

# GUIDELINES AND PROCEDURES FOR ACADEMIC DEPARTMENTAL REVIEWS

Compiled by: Vakele Nobongoza Head: Quality Assurance Institutional Planning and Quality Assurance March 2013

Reviewed by: Prof. TD Ngobeli Director: Institutional Planning and Quality Assurance May 2013

Reviewed and Approved by: Quality Assurance Board 20 August 2013

Senate 19 March 2014



# TABLE OF CONTENTS

| 1. Policy framework for Academic Department Review System                          | 3  |
|--|----|
| 1.1. Value Assumptions   | 3  |
| 1.2. Levels of the review system   | 5  |
| 2. Procedures for Discretionary, External and Departmental Reviews                 | 7  |
| 2.1 Discretionary Programme Evaluations  | 7  |
| 2.2. External Accreditation Programme Evaluations                                  | 9  |
| 2.3. Departmental Review   | 10 |
| APPENDICES   | 22 |
| Appendix A: Definitions  | 22 |
| Appendix B: Responsibilities in UNIVEN's Academic Review System                    | 24 |
| Responsibilities of Deans  | 24 |
| Responsibilities of Head of Departments  | 24 |
| Responsibilities of Chairs   | 24 |
| Responsibilities of Panellists   | 25 |
| Responsibilities of the Institutional Planning and Quality Assurance Directorate   | 25 |
| Responsibilities of Centre for Higher Education Teaching and Learning              | 26 |
| Appendix C: Possible evaluative Questions for Departmental Reviews                 | 28 |
| Curriculum Design  | 28 |
| Student Profile and Performance  | 29 |
| Programme Management   | 29 |
| Learning Environment   | 30 |
| Post-graduate Provision  | 31 |
| Evaluative questions for Community engagement                                      | 31 |
| Evaluative Questions for Research  | 31 |
| Evaluative Questions for Management and Leadership                                 | 32 |
| Appendix D: Suggested Sources of Evidence to be provided for Academic Revie UNIVEN |    |
| A: Departmental Management   | 33 |
| B: Management of Teaching and Learning   | 33 |
| C: Community engagement  | 34 |
| D: Research  | 35 |
| References   | 36 |



#### 1. Policy framework for Academic Department Review System

The Quality Assurance Policy of the University of Venda states that all departments will evaluate themselves by reflecting on their current operations and identify their strengths and weaknesses, and together with a review panel look at the way forward for purposes of improvement and development. The policy also states that each department in the university will be reviewed once in a cycle of five years according to pre-stated processes and procedures.

These guidelines apply to all Academic Departments.

## 1.1. Value Assumptions

All policies make value assumptions and carry normative content. For those who must implement the policies, it is helpful to make these as explicit as possible. UNIVEN's Guidelines for Academic Department Review are based on the following values:

- UNIVEN is committed to a systematic, planned approach to quality assurance that ensures that evaluation findings are used to effect improvement. This approach aims to ensure comparable treatment across the university, whilst at the same time recognizing that evaluation and improvement are always context specific and that professionals need discretionary space to reflect on and improve their practice.
  - Evaluation is understood as a potential form of organizational learning and development, depending on the extent to which there is openness to change and on what is done with evaluation results, particularly negative results. Utilization of evaluation results for decision-making is crucial to the effectiveness of a quality assurance system. If this 'quality loop' is not closed the effectiveness of the system is greatly undermined.
  - It is assumed that academics at UNIVEN are intrinsically motivated to research
    and teach well and to promote the academic interests of their students. It is also
    assumed that achieving and enhancing quality is the professional responsibility of
    each staff member at UNIVEN.
  - Evaluees whose practice is being evaluated can request support from the Centre for Higher Education Teaching and Learning (CHETL) to prepare for the review



- and to provide guidance on educational matters in the light of the evaluation findings.
- Given that the main entry into School is a department and the programmes that it
  offers, academic review at UNIVEN is understood as a collective activity, based
  on a collegial rationality.
- Successful teaching and learning requires a partnership between two key sets of actors, students and academics. At public institutions, this activity is funded predominantly by the state. Academic review at UNIVEN is based on the following understanding of the relationships between these three parties. Students are understood as fee-paying clients who deserve a 'fair deal' and 'value for money'. However, students are more importantly understood as learners who should take responsibility for their own learning and actively pursue their own self-actualisation<sup>1</sup>. Secondly, the requirement that public money should be spent in an accountable manner is a basic democratic principle. Governments have a duty to ensure that public monies are well spent.
- UNIVEN acknowledges that its students are from disadvantaged backgrounds. In keeping with UNIVEN's its commitment to student success, one of the purposes of academic review should be to verify the extent to which UNIVEN's teaching and learning practices serve the interests of those from disadvantaged backgrounds.
- UNIVEN is committed to the evaluation of academic practice and to the
  evaluation findings which are evidence-based and validated by expert peers. This
  commitment will ensure that the claims we make about the quality of UNIVEN's
  educational provision are reasonably valid and reliable. It is proposed that
  academic department reviews at UNIVEN be based on implementing, monitoring
  or evaluating and improving practice at three levels: the course, programme and
  the department.

In keeping with UNIVEN's policy framework for quality assurance (Quality Assurance Policy, 2012), Deans and Heads of Department carry line management responsibility for

<sup>&</sup>lt;sup>1</sup> The guidelines therefore envisage an enhanced role for students in giving feedback on the quality of courses.



-

ensuring that the various elements of UNIVEN's academic review system are implemented and in particular, that 'quality loops' are closed.

#### 1.2. Levels of the review system

#### 1.2.1 Course Monitoring

Course monitoring is the responsibility of course conveners reporting to Heads of Departments.

### 1.2.2. Programme Reviews (See Appendix A for definitions)

There are three types of review: formative routine review (managed by the HEAD OF DEPARTMENTs), discretionary programme evaluation (managed by the IPQA and the Deans), and external accreditation review (managed by external bodies).

# 1.2.2.1 Routine Internal Formative Review of Programmes (led by the HEAD OF DEPARTMENT)

Routine internal improvement-orientated reviews of programmes are the responsibility of the Programme Conveners and the Heads of Department

### 1.2.2.2. Discretionary (Special) Programme Evaluations

A Dean or the Executive can initiate a discretionary programme evaluation in order to make a summative judgment with important decision-making consequences, for example about the reconceptualization or change of direction of a programme or a set of courses.

