



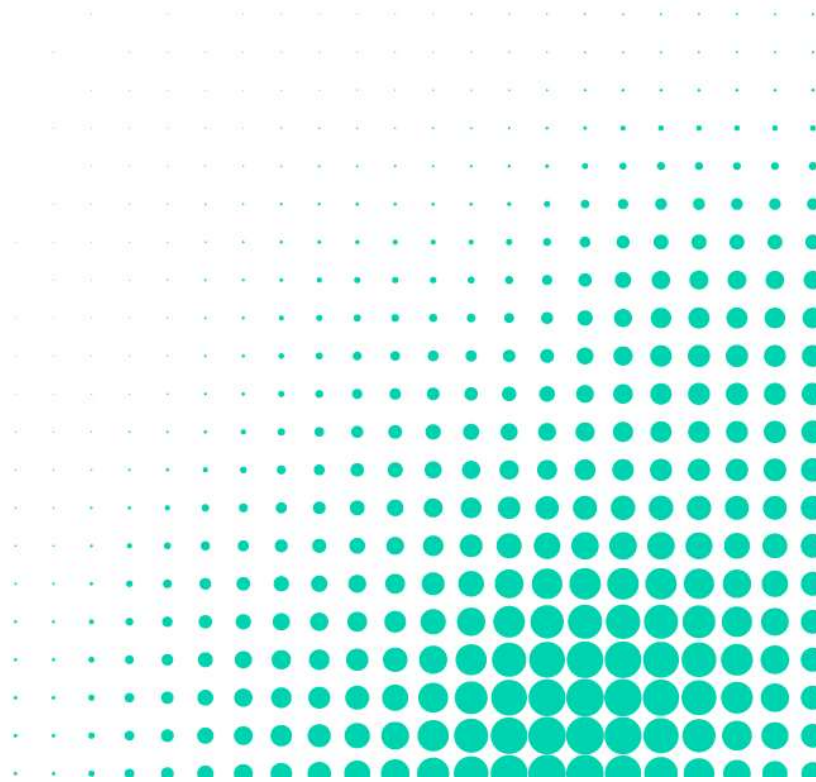
Australian Psychology Accreditation Council (APAC)

Accreditation Assessment

Summary Report

University of Canberra

5 December 2024





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University of Canberra – 2025 to 2029 Cycle

Context

Higher education provider	University of Canberra (UC)
Academic organisational unit (AOU)	Discipline of Psychology
Campus	Bruce
Assessment type	Cycle re-accreditation
Accreditation period	From 1 January 2025 to 31 December 2029
Accreditation standard	Accreditation standards for psychology programs (effective 1 January 2019, version 1.2)



Assessment timeline

Dates	Assessment activities
13/02/2023	UC attends an information session with the APAC team
01/06/2023	UC submits a Notice of Intended Application form
08/04/2024	UC submits its accreditation documentation to APAC
09/04/2024 – 06/05/2024	APAC conducts an on-paper assessment
07/05/2024	Assessment team discusses the on-paper assessment
04/06/2024 – 20/06/2024	UC submits further information
17/06/2024	Assessment team prepares for the site visit
25/06/2024 – 27/06/2024	UC hosts the site visit
29/07/2024	Accreditation Assessment Committee (AAC) endorses the draft assessment report
15/08/2024	UC receives a copy of the draft assessment report
28/08/2024	UC submits a rejoinder to the draft assessment report
28/10/2024	AAC considered the draft report after rejoinder
25/11/2024	APAC Board determines the assessment outcomes



Findings

APAC thanks UC's discipline leads, academic and professional staff, supervisors, graduates and students for their cooperation and contributions to the assessment process.

