

WCCN Quality management Policy

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Author	Position	Signature	Date
Policy Task Team			2018/02/08

Approved by	Position	Signature	Date
College Senate	Head of Academia	Book	2021/11/05

All Change requests should be submitted to WCCN

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REVISION	TITLE OR BRIEF DESCRIPTION	ENTERED BY
2021/12/21	Rebranding	Dr T M Bock
2024/01/12	Re-branding	Dr T M Bock

SENATEPREAMBLE

This policy is to be applied from adoption hereof. This policy is by no means to be retrospectively applied and will only deal with the exam cycle, immediately prior to ratification of this policy.





1. SCOPE

This policy includes two distinct processes in an all-inclusive quality control mechanism.

1.1 Quality control relating to academic and student processes and annexure

The scope of this policy is to provide academic staff with clear, brief, user-friendly guidelines for subject review mechanisms.

This policy covers the process of gathering evidence and making judgements about WCCN Quality Management systems in relation to standards and qualifications. The policy outlines the process whereby such evidence is reviewed for the purpose of continuous improvement and innovation.

This Policy applies to all programs of the WCCN. The policy has been formulated to ensure that the theoretical and practical component of the course are well integrated, criteria are specific to develop Professional Practice and quality measurements are in place to ensure service delivery.

Education and teaching practitioners may also need specific structures and guidelines in which they can critically engage with their educational methodologies and tools, in a manner that will ensure that there is consistency in the interpretation and assessment of learning (SAQA, 2004:71-77)

1.2 Quality control relating to accreditation including SANC, DHE annexure

2. THE PURPOSE AND OBJECTIVES OF THIS POLICY

This Policy is part of the Quality Management system of the Western Cape College of Nursing. This policy addresses the review process for quality assurance and is applicable to the Western Cape College of Nursing (WCCN).

- To ensure programme quality aligned with the WCCN's vision, mission and values;
- To meet CHE/HEQC and SAQA programme standards;
- To address the requirements of SANC and/or significant employer groups;
- To ensure that the outcomes of a subject are of a valid HEQSF standard and/or industry/professional standard;
- To ensure that subjects are purposively reviewed, and adjustment strategies are implemented to enhance program standards and quality.
- Meaningful and constructive workplace learning that is planned, implemented and evaluated

In addition, this policy addresses

- SANC quality assurance guidelines and checklist
- CHE quality assurance guidelines and checklist
- The institutions' vision and mission with regards to contact with the community
- The collaboration framework between all stakeholders and the Western Cape Government Department of Health.

3. REFERENCES

- SAQA. 2004. Chapter 5: Review and evaluation: Quality management processes [Online] Available at: www.saqa.org.za/docs/guide/2004/rpl.pd[17 January 2018]
- Oxford Learners' Dictionary [Online] Available at:
 https://www.oxfordlearnersdictionaries.com/definition/english/review [17 January 2018]
- Western Cape Government Multi-lateral agreement
- MOU signed between Western Cape Government department of Health (Clinical Service Platform) and WCCN
- Indemnity policy

- Council on Higher Education: Work-Integrated Learning: Good Practice Guide
- Curriculum Development Policy
- Western Cape Government Policy on student placements in the clinical services of the Department of Health.

4. LEGISLATION

- Relevant Professional Bodies and Councils The South African Nursing Council
- CHE (HEQC) (2013) The higher education qualifications sub-framework
- CHE (HEQC) Criteria for programme accreditation 2004
- South African Qualifications Authority
- Nursing Act, No 33 of 2005 as amended
- Compensation for Occupational Injuries and Diseases Act
- Occupational Health and Safety Act, No 85 of 1993 as amended
- Higher Education Act (1997) (Act No. 101 of 1997)
- CHE/HEQC Criteria for Institutional Audits
- CHE/HEQC Criteria for Programme Accreditation
- HEQSF (2013)

5. RELEVANT INSTITUTIONAL POLICIES

- Vision, Mission & Strategic Plan of WCCN
- Assessment Policy and Procedures and Rules for Assessment
- Curriculum Policy
- Policy on Academic Staff Development
- Qualification Review Mechanism
- Moderation Policy
- Student Academic Support
- WCCN (Interventions "best" practices presentations)

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6. DEFINITIONS

6.1 Work Integrated Learning (WIL)

Work integrated learning integrates academic learning with community based experiential learning that is structured, monitored and assessed to meet the outcomes of the program. WIL consists of the following components:

6.1.1 Experiential Learning

It is a term to describe learning that has meaningful student involvement. It is learning through reflection.

