# **UNIVERSITY OF VENDA**

# MONITORING AND EVALUATION OF TEACHING & LEARNING POLICY

**REVISION HISTORY** 

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: Institutional Planning & Quality Assurance

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Signature of the Registrar :

## TABLE OF CONTENTS

1.	INTRODUCTORY/PURPOSE	3
2.	REGULATORY FRAMEWORK	3
3.	LINKS TO OTHER POLICIES	3
4.	SCOPE	4
5.	POLICY CHANGES	4
6.	DEFINITIONS	4
7.	POLICY STATEMENT	5
8.	APPROVAL	7
9.	IMPLEMENTATION	7
10.	REFERENCES	9
11.	APPENDICES	
11.	1 APPENDIX A	10
11.	2 APPENDIX B	37
11.	.3 APPENDIX C	44

## Policy on Monitoring and Evaluation of Teaching & Learning

## **1. Introduction/Purpose**

- 1.1 The academic profession upholds the values and practices of constructive feedback, self-evaluation, peer review and ethical professional conduct. This applies to all aspects of academic work, including curriculum design and delivery.
- 1.2 This policy commits the University to a systematic approach to Monitoring and Evaluation of teaching and learning.
- 1.3 The University of Venda pursues national/international standards of excellence in teaching and learning.
- 1.4 The University's approach to internal programme review, students' evaluation of academics and annual departmental reviews play a major role in the pursuit of these standards.

1.4 The University is committed to continual improvement of the quality of its activities and achievements (including quality programmes and courses) in order that it can fully realize its Vision and Mission.

## 2. Regulatory Framework

#### The policy's regulatory framewok is based on the following:

2.1 The Higher Education Act 101 of 1997;

2.2 Higher Education Quality Committee. (2004). *Criteria for Programme Accreditation*. Pretoria: Council on Higher Education and

2.3 Higher Education Quality Committee. (2004). *Criteria for Institutional Audits*. Pretoria: Council on Higher Education.

## 3. Links to Other Policies

## This policy is linked to the following other policies:

- 3.1 The Strategic Plan 2009 2013;
- 3.2 The Assessment Policy;
- 3.3 The Teaching and Learning Policy (Draft);
- 3.4 The Policy on Skills Programmes and

3.5 Record Management Policy.

# 4. Scope

The policy applies to the following stakeholdersf the University of Venda.

4.1 The Deputy Vice-Chancellor: Academic;

4.2 Deans;

4.3 Heads of Departments;

4.4 Programme Coordinators;

4.5 All members of academic staff and

4.6 Students.

# 5. Policy Changes

Changes to this policy should be authorized by Council in consultation with,

5.1 School Boards and

5.2 Senate.

# 6. Definitions

6.1 A *qualification* is the formal recognition and certification of learning achievement awarded by an accredited institution.

6.2 A *programme* is a purposeful and structured set of learning experiences that leads to a qualification. Programmes may be discipline-based, professional, career-focused, trans-, inter- or multi-disciplinary in nature. A programme has recognized entry and exit points. All higher education programmes must have a core component. The internal organization of programmes is otherwise not prescribed by this document.

6.3 *Courses* are coherently scoped, sequenced and structured units of study that are normally undertaken by students in each semester/teaching period which together constitute a programme.

6.4 A *module* is a course unit, where typically a student will take an average of 6 modules per semester/year.

6.5 *Teaching and Learning* are part of a system involving curriculum development, assessment, and academic staff and student development

# 7. Policy Statement

## 7.1 General policy statements

The purpose of this policy on internal programme review (IPR), annual departmental review (ADR) and student evaluation questionnaire (SEQ) is to,

7.1.1 Maintain and improve the standards and overall quality and soundness of all programmes and courses;

7.1.2 Receive and respond to peer, expert and student feedback on the quality of programmes and courses and

7.1.3 Assure the University Council, Vice-Chancellor and other interested parties of the high standards and overall quality and soundness of the University's programmes and courses.

## 7.2 Internal Programme Review

7.2.1 All programmes will be internally reviewed at least every five years (Annexure A, Processes & Procedure).

7.2.2 Programme reviews will be conducted by a review panel (Quality Assurance Task Team) with two external subject specialists (one of them acting as a chair) and a majority of internal members appointed by the Deputy Vice-Chancellor Academic in consultation with the relevant Dean.

7.2.3 The Quality Assurance Task Team (QATT) will review appropriate clusters of closely related programmes within schools/departments.

7.2.4 The Quality Assurance Task Team will normally not exceed nine members, but this may be varied by the Deputy Vice-Chancellor Academic.

7.2.5 Schools will provide all materials and staff time required by the review panel, and will meet the financial costs of programme reviews.

7.2.6 The Institutional Planning & Quality Assurance Directorate will facilitate the review process on behalf of the Deputy Vice-Chancellor Academic.

7.2.7 Programme reviews will examine programme standards, the appropriateness and quality of the courses of which programmes are comprised, and the overall quality and soundness of programmes.

7.2.8 The chair of the Quality Assurance Task Team will provide the Dean with a written programme review report.

7.2.9 The Dean will provide the Deputy Vice-Chancellor Academic with a copy of the programme review report.

7.2 .10 The Dean will present to the School Board the programme review report and a School's response to the report. 7.2.11 The Deputy Vice-Chancellor Academic will present the programme review report, and decisions in relation to the review report and its recommendations, to the University Senate and Council.

7.2.12 The Deans will be responsible to the Deputy Vice-Chancellor Academic for the implementation of the decisions in relation to the review report and its recommendations.

## 7.2. Annual Departmental Reviews

7.2.1 All departments will be reviewed internally per annum (Appendix B, template for annual departmental review).

7.2.2 The annual departmental reviews will be conducted by the School Quality Assurance Committee.

7.2.3 The School Quality Assurance Committee will examine the annual departmental reports presented by the departments and evaluate the overall performance of the department which includes the quality of offerings and the overall quality and soundness of programme(s).

7.2.4 The Dean/Chair of the School Quality Assurance Committee will present the annual departmental review reports to the 1<sup>st</sup> meeting of the Quality Assurance & Promotion Board.

7.2.5 The Dean will submit the annual departmental review reports, and decisions in relation to the evaluation report and its recommendations, to the DVC Academic.

## 7.3. Student Evaluation Questionnaire (Student feedback on courses/modules)

7.3.1 Student feedback on courses/modules is vital information for course evaluations (Appendix C, Student Evaluation Questionnaire Form).

7.3.2 To support course coordinators/HoDs in collecting and responding to student feedback on modules, the University provides a document entitled Guidelines on Student Evaluation Questionnaire.

7.3.3 The Student Evaluation Questionnaire form includes a student feedback instrument and a standard process for collecting feedback, processing the information, and reporting results to course coordinators.

7.3.4 The student evaluation questionnaire instrument is designed to obtain student feedback in relation to key aspects of course design and delivery.

7.3.5 All course coordinators/HoDs are required to ensure that student feedback on modules is collected; using the questionnaire, at least once each year/semester the course is conducted.

7.3.6 Course coordinators/HoDs are encouraged to gather feedback on courses from a range of sources using a variety of instruments and processes.

7.3.7 Course coordinators/HoDs are responsible for initiating student evaluation of modules, but Deans, and the DVC Academic may also initiate.

7.3.8 The student evaluation questionnaire results are provided to the course coordinator/HoD and to the Dean. The DVC Academic will be given access to the evaluation results

7.3.9 The University will use student evaluation questionnaire results for quality assurance purposes and are intended to inform decisions on course/module development and the overall process of monitoring the effectiveness of courses.

