

UNIVERSITY OF THE FREE STATE UNIVERSITEIT VAN DIE VRYSTAAT YUNIVESITHI YA FREISTATA

# **University of the Free State**

# Planning for upcoming

Institutional Audit

Compiled by DIRAP

June 2021

Updated 26 September 2021 / 25 October 2021 / 23 November 2021 / 12 January 2022 / 8 February 2022

# Contents

1	INTRO	DUCTION
2	STEER	ING COMMITTEES
	INSTITU	TIONAL STEERING COMMITTEE
	FACULT	Y OF HUMANITIES
	FACULT	Y OF NATURAL AND AGRICULTURAL SCIENCES
	FACULT	Y OF LAW
	FACULT	Y OF ECONOMIC AND MANAGEMENT SCIENCES
	FACULT	Y OF HEALTH SCIENCES
	FACULT	Y OF EDUCATION
	FACULT	Y OF THEOLOGY AND RELIGION
3	TORS F	FOR STEERING COMMITTEES
	INSTITU	TIONAL AUDIT STEERING COMMITTEE
	FACULT	Y QUALITY STEERING COMMITTEES
4	SCOPE	
	UFS QA	A POLICY
	INTEGR/	ATED QA FRAMEWORK
	Guideli	NES
	PQM RE	EVISION MANUAL AND PROCESS
		E EVALUATION AND HIGH-RISK MODULE
5		CT PLAN AND TIMELINES
6	SER CO	DMMITTEE
7		PROACH
8		YOUT
-		ORD BY THE VICE-CHANCELLOR
		ACRONYMS
		JCTION
1.	-	RATION OF THE SELF-EVALUATION REPORT
2.		UTIONAL PROFILE
3.		CTION ON THE 16 STANDARDS
4.		LL REFLECTION ON PROCESS AND OUTCOME
5.		OLIO OF EVIDENCE
0.		
СНА	PTER 1:	QUALITY GOVERNANCE FOR EFFECTIVE SUPPORT OF CORE ACADEMIC
		FUNCTIONS
CHA	PTER 2:	DESIGNING AND IMPLEMENTING THE UFS IQMS FOR QUALITY LEARNING,
		TEACHING AND RESEARCH, AND INTEGRATED COMMUNITY ENGAGEMENT
		WITHIN THE CONTEXT OF THE INSTITUTION'S MISSION
CHA	PTER 3:	
~		INTEGRATED IQMS
СНА	PIER 4:	ENHANCING STUDENT SUCCESS AND THE SCHOLARSHIP OF TEACHING AND LEARNING THROUGH THE IQMS
9	PROCE	SS
		LE OF A LETTER OF ENGAGEMENT
10		

# **1** INTRODUCTION

This report is in response to the upcoming institutional audit and the required preparation. It covers all aspects of the audit and will be consulted with the CHE.

It is important to note that the project's scope will be based on the past five years, representing the UFS in its current context.

# 2 STEERING COMMITTEES

#### INSTITUTIONAL STEERING COMMITTEE

The following members of the steering committee have been presented to the CHE.							
Role	Person	Position	Campus	Division	Email		
Project Sponsor:	Prof Francis Petersen	Rector and Vice-	Bfn	Rector and Vice-	petersenf@ufs.ac.za		
		Chancellor		Chancellor – UFS			
Project Owner:	Dr Engela van Staden	Vice-Rector	Bfn	Academic	vanstadenel@ufs.ac.za		
Project Leader:	Liana Griesel	Sr. Director	Bfn	DIRAP	griesell@ufs.ac.za		
Project Manager:	Dr Saretha Brüssow	-	Bfn	DIRAP	sbrussow@ufs.ac.za		

Team:	Prof Francois Strydom	Sr. Director	Bfn	CTL	strydomjf@ufs.ac.za
	Annari Muller	Deputy Director	Bfn	Office of Dean: EMS	mullera1@ufs.ac.za
	Dr Bawinile Mthanti	Deputy Director	Bfn	Office of Dean: EDU	mthantibj@ufs.ac.za
	Dr Annali Fichardt	Academic	Bfn	School of Nursing	fichardtae@ufs.ac.za
	Dr Corlia Janse v	HoD	Bfn	School of HRS	jansevanvuurenec@ufs.a
	Vuuren				c.za
	Dr Lynette vd Merwe	Academic/ Head	Bfn	School of Medicine	merwelj@ufs.ac.za
	Dr Jacques Matthee	Academic/ TLM	Bfn	Private Law	mattheejl@ufs.ac.za
	Elzmarie Oosthuizen	Deputy	Bfn	Office of Dean: NAS	oosthuizenem@ufs.ac.za
		Director/TLM			
	Dr Rosaline Sebolao	Dep. Director/TLM	Bfn	Office of Dean: HUM	sebolaorr@ufs.ac.za
	Dr Maria Madiope	Campus	South	South Campus	madiopem@ufs.ac.za
		Principal			
	Prof Pearl Sithole	Vice Principal	Qwaqwa	Academic and	mondisemp@ufs.ac.za
				Research	
	Geraldine Meyers	Asst. Director	South	South Campus	meyersgj@ufs.ac.za
	Dr Martin Mandew	Campus	Qwaqwa	Qwaqwa Campus	mandewmdpa@ufs.ac.za
		Principal			
	Mohau Nkutha	Sr. Officer	South	Quality Management	nkutham@ufs.ac.za
				and Accreditation Unit	
	Siphokazi Dlwati	Chief Officer	Bfn	CTL	dlwatis@ufs.ac.za
	Susan van Jaarsveldt	Sr. Director	Bfn	Human Resource	vjaarsj@ufs.ac.za
	Chris Liebenberg	Sr. Director	Bfn	Finance	liebenbergcr@ufs.ac.za
	Dr Vic Coetzee	Sr. Director	Bfn	ICTS	coetzeerv@ufs.ac.za
	Anban Naidoo	Deputy Registrar	Bfn	Student Academic	naidooa@ufs.ac.za
				Services	
	Glen Taylor	Sr. Director	Bfn	Research Development	taylorgj@ufs.ac.za
	Lacea Loader	Director	Bfn	Communication and	loaderl@ufs.ac.za
				Marketing	
	Reitumetse Mofana	Officer	Bfn	Academic Planning	mofanar@ufs.ac.za
	Kearabetswe Mablane	Sr Ass officer	Bfn	Academic Planning	mablanekt@ufs.ac.za

Kgalalelo Leeuw	Officer	Bfn	Academic Planning	leeuwk1@ufs.ac.za
Dr Luyanda Marhaya	Director: AP	Bfn	Academic Planning	marhayal@ufs.ac.za
Jemina Gopane	Chief Officer: AP	Bfn	Academic Planning	gopanekj@ufs.ac.za
Elsie van Tonder	Chief Officer: AP	Bfn	Academic Planning	vantonderem@ufs.ac.za

Support:	Jacques Botha (Data)	Director	Bfn	IIS	rsjb@ufs.ac.za
	Evan Witten	Chief Officer	Bfn	IIS	wittenec@ufs.ac.za
	Lise Kriel (IR)	Director	Bfn	MIR	kriell@ufs.ac.za
	Joyce Malebo	Secretary	Bfn	DIRAP	maleborj@ufs.ac.za
	(Secretariat)				
Two researchers	Dr Jeanette Botha	Researcher	Bfn	DIRAP	jeanette.clair@gmail.co
					m
	Dr Maroyi	Researcher	Bfn	DIRAP	willmaroyi@gmail.com
	Mulumeoderhwa				

IIS – Institutional Information Systems / MIR – Monitoring and Institutional Research

## **FACULTY OF HUMANITIES**

The table below presents the Faculty of Humanities steering committee members.