6.1.2. Workplace Learning (WPL)

Workplace learning can be in the form of placements, job shadowing, professional practice and employment-based schemes. The model is integrated into the formal learning program. It is used for both learning and as a benchmark for practice.

6.1.3. Clinical Work placements

Clinical work placements are professional practice placements that are formally undertaken within higher educational institutes as part of professional body requirements.

6.2 Review:

A formal assessment of something with the intention of instituting change if necessary (Oxford Learner's dictionary: np)

7. PRINCIPLES WHICH THIS POLICY STRIVES TO UPHOLD

- Credibility
- Transparency
- Universal applicability
- Fairness

8. POLICY GUIDING PRINCIPLES AND REVIEW PRACTICES: ACADEMIC AND STUDENTS

All aspects listed herein will form part of the "paper trail" as evidence of facilitators review as well as auditing for quality control purposes.

Mechanisms

CONCEPTS OF POLICY COMPONENTS: 8.1 – 8.2 ACADEMIC AND STUDENTS

8.1 STRUCTURES & ACADEMIC

8.2 STUDENTS

8.1.1 Administrative 8.1.2 Educational 8.2.1 Performance 8.2.2 Feedback

8.1.1.1 / 8.1.1.2 8.1.2.1

Documentation Lecturers review

Annexure 1- 6.2 are relevant to the above policy components.

CONCEPTS OF POLICY COMPONENTS: ANNEXURE: QUALITY MANAGMENT RELATING TO ACCREDITATION

SANC CHECKLIST
FIRST AID
ANNEXURE 7
REQUIREMENTS

ANNEXURE 8

RESPONSIBILITIES

ANNEXURE 11

ANNEXURE 11

ANNEXURE 9

8.1 ACADEMIC

All aspects listed herein will form part of the "paper trail" as evidence of facilitators' review.

8.1.1 ADMINISTRATIVE

8.1.1.1 Documentation

SELF-EVALUATION PRACTICES AND GROUP FEEDBACK STRATEGIES

Complete the following documents for review purposes;

INVENTORY OF SUBJECT SUCCESS INDICATORS, ANNEXURE 1 and adhere to recordkeeping on SUBJECT FILE CHECKLIST ANNEXURE 2 and present, FACULTY INTERVENTIONS / "BEST" PRACTICE PRESENTATIONSANNEXURE 4, at a review meeting.

- Year plan
- Subject guides
- Lecturers guide
- Assessment schedule
- Related policies
- Assessments
- Guidelines

8.1.1.2 Lecturers review

- Lecturers subject qualification
- Lecturers academic qualification
- Lecturer's workload
- Lecturers professional development / learning

8.1.2 EDUCATIONAL - review of the following aspects:

SELF-EVALUATION PRACTICES AND GROUP FEEDBACK STRATEGIES

Complete the following documents for review purposes;

INVENTORY OF SUBJECT SUCCESS INDICATORS, ANNEXURE 1 and adhere to recordkeeping on SUBJECT FILE CHECKLIST ANNEXURE 2 and present ANNEXURE 4 phases 3 and 4)

- Teaching methodologies
- Methods of assessment
- Information / lecture / study material
- Teaching strategies i.e. group work, self-directed learning etc.
- Lecturer venue
- Lecturer support i.e. equipment, IT support and facilities
- Media support
- Resources support i.e. Library: publications etc.

8.2 STUDENTS

All aspects listed herein will form part of the "paper trail" as evidence of student's review.

8.2.1 PERFORMANCE / ACHIEVEMENTS

Adhere to SUBJECT REVIEW MECHANISM, ANNEXURE 3 Phases 1 and 2 and complete, AT RISK LECTURER REPORT, ANNEXURE 5)

- Cum Laude
- Students at risk
- Student wellness: Health needs/problems
- Immunisation schedules

8.2.2 STUDENT'S FEEDBACK: review of educational experiences

- Provide students with "STUDENT FEEDBACK POLICY" DOCUMENT/ review document and present with ANNEXURE 6 which forms part of Student feedback policy, annexures 1 and 2.
- Student's to complete Student review / evaluation document on "STUDENT FEEDBACK POLICY"

9. POLICY PROVISIONS

All work placements across all qualifications and levels, should:

- a) Be embedded in the curriculum
- b) Be at the appropriate NQF level with the required credit allocation
- c) Link work placements with learning outcomes of the program
- d) Have written agreements with relevant stakeholders.

