Quality Assurance at Stellenbosch University
Policy and Procedures: Departmental Evaluation (2011-2016)

Summary

Academic departments at Stellenbosch University (SU) are evaluated once during the 2011-2016 cycle on the basis of the evaluation system set out in this document.

Departments offering professional programmes accredited by external bodies may be excused from the full extent of the evaluation system if the external accreditation process covers all the points contained in the SU system. Applications for exemption from the SU evaluation system must be submitted to the Quality Committee (QC), which will make a recommendation to the Executive Committee of Senate, EC(S).

The purpose of the SU evaluation system is to ensure development and accountability, and thus quality. The system comprises three building blocks, namely departmental self-evaluation, external peer review, and a follow-up report.

The following facets of the departmental activities are evaluated:

a. the undergraduate modules offered by the department,
b. the postgraduate teaching and learning programmes that resort in the department, with a view to accreditation,
c. facets of the department’s research activities,
d. the service and community interaction activities of the department,
e. the functioning of the department as an organisational unit (including the efficiency, cost-effectiveness, management and infrastructure of the department), and
f. the infrastructure and facilities of the department.

As the evaluation of the postgraduate programmes (with a view to accreditation) takes place during the departmental evaluation, this evaluation has to meet the minimum requirements for programme accreditation. The criteria for programme accreditation of the HEQC (Higher Education Quality Committee) therefore form the basis for the evaluation of the departments.

The procedure for self-evaluation and peer review is set out in this document, as well as the composition of the evaluation panels and the differences between the evaluation process and the evaluation report. The roles of the Dean, the QC and the EC(S) are also explained.
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1. INTRODUCTION

The policy and procedure for departmental evaluation during the 2011-2016 cycle are set out in this document.

The academic departments of the University will be evaluated on the basis of this system once during this cycle.

Departments offering professional programmes accredited by external bodies may receive exemption from the SU evaluation system if the external accreditation process addresses all the points contained in the SU system. Applications to receive exemption from the SU system of departmental evaluation must be submitted to the QC, which will make a recommendation to the EC(S). Reports of external accreditation processes must be sent to the EC(S) via the QC.

2. THE NATURE, PURPOSE AND SCOPE OF THE SYSTEM

2.1 Instrument for improvement

Stellenbosch University’s system for departmental evaluation is an instrument for improvement. The system is designed in so that it requires a department to think critically about its activities, and to then articulate the results of this reflection.

2.2 Accountability

The system is also aimed at ensuring that departments can account for the quality of all their activities.

2.3 Evaluation of quality and systems for quality assurance

Unlike pure process- and system-orientated evaluations, the SU system for departmental evaluation includes the evaluation of the quality of the academic content of activities of the department as well as the effectiveness and efficiency of the department’s systems for quality assurance.

2.4 Continuity

The system makes provision for the specific needs and circumstances of the academic departments at SU. It is designed to ensure optimal continuity with the system of external evaluation of departments that has been used at the University since 1993.

2.5 ‘Quality’ – institutional, national and departmental views

This system was developed as part of a quality assurance process, based on an understanding of “quality” as “excellence”. However, viewed in isolation, “excellence” is an empty construct. It only acquires meaning when it is brought into relationship with the specific issues in which excellence is
being pursued. In the University’s Strategic Framework 1999 and the SU Management’s Vision 2012, excellence is connected to scientific practice, participation and role playing in South Africa and Africa, and to achievements in the establishment of a diverse university community.

The national quality assurance system is based on four ways of interpreting quality (cf. the HEQC Draft Audit Framework, 2003). All four these dimensions of quality are brought into the equation in an applied manner in SU’s system of departmental evaluation:

1. Are the department’s objectives suitable, measured in terms of the vision and objectives of the faculty and the University?
2. Does the department meet its objectives?
3. How does the department deal with the tension that arises between cost-effectiveness and quality?
4. Does the department’s composition and functioning meet the faculty and the University’s renewal objectives?

During the evaluation process, the department develops and formulates its own view of quality that is applicable to the unique nature of the department, against the background of the institutional and national views on quality. Departments are encouraged to think critically about this, since the department’s own view of quality can only be defined if they have thought in depth about their self-concept and formulated it.

