



University of Venda

GUIDELINES AND PROCEDURES FOR ADMINISTRATIVE AND SUPPORT SERVICES DEPARTMENTAL REVIEWS

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1. Introduction

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 Administrative and Support Services Departments¹ and other departments involved in providing support functions for the core academic activities. The goal of this process is to assess the department's strengths and weaknesses, meeting client needs, formulate action plans for improvement and enhance a department's contribution to the mission and strategic direction of the University.

2. Guiding Principles

- Quality is the professional responsibility of each individual and department.
- The strategic objectives of the university are of central importance for all Administrative and Support Services Departments.
- Administrative and Support Services Departments are expected to align their services to support the strategic objectives of the university and to obtain feedback from users on a regular basis about the quality of the operational services they provide.
- The best way to effect quality assurance and accountability is through the promotion of a culture of continuous improvement
- Comparative benchmarking leading to ongoing improvements in efficiency and effectiveness of services is a necessary component of Administrative and Support Services Departments' Quality Management Systems (QMS)

¹Administrative and Support Services Departments include inter alia: Academic Administration, Auxiliary Services, Committee Administration, Communications and Marketing, Community Engagement Directorate, Examinations, Facilities Management, Finance, Human Resources, Information Technology Services, Institutional Planning and Quality Assurance, Staff Training and Development, Student Administration, Student Admissions and Enquiries, Telecommunications, Transport.

3. Objectives of Administrative and Support Services Departmental Reviews

The major objectives are to assess whether Administrative and Support Services Departments have quality management systems (QMS) in place to:

- facilitate alignment between the objectives of the department and the strategic objectives of the university;
- identify needs and expectations of other relevant constituencies in the university with regard to the functions and services provided by the department;
- obtain feedback from other relevant components of the university on the quality of services provided;
- monitor and evaluate the services provided;
- facilitate alignment between departmental and individual performance objectives;
- have suitable software available to assist them to achieve objectives;
- support staff development and transformation;
- promote a culture of continuous improvement within the department.

Quality Management System is the combination of processes used to ensure that the degree of excellence specified is achieved. It is the sum of the activities and information the department uses to enable it to better and more consistently deliver products and services that meet and exceed the needs and expectations of its customers and beneficiaries, more cost effectively and cost efficiently, today and in future. Quality management system is also a set of policies and procedures required for planning and execution of business processes within the department. It also enables the department to consistently provide products and services that meet customer expectations and applicable regulatory requirements, and to foster a culture of continuous improvement.

4. Department for Review

The department for review may be a whole department, a unit or section within a department or any combination of these.

5. Review Cycle

Each Administrative and Support Service department will be reviewed every 5 years. Administrative and Service departmental reviews will be facilitated each year by the Institutional Planning and Quality Assurance Directorate (IPQA).

6. Review Schedule

The review schedule will be determined pragmatically by the relevant Executive Manager in consultation with the IPQA.

7. Focus of the Reviews

The standard reviews cover the following questions:

- Are the departmental plans and services aligned to institutional strategic objectives and to changing national or institutional policies?
- Are the set targets challenging targets?
- How does the department identify needs and expectations of other relevant constituencies in the university with regard to the functions and services provided by the department
- How does the department obtain feedback from other parts of the university on the quality of services provided?
- Are internal university stakeholders satisfied with the performance of the department? How is this assessed?
- Do the services provided by the department under review accord with the performance objectives allocated to the senior manager responsible for the department and the approved plan of the department?
- Are there clear performance indicators?
- Is there a clear focus on operational efficiency as well as on effectiveness?
- Are the services of the department properly aligned with the department's goals?
- Are there mechanisms in place to monitor compliance and whether the department is attaining its objectives?

- Is there a monitoring system which identifies problems timeously, and is the information fed back in order to effect improvements where needed?
- How does the department fare against any performance measures or benchmarks it has chosen for itself?
- How is the department integrating thinking on best practices or benchmarks into its plans and how does it stay in line with latest developments in the field?
- Are staff members of the department satisfied with the quality management systems in place in the department?
- How is the department contributing to the transformation goals of the university?
- To what extent is the work of the department informed by research (where appropriate)?
- Are the staff in the department appropriately qualified?
- What steps have been taken to achieve an appropriate equity profile for the department and provide staff with development opportunities?
- Are the human and physical resources adequate to enable the department to meet its objectives?
- Are the staff in the Department committed and motivated and what are their recommendations for improvement?
- Are ICT systems as appropriate to the work of the department, being fully and suitably utilized?

8. Evidence

The evidence assembled for review purposes will typically include both quantitative and qualitative information. Appropriate review data could include the following, among others:

- User Surveys
- Departmental plans
- Reports (Annual reviews, Progress reports)
- Samples of departmental outputs
- Evaluations (Typically these include any formal evaluations that have been done of aspects of the department's work, benchmarking etc.)