9.1 EDUCATOR AND STUDENT ORIENTATER POLICY PROVISIONS AND POLICY IMPLEMENTATION PLAN

- WIL should be appropriate with regard to the program level. (Higher certificate, diploma or degree) and the relevant discipline or field.
- An efficient Management information system must be in place to record and disseminate information about the course, keep adequate records about work placement and review placements for improvement.
- WIL must form part of the institutional planning and resource allocation. It must meet the requirements of the Professional body, the student and other stakeholders.
- WIL coordination should be done effectively and should include monitoring of infrastructure, communication and progress

WIL across all qualifications and levels should:

- Be embedded in the curriculum
- Be at the appropriate NQF level with the required credit allocation
- Link WIL with learning outcomes of the program
- Have written agreements with relevant stakeholders.

9.1.1 Planning

The level of the student to be placed and the required learning outcomes will be considered. The SANC and Public Health Institutions will be consulted and HEQF levels considered.

- a) Subject guides will be developed; outcomes will be clearly indicated to guide the students. These learning outcomes will ensure integration of theory and practical. These outcomes must include course outcomes, exit level outcomes.
- b) Once outcomes have been planned and documented, assessment criteria and timeframes must be indicated.
- c) Students must be orientated and prepared for WIL.
- d) All Clinical facilities for work integrated learning will be accredited and will have formal agreements drawn up and signed.
- e) Nursing Students will be placed on the Clinical platform and must be registered with the SANC.
- f) Nursing Students who are given access to the clinical platform are subjected to the Code of Conduct of the Provincial Government Western Cape Department of Health.

9.2 Implementation Phase

- a) Students will report to relevant institutions once placement has been confirmed
- b) Students' progress will be monitored by a Clinical supervisor, lecturers and professional nurses in the clinical facility. Record of all interventions will be kept.
- c) Various types of assessments strategies will be used to monitor the progress of the students, including assignments, portfolio of evidence, projects. Continuous assessment of workplace

learning will also take place according to identified criteria and the learning outcomes of the program.

9.3 Monitoring and Mentoring of students

- a) Lecturers and Clinical supervisors will monitor the students in the workplace and ensure that all learning outcomes are met.
- b) Students will also be guided and mentored by workplace supervisors.
- c) Records of all contact sessions will be kept.

9.4 Reflection on workplace learning

Students must be given an opportunity to reflect on workplace learning.

10. ROLES

- a) The educational institution must assume responsibility for an effective data base and management information system.
- b) All MOA's and MOU's must be administered and recorded.
- c) All students should have insurance or indemnity.

11. RESPONSIBILITIES

11.1 WCCN/ Clinical Facility

- a) Building external partnerships
- b) Ensuring the students sign a code of conduct before entering the workplace
- c) Ensuring that WIL guides are in place
- d) Engage with all relative parties with regard to the curriculum
- e) Ensure students are placed, monitored and assessed to allow them to meet all the outcomes of the course.
- f) Ensure all ethical considerations have been addressed.

11.2 Students

- Take responsibility for their own learning
- Report to appropriate institutions for workplace learning
- Attend orientation for WIL
- Comply with health and safety regulations
- Communicate with relevant departmental heads
- Abide by ethical considerations
- Engage in responsible behaviour whilst participating in workplace learning.

12. RESOURCES REQUIRED

- Financial
- Human Resources
- Infrastructure

13. IMPLEMENTATION REQUIREMENTS

- All Academic Departments
- Clinical supervisor
- Lecturers and
- External stakeholders will be responsible for ensuring the implementation of this policy.

14. WHO SHOULD KNOW THIS POLICY

Heads of Campuses Teaching and Learning Coordinators and curriculum officers Quality Management Office

WCCN NO 17 Quality Management Policy

Institutional Research and Academic Planning Department
HOD's/Programme/Course Coordinators
Academic Staff
Student Representatives
Senate Teaching and Learning Committee; College Teaching and Learning Committees,
Centre for e- Learning
Library





ANNEXURE 1

INVENTORY OF SUBJECT SUCCESS INDICATORS

	SUCESS INDICATOR	1	SCORES 2	3	SUBJE CT SCORE	COMMENT
		'				
1	Subject Guide - Contains syllabus outline			Guide exceeds standard		
	 Lecture and tutorial venues and dates 	No guide or guide	Guide meets standard			
	- Reading and resource list (including e-learning sites)	does not meet standard				
	 Full set of assessments, assessment criteria and due dates 					
2	Lecture venue - Seating is adequate			Venue exceeds standard		
	- Writing surfaces are adequate	Venue does not meet	Venue meets standard			
	- Accessible seating (e.g., for students in wheelchairs)					
	- Acoustics are adequate	standard				
	 Ventilation, temperature, etc. are adequate 					
3	Media availability - Data projector and PC/laptop available			Excellent media		
	DVD compatibleFunctional, visible screen	No media available	Basic media available			
	- Connectivity	avaliable				

