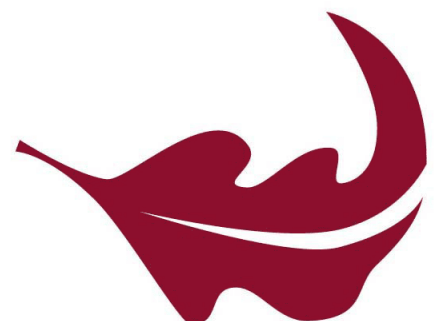# Quality Assurance at Stellenbosch University

Points of Departure and Framework (2011-2016 cycle)

Summary

This document provides the points of departure and framework for the fourth quality assurance cycle (2011-2016) at Stellenbosch University (SU). It explains the comprehensive, integrated and continuous manner in which quality assurance is managed at SU and refers to the supporting documentation which should be read in conjunction with this text.

Table of Contents

1. Nature and purpose of the Quality Assurance system

1.1　Stellenbosch University (SU) has a well-established and comprehensive institutional quality assurance (QA) system that provides for selfevaluation, external evaluation and appropriate quality development processes in all the academic and support service environments.

1.2　The quality assurance processes are coordinated at an institutional level by the Quality Committee which reports to the Executive Committee of Senate.

1.3　The multi-dimensional definition of quality by the Higher Education Quality Committee (HEQC) are underwritten by SU, namely that "quality" is seen as "fitness for purpose", "fitness of purpose", "value for money" and "transformation".

1.4　 SU assures and promotes quality as an integral part of all its activities, with specific reference to the University's strategic documents, such as the Strategic Framework for the "Eeuwisseling en daarna" and the SU Institutional Plan 2012 – 2016 with the four focus areas and goals as defined , namely expertise, student success, diversity and sustainability.

1.5　By means of this system, the University meets its obligations in terms of the national system of quality assurance (as stipulated by the Higher Education Act, Act 101 of 1997, in particular Chapter 2 and that are required from the University as a public system of higher education). The QA system is managed in the expectation that self-accreditation status will be granted to SU.

1.6　SU's quality assurance system is modelled on its interpretation of international best practice in QA in Higher Education.

2. Points of departure

2.1　Stellenbosch University has a firm commitment to excellence and utilizes the quality assurance system as an instrument to further enhance the quality of its core and support functions.

2.2　SU recognises the importance of encouraging and enhancing a diversity of people and ideas in all its activities and in its staff and student composition.   Diversity and quality compliment each other in that multiple approaches to, frameworks for and perspectives on a study field enhances the quality of the learning experience. The quality of research, teaching and learning and community interaction are enriched by the social, cultural and language diversity of students, as well as the degree to which the curriculum negotiate the diversity challenges in our local and global society.

2.3　The appointment of qualified and committed staff is a key requirement for excellence.

2.4　Student participation in quality assurance activities is encouraged on all levels. The quality of the University are directly linked to the quality of the graduates, as measured against the *Profile of the Stellenbosch University Graduate*. Students are included in the selfevaluation committees and feedback from students and graduates are used as information for improvement.

2.5　The process of quality assurance rests on three phases:

　　a.　Self-evaluation forms the basis of SU's quality assurance system. This is applicable in both academic and support service environments,

　　b.　External peer review (that includes a judgement of selfevaluation reports as well as a visit) is the second phase of the QA system,

　　c.　The third phase is the mechanisms to follow-up on the issues identified in the self- and external evaluation processes and to take appropriate action to promote quality.

2.6　Quality assurance at the University forms an integral part of the normal and continuous activities of each member of staff, especially staff members in managerial positions (such as

Deans, Division Heads, Chairs/Heads of Departments or Programme Coordinators). All role players in the quality assurance process are responsible to strive towards a balance between quality assurance, quality support, quality development and quality monitoring.

2.7	The University try to eliminate the duplication of evaluation and other quality assurance activities as far as is possible.

2.8	The member of the Rector's Management Team (RMT) responsible for quality assurance monitors the impact of the quality assurance processes on the time and resources of the University to ensure that the value added justifies the impact of time and resources.

