



**COUNCIL ON HIGHER EDUCATION**  
HIGHER EDUCATION QUALITY COMMITTEE

## **SITE VISIT**

# **MANUAL FOR EVALUATOR PANELS**

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## ACRONYMS

CHE	Council on Higher Education
DoE	Department of Education
HEI	Higher Education Institution
HEQC	Higher Education Quality Committee
NQF	National Qualifications Framework
PQM	Programme and Qualifications Mix
SAQA	South African Qualifications Authority
SETA	Sector Education and Training Authority

## **INTRODUCTION**

This Manual is intended for the guidance of evaluator panels, appointed by the HEQC to conduct institutional site visits which may be required as part of the accreditation process. It summarizes the context of programme accreditation and, within this context, addresses both the nature and purpose of site visits. In particular, it deals with key aspects of the role and responsibilities of evaluator panels, including those of panel chairpersons, throughout the different stages of site visit process. In short, it aims to enable evaluator panel members to understand what is expected and required of them in carrying out a successful site visit.

## **THE CONTEXT FOR PROGRAMME ACCREDITATION**

The process of programme accreditation is located within those areas of the national policy and legislative context which address matters related to quality assurance in the South African higher education system. The HEQC of the Council on Higher Education is responsible for the accreditation of higher education institutions as education and training providers and for the accreditation of higher education learning programmes by virtue of provision of the *Higher Education Act, 1997* and the *South African Qualifications Authority Act, 1995*. An outline of this context is provided in the CHE's *Framework for Programme Accreditation (November 2004)*, which sets out also the HEQC's programme accreditation model and summarizes accreditation arrangements both for new and existing programmes. Quality-related criteria constitute a crucial element in the execution of the HEQC's functions related to programme accreditation and serve as evaluative tools in the HEQC's accreditation activities, including site visits. These criteria are set out and explained in the CHE's document *Criteria for Programme Accreditation (November 2004)*. Both the *Framework for Programme Accreditation* and the *Criteria for Programme Accreditation* are available, from the HEQC, in hard copy, and additionally may be accessed through the CHE's website (<http://www.che.ac.za>).

The HEQC, which is a permanent sub-committee of the CHE, carries out its programme accreditation responsibilities through the agency of its Accreditation and Coordination Directorate.

While the HEQC, through its Accreditation and Coordination Directorate, manages and administers the programme accreditation process, accreditation reports emanating from this process are considered first by the HEQC Board's Accreditation Committee, which makes accreditation recommendations to the Board. It is the HEQC Board which determines policy and procedures for the quality assurance work of the HEQC.

### **RESPONSIBILITIES OF THE HEQC'S ACCREDITATION AND COORDINATION DIRECTORATE**

The responsibilities of the HEQC's Accreditation and Coordination Directorate are:

1. The accreditation of *public providers* to offer stipulated learning programmes leading to National Qualifications Framework (NQF)-registered qualifications.
2. The accreditation of *private providers* to offer stipulated learning programmes leading to National Qualifications Framework (NQF)-registered qualifications.<sup>1</sup>
3. Collaboration with professional councils and SETAs on the accreditation and evaluation of professional and work-based programmes leading to NQF-registered qualifications.
4. The development and implementation of an accreditation and evaluation framework for learning programmes leading to qualifications which are not covered by professional councils and SETAs.

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<sup>1</sup> Note: *Public providers*, after approval of their Programme and Qualification Mix (PQM) by the DoE, apply for programme accreditation and on receiving such accreditation are granted funding by the DoE. The DoE requires *private providers* to be registered in order to operate as higher education institutions (HEIs) and bases its decisions on accreditation outcomes.

In connection with the accreditation work of the HEQC, the following should be noted:

- a) Accreditation Criteria (see *Criteria for Programme Accreditation*) apply to all programmes offered at main campuses and satellite campuses, as well as to off-campus programmes.
- b) The criteria apply to contact, distance education and e-learning programmes. Requirements pertaining specifically to distance education or e-learning, where applicable, are indicated in the CHE's *Criteria for Programme Accreditation*.
- c) South African higher education institutions which offer programmes *outside the country* are subject to the HEQC's programme accreditation requirements for all their local as well as cross-border academic programmes. In addition, the quality requirements of the importing country have to be complied with.
- d) Foreign institutions which offer higher education programmes in South Africa are also subject to the HEQC's programme accreditation requirements. In addition, these institutions have to satisfy the registration requirements of the DoE and the qualification registration requirements of SAQA.
- e) The HEQC normally requires an accredited programme to establish itself reasonably well before the next higher level programme in the same field can be applied for.

In carrying out its responsibilities, the HEQC may determine the need for an institutional site visit, with the intention of examining further the programme(s) under consideration within the context of the institution.

## **SITUATIONS IN WHICH SITE VISITS MAY BE CARRIED OUT**

The following illustrate situations in which the HEQC may determine a need for a site visit, although the situations listed are not necessarily mutually exclusive.

1. In connection with the programme accreditation process (see *Framework for Programme Accreditation*, pp. 10-12). The *Framework* indicates that site visits may take place, if necessary, in both the 'candidacy' and 'accreditation' phases of the programme accreditation process. When conditions are set in the 'candidacy' phase, the HEQC requires these to be fulfilled within the period of a year and, following a desktop evaluation, *may* determine the need for an institutional site visit.

2. In the case of a new institution, in respect of the requirement for provisional accreditation and registration with the DoE.
3. When an institution is proposing to make use of new or additional sites of delivery. An underlying intention in such a case is to ensure equivalence of quality in provision.
4. When an institution is proposing to employ new modes of delivery. An underlying intention is to evaluate issues related to capacity, capability and equivalence.
5. When an institution wishes to extend the level of its offerings from undergraduate programmes to postgraduate programmes.
6. In connection with the re-accreditation process, governed by the DoE's five-year *registration cycle*.
7. For any other reason determined by the HEQC.

## **THE PROCESS OF SETTING UP A SITE VISIT**

### **Decision to conduct a site visit**

The decision to conduct a site an institutional site visit, for one or more of the above reasons, is the prerogative of the HEQC. Once such a decision has been taken, the HEQC will notify the institution and will reach agreement with the institution on the timing of the site visit. The institution will be notified about the purpose and scope of the intended site visit.

### **Liaison between the HEQC and the institution**

The institution will be allocated an HEQC *contact person* with whom it will liaise in connection with all matters related to the setting up, organization and administration of the site visit, including all logistical arrangements pertaining to the visit. The institution will be provided with the necessary contact details for the contact person.