2.6 Self-evaluation

The basis of the evaluation process as a whole is self-evaluation by the department, which precedes the visit of the external peer review panel. This is the first building block in the process.

2.7 External peer review

External peer review forms the second building block of the departmental evaluation process.

2.8 Follow-up

Those issues in need of attention that are identified during the self-evaluation process, verified by the external review, and that have been accepted by the EC(S), are followed-up and the department has to submit a follow-up report after two years. This is the third building block of the process.

2.9 Facets of departmental activities that are evaluated

The University’s quality assurance system stipulates that the following facets of departmental activities have to be evaluated:

a. the undergraduate modules offered by the department,
b. the *postgraduate teaching and learning programmes* that resort in that department, with a view to accreditation,
c. facets of the department’s *research activities*,
d. the *service activities* of and *community interaction* by the department,
e. the functioning of the *department as an organisational unit* (including the efficiency, cost-effectiveness, management and infrastructure of the department), and
f. the *infrastructure and facilities* of the department.

2.10 Evaluation cycle

Departments are evaluated once every six years.

3. SELF-EVALUATION

3.1 Evaluation criteria

Since the evaluation of postgraduate programmes (with a view to accreditation) takes place during the departmental evaluation, this evaluation needs to meet the minimum requirements for programme accreditation prescribed by the HEQC. These criteria have been adapted and simplified for the purpose of the University’s internal programme review processes. Dimensions which are not addressed by the programme criteria are evaluated according to additional criteria that have been adapted from the HEQC’s audit criteria. Departments are free to develop additional criteria.

3.2 Benchmarking

Benchmarking is the process whereby performance is measured against other internal and external reference points. It is expected from departments to continuously compare their levels of quality to those of other departments within their faculty and/or similar departments at other institutions. These comparisons can also be used by departments to substantiate statements made in their self-evaluation report.

3.3 Evidence-based evaluation

The departments are expected to substantiate their evaluation with evidence. The University provides the departments with a standard set of core statistics and information including Strategic Management Indicators (SMI’s), as provided by the Division for Institutional Research and Planning.

3.4 Self-evaluation as point of departure and basis

Self-evaluation is the point of departure and basis for the entire evaluation process.

The self-evaluation report must be submitted to the Dean at least two months before the visit of the external review panel.
The evaluation process will only continue after the Dean has approved the departmental self-evaluation report. The self-evaluation report is then sent to the members of the external review panel by the Dean a month in advance of the site visit.

3.5 The distinction between the self-evaluation process and the self-evaluation report

Self-evaluation is seen as a process. The results of this process are presented in the self-evaluation report. The reporting is therefore preceded by the process. The focus falls foremost on the process, because it is through the process that development and improvement takes place.

The target audience of the self-evaluation report is, firstly, the department itself. The self-evaluation report should be a ‘living’ document to which the department can refer on a continuous basis in the planning and execution of all its activities.

3.6 Departmental self-evaluation committee

3.6.1 Appointment and composition

The departmental chair appoints the self-evaluation committee at least six months before the visit of the external review panel. The self-evaluation committee is composed as follows:

a. the departmental chair,
b. representatives from the academic staff, appointed by the chairperson in consultation with a full departmental meeting, on condition that staff at different levels of seniority are represented on the self-evaluation committee. In the case of smaller departments, it is preferred that all the academic staff members serve in the self-evaluation committee;
c. one or more representatives of the support staff, appointed by the departmental chairperson after a process of consultation,
d. one or more undergraduate students, appointed by the departmental chairperson on the advice of, and after consultation with, the student committee of the faculty concerned,
e. one or more postgraduate students, appointed by the departmental chairperson on the advice of, and after consultation with, the student committee of the faculty concerned.

The departmental chair may act as convenor of the committee, or he/she may appoint a senior member of staff (at least at the level of associate professor) for this purpose.

3.6.2 Status and role of the self-evaluation committee

a. The departmental self-evaluation committee gathers all the relevant information,
b. The committee evaluates the quality of the department’s activities on the basis of the criteria,
c. The committee compiles the self-evaluation report and reports it to the departmental chair,
d. The departmental chair is ultimately responsible for the approval of the self-evaluation report and its submission to the Dean.
3.6.3 Support for the departmental self-evaluation committee

Once the self-evaluation committee has been appointed (i.e. at least six months before the visit of the external review panel), the committee may request the Division for Institutional Research and Planning to conduct a preparatory discussion aimed at their specific needs. In addition, the staff members of the Division for Institutional Research and Planning are available to provide the committee with support and advice on a continuous basis.