#### 1.2.2.3. External Accreditation

This type of programme review is conducted for accreditation by external professional bodies or as part of a national review by the Higher Education Quality committee (HEQC). These are usually summative, judgment-orientated evaluations where judgments are made by external panels against externally prescribed criteria. The cycles for accreditation reviews are set by the external bodies and vary in duration from one to six years.



#### 1.2.3 Departmental Review

Departmental reviews form the third level of UNIVEN's academic review system. Their purpose is developmental. At departmental level, where the focus is on the effectiveness of the department as an academic organization in carrying out its core functions (teaching, research and community engagement), improvement-orientated 5-yearly departmental reviews be conducted. Departmental reviews are the responsibility of Deans who together with the Institutional Planning and Quality Assurance (IPQA) should establish a departmental review schedule for a 5 year cycle, to be confirmed and up-dated annually.

#### 1. 2.4 Administrative and Services Department Reviews

It is proposed that the IPQA conducts reviews of Administrative and Services departments and units<sup>2</sup> on a 5 year cycle. Whilst not part of the academic review system, these reviews are important for assuring the quality of the overall learning environment that UNIVEN provides for students.

NOTE: This document only deals with guidelines for discretionary, external and departmental reviews.

6

<sup>&</sup>lt;sup>2</sup> These would include units that provide essential student support services.

#### 2. Procedures for Discretionary, External and Departmental Reviews

#### 2.1 Discretionary Programme Evaluations

The SENEX or a Dean may determine the need for a discretionary programme evaluation based on various factors e.g. analysis of quantitative data, student feedback, imminent changes in headship etc. As part of the process of initiating a discretionary evaluation, Deans will consult with the IPQA and Head of Department concerned and set out the Terms of Reference for the review. Once the Dean has finalised the Terms of Reference, the Head of Department (and programme coordinator, where applicable) should meet with the IPQA to set up the panel and plan the review. The IPQA will assist in the running of discretionary evaluations.

#### The procedure is as follows:

The Head of Department should nominate panellists by writing a letter of motivation that indicates no conflict of interest and attaching brief CVs. For each discretionary programme evaluation, the Head of Department should nominate four to six panellists who should be appointed by the Dean:.

- Two external to UNIVEN (one should be an international academic where resources permit or where it is possible to arrange for the review to coincide with a planned visit)
- 2. One internal from another UNIVEN department
- 3. A Dean's representative, e.g. Vice Dean
- 4. A member of CHETL to give generic educational and curriculum advice
- 5. Where appropriate a member with special expertise e.g. a representative from an employer body (optional)

The Head of Department should oversee the compilation of a programme evaluation portfolio<sup>3</sup> to be made available to panelists **six weeks** in advance of the evaluation. The portfolio will be structured around the terms of reference.

\_



<sup>&</sup>lt;sup>3</sup> This responsibility may be delegated to a Programme Coordinator.

The Dean should appoint the panellists and a Chair. Each panellist should be allocated a focus area in which they have expertise. The panel should conduct a 2-day site-visit to review the programme. Prior to the site-visit, the panel should be briefed by the IPQA. The internal panellists should meet for a planning session. Where possible the external panellists would be invited to join the planning session. The Chair will take responsibility for liaising with panellists who are not able to attend the planning session in order to finalise lines of enquiry and the review schedule.

It is suggested that the programme for the two-day site-visit begin with a briefing from the Head of Department in which key issues of concern are highlighted and the evaluators ask questions of clarification on the portfolio. It is suggested that the panel work through each of the key issues set out in the Terms of Reference. The panel should have the right to call on other stakeholders such as students, tutors and administrative staff to interview and if need be, to consult external examiners. At the end of the site-visit the panel should be given time to consolidate and finalise their findings. They may need to consult with the Head of Department again to share and confirm their findings prior to finalisation. Ideally by the end of the site-visit, general agreement will have been reached on points of commendation and on key areas for improvement. Panellists should be asked to submit brief reports on their focus area to the Chair, via the IPQA. The Chair should compile all panellists' reports into a final report of about 10 pages, to be submitted to the IPQA three weeks after the review who in turn will submit it to the Head of Department for an accuracy check.

Programme review reports should summarize the key findings and in particular address the *Programme Accreditation Criteria* and any issues of concern as outlined in Section 11 of the *Guidelines for Programme Development, Management and Review*. The report writer should use the key questions identified in the Terms of Reference to structure the report, noting areas of commendation, recommendation (areas for improvement) in each case. The report should not normally exceed 10 pages. On receipt of the report the Head of Department/ programme coordinator should carry out an accuracy check. The report will then be finalised in consultation with the Chair. After receipt of the final report the Head of Department/ programme convener will be requested to provide a two page response indicating what action the Department will be taking in the light of the report.

Below is a simple format for outlining an 'improvement plan'.

| Problem   | Action | By   | By   | Resource     | Resources |
|-----------|--------|------|------|--------------|-----------|
| to be     | to be  | whom | when | implications | allocated |
| addressed | taken  |      |      |              |           |
|           |        |      |      |              |           |
|           |        |      |      |              |           |
|           |        |      |      |              |           |
|           |        |      |      |              |           |

The final report and improvement plan should be forwarded to the Dean for presentation at School Board and then sent via the IPQA to the Quality Assurance Board.

#### 2.2. External Accreditation Programme Evaluations

This type of programme review is conducted for accreditation by external professional bodies or as part of a national review by the Higher Education Quality committee (HEQC). These are usually summative, judgment-orientated evaluations where judgments are made by external panels against externally prescribed criteria. The cycles for accreditation reviews are set by the external bodies and vary in duration from one to six years. In order to maintain coherence in the system, wherever an external accreditation review is held, the accreditation review report (plus a departmental response) should be forwarded by Head of Departments to the Deans for consideration at School Boards and via the IPQA to the Quality Assurance Board.