3. Periodic internal and external evaluation as a dimension of quality assurance

Quality assurance activities are conducted on a continuous and periodical basis. In the representation below the four major periodic evaluation activities which are scheduled in the QA cycle are indicated:

Field		Subject of evaluation		EVALUATION ACTIVITY			
				Evaluation of departments	Accreditation of professional programmes	Evaluation of faculties	Evaluation and audit of the University
				once every six years	periodically according to own schedule	once every six years	once every six years
				by Stellenbosch University	by professional bodies	by Stellenbosch University	by the HEQC
Academic core functions	TEACHING	Undergraduate modules	General	✓			
			Professional		✓		
		Undergraduate programmes	General			✓	
			Professional		✓		
		Postgraduate modules	General	✓			
			Professional		✓		
		Postgraduate programmes	General	✓			
			Professional		✓		
		Teaching: management and support at faculty level				✓	
		Teaching: management and support at university level					✓
	RESEARCH	Research by individuals					
		Research within departments		✓			
		Research at faculty level (management and support)				✓	
		Research: management and support at university level					✓
	NITY IN	Community interaction by departments		✓			

		CI management and support at faculty level			✓	
		CI management and support at university level				✓
Organisational units and functions		Functioning and QA systems of departments	✓			
		Functioning and QA systems of faculties			✓	
		Functioning and QA systems of support service divisions	✓			
		Functioning and QA systems of management bodies				✓
		QA system of the University				✓

4. Quality assurance of academic processes and academic organisational structures

4.1 The evaluation of academic departments, centres, bureaux and institutes (CBIs)

4.1.1 Scope

The evaluation of departmental activities focuses on the following aspects:

a.   The undergraduate modules offered by the department,
b.   The postgraduate teaching and learning programmes located in that department[1],
c.   Aspects of the department's research activities,
d.   The community interaction activities of the department,
e.   The functioning of the department as an organisational unit (including the efficiency, cost-effectiveness and management of the department), and
f.   The infrastructure and facilities of the department.

4.1.2 Criteria

The point of departure for the evaluation of departments is the programme accreditation criteria of the Quality Committee of the Council for Higher Education (HEQC) (available at www.che.ac.za), as adapted by the University:

a.   The complete application of the programme accreditation criteria of the HEQC constitutes the minimum requirement for the accreditation of the department's *postgraduate programmes*.
b.   The department adapts the HEQC programme accreditation criteria to evaluate the department's *undergraduate modules*.
c.   The department adapts the HEQC programme accreditation criteria to evaluate the department's functioning (including organisational, leadership and other processes).

---

1 Some postgraduate programmes do not clearly resort under a single department from an academic and an organisational point of view because different departments contribute on an approximately equal basis to the presentation of the programme. The responsibility for the evaluation of these programmes is assigned to a specific department by the Dean. The evaluation of such programme(s) is consequently dealt with as part of the assigned department's evaluation.

4.1.3   Evaluation of departments that offer professional programmes

Departments that offer programmes that are accredited by external bodies may be granted exemption from the University's system of departmental evaluation by the Quality Committee provided that the external accreditation process meets the requirements of the University's QA system.

4.1.4   Policy and procedure

Details of the departmental evaluation system of Stellenbosch University are contained in the *Policy and procedure for departmental evaluation (2011-2016 cycle)*.

4.2   The evaluation of teaching and learning programmes

4.2.1   Professional programmes

Professional programmes (undergraduate and postgraduate) are evaluated <u>according to the criteria and procedures set by the external professional bodies</u> recognised by the HEQC for the purposes of programme accreditation.

4.2.2   Postgraduate programmes

Postgraduate programmes are evaluated, based on the HEQC programme accreditation criteria, as part of the scheduled evaluation of the programmes' home department. Interdisciplinary postgraduate programmes are evaluated as part of the scheduled evaluation of the programmes' assigned administrative home department.

4.2.3   Undergraduate programmes

Undergraduate programmes not evaluated by an HEQC-approved professional body are evaluated <u>by faculties</u>, using criteria adapted from the HEQC programme accreditation criteria.

Details of the evaluation of programmes are available from the Division for Institutional Research and Planning.

4.3   Internal and external moderation

The summative student assessment (assessment assignments and –products) of all modules offered by the University (i.e. all modules at all levels) is moderated internally.

The summative student assessment (assessment assignments and -products) of all exit-level modules is externally moderated.

Details on the rules for internal and external moderation are contained in the *Regulation for internal and external moderation and the processing of results*.

4.4   External examination

The external examination of master's theses and doctoral dissertations is standard practice at SU.

Details are contained in the *University Examinations* section printed in the General Calendar (Yearbook) of the University.

4.5 Quality assurance of research programmes

4.5.1 Peer review

The peer review of research forms the essence of the University's approach (cf. paragraph 2.5(b)) and is supported by mechanisms and sources of information (on publications, productivity and other indicators).