Project Leader:	Prof Heidi Hudson	Dean	Bfn	Office of Dean	hudsonh@ufs.ac.za
Project Manager:	Dr Rosaline Sebolao	TLM	Bfn	Office of Dean	sebolaorr@ufs.ac.za

Team:	Anchen Froneman	Academic	Bfn	Odeion School of Music	fronemana@ufs.ac.za
	Thys Heydenrych	Academic	Bfn	Drama and Theatre	heydenrychm@ufs.ac.za
	Dr Jacques Jordaan	Academic	Bfn	Psychology	jordaanj1@ufs.ac.za
	Nontombi Velelo	Academic	Bfn	Sociology	velelonl@ufs.ac.za
	Dr Matthew Cronje	Academic	Bfn	Criminology	cronjem3@ufs.ac.za
	Grey Magaiza	Academic	Qwaqwa	Sociology	magaizag@ufs.ac.za
	Dr Alta Grobbelaar	Academic	Bfn	Political Studies and	grobbelaara1@ufs.ac.za
				Governance	
	Dr Munyaradzi	Academic	Bfn	Centre for Gender &	mushongam@ufs.ac.za
	Mushonga			Africa Studies	
	Dr Nadine Lake	Academic	Bfn		lakenc@ufs.ac.za
	Dr Merlene Esau	Academic	Bfn	Social Work	esaumc@ufs.ac.za
	Eldalize Kruger				krugere@ufs.ac.za
	Dr Tania Coetzee	Academic	Bfn	Political Studies and Governance	coetzeet@ufs.ac.za
	Dr Willemien Marais	Academic	Bfn	Communication Science	maraisw@ufs.ac.za
	Dr Marlie Van Rooyen	Academic	Bfn	Linguistics and Language Practice	vanrooyenm1@ufs.ac.za
	Jaco Spies	Academic	Bfn	Fine Arts	spiestij@ufs.ac.za

Support:	Jacques Botha (Data)	Director	Bfn	IIS	rsjb@ufs.ac.za
	Evan Witten (Portal)	Chief Officer	Bfn	IIS	wittenec@ufs.ac.za
	Marica Coetzee	Asst. Director/	Bfn	Office of Dean	coetseem@ufs.ac.za
		Secretary			

# FACULTY OF NATURAL AND AGRICULTURAL SCIENCES

Prof Danie Vermeulen

Elzmarie Oostuizen

Team:	Prof Aliza le Roux	Asst. Dean	Qwaqwa	Office of Dean	lerouxa3@ufs.ac.za
	Prof Edilegnaw Wale	Academic	Bfn	Agricultural Economics	zegeyeew@ufs.ac.za
	Zegeye			-	
	Dr Sandy Steenhuizen	Subject Head	Qwaqwa	Plant Sciences	steenhuisens@ufs.ac.za
	Prof Liesl van As	ADH	Bfn	Zoology and Entomology	vanasll@ufs.ac.za
	Prof Richard Ocaya	Programme Director	Qwaqwa	Physics	ocayaro@ufs.ac.za
	Prof Samuel Adelabu	ADH	Bfn	Geology	adelabusa@ufs.ac.za
	Prof Angelinus Franke	ADH	Bfn	Soil Crop and Climate	frankeac@ufs.ac.za
	Prof Verna Nel	Academic	Bfn	Urban and Regional Planning	nelvj@ufs.ac.za
	Dr Michael von Maltitz	Programme Director	Bfn	Mathematical Statistics	vmaltitzmj@ufs.ac.za
	Dr Frans O'Neill	Programme Director	Bfn	Microbiology & Biochemistry	oneillfh@ufs.ac.za
	Dr Rina Meintjes	Programme Coordinator	South	Chemistry	meintjr@ufs.ac.za
	Dr Johannes Belle	ADH	Bfn	DIMTEC	belleja@ufs.ac.za
	Prof Liezel Nel	Academic	Bfn	Computer Science	nell@ufs.ac.za
	Dr Daniel Ofori Kusi	Subject Head	Qwaqwa	Mathematics	oforikusid@ufs.ac.za
	Dr Christopher Amoah	Academic	Bfn	Quantity Surveying and CM	amoahc@ufs.ac.za
	Madeline Barnard	Secretary	Bfn	Office of Dean	barnardm2@ufs.ac.za

Bfn

Bfn

Office of Dean

Office of Dean

vermeulend@ufs.ac.za

oosthuizenem@ufs.ac.za

The table below presents the Faculty of Natural and Agricultural Sciences steering committee members. Dean

TLM

Support:	Jacques Botha (Data)	Director	Bfn	IIS	rsjb@ufs.ac.za
	Evan Witten (Portal)	Chief Officer	Bfn	IIS	wittenec@ufs.ac.za

# FACULTY OF LAW

Project Leader:

Project Manager:

The table below presents the Faculty of Education steering committee members.

Project Leader:	Prof John Mubangizi	Dean	Bfn	Office of Dean	mubangizijc@ufs.ac.za
Project	Dr Jacques Mattee	TLM	Bfn	Office of Dean	mattheejl@ufs.ac.za
Manager:					

Team:	Prof Karin Van Marle	Vice Dean	Bfn	Office of Dean	vanmarlek@ufs.ac.za
	Ms Martie Bfn	Academic	Bfn	Private Law	bloemm@ufs.ac.za
	Dr Isolde De Villiers	Academic	Bfn	Mercantile Law	devilliersi@ufs.ac.za
	Mr Sakkie Muller	Academic	Bfn	Public Law	mullerec@ufs.ac.za
	Dr Prince Sarpong	Academic	Bfn	Financial Planning Law	sarpongpk@ufs.ac.za
	Mr Simba Tavuyanago	Academic	Bfn	Mercantile Law	tavuyanagos@ufs.ac.za
	Mr Vernol Van der	Secretary	Bfn	Office of Dean	vanderrossrv@ufs.ac.za
	Ross				

Support:	Jacques Botha (Data)	Director	Bfn	IIS	rsjb@ufs.ac.za
	Evan Witten (Portal)	Chief Officer	Bfn	IIS	wittenec@ufs.ac.za

# FACULTY OF ECONOMIC AND MANAGEMENT SCIENCES

Prof Hendri Kroukamp

Project	Annari Muller	TLM	Bfn	Office of Dean	mullera1@ufs.ac.za
Manager:					
Team:	Prof Frans Prinsloo	HoD	Bfn	SoA	prinsloofe@ufs.ac.za
	Mr Lyle Markham	Academic	Bfn	Industrial Psychology	markhamlg@ufs.ac.za
Dr L	Dr Lyndon du Plessis	Academic	Bfn	Public Administration and Management	dplesslm@ufs.ac.za
	Dr Liezel Massyn	Academic	Bfn	Business School	massynl@ufs.ac.za
Drt	Dr Deidré van Rooyen	Department head	Bfn	CDS	griesd@ufs.ac.za
	Dr Nico Keyser	Academic	Bfn	Economics and Finance	keyserjn@ufs.ac.za
	Ms Haneke van Zyl	Academic	Bfn	SoA	vanzylha@ufs.ac.za
	Prof Hentie van Wyk	Academic	Bfn	SoA	vanwykha@ufs.ac.za
	Prof Brownhilder	Associate	Bfn	Business Management	nenehbn@ufs.ac.za

Bfn

Office of Dean

Asst. Dean

kroukhj@ufs.ac.za

mudzingiric@ufs.ac.za

The table below presents the Faculty of Economic and Management Sciences steering committee members.

Dean

Professor

Asst. Dean

Support:	Jacques Botha (Data)	Director	Bfn	IIS	rsjb@ufs.ac.za
	Evan Witten (Portal)	Chief Officer	Bfn	IIS	wittenec@ufs.ac.za

Qwaqwa

#### FACULTY OF HEALTH SCIENCES

Neneh

Dr Calvin Mdudzingiri

Project Leader:

The table below presents the Faculty of Health Sciences steering committee members.

Project Leader:	Prof Gert van Zyl	Dean	Bfn	Office of Dean	vanzylgj@ufs.ac.za
Project	Prof Corlia Janse v	TLM	Bfn	Office of Dean	jansevanvuurenec@ufs.
Manager:	Vuuren				ac.za
	Dr Lynette van der	Academic/	Bfn	Support School of	merwelj@ufs.ac.za
	Merwe	Head		Medicine	
	Dr Annali Fichardt	Academic	Bfn	School of Nursing	fichardtae@ufs.ac.za

Team:	Marlene Viljoen	Deputy Director	Bfn	Administration FHS	viljoenma@ufs.ac.za
	Prof Chris Viljoen	Professor	Bfn	School of Biomedical	viljoencd@ufs.ac.za
				Sciences	
	Dr Freek du Plessis	Director	Bfn	Medical Physics	duplessisfcp@ufs.ac.za
	Prof Hannes Steinberg	Associate	Bfn	Family Medicine	steinbergwj@ufs.ac.za
		Professor			
	Dr Walter Janse Van	Academic	Bfn	Haematology and Cell	jansevrwj@ufs.ac.za
	Rensburg			Biology	

Support:	Jacques Botha (Data)	Director	Bfn	IIS	rsjb@ufs.ac.za
	Evan Witten (Portal)	Chief Officer	Bfn	IIS	wittenec@ufs.ac.za
	Lerato Mokuoane	Sr. Asst. Officer	Bfn		mokuoanemla@ufs.ac.za
	(secretariat) (FHS)				