		1.174			
4	Simlab facilities (only for subjects that	N/A	Adequate	Good	
	have simlab based				
	teaching/practical's)				
	- Simlab is available and has				
	adequate space				
	- simlab roster				
	- safety and security of				
	equipment				
	equipinieni				
	Fauinment and supplies are				
	- Equipment and supplies are				
	adequate and appropriate				
	Clinical Supervisor is available				
	- Meets SANC requirements				
<u> </u>		,		5: "	
5	Student diagnostic testing/use of LMS	n/a	No 	Diagnosti	
	'Early Warning System'		diagnostic	c testing	
	 NBT or other placement test 		testing		
	has been/will be done (in the				
	case of first year)				
	 Arrangements for early 				
	warning system/diagnostic				
	testing				
6	Resources for students				
	- Availability of textbooks (or				
	on-line resources)				
	- Library holdings				
7	Lecturer's subject qualification	B-degree	M-degree	D-degree	
	- Qualification level in the				
	discipline/field				
8	Lecturer's educational qualification	None	Non-	Formal	
1	- Non-formal qualifications		formal		
	(e.g., TDP, CHEC Short				
	courses on teaching and				
	learning)				
	- Formal qualification (e.g.,				
	HDHET, M Phil (Higher				
	Education)				
9	Lecturer's workload	Excessive	Managea	Comforta	
^	- An excessive workload - more		ble	ble	
	than 20 contact hours/week;		3.5		
	- A manageable workload –			✓	
	around 15 contact			*	
	hours/week				
	- A comfortable workload –				
	less than 15 contact				
10	hours/week	Not	Moderate	Highly	
1 1()	Cupportive opvironment		Moderatel	Highly	1
10	Supportive environment				
	- Functionality of the	supportiv	У	supportiv	
	- Functionality of the environment (e.g., state of				
	- Functionality of the	supportiv	У	supportiv	

WCCN N0 17 Quality Management Policy

	 Availability of leadership, support and advice; Collegiate working environment. 		е		
11	Part time lecturers (To be filled in for subjects partly or wholly taught by part-time lecturers)	n/a	Hourly claim	Contract	
12	Time allocated for students' individual study - The timetabled period for individual study (e.g., in library);	No timetabl ed individua I	N/A	Timetable d individual study	
	 There is physical space (e.g., small group meeting rooms) for individual/peer group study 	I study periods		periods	
13	Subject tutors (for first year and second year subjects/courses) - In the case of first year subjects, subject-based - tutors have been identified and/or trained	n/a	Tutors not provided	Tutors provided	
14	Peer Mentors (for first year subjects/courses) - In the case of first year subjects, mentors have been identified and/or trained	n/a	Mentors not provided	Mentors provided	

Additional comments

(Subjects potentially 'at risk' score to be considered – e.g., relative weightings of indicators) (This form to be updated on an annual basis – dependent on the final Departmental Subject Review report)





ANNEXURE 2

SUBJECT FILE CHECKLIST

Semester:	Year of Study:	Credits:	Campus	:
ITS Code:	Subject:			
Checked by:		Date:		_
		Y	YEAR YEAR	YEAR
2.1 Lecturer info 2.2 Teaching m 2.3 Outcomes f 2.4 Methods of 2.5 Evaluation of 2.6 Work schem 2.7 Assessment 2.8 Assessment 3. Tests and m 4. Exam/FISA of 5. Moderators 6. Summary of 7. Student evo 8. Assignment 9. Examples of 10. Practical (Io	or subject assessment criteria ne (semester plan) and teaching weightings dates and time emorandums for the last three y and Memorandums papers for t reports for the last three years fresults and pass rates for the la aluations of lecturer / projects briefs f assignments / projects aboratory) guideline aboratory) evaluation criteria aboratory) examples	g hours years he last three years		

Air/progrev/guidlinedoc 2nd cycle of programme reviews 2015



Annexure 3 SUBJECT REVIEW MECHANISM



Phase 1: Departmental (Integrity of the marks)

TIMELINE:

Prior to processing of marks at the conclusion at each Summative Assessment.

OBJECTIVES:

- To identify at-risk subjects (under 60% pass rate)
- To identify at-risk students (failing more than 50% of subjects)
- To identify exiting students (completion of qualification)
- To identify students for experiential learning (work placement)
- To identify candidates for merit awards
- To promote students (from one level to the next)
- To exclude students who do not meet the relevant criteria for promotion

DESCRIPTION:

After submission of the marks at the end of each year/semester, the HOD downloads the following:

- Final results report
- Student success summaries
- At-risk subject summaries

The HOD then convenes a departmental subject review meeting.