4.5.2 The promotion and management of research

a. The Senate has a permanent Research Committee, with three standing subcommittees: subcommittee A (Human and Social Sciences), subcommittee B (Natural Sciences) and subcommittee C (Health Sciences).
b. At faculty level, the <u>Dean</u> is responsible for the promotion and management of research. This includes:
   i. the promotion of research;
   ii. recommendation (or approval, where applicable) of research contracts;
   iii. control of research funds according to the requirements of the principal and the rules/guidelines of the University;
   iv. control of the results of, and reporting on research; and
   v. consideration of the research performance of departments and individuals in the faculty's management processes.
c. At institutional level, the <u>Vice-Rector (Research)</u> is responsible for the promotion and management of research, supported by the Division for Research Development (DRD). The functions of this division include the following:
   i. development and monitoring of policy on the basis of the interpretation of the research environment;
   ii. guidance for and input into the strategic research themes of the University;
   iii. liaison with the statutory research bodies; industrial partners; international funding agencies; relevant government bodies/structures, etc.
   iv. provision of information on research opportunities and research support sources (nationally and internationally) to researchers;
   v. provision of information and statistics on research to management and other relevant stakeholders, including landscape analyses;
   vi. management of the research contract management system;
   vii. central level management of a research equipment system;
   viii. management of research capacity development programmes;
   ix. implementation of a mentoring system for young academics and postgraduate students;
   x. monitoring the throughput of postgraduate students;
   xi. management of international research funding programmes and a system for postgraduate bursaries;
   xii. research related support to individual researchers, groups and centres/institutes.

d. There is a regulated <u>environment</u> for the development of the research portfolio at Stellenbosch University that takes the important regulation frameworks into account (whether they be statutory, or determined by the nature of scientific practice).

4.6 The quality assurance of Community Interaction (CI) activities

In the subsection on "Monitoring and Evaluation of Community Interaction Projects" of the *SU Policy on Community Interaction* the quality assurance of Community Interaction are written as follows:

a. CI initiatives shall address local, national, regional and international priorities in accordance with identified needs.
b. All community interaction projects or programmes under the auspices of the University must be registerered on the institutional CI-database.
c. In order to be a fully registered and approved CI project of the University a project is subjected to an initial approval (quality assurance) process which involves the following steps:
    i. The database administrator in the Division for Community Interaction approves the project in terms of completedness of information.
    ii. The Head of the Department approves the project in terms of validity and relevance in the department, ethical compliance and the information contained in the project record.
    iii. The Dean of the Faculty approves the project in terms of validity and relevance in the faculty, ethical compliance and the information contained in the project record.
d. Project owners are required to update the details of their project each year on the database to ensure that the information is always relevant and accurate.
e. Self-evaluation at faculty and department level constitutes the most important part of the evaluation process. It is expected of each faculty and department to develop criteria for self-evaluation. The Division for Community Interaction will assist where necessary.
f. Annual project reports are submitted to Heads of Departments or Deans. The registered project or programme leaders assume responsibility for submitting these reports.
g. The evaluation of CI projects takes place on the basis of the criteria developed by the Community Interaction Committee of the Senate, CIC(S), and approved by Senate (taking into account the criteria used by the HEQC). The integration of CI with teaching and learning and research, and inter-disciplinary co-operation between faculties/divisions are encouraged and promoted, also with regard to the evaluation process.
h. The Community Interaction Committee of the Senate, CIC(S), will regularly extend invitations to faculties and divisions to nominate CI initiatives in their environments for CI Flagship Status depending on the availability of central SU funds. Applications will be adjudicated by the CIC(S) on the basis of criteria developed for this purpose by the CIC(S). CI flagship projects will be evaluated at regular intervals by the CIC(S) and continued flagship status and funding will be dependent on a positive evaluation.
i. Feedback opportuinites are envisaged to give communities the opportunity to evaluate the university's CI output and to judge the results thereof.

5. Quality assurance of the governance and management processes of the university

The functioning of the management bodies (including Council and the Senate), statutory bodies (including the Institutional Forum) and the executive processes (including the functioning of the

Rector's management team) is subject to the following rules in order to promote the quality and effectiveness of these bodies:

5.1 Council

Council annually conducts a structured self-evaluation of its activities in accordance with best practice.

5.2 Senate

Senate annually conducts a structured self-evaluation of this bodies' activities. The report of this self-evaluation serve at the Rector's Management Team (RMT) or an unattached committee appointed by the RMT. The self-evaluation report of Senate accompanied by the RMT's comments are then reported to Council.