The institution is required to appoint a *site visit coordinator* who will serve as its liaison person before and during the site visit. The HEQC must be informed, at the outset, of the name, status and contact details of the appointed site-visit coordinator. Not only will the site visit coordinator be responsible, on behalf of the institution, for making all necessary preparations and arrangements for the site visit, but must also be readily available throughout the site visit period to address the needs of the HEQC panel in relation to the evaluation process.

### **Duration of the site visit**

The duration of a typical site visit is one full day, although the HEQC evaluator panel may meet during the previous evening for a *pre-site visit meeting*. However, additional days will be required in the event of a multi-site visit.

### **Format of a site visit**

As the purpose of site visits may vary from case to case, it is not possible to provide a 'generic' site visit schedule. However, Annexure C presents an example of one type of site visit. Typically, a site visit schedule, comprising a series of varying time slots, might include any or all of the following:

- Meeting between the panel and the head of the unit/ institution, programme coordinator(s) and the quality assurance officer.
- Reading and reflection periods for members of the evaluator panel.
- Interviews with academic staff, administrative and support staff, students and/or alumni.
- Visits to libraries, lecture venues, laboratories, computer facilities and other elements in the physical infrastructure of the institution.
- A concluding session with the head and/ or senior management of the unit/ institution.

In each case, the HEQC will inform the institution, in good time, of its requirements with regard to the *specific* format for the site visit. Subsequently, and also well before the visit, the site visit coordinator must inform the HEQC about the names (and positions) of those who will be interviewed, venues for sessions, catering arrangements and so on.

## **SELECTION AND APPOINTMENT OF EVALUATOR PANEL**

The HEQC will appoint an evaluator panel to conduct the site visit on its behalf. This panel comprises typically a minimum of three people, one of whom serves as chairperson and, among other things, acts as the official conduit between the panel and the institution during a site visit. (See section below on roles and responsibilities of chairpersons.)

The HEQC maintains a database of academics, subject specialists and other senior colleagues both from the public and private higher education institutions, who have received training in all aspects of programme evaluation. (Such training is the responsibility of the HEQC's Quality Promotion and Capacity Development Directorate.) Members of the panel have the responsibility for using their specialist knowledge and evaluation training to make objective judgments in relation to all aspects of the programme(s) being evaluated and the institutional context which supports the programme(s). (See section below on the roles and responsibilities of panel members.)

Well before the site visit is to take place, the HEQC will approach its preferred evaluator team members and, having made every attempt to ensure the suitability and appropriateness of its proposed panel in relation to the programme(s) under review, or any other purpose for the visit, will inform the institution of the proposed composition of the panel.

The institution has the right to object to the composition of the panel and to communicate its *reasoned* objection to the HEQC. In general, demonstrated *conflict of interest* is the only ground for objection that the HEQC will entertain. If adjustments are made to the composition of the panel in this connection, or if any member of the panel withdraws for any reason, the HEQC will replace panel members and will notify the institution accordingly.

Once a the composition of the panel has been finalized, and at an appropriate time before the site visit, the HEQC will communicate with the panel members and, among other things, will provide for each:

- Travel and accommodation details.
- The names and contact details of other panel members.
- A schedule for the site visit.
- A list of conditions against which the programme(s)/ institution will be evaluated.
- A list of required documents required to be on display during the visit.
- A copy of the letter, concerning the site visit, sent to the institution.
- A travel claim form.
- A copy of the Code of Ethics (with the relevant sections to be signed and returned to the HEQC *before* the visit [see below and Annexure A]).
- A copy of the institution's original submission (to be made available either in the hotel or electronically).
- Any other necessary documentation connected with the specific site visit.

### **PRE-SITE VISIT MEETING**

The chairperson of the panel will convene and run, typically during the evening before the site visit or in the morning immediately before the site visit, a pre-site visit meeting for all panel members (see below for roles and responsibilities of chairpersons). The purpose of the meeting is to provide an orientation to the site visit and to ensure that understanding and agreement are achieved with regard to the procedures to be followed during, and after, the visit.

The chairperson will ensure that panel members are in possession of all requisite documentation for the visit and that they have read through the relevant documentation. The site visit schedule will be discussed to ensure clarity of understanding. The chairperson will remind panel members of their roles and will allocate responsibilities with regard to specific criteria, so that individual members ultimately will be able to contribute to the writing of the draft accreditation report (see guidelines on report writing below). Finally, the chairperson will ensure that logistical arrangements (meeting times, sharing of transport, departure from hotel etc.) are made and agreed.

## **ROLES AND RESPONSIBILITIES OF PANEL MEMBERS**

Panel members have a responsibility to undertake the following tasks:

- Preparation for the site visit.
- Acknowledging receipt of documentation from the HEQC.
- Advising the HEQC if other documents are required.
- Ensuring that documentation of the institution is read in detail.
- Evaluation site visit.
- Contribution to the report of the panel.
- Participation in making recommendations in relation to the criteria and minimum standards as well as the overall recommendation on the programme(s) under review.
- Post-site visit consultation and signing off of the final report which will be sent to the HEQC Secretariat.

In carrying out its work, the panel as a whole will:

- Defer to the chairperson throughout the site visit.
- Approach its work within the context of the HEQC's formative and constructive approach to quality assurance (see the *Framework for Programme Accreditation*).
- Attempt to gain first-hand knowledge of the institution and the programme(s) concerned.
- Attempt to establish the general correctness of the information supplied by the institution in its accreditation submissions.
- Evaluate aspects of programme quality.
- Identify and evaluate evidence of aspects of quality which were not available in the paper-based submission by, for example, visiting the physical facilities (such as libraries, laboratories, studios, lecture rooms etc.) and interviewing staff, students and others.
- Formulate clear questions within the framework of the purpose of the site visit (see section on interviews below).
- Understand that it will make recommendations only to the Accreditation Committee.

In summary, in carrying out its work, the panel will be required to make fair and objective *professional judgments*, based firmly upon hard *evidence*, obtained from a variety of means

and from a variety of sources. Such sources of evidence comprise, for example, the institution's paper-based submission, other documentary sources made available during the site visit, inspection of the physical infrastructure and resources and the products of interviews with a range of personnel.

### **Professional judgment**

Professional judgment lies at the heart of the interpretation and application of the criteria employed in the accreditation process.