7.3.10 The Student Evaluation Questionnaire will also be used for staff development.

# 8. Approval

This policy must be approved by:

8.1 The Quality Assurance & Promotion Board;

8.2 Senate and

8.3 Council.

## 9. Implementation

## 9.1 Responsibility

9.1.1 The responsibility for this policy lies with the DVC Academic who presents an annual internal review of programmes report to Senate on the state of programmes at the University.

9.1.2 Deans and Heads of Departments should provide all academic staff with copies of this policy and oversee implementation.

9.1.3 This policy should be discussed in School/Departmental Boards for the purpose of implementation and adaptation to the specific discipline and/or profession.

## 9.2 Communication

9.2.1 Policy roll-out

9.2.2 Intranet/Quality Management Systems (QMS)

9.2.3 Nendila

9.2.4 Policy File

## 9.3 Sign-off acknowledgement

The Registrar's office is responsible for the signing off of this policy on behalf of Council.

## 9.4 Policy review

9.4.1 Formal review of this policy may be initiated by the Quality Assurance & Promotion Board, School Boards, Senate and Council.

9.4.2 The policy will be reviewed every five (5) years.

## **10. References**

Birkbeck (University of London): Guidance Notes on the Process for Internal Review of Taught and Research Programmes 2005/06.

HEQC Teacher Education National Review Manual, 2006.

Higher Education Quality Committee. (2004). *Criteria for Programme Accreditation*. Pretoria: Council on Higher Education.

Higher Education Quality Committee. (2006). Criteria and Minimum Standards for Bachelor of Education (Honours). Pretoria: Council on Higher Education.

Higher Education Quality Committee. (2006). Criteria and Minimum Standards for Bachelor of Education. Pretoria: Council on Higher Education.

Higher Education Quality Committee. (2006). ACE *Criteria and Minimum Standards*. Pretoria: Council on Higher Education.

James Cook University: Course Review Guidelines for Undergraduate Course Review (including Honours).

University of Glasgow: Guidelines for Programme and Course Approval (2005-06).

University of Sterling: Departmental Review - Administrative Guidelines.

University of Bristol: Departmental Review Guidelines.

# **APPENDIX A**

# **SECTION 1**

# The Internal Programme Review Processes and Procedure

## 1.1 Background

The University of Venda is embarking on a system of periodic review of programmes. This will operate on a 5 year cycle determined by Senate. The primary purposes of the five-year reviews are to determine program quality, program viability and future directions of the departments.

The department/school's five-year reviews will consist of an evaluation of factors that are currently influencing the school/department's outlook or are expected to do so in the future; an evaluation of outcomes measures (performance indicators) that have been developed to assess program quality and viability and an evaluation of future directions of the department/school. Specifically, the annual and five-year reviews will document and showcase the department/school's accomplishments (past), serve as a basis for department/program evaluation (present) and guide departmental planning (future).

The internal reviews are one of the main ways by which the University assures itself of the quality of the provision delivered by departments/schools in-order to meet the University's needs. The reviews will look at all departmental activities, that is, management, resources, research, teaching, learning and assessment and quality assurance matters.

The internal reviews will also be used as an aid to schools/departments preparing for external quality assurance assessment (Engineering Council of South Africa, Higher Education Quality Council, National Subject Reviews, Health Professionals Council etc).

The University Senate places greater reliance and emphasis on internal institutional review processes to safeguard quality and standards, and to promote enhancement. The focus of the review is on teaching, learning, assessment, research, and community engagement.

The internal reviews provide a formal opportunity for a department/school to reflect on and critically evaluate its provision and to benefit from a constructive dialogue with senior academics and external subject specialists. The review process is intended to be positive and constructive, supporting departments/schools in the enhancement of their provision. It is not a witch hunt exercise.

# **1.2** The Aims and Outcomes of the Internal Programme Review Processes

#### **1.2.1** The aims of the internal review process

- To evaluate the relevance of programme aims to the overall aims of the Department/School's provision and the relevance of the intended learning outcomes for each programme to the aims of that programme;
- To evaluate the continuing effectiveness of teaching, learning and assessment in meeting the intended learning outcomes for each programme;
- To ensure that intended learning outcomes and curricula remain current and valid in the light of developing knowledge within the discipline, and the application of that knowledge in practice;
- To benchmark against national key performance indicators as stated in the National Working Group (NWG, 2001) document;
- To obtain feedback from staff, students and other stakeholders through meetings and documentation on the quality of teaching, learning and assessment, the student learning experience and learning resources;
- To evaluate the effectiveness of the measures taken to assure and enhance the quality of provision and maintain standards;
- To explore with the Department/School its approach to and plans for the enhancement of provision and
- To provide support to the Department/School for its teaching provision and explore ways of promoting effective learning.

#### **1.2.2** The outcomes of the internal review process

- Evaluation of the quality of the provision under review and of quality enhancement strategies;
- Evaluation of the Department/School's procedures for assuring the standards of awards and the quality of provision;
- Identification of good practices for dissemination across the University, as appropriate and

• A written report with recommendations for action to address any identified weaknesses and to further strengthen provision and thereby further enhance the provision of teaching, learning and assessment.

# 1.3 The Quality Assurance Task Team

The Quality Assurance Task team (QATT) will undertake the review whose membership will comprise at a minimum the following:

- The Director: Institutional Planning & Quality Assurance (Convenor);
- DVC Academic or representative;
- At least one external (or two, depending on the size of the department) subject specialist from other higher education institutions in South Africa;
- A student representative;
- An academic from another department within the same School;
- Curriculum specialist
- An administrator, normally from the Institutional Planning & Quality Assurance Directorate, who will act as secretary to the task team.

The size of the Quality Assurance Task Team may be increased for large departments or where the internal review encompasses more than one department. The Head of the Department being reviewed will be asked to nominate at least four external subject specialists (ESS) for the consideration of the Convener; the Convener will appoint external members. The external subject specialist cannot normally have been a member of staff or a student of the University in the five years prior to the review nor can they be the current external examiners. The external subject specialist will receive a fee plus reimbursement (as determined by the Human Resource Department) of expenses (subject to taxation). The unit/department is responsible for these costs and for all communication with the external subject specialist.

The administrator is a full member of the Quality Assurance Task Team and will liaise with the Department before and after the visit, take notes during the visit and draft the report of the review on behalf of the panel.

The Dean of the School in which the Department under review sits has the option to attend all meetings on the day of the review but s/he will not formally be part of the task team or take part in its deliberations in any way. Whether, the Dean attends the meetings throughout the day or not, a meeting of the Quality Assurance Task Team with the Dean at the end of the day will be held to discuss the panel's findings.

# **1.4 Frequency and Timing of Reviews**

The Institutional Planning and Quality Assurance Directorate (IPQAD) will draw up a five-year rolling programme of internal reviews in consultation with the DVC Academic, Deans and Heads of Department as appropriate and table the report at the Senate. The programme aims to distribute the reviewing load in any one year across schools and takes

account, where possible, of issues such as joint degrees, inter-disciplinarity and articulation with external accreditation timetables. The programme also seeks to distribute the reviewing load evenly across each year of the five-year cycle. In certain instances a review may cover two or more departments following consultation with the relevant Deans and Heads of Departments.

Reviews won't be held at the beginning or end of the academic session or during examination periods. The internal reviews will be held in the period February to mid April and August to mid October and when students are available to meet with the Quality Assurance Task Team. The IPQAD will consult and liaise with departments before review dates are finalized.