# FACULTY OF EDUCATION

The table below presents the Faculty of Education steering committee members.	
---	--

Project Leader:	Prof Loyiso Jita	Dean	Bfn	Office of Dean	jitalc@ufs.ac.za
Project Manager:	Dr Bawinile Mthanti	TLM	Bfn	Office of Dean	mthantibj@ufs.ac.za

Team:	Prof P Mafora	Vice-Dean	Bfn	Office of Dean	maforap@ufs.ac.za
	Dr C. Tsotetsi	Asst. Dean	Qwaqwa	Office of Dean	tsotetsict@ufs.ac.za
	Dr LM Makhalemele	Acting Faculty	Bfn	Office of Dean	makhalemelelm@ufs.ac.
		Manager			za
	Dr M. Tsakeni	Sr. Lecturer	Qwaqwa	Mathematics, Natural Sciences and	tsakenim@ufs.ac.za
				Technology Education	
	Dr HJ Nichols	Lecturer	Qwaqwa	School of Educational Studies	nicholshj@ufs.ac.za
	Ms SL Baloyi-Mothibeli	Lecturer	Bfn	School of Social Sciences, Languages and Higher Education	baloyimothibelisl@ufs.ac .za
	Ms SK Motaung	Sr. Marketing Officer	Bfn	Office of Dean	motaungsk@ufs.ac.za
	Baartman C	Administrator	Bfn	Office of Dean	baartmanch@ufs.ac.za
	Dr T Mafugu	Lecturer	Qwaqwa	School of Mathematics, Natural Sciences and Technology Education	mafugut@ufs.ac.za
	Prof MM Mokhele- Makgalwa	Director: Research and Postgraduate Studies	Bfn	Research and Postgraduate Studies	mokheleml@ufs.ac.za
	Mr L Motaung	TLC	Bfn	CTL/TL Unit	motaunglb@ufs.ac.za

Support:	Jacques Botha (Data)	Director	Bfn	IIS	rsjb@ufs.ac.za
	Evan Witten (Portal)	Chief Officer	Bfn	IIS	wittenec@ufs.ac.za

# FACULTY OF THEOLOGY AND RELIGION

The table below presents the Faculty of Education steering committee members.

Project Leader:	Prof Rantoa Letsosa	Dean	Bfn	Office of Dean	letsosar@ufs.ac.za
Project Manager:	Rev Marlene	Programme	Bfn	Office of Dean	moosthuizen@ufs.ac.za
	Oosthuizen	Director			

Team:	Siphokazi Dlwati	TLM	Bfn	Office of Dean	dlwatis@ufs.ac.za
	Dr Henco Van Der	Academic	Bfn	Historical and	vanderwesthuizenhc@uf
	Westhuizen			Constructive Theology	s.ac.za
	Dr Lodewyk Sutton	Academic	Bfn	Old and New Testament Studies	suttonl@ufs.ac.za
	Prof Jan-Albert Van Den Berg	Academic	Bfn	Practical and Missional Theology	vdbergja@ufs.ac.za
	Prof Pieter Verster	Academic	Bfn	Biblical and Religious Studies	versterp@ufs.ac.za
	Mrs Ingrid Mostert	Faculty Manager	Bfn	Office of Dean	mostertie@ufs.ac.za
	Mrs Samantha Baron	Secretary	Bfn	Office of Dean	baronsmi@ufs.ac.za

Support:	Jacques Botha (Data)	Director	Bfn	IIS	rsjb@ufs.ac.za
	Evan Witten (Portal)	Chief Officer	Bfn	IIS	wittenec@ufs.ac.za

# **3** TORS FOR STEERING COMMITTEES

#### INSTITUTIONAL AUDIT STEERING COMMITTEE

# **TERMS OF REFERENCE**

# Institutional Audit Steering Committee

# Composition

Project Sponsor: Project Leader: Project Manager: Team:	Prof Francis Petersen Dr Engela van Staden Liana Griesel Dr Saretha Brussow Prof Francois Strydom Annari Muller Dr Bawinile Mthanti Dr Annali Fichardt Dr Corlia Janse van Vuuren Dr Lynette van der Merwe Dr Jacques Matthee Elzmarie Oosthuizen Dr Rosaline Sebolao Dr Maria Madiope Prof Pearl Sithole Geraldine Meyers Dr Martin Mandew Mohau Nkutha Siphokazi Dlwati Reitumetse Mofana Kearabetswe Mablane Kgalalelo Leeuw Susan van Jaarsveldt Chris Liebenberg Dr Vic Coetzee Anban Naidoo Glen Taylor Lacea Loader Dr Luyanda Marhaya Jemina Gopane Elsie Van Tonder
Support:	Jacques Botha (Data)

	Evan Witten
	Lise Kriel (IR)
	Joyce Malebo (Secretariat)
Two researchers:	Dr Jeanette Botha
	Dr Maroyi Mulumeoderhwa

## Office bearers

#### Chairperson and deputy chairperson

The Vice-Rector Academic is the chairperson. A deputy chairperson is the Sr. Director of Institutional Research and Academic Planning

#### Secretary

DIRAP renders secretarial support to the Steering Committee

#### **Functions of the Office Bearers**

#### Chairperson

- 1. The chairperson convenes and presides over meetings.
- 2. The chairperson performs such additional functions that may be determined by the Committee.

#### **Deputy chairperson**

- 1. In the absence of the chairperson, the deputy chairperson convenes and presides over meetings.
- 2. The deputy chairperson performs such additional functions that may be determined by the Committee.

#### Secretary

DIRAP is responsible to:

- 1. Compile an agenda for each meeting;
- 2. Distribute the agenda and all relevant documents to all members of the Committee at least five working days before the meeting;
- 3. Keep minutes of each meeting of the Committee; and
- 4. perform such additional functions that may be determined by the Committee.

# Functions of the Committee

The Steering Committee is responsible for:

- 1. Oversight, coordination and monitoring of the development of the SER and the quality assurance of the content
- 2. Attend capacity building workshop arranged by CHE
- 3. Engaged with the CHE documents and provide inputs
- 4. Act as the face of the Institutional Audit at Institutional, Faculty and Campus levels
- 5. Participate in roadshows to build capacity towards the audit
- 6. Review the audit schedule and assist during the audit
- 7. Review the audit findings and respond to the recommendations
- 8. Devise an implementation plan

The Steering Committee is a subcommittee of the Academic Committee and reports directly to the Vice-Rector Academic

# Meetings

- 1. The Committee meets at least once a week
- 2. A quorum is half of the members of the Committee plus one.

# FACULTY QUALITY STEERING COMMITTEES

# TERMS OF REFERENCE

# Faculty Quality Steering Committee

# Composition

As per section two

## **Office bearers**

# Chairperson and deputy chairperson

- 1. The Dean is the chairperson.
- 2. A deputy chairperson is the Faculty Manager or Teaching and Learning Manager

## Secretary

Office of the Dean

# **Functions of the Office Bearers**

# Chairperson

- 1. The chairperson convenes and presides over meetings.
- 2. The chairperson performs such additional functions that may be determined by the Committee.

# Deputy chairperson

- 1. In the absence of the chairperson, the deputy chairperson convenes and presides over meetings.
- 2. The deputy chairperson performs such additional functions that may be determined by the Committee.

# Secretary

The office of the Dean is responsible to:

- 1. compile an agenda for each meeting;
- 2. distribute the agenda and all relevant documents to all members of the Committee at least five working days before the meeting;
- 3. keep minutes of each meeting of the Committee; and
- 4. perform such additional functions that may be determined by the Committee.

# Functions of the Committee

The Steering Committee is responsible for:

- 1. Oversight, coordination and monitoring of the development of the SER and the quality assurance of the content
- 2. Attend capacity building workshop arranged by CHE
- 3. Engaged with the CHE documents and provide inputs
- 4. Act as the face of the Institutional Audit at Institutional, Faculty and Campus levels
- 5. Participate in roadshows to build capacity towards the audit
- 6. Review the audit schedule and assist during the audit
- 7. Review the audit findings and respond to the recommendations
- 8. Devise an implementation plan

The Steering Committee is a subcommittee of the Institutional Audit Committee and reports directly to the Vice-Rector Academic

# Meetings

- 1. The faculty committee will meet at least once a week or as determined by the faculty (approved at SteerCom).
- 2. A quorum is half of the members of the Committee plus one.