INFORMATION REQUIRED: (from Lecturers to HOD's)

- Student Cohort Tracking
- Final results report (old Form C)
- Student success summaries
- At-risk subject summaries (under 60%)
- List of exiting students for graduation cum laude
- Top 5 students per faculty

REPORTS TO BE GENERATED: (from HODs/Departments)

- Sign of Mark Sheets:
- HOD
- Lecturer





Annexure 4 Phase 2: Departmental (Interventions discussion)

TIMELINE:

Continuously

Prior to commencement of employee personal appraisal meetings. Quarterly review

OBJECTIVES:

- To review lecturer, moderator and student feedback on teaching
- To review previous interventions
- To plan and develop appropriate teaching and learning interventions for at-risk subjects
- To identify subjects repeatedly at-risk, for in-depth subject analysis
- To ascertain why monitoring mechanisms for at-risk students have failed or succeeded
- To recommend appropriate actions/remedies for at-risk students
- To identify 'best' practices
- To prepare departmental summary reports.

DESCRIPTION:

Lecturers present at-risk subject lecturer reports (which include a summary of the subject evaluations by students) to HOD.

Lecturers present excellent pass rates (above 80%) with a view to identifying possible 'best' practices and to ascertain whether these rates reflect high standards related to the relevant HEQF level.

The HOD leads a departmental discussion to review previous interventions, plan and develop appropriate teaching and learning interventions for at -risk subjects, and identify subjects that have been repeatedly at-risk across subject review processes, for in-depth subject analysis.

The HOD leads a departmental discussion to ascertain why monitoring mechanisms for at-risk students have failed and recommends appropriate actions/remedies for at-risk students.

The HOD does analysis of the departmental subject review and prepares the following for the faculty:

- At-risk subject summary
- Summary of interventions to be implemented

INFORMATION REQUIRED:

- Results summary
- At-risk subject summaries

WCCN NO 17 Quality Management Policy

REPORTS TO BE GENERATED: (from HODs/Departments)

At-risk subject lecturer reports

- List of subjects repeatedly at-risk
- List of at-risk students per level
- Overall success summary
- At-risk subject summary
- Summary of at-risk subject/at-risk student interventions to be implemented





Annexure 5

Phase 3: Department (Interventions/'best' practice presentations)

TIMELINE:

At Academic Review meetings continuously

OBJECTIVES:

- To present departmental subject review summaries
- To present and share 'best' practices
- Presentation
- To prioritize faculty-wide interventions
- To analyze trends in completion rates, throughput rates, success rates, retention rates and graduation rates

DESCRIPTION:

A panel consisting of:

The HOD should be accompanied by, at least, the departmental teaching and learning representative and a senior lecturer.

Each panel member will have an opportunity to respond to the presentation.

Interventions are determined and prioritized by and coordinated by the Lecturer and HOD.

INFORMATION REQUIRED:

Departmental subject review summaries

REPORTS TO BE GENERATED:

- Analysis of the subject review summaries across faculty
- Faculty-wide interventions
- Programme for faculty 'sharing-of-practices' session





Annexure 6

Phase 4: Departmental (Implement interventions)

TIMELINE:

Yearly

OBJECTIVES:

- To implement departmental wide interventions
- To review efficacy of previous interventions
- To analyze subjects repeatedly at-risk
- To provide departments with empirically based information on how to improve learning in subjects repeatedly at-risk
- To implement and monitor recommendations from in-depth subject analysis

DESCRIPTION:

The HOD co-ordinates the implementation of departmental interventions, and regularly reviews the efficacy of these interventions.

- Briefing session with main staff teaching the subject
- Interview/focus group with allied lecturers and tutors
- Observation/videotape of classroom session/practical
- Professional dialogue between lecturer and another peer
- Student interviews
- Analysis of teaching and learning materials and samples of students' work
- Detailed marks analysis is undertaken to:
- Obtain weighted marks and full description of what marks are for
- Obtain marks for other subjects in that semester (check subject marks against one another) or Check for anomalies (across different assessments different marks for tests, assignments, practical)
- Analyze changes in overall marks in the semester/year for improvement or degeneration
- Analyze mark trends in at-risk subject and correlations with marks in other subjects, particularly cognate subjects (like Maths)

The HOD takes responsibility for the implementation and monitoring of the recommendations from in-

WCCN N0 17 Quality Management Policy

depth subject analysis report.

INFORMATION REQUIRED: (from department)

- Access to allied staff, students, classroom/practical, marks for repeatedly at-risk subject/s
- Teaching and learning materials (such as textbooks, lecture notes, worksheets, assessment tasks, etc.) for repeatedly at-risk subject/s

REPORTS TO BE GENERATED:

in-depth subject analysis report to relevant parties i.e.