Where a programme undergoes regular external accreditation review, in order to lighten the evaluation load on staff, Head of Departments may choose to apply to the Quality Assurance Board (QAB) to use the findings of the accreditation review as data for the teaching section of a departmental review rather than undertaking any further programme review. In making an assessment of the application the QAB will solicit the view of the Dean on the extent of the congruence between the external and UNIVEN's review criteria. Reports from <a href="external accreditation">external accreditation</a> reviews should be forwarded via the Dean to School Board or an appropriate School Committee and via the IPQA to the Quality Assurance Board.

#### 2.3. Departmental Review

Departmental reviews form the third level of UNIVEN's academic review system. These are comprehensive, improvement-orientated evaluations that include an evaluation of at least one key undergraduate and one key postgraduate programme offered by the department. Given their significance (they occur only once every 5 years). They are conducted formally, as rigorously as possible and facilitated by the IPQA. The Terms of Reference for each departmental review should be determined by the Dean in consultation with the Head of Department concerned and the IPQA but will normally include a review of at least two key programmes offered by the department, one at undergraduate level and the other at postgraduate level. In determining the focus for the review, the findings of quantitative data provided by the IPQA and possible evaluative questions listed in Appendix C should be considered.

Departmental reviews provide an opportunity for a department to collectively review the past decade of activities and to plan for the next decade. It is therefore crucial that all permanent academic staff and key administrative staff members in the department participate in the review and ensure that it is meaningful to their work in the department.

Departmental reviews involve the submission of a Self-Evaluation Report and a draft improvement plan to an external panel.

## 2.3.1. Preparing for a departmental review

The following process is suggested for preparing for departmental reviews:

- The IPQA in consultation with Deans, the SENEX and advised by the QAB, sets out a schedule of departmental reviews for a 5 year cycle, to be up-dated each year. Departments should be given a lead time of at least one year to prepare for a review.
- The Dean will set out the Terms of Reference for the review in consultation with the IPQA and the Head of Department.
- The review of a department's teaching function will normally include a review of at least two key programmes or majors offered by the department, one at



undergraduate level and the other at postgraduate level. Alternatively, if the department has undergone an accreditation review or a discretionary programme evaluation during the past 5 years, the findings and improvement plans of these may be submitted as evidence for the department's teaching function.

- The review of a department will include entities affiliated to the department.
- The Head of Department assembles a project team who develop a project plan for the review process. Programme reviews can be delegated to programme conveners where appropriate.
- The IPQA provides support, administrative back-up and further quantitative data where required. Other specialist expertise, e.g. from CHETL or the Research Office, is also drawn in to the preparation process as required.
- The review project team gathers and analyses data (see Appendices) in order to answer the evaluation questions set out in the Terms of Reference.
- The writing of the Self-Evaluation Report should begin at least four months prior
  to the review panel's site-visit. Each section of the review portfolio should
  conclude with a list of areas for improvement in the light of the review findings.
  One month before the visit 10 hard copies of the portfolio should be submitted to
  the IPQA. Appendices should be presented on a CD-Rom.
- In the meantime the IPQA sets up a review panel. The Head of Department should provide the IPQA with a list of nominees, from which the panelists are selected. Nominations must be supported by a brief CV of the nominee plus a letter of motivation that demonstrates the expertise and independence of the nominee concerned. The review Chair and panel are appointed by the responsible DVC after consultation with the Dean. Each review panel should include:
  - 1. Two senior academics external to UNIVEN (one should be an international academic where resources permit)
  - 2. Up to two senior academics from another UNIVEN department
  - 3. A Dean's representative, e.g. Vice Dean (optional)
  - 4. A member of CHETL who will be an assessor member to the review panel
  - 5. Where appropriate a member with special expertise e.g. a representative from an employer body (optional)



- The DVC Academic appoints the Chair of the review panel, usually from amongst the external members of the panel.
- Orientation to and administrative support for the review process is provided by the IPQA. The Review panel is assisted by a servicing officer from the IPQA who records the proceedings.
- Assistance with drawing up the Improvement plan can be provided by CHETL.

## 2.3.2. Compiling the Self-Evaluation Report

- In all, the Self-Evaluation Report should total about 40 pages, depending on the size of the department and the number of programmes and research units to be included.
- The Self-Evaluation Report should be accompanied by extensive Appendices (that may be provided on the review site). It is important that any claims made in the portfolio be backed up by evidence in the Appendices (specific documents should be referred to by page number). (See *Appendix D* for lists of suggested sources of evidence to be provided for review panels).
- The portfolio should include an Executive Summary of about 5 pages in which the Terms of Reference developed for the review and the key findings are presented.
- The portfolio should begin with an Introduction that gives an overview of the department, its history and development, its present reputation and distinctiveness, its vision and goals and where it would like to see itself in 5 years' time. The introduction should also indicate what the department currently considers to be its strengths and weaknesses and the environmental opportunities and threats that it faces. Where appropriate, this should take into account comparative benchmarking data. The introduction should also outline key contextual factors impacting on the work of the department. The portfolio should then include a Section on each of the core functions of a department: teaching, research, community engagement and leadership & management. Each section should consist of a narrative that includes the following elements:



- a) the vision and goals of the department for this function<sup>4</sup>
- b) the key evaluation questions the department set itself for this function and the reasons for their selection
- c) the findings of the evaluation for each of the core functions (these must be backed up by supporting evidence provided in the Appendices)
- d) an analysis of the findings
- e) a draft improvement plan for each core function drawn up on the basis of any weaknesses and negative findings identified (to be finalised after receipt of the review report).

In preparing the section of the Self-Evaluation Report on **teaching and learning** Heads of Departments are required to select at least one undergraduate and one postgraduate programme/ major for in-depth review. The lists of suggested questions in *Appendix C* for Discretionary Programme Reviews can be used as guidelines when preparing the documentation.

In preparing the section of the Self-Evaluation Report on **community engagement**, Heads of Departments are encouraged to reflect on the following sources of information to guide the preparation of documentation:

- Information on socially engaged research (this refers to the interconnectedness between research and society in the context of responding to development challenges facing our society)
- 2. Information on socially engaged teaching (this can include examples of the development of new forms of pedagogy and the generation of new knowledge predicated on linking the interests of scholarly enquiry with interests and needs of external constituencies)
- 3. Information on socially engaged service and learning (this takes place under the supervision of academic staff and/or is a credit-bearing component of the formal curriculum; and community-based education)

<sup>&</sup>lt;sup>4</sup> For example for teaching, a department could describe the attributes of the graduates and the nature of the graduate profile that it hopes to produce in 5 year's time. For research it could describe the focus and quality of its research outputs in 5 year's time.