4. EXTERNAL PEER REVIEW

4.1 Composition of the panel

a. The Dean compiles a panel of leading experts in consultation with the department concerned. The Dean usually requests the department to compile a list of names from which possible members of the panel can be selected. The Dean obtains all the necessary information to ensure that the panel is composed of disciplinary experts. The Dean also ensures that the members of the panel do not have conflicting interests and that the same people are not repeatedly used to make up the panel.

b. The panel must be appointed by the Dean at least six months before the visit. The Dean formally invites the panel members.

c. A letter of appointment is prepared by the Division for Institutional Research and Planning and sent to evaluators via the Dean’s office. A carbon copy (cc) of the letter of appointment is sent to the Senior Director: Institutional Research and Planning.

d. A copy of this policy and procedure is sent to each panel member with the formal letter of appointment, as well as the Quality Assurance at Stellenbosch University: Points of departure and framework (2011-2016 cycle).

e. A maximum of one panel member may have served in the previous external review panel during the last evaluation.

f. The external panel consists of at least two members.

g. The Dean appoints one of the members of the panel as convenor (chair) of the panel.

h. If a department has a substantial teaching involvement in more than one faculty at undergraduate level, the Dean of the department’s home faculty compiles the panel in consultation with the Dean of the other faculty/faculties.

i. The panel pays a two-day visit to the department (departments may make use of more days, in consultation with the Dean) and carry out the full scope of the evaluation as specified in this policy and procedure.

4.2 Responsibilities of the Convenor (chair) of the External Panel

The convenor is responsible for ensuring the following:

a. That the panel’s activities comply with the principles and procedures and expected outcomes of the SU quality assurance system (as explained in this document),

b. Before the site visit:
i. If requested, the convenor may schedule an initial telephone conference at least two weeks before the site visit. A staff member from the Division for Institutional Research and Planning will provide the logistical support for the telephonic conferencing facilities. During this meeting, if convened by the convenor, the panel may finalise their site visit schedule, identify additional information required for the evaluation (not mentioned in the department’s self-evaluation report), negotiate the work distribution (e.g. for the preparation if questions on selected themes).

c. During the site visit:
   i. The convenor acts as chair during the panel discussions and interviews,
   ii. Lead the process for identifying and formulating the panel’s findings,
   iii. Give an oral feedback to the department at the end of the site visit,
   iv. Set target dates for the writing and editing of the written report,
   v. Decide on the work distribution for the panel members in terms of the writing and editing of the report.

d. After the site visit:
   i. The convenor accepts the responsibility for the finalisation and submission of the evaluation report to the Dean within four weeks of the site visit.

4.3 Scope of the panel’s task

The external panel is responsible for the following:

a. Before the review visit:
   i. Thoroughly study the department’s self-evaluation report,
   ii. Thoroughly study the department’s previous external review report, as well as the follow-up report handed in by the department,
   iii. Prepare questions and points for discussion for use during the visit,
   iv. Identify issues to which the department should pay attention,
   v. Compile the schedule for the site visit in a cooperative manner with the department,
   vi. Take part in a preparatory panel meeting at least one week before the site visit.

b. During the visit:
   i. Take part in the discussions with the various people and interest groups that have been identified for this purpose in terms of the University’s procedure and programme,
   ii. Gather additional information (if the information contained in the self-evaluation report is unclear or incomplete),
   iii. Evaluate the validity of the department’s own performance evaluation (i.e. that of the self-evaluation),
   iv. The panel communicates its preliminary findings to the departmental chair at the end of the site visit,
   v. The panel drafts a preliminary report on their findings and give an oral feedback to the department at the end of their visit.

c. After the visit:
   i. The convenor compiles a concept report,
   ii. The convenor provides copies of the concept report to the members of the panel,
iii. The panel members make comments and approve the final version of the edited report,
iv. The convener submits the report to the Dean within four weeks after the conclusion of the visit.