# **1.5 Format and Duration of the Review**

The format of the review can be summarized as follows:

- Submission of documentation (Self evaluation report) by the Department/School;
- Review of the self evaluation report (SER) by the Quality Assurance Task Team;
- The Quality Assurance Task Team visit (site visit) to the Department/School to meet with staff and students;
- Production of a report by the Quality Assurance Task Team which is submitted to QAP Board then the Senate;
- Action on the recommendations by the Department/School and others named within the report;
- Provision of a progress report by the Department/School and others to Quality Assurance & Promotion Board eight months from the implementation of the recommendations;
- Two and half-year interim visit by the Convenor of the Quality Assurance Task Team and two Quality Assurance & Promotion Board representatives to review further progress on recommendations, new developments and new initiatives.

The duration of the review visit is generally determined by the size of the Department/School (minimum of 2 days). At least 3 months in advance of the date of the internal review, a meeting is held with Institutional Planning & Quality Assurance Directorate staff and the Head and other relevant staff from the Department to be reviewed to discuss the Internal Programme Review Guidelines, documentation and programme.

# **1.6 Documentation for the Review**

Prior to the visit members of the Quality Assurance Task Team are provided with a selfevaluation report (SER) and supporting background documentation. The self evaluation report is normally prepared by the Head of Department in conjunction with other staff. It is also suggested that the Head of Department must consult with students on the self evaluation report, perhaps at a staff/student committee meeting, with a view to seeking feedback on whether or not it reflects the department they know.

The format of the Portfolio should follow the *Guidance on the Preparation of the Portfolio* (Section 2). The Institutional Planning & Quality Assurance Directorate office will liaise with the department over documentation that may be available from other offices either within the Central Administration or the School Office.

Departments/Schools should supply a full set of documentation covering all programmes and courses under review. The IPQAD Office will consult with the Department to determine the most suitable format for the documentation e.g. paper copy, electronic copy or web pages. The Quality Assurance Task Team members may request to see any documents not selected. Requests for other documentation may be made in advance of or on the day of the review or post-review.

The IPQAD Office will liaise with the Department over the number of copies of documentation to be provided (normally seven). The IPQAD requires the documentation at least six weeks in advance of the internal review date. The IPQAD will order the documentation and compile a contents list. The Portfolio will be circulated four weeks in advance of the review date to the QATT members.

The following categories of documentation are required:

#### A. Teaching, Learning and Assessment

- Subject information provided for students (e.g. Course Handbooks for modules and programmes, Departmental Handbooks, etc).
- Programme specifications for all taught programmes (undergraduate and postgraduate) for which the department is responsible.
- Relevant subject benchmark statements.

## B. Core Information

The following data (to be supplied by the HEMIS Office), for the previous three years, which has been used to inform the self-evaluation of the provision:

• Entry qualifications and entry routes by programme, if available;

- Student numbers in the current session (headcount and FTEs) for:
  - (i) undergraduates on each module and in each Honours year (separately for single and joint Honours),
  - (ii) taught postgraduates on each programme,
  - (iii) ethnicity,
  - (iv) disabilities;
- Progression and completion data (by programme, if available);
- Student Success Performance Indicators and degree classification results;
- First employment destinations;
- Any other data collected routinely by the department in regard to teaching and learning activities which have been referred to in the Portfolio.
- Details of departmental management, administration and organization and staff responsibilities including the composition and remits of any departmental committees concerned with teaching, learning and assessment activities.
- A list of all current departmental staff including: academic staff together with junior lecturers; research staff if involved in teaching; hourly paid teaching staff (e.g. postgraduate students who act as tutors or demonstrators); support staff; etc, showing the grade, full-time equivalent and any vacancies.
- Academic staff age profile (10 year intervals i.e. 20-30; 31-40, etc) and gender balance.
- Details of the departmental workload model and current workload details for academic staff and hourly paid teaching staff.

#### C. Quality Assurance Information

- Details of departmental quality assurance procedures.
- External examiners' reports and related correspondence including the department's response to any issues arising from the reports of the previous three years.
- Annual course monitoring reports for the previous three years for all taught courses (undergraduate and postgraduate) offered by the department.
- Analyses of student feedback questionnaires for all taught courses and laboratories (if appropriate) offered by the department for the previous and current year.

- Previous external quality assessment report along with an update on action taken in response (if appropriate).
- Previous internal departmental review report together with the response of the department and others mentioned in the recommendations.
- The most recent reports of accrediting bodies (if appropriate).

#### D. Committee Minutes

- Minutes of all staff/student committee meetings for the current and previous two sessions.
- Minutes of the main departmental committee(s) dealing with teaching, learning and assessment for the current and previous two sessions.
- Minutes of School/Departmental Quality Assurance Committee (or equivalent), where appropriate.
- Other minutes or other reports relating to operation or review of courses and programmes (e.g. reports of any course reviews).

# **1.7 Review of Documentation**

Each panel member (Quality Assurance Task Team member) will scrutinize the documentation provided to him/her prior to the visit. The panel will agree on the areas and issues to be covered in the visit, and will identify the individuals/groups who it wishes to meet.

The Panel members should focus on the robustness of the Department's procedures and mechanisms for assuring quality and its plans for enhancement. The external subject specialists will have a key role in programme review aspects, in particular:

- (a) Reviewing the programmes in the light of relevant national subject benchmark statements and other external reference points, including the requirements of any relevant Professional and Statutory Bodies where relevant;
- (b) The appropriateness of the Department's mechanisms for assuring the standards of awards.

The Quality Assurance Task Team will consider the extent to which the self evaluation report is constructively self-critical and discusses departmental strengths and weaknesses. Each Panel member will provide the IPQA office administrator with a report on any topics or areas of concern in advance of the review date for consideration at a pre-review meeting which is normally held one week in advance of the review.

Following the pre-review meeting, the Head of Department will receive a note of the main areas the Panel wishes to explore during the visit. The Panel may explore some topics in more than one meeting and will not be restricted from exploring others as they arise on the day, likewise they may not raise all the topics listed on the day. The Department should not respond in advance of the visit to the items identified; the note is for information only. However, where the panel wishes some clarification on minor points, it may make an explicit request for a response prior to the visit.

# 1.8 Visit by the Quality Assurance Task Team

The Quality Assurance Task Team will visit the Department/School and meet with individuals and groups of staff and students. The normal pattern of the visit is:

- A private meeting of the Quality Assurance Task Team;
- A meeting with the Head of Department and the Dean;
- Meetings with undergraduate and postgraduate students on taught courses;
- Meeting with key academic staff and others who teach students and support students or staff (without the Head of Department)
- A meeting with hourly part time staff (without the Head of Department);
- A meeting with probationary lecturers (without the Head of Department);
- A meeting with the Head of Department and the Dean to discuss issues which have arisen during the course of the day.

# **1.9 The Review Report**

Following the visit, the Quality Assurance Task Team will produce a full report identifying the key strengths along with conclusions and recommendations for improvement or change. The recommendations contained within the report will indicate who is to take action: this may be targeted at the Department, the School, a University Service, etc. The recommendations will be ranked in order of priority.

The Report should include an assessment of the information about the department's/program's objectives, activities, and achievements within the context of the department's /program's potential and of the University's overall objectives and responsibilities. (Specific topics to be addressed might include: the quality of entering students, the quality of the course of study, the quality of program graduates, the quality of the school, and the productivity of the school).

The Quality Assurance Task Team Report should include recommendations concerning:

- The future of the department's/program's academic programs, structure and activities. (These could range from a recommendation to expand the scope of the program to emphasis on a specific aspect of the program to discontinue a program.
- The identification of faculty members who will continue to be associated with the graduate degree program.
- Possible change(s) in the direction, structure, or activities of the department/program in order to improve its quality, increase its effectiveness or to utilize the University's resources more efficiently.