Accreditation status

Reaccredited

The following programs are re-accredited until **31 December 2029**:

Program title	Campus	Level	Sequence	Program status
Bachelor of Arts/Bachelor of Science in Psychology	Bruce	Level 1	1–3 year	Accredited with conditions
Bachelor of Business/Bachelor of Science in Psychology	Bruce	Level 1	1–3 year	Accredited with conditions
Bachelor of Politics and International Relations/Bachelor of Science in Psychology	Bruce	Level 1	1–3 year	Accredited with conditions
Bachelor of Science in Psychology	Bruce	Level 1	1–3 year	Accredited with conditions
Bachelor of Science in Psychology/Bachelor of Health Science (Human Movement)	Bruce	Level 1	1–3 year	Accredited with conditions
Bachelor of Science in Psychology/Bachelor of Laws	Bruce	Level 1	1–3 year	Accredited with conditions
Bachelor of Science in Psychology (Honours)	Bruce	Level 2	4 th year	Accredited with conditions



Program title	Campus	Level	Sequence	Program status
Doctor of Philosophy in Clinical Psychology	Bruce	Level 3–4	5–6 year	Accredited with conditions
Master of Clinical Psychology	Bruce	Level 3–4	5–6 year	Accredited with conditions

Reaccredited – in teach out

The following program is re-accredited until **31 December 2029**:

Program title	Campus	Level	Sequence	Program status
Bachelor of Science in Psychology/Bachelor of Sport and Exercise Science	Bruce	Level 1	1–3 year	Accredited with conditions

Not assessed

The following program is in teach out¹ and was not included in this cycle assessment:

¹ APAC will remove this program from its list of accredited programs and advise the Psychology Board of Australia that accreditation ends on 31/12/2024. Please note that the end of an accreditation period without subsequent renewal may adversely impact any students still enrolled in the program, particularly with regard to their registration as a psychologist upon graduation.



Program title	Campus	Level	Sequence	Program status
Bachelor of Management/Bachelor of Science in Psychology	Bruce	Level 1	1–3 year	Accredited until 31/12/2024



Summary of findings

Standard 1: Public safety is assured		
Level 1	Level 2	Level 3–4 Clinical
✓	✓	Substantially met
Standard 2: Academic governance and quality assurance processes are effective		
Level 1	Level 2	Level 3–4 Clinical
Substantially met	Substantially met	Substantially met
Standard 3: Program of study, design, delivery and resourcing enable students to achieve the required graduate competencies		
Level 1	Level 2	Level 3–4 Clinical
Substantially met	Substantially met	Substantially met
Standard 4: Students are provided with equitable and timely access to information and support		
Level 1	Level 2	Level 3–4 Clinical
Substantially met	Substantially met	Substantially met
Standard 5: Assessment is fair, reliable and valid		
Level 1	Level 2	Level 3–4 Clinical
✓	✓	Substantially met



Conditions

Further evidence is required to demonstrate the Accreditation Standards are met.

Program levels	Criteria	Issues identified	Information required	Due dates
Level 3–4	1.3	Safety	<p>Evidence demonstrating that functional duress alarms are present in the Health Hub's assessment rooms.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • certificate(s) of installation • video footage of duress alarms being triggered • logs showing intermittent testing of duress alarms in assessment rooms. 	30/11/2024
Level 3–4	1.3, 1.10	Placement supervision	<p>Evidence demonstrating that the number of internal supervisors is sufficient and that group sessions are regularly supervised.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • workload calendars and/or rosters for internal supervisors (1.10) • logbooks and/or calendar entries confirming supervised group sessions (1.3) • list of group session dates, times, and attendees (1.3, 1.10). 	13/01/2025



Program levels	Criteria	Issues identified	Information required	Due dates
Level 3–4	1.3, 1.10	Management processes	<p>Evidence demonstrating that effective management processes for internal clinical governance are in place to ensure the students' ability to practise competently and safely.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • minutes of regular meetings convened between internal placement supervisors and the Discipline's academic staff (1.10) • improvements to operational processes and practices that illustrate how actions raised in the meeting minutes are addressed (1.3) • meeting plans for internal placement supervisors and the Discipline's staff to strengthen reporting lines and illustrate how the internal clinical governance system is being implemented (1.3, 1.10). 	13/01/2025
Level 3–4	2.1, 2.5	Academic governance and support for engagement	<p>Evidence demonstrating that the Clinic Manager role is supported through appropriate time allocations and robust reporting lines.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • workload calendar showing fractions allocated to engaging psychology supervisors and the Discipline (2.5) • schedule of meetings between the Clinic, psychology supervisors and the Discipline (2.5) • actions for improvement identified and implemented following the meetings (2.1). 	13/01/2025