First, the application of criteria needs to be sensitive to *institutional issues* and should guard against a 'one size fits all' formulaic approach. Institutional context and scope for the exercise of principled autonomy in interpreting national priorities ('fitness for purpose') also is pertinent.

Secondly, professional judgment 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 issue of conformity or non-conformity.

Thirdly, holistic interpretation and flexible application of the criteria should guard against a 'checklist' type of approach. A sound judgment requires an holistic treatment of criteria. Hence, the outcomes of the accreditation process as a whole will be determined in an holistic manner and not merely by calculating the sum total of evaluations against individual criteria. An holistic approach works from an understanding of the interdependence of those criteria that are intrinsic to the purpose of a programme. This implies the *weighting* of criteria to ensure proper attention to those which are *intrinsic* to programme *purpose*.

Finally, although the exercise is based on *minimum standards*, panel members are encouraged strongly to identify examples of 'good practice' and 'innovation' beyond the requirements of the minimum standards. There is a 'commend' category for judgments on individual criteria, and encouragement for improvement is reflected in the 'exceeds minimum standards' category in overall judgments on programmes.

## Categories of judgment

By the end of the site visit, the panel will be required to evaluate the programme(s) under consideration against each individual criterion, as set out in the CHE's *Criteria for Programme Accreditation*, in as much as they are relevant to the *specific focus* of the site visit. The following categories will be used to classify the judgments in each instance:

- *Commend*: All the minimum standards specified in the criterion were met fully and, in addition, good practices and innovation were identified in relation to the criterion.
- *Meets minimum standards*: Minimum standards as specified in the criterion were met.
- *Needs improvement*: Did not comply with all the minimum standards specified under the criterion. Problems/ weaknesses could be addressed in a short period of time.
- *Does not comply*: Did not comply with the majority of minimum standards specified under the criterion.

Bearing in mind the *caveat* above, that the outcomes of the accreditation process as a whole should be determined in an holistic manner, and not merely by calculating the sum total of evaluations against individual criteria, the following classification is to be used for the accreditation outcomes of *the programme as a whole*:

*Exceeds minimum standards* : All minimum standards specified in the criteria were met and, in addition, examples of good practice and innovation were identified in relation to several criteria.

Accreditation outcome: a) Candidacy phase : Provisionally accredited  
b) Accreditation phase : Accredited.

*Complies with minimum standards*: All minimum standards specified in the criteria were met.

Accreditation outcome : a) Candidacy phase : Provisionally accredited  
b) Accreditation phase : Accredited.

*Needs improvement*: Not all minimum standards specified in the criteria were met. Problems/ weaknesses could be addressed in a short period of time.

Accreditation outcome : a) Candidacy phase : Provisionally accredited (with conditions)  
b) Accreditation phase : Accredited (with conditions).

*Does not meet minimum standards:* Did not meet the majority of minimum standards specified in the criteria.

Accreditation outcome : a) Candidacy phase : Not provisionally accredited

b) Accreditation phase : Not accredited.

## **Interviews**

Interviews constitute arguably the most important and intensive activity during a site visit. In order to achieve the objectives of the interviews, with a range of interviewees, in an effective and efficient manner, panel members are advised to give attention to the following guidelines.

### *a) Guidance for panel members*

Before the beginning of each interview, the chairperson should ensure that panel members know what questions are to be asked, in what order and by whom. In respect of interviews, in general, panel members should bear in mind the following:

- Interview sessions are not a forum for discussion and interviewees are not permitted to ask questions except, as the need may arise, to seek clarification.
- The panel's questions should be linked consistently to issues of quality at the institution and about the institution's programme(s).<sup>2</sup>
- Questions asked should be direct and uncomplicated. Panel members should avoid giving long explanations as introductions to questions or drawing comparisons with other institutions and programmes.
- Only one question should be asked at a time.
- Panel members should ensure that all interviewees have an opportunity to respond and participate. No individual should be allowed to dominate responses.
- Panel members should not ask inappropriate questions or pursue 'personal' agendas.
- It is important that panel members should maintain a professional distance from members of the institution during the visit. Discussions and comment on the evaluation must be avoided.

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<sup>2</sup> Questions to be asked are best discussed and agreed upon by the panel prior to interviews.

- Panel members must avoid any temptation to editorialise, comment, praise or commend, criticize, advise, explain, correct or recommend and to ask questions that have no response or compare the institution with any other.

*b) Induction for interviewees*

At the beginning of each session, the chairperson:

- Welcomes interviewees; thanks them for participating in the evaluation process. (Panel members have their name cards in front of them and interviewees bring their own so introductions are not required.)
- Ensures, as appropriate, that those being interviewed understand the role of the panel and the decision-making process. (For example, that after the site visit, the chairperson, on behalf of the panel, will write a report which will be tabled at a meeting of the HEQC Accreditation Committee. The Accreditation Committee's report, containing accreditation *recommendations* will be sent to the institution, which will be able to comment *only* on errors or fact or inaccuracy. Thereafter, the report will be tabled at a meeting of the HEQC Board, which makes the final accreditation *decision* that will be communicated to the institution.)
- States clearly that the purpose of the interviews is to help the panel to validate information and evidence contained in the institution's accreditation submissions and other documentation that has been supplied by the institution, and to gain a detailed understanding of how the institution has met the requirements for accreditation of the programme.
- Encourages the interviewees to provide concise answers.
- Reminds the interviewees that all comments made to the panel will be treated in strict confidence, and that their names will not be used in the final report, even though the issues raised with them might be included.

*c) Concluding the interview*

At the end of each interview, the chairperson will thank the interviewees for their participation, informing them that the HEQC will produce an accreditation report which will be sent, in due course, to the head of the institution.

## **Documentary evidence**

In addition to the products of interviews, a major source of evidence (which may also inform the interviews) for the panel is the documentation assembled by the institution in connection with the site visit.

The institution is required to provide materials and documents for examination and evaluation by the panel. These materials and documents are required to be appropriately filed and catalogued, and preferably should be linked clearly to the various accreditation criteria. Furthermore, the institution is required to make a list of the materials and documents (an 'evidence map') available, in advance, to the panel, and to display all materials and documents effectively in the site visit plenary room.

In general, the materials and documents on display will include all those to which reference has been made in the institution's accreditation submission, any additional information and documentation required by the HEQC, additional information and documentation judged to be important by the institution to inform the evaluation of its programme(s), and any additional documentary evidence required by the chairperson and members of the panel during the site visit.