The administrator will draft the report, which will be circulated initially to the Convenor and afterwards to other members for comment or amendment. The final draft report will be made available to the Head of Department for the correction of factual inaccuracies or misunderstandings within eight weeks of the review visit. The Department will have two weeks to provide comments on factual accuracy.

The draft will be sent to the Head of Department and can be discussed with colleagues in the Department but should not be widely circulated. Any changes to the report suggested by panel members or by the Head of Department will be subject to the approval of the Convener of the Quality Assurance Task Team. The report is then submitted to the Quality Assurance & Promotion Board which endorses or amends the report and the recommendations and forwards them to the Department and others named in the recommendations for action. The Executive Management and the Senate will be advised of recommendations that have more serious academic or resource implications.

A report on the progress made in addressing the recommendations of the review will be submitted by the Department to Quality Assurance & Promotion Board within six months of the date that the Panel's Report was received by that Committee. It is the responsibility of the Convener of the Quality Assurance Task Team to ensure that the recommendations are acted upon and reported back to Quality Assurance & Promotion Board. The Chair of Quality Assurance & Promotion Board will be responsible for maintaining an overview of the internal programme reviews.

# 1.10 Two and a Half Year Interim Visit

During the third session following that in which the original review was conducted the Convener of the Quality Assurance Task Team and the Quality Assurance & Promotion Board Representative will undertake an interim visit with support provided by the IPQAD administrator.

The Department will be asked to provide an update report on progress made in relation to the review recommendations and on any new teaching, learning and assessment developments or initiatives implemented since its report at six-month post review. The Department will also be asked to comment on the benefits, or otherwise, that it has experienced as an outcome of internal review process. The IPQAD office will review relevant External Examiner and Faculty Annual Course Monitoring Reports for the intervening period to identify any matters arising that might be considered at the interim visit.

The Convener and the Quality Assurance & Promotion Board Representative will meet with the Head of Department and the Dean. Where there were recommendations related to the student learning experience, a meeting with student representatives may also be held to seek the student perspective on whether or not steps taken by the Department in addressing the recommendations had been successful.

The administrator will produce a short report as the outcome of the interim visit. The report of the interim visit will be submitted to Quality Assurance & Promotion Board in the same way as the full internal review reports.

# **SECTION 2**

# **Guidance on the Preparation of the Portfolio**

# 2.1 Introduction

The development of the Self-Evaluation Report (SER) requires the department/school to engage in critical self-evaluation leading to identification of areas of best practice, improvement areas and other interventions required in order to enhance the quality of the programmes. This process should culminate in the preparation of a self-study document that addresses the criteria and the minimum standards set out. The purpose of this section is to provide guidance on the elements required to demonstrate compliance with each criterion, and it offers suggestions on documentation that may be used to demonstrate compliance.

The narrative account must be led by self-assessment in relation to each criterion statement and thus consist of the following key areas:

- A descriptive account of the unit's performance around the criterion statement. Ensure that all minimum standards are covered.
- An analysis of the strengths, weaknesses, opportunities and threats.
- An overall assessment of the performance in relation to the minimum standards and the criterion.
- An improvement plan.

The portfolio should be divided into the following:

- a) **Introduction:** This section should provide an overview of the unit and the programmes/qualifications offered. It should include staff and student statistics per programme and cohort if applicable, for the period under review. The introduction should also set out the context of the unit in relation to the institution providing details on issues like mergers, academic restructuring, etc as relevant. Please refer to the tables attached for guidance on the statistics required. All tables and figures provided should ideally be numbered together with descriptive titles. In cases where numbers are provided for sub-categories in columns and rows, please ensure that these add up to the overall total.
- b) **Process:** This section should provide details of the review process, conduct of the review, participants in the review, evidence utilized and reflections on the value of the review process.
- c) **Innovations and Best Practices**: The unit should provide details of examples of innovation and best practice that have been identified.

# **2.2 Categories of Judgement**

The department will first evaluate the programme(s) against each individual criterion as set out in the *Internal Programme Review Criteria and Minimum Standards*.

The following categories are used to classify judgements in each instance:

- 1. <u>Commend</u>: All the minimum standards specified in the criterion were fully met and, in addition, good practices and innovation were identified in relation to the criterion. **Accredited**
- 2. <u>Meets minimum standards</u>: Minimum standards as specified in the criterion were met. Accredited
- 3. <u>Needs improvement</u>: Did not comply with all the minimum standards specified in the criterion. Problems/weaknesses could be addressed in a short period of time. **Accredited with conditions**.
- 4. <u>Does not comply</u>: Did not comply with the majority of the minimum standards specified in the criterion. **Phasing out of the programme**

At the end of each criterion, the category selected in terms of the self-evaluation should be ticked. Evaluate the department's performance in relation to a particular criterion.

Commend	Meets Minimum Standards	Needs Improvement	Does not Comply

If 'Needs Improvement' is selected, please provide an action plan, including timelines and checkpoints for improvement where applicable. The last page of the portfolio should provide a global summary of the unit's self-evaluation against the criteria:

#### The Department/School's Self-Evaluation

1	2	3	4	5	6	7	8	9	10

# **SECTION 3**

# Internal Programme Review Sources of Evidence and Categories of Judgement

## **3.1 Sources of Evidence**

Sources of evidence on which Quality Assurance Task Team evaluator panels rely to support their judgements include:

- The Self-Evaluation Report;
- Documents provided during site visits (copies of theses, examiners' reports, policies; minutes, organograms, review reports, etc).
- Statistical information provided by the HEMIS Office;
- Observations of infrastructure, e.g. lecture rooms, computer facilities, offices etc and
- Interviews with staff, students, management, alumni and any others that form part of the site visit.

Professional judgement lies at the heart of the interpretation and application of criteria. Firstly, application of the criteria needs to be sensitive to departmental/school issues and should guard against a 'one size fits all' formulaic approach.

Secondly, professional judgement regarding good practice should not be separated from justification of particular practices. For example, a programme in one context might have defensible reasons for adopting lecture formats with large classes, while another has defensible reasons for adopting a different format. Not all criteria are amenable to the simple question of conformity or non-conformity.

Thirdly, holistic interpretation and flexible application of the criteria should guard against a 'checklist' type of approach. A holistic approach works from an understanding of the interdependence of those criteria that are intrinsic to the purpose of the programme. This implies the weighting of criteria to ensure proper attention to those that are intrinsic to the programme purpose.

Finally, although this is a minimum standards exercise, reviewers are strongly encouraged to identify examples of good practice and innovation beyond minimum standards. There is a "Commend" category for judgements on individual criteria; and encouragement for improvement is reflected in the "Exceeds minimum standards" category in overall judgements on programmes.

NB: The panel members should use the category of judgements as outlined in Section 2.

# **SECTION 4**

## **Criteria for Internal Programme Review (IPR)**

# 4.1 Introduction

The University views criteria for internal programme review indicators of the minimum standards required for academic programmes. Criteria are defined as follows by the HEQC (*Criteria for Programme Accreditation*, 2004, p. 34): "Minimum standards necessary to support and enhance the quality of teaching and learning in a programme."

It should be noted that although internal programme review criteria express minimum standards, departments/schools are encouraged to strive to attain levels of quality higher than the minimum.

The need for benchmarks to measure quality is particularly relevant in South Africa where the higher education system has been characterized for decades by inequality in the provision of programmes at both undergraduate and postgraduate levels (HEQC, National Review Manual, 2006).

# 4.2 Criteria

The criteria used were adapted from the Higher Education Quality Committee programme accreditation criteria.