- Samples of performance objectives of staff
- Samples of performance reviews
- Staff Development plans and progress reports
- Client Satisfaction Surveys
- Staff Satisfaction Surveys

These provide some of the resources for the compilation of a summary overview (typically between 20 – 40 pages, depending on the size of the department) which is presented, along with a limited amount of appropriate supporting documentation, to the review team. Altogether, the self-evaluation report, with its accompanying documentation, should fit comfortably into a lever-arch file. The review team will then augment this evidence during the review visit through a programme of interviews with managers, staff and other stakeholders and by requesting sight of any routine documentation.

9. Self-Review Process

The process of producing a self-evaluation report will vary from department to department, but the process could include the following:

- IPQA and the department under review agree on a timeline for the review and on the composition of the review panel;²
- the Director of the Department under review assembles a self-review (SR) team and develops a programme for the self-review process;
- IPQA conducts information sessions with the department under review;
- IPQA supplies quantitative data where appropriate;
- Self-Review team assembles existing information;
- Self-Review team identifies priority focus areas for the review (e.g. areas of particular concern or opportunities for development), and plans a process to tackle these;

² Where IPQA is the Department being reviewed another section of the University will need to act as the administrative department and coordinate the review process

- Self-Review team proceeds with further data gathering or elaborates future development proposals;
- Self-evaluation report is assembled, emphasizing priority focus areas, areas of concern and future development opportunities;
- Self-evaluation report is circulated within the department for comments from all staff;
- Self-evaluation report is submitted to IPQA.

The department under review provides **ten** copies (depending on the size of the department and the review panel) of the self-evaluation report to the IPQA at least **six weeks before** the review panel visit. The number of copies will be determined by the number of the members of the review panel. The IPQA then distributes these to the members of the formal review panel.

10. The Structure of the Self-evaluation report

The self-evaluation report should consist of *descriptive* and *evaluative* components. The descriptive sections outline the nature of the department under review, its goals and priorities, and the criteria it takes into consideration to judge its own value and effectiveness. The evaluative components (the main body of the SER) will reflect assessments from various quarters on the department's effectiveness and efficiency, including views of the staff themselves and the views of any other relevant internal or external stakeholders.

The goal of the self-evaluation report is not simply to present the strengths of a department and disguise its weaknesses; rather the intention is to present a balanced view which reflects its achievements, but which also acknowledges difficulties and dilemmas. Indeed, the strength of a self-evaluation portfolio is reflected in its critical insight and in its developmental vision.

The Self-evaluation report is not usually intended for wider public distribution (unless the department itself decides otherwise), and should be understood as a relatively

confidential document containing frank discussion. The HEQC audit panels may request sight of some of the portfolios, although they would be expected to honour the confidentiality of the Self-evaluation reports.

Below is a suggested structure for a self-evaluation report:.

Executive Summary

- Summary of key self-evaluation assessments, and proposals for development.

Description of the department under review

- Strategic priorities and performance objectives for the department,
- The range of core and strategic services and outputs provided
- the organizational structure
- the department's quality management and performance management systems including the planning and monitoring processes
- the linkages with other Administrative and Support Services Departments and schools
- an assessment of strengths and weaknesses of the department
- Staffing profile
- existing programmes or services to support teaching, learning, research and community engagement
- how the department has implemented the transformation imperatives of the university
- Challenges faced by the Department and possible solutions
- Client satisfaction survey

Priorities for this review

- Particular areas of focus
- Current concerns or challenges

Critical reflection on

- the department's strengths and weaknesses/challenges
- Capacity within the department to effectively manage recurrent practices, as well as development and transformation priorities
- the role of the department in supporting the attainment of the institution's strategic objectives
- the relationships between the department and other key components of the university
- the extent to which wider institutional context supports the attainment of the department's objectives and staff capacity
- staff development opportunities
- employment equity profile
- departmental culture and climate

Development strategies

- A summary of improvement strategies proposed for the department, and the resources and conditions required for supporting these developments.

Appendices

- A limited range of data sets and documents that are explicitly referenced in the Self-evaluation report

11. The Review Process

The focus of the review report is on an assessment of the department's Quality Management System and alignment between the department's objectives and services.

11.1 Review Panel

The review panel is appointed by the relevant Executive Manager in consultation with IPQA and the Director concerned. The composition of the review panel will be determined having regard to the nature of the department to be reviewed but each review team will include

- (a) at least two members external to UNIVEN from the HE sector and/or experts in the relevant field, and
- (b) up to two internal members (who may not be members of the department(s) under review but who should be drawn from other sections of the university with whom the department frequently interacts as end users)

50% of the panel members must consist of end users of the department being reviewed. The relevant Executive Manager appoints the chair of the review team, usually from amongst the external membership. The chair of the review team will also be responsible for writing the review report in consultation with the review team and with the assistance from the IPQA secretariat. The review panel is assisted by a servicing officer provided from the Institutional Planning and Quality Assurance Directorate (IPQA).

11.2 Preparing the schedule for the review

The review panel receives the self-evaluation report, and may provide initial feedback and/or request additional documentation before convening the review visit. A briefing session is organized by the IPQA with the panel Chair, internal panel members and external members where possible. The main purpose of the briefing session is to identify lines of enquiry to pursue in the review and to compile the review schedule.

