


Communiqué 1 of 2025

To: Public and Private Higher Education Institutions in the Republic of South Africa and other interested stakeholders and role-players.

Subject: Public comment on further principles and processes related to IQA Functionality in the QAF.

1. In the implementation of the Quality Assurance Framework (QAF) as described in the draft [Implementation Protocols for the Quality Assurance Framework](#), a differentiated quality assurance model will be followed (cf. Section 2.11 of the Implementation Protocols). This differentiated quality assurance model will be based on a holistic view of an institution and its internal quality assurance (IQA) functionality.
2. Based on the feedback received on the Implementation Protocols, the need to further elaborate on the concept of **IQA functionality** was established. The HEQC appointed a Task Team to further unpack how IQA functionality will be determined. The Task Team developed a number of principles to guide how IQA functionality will be determined and a process for determining IQA functionality. The work of the Task Team was used by the CHE to develop the principles and processes described in this document and the CHE now wishes to consult the sector on these. The principles and process will be added to the Implementation Protocols as Section 2.12 after the consultation process. The new Section 2.12 is attached.
3. The CHE has undertaken several capacity development workshops on IQA functionality, including through QAF Lunch Hour sessions. Recordings of QAF Lunch Hour sessions on the notion of IQA Functionality can be found on the CHE's YouTube Channel at : <https://youtu.be/wAysNg5zD2o> and https://youtu.be/uXSPH5lplwo?si=3e-0FJ_h_0WcrbCo
4. Institutions are invited to submit their comments on Section 2.12 on the attached template by 28 February 2025. Comments should be sent to qaf@che.ac.za.

Yours sincerely



Dr Whitfield Green
Chief Executive Officer

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Section 2.12 is proposed to be added to the Implementation Protocols. It will follow Section 2.11 which describes how Standards will form the basis for the differentiated approach to quality assurance that the CHE will follow under the QAF, including how the Standards and institutional responsiveness to them form the basis for the Institutional Quality Dashboards, and provide the basis for determining the Internal Quality Assurance functionality of institutions.

2.12 Principles and processes to establish IQA Functionality

Internal Quality Assurance (IQA) functionality is understood to be the extent to which individual higher education institutions meet the set of higher education practice standards and qualification standards that have been collaboratively developed, and agreed to by the sector, as a result of the institution's ability to implement effective and robust internal quality assurance mechanisms.

The following principles and processes will guide the determination of IQA functionality for individual institutions as part of the implementation of the QAF.

Principles

1. The determination of IQA functionality will follow an evidence-based approach and will initially draw on information and data that the CHE collects during its quality assurance activities, and which form the basis for HEQC decisions as outcomes of quality assurance processes. The quality assurance activities are based on higher education practice standards and qualification standards. Such data and outcomes on the standards will be captured and reflected on the QA-dashboard system of the CHE. Over time, other hard data from the system can also be used to inform the determination of IQA functionality. The use of other data will only be considered once the IQA Functionality system and processes have stabilised, and after consultation on the use of the data.
2. Whilst the weighting of the standards may be desirable at some point, in the initial implementation of the QAF, they will not be weighted. Should weighting of the standards be implemented after a period of time, this will be extensively consulted on.
3. Clear and adequate communication to build awareness and understanding of the importance of IQA functionality, for the sector and for individual institutions is required. The CHE will therefore continue to communicate and develop capacity in this and all other aspects of the QAF. Institutions must do likewise.
4. The IQA functionality status of an institution is a working tool for the CHE and the institution and is in the first instance a means to work towards improved functionality and

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excellence. Whilst the CHE is legally required to be transparent on external quality assurance outcome decisions made by the HEQC, IQA functionality status as a working tool will remain confidential between the CHE and the institution. Generic information that does not identify individual institutions may be shared publicly, for example in sector reports. In a similar vein, and in keeping with a compact with institutions on this issue, institutions also will not use the QA-Dashboard and IQA functionality information in a way that promotes ranking or marketing.