4. Information on socially engaged leadership, management and administration (this can include examples of staff holding positions or assuming leading role(s) in external structures or processes such as commissions, professional bodies, reference groups, government bodies, development agencies, community organisations and non-governmental organisations).

In preparing the section of the Self-Evaluation Report on the **management** of the Department, Heads of Departments are encouraged to use the points below to guide the preparation of documentation:

- 1. An organogram of the department's structure and commentary on reporting lines and decision- making processes in the department
- An account of systems for setting and reviewing departmental goals and priorities on a regular basis, including allocation of responsibilities for developmental issues
- 3. An account of systems for budgeting, financial management and resource allocation
- 4. A staffing profile with commentary on how redress and equity issues receive attention in the recruitment, selection, appointment and the development of academic and support staff
- 5. An account of systems for the administration and monitoring of programmes and courses, including a system for gathering and responding to feedback from students on their learning experience
- 6. An account of a system for monitoring quality in the core activities of teaching and learning, research and community engagement, including resource allocation for development and improvement
- 7. A process for benchmarking the department and assessing implications for the positioning of the department at UNIVEN

In preparing the section of the Self-Evaluation Report on **research**, Heads of Departments are encouraged to use the points below to guide the preparation of documentation:



- 1. Information on the nature of the research activities and key focus areas in the unit under review (e.g. department or research groupings) plus a statement about the main objectives and future plans for research over the next five years
- 2. A list of related research outputs (quantified)
- 3. An account of the structures that exist to manage research activities in the department or unit
- 4. Information on the mechanisms and practices for promoting research and developing and sustaining an active research culture in the department, including an account of how young/ new researchers are integrated into a supportive research culture
- 5. Information on the nature and quality of the research infrastructure, including facilities for research students
- 6. Information on any arrangements which are in place for supporting interdisciplinary or collaborative research
- 7. Information on relationships with industry and commerce or other research users and where appropriate the account taken of Government policy initiatives and objectives

A **conclusion** that highlights the key findings of the self-review and future plans. The conclusion should also explain how each of the four core functions relate to each other in the department and what plans exist to strengthen these synergies.

#### 2.3.3. Running the review site-visit

Departmental review site-visits are conducted over 3-5 days. The last day should be allocated to discussion and validation of the Department's improvement plan. However where this is not possible the site visits should not be less than three days.

It is suggested that for a departmental review, one or two panel members be assigned to take responsibility for gathering data on each of the four core functions of the department and for making a submission on that function shortly after the site-visit. The site-visit process should be planned in such a way that panellists are able to gather data and form opinions on each of the elements for each function listed above. In the interviews the panel should elicit the views of stakeholders such as students, tutors, administrative staff; and if need be, the panel should also consult with external examiners.

On the first day all members of the panel sit together in interviews and deal with general departmental issues. On the second day panellists split into pairs to pursue their allocated focus areas. Where individual programmes are to be reviewed additional days will be required for this. The last day of the site-visit is used for summarising and confirming the findings and validating the department's draft improvement plan (see site-visit schedule below).

The IPQA provides administrative back-up for the planning, coordination and recording of the review site-visit. The IPQA runs a briefing session for the department six months prior to the review and for the panel not later than 2 weeks before the site-visit (once the SER is available).

The IPQA and the Chair (with the cooperation of the Head of Department) are jointly responsible for drawing up a detailed schedule for the site-visit. This includes determining groups of interviewees and formulating lines of enquiry to pursue with them. The Chair leads the panel, chairs the discussions, sums up the findings and is responsible for writing the first draft of the report and signing off the final version within the agreed time-frame. The IPQA produces a summary of the review proceedings to be used by the Chair and panel. Below is a typical schedule for a departmental review. (See Appendices of a list of responsibilities to be performed by the various role-players involved).

A Typical Schedule for a 3- day Departmental Review Site-visit (where the site visit is planned for 5 days the schedule will need to be reviewed)

| School              |  |
|---------------------|--|
| Department          |  |
| <b>Review Dates</b> |  |
| Venue               |  |
| Chair               |  |



| Panel members |  |
|---------------|--|

# DAY ONE

| Time slot   | Activity                                  | Notes                     |
|-------------|---|---------------------------|
| 8h30-9h00   | Briefing Session                          |                           |
|             | 1. Introduction of panel members          |                           |
|             | 2. Input from the Director of             |                           |
|             | Institutional Planning and Quality        |                           |
|             | Assurance on the University's             |                           |
|             | expectations regarding the Review         |                           |
|             | Process.                                  |                           |
|             | 3. Clarifying Terms of Reference &        |                           |
|             | responding to questions from Review       |                           |
|             | Panel, etc.                               |                           |
|             | 4. Confirmation of schedule               |                           |
| 9h00-10h00  | Panel planning                            |                           |
|             | Confirmation of panellists' focus areas   |                           |
|             | and responsibilities                      |                           |
|             | Finalisation of lines of inquiry for each |                           |
|             | of the 4 core areas                       |                           |
| 10h00-10h30 | Tea                                       |                           |
|             |   |                           |
| 10h30-11h30 | Meeting with the Head of                  |                           |
|             | Department                                |                           |
|             | Head of Department introduces the         |                           |
|             | department and key issues and             |                           |
|             | findings in the review portfolio          |                           |
| 11h30-13h00 | Academic Staff Interviews                 | Individually or in groups |
| 13h00-13h30 | Lunch                                     |                           |
|             |   |                           |
| 13h30-15h00 | Professional and administrative staff     | Individually or in groups |
|             | interviews                                |                           |



| 15h00       | Tea                                  |  |
|-------------|--------------------------------------|--|
|             |                                      |  |
| 15h30-16h30 | Interviews with the Dean and Vice    |  |
|             | Deans                                |  |
| 17:00-17h30 | Panel planning                       |  |
|             | Summing up the day's findings,       |  |
|             | confirmation of lines of enquiry for |  |
|             | Day 2 and formulation of             |  |
|             | recommendations and commendations    |  |