- Faculty management
- Senate.



DATE OF EVALUATION

DEPARTMENT



ANNEXURE 7

:

AT-RISK SUBJECT LECTURER REPORT DEPARTMENT OF AT-RISK SUBJECT LECTURER REPORT (FOR DEPARTMENTAL USE ONLY)

GROUP	·	
CODE	•	
LECTURER/S	•	
MODERATOR/S	:	
	of students registered :	
(b) Number	_	
(c) % Passes		
	of distinctions :	
` ,	te is less than 60%, please state possible	reasons why it is less than 60% and
Lecturer/s Comments		
Moderator/s		
Comments		
Students`		
Evaluation of		
Subject (Summary)		
Interventions		
(Previous)		
Interventions		
(New)		
Other Comments		
SIGNATURE:	DATE:	





ANNEXURE 7.1

Please use the official and complete document as from policy that refers to: ANNEXURE 1 AND 2 FROM THE POLICY ON STUDENT FEEDBACK ON TEACHING

ANNEXURE 1

WESTERN CAPE COLLEGE OF NURSING









STUDENT FEEDBACK ON TEACHING

Student feedback plays an important part in improving the quality of teaching in the institution. We would thus ask you to take this feedback seriously and to give honest, constructive responses to the questions asked. The completed questionnaire will be scored and returned to the lecturer concerned. The main purpose of the questionnaire is to provide lecturers with information so that they can improve their own teaching. There will be a discussion between the lecturer and the Head of Department about the results of the feedback.

INSTRUCTIONS (applicable when working on a hard copy)

	Use an	ΗB	pencil.
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☐ Fill in the following fields on the (pink) scanner sheet: **DATE**, **COURSE and SUBJECT**.

DO NOT SUPPLY YOUR NAME OR STUDENT NUMBER.

Read through the statements and rate your lecturer for each statement by making an "X" in the appropriate box below:

For each of the statements below, fill in the appropriate circle. Use "Not Applicable if the statement does not apply.

	CUDIFOT	I					
	SUBJECT		ō	ā		+	-
	•••••	۵۳	달	otc		en	ğ
	LECTURER	l have a problem	Not Satisfactor	Acceptab le	Quite	Excellent	Not Applicabl
1.	The lecturer speaks clearly.						
2.	The work is covered at the right speed.						
3.	The lecturer starts class on time.						
4.	The lecturer knows the subject matter very well.						
5.	The lecturer behaves in a professional way.						
6.	The lecturer treats all students with respect and dignity.						
	The lecturer makes the subject interesting.						
7.	I understand the explanations given by this lecturer.						
8.	,						
9.	The lecturer's presentations are well-planned.						
10.	The lecture notes and hand-outs are of a high						
	standard.						
11.	The lecture notes and hand-outs are available when						
	needed.						
12.	All sections of the class work are given a fair amount of						
	time.						
13.	The lecturer gives clear guidelines on the standard of						
	work expected from us.						
14.	The way the lecturer controls the class contributes						
	positively to my learning experience.						
15.	The lecturer encourages questions during class.						
16.	My fellow-students have contributed positively to my						
	learning experience in class.						
17.	I am happy with the amount of practical work we've						
	been exposed to.						

WCCN N0 17 Quality Management Policy

18. 19. 20.	We were given enough homework to be able to understand the work. I am happy with the help I got from tutors. The type of media (Overhead slides, PowerPoint, e-Learning, etc) the lecturer used in class was used effectively to explain the work.			
21.	Every time we had an assessment task, the instructions were clear.			
22.	It is usually clear what we have to do to get the marks.			
23.	All our assessment tasks covered to the work we were taught.			
24.	All tests / assignments were given back within a reasonable time			
25.	The lecturer's feedback comments on tests / assignments were useful.			
26.	The marks I received were fair for the work that I put in. There were enough tests and assignments for me to be			
27.	able to measure my progress.			
00	Test questions mostly required an in-depth			
28. 29.	understanding of the subject. Test questions are mainly types we had done before.			





ANNEXURE 7.3

STUDENT REFLECTION ON WORK INTEGRATED LEARNING (WIL) Clinical facility where WIL took place: _ Area at facility where WIL took place: _____ Time period: from __/__/20__ to __/__/20__ Workplace integrated learning is essential to master clinical skills. Your voluntary anonymous participation and honest feedback on your WIL experience will support services to address student challenges during WIL. Reflect on your WIL, at the area indicated, and give a concise description of your experience referring Student friendly environment Suggestion to improve the environment to be student friendly During WIL I enjoyed the following the most.... During WIL I had difficulty to Suggestion to address the challenge/s you experienced.