Program levels	Criteria	Issues identified	Information required	Due dates
All	2.1, 2.4	Academic governance arrangements	<p>Evidence demonstrating how formal academic governance and quality assurance mechanisms ensure systematic curriculum and continuous improvement reviews.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • schedule for program reviews in line with University policies and processes for development, monitoring, review, and improvement (2.1) • overview of recent unit and program reviews undertaken to confirm implementation of the review schedule (2.1) • documentation clarifying the responsibilities of the Course Coordinators and the Head of Discipline (2.1), • minutes of the meetings of the Course convenors with the teaching team (2.1.) • updates to programs following completed program reviews, which reflect contemporary developments in psychology education (2.4). 	13/01/2025
Level 3–4	2.2	Benchmarking	<p>Evidence demonstrating the range of benchmarking activities undertaken.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • benchmarking reports and outcomes relating to the benchmarking plan(s) • actions arising from benchmarking activities, including: <ul style="list-style-type: none"> ○ proposed improvements to program content and/or delivery ○ samples of implemented changes. 	30/04/2025



Program levels	Criteria	Issues identified	Information required	Due dates
All	2.3	External and internal input	<p>Evidence demonstrating a systematic and effective approach to integrating greater external input from diversity groups, e.g. Indigenous groups, into the design and management of all programs.</p> <p>Evidence may include:</p> <ul style="list-style-type: none">• formalised processes to coordinate student feedback and external input into the design and management of programs• minutes from the Course Advisory Group (CAG) or other committee evidencing the greater input from diversity groups, e.g. Indigenous groups.	30/11/2025



Program levels	Criteria	Issues identified	Information required	Due dates
Level 1 Level 2	2.5	Staff support	<p>Evidence demonstrating that staff, including sessional staff members and course convenors, are supported in teaching and professional development.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • budget allocations • confirmation of recruitment outcomes and staff hires • outline of professional development offered and undertaken, including in relation to Aboriginal and Torres Strait Islander peoples' knowledge, culture, and pedagogy • workload calendars confirming time allocations for training, research and professional development • documents explaining how staff members are supported, specifically in relation to: <ul style="list-style-type: none"> ○ sessional appointments for different units ○ the implementation of a new Assessment policy ○ fostering of Aboriginal and Torres Strait Islander peoples' knowledge, culture, and pedagogy for content development and delivery. 	13/01/2025



Program levels	Criteria	Issues identified	Information required	Due dates
All	3.1	Coherent educational pedagogy	<p>Evidence that a coherent educational pedagogy is articulated and that it informs the documented program design and delivery.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • an outline of the key components of the pedagogy • a narrative explaining how key components are embedded into program design and delivery • mapping of key components to demonstrate a coherent, scaffolded approach. 	30/04/2025
Level 3–4	3.4	Staffing	<p>Evidence demonstrating the sufficiency of staffing, including appropriate numbers of internal supervisors to support the student cohort in acquiring the relevant graduate competencies.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • SSR calculations to demonstrate that: <ul style="list-style-type: none"> ○ the number of staff and supervisors is sufficient ○ plans for increased student cohorts will remain sustainable • if the calculations exceed typical ratios, a sound rationale for why the staffing is and will remain sufficient when the new MPP program is delivered • strategies to manage staff workloads and ensure plans for projected growth are implemented in a manner that supports teaching staff. 	13/01/2025