# 4 SCOPE

The audit scope will be on the **past five years' (2016-2020 Reporting Audited Data 2021 Operational Data)** quality assurance arrangements and processes of the UFS, with a strong focus on undergraduate teaching and learning and assessment. Key documents will play a vital role in UFS maturity and self-accreditation.

# UFS QA POLICY

We have to build on the 2009 Policy and amend it to express the philosophy applied during the past few years. This will protect the university against policy drift and tension

#### INTEGRATED **QA** FRAMEWORK

## **Revision and alignment are needed - Completed**

#### GUIDELINES

We need to stake stock of the guideline documents that inform quality

- a) Guidelines on External Reviews
- b) Assessment Guideline
- c) Guidelines for curriculum design and renewal
- d) PQM Viability

## **PQM** REVISION MANUAL AND PROCESS

The document that served at AC will be finalised and submitted

## MODULE EVALUATION AND HIGH-RISK MODULE

The document that served at AC will be finalised and submitted

Identify all analytics that will form part of the audit

# **5 PROJECT PLAN AND TIMELINES**

The UFS should aim to rather be subject to the audit at the latest possible timeslot. The plan and timelines

PROCESS	ACT NO	ACTIVITY	SUB ACTIVITIES	RESPONSIBLE PERSON	STARTING DATE	END DATE	RESOURCES
Finalise institutional audit	1.1	Finalise date of the audit visit to UFS		CHE	24 Jun 2021	24 Jun 2021	Project manager
arrangements	1.2	Finalisation of scope for the audit:		CHE	1 Jun 2021	30 Jun 2021	Project manager
	1.3	Attend CHE Audit Readiness Workshops		CHE	14 Jun 2021	30 Jun 2021	All selected staff
		Themes 1 and 2	Theme 1: Introduction to reflexive praxis as a golden thread throughout the capacity development Theme 2: The history, functions and trajectory of the CHE and institutional audits	CHE	14 Jun 2021	18 Jun 2021	All selected staff
		Themes 3 and 4	Theme 3: What is an Institutional Audit (IA)? Theme 4: IA Methodology: Self- reflection	CHE	21 Jun 2021	25 Jun 2021	All selected staff
		Themes 5 and 6	Theme 5: IA methodology: Evidence- based Theme 6: The Institutional Profile: Differentiation	CHE	28 Jun 2021	2 Jul 2021	All selected staff
		Themes 7 and 8	Theme 7: Standards and Guidelines (SGs) Theme 8: Building a SER and PoE	CHE	5 Jul 2021	9 Jul 2021	All selected staff
		First webinar:	Introduction and overview of institutional audits	CHE	9 Jul 2021	9 Jul 2021	All selected staff
		Themes 9 and 10	Theme 9: Logistics of an IA Theme 10: The Audit Report	CHE	12 Jul 2021	16 Jul 2021	All selected staff
		Second webinar	Second webinar: Reflexive praxis on Standards and Guidelines	CHE	16 Jul 2021	16 Jul 2021	All selected staff
		Themes 11 and 12	Theme 11: Improvement Plans Theme 12: Institutional Audits for PHEIs	CHE	19 Jul 2021	23 Jul 2021	All selected staff
		Third webinar	Peer review, the audit report and improvement plans	CHE	23 Jul 2021	23 Jul 2021	All selected staff
	1.4	Appointment of the HEQC audit officer and CHE contact person.		CHE	<del>24 Jun 2021</del>	<del>30 Jun 2021</del> January 2022	CHE

PROCESS	ACT NO	ACTIVITY	SUB ACTIVITIES	RESPONSIBLE PERSON	STARTING DATE	END DATE	RESOURCES
Finalise institutional governance arrangements	2.1	Finalise composition of the steering committee		DIRAP	17 May 2021	17 May 2021	All selected staff
Preparation for the SER	3.1	Finalise the layout of the SER		DIRAP	30 Jun 2021	30 Jun 2021	Project manager
	3.2	Workshop with Steercom for the demarcations		DIRAP	1 Jun 2021	30 Jun 2021	Project manager
	3.3	Demarcation of responsibilities	Foreword by the Vice-Chancellor	DIRAP	<del>30 Jun 2021</del>	<del>30 Sep 2021</del> January 2022	Project leader
			List of acronyms	DIRAP			Project Leader
			Glossary				
			Introduction	DIRAP			Project Leader
			Focus area 1 Governance, strategic planning, management and leadership support the core academic functions	DIRAP	30 June 2021	13 Aug 2021 29 Oct 2021	Researchers
			Focus area 2 The design and implementation of the institutional quality management system supports the core academic functions	Faculties, CTL, DIRAP	30 June 2021	30 Aug 2021 29 Oct 2021	Researchers
			Focus area 3: The coherence and integration of the institutional quality management system supports the core academic functions	Finance, HR, DIRAP, CTL, ICT	30 June 2021	30 Sep 2021 29 Oct 2021	Researchers
			Focus area 4 Curriculum development, learning and teaching support the likelihood of student success	Faculties, CTL, DIRAP	30 June 2021	15 Oct 2021 29 Oct 2021	Researchers
			Timeline – Finalised SER Final Outlay Proofreading Corporate Branding				
Pre-audit preparations	4.1	Attend CHE Audit Readiness Workshop	First Round Second Round	Members of the Steering comm	01 June 2021	30 Jun 2021	Project manager
	4.2	Review SER layout		DIRAP	01 June 2021	30 Jun 2021	Project manager
	4.3	Review project timelines		DIRAP	01 June 2021	30 Jun 2021	Project manager
	4.4	Roadshows (Socialising	Portfolio Academic		01 Aug 2021	20 Aug 2021	Project manager
		the audit) Must block	EMS		12 Aug 2021	12 Aug 2021	Project manager

PROCESS	ACT NO	ACTIVITY	SUB ACTIVITIES	RESPONSIBLE PERSON	STARTING DATE	END DATE	RESOURCES
		out time for August	HUM		12 Aug 2021	12 Aug 2021	Project manager
		2021	LAW		11 Aug 2021	11 Aug 2021	Project manager
			NAS		05 Aug 2021	05 Aug 2021	Project manager
		8 Groupings Proposed	FHS		12 Aug 2021	12 Aug 2021	Project manager
		- Serve on 20 July	THR		12 Aug 2021	12 Aug 2021	Project manager
		SteerCom meeting	EDU		05 Aug 2021	05 Aug 2021	Project manager
			Academic support functions portfolio	VC, Vice-Rector	16 Aug 2021	16 Aug 2021	
			Campuses	Academic, Steer			Project manager
			Qwaqwa	Comm			Project manager
			South Campus				
			Portfolio Research				Project manager
			Registrar				Project manager
			Portfolio Institutional Change, Strategic Partnerships and Societal Impact				Project manager
			Portfolio Operations				Project manager
	4.5	Follow-up Roadshows					
		Communication plan and strategy for audit IA Stakeholder Engagement Plan	Communication Institution Wide What IA Progress Survey	Project manager Communication and Marketing	<del>1 Jun 2021</del> Aug 2021	<del>10 Jun 01</del> Nov 2021 Jan-Mar 2022	Project manager Director: Communications
	4.6	Visual Capture of Facilities	Video Capturing of academic and Support Facilities	Communication and Marketing	<del>1 Jun 2021</del> Sep 2021	<del>10 Jun 01</del> Nov 2021	Director: Communications
Finalising the	5.1	Present draft 1	Foreword by the Vice-Chancellor	Researchers	30 Jul 2021	<del>30 Jul 2021</del>	Project Leader
SER			List of acronyms		30 Jul 2021	<del>30 Jul 2021</del>	Project Leader Project Manager
			Introduction		30 Jul 2021	30 Jul 2021	Project Leader
			Focus Area 1 Governance, strategic planning, management and leadership support the core academic functions		30 Jul 2021	<del>13 Aug 2021</del>	Researcher
	5.2	Sign off		Chair Steercom	30 Jul 2021	20 Aug 2021	VR Academic
	5.3	Present draft 2	Focus Area 2 The design and implementation of the institutional quality management system supports the core academic functions	Researchers	30 Aug 2021	30 Aug 2021 15 Sep 2021	Researcher / project manager
	5.4	Sign off		Steercom	30 Aug 2021	<del>30 Aug 2021</del> 30 Sep 2021	VR Academic

