommodations should be arranged so that the commission visitor has a place to work on the Benchmark III Review Brief.

Ground transportation and meals not taken at the hotel are likely to be out-of-pocket expenses for the commission visitor, and the program should inform the commission visitor how reimbursement for these expenses will be managed.

### **Communication Guidelines**

The program director is responsible for all communication with the commission visitor. Faculty members, students, or others should not communicate with the commission visitor before the arrival on campus, nor after the arrival until the appointed time in the commissioner visit schedule. Constituent groups desiring to meet with the commission visitor should request that the program's chief administrator arrange time on the commissioner visit agenda. It is inappropriate for the commission visitor to receive anonymous documents, telephone calls, or other similar information. The commission visitor is instructed to discuss any such incidents with the program's chief administrator and to refuse written or verbal information that cannot be shared openly.

## **4.4.3 Commissioner Visit Schedule**

### **Commission Visitor Arrival**

During the first evening the commission visitor works alone to prepare for the visit. The program director may meet with the commission visitor to extend a brief welcome, explain the schedule, answer any questions, and outline the arrangements to escort him or her to the campus. During the commissioner visit, evenings are reserved for the commission visitor to work on the Benchmark III Review Brief and prepare for the exit interview. No social events should be planned for the commission visitor.

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### **Meeting With the Institutional Administrators**

The commissioner visit should begin with a meeting with the institution's chief executive officer and other institutional administrators. The program director should escort the commission visitor to the office of the chief executive officer of the institution and, after introductions, permit the commission visitor to meet alone with the chief executive officer. The purpose of this meeting is to explain the accreditation process, learn more about the role and place of the program within the institution's system, and answer questions from the president or chancellor. When it is impossible to meet with the institution's chief executive officer, it is acceptable to meet with his or her designee.

### **Meetings With the Social Work Program**

The schedule may also include meetings with the program director, faculty members, the director of the field practicum, field instructors, students, librarians, and other individuals whose presence is relevant (such as of faculty concerned with ethnic or gender issues) to Benchmark III.

The COA does not require or recommend dismissing classes during the commissioner visit. It is expected that the schedule be planned to permit participation by all constituents without disrupting the academic schedule.

### **Additional Materials**

If the program provides additional information to the commission visitor during the visit, three copies of those materials must be sent to the program's accreditation specialist or associate.

### **Exit Interview**

The commission visitor holds an exit interview, open to the people who met with the commission visitor during the visit (institutional administrators, program leadership, faculty, students, and other constituencies) to convey the findings that will be in the Benchmark III Review Brief. The commission visitor then invites the participants to ask questions, comment on the findings, and/or correct any inaccuracies.

The commission visitor may respond to questions but not make judgments of whether the program is in compliance with the educational Policy and Accreditation Standards, because that judgment rests with the COA. The commission visitor should remind the program that the findings, along with the program's response to the Benchmark III Review Brief, are reviewed by COA before a decision is made about compliance. The commission visitor should explicitly inform the institution and program that the COA will notify them of its decision about program compliance and concerns, and that it is possible that the COA's analysis will differ from that of the commission visitor.

After the visit has concluded, contact between the program and commission visitor should end. If the program has additional questions or comments after the visit, the program should contact its accreditation specialist or associate.

#### **4.4.4 Emergencies or Questions During the Visit**

The commission visitor or the program's chief administrator may call the OSWA director at any time during the commissioner visit to clarify an accreditation standard or procedure. This includes any concerns about boundary issues pertaining to the commission visitor. Should an emergency arise requiring a commission visitor to leave the visit early, OSWA staff should be notified immediately.

### **4.5 BENCHMARK III REVIEW BRIEF AND PROGRAM RESPONSE**

#### **4.5.1 Commission Visitor Completion of the Benchmark III Review Brief**

The Benchmark III Review Brief form is a tool used to guide the program in writing a complete Benchmark III document and by the commission visitor to review the program for compliance with Benchmark III and to make a recommendation to the COA. Section 2 lists each accreditation standard and related educational policy in Benchmark III. The Compliance Statement column lists the related compliance statement from the Compliance, Concern, and Noncompliance Statements.