5. The IQA functionality process and outcomes should not create additional activities for institutions. Rather, the process and outcomes will be linked to the ongoing CHE EQA activities and will focus on supporting institutions to continuously improve IQA functionality towards excellence.
6. In using the notion of IQA functionality as a means of enabling a differentiated approach to external quality assurance in the sector, there will be a transition from a pilot phase to full implementation.

Processes

Processes during a pilot transition phase

1. The use of IQA functionality as a working tool will be piloted during the initial phase of implementation of the QAF from 2025, as the CHE and the sector transition from existing QA processes to the QAF quality assurance processes.
2. The current institutional audit outcomes against the institutional audit standards, as adjusted or confirmed by the HEQC after institutional audit improvement plans have been implemented, will be used as an initial baseline for determining the IQA functionality of institutions. During this pilot phase, the institutional audit standards will not be weighted in determining the overall IQA functionality. Limited and aggregated historical accreditation data may also be used.
3. It is valid to use the institutional audit outcomes as a baseline since the institutional audits had the purpose of assessing the institution's quality management system through the ability of the institution to meet a range of standards. The outcomes for each standard for the quality management system could be one of the following: non-functional, needs substantial improvement, functional or mature, and were determined by the extent to which the institution's quality management system was evaluated to be in place to enable the institution to meet the standard. (Manual for Institutional Audits, CHE, 2021, pp. 45) There is also a significant alignment between the standards used for the audit, and the higher education practice standards developed for the QAF. The institutional audits (as described in the *Framework for Institutional Audits*) were specifically designed to support the transition to the QAF.

4. At the conclusion of the HEQC's review of the institutional audit improvement plan and its decisions on it, the IQA functionality status will be communicated to the institution. The functionality status will be one of the following: non-functional, limited functionality, partly functional, functional, highly functional. Institutions that are determined to have less than functional IQA will be on a 5-year review cycle, and institutions that have functional or highly functional IQA will be on an 8-year review cycle. The year in which the next institutional review of the institution will take place will be communicated to the institution, as well as to SAQA, as the reregistration date for the institution's qualifications will coincide with this, and to the DHET for use in considering the reregistration and registration time-frame of private higher education institutions.
5. Institutions that have a non-functional or limited functionality status cannot make a submission for review. For institutions that have non-functional status, further CHE engagement may result in withdrawal of qualification/programme accreditation. For institutions that have limited IQA functionality or are partly functional, the CHE will engage these institutions intensively with a view to supporting them to improve functionality.
6. Institutions that have a partly functional IQA status can make a submission to the CHE once in the 5-year cycle to review their status. The institution will need to provide solid evidence of the improvements that have taken place in relation to the standards, and the CHE will take this evidence into account as well as any other HEQC quality assurance outcomes for the institution leading up to the review. The review may include a site visit.
7. The outcomes of the review submission may impact on whether the institution obtains programme approval status, but it will not have a bearing on the review cycle status. This will only be considered at the conclusion of the next full institutional review.
8. During a cycle, data and information from CHE quality assurance processes may point to a decline in IQA functionality for institutions that were deemed to have functional or highly functional IQA systems and are on 8-year review cycles. Where this is the case, the HEQC can decide on a review of functionality status through an institutional themed review. The HEQC will determine the selection of HEPS that will be used for the review, and the themed review process will be followed.

Process for determining IQA functionality on full implementation of the QAF

9. The QAF will be deemed to be in full implementation for an institution at the point of its first full QAF institutional review.
10. By that time there will be a range of HEQC decisions on quality assurance outcomes for the institution that have been determined through the processes of accreditation and quality reviews, and these will have been captured and reflected on the institution's QA-dashboard.

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11. The outcomes of the institutional review, as determined by the HEQC after the improvement plan has been implemented, will be the latest input and will also be captured and reflected on the system.
12. Thereafter, processes 4-8 as described in the pilot transition phase above will be followed.