

## Referee Statement: New Application for Accredited Mental Health Social Worker (AMHSW) Status

### Explanatory notes for employers/supervisors completing this reference statement.

You have been asked to complete the following form by a social worker who is seeking to become accredited by the AASW as a Mental Health Social Worker. Accreditation will qualify the social worker to register with Medicare Australia for a Medicare Provider Number.

Please note that you may be contacted directly by the assessing officer if further clarification is needed.

There are 6 criteria/components to the accreditation process. An applicant (social worker) must:

1. Hold current membership of the AASW.
2. Have at least 2 years full time equivalent (FTE) post qualifying social work experience in a mental health field/setting within the past five years. An applicant must be able to articulate how their experience meets the AASW *Practice Standards for Mental Health Social Workers* 2014;
3. Have received at least 2 years full time equivalent (FTE) post qualifying supervision in a mental health setting/field within the past five years.
4. Have met the current AASW AMHSW Continuing Professional Development requirements.
5. Demonstrate ability and knowledge of clinical Mental Health Social Work practice.
6. Arrange an employer or supervisor to provide a referee statement confirming skills, competencies, and 2 years full time equivalent (FTE) have been completed within the past 5 years in line with recency of practice requirements.

As the referee, you will need to provide a statement as to your relationship with the applicant and make a declaration that you are an appropriate referee as detailed below:

- You are a supervisor and have direct and specific knowledge of your social work practice, as derived through the supervision process itself.
- You have relevant qualifications and experience in the field/setting in which the credential relates and some training/experience in supervision. Additionally, the supervision must be in accordance with the [AASW Supervision Standards](#) and the [AASW Code of Ethics](#). An appropriate supervisor may include:
  - Clinical Supervisor
  - Direct manager/ line manager if they are also your supervisor
  - External supervisor
  - Senior Clinician (if they are also your direct supervisor)
  - Group supervisor
  - Peer supervisor

Note: you cannot complete this referee statement if one of the below applies:

- You have a close, personal or intimate relationship with the applicant (i.e. they are a spouse/partner)
- You are a relative or family member of the applicant
- You do not hold a relevant qualification/s and experience in the setting/field in which the credential relates

### Section 1: Referee and Applicant Details

This is to be completed by an employer/supervisor - past or present.

Name of applicant:	
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### Your personal details

Title:	
Full name:	
Position/job title:	
Qualification:	
Address:	
Phone:	
Email:	

### Relationship with applicant

Please describe your relationship with the applicant and the nature of your role as the employer/supervisor. Please include relevant dates and details of the practice setting in which you work (or worked) with the applicant. Please attach a separate typed and signed page if more space is required.

1. What is your relationship with the applicant? (e.g. clinical supervisor, external supervisor).

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2. What social work and/or mental health qualifications and experience do you have?

**Please note:** Referees must have appropriate qualifications AND experience in mental health. In order to be eligible to act as a referee for the applicant you must have a Social Work or Allied Health Professional Associated Degree, e.g. Psychologist, OT, Mental Health Nurse. You must also have experience in mental health settings/fields. If you do not have one or either of these requirements then another referee will be required.

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3. What dates did you work with the applicant?

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4. Is the applicant part time or full time e.g. 0.8 FTE, 1FTE. Please note: The AASW recognises that full-time employment equates to 35 hours per week for 48 weeks per year.

5. Name the FPS/s that the applicant uses in their current position. For examples of FPS please see: [Item 2727 | Medicare Benefits Schedule \(health.gov.au\)](#)

6. Please provide clear examples of how the applicant uses FPS/s in their employment in a mental health setting.

7. What percentage of the applicant's work is focused on the direct, evidence based therapeutic clinical mental health assessment, interventions, and treatment planning (involving FPS) with people with mental health disorders/illnesses? E.g. 50% or 75% or 100% of the work is focused on the use of FPS strategies in their clinical mental health practice.

## Section 2: Clinical Social Work Mental Health Field – Practice Standards

The required Practice Standards for Mental Health Social Workers 2014 for applicants applying for accreditation as a Mental Health Social Worker (AMHSW) have been outlined below. Applicants are required to demonstrate knowledge, skills and experience in clinical social work services in the field of mental health.

Please tick the appropriate box against each of the standards listed to indicate that, in your view, the applicant meets or does not meet this standard. There is additional space for comments if required

1. Values and Ethics		Yes	No	N/A
Standard 1.1	Establishes a professional working relationship with the person who has a mental illness or disorder and their significant others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 1.2	Acts on the social justice issues related to people with a mental illness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 1.3	Integrates the concept of recovery into practice, promoting choice and self-determination within medico-legal requirements and duty of care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Further Comments:				
2. Professionalism		Yes	No	N/A
Standard 2.1	Manages personal workload	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 2.3	Works as a professional in private practice, a member of a unit and or a multidisciplinary team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Further Comments:				
3. Culturally responsive and inclusive practice		Yes	No	N/A
Standard 3.1	Understands the way mental illness and mental health are conceptualized in the person's culture of origin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 3.2	Understands the way mental illness and mental health are conceptualized in Aboriginal and Torres Strait Islander peoples' culture of origin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Further Comments:				

<b>4. Knowledge for practice</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
Standard 4.1	Possesses current knowledge, concepts and evidence-based theories of the individual in society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 4.4	Possesses knowledge of mental health psychopathology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 4.6	Has knowledge of government mental health policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Further Comments:				
<b>5. Applying knowledge to practice</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
Standard 5.1	Completes a comprehensive bio psychosocial assessment and case formulation addressing the physical, psychological and social aspects of the person and their situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 5.2	Develops and implements one or more evidence based, therapeutic interventions with the person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 5.3	Advocates with and for person in relation to rights and resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 5.4	Undertakes case management (or a similar function)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 5.7	Collaborates with other services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Further Comments:				
<b>8. Professional development and supervision</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
Standard 8.1	Maintains a critical reflective approach to social work practice in mental health with the aim of improving currency of knowledge and skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard 8.2	Accesses the research literature to be informed of the evidence base for professional mental health practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Further Comments:				
<b>Recommendation</b>			<b>Yes</b>	<b>No</b>
In your professional opinion is the applicant capable of practicing in accordance with the Practice Standards for Mental Health Social Workers 2014?			<input type="checkbox"/>	<input type="checkbox"/>



### Section 3: Declaration

I declare that:

1. The information I have supplied on this form and any attachments is complete, correct and up to date
2. I am an appropriate referee and meet the referee requirements as set out in the referee statement information
3. I have read and understood the information supplied to me in the explanatory notes accompanying this application

Name:	
Signature:	
Date:	