# **DAY TWO**

| Time slot   | Activity          | Notes                       |
|-------------|-------------------|-----------------------------|
| 9h00-10h00  | Panel planning    | Chair meets with Panel to   |
|             |                   | plan the day's proceedings  |
| 10h00-10h30 | Tea               |                             |
| 10h30-12h00 | Interviews        | Panellists break into pairs |
|             |                   | to conduct interview with   |
|             |                   | groups related to their     |
|             |                   | focus areas, e.g. UG        |
|             |                   | students, PG students,      |
|             |                   | tutors, alumni, community   |
|             |                   | reps, post-doc researchers, |
| ,           |                   | etc.                        |
| 12h00-13h00 | Interviews contd. |                             |
|             |                   |                             |
| 13h00-13h30 | Lunch             |                             |
| 13h30-14h30 | Interviews contd. | This slot may be used to    |
|             |                   | tour facilities if deemed   |
|             |                   | necessary                   |
| 14h30-15h00 | Tea               |                             |
| 15h00-16h30 | Panel planning    | Chair and Panel work out    |



| Summing up the day's findings and | who will write what aspect |
|-----------------------------------|----------------------------|
| formulation of commendations and  | of the Report, linked to   |
| recommendations                   | guidelines and time-frames |
|                                   | given by the IPQA          |

## **DAY THREE**

| Time slot   | Activity                                 | Notes                     |
|-------------|--|---------------------------|
| 9h00-11h30  | Panel planning                           |                           |
|             | Panel finalises commendations &          |                           |
|             | recommendations for each of the 4        |                           |
|             | focus areas and evaluation questions &   |                           |
|             | assesses whether the draft               |                           |
|             | Improvement Plan will adequately         |                           |
|             | address the recommendations.             |                           |
| 10h30       | Working Tea                              |                           |
| 11h30-13:00 | Verbal Report-back to Head of            | Director of Institutional |
|             | Department                               | Planning and Quality      |
|             | Panel shares key findings                | Assurance is invited to   |
|             | (commendations and                       | attend to note key        |
|             | recommendations) and advises on          | commendations and         |
|             | Improvement Plan with Head of            | recommendations           |
|             | Department and selected academic         |                           |
|             | staff; Head of Department responds       |                           |
|             | and provides panel with further          |                           |
|             | insights, guidance                       |                           |
| 13h00-15:00 | Chair confirms findings with panel       |                           |
|             | members and finalises arrangements       |                           |
|             | for writing of the report and validating |                           |
|             | Improvement Plan                         |                           |
| 13h00-14h00 | Working Lunch                            |                           |
|             | Continue finalising report               |                           |



#### 2.3.4. Writing the review report

The typical structure for a review report is as follows:

- Executive Summary: Key findings and commendations and recommendations as related to the Terms of Reference for the review. Overview of the Department: A brief summary of the material provided in the review portfolio, including a summary of the department's vision and goals, its ethos and its contextual possibilities and constraints.
- **Scope of the Review:** The department's key evaluation questions or Terms of Reference for the review. The panel's response to these, other priorities and issues identified by the review panel.
- The 4 Core Functions of a Department: For each of these areas, (teaching, research, community engagement and leadership & management) the report should assess the appropriateness of the department's vision and goals for this area and its capacity to achieve these. It should comment on the department's achievements and impact, its failures and weaknesses and the challenges that it still faces. Key aspects to comment on are the department's intellectual leadership, its capacity for change and its ability to respond appropriately to its changing environment. The report should also comment on whether the department has been able to respond appropriately to previous evaluations and reviews.
- **Improvement Plan:** The report should assess the improvement plan and endorse it or make suggestions for altering it in line with the panel's recommendations.
- Conclusion: The report should conclude with commendations on the department's achievements and recommendations on where and how it could improve in order to better carry out of its core functions and respond to its changing environment.

#### **Timeline for Completion of the Review Report**

| 3 weeks post review | IPQA produces summary of site-visit proceedings and  |  |
|---------------------|--|--|
|                     | circulates this to panel members                     |  |
| 3 weeks post review | Panellists submit focus area reports to the IPQA who |  |
|                     | forwards them to the Chair                           |  |
| 6 weeks post review | Chair produces Version 1 of the report to IPQA who   |  |
|                     | circulates it to panel members for comment           |  |



| 8 weeks post review  | Chair considers inputs from panel members and produces Version 2 of report  |
|----------------------|---|
| 9 weeks post review  | IPQA sends Version 2 to Head of Department for accuracy check   |
| 10 weeks post review | IPQA makes corrections and Chair signs off final Version 3 of report. IPQA forwards Version 3 to Head of Department and Dean. |
| 18 weeks post review | Final review report and final improvement plan are submitted by Head of Department to IPQA, Dean and DVC Academic             |

#### 2.3.5. Follow-up on the review

The final Review Report and Improvement Plan (together with a copy of the Self-Evaluation Report) are submitted to the responsible DVC and the Dean of the School within 6 weeks of the review visit. At the invitation of the Department concerned, a CHETL staff member may be called on to assist with the finalisation and implementation of the Improvement Plan. The Dean will also engage with the Department around its Improvement Plan and endorse the final version, taking into account any budgeting and resource implications. The Report should also be submitted for discussion at School Board. The final Review Report and the Improvement Plan are to be submitted to the SENEX.

The IPQA is responsible for producing a meta-evaluation of the review process and findings, trends and issues across the institution for inclusion in the annual Teaching and Learning Report. The SENEX should ensure that all recommendations and improvement plans are tightly linked to the next budgeting cycle and that accountability for the implementation of improvement plans is located within the performance management system. Review Reports and Improvement Plans are available as data for future HEQC institutional audits. Heads of Departments report to Deans on progress on the implementation of improvement plans by means of written progress reports submitted 18 months after each review.



#### **APPENDICES**

#### Appendix A: Definitions

**Accountability** – the responsibility to demonstrate publicly to external stakeholders that a service or product is achieving its aims, meeting legitimate expectations and is being provided in an effective and efficient manner.