## **Criterion 1: The National, Institutional and Unit Context**

The programme is an integral part of the offerings of the higher education institution at which it is located and it complies with all the national policies and regulations regarding the provision of higher education qualifications in South Africa. The unit offering the programme has goals, objectives and forms of internal organization to support the programme.

- (i) The programme is consonant with the institution's mission and goals and was approved by the appropriate structures (Senate/Council).
- (ii) The programme is part of the institution's Programme and Qualification Mix (PQM), as approved by the Department of Higher Education & Training.
- (iii)The qualification and all specializations are registered by the South African Qualification Authority (SAQA) on the National Qualification Framework (NQF).
- (iv)The programme is accredited by the professional body or the Higher Education Quality Committee.

- (v) The specializations and programme outcomes take cognizance of national / regional professional priorities.
- (vi)The programme is part of the institution's planning, approval, resource allocation and quality assurance process.
- (vii) The unit offering the programme has an organizational structure that enhances the fulfillment of its stated mission, goals and objectives and provides for the effective participation of faculty and learners in matters of importance.

1. The National,	Evidence Required
Institutional and Unit	Programme Qualification Mix (PQM) of the Institution
Context	Mission and Vision of the department (internet address / senate meeting minutes supporting this/strategic plan)
	Department/School structure (Department/School Board meeting minutes supporting this)
	Mission and Vision of the School (Documentation supporting the process / Faculty Board meeting minutes)
	Different policies of the Institution including financial resourcing
	Different policies / strategies of the Department/organograms
	Staff and student data per programme
	Department/School Yearbook
	Department of Education (DoE) approval
	SAQA documentation and registration number
	HEQC accreditation
	Academic structure of the School and the Department offering the programme

#### **Criterion 2: Programme Design**

It is a fundamental requirement that programme design reflects the necessary and enabling features for a degree/diploma programme to achieve its purpose. The curriculum is suited to its purpose, internally coherent, and mindful of the needs of the students.

- (i) The programme design maintains an appropriate balance of theoretical, practical and experiential knowledge and skills. It has sufficient disciplinary content and theoretical depth, at the appropriate level, to serve its educational purpose.
- (ii) Programme design is internally coherent and in alignment with the prescribed level and purpose of a qualification.
- (iii) The number of contact hours is explicitly stated and justified/ supported in the programme outline.

- (iv) Programme design offers students learning and career pathways with opportunities for articulation with other programmes within and across institutions, where possible.
- (v) Curriculum design reflects the position of the programme as an important bridge between the professional and the academic, research-oriented study of field. Modules represent an appropriate balance between the advanced study of a specialized field and introduction to research endeavor.
- (vi) There is a policy and procedures for developing and evaluating learning materials and ensuring their alignment with the programme goals and underpinning philosophy. Where necessary academic staff members are trained to develop learning material.
- (vii) The purpose of the programme informs the statement of applied competence. The curriculum is explicit with respect to exit level outcomes and related assessment criteria, content, level, credits, rules of combination and relative weight.
- (viii) Curriculum design is coherent, reflecting alignment of explicit outcomes, curriculum choice, teaching and learning methods, assessment, and modes of delivery.
- (ix) Learning outcomes, degree of curriculum choice, teaching and learning methods, modes of delivery, learning materials and expected completion time cater for the learning needs of the target student intake. Opportunities are provided for student input.
- (x) Relevant forms of learner support have been incorporated into the programme design.
- (xi) Mechanisms and processes are in place to ensure the equivalence of provision of the programme offered by different modes of delivery and/or at different sites. In such cases, the arrangements are institutionally approved and supported. In cases where decentralized tutor-based learner support systems are in place, these are properly managed and quality assured by the provider.

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2.Programme Design	Evidence Required
	Department/School Yearbook / Programme Handbook
	Documentation supporting the process that was followed when developing the programme
	Minutes of relevant committee meetings (supporting development of the programme / continued discussions about the programme)
	Results from possible questionnaires sent to alumni / final year students about the
	programme
	Time table
	Relevant minutes of meetings of the time table committee
	Detailed syllabi/curricula of each module
	Learner guides of the different modules
	Assessment tasks
	Tutoring system (learner support)
	Learning centre of the University (CHETL)
	Writing centre
	Computer training
	Computer lab
	Library training and availability

### **Criterion 3: Student Recruitment, Admission and Selection**

Recruitment, access and selection procedures and documents are clear and accurate, attentive to diversity, current legislation and national needs in education, and commensurate with the programme's academic requirements. The number of students selected takes into account the programme's intended learning outcomes and its capacity to offer good quality education.

- (i) Appropriate policies, procedures and regulations are in place for student admission, selection and assessment. These are communicated to all students, and academic and administrative staff, and implemented consistently across the institution and programme.
- (ii) Admission and selection criteria and processes are clearly documented. Prospectuses and other recruitment documents are clear, accurate and informative about the programme, its areas of specialization, formal admission requirements, academic standards and completion requirements, and mode of delivery.
- (iii) Marketing and advertising are consistent with DoHET and SAQA regulations and accurate information is provided about the NQF level and the accreditation status of the programme.
- (iv) The programme's admission criteria are in line with the National Plan for Higher Education's (NPHE) goal for widening access. Selection criteria are

commensurate with the programme's academic and professional requirements, within a framework of widened access and equity.

- (v) The number of students selected takes account of the programme's intended learning outcomes, its capacity to offer sound professional and academic development in the selected areas of specialization and research training, and the needs of schools and other relevant parts of the education system.
- (vi) Enrolment practices include provision of accurate, helpful information including information about funding opportunities as well as efficient handling of finance and registration information.
- (vii) While the general admission requirement of a Diploma/Degree is applied, provision is made for a flexible Recognition for Prior Learning (RPL) entry route within the framework of national guidelines for higher education institutions. Admission through an RPL route may not exceed 10% of the total number of students on any programme.

3. Student Recruitment,	Evidence Required		
Admission and Selection			
	University/School policy/strategy on student admission and selection		
	University/School policy/strategy on student assessment		
	University Prospectus and School Yearbook		
	Marketing plan/material of the Department/School/University (explaining		
	admission and selection)		
	Bursary information of the University/School and financial aid information		
	RPL policy and case studies		
	Student statistics (race and gender) of student in the programme over the past 3		
	years		
	Information guides for students		

## **Criterion 4: Staffing**

Policy and procedures for staff appointments, promotion and development are legitimate and fair, promote the achievement of equity plans, and encourage a staff complement that exemplifies best professional practice in teaching, assessment, inquiry and professional service. The academic and support staff complement is of sufficient size and seniority for the programme. The institution and/or other recognized agencies contracted by the institution provide opportunities for staff development.

#### Minimum standards

(i) Recruitment and employment of staff adhere to the stipulations of the Labour Relations Act, 1996, Basic Conditions of Employment Amendment Act, 2002, and the Employment Equity Act, 1998. Appropriate administrative procedures are in place for the selection, appointment, induction and payment of staff members.