It has been impressed on the institution that it is absolutely essential that the display of materials and documents should be organized in such a way as to facilitate ease of access and location, and that mechanisms employed for this purpose are made clear to the panel.

## **Inspection of physical infrastructure**

Another source of potential evidence for the panel is the physical infrastructure of the institution and its potential in supporting the needs of the programme(s) under review. As and if appropriate, the site visit schedule will include an opportunity for the panel, either collectively or severally, to inspect such infrastructural facilities as teaching venues, libraries, laboratories and IT facilities. In such cases, the institution will have been required to ensure ease of access to such facilities, to ensure that panel members are guided to each facility and to ensure that appropriate members of staff in each facility are present to answer questions.

## **ROLES AND RESPONSIBILITIES OF PANEL CHAIRPERSONS**

In the case of Accreditation and Coordination Directorate accreditation site visits, it is not usual for an HEQC Secretariat representative to be present. The chairperson of the panel, apart from other duties set out below, serves as the agent of the HEQC and is responsible for maintaining contact with the HEQC before, during and after the visit. The chairperson of a panel is selected based on demonstrated and recognized expertise relevant to the particular discipline and is a trained evaluator. As far as the site visit itself is concerned the roles and responsibilities of the chairperson, as defined by the HEQC, are as follows:

- The chairperson acts as the official conduit between the panel and the institution during an accreditation site visit.
- It is the duty of the chairperson to ensure that all panel members are present at the designated times and are fully conversant with the documents, processes and procedures for the site visit.
- The chairperson should ensure that all panel members have studied the institution's submission and accompanying documents distributed in advance, and have identified issues that need further investigation during the site visit.
- The chairperson must ensure that all panel members are aware of the Code of Ethics (see Annexure A) and are aware of the confidentiality clause.
- In the case of any panel member demonstrating unbecoming behaviour or being unprepared, or being involved in any incident which may bring disrepute to the HEQC, the responsibility of the chairperson is to bring this to the attention of the HEQC immediately and, if required, to document the incident.
- In the case of any incident that may take place in the institution during the site visit, which may involve staff members tampering with panel members evidence, notes or documents, the chairperson must report the incident to the HEQC immediately.
- The chairperson is responsible for ensuring that, during panel briefing meetings and all other sessions, there is optimal usage of time and that tasks are allocated to all panel members on the basis of their expertise.
- The chairperson is responsible for ensuring that changes to the site visit schedule during the visit are communicated to the institution in sufficient time for necessary arrangements to be made.

- In formal interactions with the institution, staff members and other constituent groups, the chairperson must ensure that the purpose of the visit and the objectives of any given session are communicated clearly.
- Requests for additional documentation or viewing of facilities must be made through the chairperson.
- It is the responsibility of the chairperson to ensure that all evidence provided by the institution is scrutinized during the site visit and that all scheduled interviews take place.
- If the chairperson, for any reason, is not the designated report writer (see report writing below), then he/she must ensure that the designated report writer for the panel receives the cooperation required to accomplish the task. To this end, the chairperson must ensure that the panel members discuss the report and contribute to the writing of the report. If the chairperson *is* the report writer (which typically is the case) then the report, copied electronically to all panel members, should reach the HEQC electronically within 3 days of the site visit.
- In relation to accreditation decisions, the chairperson must ensure that agreement is reached during discussions and that each criterion is ranked by the panel, together with an overall recommendation for the programme as a whole.

## **WRITING THE PANEL REPORT**

The process of an accreditation site visit, from the point of view of the panel, is concluded through the writing and submission to the HEQC of a Panel Report on the programme(s) under review. Such reports, which are constructed using a reporting template provided by the HEQC, typically are completed in two stages, one during and one after the site visit, as indicated below.

### **Before the end of the site visit**

While it is recognized that accreditation site visits usually have to be completed within a single day, it is expected that, before the panel disbands at the end of the site visit, key elements for the writing of the Panel Report will have been agreed. This process involves the panel, under the guidance and coordination of the chairperson, in reaching, as far as possible, broad agreement in respect of provisional judgments on the programme. The panel should

attempt to reach broad consensus on judgments related to degrees of compliance with each minimum standard, each criterion, and the programme as a whole.

### **Writing the report**

The Panel Report, based on agreements reached by the end of the site visit, is written by the designated report writer who, in the case of Accreditation and Coordination Directorate site visits, usually is the chairperson for the particular site visit. The report writer, using the HEQC reporting template, assembles a coherent, evidence-based report which ensures consistency of arguments across the criteria and ensures even-handedness and fairness of critical comments, and adequacy of evidence, especially in respect of ‘needs improvement’ and ‘does not meet minimum standards’ judgments. Furthermore, the report writer plays an editorial role in ensuring a factually accurate, error-free, stylistically acceptable report that has a suitable ‘tone’. The report is then sent electronically, within 3 days of the end of the site visit, to the HEQC and the other panel members, who scrutinize it for accuracy and fidelity and may offer suggestions or corrections. (In the case of any dispute among panel members, individual comments related to differing opinions must be sent directly to the HEQC.) At this point, the work of the panel which reviewed the programme is complete and further processing of the report falls under the aegis of the HEQC Secretariat, the Accreditation Committee, the institution itself and, finally, the Board of the HEQC.

### **Notes for report writers**

The following notes/ requirements are provided to guide report writers in the compilation of the Panel Report:

- The HEQC will provide a report template for the relevant programme. The file should be named using the name of the institution, the qualification and the date. Once work has begun on writing the report, using the template, the file should be saved as a Word document.
- The format for writing the report is Times New Roman, 12 point, justified with 1.5 spacing.
- All panel members contribute to the report and all minimum standards are covered. At the end of each criterion statement, the panel is required to arrive at consensus in

terms of the overall ranking for the criterion. A cross should be placed in the appropriate box provided at the end of each criterion.

- The panel, at the end of the site visit, should provide an overall recommendation in terms of the specific programme under review.
- Ensure that the report is *evidence led* and if verbal evidence is provided and used in the report, there should be explanations provided as to whether the panel has validated the evidence. References to the institution's submission document, additional information provided on site, including a list of documentation provided on site and the names of interviewees (to be submitted electronically by the institution) and any other information must be captured accurately.
- If the narrative relates to specific minimum standards, these should be indicated in brackets at the end of the sentence [e.g.(iv)].
- Reports are to be written in the present tense.
- On completion of the report, it should be emailed to the Director of the Accreditation and Coordination Directorate ([menon.k@che.ac.za](mailto:menon.k@che.ac.za)).
- Once the HEQC has received the report, it will be edited and reviewed for consistency, reliability and validity, taking into account any disputed judgments or alternative views which may have been submitted by individual panel members.