Evaluation – the systematic application of social science research procedures to assess the conceptualization, design, implementation or outcomes of social intervention programmes. Evaluation leads to evidence-based judgments about the quality, effectiveness, efficiency, relevance or impact of a programme, service or product. Evaluation can be used as a management tool to judge and improve organizational activities and processes. Formative evaluation leads to useful information to guide improvement, usually used to serve needs intrinsic to the process or practice concerned. Summative evaluation leads to a summary judgment about a programme or institution's performance, usually used to serve needs extrinsic to the process or practice concerned.

**Improvement** – a commitment to ensuring that the quality (of the inputs, processes, outputs, outcomes and impact) of a service or product continues to develop or change for the better.

**Institutional audit** – an external scrutiny using systematic evaluation procedures that usually include peer review to guarantee that an institution of higher education has an adequate quality management system in place to assure and enhance its quality. Audit focuses on the processes that are believed to produce quality and normally does not evaluate quality itself. Audit reports are usually made public.

**Moderation** – a check on the accuracy, consistency and fairness of assessment.

**Monitoring** – the regular oversight of the implementation of a course/ programme to monitor change over time. It is usually undertaken by interested internal parties for developmental purposes. It may use formal or informal methods, make use of existing data or generate new data. Action and monitoring usually work together, informing each other, hand-in-hand.

**Programme accreditation** – an achieved status awarded to a programme by an authorized body on the basis of summative evaluation conducted by external stakeholders to check whether the programme meets pre-determined threshold quality criteria, thus enabling the public certification of the attainment of minimum

(educational) standards. Accreditation of higher education programmes usually focuses on the inputs, objectives or learning outcomes of a programme (its design) as well as on its implementation (process) and on the extent to which it achieves its objectives (outputs and impact).

**Programme theory** – the set of assumptions about the cause and effect relationships implicit in a policy or programme; that is, the assumptions that certain strategies, tactics, resources and activities will lead to certain social changes, outcomes, impacts and benefits.

**Quality** – a subjective and value-laden concept, associated in everyday usage with what is good, excellent or worthwhile.

**Quality assessment or quality control** – the systematic and regular evaluation to measure or check a product or service against pre-determined standards leading to summative judgments about the quality of the product or service.

**Quality assurance** – the systematic internal and external management procedures and mechanisms by which an institution assures its stakeholders of the quality of its systems, processes, products and outcomes and of its ability to manage the maintenance and enhancement quality. This term usually subsumes the meanings of quality assessment, quality management and quality enhancement.

**Quality enhancement** – a commitment to improvement and development, usually intrinsically motivated in response to personal or professional drivers.

**Quality management** – the overall management functions, structures and personnel that determine and implement the quality assurance policy of an institution, which in turn aims to safeguard the quality of the institution's services and products.

**Quality management system** – the system, procedures and processes that an institution establishes to quality assure its services and products. This usually includes management information systems.

**Review** – a long-term formal procedure that includes both monitoring and evaluation and both formative and summative purposes. It usually includes an element of self-review by insiders followed by external validation and assessment by external parties. **Validity** – the extent to which the criteria and methods of evaluation are appropriate and actually measure what they are intended to measure, and the extent to which the inferences made on the basis of the findings are justified and dependable.



#### Appendix B: Responsibilities in UNIVEN's Academic Review System

## Responsibilities of Deans

- i. Approves the schedule of departmental reviews
- ii. Initiates discretionary programme evaluation where deemed appropriate
- iii. Consults with the IPQA and Head of Department of review units and sets out the Terms of Reference for discretionary and departmental reviews
- iv. Ensures that programmes are evaluated on a regular 5 year cycle.
- v. Submits review reports to relevant faculty structures and then to the SENEX
- vi. Discusses and signs off improvement plans with Head of Departments, taking into account planning, budgeting and resource implications

#### Responsibilities of Head of Departments

- i. Meets with the IPQA to prepare for the departmental review
- ii. Confirms date of the review
- iii. Nominates and motivates for panels members
- iv. Leads process for determining evaluation questions and Terms of Reference
- v. Leads process for data-gathering and compiling the Self-Evaluation Report, ensuring that all full-time academic staff are involved
- vi. Writes the SER and Improvement Plan and ensures that deadline for submission to the IPQA is met
- vii. Cooperates with the IPQA and panel Chair to formulate site-visit schedule
- viii. Cooperates with IPQA and panel Chair to ensure that site-visit runs smoothly
  - ix. Conducts accuracy check on draft review report
  - x. Finalises Improvement Plan (with the endorsement of the Dean) to accompany final review report

#### Responsibilities of Chairs

- i. Liaises with the IPQA around the review, analysis of the SER and the drawing up of the schedule for the site-visit
- ii. Leads the panel in analysing the SER, confirming lines of enquiry and in allocating focus areas to panellists

- iii. During the site-visit chairs sessions, manages time and panellists
- iv. Leads panel discussion and the verbal report back to the Head of Department
- v. Writes the first draft and signs off final review report on basis of panellists' reports and IPQA summary

#### Responsibilities of Panellists

- i. Confirms appointment, travel arrangements and dates of review with the IPQA
- ii. Reads and analyses the SER and suggests lines of enquiry
- iii. Takes responsibility for a focus area in keeping with own expertise
- iv. Conducts interviews in a collegial manner, shares expertise and accepts authority of the Chair
- v. Validates or questions claims made in the SER
- vi. Adds value to the SER and Improvement Plan without being prescriptive
- vii. Takes notes on focus area during site-visit
- viii. Within three weeks of site-visit submits a written report (maximum of 5 pages) on focus area to the IPQA in which recommendations and commendations are supported by evidence from the SER and/ or the site-visit
- ix. Supports Chair in writing of the review report, comments on Chair's first draft
- x. Observes confidentiality of the review process and documentation.