- (ii) Policies and procedures for academic staff appointments, promotions and development enable and encourage a competent, committed teaching staff who:
  - a) have an understanding of research and their specialist fields as well as of the conditions of education in South Africa
  - b) can interpret and develop learning materials and courses
  - c) apply the institution's assessment policies in the context of the programme
- (iii) Use an appropriate range of formative and summative assessment approaches at the exit level of the programme.
- (iv) All academic and professional staff teaching on the programme has recognized relevant qualifications higher than the exit level of the programme, but at a minimum a degree/diploma. There are appropriately qualified senior staffs to provide intellectual and professional leadership in the programme.
- (v) A minimum of 50% of the academic staff for postgraduate programmes have relevant academic qualifications higher than the exit level of the programme. The qualifications of academic staff were awarded by recognized higher education institutions, and at least two years of teaching experience in a recognized higher education institution together with assessment experience at the exit level of the programme.
- (vi) Responsibility for teaching rests with core, permanent staff to a greater extent than with temporary /part-time personnel.
- (vii) The staffing on the programme is in line with the equity programme of the institution.
- (viii) Staff composition is balanced and consonant with the range of disciplinary fields and phase / subject specializations offered in the programme as well as the numbers of students in each.
- (ix) Workloads allow sufficient time for the development of curricula and materials, marking of assessment and the necessary learner support. Where learner support decentralized is offered, or where marking of assessment involves external people, there are appropriate resources in place for the recruitment, training, monitoring and payment of necessary part-time and contract staff.
- (x) Programme faculty members have formal opportunities to provide input on issues affecting admissions, progress of students, resource allocation, curriculum design and evaluation, and research.
- (xi) The institution provides orientation, induction and professional development opportunities for both new academic staff members as well as part-time staff.

- (xii) Sufficient administrative staff dedicated to the programme is available, where appropriate.
- (xiii) Support staff is adequately qualified for their duties, and have opportunities for staff development.

4. Staffing	Evidence required	
_	University policy / procedures on selection, appointment, induction and payment of staff	
	members	
	University policy on health and safety in the workplace	
	Promotion criteria for academic staff members	
	Promotion criteria for administrative (support) staff members	
	Examples of University wide staff development for both academic and support staff	
	Examples of School based staff development for both academic and support staff	
	Equity programme of the Institution	
	University /School policy on Workload allocation	
	Induction programme of the University /School (mentor programme for new staff	
	members) also for temporary staff members	
	Examples of programme specific staff development	
	CV's of academic staff members	
	CV's of support staff	
	Examples of different assessment tasks	
	CV's of temporary staff	
	Evidence of communication with temporary staff (minutes of relevant meetings)	
Evidence of staff development of temporary staff		
	Research output of academic staff members	
	Minutes of meetings / discussion about the programme	
	Support to the programme from all staff members on all sites of delivery / tuition centres	

## **Criterion 5: Teaching and Learning**

The institution gives recognition to the importance of the promotion of student learning. Teaching and learning policies, strategies, methods and materials take account of the purpose of the programme being that of introducing students to research endeavor in the context of an advanced, specialized study of education. In systematically enabling student learning, teaching and learning strategies are also appropriate for the institutional type (as reflected in its mission) and consonant with the mode(s) of delivery, student composition, and programme design. There are mechanisms to ensure the appropriateness of teaching and learning methods.

- (i) The institution's central operating policies, procedures and resource allocation recognize the importance of student learning and support the programme in enabling the advanced specialized study of education together with an introduction to research.
- (ii) Programme-specific teaching and learning policies and strategies are consonant with the programme design, outcomes, and mode of delivery, learning materials, assessment criteria, and student profile.

- (iii) Students are provided with guidance on how the different components of the programme contribute to the learning outcomes of the programme. Assessment criteria and/or an explicit understanding of requirements are clearly communicated to students on commencement of their studies.
- (iv) Students are able to develop their specialist knowledge and professional dispositions by being provided with an appropriate mix of academic and experiential learning opportunities, in a variety of teaching and learning contexts.
- (v) Learning materials are aligned with the programme goals and underpinning philosophy, and are adequate in respect of content, level, purpose, and the linkage of assessment strategies to specific learning outcomes.
- (vi) Pedagogy contributes to transformation by developing the capabilities of individual students for personal enrichment as well as for academic and professional requirements.
- (vii) Where necessary, members of the academic staff are trained to develop learning materials.
- (viii) There is systematic curriculum development and revision of learning materials, and these processes are responsive to the needs of student and the profession.
- (ix) There are procedures for monitoring, evaluating and improving teaching and learning.
- (x) There are mechanisms for identifying weak and "at risk" students and for offering appropriate additional academic support.
- (xi) The quality requirements for programme delivery take into account all delivery modes.

5. Teaching	and	Evidence Required
Learning		Institution's policy on support to student learning
Learning		Institution's division responsible for academic student support (CHETL)
		Programme specific learning policies and strategies
		SAQA / HEQC proposal
		Programme specific teaching and learning policies and strategies
		Learner guides for the modules
		Information guide to students about the programme
		Details on HIV-AIDS education in the programme
		Student evaluations of the programme / separate modules
		System for identifying "at risk" students

#### **Criterion 6: Programme Coordination and Programme Review**

The programme is effectively coordinated in a way that facilitates the achievement of its purpose and intended outcomes, with due attention to mode/s of delivery. User surveys, reviews and impact studies on the effectiveness of the programme are undertaken at

regular intervals. Results are used to improve the programme's design, delivery and resourcing, and for staff development and student support, where necessary.

- (i) The programme is suitably coordinated and defined within the faculty/departmental and institutional system. An appropriately qualified senior academic with relevant experience manages the programme within the framework of an agreed-upon mandate.
- (ii) The programme coordinator provides intellectual leadership and ensures that the academic coherence and professional integrity of the programme are maintained (e.g. through appropriate procedures for curriculum development and review; consultation with staff, students, and other professional bodies; systematic tracking of relevant policy developments in areas such as the school curriculum and teacher development).
- (iii) The programme coordinator contributes to the achievement of the programme purpose by effectively coordinating programme delivery, annual planning, and advising the institution on resource allocation and staffing needs.
- (iv) Opportunities are created for student input and participation in relevant aspects of programme coordination.
- (v) The institution has procedures and appropriate guidelines for periodic programme reviews, with accountability to Faculty Board and/or Senate.
- (vi) User surveys are undertaken at regular intervals for feedback from academics involved in the programme, graduates, peers, external examiners, and other professional bodies and employers, where applicable, to ascertain whether the programme is attaining its intended outcomes.
- (vii) On an annual basis, the programme coordinator or the unit undertakes (in collaboration with programme staff) a systematic, focused review of pertinent aspects of the programme in order to monitor its success in enabling students to achieve the required exit level outcomes.
- (viii) Reviews form the basis of a feasible development and improvement plan, and the plan is systematically implemented.
- (ix) Coordination ensures that regular and effective communication takes place with the students. This includes providing reliable information on the various aspects of the programme.

6. Programme	Evidence Required
Coordination &	Information on the quality unit at the Institution responsible for self-evaluations
	Reports of previous school / departmental self-evaluations and/or reviews
Programme Reviews	Relevant minutes of Senate / Faculty board meetings
	Student feedback on the programme and specific modules
	Alumni feedback on the programme
	Minutes of relevant meetings / discussion about the programme
	Feedback from feeder schools principals
	Development plan(s) for the programme

#### **Criterion 7: Student Assessment**

Assessment policies and procedures are explicit and appropriate for the programme purpose, mode(s) of delivery, and exit level outcomes. There are clear, educationally sound policies for internal formative and summative assessment and the appointment and responsibilities of external examiners. There are mechanisms for monitoring student progress; ensuring the validity and reliability of assessment practices; recording of assessment results; settling of disputes; maintaining the rigour and security of the assessment system; RPL; and for the development of staff competence in assessment.