Thank you

Other comment you wish to share

WCCN 2018 student feedback from clinical areas 8-2-20



SANC **ANNEXURE 8**

	Organisations Name	
	Type of Organisation	
	Province Telephone: Fax.	
	City / Town e-mail Cell No.	
	Physical Address	
	Contact Person First Name Surname Position	
	Head of First Organisation Name Surname Position	
	Date Completed SANC Ref.No.	
	CONFORMANCE CRITERIA	RATING
1		RATING 0%
1 2	CONFORMANCE CRITERIA	
	CONFORMANCE CRITERIA GENERAL INFORMATION	0%
2	CONFORMANCE CRITERIA GENERAL INFORMATION STATUS OF THE ORGANISATION WITHIN THE SANC SECTOR	0% Yes/No
2	CONFORMANCE CRITERIA GENERAL INFORMATION STATUS OF THE ORGANISATION WITHIN THE SANC SECTOR ABILITY TO ACHIEVE LEARNING OUTCOMES	0% Yes/No 0%
2 3 4	CONFORMANCE CRITERIA GENERAL INFORMATION STATUS OF THE ORGANISATION WITHIN THE SANC SECTOR ABILITY TO ACHIEVE LEARNING OUTCOMES PHYSICAL, ADMINISTRATIVE AND FINANCIAL RESOURCES	0% Yes/No 0%
2 3 4 5	CONFORMANCE CRITERIA GENERAL INFORMATION STATUS OF THE ORGANISATION WITHIN THE SANC SECTOR ABILITY TO ACHIEVE LEARNING OUTCOMES PHYSICAL, ADMINISTRATIVE AND FINANCIAL RESOURCES LEARNER ENTRY, GUIDANCE AND SUPPORT	0% Yes/No 0% 0%
2 3 4 5	CONFORMANCE CRITERIA GENERAL INFORMATION STATUS OF THE ORGANISATION WITHIN THE SANC SECTOR ABILITY TO ACHIEVE LEARNING OUTCOMES PHYSICAL, ADMINISTRATIVE AND FINANCIAL RESOURCES LEARNER ENTRY, GUIDANCE AND SUPPORT STAFF SELECTION, APPRAISAL AND DEVELOPMENT	0% Yes/No 0% 0% 0% 0%
2 3 4 5 6 7	CONFORMANCE CRITERIA GENERAL INFORMATION STATUS OF THE ORGANISATION WITHIN THE SANC SECTOR ABILITY TO ACHIEVE LEARNING OUTCOMES PHYSICAL, ADMINISTRATIVE AND FINANCIAL RESOURCES LEARNER ENTRY, GUIDANCE AND SUPPORT STAFF SELECTION, APPRAISAL AND DEVELOPMENT LEARNING PROGRAMMES	0% Yes/No 0% 0% 0% 0% 0%

11	RECORD KEEPING AND REPORTING	0%	
10	OHALITY AAAANA CEAAENIT SYSTEAA	007	

12 QUALITY MANAGEMENT SYSTEM

PLEASE NOTE These requirements are for an applicant applying to be evaluated by the SANC for accreditation as a Delivery and Assessment site. The list of evidence requirements serves to guide the applicant on evidence that can be provided during the visit as proof of compliance to the SANC accreditation Team





WCCN/DHE REVIEW CHECKLIST FOR DHE EDUCATIONAL PROGRAMME ACCREDIATION ANNEXURE 9

PURPOSE OF THIS CHECKLIST

This checklist facilitates the review of the CHE processes related to accreditation

at specific time periods of the process:	INDIC ATE X
1. INITIAL AUDIT	
2. MIDWAY PROCESS AUDIT	
3. FINAL ACCREDITATION	
4. SPECIFIED AUDIT PURPOSE / ANNUA	

USER SPECIFICATIONS VERY IMPORTANT NOTE

This checklist can only be completed in conjunction with the DHE programme

1.	CRITERIA FOR PROGRAMME INPUT	
2.	PROGRAMME DESIGN	
3.	STUDENT RECRUITMENT DESIGN ADMISSION AND SELECTION	
4.	STAFFING	
5.	TEACHING AND LEARNING STRATEGIES	
6.	STUDENTS ASSESSMENT POLICIES AND PROCEDURES	
7.	INFRASTRUCTURE AND LIBRARY RESOURCES	
В.	PROGRAMME ADMINSTRATIVE SERVICES	
9.	POSTGRADUATE POLICIES, PROCEDURES AND REGULATIONS	
10.	ACCREDITATION PHASE	
11.	CRITERIA FOR PROGRAMME PROCESS	
12.	PROGRAMME COORDINATION	
13.	ACADEMIC DEVELOPMENT FOR STUDENT SUCCESS	
14.	TEACHING AND LEARNING INTERACTIONS	
	STUDENT ASSESSMENT PRACTICES	
16.	COORDINATION OF WORKP-BASED LEARNING	
17.	DELIVERY OF POST GRADUATE PROGRAMMES	