### Responsibilities of the Institutional Planning and Quality Assurance Directorate

The IPQA is responsible for managing UNIVEN's academic review system. With regard to academic review the IPQA provides the following services:

- i. Frames and facilitates departmental reviews and discretionary programme evaluations. Services reviews by assisting Head of Departments to prepare Self-Evaluation Reports; by setting up and briefing the panels; by recording site-visit proceedings; by providing a summary of site-visit proceedings and supporting panel chairs to produce review reports.
- ii. Facilitates the monitoring of improvement and progress reports.
- iii. The IPQA's MIS/IR unit provides the following quantitative data for scrutiny and reflection in review processes at course, programme and department levels:



- iv. headcount undergraduate and postgraduate enrolments aggregated to departmental and programme levels
  - FTE enrolment and success rate data
  - student equity enrolment profiles aggregated to departmental programme levels
  - course performance data, disaggregated by race and gender, inside and outside of majors and programmes
  - cohort retention analyses
  - graduate equity profiles aggregated to programme/ qualification type
  - FTE ratios by department
  - departmental data on staff qualifications relative to institutional norms
  - departmental data on staff research outputs relative to institutional norms
  - staff equity profiles aggregated to departmental level
  - School Reports
  - the university dashboard
  - Glossary of planning terms.
- v. Contributes to institutional research and quality assurance by conducting:
  - graduate surveys
  - meta-evaluations across the academic review system
  - annual trends collected in the Teaching & Learning Report
  - reviews of Administrative and services departments
  - benchmarking exercises with other universities
  - and by collecting and disseminating examples of good practice.

#### Responsibilities of Centre for Higher Education Teaching and Learning

CHETL is an institutional resource that provides expertise on teaching and learning. With regard to the revised system of academic review, CHETL could provide the following support:

 A CHETL assessor should be appointed to serve on every departmental review panel to provide educational and curriculum expertise.



ii. In general, CHETL staff can be requested to offer advice on staff, curriculum and student development in the wake of reviews.

CHETL can establish a Quality Improvement Portfolio that could provide the following support:

- iii. In preparation for the review process CHETL could advise Head of Departments on the running of internal programme reviews, determining the evaluation questions for the review and compiling of the Self-Evaluation Report.
- iv. After the site-visit the IPQA staff member responsible for quality, in consultation with the CHETL assessor member on the panel, is available to advise Head of Departments on the finalization and implementation of Improvement Plans that emerge from the reviews. Appropriate expertise in CHETL can also be identified to assist with the implementation of Improvement Plans.



#### Appendix C: Possible evaluative Questions for Departmental Reviews

The review of a department's teaching function will normally include a review of at least two key programmes or majors offered by the department, one at undergraduate level and the other at postgraduate level. The evaluative questions listed below are derived from the HEQC's generic criteria for programme review and can be used to guide the programme evaluation component of the review.

#### Curriculum Design

- i. Are the programme's purpose, rationale and learning objectives/ outcomes clearly stated?
- ii. Has the programme been approved and does it meet faculty, institutional, national and where relevant, professional requirements?
- iii. Are the courses making up the programme coherently planned with respect to levels, credits, purpose, outcomes, content and rules of combination? Are the rules and different learning pathways clearly spelt out for students?
- iv. Does the programme meet and balance the needs of all its stakeholders: students, employers, the professions, regional and national needs, institutional and departmental goals? Where relevant, are external stakeholders consulted about its design?
- v. Are the programme's course contents up-to-date, research informed and appropriate to the programme's learning objectives/ outcomes and student development pathways and the South African context?
- vi. Does the programme promote students' access to and competence in the use of ICTs? To what extent does it provide a technology and organisational infrastructure that enables an electronic learning and teaching environment?
- vii. Does the programme adequately cater for the needs of educationally disadvantaged students? Is academic development provision properly integrated with the mainstream curriculum?
- viii. Where relevant, does the programme provide supervised and assessed service learning or work-based experience for students?



## Student Profile and Performance

- i. How is student recruitment and placement planned to ensure that its selection criteria are clear and transparent and that the programme recruits the students it wants?
- ii. How does the current student composition and profile compare with institutional, faculty and departmental equity targets?
- iii. How does the programme's graduate profile and degree class distribution compare with its intake profile? Race and gender break-downs of through-put and retention rates should be considered.
- iv. What measures are in place to timeously identify students at risk?
- v. How do expert peers rate graduate performance and the quality of student learning on the programme?
- vi. How does the programme develop research skills and generic lifelong learning skills in students?
- vii. What does graduate opinion indicate about their satisfaction with the programme and where relevant, about their employability?

#### Staff and Research Profile

- i. Are academic staff, including contract, part-time staff and tutors who teach on the programme academically, professionally and educationally qualified to do so?
- ii. How do the research activities of academic staff feed into the curriculum particularly in the case of postgraduate programmes?
- iii. Do undergraduate students receive sufficient exposure to senior academics?
- iv. Are staff who teach on the programme (including tutors) competent in the use of ICTs for teaching and learning?
- v. Is the programme adequately supported by administrative, technical and support staff?

#### Programme Management

- i. Is the programme managed effectively?
- ii. Is the programme adequately resourced?



- iii. Is the curriculum team satisfied with the management of the programme? Are professional working relations between staff maintained through good communication and cooperation?
- iv. How does the programme monitor student performance and progression and what mechanisms does it have to identify and assist students at risk?
- v. How does the programme encourage student feedback and participation in the development and running of the programme? How are student grievances, appeals, concessions, etc. managed?
- vi. How do planning, evaluation and improvement of the programme occur? How is feedback from graduates, students and external examiners used?

#### Teaching, Learning and Assessment

- i. What teaching theories and approaches underpin the teaching on the programme and are these appropriate?
- ii. Does any research into teaching and learning occur?
- iii. How is innovation in methods of teaching and learning encouraged?
- iv. In what ways are students encouraged to become independent learners?
- v. What academic development provision is offered to students and how responsive is it to their leaning needs?
- vi. What assessment policies govern the assessment of students and how do these ensure the reliability and validity of student assessment?
- vii. Is a range of assessment methods used across the programme and is there an appropriate balance between formative and summative assessment?

#### Learning Environment

- i. Does the programme have access to adequate and safe venues, equipment and technical resources?
- ii. Are rich library and study resources including access to electronic knowledge resources available to all students, both on and off campus?
- iii. Is the programme well-resourced in terms of IT infrastructure, support, hardware and software? Is the on-line learning environment coherently integrated with the face-to-face teaching environment?
- iv. To what extent does the programme create a rich learning environment for students?

#### Post-graduate Provision

- i. What policies and procedures in place to for the appointment of supervisors and for the examination process? Are these made clear and transparent to students?
- ii. What procedures are in place for monitoring the supervision process and student progress?
- iii. How does the programme offer research skills training and create a rich research environment for its postgraduate students?
- iv. How does postgraduate teaching contribute to the research profile and outputs of the department?