##### **Commission Visitor Reporting of Findings**

In the C/NC column of section 2 the commission visitor types "compliance" or "noncompliance" next to each compliance statement to report how well the program meets and addresses each item. The commission visitor indicates her or his reasoning in the Comments column for any compliance statement marked "noncompliance." In section 3 of the Benchmark III Review Brief the commission visitor recommends a decision to the COA, lists areas of noncompliance with the corresponding accreditation standard, and writes a brief discussion of the problem and how the program can fix it.

Information about when the Benchmark III Review Brief is due and where it should be sent is on the Timetable for Candidacy—2008 EPAS.

#### **4.5.2 Program Response to the Benchmark III Review Brief**

The program is required to submit a response to the Benchmark III Review Brief within 2 weeks of receiving the brief. The response must include the name and state of the program visited, the program level visited, the name of the commission visitor, and the date of the response.

The program should list each commissioner visit finding and clearly state whether it agrees or disagrees with the finding, correct any errors of fact, and clarify information it thinks may have been incorrectly understood by the commission visitor. Disagreements with the Benchmark III Review Brief visit should be stated clearly and additional documentation should be provided if necessary.

Information about when the program's response to the Benchmark III Review Brief is due and where it should be sent is on the Timetable for Candidacy—2008 EPAS.

## 4.6 COA DECISIONS FOR COMMISSIONER VISIT III

### 4.6.1 Initial Accreditation Decisions

After reviewing the program's Benchmark III document and the Benchmark III Review Brief submitted by the commissioner who conducted Commission Visit III (including the commissioner's recommendation) and the program's response to the Benchmark III Review Brief, the COA makes one of five decisions:

1. **Grant Initial Accreditation for 4 Years.** The COA finds the program in compliance with all accreditation standards and educational policy and grants accreditation for 4 years.
2. **Grant Initial Accreditation for 4 Years with a Progress Report to be Reviewed by the Program's Accreditation Specialist or Associate.** The COA finds the program in compliance with all educational policy and accreditation standards, but identifies one or more areas of concern that must be addressed in a progress report that the program's accreditation specialist or associate will review. The COA's letter identifies specific areas of concern and a due date for the progress report.
3. **Grant Initial Accreditation for 4 Years with a Progress Report to be Reviewed by the COA.** The COA finds the program in compliance with all educational policy and accreditation standards, but identifies one or more areas of concern that must be addressed in a progress report that the COA will review. The COA's letter identifies specific areas of concern and a due date for the progress report.
4. **Defer a Decision on Initial Accreditation to the Next Meeting and Request Clarifying Information.** The COA decides to defer a decision when the program's documentation is insufficient to make a decision. A deferral is for one meeting only. Before the next commission meeting the program is expected to submit the documentation or clarification necessary for the COA to make a decision.

5. **Deny Initial Accreditation.** The COA determines that the program is out of compliance with one or more educational policies and/or accreditation standards. The COA's letter identifies specific areas of noncompliance. The program has two options in response to the decision: (1) accept the decision and apply for candidacy by submitting a Benchmark I document or (2) to appeal by requesting a reconsideration of the decision. If the program accepts the decision it may submit a Benchmark I document and apply for candidacy status no earlier than the second COA meeting following the one at which the COA made its decision.

#### 4.6.2 First Progress Report Decisions

After hearing the accreditation specialist or associate's review of the first progress report or after reviewing the first progress report itself the COA takes one of six actions, regardless of who reviewed the report:

1. **Accept the First Progress Report.** All areas of concern were addressed in the progress report, and no further action by the program is required.
2. **Request a Second Progress Report to be Reviewed by the Program's Accreditation Specialist or Associate.** The COA finds that one or more of the concerns in the first progress report are still areas of concern and requests a second progress report. The COA's letter identifies specific areas of concern and a due date for the progress report. If the second progress report is not accepted, the program is automatically placed on conditional accreditation.
3. **Request a Second Progress Report to be Reviewed by the COA.** The COA finds that one or more of the concerns in the first progress report are still areas of concern and requests a second progress report. The COA's letter identifies specific areas of concern and a due date for the progress report. If the second progress report is not accepted, the program is automatically placed on conditional accreditation.
4. **Place the Program on Conditional Accredited Status.** The COA finds the program out of compliance with one or more educational policies or accreditation standards and places it on conditional accredited status if the COA believes that noncompliance issues can be resolved by the program within 1 year. Conditional status is an adverse decision, and programs may request reconsideration. If the program accepts the COA's decision, it submits a restoration report.
5. **Initiate Withdrawal of Accredited Status.** The COA initiates withdrawal of accredited status if the program is found to be out of compliance with one or more educational policies or accreditation standards and the COA does not believe that noncompliance issues can be resolved within 1 year. The COA's letter identifies specific areas of

noncompliance and instructs the program to work with its accreditation specialist or associate to arrange for the graduation or transfer of its students and determine when the program's accreditation will be withdrawn. The decision to initiate withdrawal of accredited status is an adverse one, and programs may request reconsideration. After its official withdrawal date a program may apply for candidacy status.

6. **Order a Modified Site Visit.** If the COA believes that a program may be out of compliance with one or more educational policies or accreditation standards, the COA can order a modified site visit to collect more information. A site visitor is sent at the program's expense to review specific compliance issues. This program is reviewed at the next COA meeting after the site visit.

### 4.6.3 Second Progress Report Decisions

After hearing the accreditation specialist or associate's review of the first progress report or after reviewing the first progress report itself the COA takes one of four actions, regardless of who reviewed the report:

1. **Accept the Second Progress Report.** All areas of concern were addressed in the progress report, and no further action by the program is required.
2. **Place the Program on Conditional Accredited Status.** If the second progress report is not accepted, the program is automatically placed on conditional accreditation. Placement on conditional status is an adverse decision, and programs may request reconsideration. If the program accepts the COA's decision, it submits a restoration report.
3. **Initiate Withdrawal of Accredited Status.** The COA initiates withdrawal of accredited status if the program is found to be out of compliance with one or more educational policies or accreditation standards and the COA does not believe that noncompliance issues can be resolved within 1 year. The COA's letter identifies specific areas of noncompliance and instructs the program to work with its accreditation specialist or associate to arrange for the graduation or transfer of its students and determine when the program's accreditation will be withdrawn. The decision to initiate withdrawal of accredited status is an adverse one, and programs may request reconsideration. After its official withdrawal date a program may apply for candidacy status.
4. **Order a Modified Site Visit.** If the COA believes that a program may be out of compliance with one or more educational policies or accreditation standards, the COA can order a modified site visit to collect more information. A site visitor is sent at the program's expense to review specific compliance issues. This program is reviewed at the next COA meeting after the site visit.

#### 4.6.4 Restoration Report Decisions

When the program accepts the COA decision to place it on conditional accredited status or when the outcome of the reconsideration hearing is to uphold the COA decision (see reconsideration policy), the program must submit a restoration report. When the restoration report is received, the COA reviews it along with all previously submitted materials. The COA takes one of four actions:

1. **Restore Accredited Status.** The COA review of the program's restoration report finds that the program has taken corrective action and is in compliance with all standards. No further action is required.
2. **Restore Accredited Status and Request a Progress Report.** The request includes a due date and indicates whether the report will be reviewed by the program's accreditation specialist or associate and/or the COA.
3. **Order a Modified Site Visit.** A modified site visit is ordered when the restoration report fails to clarify program compliance. A site visitor is sent at the program's expense to review specific issues. This program is reviewed at the next COA meeting following the site visit. After its review of the site visit report, the COA either returns the program to accredited status or initiates withdrawal of its accredited status.
4. **Initiate Withdrawal of Accredited Status.** The COA initiates withdrawal of accredited status if the program is found to be out of compliance with one or more standards and the program cannot take corrective action within 1 year. The COA's letter identifies specific areas of noncompliance and instructs the program to work with its accreditation specialist or associate to determine the effective date of the withdrawal of accreditation. The decision to initiate withdrawal of accredited status is an adverse one, and the program may request reconsideration (see reconsideration policy).