The schedule is finalized in consultation with the Director of the department being reviewed. The structure of the visit will be informed by a reading of the self-evaluation report (See Section 14 for a typical structure of a review visit programme). During the review, the team will meet with a representative sample of major users of the services of the department within the university and other constituencies, where appropriate, tour facilities and consider a range of evidence. The review visit typically lasts two days, depending on the size of the department of evaluation. At the end of the visit, the team will offer feedback in the form of preliminary findings.

The Chair of the review panel, with assistance from the IPQA secretariat, draws up the review report in consultation with the panel and submits this draft to the department of

review for an accuracy check. The review report, with appendices where needed, includes an executive summary, and provides a brief descriptive account of the department in question (where this differs from the self-evaluation portfolio) followed by recommendations and commendations.

12. Structure of the Review Report

The typical format for a review report is as follows:

Executive Summary

- Key findings and recommendations

Overview of Department under Review

- A brief summary of descriptive material provided in the self-evaluation report

Scope of the Review

- Priorities and limitations identified by the review panel

Services and linkages

- Evaluation of the quality of the services and linkages with other sections of the university
- Evaluation of the department's professionalism including professional development afforded to staff
- Evaluation of the quality of the department's capacity to manage continuous improvement and transformation

Community engagement

- Evaluation of the department's capacity to develop and fulfill its own community engagement agenda (if applicable)

Quality Management Systems

- Evaluation of the leadership capacity in the department, and the department's collective capacity to manage professionally both recurrent activities and continuous improvement;
- Appraisal of the role of the institutional context (including senior management) in supporting the development and activities of the department.
- Appraisal of the systems in place to facilitate the alignment with the university's strategic objectives and policies and performance management

Staffing

- Evaluation of the strength and qualifications of the staff against the goals of the department, and the professional development activities undertaken

Transformation

- Evaluation of the manner in which the department is engaging with transformation imperatives

People Management

- Evaluation of the manner the department is engaging with People Management imperatives such as "Grow our Own Timber"; "Staff Development" and regular performance discussions

Commendations

- Examples of good practice

Recommendations for improvement

- Commentary on the development proposals contained in the self-evaluation report, and any additions to these
- Recommendations for forms of support needed to assist the department to fulfill its goals

Appendices

- Any additional data or documentation generated during the formal review process

13. Post-Review Process

The completed review report (together with a copy of the self-evaluation report) is submitted simultaneously to the relevant Executive Manager and the Director of the Department, normally within a month of the review visit. The relevant Executive Manager then initiates and convenes whatever meetings are necessary with the Director and appropriate department in order to address issues arising from the review report. A plan of post-review development is agreed and documented, noting clearly the responsibilities of various organizational departments to the development, the resource implications, and a time-line. The final review report and the Improvement Plan will be submitted to the SMC for comment and information. The review report may be requested during the HEQC audit of the institution.

Periodically, IPQA will report to the Quality Assurance Board (QAB) on trends and issues emerging from Administrative and Support Services department review reports, and a summary of review activities will be included in annual reports to Senate and Council.

14. Draft Schedule for Administrative and Support Services Departmental Reviews

DAY ONE:

09h00- 09h30	Briefing Session for External Review Panelists Input from the Institutional Planning and Quality Assurance with reference to the University's expectations regarding the Review Process. Addressing any further review queries.
09h30 – 10h00	Panel's Planning Session (of the day's proceedings)

10h00 – 11h00	Interviews
11h00-11h30	TEA With Self-Review Team. Question & Answer Session
11h30 - 12h15	Complementary Information to the Self-evaluation report The self-review team is invited to address any points requiring clarification and answer questions Staff Session
12h15 - 13h15	<i>Working Lunch at Review Venue</i>
13h15 - 14h30	Interviews
14h30 - 15h15	Student Interviews (where necessary)
15h15 - 16h30	TEA OPEN SLOT An opportunity for any member of staff to raise any matter with the Review Panel for their consideration. Staff Session End of Day One

DAY TWO:

09h00 – 09h30	relevant Executive Manager Director Staff Interviews
09h30 – 10h00	Staff from other relevant components in UNIVEN Staff Interviews
10h00-11h00	Section Heads Staff Interviews
11h00 – 11h30	TEA & Touring Facilities
11h30-12h30	Staff Interviews
12h30-13h00	Interviews
13h00-13h30	Student Interviews (where necessary)
13h30 - 14h30	Structuring the Review Report <i>Working Lunch at Review Venue</i>
14h30 – 15h15	Verbal Report Meeting with self-review group and/ or selected staff linked to the self-review process to hear verbal report of the main findings. Nominee from Institutional Planning and Quality Assurance is invited to attend to note key commendations and recommendations.

	Staff Session
15h15 – 16h00	TEA & Closure Version One of the Review Report. Chair and IPQA make arrangements in terms of the proposed timeline.

15. References

Hope College. (2003). *Guidelines for Departmental Reviews*. Holland

St Mary's College of California. (2011). *Administrative Departmental Review Guidelines*. California.

University of Auckland. (2010). *Guidelines for Departmental Reviews*. New Zealand.

University of Cape Town. (2007). *Guidelines for PASS Reviews*. Cape Town