## **POST SITE VISIT REQUIREMENTS**

Before the panel leaves the institution, the chairperson should ensure that:

- That panel members have completed and returned to him/her their copies of the HEQC Evaluation Form (see Annexure B).
- That travel claim forms have been completed and handed to him/ her by panel members. Together with the evaluation forms, these must be sent by the chairperson to the HEQC.
- That the institution's site visit coordinator knows which documents are required by the HEQC and are to be boxed and couriered, without delay, at the end of the site visit. (The HEQC contact person will ensure that a courier is sent to collect these documents.)
- That the site visit coordinator hands to the chairperson an electronic list of all evidence tabled.

- That the site visit coordinator hands to the chairperson an electronic list of all persons interviewed.

## **CONFIDENTIALITY AND ETHICAL GUIDELINES**

### **Confidentiality**

Programme evaluations, including site visits, provide the HEQC and its evaluator panels with much institutional information. Such information may be used only for the purpose for which it was obtained in relation to the evaluation. All material, including institutional submissions, must be treated as confidential by members of evaluator panels. Evaluator panel members are required to sign an undertaking that they will treat all evaluation documentation as confidential and will return all specified documentation to the HEQC by a stipulated date. In addition, all evaluators and panel members are required to abide by the CHE's *Code of Ethics* and are required to sign both a legally-binding confidentiality agreement and a disclosure form (see Annexure A).

In particular, panel members are prohibited from disclosing to anyone the contents of the report submitted to the HEQC, and may not contact the institution or other parties to discuss matters relating to the site visit.

### **Ethical guidelines for institutions**

In addition to the required compliance by evaluators and panel members to the ethical and confidentiality requirements and standards of the CHE, panel members should be aware that the HEQC has drawn up a list of ethical guidelines, related to site visits, for which it seeks compliance on the part of institutions. These guidelines are as follows:

- It is the responsibility of each institution to facilitate a thorough and objective appraisal of its unit/ programme under review by the HEQC.
- Institutions are permitted to veto HEQC panel members only if it can be demonstrated, in writing, that a potential conflict of interest exists. The veto must be used with due responsibility (see section on Selection and Appointment of Evaluator Panels above).

- Any perceived inadequacies of HEQC procedures or processes should be reported by the institution at the time of their occurrence. This applies to conduct of the site visit and/ or evaluator panel members and any incidents that may take place.
- Institutions are not allowed to make contact with panel members prior to the site visit and after the site visit on issues related to the accreditation process.
- Institutions or staff of the institutions are not allowed to attempt to influence the outcome of a site visit by making offers to review panel members (see below).
- In terms of HEQC policies, no gifts, awards or financial incentives may be offered to panel members during or after the site visit.
- There should be no attempt to record proceedings of the panel or to tamper with documents belonging to panel members.
- Institutions will be afforded the opportunity to select site visit dates for the HEQC visit. Once these are finalized, the institution is bound to host the site visit. In the eventuality of any unforeseen circumstances that may require a rescheduling, it is the responsibility of the institution to make contact immediately with the HEQC.
- It is the responsibility of the institution to ensure that staff and students required to be present for the HEQC site visit are available at the relevant times and have been properly apprised of all the arrangements, venues, purpose and intent of the site visit. Institutions must refrain from attempting to influence the opinions and views of those people to be interviewed.
- Institutions must ensure that panel members are afforded access to all facilities and resources relevant to the programme(s). Arrangements in this regard must be made with the relevant personnel. Panel members must receive communication of these arrangements at the time of the site visit.
- Guidelines for the Institutional Display must be adhered to by the institution. The institution has the responsibility to ensure that additional documentation requested by the HEQC prior to the site visit/ during the site visit, and in exceptional circumstances after the site visit, is made available.
- It is the responsibility of the institution to ensure that information provided to the public and the HEQC is accurate and adequate.
- It is the responsibility of the institution to ensure that all staff members and students are aware of the accreditation processes and possible outcomes of the accreditation. Information pertaining to accreditation must be made available to the public and internal staff and students.

- It is the responsibility of the institution to ensure that information is not withheld from the panel or that there is no inadequate disclosure of information which compromises the work of the panel.
- All information submitted for accreditation purposes or made available to the public/ staff/ students must be accurate and reflect actual programmes and practices of the institution.
- No photographs may be taken of the panel or the procedures of the panel during the site visit.

### **CONCLUDING NOTE**

If panel members experience any difficulties in understanding the contents of this Manual, or are in need of further elaboration or clarification on any of the issues covered, contact should be made with the HEQC.

**ANNEXURE A : CHE'S CODE OF ETHICS**



*COUNCIL ON HIGHER EDUCATION*

**CODE OF ETHICS**

**JUNE 2005**

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Didacta Building, 211 Skinner Street, Pretoria, 0002; PO Box 13354, The Tramshed, 0126;  
Telephone: +27 12 392 9119; Fax: +27 12 392 9110; E-mail: [ceo@che.ac.za](mailto:ceo@che.ac.za)

Visit our website at <http://www.che.ac.za>

## 1. BACKGROUND

- 1.1 The Council on Higher Education (CHE) was established as an independent statutory body in May 1998 in terms of the *Higher Education Act*, No 101 of 1997. The *Higher Education Act* and Education White Paper 3 of 1997: *A Programme for the Transformation of Higher Education* explicate the mandate and responsibilities of the CHE.
- 1.2 The CHE defines its **mission** as contributing to the development of a higher education system characterised by quality and excellence, equity, responsiveness to economic and social development needs and effective and efficient provision, governance and management. It seeks to make this contribution
- By providing informed, considered, independent and strategic advice on higher education (HE) issues to the Minister of Education;
  - Through the quality assurance activities of its sub-committee, the Higher Education Quality Committee (HEQC);
  - Through publications and through broader dissemination of information, and through conferences and workshops on HE and other focused activities.
- 1.3 Members of the CHE and its governance and operational structures are appointed in their own rights as people with special knowledge and expertise on higher education matters. In this regard, and despite the members being drawn from various constituencies, the CHE and its governance and operational structures, functions as an independent expert statutory body rather than a body of delegates or representatives of organisations, institutions or constituencies.