PROCESS	ACT NO	ACTIVITY	SUB ACTIVITIES	RESPONSIBLE PERSON	STARTING DATE	END DATE	RESOURCES
	5.5	Present draft 3	Focus Area 3: The coherence and integration of the institutional quality management system supports the core academic functions	Researchers	30 Sep 2021	<del>30 Sep 2021</del>	Researcher
	5.6	Sign off		Chair Steercom	30 Sep 2021	30 Sep 2021	VR Academic
	5.7	Present draft 4	Focus area 4 Curriculum development, learning and teaching support the likelihood of student success	Researchers	15 Oct 2021	15 Oct 2021	Researcher
	5.8	Sign off	Note Steercom meeting 12 October 2021 -postpone to next week	Steercom	<del>15 Oct 2021</del> 26 Oct 2021	<del>15 Oct 2021</del> 26 Oct 2021	VR Academic
	5.9	Finalise the SER report		Researchers	15 Oct 2021	30 Oct 2021	Researcher
		Writing retreat		Researcher and DIRAP	11 Oct 2021	15 Oct 2021	
	5.10	Commence with deep editing		Editor	16 Oct 2021	31 Oct 2021	SD DIRAP
	5.11	Submit SER to SLG/UMC		DIRAP	8 Nov 2021	8 Nov 2021	SD DIRAP
	5.12	Submit SER to ECS		DIRAP	15 Nov 2021	15 Nov 2021	SD DIRAP
	5.13	Submit SER to AC		DIRAP	18 Nov 2021	18 Nov 2021	SD DIRAP
	5.14	Submit SER to Senate		VR Academic	TBC only one 2 Nov	TBC only one 2 Nov	VR Academic
	5.15	Submit SER to Council		VC	<del>TBC</del> 26 Nov 2021	<del>TBC</del> 26 Nov 2021	VR Academic
Submission of SER to CHE	6.1	Submission of SER to CHE		VC	14 Jan 2022	14 Jan 2022	Rector and VC
Prearrangements and documentation management for	7.1	Collation of Portfolio of Evidence	DIRAP devise PoE Dedicated Website Hyperlinks Final – SER to Panel • Create – SolveIT ICT	Project Manager	15 Jun 2021 15 Sep 2021	<del>30 Jul 2021</del> Nov 2021 1 Dec 2021	DIRAP Faculties Registrar Meeting
the site visit			Liaise with M & Comm				Administration Support Units
Stakeholder Engagement	7.2	Develop IA Stakeholder Engagement	Schedule engagement and information briefings	Project Manager	21 Jan 2022	09 Feb 22	UFS Steering Committee
HEQC site visit	8.1	The programme and schedule for the site visit shall be finalised a	The CHE shall be responsible for the travel, accommodation, subsistence and any other	CHE	9 May 2022	13 May 2022.	CHE

PROCESS	ACT NO	ACTIVITY	SUB ACTIVITIES	RESPONSIBLE PERSON	STARTING DATE	END DATE	RESOURCES
Each Party agrees to		month in advance of the site	associated costs for panel members, within its budgetary constraints				
undertake the process with rigour and		visit.	Appointment of secretarial and administrative support	CHE			CHE
commitment within the bounds of the integrity, confidentiality, collegiality and ethical considerations, including but not limited to the description in the Manual for Institutional Audits, Chapter 12.			UFS to manage all other logistical arrangements, including reasonable electronic and communications support to the CHE the delegation during the site visit	Project Manager			UFS Steering Committee
Draft Audit report	9.1	Receive the draft audit report	The CHE shall provide the draft audit report to the institution no later than three months after the site visit.		13 Aug 2022	13 Aug 2022	CHE
Final Audit report		Receive the final audit report	The CHE shall provide the final audit report to the institution no later than three months after the draft audit report was returned to the CHE	CHE	13 Aug 2022	13 Aug 2022	CHE
Institutional improvement plan	10.1	To be finalised after the audit		DIRAP	TBC	TBC	

# 6 SER COMMITTEE

During its inaugural meeting of the Steering Committee, the following members were identified to assist the Researchers in compiling the SER.

Prof F Strydom; Ms L Griesel; Dr S Brüssow; Mr J Botha; Ms L Kriel; Prof P Sithole; Mr Evan Witten and Researchers: Dr M Mulumeoderhwa and Dr Jeanette Botha.

# 7 SER APPROACH

The approach UFS will follow to devise the SER will be a hybrid model and finalised after the first engagement with the HEQC. A combination of the three approaches will be followed:

Standard approach	Identify four lead writers per focus areas
Institutional approach	Bottom-up approach Faculties and support departments make submission per standards
Review and evidence lead approach	Take all extremal reviews to date and align with news focus areas and standards to obtain an institutional position

# 8 SER LAYOUT

In preparation for the engagement with the HEQC, the UFS will probably look at the following layout

FOREWORD BY THE VICE-CHANCELLOR LIST OF ACRONYMS INTRODUCTION Note: On receiving the SER Template from the CHE, the SteerCom meeting dated 14 September 2021 approved the new proposed SER layout. The layout is directly aligned with the template, see summary below. Amendments and restructuring of content follow.

# SUMMARY OF PROPOSAL:

- 1. PREPARATION OF THE SELF-EVALUATION REPORT
- 2. INSTITUTIONAL PROFILE
- 3. REFLECTION ON THE 16 STANDARDS\*
- 4. **OVERALL REFLECTION ON PROCESS AND OUTCOME**
- 5. PORTFOLIO OF EVIDENCE
- \* The SER standards reflection will comprise 4 Chapters based on the four focus areas. The entire SER should in total not exceed 100 pages. Each chapter will cover 4 standards that have guidelines (renamed checklist).

# **S**UGGESTED **T**ITLES:

- Chapter 1: Quality Governance for Effective Support of Core Academic Functions
- Chapter 2: Designing and Implementing the UFS IQMS for Quality Learning, Teaching and Research, and Integrated Community Engagement within the Context of the Institution's Vision
- Chapter 3: Supporting Core Academic Functions Through a Coherent and Integrated IQMS
- Chapter 4: Enhancing Student Success and the Scholarship of Teaching and Learning through the IQMS

# 1. **PREPARATION OF THE SELF-EVALUATION REPORT**

Please describe the **process involved** in the preparation of the self-evaluation report, including details of any meetings and workshops that accompanied the drafting, the range of participatory involvement (formal entities, *ad hoc* groups, etc.), and the process of formal institutional approval.

# 2. INSTITUTIONAL PROFILE

Description of the institution's history and context. This must include a narrative on the vision, mission and goals of the institution.

The institutional profile could provide information on the following components for a snapshot year as brief introduction to the institution: Most recent registered student headcount, presented with reference to:

- a. Faculty
- b. Race (African, Coloured, White, Indian)
- c. Gender (male, female, other)
- d. Home language(s)
- e. Nationality
- f. Quintile school background
- g. Student accommodation (residence; institutional oversight; private);
- 2. Organisational structure, name and number of faculties/colleges, schools, departments, units, academic support structures; organogram with hyperlinks.
- 3. Staff headcount (managerial, academic, academic support, service support), as well as the employment equity profile;
- 4. Student throughput and completion rates per year of first registration and per programme;
- 5. Academic staff/student weighted ratio;
- 6. Infrastructure capacity;
- 7. Research performance and impact; and
- 8. Community engagement projects and reach.

# 3. **REFLECTION ON THE 16 STANDARDS**

(This will comprise the 4 Chapters set out below)

Please provide an evidence-based description of how the institution meets each of the standards for institutional audits. The responses must take into account the specific guidelines contained in the *Manual for Institutional Audits 2021* (pages 13-24), with respect to each of the standards and their guidelines.

Please note that the Guidelines are intended to assist institutions to interpret the Standards and direct responses are not required for each and every one of the Guidelines. The outcomes of the institutional audit are based on the 16 Standards.

Guideline 13.4 is the only Guideline that needs a specific response. The focus of this reflection should be on the institution's response to the emergency arrangements during 2020 for the pandemic and plans for learning, teaching and assessment going forward form 2021 onwards.

For each one of the 16 standards (repeated at the end for convenience), please include a self-evaluation of the extent to which the institution meets or exceeds the standard. In so doing, keep in mind the following yardsticks, which are located within a fitness of purpose framework based on differentiation in the higher education system:

- (i) your institution's *fitness for purpose*
- (ii) the value for money it provides to its students and other stakeholders, and
- (iii) its capacity for and success with transformation.

The following guiding questions may be used:

- What goals are the institution trying to achieve?
- How is it trying to achieve these goals?
- What plans, procedures and resources are designed to achieve these goals?
- How is the implementation of the plans of procedures managed?
- How does the institution monitor and evaluate that is has achieved its goals?
- What plans are already in place for improvement?