Program levels	Criteria	Issues identified	Information required	Due dates
Level 3–4	3.5	Learning resources	<p>Evidence demonstrating that students have access to electronic test kits in the Test library, in line with contemporary testing standards.</p> <p>Evidence may include updated:</p> <ul style="list-style-type: none"> • borrowing procedures • borrowing records • sample holdings. 	30/11/2025
Level 3–4	3.9 (re: 5.1, 5.2)	IPL learning outcomes	<p>Evidence demonstrating that the application of inter-professional learning (IPL) and practice principles is included as a required learning outcome.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • mapping of IPL content against specified IPL-related unit learning outcomes and assessments • scaffolding of IPL-related teaching and learning activities. 	30/11/2025
Level 3–4	4.1	Information about assessment processes	<p>Evidence demonstrating that information provided to students on assessment requirements is clear.</p> <p>Evidence may include updated:</p> <ul style="list-style-type: none"> • student handbooks • LMS content • unit outlines. 	13/01/2025



Program levels	Criteria	Issues identified	Information required	Due dates
Level 2	4.2	Progression requirements	<p>Evidence demonstrating that students who achieved a final mark between 80% and 84% are not limited in their ability to be accepted into further studies.</p> <p>Evidence may include updated:</p> <ul style="list-style-type: none"> • admissions policies • entry requirements • information to students regarding entry requirements. 	13/01/2025
Level 3–4	4.5	Skills to maintain well-being	<p>Evidence demonstrating that student workloads are adequate, and that students are equipped with the skills to support and maintain their mental well-being.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • semester-by-semester workload calculations for full-time and part-time students, including hours needed to undertake placements and complete administration-related work • outline of professional services available to students, including how and when these are communicated to students • education and/or training programs available to students to establish and maintain their well-being. 	13/01/2025



Program levels	Criteria	Issues identified	Information required	Due dates
All	4.6	Equity and diversity	<p>Evidence demonstrating that equity and diversity principles are observed and promoted in the student experience.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • equitable arrangements to ensure that the individual needs of diverse student cohorts support the learning experience • entry requirements that do not disadvantage different student cohorts from progressing into postgraduate studies • strategies for teaching, learning and assessment that provide equivalent opportunities for students to develop and demonstrate their skills, knowledge and competency across all delivery modes. 	30/04/2025
Level 1 Level 3-4	5.1, 5.2	Assessment	<p>Evidence demonstrating that the following learning outcomes and graduate competencies are appropriately assessed:</p> <ul style="list-style-type: none"> - Foundational Competency (FC) 1.1 xii for the Level 1 programs (related to criterion 3.2) - assessments for the application of IPL and practice principles for the packaged Level 3–4 programs (related to criterion 3.9). <p>Evidence may include:</p> <ul style="list-style-type: none"> • outline of assessment strategies and methods mapped to FC 1.1 xii, and criterion 3.9 (5.1) • samples of criterion-based assessment tasks and rubrics (5.2) • samples of de-identified student assessments with assessor comments (5.2). 	30/11/2025



Monitoring

Monitoring is required to ensure the Accreditation Standards continue to be met.

Program levels	Criteria	Issues identified	Information required	Due dates
Level 1	2.2	External benchmarking	An update on the progress and outcomes of the external benchmarking exercises to inform program-related quality improvement processes.	30/04/2025



Recommendations

The assessment team offers the following recommendations for continuous improvement.

- Formalise arrangements between the Head of Discipline and the Health Hub Manager to strengthen the internal governance structure between the AOU and the Clinic (2.1).
- Establish a Teaching and Learning Committee to review and monitor program design, the coherency of foundational components, student workloads, and the outcomes of scheduled benchmarking activities (2.2, 3.1).
- Consider grandfathering arrangements to minimise disadvantages to student cohorts and ensure equitable policy changes (4.2).
- Enlist a staff member from UC's Indigenous Centre as a CAG representative to temporarily address diversity, equity and cultural safety concerns (2.1, 4.6).
- Explore opportunities to enhance the online learning experience for students to ensure consistent quality of learning experience across delivery modes (3.5).
- Seek input from representatives of Aboriginal and Torres Strait Islander cultures into the design and management of the programs (2.3 related to 3.8).

Commendations

The assessment team is impressed by UC's Health Hub, Psychology Clinic and the quality of external placements (3.5, 3.6). The assessment team further commends the AOU on its staff's clear commitment to students and the Discipline (4.4).