## 2. AIMS OF THE CODE

- 2.1 The Higher Education Act constitutes the regulatory framework for the CHE's operation. However, like all other public entities in South Africa, the CHE is also required to act within the framework of the Constitution, Public Management Finance Act and the Public Entities Act.
- 2.2 It is also held to the principles of corporate governance contained in the King Report, which defines the "best practice" norms for South African corporate boards and other governing bodies.
- 2.3 Bearing this in mind, the Code provides guidelines on professional ethics and fiduciary requirements for the members of the CHE and its governance and operational structures. The Code is intended to provide both the general principles and the decision rules to cover the fiduciary responsibilities of the CHE and its governance and operational structures.

- 2.4 It has as its primary goals the advancement and protection of the CHE's integrity and performance of its mandate according to the Higher Education Act at all times.
- 2.5 It is the individual member's responsibility to aspire to the highest possible standards of conduct while in service of the CHE and its governance and operational structures.

### **3. GENERAL PRINCIPLES**

#### **3.1 Competence**

Members of the CHE and its governance and operational structures strive to maintain high standards of competence in their work. They recognize the boundaries of their particular competencies and the limitations of their expertise. They provide those services and use those practices for which they are qualified by education, training or experience to further the goals and objectives of the CHE.

#### **3.2 Integrity**

Members of the CHE and its governance and operational structures seek to promote integrity in the work of the CHE as stipulated by the Act, its vision and mission. In these activities members are honest, fair and respectful of others.

Members strive to be aware of their own belief systems, values, needs and limitations and the effect of these on their work. To the extent feasible, they attempt to clarify for relevant parties and stakeholders the roles they are performing and to function appropriately, in accordance with those roles.

#### **3.3 Professional Responsibility**

Members of the CHE and its governance and operational structures uphold professional standards of conduct, clarify their professional roles and obligations and accept appropriate responsibility for their behaviour.

Members' moral standards and conduct are personal matters to the same degree as is true for any other person, except as their conduct may compromise their professional responsibilities or reduce the public's trust in the CHE and its operations.

#### **3.4 Respect for People's Rights and Dignity**

Members of the CHE and its governance and operational structures accord appropriate respect to the fundamental rights, dignity, and worth of all people. They respect the rights of individuals to privacy, confidentiality, self-determination and autonomy, mindful that legal and other obligations may lead to inconsistency and conflict with the exercise of these rights.

Members are aware of cultural, individual and role differences, including those due to age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language and socioeconomic status. They try to eliminate the effect on their work of biases based on those factors and they do not knowingly participate in or condone unfair discriminatory practices.

### **3.5 Social Responsibility**

Members of the CHE and its governance and operational structures are aware of their professional and fiduciary responsibilities to the community and the society in which they work and live.

## **4. ETHICAL STANDARDS**

### **4.1 Confidentiality**

4.1.1 Members of the CHE and its governance and operational structures are expected to respect confidentiality and adhere to the terms of the Higher Education Act with regard to any information, which should come to their attention as a result of their participation either as a member of the CHE or of any of its governance or operational structures. Failure to do so may result in a charge of unprofessional conduct.

4.1.2 In the event of controversy arising relative to the maintenance of confidentiality, the member will be requested to provide an account to the Executive Committee. If the Executive Committee is not satisfied with the explanation, the member will be notified in writing that it will, in the case of a Councillor, recommend to the Minister of Education that the member be invited to offer his/her resignation from the CHE or any member of another governance or operational structure, to the relevant governing structure.

4.1.3 Members of the CHE and its governance and operational structures shall not disclose any "confidential" or "exempted" information dealt with or brought before the Council, a Committee or any other governance or operational structure without the Council's permission.

4.1.4 The contents of any documents relating to the Council's or any of its committee's business which are marked either "confidential" or in such other manner as to indicate that they are not for publication or are for official use only or for members' information only, shall not be quoted in public or otherwise divulged without the consent of the Council or any other governance and operational structure as appropriate.

4.1.5 Members of the CHE and its governance and operational structures are required to sign the Confidentiality Agreement attached to this document as Annexure A.

### **4.2 Personal Views and Public Debate**

4.2.1 Members of the CHE shall exercise reasonable care in expressing an opinion by obtaining sufficient factual evidence to warrant such an opinion and/or expression.

4.2.2 Members of the CHE must refrain from making statements to the media or

engaging in a manner, which may be detrimental to the image of the CHE. Where comment is necessary, the Chairperson or the designated spokesperson(s) shall make the statement in that capacity to protect the image of the CHE as a whole.

#### 4.3 **Disclosure of Interest**

- 4.3.1 Any member of the CHE and its governance and operational structures who believes that he or she may have a financial or any other personal or family interest in any matter to be discussed, shall state that interest (which shall be minuted) and shall neither speak nor vote on that matter, nor shall the member be counted in the quorum at the Council or any committee meeting.
- 4.3.2 For the purpose of this document, 'financial interest' shall include any directorship or shareholding which may be relevant but shall exclude any interest which a member shall have in the allocation of funds to a Task Team or other Project solely by virtue of membership of that Task Team or Project.
- 4.3.3 The CHE and its governance and operational structures require that a member shall make a full disclosure in writing of his or her present or proposed outside financial interest to the Chief Executive Officer or Executive Director, for filing in a registry located for public scrutiny, in certain circumstances which include:
- i. When it is proposed that the CHE or HEQC enter into contracts for the sale of goods or services, research contracts or grants, other contracts, including those for technological transfer, with private firms or corporations in which a member knows he or she has a direct or indirect financial interest.
  - ii. When there is a change in the member's financial interest during the course of such contracts.
  - iii. Before a member enters into a business activity which overlaps with the CHE's research or service missions.
  - iv. When the entity for which a member consults transacts business with the CHE that relates to the consulting, or is in competition with the CHE, or where the member's consultation itself competes with the work of the CHE.
- 4.3.4 A member who has declared a financial or any other interest, may be permitted to speak and to vote and to be counted in the quorum if the Chairperson rules that the interest declared is so remote or insignificant that it cannot reasonably be regarded as likely to influence a member, in the consideration or discussion of, or in voting on, any question with respect to that matter.
- 4.3.5 The CHE and its governance and operational structures require members to make a full disclosure of potential conflicts of interest resulting from direct or indirect outside business, financial, employment or consulting interests, which are related to their appointment to the CHE, its governance and operational structures in the form as provided in Annexure B.

4.4 **Gifts and Personal Advancement**

4.4.1 Members shall not accept any improper benefit, fee, remuneration, commission, gift, profit, advantage or privilege by virtue of their position and that can be perceived as being calculated to influence a member to act or refrain from acting in a particular manner.