- (i) Assessment is integral to the programme design, teaching and learning strategies, to student and staff development, and to the improvement of the curriculum and learning materials.
- (ii) Assessment policies, procedures and practices match and support the programme purpose.
- (iii) There are clear procedures for both formative and summative assessment; and the mix, balance, assessment criteria and weighting of assessment activities are consonant with the exit level outcomes. Such procedures are made explicit to staff and students.
- (iv) Procedures exist and are followed to ensure that assignments/ tests/ projects are returned in sufficient time to allow students to benefit from academic feedback.
- (v) A range of appropriate assessment tasks (including at least one integrated assessment procedure) is used effectively to measure students' attainment of the intended learning outcomes.
- (vi) Assessment records are thorough, accurate and systematically used to generate data for grading, selecting and predicting, and review. A system is in operation for maximizing the accuracy, consistency, fairness and credibility of results, including consistency of marking, and concurrence between assessors and

external examiners on the nature and quality of the evidence of achievement of learning outcomes. Where more than one assessor is involved, internal moderation checks are undertaken to ensure the reliability of the assessment procedures.

- (vii) The assessment of student learning achievements is subject to external examination by appropriately qualified academics. External examiners are properly informed about the course they examine (curriculum and assessment), and review in full 10% of the written work being assessed, and conduct a random check of a further 20%.
- (viii) Completed external examiner reports are returned to the relevant academic member of staff and also to the programme coordinator. Problems are discussed with the lecturer concerned and the programme coordinator monitors the implementation of agreed improvements.
- (ix) Measures are taken to ensure the security of the assessment system. Assessment results are recorded securely and reliably.
- (x) Policies for ensuring the integrity of certification processes for the qualification obtained through the programme are effectively implemented.
- (xi) There is a fair and effective procedure for settling student disputes regarding assessment results, and students are acquainted with this procedure. Breaches of assessment rules are dealt with effectively and timeously.
- (xii) Student progress is monitored and appropriate action is taken, where applicable.

7. Student	Evidence Required		
Assessment	Assessment strategy of the School		
Assessment	School (and /or programme) based training opportunities for academic staff in assessment		
	Policies for the certification process		
	School policy on security of assessment tasks / marks and processes		
	Programme specific assessment guidelines		
	Information guide and learner guides to students explaining all assessment tasks		
	Assessment "grid"		
	Assessment guidelines to temporary staff		
	Assessment guidelines to external moderators		
	Examples of students' assessment tasks (exam papers, portfolios, group work)		
	Procedure for summative assessment opportunities		
	Procedure for supplementary assessment opportunities		
	Procedures for external moderation of summative assessment opportunities		
	Procedure (and form) for changing of assessment results		
	Procedure for submitting assessment results for computing and finalizing by support staff		
	Policy / strategy on allocating result codes to students		
	Examples of moderator/external examiner reports		
	Procedure for student disputes with regards to assessment results		

(xiii) Provision is made for the development of staff competence in assessment.

#### **Criterion 8: Infrastructure and Library Resources**

Suitable and sufficient venues, IT infrastructure and library resources are available for students and staff in the programme. Policies ensure the proper management and maintenance of library resources, including support and access for students and staff. Staff development of library staff takes place on a regular basis.

- (i) At all official sites of learning where the programme is offered, there are sufficient, suitable, properly equipped venues. Where appropriate, such venues include laboratories in addition to facilities for large class teaching and for small group seminars and tutorials.
- (ii) Each member of the fulltime academic staff has an office, a personal computer and access to printing facilities. Appropriate provision is made to accommodate part-time staff.
- (iii) Suitable and sufficient IT facilities, equipment and support are available at all sites of learning. This includes functionally appropriate hardware (computers and printers), software (programmes) and databases, and IT staff to provide training and support for the effective use of the facilities for teacher education.
- (iv) Administrative/ technical staff has suitable working space and adequate systems of technology and communication in order to support the programme.
- (v) Relevant, properly maintained and regularly updated library resources are available to support effective teaching, learning, curriculum development and research in teacher education.
- (vi) Appropriate use of the library and other locally accessible curriculum resources is built into the programme design and teaching and learning strategies. A library or resource centre education specialist supports and encourages appropriate library use. Resources complement the curriculum and make provision for independent student learning related to their fields of specialization.
- (vii) Orientation workshops are presented to ensure that students are enabled to access all library resources including IT infrastructure and web-based resources.

8. Infrastructure	and	Evidence Required
Library Resources		University policy on library support to Schools
		University/School policy on computer labs / commuter supply to faculties
		Detail on venues, time table and computer facilities
		Detail on offices and resources available to staff members in the programme
		Detail on the library
		Library training
		Library support specific to the programme
		Computer training
		WebCT training and support to the programme

### **Criterion 9: Coordination of Work-based Learning**

The coordination of work-based learning is done effectively in all components of applicable programmes. This includes an adequate infrastructure, effective communication, recording of progress made, monitoring and mentoring.

#### Minimum standards

- (i) Learning contracts or agreements are implemented through which the student, the higher education institution and the employer can negotiate, approve and assess the objectives and outcomes of the learning process. Various parties, i.e. the institution, students, mentors and employers, adhere to the contract or agreement on their roles and responsibilities.
- (ii) Regular and effective communication takes place between the institution, students, mentors and employers involved in work-based learning. Good working relations are maintained between the various parties involved.
- (iii) A system (both at the institution and at the place of employment) is in operation to record and monitor regularly and systematically the progress of the student's learning experience in the workplace.
- (iv) A mentoring system enables the student to recognise strengths and weaknesses in his/her work, to develop existing and new abilities, and to gain knowledge of work practices.

9. Coordination of	Evidence Required					
Work Based Learning	CV of the programme coordinator / relevant Head of Department					
	Minutes of relevant meetings / workshops and discussions					
	Student evaluation of the programme					
	Information guides to students					
	Communication through hand outs / notice boards and WebCT					
	"Call in" letters					
	Example of formal agreement between school, student and workplace for work based					
	learning					
	Student feedback on Workplace Experience					
	School's feedback on Student Experience					
	Lecturers' feedback after visiting students during work experience					
	Examples of letters to workplace (communication about Workplace Experience)					
	Schedule for lecturers' visits to students during Workplace Experience					
	Assessment activities during workplace experience					

#### **Criterion 10: Student Retention, Throughput Rates and Programme Impact**

Student retention and throughput rates in the programme are monitored, especially in terms of race and gender equity, and remedial measures are taken, where necessary. The

programme has taken steps to alleviate shortages of expertise in relevant fields, in cases where these are the desired outcomes of the programme.

- (i) Fifty percent of full-time students who enter the programme complete it successfully within 1 year (part-time students complete within 3 years).
- (ii) Over the past three years, the unit offering the programme has had access to, and has monitored and guided the analysis of information on retention and throughput rates of students.
- (iii) Planning includes mechanisms (at faculty or departmental level) for improving retention and throughput rates, and for attaining appropriate demographic diversity and responding to patterns of supply and demand with respect to skills and competences.
- (iv) Students who complete the programme successfully have attained the required level of professional competence.

10. Student Retention, Evidence Required					
Throughput Rates and	University /School policy on monitoring and managing through put rates				
Throughput Kates and	Registration and graduation data for past 3 years				
Programme Impact Throughput rate of students					
	Case studies of students taking longer than the prescribed time to complete the				
	programme				
	Improvement plan for throughput rate				
	Feedback from alumni				

# **APPENDIX B**

# ANNUAL DEPARTMENTAL REVIEW REPORT TEMPLATE

## 1. Lecturer's Semester/Yearly Report

At the end of the year (semester) the academic staff member (lecturer) shall make a written report on the course (module). The report should incorporate all information and make comments necessary for the maintenance of quality and standards and must always include:

- The period covered by the report;
- The course outline;
- Number of assessment tasks (tests, assignments, projects, field work) given to students;
- Rubric for marking projects and assignments;
- Previous examination papers and memorandums (past three years);
- The number of students who initially registered for the course (module);
- The number and percentage of students who passed the course (module);
- The number and percentage of students who failed the course (module);
- The number and percentage of students who transferred in or out, or withdrew;
- Comment on student performance in the module, including comment on marks distribution;
- Comment on the outcome of the student evaluation questionnaire (Annexure C) and
- Comment on which aspects of the module went well, what improvements could be made, and proposals for any changes thought desirable.