5.3 Institutional Forum (IF)

The Institutional Forum biennially conducts a structured self-evaluation of the Forums' activities . The IF is responsible, as part of the self-evaluation process, for collecting and reporting on feedback from interested parties about the effectiveness and quality of the IF's functioning and activities. The report of this self-evaluation serve at the RMT. The IF's self-evaluation report accompanied by the RMT's comments are then reported to Council.

5.4 Subcommittees of Council, Senate and the Rector's Management Team (RMT)

The effective functioning of official committees is an important element of the quality management processes of SU. The quality assurance of the work of committees is the responsibility of the bodies to which these committees report to.

5.5 Student Representative Council (SRC)

The SRC annually conducts a structured self-evaluation of its activities. The SRC is responsible for, as part of the self-evaluation process, collecting and reporting on feedback from interested parties about the effectiveness and quality of the SRC's functioning and activities. The report of this self-evaluation serve at the RMT. The SRC self-evaluation report accompanied by the RMT's comments are then reported to Council.

5.6 Executive Committee of the Convocation

The Executive Committee of the Convocation biennially conducts a structured self-evaluation of its activities. The Executive Committee of the Convocation is responsible for, as part of the self-evaluation process, collecting and reporting on feedback from interested parties about the effectiveness and quality of the Executive Committee of the Convocation's functioning and activities. The report of this self-evaluation serve at the RMT. The Executive Committee of the Convocation's self-evaluation report accompanied by the RMT's comments are then reported to Council.

5.7 Management structures

5.7.1   Rector's Management Team

The Rector's Management Team is held accountable by the Council and as such reports on various occasions throughout the year on the core functions it performs.

5.7.2   Line Management Functions

The quality of the line management functions are assured through the HR performance appraisal system, and indentified risks are maintained on the central Risk Register.

6.   Quality assurance of support services

6.1   Criteria

A broad spectrum of activities within support service divisions is aimed at improving and promoting the quality of service provision and is standard practice at Stellenbosch University.

Support service divisions use (and adapt if necessary) the criteria used in the previous QA cycle (2004-2009). If a support service division is being reviewed for the first time in this current cycle, the division, where applicable, should align its criteria with the relevant professional practice. Where such criteria does not exist, divisions are advised to use an adapted version of the Baldrige approach for evaluations, available in the *Policy and procedures for the Evaluation of Support Service Divisions.*

7.   Student Participation in Quality Assurance

7.1   Student feedback

The University's student feedback system makes provision for students to regularly give feedback on their experience of individual modules, lecturers' lecturing, and the programme as a whole. This feedback is utilised in the development of modules and programmes, and for the professional development of lecturers

The student feedback reports are made available to the individual lecturers, the departmental chairpersons and the Deans. The results of the student feedback can be used circumspectly by the departmental chairpersons and Deans in the evaluation of the quality of modules, programmes and the lecturing done by lecturers. Student feedback is not used in isolation as a quality assurance or quality evaluation instrument.

7.2   Student participation in evaluation committees and stakeholder feedback

Every self-evaluation committee, whether for academic departments, undergraduate or postgraduate programmes, or support service divisions, should have at least one student representative who serves as a full member of the self-evaluation committee.

In terms of stakeholder feedback and client satisfaction surveys, students should be considered as one of the major stakeholder groups/clients and included in interviews and surveys.

7.3   Quality Assurance of Student activities

Students organizations are encouraged to regularly evaluate themselves in a process facilitated by the Students and Academic Support Division, with formal reports to the SRC.

8.   Performance evaluation of staff

The University has a performance-driven remuneration system. This entails that:

a.   All staff members annually enter into an agreement with their line manager in which the objectives and performance evaluation criteria for the specific year are specified;
b.   The line manager conducts performance evaluation interviews with each staff member at the end of each year and evaluate the year's performance on the basis of the agreement and the quality of work by the staff member; and
c.   The results of this evaluation process are taken into consideration when decisions are taken about staff members' annual remuneration adjustment.

9.   The institutional quality assurance management system

9.1   Quality Committee

9.1.1   Functioning of the Quality Committee

a.   The management of the University's quality assurance system at institutional level is the responsibility of the Quality Committee (QC), which is chaired by a member of the Rector's Management Team[2].
b.   Reports on the QC's activities and recommendations serve before the Senate and Council.