4.5 **Conflict of Interest**

4.5.1 Members shall not abuse their positions when executing their duties by soliciting or manifest bias or prejudice against or in favour of any person or organisation, including a voluntary professional association.

4.5.2 A member shall recuse himself/herself from the meeting/deliberations if either a reasonable suspicion of bias or conflict of interest exists, based upon objective facts.

4.5.3 Members shall declare any personal interest vested in a matter before the CHE or Committee of Council on which he/she serves, and shall recuse himself/herself when he/she is expected to take a decision on the matter.

**ANNEXURE A**

**CONFIDENTIALITY AGREEMENT**

entered into by and between

**THE COUNCIL ON HIGHER EDUCATION**

Its Committees, Assignees or Successors-in-Title  
(hereinafter referred to as "CHE")

and

**[INSERT NAME]**

1. I..... undertake to keep and hold secret and confidential all information so designated by the CHE or its governance and operational structures and shall not use the same other than for purposes for which it is intended. I will not disclose to or discuss the same with any other party without the express prior consent of the CHE or its governance or operational structures.

2. The foregoing restrictions shall not, however, apply to :
  - i. any portion of said information which a person can show was developed by him or her and was in his or her possession prior to receipt thereof from the CHE and its governance and operational structures;
  - ii. information or portion thereof which at the time of disclosure is or thereafter becomes part of public domain by publication or otherwise;
  - iii. information or portion thereof which corresponds in substance to information furnished to a person as a matter of right without restriction on disclosure and was not acquired directly from the CHE and its governance and operational structures.
  
3. This Confidentiality Agreement shall be valid and effective for a period of 5 (five) years from date of signature hereof.

Signed            on            this            .....day            of.....            at  
 ..... in the presence of the undersigned witnesses.

.....  
**Member**

.....  
**For and on behalf of the Council on Higher Education**

.....

**Witness**

.....  
 .....  
**Witness**

**ANNEXURE B**

**DISCLOSURE FORM  
 (CONFIDENTIAL TO COUNCIL)**

**Name:**  
 .....

**Address:**  
 .....

**Designation:**

.....

**My interests (financial and/or otherwise) are**

<b>Institution/Organisation</b>	<b>Nature of Interests</b>	<b>Position</b>	<b>Other</b>	<b>Date of Interests</b>

Financial interest is defined as equity holdings, shares, share options, consulting relationships, Advisory Committees or Boards, office in entity, or any other pertinent relationship.

For purposes of this disclosure, financial interests of members of your immediate family (spouse, dependent children) are included as though the benefits accrue directly to you. Please also list entities with which you expect to develop a relationship or a financial interest in the future.

I have read and understood the CHE's disclosure of interest policy. I have made all financial and other disclosures to the Chief Executive Officer required by the policy and will comply with any conditions or restrictions imposed by the CHE to manage, reduce or eliminate actual or potential conflicts of interest. The information provided is to my knowledge accurate and complete.

**Signature:** .....

**Date:** .....

## ANNEXURE B : HEQC EVALUATION FORM



### POST-SITE VISIT EVALUATION FORM

In order to improve its efficiency in conducting site visits, the HEQC would appreciate your comments with respect to how you experienced the conduct of the recent evaluation site visit at your institution.

Kindly complete the following evaluation and forward it to Ms Smit at email: [smit.r@che.ac.za](mailto:smit.r@che.ac.za)

Name of Institution: \_\_\_\_\_

Date of Site Visit: \_\_\_\_\_

**Please circle the appropriate response using the following likert-type scale:**

1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5

Not good at all

Somewhat good

Very good

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. Guidance from the HEQC regarding the site visit | 1 | 2 | 3 | 4 | 5 |
| 2. Receipt of relevant documentation from the HEQC | 1 | 2 | 3 | 4 | 5 |
| 3. Communication in general with the HEQC          | 1 | 2 | 3 | 4 | 5 |
| 4. Punctuality of the evaluators                   | 1 | 2 | 3 | 4 | 5 |
| 5. Professionalism of the evaluators               | 1 | 2 | 3 | 4 | 5 |

**Comments and recommendations** (If the space below is insufficient, feel free to write additional comments on a separate sheet)

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## ANNEXURE C : EXAMPLE OF A SITE VISIT SCHEDULE

TIME	SESSION	ACTIVITIES
8.00 – 8.30	Meeting with Management and finalize organization of the activities for the day	<ol style="list-style-type: none"> <li>1. Chair of the panel of evaluators introduces the panel to the Management of the institution.</li> <li>2. Chair confirms time schedule and venues.</li> <li>3. The Chair outlines the conduct of the site evaluation.</li> <li>4. The Chair requests a courtesy visit at the end of the day to outline the post site evaluation steps.</li> </ol>
8.30 – 9:30	Introductions and Overview	<ol style="list-style-type: none"> <li>1. Evaluators meet with institution head, senior management and programme management and brief them about the purpose, schedule and arrangements for the institutional evaluation.</li> <li>2. Institution head provides an overview of institution’s structure, programme offerings, student numbers, staff (academic and non academic) and infrastructure (buildings, lecture rooms, laboratories, computer facilities, library, sports grounds, student common areas etc.). The presentation should not last more than 30 minutes. The evaluators should use the balance of the time to clarify issues regarding the presentation and follow up issues that arose during the preliminary evaluations of the “institution’s paper submissions” to HEQC.</li> </ol>
9.30 – 11.00	Examination of Programme Materials	<ol style="list-style-type: none"> <li>1. Evaluators examine the institutional and programme material display and demonstrations.</li> <li>2. Institutional head or appointee to be available to provide supporting information that may assist evaluators with queries regarding the display or demonstrations.</li> <li>3. Tea and coffee should be served to institutional evaluators during this session.</li> </ol>