4.4 Information for the panel

a. The members of the panel receive the self-evaluation report with the supporting documentation at least four weeks before their visit to the department. The evidence portfolio which is sent to the evaluators with the self-evaluation report contains at least the following material:

i. the vision of the University,
ii. the department’s strategic plan,
iii. the department’s strategic management indicators,
iv. the core statistics and information as provided by the Division for Institutional Research and Planning,
v. the external evaluation reports from the previous cycles,
vi. the Yearbook (the general as well as the faculty yearbook),
vii. a list of documents that will be available during the visits.

4.5 The visit by the external panel

During the visit of the panel, the external review panel follows a programme of which at least the following will constitute elements:

a. closed panel sessions during which the members of the panel:
   i. compare their provisional evaluation results,
   ii. make a list of the issues about which they want to request additional information,
   iii. make a preliminary list of matters for attention that they want to point out,
   iv. Study the material that was made available onsite. The panel may call in the departmental coordinator or the departmental chairperson for ad hoc interviews to obtain additional information and/or documentation,
   v. Review the evaluation process to be used by the panel for the verification of the selected evidence,
   vi. Check whether the issues that were identified during the previous departmental evaluation as requiring attention were followed up on,
   vii. Identify specific points of discussion for the interviews with the chairperson, staff and students.
b. discussions with the Dean and other academic managers;
c. interview(s) with the departmental chair, the departmental chairperson(s) of department(s) for which auxiliary modules are presented, staff of the department (academic and administrative), students (undergraduate and post-graduate), and other stakeholders;
d. view the department’s facilities;
e. a closed panel meeting during which the following is done:
   i. Finalise the evaluation of the department’s criteria and the ratification/validation of the department’s self-evaluation decisions,
   ii. Identify and formulate the issues to which attention needs to be paid,
   iii. Compile the concept report.
f. a meeting of the members of the panel with the department in order to provide the department with feedback.

The documents that should be made available to the panel during their visit to the department should include at least the following:

a. module frameworks,

b. the curricula of postgraduate programmes and undergraduate modules,

c. the department’s web based course material (i.e. Web CT),

d. course notes, books used of practical classes, etc.,

e. a representative sample of test papers, course assignments, and practical assignments for the previous 3 years,

f. exam papers and assessment criteria for the previous 3 years, and

g. reports of external moderators of exit level modules for the previous 3 years.

4.6 Reporting by the panel

Within four weeks after the visit, the panel sends the consolidated, written report in the prescribed format to the Dean, who will ensure that a copy is loaded onto the University’s quality assurance database and that it is placed on the agenda of the Quality Committee.

The report should contain at least the following:

a) a 1-page executive summary,

b) the panel’s ratifying decisions on the department’s self-evaluation on the basis of the criteria,

c) the issues for which the panel feels the department deserves a compliment, with motivation,

d) the issues that the panel has identified that require further attention, with motivation.

5. THE DEAN’S EVALUATION OF THE EVALUATION REPORTS AND THE ADVICE OF THE QUALITY COMMITTEE

5.1 After receipt of the final report by the external panel, the Dean submits it to the departmental chairperson who responds to the report in writing and submits the response to the Dean.

5.2 The Dean submits the following documents to the QC:

a. the complete self-evaluation report,

b. the complete report of the external panel,

c. the department’s response to the report,

5.3 The Dean together with the Departmental Chair attends the QC meeting at which the reports are tabled. At this meeting follow-up actions and issues for which the department deserves praise are pointed out.

5.4 The QC is responsible for:

a. ensuring the integrity of the evaluation process by confirming that the evaluation was carried out according to the SU policy and procedure;

b. expressing an opinion from an institutional perspective regarding the quality and acceptability/validity of the four reports that are generated during the evaluation process.
(based on the reports that are submitted, the QC develops a set of standards according to which reports must be evaluated);
c. checking whether the issues for commendation as well as the issues that needs attention are clearly formulated and sufficiently motivated (based on relevant evidence);
d. institutional gauging/standardization across departments and faculties;
e. making recommendations to the EC(S).

5.5 The following documents form part of the QC’s report to the EC(S):
   a. the report by the external panel;
   b. the reaction of the department to the report of the external panel;
   c. the comments and recommendations of the Dean, and
   d. the summary and recommendations of the QC
   e. the core information and SMI’s.