9.1.2   Responsibilities of the Quality Committee (QC)

a.   The QC is instructed to:
   i.   be responsible for the overall coordination of all quality assurance (QA) activities at the institutional level;
   ii.   be responsible for the overall coordination of the external institutional audit of the University (this includes the process of institutional self-evaluation);
   iii.   interpret all QA reports (self-evaluation reports, reports by peer reviewers, etc.) and to identify the issues arising from these for the attention of the Management Team;
   iv.   advise the University Management on management and monitoring activities that should flow from the quality assurance activities. This is done via the member of the Management Team who has the overall responsibility for the management of the quality assurance system;
   v.   advise the member of the Management Team who has the overall responsibility for the management of the quality assurance system in order to ensure that the

---

[2] Since the Quality Committee's inception in 2005, it has been chaired by the Vice-Rector (Teaching)

University complies with its national statutory obligations with regard to quality assurance, and

vi. advise the member of the Management Team who has the overall responsibility for the management of the quality assurance system on suitable ways in which to effect overall liaison between and coordination of all the University's planning and quality assurance processes.

b. The QC is an advice committee to the Executive Committee of Senate, Exec(S).

c. The Exec(S) decides how issues arising from the evaluation process will be handled according to the advice from the QC, for example:

i. Exec(S) handles the issue;

ii. Issue is reported to Senate;

iii. The Exec(S) first refer the issue to other committees for attention;

iv. Refer issue to the Rector's Management Team (RMT) for institutional handling,

d. The QC meets at least four times a year.

9.1.3 Members of the Quality Committee (QC)

a. The QC consists of:

i. The member of the RMT to whom the quality assurance portfolio has been awarded by the Rector , serve as QC Chair,

ii. The Vice Rector (Teaching) , or a representative, appointed by the VR (Teaching),

iii. The Vice Rector (Research) , or a representative, appointed by the VR (Research),

iv. The Senior Director: Institutional Research and Planning ,

v. Two members of Senate from the Humaniora faculties appointed by Exec(S),

vi. Two members of Senate from the SET faculties appointed by Exec(S),

vii. A student nominated by the Student Representative Council,

viii. The Assistant Director: Quality Assurance,

ix. Further members appointed on an ad hoc basis by the Chair of the QC.

9.1.4 Support to the Quality Committee

a. The Division for Institutional Research and Planning (IRP) provides the administrative support to the Quality Committee as secretariat.

b. Support for the institutional activities relating to the development of quality and community interaction is the responsibility of the Community Interaction Division.

c. Institutional activities directed at the assurance and development of the quality of support service divisions is the responsibility of the heads of the support divisions.

d. Support for the institutional activities related to the effective functioning of the quality assurance system is the responsibility of the Division for Institutional Research and Planning.

9.2 Division for Institutional Research and Planning

The quality assurance functions of the Division for Institutional Research and Planning include the following:

a. an interpretation, integration and communication function:

i. interpretation of all QA reports and advice to the QC,

ii. liaison with the Higher Education Quality Committee (HEQC),

   iii.   liaison with statutory professional bodies,

   iv.   provision of an expertise-based and advisory service with regard to quality assurance policy and the requirements of national statutory bodies (e.g. the National Research Foundation, Council on Higher Education, Medical Research Council, etc.),

   v.   provision of a general expertise-based advisory service for QA in the field of higher education (national and international),

   vi.   liaison with Senate and Council committees, and other committees as required, to promote the integration of all QA activities, and

   vii.   needs-based research in the field of quality assurance;

b.   a process function:

   i.   coordination of the University's institutional reviews,

   ii.   overall planning, monitoring and recordkeeping of all the evaluation processes,

   iii.   ensuring that periodic visits take place by external review panels, that reports are received by the due date, the receipt and processing of reports, recordkeeping of all correspondence and reports,

   iv.   financial planning and budgeting for the University's quality assurance activities at institutional level, and

   v.   development and maintenance of an information database that makes specific provision for the monitoring of follow-up actions arising from QA activities.

10.   Related policy documents

Policy documents which is relevant for quality assurance can be found on the Division for Institutional Research and Planning webpage: www.sun.ac.za/irp:

a.   *Points of Departure and Framework (2011-2016)*
b.   *Policy and Procedures for departmental evaluation (2011-2016)*
c.   *Policy and Procedures for support service evaluation (2011-2016)*
d.   *Constitution for the functioning of the Quality Committee*
e.   *Themes and Criteria for the evaluation of departments and programmes (2011-2016)*
f.   *Guidelines for external evaluation*
g.   *Administrative forms for tax, claims and payment purposes*