11.00 – 11.45	Tour of Programme facilities	<ol style="list-style-type: none"> <li>1. Institutional head or appointee to arrange tour and demonstrations of the appropriate institutional programme facilities such as lecture rooms, laboratories, and resource centres, computers, libraries etc.</li> <li>2. Evaluators to evaluate the adequacy of the facilities to support the delivery of quality higher education programmes.</li> </ol>
11.45 – 12.15	Interview with Academic staff	<ol style="list-style-type: none"> <li>1. Evaluators to interview both full-time and part-time academic staff. The institutional head to provide a list of academic staff of the institution and evaluators will select an appropriate mix of senior, junior, part-time, full-time staff from different programme areas. The list should provide the name, qualifications, teaching load, full-time/part-time, number of years employed by institution, higher education teaching experience and designation level (junior, senior lecturer or head of department) for each member.</li> <li>2. Selected full-time academic staff and available part-time academic staff to be interviewed as a focus group.</li> <li>3. All full-time academic staff and some part-time academic staff must be available for the interview.</li> </ol>
12.15 – 13.00	Support staff Interview	<ol style="list-style-type: none"> <li>1. Evaluators to interview administrative, support and technical staff. At least six to eight full-time and part-time staff need to be identified and be available for the interview. The evaluators will decide which of the identified staff to interview.</li> <li>2. All administrative, support and technical staff selected by the evaluators will be interviewed as a focus group.</li> </ol>
<b>13.00 – 13.45</b>	<b>Lunch</b>	<b>Lunch</b>
13.45 – 14.30	Report Writing	<ol style="list-style-type: none"> <li>1. Evaluators to complete all evaluation forms.</li> </ol>
14.30 – 15.00	Meeting with the institutional Management	<ol style="list-style-type: none"> <li>1. Evaluators meet with senior management.</li> <li>2. Chair of panel informs management about next steps of the accreditation process and thank them for organizing the site visit.</li> </ol>

**ANNEXURE D : EXAMPLE OF CANDIDACY PHASE REPORT TEMPLATE**



**COUNCIL ON HIGHER EDUCATION**

**HIGHER EDUCATION QUALITY COMMITTEE**

**EVALUATOR REPORT: CANDIDACY PHASE LEVEL**

<b>INSTITUTION NAME:</b>	
<b>PROVIDER TYPE:</b>	
<b>PROGRAMME NAME:</b>	
<b>NQF Level:</b>	
<b>HEQC - Reference Number:</b>	
<b>SITE OF DELIVERY:</b>	
<b>MODE OF DELIVERY:</b>	

**DETAILS OF THE EVALUATOR:**

Name and Title: .....

Institution: .....

Signature: .....

**DATE OF THE REPORT:** .....

**INSTRUCTIONS:**

- Write in a narrative style, evaluating the learning programme in relation the minimum standards specified for each criterion statement.
- If you have covered certain aspects under other sections, please ensure that there is appropriate cross-referencing.
- At the end of each criterion statement, please tick off the minimum standards in terms of the evaluation categories.
- Provide a holistic evaluation of the performance of the institution in relation to the overall criterion.
- At the end of the evaluation, make your recommendation in terms of accreditation.

**CRITERION 1: PROGRAMME DESIGN**

Please indicate in relation to this criterion whether the programme: has achieved standards at a remarkable level and deserves commendation (C); meets minimum standards (MMS); needs improvement (NI), or does not comply (DNC)

<b>C</b>	<b>MMS</b>	<b>NI</b>	<b>DNC</b>

**COMMENTS:**

**CRITERION 2: STUDENT RECRUITMENT, ADMISSION AND SELECTION**

Please indicate in relation to this criterion whether the programme: has achieved standards at a remarkable level and deserves commendation (C); meets minimum standards (MMS); needs improvement (NI), or does not comply (DNC)

<b>C</b>	<b>MMS</b>	<b>NI</b>	<b>DNC</b>

**COMMENTS:**

**CRITERIA 3 AND 4: STAFFING**

Please indicate in relation to this criterion whether the programme: has achieved standards at a remarkable level and deserves commendation (C); meets minimum standards (MMS); needs improvement (NI), or does not comply (DNC)

<b>C</b>	<b>MMS</b>	<b>NI</b>	<b>DNC</b>

**COMMENTS:**

**CRITERION 5: TEACHING & LEARNING STRATEGY**

Please indicate in relation to this criterion whether the programme: has achieved standards at a remarkable level and deserves commendation (C); meets minimum standards (MMS); needs improvement (NI), or does not comply (DNC)

<b>C</b>	<b>MMS</b>	<b>NI</b>	<b>DNC</b>

**COMMENTS:**

**CRITERION 6: STUDENT ASSESSMENT POLICIES AND PROCEDURES**

Please indicate in relation to this criterion whether the programme: has achieved standards at a remarkable level and deserves commendation (C); meets minimum standards (MMS); needs improvement (NI), or does not comply (DNC)

<b>C</b>	<b>MMS</b>	<b>NI</b>	<b>DNC</b>

**COMMENTS:**

**CRITERION 7: INFRASTRUCTURE AND LIBRARY RESOURCES**

Please indicate in relation to this criterion whether the programme: has achieved standards at a remarkable level and deserves commendation (C); meets minimum standards (MMS); needs improvement (NI), or does not comply (DNC)

<b>C</b>	<b>MMS</b>	<b>NI</b>	<b>DNC</b>

**COMMENTS:**

**CRITERION 8:****PROGRAMME ADMINISTRATIVE SERVICES**

Please indicate in relation to this criterion whether the programme: has achieved standards at a remarkable level and deserves commendation (C); meets minimum standards (MMS); needs improvement (NI), or does not comply (DNC)

<b>C</b>	<b>MMS</b>	<b>NI</b>	<b>DNC</b>

**COMMENTS:****CRITERION 9:  
PROCEDURES****POSTGRADUATE POLICIES, REGULATIONS AND**

Please indicate in relation to this criterion whether the programme: has achieved standards at a remarkable level and deserves commendation (C); meets minimum standards (MMS); needs improvement (NI), or does not comply (DNC)

<b>C</b>	<b>MMS</b>	<b>NI</b>	<b>DNC</b>

**COMMENTS:**

**Please indicate your overall recommendation with regard to the accreditation of the programme below.**

<b>Criteria</b>	<b>Assessment</b>			
	<b>C</b>	<b>MMS</b>	<b>NI</b>	<b>DNC</b>
1. Programme design				
2. Student recruitment, admission and selection				
3. & 4 Staffing				
5. Teaching & Learning Strategy				
6. Student Assessment Policies and Procedures				
7. Infrastructure and Library Resources				
8. Programme Administrative Services				
9. Postgraduate Policies, Regulations and Procedures				

**Please tick (✓) the appropriate box below:**

The programme can be provisionally accredited (*without conditions*)

Comments:

.....  
.....  
.....

The programme is provisionally accredited, with the following conditions:

Conditions:

.....  
.....  
.....

The programme is not accredited, due to the following reasons:

Comments:

.....  
.....  
.....