5.6 The complete reports are stored in the electronic document repository which is maintained by the Division for Institutional Research and Planning.

6. EVALUATION DECISION BY THE EXECUTIVE COMMITTEE OF SENATE, WITH THE IDENTIFICATION OF SPECIFIC FOLLOW-UP ACTIONS TO WHICH THE DEPARTMENT MUST PAY ATTENTION

6.1 The EC(S) considers the QC’s report and takes a decision on whether the report by the external panel, including the comments by the department and the Dean, is to be accepted/not accepted for example:
   a. handled by the EC(S) themselves,
   b. report to Senate,
   c. firstly are referred to other committees of Senate,
   d. referred to the RMT by the EC(S) for institutional handling.

6.2 On conclusion of the meeting of the EC(S), the Dean is responsible for feedback to the department (appreciation, criticism, encouragement, etc.).

6.3 The Division for Institutional Research and Planning keep a register of the decisions taken by the EC(S) on quality assurance and continuously submit new decisions to the QC for its attention and discussion.

7. IMPLEMENTATION OF THE FOLLOW-UP ACTIONS

The Dean, in cooperation with the departmental chair, is responsible for the implementation of the follow-up actions that are stipulated by the EC(S).

8. FOLLOW-UP EVALUATION AND REPORTING BY THE DEPARTMENT

The Dean, in cooperation with the departmental chairperson, submits a follow-up report (including the original QC report) to the QC within two years after the completion of the evaluation report by the EC(S). The Dean’s follow-up report, together with the recommendations by the QC, is then submitted to the EC(S).
9. **FOLLOW-UP EVALUATION DECISION BY THE EXECUTIVE COMMITTEE OF SENATE**

The EC(S) considers the follow-up report and takes a decision on whether or not to accept it.

10. **COVERING THE COSTS OF THE DEPARTMENTAL EVALUATION**

1. The Dean budgets for the external evaluation of departments and allocated funds to the departments for this purpose.
2. The departmental chairpersons manage the spending of funds and are responsible for budget control.
3. The Senior Director: Institutional Research and Planning plays a supportive and coordinating role with regard to the budget for quality assurance. The Division for Institutional Research and Planning also keep records of all expenditure that is related to the departmental evaluation processes.
4. The funds are used exclusively for the following items:
   a) the honoraria payable to the members of the external panel;
   b) the travelling expenses of the members of the external panel;
   c) the subsistence costs of the members of the external panel;
   d) the formal reception given for the panel by the University; and
   e) copying and postage costs that are specifically related to the work of the external panel.
5. All activities by the departmental self-evaluation committee are paid for from departmental funds. The departments budget for this in the year before they are evaluated.
6. Tariffs (for 2011 to 2016):\(^1\)
   a) honorarium per local evaluator (for the task as a whole) is R2 633 for 2013, and which are yearly adapted with the general salary increase within the University. The honorarium for international panel members is calculated as Rand amount x 2 (Rx * 2 / the exchange rate) e.g. if the amount payable to South Africans is R1 820, the dollar amount given an exchange rate of $1=R8 would be R1820 * 2 / R8 = $455 - and/or at the discretion of the Dean;
   b) travelling expenses from outside the Western Cape: return air ticket (economy class);
   c) travelling expenses within the Western Cape: normal university tariff per km; and
   d) university reception (in accordance with the University’s rules for receptions by members of the executive management).

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\(^1\) These tariffs are reviewed yearly by the EC(S) based on advice from the QC.
11. FLOWCHART: REPORTING

A. DEPARTMENTAL EVALUATION

A. DEPARTMENT
   (self-evaluation report & executive summary)

B. EXTERNAL PANEL
   (report & executive summary)

C. DEPARTMENT
   (Written response to external report)

D. DEAN
   (comments on A, B & C)

SENATE
   (where applicable)

EC(S)
   (for finalising or referral)

QUALITY COMMITTEE
   (for recommendations)

B. FOLLOW-UP

DEAN & DEPARTMENT
   (Follow up report)

QUALITY COMMITTEE
   (for recommendations)

EC(S)
   (for finalising)

feedback via Dean

feedback via the Dean