## The lecturer's report will help in preparing Annual Departmental Review Report.

## 2. Annual Departmental Review Report

The reports from departments should address the issues as stated in the template, but Departments are free to comment on any additional aspects that affect quality of their teaching, learning, research and community engagement.

NB. The report must be completed electronically and submitted to the School Quality Assurance Committee by the Head of Department. The Dean/Chair should forward the report to Quality Assurance & Promotion Board satisfied with the submission.

2.1 Name of department:

2.2 Total number of staff in the department (Roles and responsibilities)

\_\_\_\_\_

2.2 Academic year reviewed

-----

:

2.3 Review covered by the report

#### 2.4 Response to previous year's review

What follow-up action has been taken as a result of previous year's review? How successful has it been? Is further action required?

#### 2.5 Changes to the curricular since previous year

Have there been any significant changes to the curricular since last year (e.g. changes to the teaching methods, teaching staff, modules available, assessments methods, aims and objectives, course content? What were the reasons for the changes and how successful have they been?

#### 2.6 Admissions details

What were the applications and intake numbers from within and outside the Limpopo Province (Full Time and Part Time if applicable)? Are intake targets being met, and if not what can be done to improve matters? Is intake quality improving or declining (include admission criteria)? Discuss the selection procedure and to what extent do such selection procedures recognize the prior learning of students. Include details of any marketing activities undertaken.

## 2.7 Progression and completion rates

Comment on progression and completion rates and also highlight on any particular strains to plan around such information with the expectation of improving the conditions. What was the distribution of degrees, Honours and Masters (or number of distinctions/passes for taught degrees including Masters), number of supplementary exams, failures and withdrawals for each cohort for the year under consideration? How did students with traditional, as opposed to non-traditional, entry profiles perform? Please comment on cohort analysis conducted at departmental level and compare entry and exit performances. How does this data relate to others years and to School data for similar degrees?

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## 2.8 Student support and guidance (Students at Risk)

Comment on support and guidance mechanisms available for students in the department. Do any issues relating to pastoral or welfare provision for students need consideration? Does the module documentation provided for students require revision?

## 2.9 Student feedback

What issues have been raised at Student Staff Liaison Committee (SSLC) meetings, in module questionnaires, and in student feedback in relation to the course? How have these issues been dealt with? Have the students been informed of action taken?

## 2.10 Assessment (should be read with Assessment Policy)

Comment on the department's procedure for marking, grading, providing feedback and recording the results of assessment as well as for informing students timeously as to their progress. There should be a rubric for each assignment. Comment on assessment and moderation of test, assignment, project and examination in the department. Indicate how the department responded to comments from external examiners. How many tests or assignments were given and what constitute a year mark. Also comment on the appointment of internal and external examiners.

------

## 2.11 Staff development and teaching load

Comment on staff teaching load v/s student numbers. Indicate any staff development plans and attendance of any training, conferences or workshop in the previous year. To what extent do promotional procedures recognize staff contribution to the welfare of the department?

## 2.12 Research management

Comment on the financial research planning of the department and how research output is classified (poor, good or very good). How many papers were presented at international/national conferences or published in an accredited journal. Staff members who have completed their post graduate qualification or those who are supervising post graduate students. What mechanisms are in place to encourage research and publication by academics (mentoring of junior staff members). Collaborative research and departmental seminars

## 2.13 Quality Assurance

What mechanisms have been used throughout the year to monitor the quality of teaching and learning on the course and how successful have these methods been?

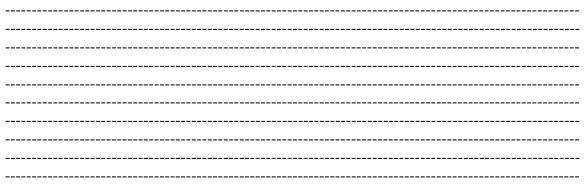
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## 2.14 Community Engagement

Which community projects are currently active? How related are they to the departmental planning? Any short courses offered by the department?

### 2.15 Links with employers

Please provide details of the involvement of employers in curriculum design and review, in discussions relating to student achievement, or consultation on any other aspect of the courses under review (if applicable).



## 2.16 Resources

Do any resourcing issues (e.g. teaching space, library provision, workspace, IT equipment) need consideration?

## 2.17 Future developments

Are there any planned developments or possible problems which need to be addressed during the forthcoming year?

#### 3. Maintenance of records

The Departments are required to keep a full set of records (minimum of 3 years) which will include:

- Minutes of all departmental committees;
- Records of student evaluation of teaching;
- Annual course reports on all courses for which the department is responsible;
- External examiners' reports and departmental responses;
- Reports of internal and external reviews and audits, and departmental responses;
- Records of annual monitoring visits;
- Student, course and module handbooks (subject files);
- Examination papers and information given to students on other forms of assessment and
- A sample of student work in each module, together with assessment records and a copy of the feedback again;

## **APPENDIX C**

## STUDENT EVALUATION QUESTIONNAIRE FORM

The instrument has been adapted from the ones developed by the Centre for Enhancement of Teacher Effectiveness, Murray University, Kentucky, U.S.A

Degree/Diploma/Certificate	:	
Name of the Module	:	
Code of the Module	:	
Module offered by	:	

#### SECTION A

**INSTRUCTIONS**: Please indicate your answer by making a cross in the column you think best represents your feelings about the given statement. Strongly Agree = 5; Agree = 4; Undecided = 3; Disagree = 2 and Strongly Disagree 1.

	1	2	3	4	5		
1. I learned a lot from taking the module							
2. The module was well organised							
3. The objectives of the module were clearly spelt out							
4. The lecturer explained the module content well							
5. I found the module boring							
6. The lecturer stimulated interest in the module							
7. The lecturer knew the module content well							
8. The lecturer encouraged students to think independently							
9. The lecturer came to lectures well prepared							
10. The lecturer was often late for the lectures							
11. The reading materials for the course were not all available							
12. The lecturer always answered our questions satisfactorily							
13. It was evident that the lecturer wanted us to do well							
14. The lecturer was not interested in students' learning							
15. Tests and assignments were not always fairly graded							
16. The lecturer did not always treat students with respect	16. The lecturer did not always treat students with respect						
17. Discussions during lectures were often not focused							
18. The lecturer was always available during consultation time							
19. All the recommended books were relevant for the course							
20. The lecturer asked thought-provoking questions in lectures							
21. The lecturer simplified course content during lectures							
22. We felt free to share ideas and ask questions during lectures							

## **SECTION B**

	Comment	on	the	content	knowledge	of	the	lecture
2.	What	did	you	find	lacking	in	the	course?
3.	What was	good aboı	at the cou	rse?				
4.	Explain yo	ur answei	r in (3)					
5.	Would you	suggest a	- any impro	ovement with	n the way the co	urse is ta	ught?	
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Please provide your answers and comments in the spaces provided.

7. Did the course teach you any additional skills outside the formal curriculum?

Library	[	]
Computer skills	[	]
Writing Skills	[	]
Verbal presentation skills	[	]
Linking to the materials taken in your courses	[	]
Other skills	[	]

8. How do you rate your lecturer?

## (Tick the box that best represents your feelings)

Exce	ellent	Good	Fair	Unsatisfactory
[	]	[ ]	[ ]	[ ]