#### Evaluative questions for Community engagement

- i. How do you assess the quality of the CE activity?
- ii. How do you assess the impact of the CE activity?
- iii. How do you monitor CE activities?

#### Evaluative Questions for Research

- i. What self-defined goals and criteria have been established for the research activities of this unit of review including any entities affiliated to the department that are not accredited by the university research committee?
- ii. What is the current profile of researchers in the department in terms of qualifications and track record?
- iii. What counts as 'research output' in the context of this unit of review? (Books, journals, patents, reports, materials, images, devices, performances, etc.)
- iv. What measures of quality are applicable in this context (and what debates typically attend these measures?)
- v. How does the department's output fare in terms of these goals, criteria and measures?
- vi. What conditions contribute to the current research output profile?
- vii. What initiatives are underway, or are planned, to further strengthen the quality of the research output in terms of these measures?
- viii. What developmental goals does the department have for future research projects or directions?

- ix. What goals does the department have in terms of this profile (e.g. succession planning, capacity gaps, equity issues etc), and how are these related to broader institutional or national goals?
- x. What initiatives are underway, or are planned, to address the capacity developmental goals of the department?
- xi. What conditions currently support or frustrate the rollout of capacity development initiatives?

## Evaluative Questions for Management and Leadership

#### Structure, Staffing and Organisational Roles

- i. What is the management and administrative structure of the department?
- ii. How are redress and equity issues receiving attention in the recruitment, selection, appointment and development of academic and support staff?

#### **Governance and Management of the Department**

- iii. How are decisions taken in the department?
- iv. Are there dedicated structures and conveners who have responsibility for the quality management of academic programmes, research and community engagement?
- v. Are there clearly defined procedures, time-frames, reporting and communication arrangements for the administration and monitoring of programmes, research and community engagement?

#### **Departmental Planning**

- vi. How effective are the resources for the development, improvement and monitoring of quality in the core activities of teaching and learning, research and community engagement?
- vii. How effective are the systems for prioritization and target-setting at all critical decision making levels?
- viii. How effective are the systems for Goal-setting and allocation of responsibilities for developmental issues?
- ix. What are the systems used by the department to manage and account for its finances and the allocation of resources in a transparent way?



# Appendix D: Suggested Sources of Evidence to be provided for Academic Review at UNIVEN

#### A: Departmental Management

- i. Department mission and goals
- ii. Summary of SWOT analysis
- iii. Organogram showing management structures and lines of responsibility in the department
- iv. Organogram showing programmes and courses offered by the department
- v. Promotional material on academic offerings
- vi. Staffing profile and list of full-time and part-time academic and administrative and services department staff members, plus abbreviated CVs
- vii. List of all units and research centres or any other entity associated with the department
- viii. Departmental budget
- ix. Reports of planning and review meetings and examples of minutes of these meetings
- x. Financial management systems

#### B: Management of Teaching and Learning

#### Programme Level

- i. Documentation on the registration and accreditation status of programmes offered
- ii. Organogram showing the programme structures, the courses/ modules comprising the programme, their titles, levels, credit-rating and the exit qualifications from the programme
- iii. Relevant pages of the faculty handbook, programme and course outlines and reading lists, assessment tasks and weightings
- iv. Brief description of the methods of delivery of programmes and of the resources available to support this
- v. Information on the management of programmes and staffing resources teaching, administrative and technical.



- vi. List of staff who teach on programmes, plus their abbreviated CVs and where applicable, an indication of how staff research activities contribute to the programme
- vii. Numbers and profile of students enrolled for each level/ year/ qualification on the programmes
- viii. Examples from the student record system kept by the programme administrator
  - ix. Examples of assessment tasks, especially at exit points
  - x. Samples of recently assessed student work that shows the feedback given by markers, including by tutors.
- xi. Information on how programmes cater for diversity and for the learning needs of educationally disadvantaged students
- xii. Graduation and retention data for each programme/ major as a whole by race and gender (provided by the IPQA)
- xiii. Analysed results of student opinion surveys
- xiv. Past programme review reports
- xv. Changes to the curriculum during the past 5 years and the reasons for these
- xvi. Evidence of educational research and development (including publications)

#### C: Community engagement

**Evaluating Community engagement** 

#### Qualitative

- iv. feedback from external constituencies
- v. evidence of research changing discourse or attitudes
- vi. changes in legislation or policies as a result of policy advocacy or policy research
- vii. evidence of public dialogue around research findings
- viii. extending peers to include "end users" of information, or community partners
  - ix. evidence of the use of research instruments developed by the units
  - x. formal evaluations
  - xi. information obtained from departmental reviews



- xii. student evaluations of community engagement and/or service learning, and student feedback in the form of critical reflection
- xiii. impact assessments (where appropriate).

#### Quantitative

- i. number and size of grants obtained
- ii. number of contracts awarded
- iii. number of awards won
- iv. number and range of partnerships
- v. number and range of visitors to research units
- vi. number of citations
- vii. number of invitations from social movements, industry and government to give talks, facilitate workshops or seminars, chair panels, commissions or task teams
- viii. involvement in continuing education programmes
  - ix. Number of reports, popular articles, monographs, policy documents etc

#### D: Research

#### Data on:

- i. Contract research reports
- ii. Peer-reviewed publications in accredited journals
- iii. Peer reviewed publications in non-accredited journals
- iv. Peer reviewed publications in conference proceedings
- v. Book chapters
- vi. Creative outputs
- vii. CVs related to research work



#### References

- 1. Higher Education Quality Committee. (2004). *Improving Teaching and Learning Resource*. Pretoria: Council on Higher Education.
- 2. Higher Education Quality Committee. (2004). *Criteria for Programme Accreditation*. Pretoria: Council on Higher Education.
- 3. Higher Education Quality Committee. (2004). *Framework for Programme Accreditation*. Pretoria: Council on Higher Education.
- 4. Monash University. (2003). Academic Review Guidelines.
- 5. Princeton University. (2013). Guidelines for Academic Reviews.
- 6. University of Cape Town. (2004). Guidelines for Academic Reviews.
- 7. University of Sandiego. (2011). Guidelines for Academic Programme Review.