# 4. OVERALL REFLECTION ON PROCESS AND OUTCOME

Provide an overall short narrative on the process and outcomes of the self-evaluation report.

# 5. PORTFOLIO OF EVIDENCE

The portfolio of evidence should not be submitted as separate documents. Hyperlinks to supporting documents should be provided in the text of the SER to a single cloud-based repository.

- Supporting evidence related to the Standards to demonstrate how quality is managed (design, implementation, and M&E, and measuring impact, closing the quality loop)
- Information can only be regarded as *evidence* if it is used to substantiate statements or judgements, inclusive of the self-evaluation
- There should be a direct link between the narrative text in the SER and the PoE to support it (in-text hyperlinks may be best to achieve this)
- Both quantitative and qualitative information/evidence
- 1. The *vision, mission and goals*, a description of the institution's context and a brief statement on when and how these documents were established and approved, and how regularly they are revised
- 2. The institution's *strategic plan, operational plans and annual performance plans* and a brief statement on when and how these documents are established, revised and approved as well as a description of how they are implemented in support of quality

management

- 3. The institution's most recent DHET-approved *programme and qualification mix* or *registration certificate*.
- 4. A description of the *process followed to conduct the institutional self-evaluation* (role and responsibilities of the steering group; how information was collected; involvement of stakeholders, especially staff and students)
- 5. Design, implementation, M&E, measuring impact, closing the quality loop with improvement plans, adjustments, change management
- 6. For example, a policy, an implementation plan, evidence of actual implementation (for example in modules, programmes, departments and faculties), evidence of monitoring and evaluation of the policy and its impact, evidence of reflection, and evidence of adjusting the policy and implementation (for example, by providing more resources) based on the monitoring, evaluation and reflection.

# Basic elements which should be covered the <u>PoE:</u>

To be covered by policies, implementation plans, evidence of actual implementation (for example in modules, programmes, departments and faculties), evidence of monitoring and evaluation of the policy and its impact, evidence of reflection, and evidence of adjusting the policy and implementation (for example, by providing more resources) based on the monitoring, evaluation and reflection.

# For teaching and learning at undergraduate and postgraduate level

- a. Enrolment planning, recruitment and (re-)admission of students, including credit accumulation and transfer (CAT) and articulation; <u>(please note that special attention will be focused on articulation policies and practices)</u>
- b. Design and development of curricula and learning materials;
- c. Delivery of all aspects of learning, teaching, and assessment, including learning material, Work-Integrated Learning (WIL) and curricular community engagement, as well as the mode of provision (e.g. contact, blended, fully online, distance, etc.); (please note that special attention will be focused on WIL policies and practices, as well as mode of provision, especially during 2020 and 2021)
- d. Integrated academic support, such as academic orientation, tutoring and advising;
- e. Student support and related psycho-social services for the holistic well-being, safety and security of students (including, for example, mentoring and counselling, opportunities for social-, cultural- and sporting engagement, where relevant); (please note that special attention will be focused on GBV policies and practices)
- f. Appropriately conceived student governance structures that function;
- g. Mechanisms for student appeals and complaints at various levels of the institution;
- h. Mechanisms for evaluating student satisfaction and the student experience;
- i. Student assessment, including internal moderation and external examination;
- j. Procedures for appointing internal and external examiners;
- k. Certification of qualifications;
- I. Offering of short courses and part-qualifications;

# For research

- a. The development and support of researchers at various levels in the academic career path, including the use of reward structures;
- b. The inclusion of research ethics as part of the programme;
- c. The evaluation and impact of the research output, using quantitative and qualitative performance measures;
- d. Research supervision is *not* being covered in this round of audits due to the recent National Review (NR) of the doctoral qualification. Once the NR process has been completed, postgraduate supervision will be re-introduced into institutional audits.

# For community engagement

- a. Philosophy, scope, and purpose of the institution's social engagement with the community;
- b. Compliance with the legislative environment in working with vulnerable communities;
- c. The ethics of the engagement and the protection of communities from exploitation by researchers;
- d. Safety and security for staff, students, and the community;
- e. The impact and sustainability of the community engagement.

# For quality assurance

- a. The use of self-reflection and improvement plans following previous external quality assurance activities (where relevant) such as CHE audits, the QEP process and HEQC decisions regarding accreditation and national reviews;
- b. Internal quality assurance plans, processes, reports, reviews, self-reflection, and improvement plans.

**For each one of the 16 standards** (repeated at the end for convenience), please include a self-evaluation of the extent to which the institution meets or exceeds the standard. In so doing, keep in mind the following yardsticks, which are located within a fitness of purpose framework based on differentiation in the higher education system:

- your institution's fitness for purpose
- the value for money it provides to its students and other stakeholders, and
- its capacity for and success with *transformation*.

The following guiding questions may be used:

- What goals are the institution trying to achieve?
- How is it trying to achieve these goals?
- What plans, procedures and resources are designed to achieve these goals?
- How is the implementation of the plans of procedures managed?
- How does the institution monitor and evaluate that is has achieved its goals?
- What plans are already in place for improvement?

The SER standards reflection will comprise 4 Chapters based on the four focus areas. The entire SER should in total not exceed 100 pages. Each chapter will cover 4 standards that have guidelines (renamed checklist) so that we ensure that we cover the bases. These are not cast in stone, but the panel will expect the majority to be covered.

# Focus area 1: Governance, strategic planning, management and leadership support the core academic functions

The four standards in Focus Area 1 concentrate on the role that an institution's *governance, strategic planning* (as contained in its *vision, mission and strategic goals), management and academic leadership* play in its quality management in order to enhance the likelihood of student success and to improve the quality of learning, teaching and research engagement, as well as accommodating the results of constructive, integrated community engagement. These standards are:

# Standard 1: Stated Vision and Mission, and Strategic Goals

The institution has a clearly stated vision and mission, and strategic goals that have been approved by appropriate governance structures, subject to comprehensive stakeholder engagement.

(The *vision, mission and goals*, a description of the institution's context and a brief statement on when and how these documents were established and approved, and how regularly they are revised.)

Checklist for Standard 1:

- 1.1 The vision, mission and goals of the institution are clearly and concisely formulated.
- 1.2 The vision, mission and goals inform a shared understanding between the institution and its stakeholders, based on demonstrable and comprehensive engagement with appropriate categories of stakeholders.
- 1.3 The vision, mission and goals have been approved by the institution's highest decision-making authority and are regularly reviewed.
- 1.4 The vision, mission and goals are translated into an appropriate and aligned business model and value proposition, with due consideration for the academic and quality risks to the institution.
- 1.5 It is acknowledged that institutions are differentiated in terms of their mission and niche areas; this standard therefore provides for the contextual setting for the institutional differentiation within the other focus areas and standards.

# Standard 2: Contextualising the vision and mission

The stated vision, mission and strategic goals align with national priorities and context (e.g. transformation, creating a skilled labour force, developing scarce skills areas and a critical citizenry and contributing to the fulfilment of national goals as informed by the NDP and related national planning), as well as sectoral, regional, continental and global imperatives (e.g. Africa Vision 2063 or the Sustainable Development Goals).

Checklist for standard 2:

- 2.1 The institution has clearly formulated its alignment to local, regional, national, continental, and international imperatives in its vision, mission and goals so that these are fully appropriate to the South African context.
- 2.2 The most recent and relevant policy documents, guidelines and appropriate data and resources were used to formulate the institution's alignment with these imperatives.
- 2.3 Regular reviews bring these defining documents under scrutiny, and changes are made as the need arises and as circumstances change.

# Standard 3: Aligning strategy and the institutional QMS in regard to (i) core academic activities, (ii) vision, mission and strategic goals, and (iii) governance and management process.

There is demonstrable strategic alignment between the institution's quality management system for core academic activities across all sites and modes of provision, and its vision, mission and strategic goals, as well as its governance and management processes.

Checklist for Standard 3:

- 3.1 The vision, mission and goals translate into a strategic plan with measurable objectives, clear timeframes and resources allocated towards the achievement of the goals set.
- 3.2 The strategic plan articulates the relationship between the institution's goals and its quality management system.
- 3.3 The strategic plan is unpacked as planning documents and instruments, such as operational- and annual performance plans or scorecards that are negotiated with the staff responsible; such plans are realistic and implementable, with adequate performance and monitoring criteria included, as well as consequence management of these plans.
- 3.4 The strategic plan, as well as the operational and annual performance plans, is subject to regular review.
- 3.5 The institution is governed in a manner that is consistent with the vision, mission, goals, and strategic plan, as well as its core academic mandate as described in Standard 1.
- 3.6 The highest decision-making authority in the institution regularly holds the executive management of the institution to account for its implementation of the strategic plan.
- 3.7 The highest decision-making authority focuses on providing strategic direction and its responsibility for fiduciary oversight but does not become involved in the operation of the institution to the detriment of quality.
- 3.8 The responsibilities at executive management level for the realisation of the institution's mission, vision and goals, and the implementation of the strategic, Manual for Institutional Audits operational, and annual performance plans are appropriately allocated, implemented, and monitored for effectiveness.

3.9 Executive management regularly reviews the nature and extent of institutional responsiveness, with special reference to ethical leadership and resource allocation, and to quality management to enhance the quality of student experience and the likelihood of student success.

# Standard 4: Embedding a quality governance regime

There is a clear understanding of and demonstrable adherence to the different roles and responsibilities of the governance structures, management and academic leadership.

Checklist for Standard 4:

- 4.1 A clear institutional or corporate governance structure indicates the regulatory hierarchy and processes, which identifies institutional powers, and the lines and delegation of authority for carrying out institutional operations.
- 4.2 The roles, responsibilities and membership composition of the governance structures, institutional and/or corporate management and academic leadership are clearly and distinctively defined.
- 4.3 Criteria for the recruitment and selection of staff are clear and include the knowledge, skills and experience required for effective working of the governance structures, management and academic leadership.
- 4.4 Members are empowered and enabled to effectively play their roles, take responsibility and make decisions with integrity.
- 4.5 The governance structures, management and academic leadership each have effective reporting and accounting mechanisms for their roles and responsibilities and performance in general.
- 4.6 Meeting expectations, proceedings and protocols of the different structures are clearly established. Focus area 2: The design and implementation of the institutional quality management system supports the core academic functions

# CHAPTER 2: DESIGNING AND IMPLEMENTING THE UFS IQMS FOR QUALITY LEARNING, TEACHING AND RESEARCH, AND INTEGRATED COMMUNITY ENGAGEMENT WITHIN THE CONTEXT OF THE INSTITUTION'S MISSION

# Focus area 2: The design and implementation of the institutional quality management system supports the core academic functions

The four standards in Focus Area 2 concentrate on how the *design and implementation of an integrated quality management system* in the institution enhances the likelihood of student success and improves the quality of learning, teaching and research, as well as accommodating the results of constructive, integrated community engagement within the context of the institution's mission. These standards are:

# Standard 5:

A quality assurance system is in place, comprising at a minimum of:

- (i) governance arrangements
- (ii) policies
- (iii) processes, procedures and plans
- (iv) instructional products
- (v) measurement of impact, and
- (vi) data management and utilisation as these give effect to the delivery of the HEI's core functions.

Standard 5 Checklist:

- 5.1 One or more policies, duly approved by the appropriate governance structures, establish and regulate the system for quality assurance and for the support, development, enhancement and monitoring of the core functions of the institution, i.e., learning and teaching, research, and community engagement as these would have been differentiated by the evaluation for Standard 1.
- 5.2 Plans and processes in the institution, duly approved by the appropriate governance structures, support, implement, monitor, and enhance the quality assurance system.
- 5.3 Clear lines of authority and accountability determine how the quality management system is implemented in the institution.
- 5.4 All participants in the quality management system of the core academic functions are demonstrably held to account for the way in which they execute, support, improve, enhance and monitor quality.
- 5.5 The institution's engagement with the QEP process and its focus areas, where and when relevant, form part of the institutional self-reflection.
- 5.6 The areas outlined below are covered, based on their relevance in terms of the institution's mission as described in Standard 1, to evaluate their contribution towards enhancing the quality of the delivery of the HE core functions. The relevance of the areas to be covered will also have been discussed with institutions when the audit is initiated, as well as in the capacity development workshops preceding the audits

# Standard 6:

Human, infrastructural, knowledge management and financial resources support the delivery of the institution's core academic functions across all sites of provision along with the concomitant quality management system, in accordance with the institution's mission.

Checklist for standard 6:

- 6.1 The number, experience, and seniority of staff in the institution whose primary function is to execute, support and promote the quality management system in the institution, is appropriate to the nature, mission and size of the institution.
- 6.2 Financial resources, appropriate to the nature and size of the institution, are sufficient to allow for the planning, implementation, improvement and monitoring of the institution's quality management system.
- 6.3 Information and communication technology infrastructure, appropriate to the nature and size of the institution, facilitates the quality management.
- 6.4 Appropriate infrastructure such as specialist laboratories, including computer laboratories that are required for the programmes on offer are available and sufficient.
- 6.5 WIL is suitably organised and supervised, and all sites of learning are monitored.
- 6.6 Library services and resources, appropriate to the nature, size and mode of provision of the institution actively support the core academic functions.
- 6.7 Adequate and appropriate ICT facilities for both students and staff are provided.
- 6.8 Adequate and appropriate academic environments are provided for on campus and in residences (where appropriate).
- 6.9 Academic staff development for the professionalisation of teaching in various modalities (e.g. face-to-face, blended and online) is provided for staff; the function is adequately staffed and is supported throughout the institution.
- 6.10 Mechanisms for evaluating and acting on staff wellness and satisfaction work well.

# Standard 7:

Credible and reliable data (for example, on throughput and completion rates) are systematically captured, employed and analysed as an integral part of the institutional quality management system so as to inform consistent and sustainable decision-making.

Checklist for standard 7

- 7.1 An electronic, protected and legally compliant data-management and retrieval system in the institution has the capacity to provide accurate, complete and on-time information to support the quality management of the core functions.
- 7.2 A variety of different types and sources of data are used by the institution, e.g. quantitative and qualitative data, input and output data, data required by Manual for Institutional Audits 2021 legislative agencies (such as on HEMIS and HEQCIS) and specifically-sourced data (such as through student and staff surveys).
- 7.3 The institution develops the capacity to interpret the data and to act on the results.
- 7.4 An evidence- and data-led approach is used to improve teaching, student success, the student experience, differential success rates, etc.

# Standard 8:

Systems and processes monitor the institution's capacity for quality management, based on the evidence gathered.

Checklist for standard 8:

- 8.1 Decision-makers at all institutional levels have ready, but appropriate and protected, access to sufficient, reliable and current electronic evidence (data, information and institutional knowledge) that allows them to make informed decisions on the quality management of the core academic functions of the institution.
- 8.2 Regular, substantive and documented engagements among staff, and among staff and students, on all aspects of quality management (implementation, support, enhancement and monitoring) take place at all institutional levels.
- 8.3 The systems and processes for quality management during times of disruption are continuously and effectively monitored.

# Focus area 3: The coherence and integration of the institutional quality management system supports the core academic functions

The four standards in Focus Area 3 concentrate on the coherence and integration of the various components comprising the institutional quality management system and how these work in concert to support the likelihood of student success and improve the quality of learning, teaching and research, as well as accommodating the results of constructive integrated community engagement in accordance with the institution's mission. These standards are:

# Standard 9:

An evidence-based coherent, reasonable, functional and meaningfully structured relationship exists between all components of the institutional quality management system.

Checklist for Standard 9:

- 9.1 An approved system monitors and evaluates the quality of the core functions of learning and teaching, research, and community engagement in the institution. Such a system supports the implementation of the core functions as well as any Manual for Institutional Audits additional support offered, as well as the introduction of any new developments and enhancements to a particular function.
- 9.2 The performance of staff engaged in core academic functions and as primary support of the core academic functions is managed in accordance with an approved performance-management system that holds such staff to account for the management of quality in their functional areas.
- 9.3 An integrated and meaningfully structured relationship exists between quality assurance measures in respect of the academic core functions of the institution, the support for such measures, the continued development and enhancement of such measures, and the monitoring of the measures.
- 9.4 Evidence supports the notion that the quality management system in and across the core academic areas are integrated and not contradictory.

# Standard 10:

Evidence-based regular and dedicated governance and management oversight of the quality assurance system exists.

Checklist for standard 10:

10.1 Staff whose primary function it is to participate in the quality assurance system, as reflected in the policies, procedures and practices of the institution, are regularly, e.g. at least once per semester, held to account by line managers for the manner in which they execute their quality-related functions.

- 10.2 Clear lines of authority exist and are implemented at all institutional levels, up to the level of executive management, to report on and be held accountable for, quality management.
- 10.3 Good practice is reported and celebrated at various levels of the institution.
- 10.4 Non-compliance with the quality assurance system is identified and dealt with appropriately at various levels of the institution.
- 10.5 The highest decision-making authority in the institution holds the executive management of the institution to account on at least an annual basis for all components of the quality management of the institution.

# Standard 11:

Planning and processes exist for the reasonable and functional allocation of resources to all components of the institutional quality management system.

Checklist for standard 11:

- 11.1 Annual budgeting discussions at all institutional levels include explicit decisions about budget allocations for the design and implementation of quality assurance measures, for their support, their development and enhancement, and the monitoring of such measures.
- 11.2 Budget allocations for the quality management system reflect the importance attached at all institutional levels to the provision of appropriate resources (within overall budgetary constraints) for quality management.
- 11.3 Annual planning of the academic workload is undertaken.
- 11.4 The allocation of the academic workload takes into consideration reasonable staffstudent ratios as well as the time required for research and community engagement, where relevant.

## Standard 12:

The quality assurance system achieves its purpose efficiently and effectively.

Checklist for standard 12:

- 12.1 The resources (human, financial and infrastructural) allocated to the quality management system annually are used for their intended purpose.
- 12.2 A form of performance management at all institutional levels ensures that resources allocated to quality management are utilised in a manner that benefits the institution.
- 12.3 Stakeholder engagements, including engagements with students, include reporting on and taking responsibility for the value that the resources allocated to quality management adds to the institution.

# Focus area 4: Curriculum development, learning and teaching support the likelihood of student success

The four standards in Focus Area 4 concentrate on how effectively the institutional quality management system enhances the likelihood of student success, improves learning and teaching and supports the scholarship of learning and teaching. These standards are:

# Standard 13:

An effective institutional system for programme design, approval, delivery, management and review is in place.

Guideline 13.4 is the only Guideline that needs a specific response. The focus of this reflection should be on the institution's response to the emergency arrangements during 2020 for the pandemic and plans for learning, teaching and assessment going forward from 2021 onwards.

Checklist for Standard 13

- 13.1 Institutions have clear procedures for programme design and development, as well as for programme approval and review.
- 13.2 The procedures for programme design and development, approval, delivery (including assessment) and programme review are implemented and monitored.
- 13.3 Coherence between the intentions articulated during accreditation applications and the implemented programmes is evidenced in programme reviews.
- 13.4 Decisions on curriculum, teaching and learning approaches, assessment and the role of technology during times of significant disruption are taken within the precepts of the institutional quality management system, for example, with reference to the CHE's Quality Assurance Guidelines for Teaching and Learning and Assessment during the COVID-19 Pandemic (2020) and QA Guidelines during the COVID-19 Pandemic: An Abbreviated Resource (2020), and other CHE guidelines issued from time to time.

# Standard 14:

There is evidence-based engagement at various institutional levels, among staff, and among staff and students, with:

- a. curriculum transformation, curriculum reform and renewal
- b. learning and teaching innovation; and
- c. the role of technology (1) in the curriculum, (2) in the world of work, and (3) in society in general.

Checklist for Standard 14:

- 14.1 Formal consultative and decision-making structures in the institution, at institutional, faculty/school and departmental levels, allow for engagement by staff and students on the transformation and/or reform and renewal of curricula, on innovation in learning and teaching approaches, including the role, function and administration of assessment, and the role of ICTs in the attainment of graduate attributes.
- 14.2 Formal structures include curriculum transformation, reform and renewal, as well as methodological innovation and the use of ICTs in teaching and learning as standard items on meeting agendas.
- 14.3 The institutional culture is such that discussions on curriculum transformation/reform/renewal; teaching/learning innovation and ICTs in learning and teaching occur regularly between staff, and between staff and students, and other stakeholders, such as professional bodies and the community.
- 14.4 Students recognise that the institution values their input into the curriculum and the learning discourse.
- 14.5 The role of language in contributing to effective learning and teaching (for example in terms of academic literacy, epistemological access, multilingualism, and the development of all South African languages) is actively considered.
- 14.6 Decisions taken at formal institutional structures on any or all of these issues are implemented, and their impact on the quality of teaching and learning is regularly reviewed.
- 14.7 Curriculum renewal and transformation processes ensure that the overall curriculum remains aligned with the institution's mission, vision and goals and Manual for Institutional Audits 24 its particular context, and is responsive to changes in knowledge, in particular, local contexts and the expectations of relevant stakeholders.
- 14.8 Processes ensure that curriculum structures are appropriate and flexible to enhance the opportunities for success for a diversity of student needs.
- 14.9 Engaged scholarship and the scholarship around teaching and learning are integral to the delivery of the institution's curriculum, its approaches to learning and teaching and improve educational provision.
- 14.10 The research activities of the institution inform curriculum development, where relevant.

# Standard 15:

# The students' exposure to learning and teaching at the institution across all sites and modes of provision is experienced by them as positive and enabling of their success.

Checklist for Standard 15:

- 15.1 Students are expected to provide feedback on the quality of the teaching and assessment in modules for which they are registered (including their engagement and interaction with support departments) and are given opportunities to do so.
- 15.2 Graduates are required to provide feedback on the contribution made to their advancement and well-being by the programme for which they were registered.

- 15.3 Student surveys are conducted regularly at the institution to determine the quality of the student experience.
- 15.4 Key outcome indicators of student success, as defined by the institution in its vision, mission and goals, are regularly monitored at all levels of the institution.
- 15.5 The results of student feedback and of student surveys are analysed, and the results are fed back to improve teaching and are also presented at appropriate decision-making structures for relevant action.
- 15.6 Decisions on curriculum, approaches to teaching and learning, and the role of technology during times of disruption are taken with due consideration for the needs and context of the entire student body.
- 15.7 Students have a sense of belonging that is actively fostered and supported in the institution by, for example, the non-academic support structures and the language and discourse in the institution.
- 15.8 The mechanisms for managing student complaints and appeals deal efficiently with these concerns.
- 15.9 All academic decisions taken during times of disruption are consulted with students, as far as is possible.
- 15.10 Culture surveys (or active discussions in smaller institutions) are conducted among staff at the institution, which include items about student success and the student experiences
- 15.11 Academic and support staff have individual experiences of the way in which their contribution to the core functions of the institution is validated; such experiences are enabled by institutional policies, processes and practices and by the culture of the institution.
- 15.12 All support staff embody and promote a culture of service and continuous development.
- 15.13 Staff development policies and strategies promote the professional competence of academic, professional and support staff, and give particular attention to the development needs of new personnel.
- 15.14 Staff performance appraisals, promotion- and reward systems foster the improvement of quality in learning and teaching.

# Standard 16:

Institutions engage with and reflect on the employability of their graduates in a changing world.

Checklist for standard 16

- 16.1 The institution regularly undertakes graduate destination surveys to provide data on: a. the number of graduates that are employed, have been employed or are self-employed; b. how soon after graduation they became employed or self-employed; c. the nature and expected duration of their employment or self-employment.
- 16.2 The institution undertakes research and reflects on the employability and/or other economic activity of its graduates, and actively engages with and acts on the results of its findings.
- 16.3 Consistent efforts are made to ensure that alumni remain active in the affairs of the institution.

# 9 PROCESS

The following process is envisaged and will be confirmed during the UFS first engagement with the CHE.

- i. Institutional Commitment to the audit
- ii. Define the scope and timelines
- iii. Define the approach to follow
- iv. Submit project plan and timelines for the SER
- v. Issue letters of engagement
- vi. Prepare for the audit
- vii. Preparation workshop/roadshows
- viii. Submission of SER
- ix. Visit Schedule and logistical arrangement
- x. Receive audit feedback
- xi. UFS respond to feedback
- xii. UFS develop implementation plans
- xiii. UFS monitors improvements

Dear .....

# PREPARING FOR THE CHE INSTITUTIONAL AUDIT 2021

As you know, UFS is embarking upon the preparations for the HEQC institutional audit that is scheduled to take place over five days in .... The outcome of this audit is of crucial importance for the UFS, and we have to approach our preparations for this in a well-planned way.

THE UFS cannot undertake this without wide participation from its staff members. This will demand a considerable additional effort from staff and at some stages, extra demands will be made on staff time.

.....

It is important to note that all input to the Self-Evaluation Report should be submitted by the end of .....

The information regarding, e.g. the time frames and responsibilities, will be discussed during the Steering Committee meeting that will be the responsible structure for the preparations for the CHE Institutional audit in 2022.

Kindly inform Liana Griesel at <u>Griesell@ufs.ac.za</u> that you are in a position to accept this task. Your cooperation in this important venture is sincerely appreciated.

Yours sincerely

.....

Professor Francis Petersen Rector and Vice-Chancellor