WCCN N0 17 Quality Management Pol

18.	CRITERIA FOR PROGRAMME OUTPUT AND IMPACT	
19.	CRITERIA FOR PROGRAMME REVIEW	

REVIEWERS

NAME	PRINT	SIGNATURE	DATE





ANNEXURE 10 OVERVIEW OF PREPARATION ACTIVITIES AND RERSPONSIBILITIES

ACT	IVITY	DATE COMPLETED AND DATE REVIEWED	RESPONSIBLE PERSON SIGNATURE
1.	Identify external panel members and supply QMD with full contact details before programme review commences		Head of WCCN
2.	Contact external panel members and ensure their availability on required date. If unavailable, select new members. Immediately communicate with QMD		Head of WCCN
3.	Locate historical information to initiate critical reflection: previous findings, QIP's, progress reports etc		Head of WCCN
4.	Identify relevant staff to be involved and assign duties. Develop action plans for staff if required. Include part-time and servicing staff		Head of WCCN
5.	Set dates for at least two critical reflection meetings with all staff, students, coordinators and QMD		Head of WCCN
6.	Inform all relevant staff, students, coordinators and QMD of dates and requirements		Head of WCCN
7.	Identifying names and contact details		Head of WCCN
8.	Letter to all academic staff, industry and students for interviewing		HOC
9.	Develop list for required evidence based on existing departmental documentation and evidence supporting documentation		All Campuses & Departments
10.	Meeting with maintenance, OHS & Facilities pre-audit (practical, project and computer laboratories, workshops, etc). Develop progress plan		QMD, OHS , maintenance and facilities
11.	Training of staff for OHS requirements. Staff training identified from pre-audits (T&L H&S, etc)		HOC
12.	Obtain required Campus/department documentation i.e. policies, Dean's report etc		Designated coordinator
13.	QMD to provide institutional research report & policies. Policies and support documents on MIS site under quality		QMD
14.	Writing of SER		Head of WCCN
15.	Follow up reports to close out issues on pre- audit and self-evaluation reports		OHS, maintenance and facilities Student support RPL ECR Library

WCCN N0 17 Quality Management Policy

16.	Submission of completed	Head of WCCN
17.	Evidence overview	Head of WCCN/HOC'S/HOD'S
18.	Assessment files available for analysis one week prior to visit	HOC'S/HOD'S
19.	Finalisation of evidence collection	HOC'S/HOD'S
20.	Courier documents to panel members	QMD
21.	Check RSVP from industry members, students, advisory boards and send reminders	Head of WCCN
22.	Finalise logistical arrangement for visit referring to visit schedule. additional cleaners, toilets, refreshments	Head of WCCN/HOC'S
23.	Logistical arrangements for visits to additional sites	Head of WCCN
24.	Evidence laid out in departments	HOC'S/HOD'S
25.	Briefing session to staff and students, if required	HOC'S/HOD'S
26.	Visit and interviews with staff, students and stakeholders and review of evidence	All staff available
27.	Close out logistical arrangement	Head of WCCN
28.	Send letters of gratitude to external interviewees	Head of WCCN
29.	Comment on accuracy of findings in relation to evidence provided to panel	Head of WCCN
30.	Complete DQIP and submit to QMD	Head of WCCN
31.	Initiate DQIP	Head of WCCN
36	Additional activities	QMD
37	Initiation to external panel members	QMD
38	Booking and travel arrangements	QMD
39	Maps, visit documents for panel members	QMD
40	Submission of report to panel	QMD





ANNEXURE 11: DOCUMENTARY EVIDENCE AND FILES

DOCUMENTS		PROVIDED A EVIDENCE		
		YES	NO	N/A
1.	Registration documents: WCCN, SANC AND DHET			
Course/Subje	ect Files			
2.	Curriculum for each course			
3.	 Course Material: Course outlines, Tutorials, Laboratory instructions (reflecting minimum number of experiments to be completed), Prescribed texts, Notes and Study guides. Sample of lecturing material 			
4.	Approved assessment strategy			
5.	Approved list of moderators and assessors			
6.	All rubrics for all assessments, assignments, projects i.e. for all formative and summative evaluations given to students			
7	Examiners and moderators guidelines			
8.	Examination papers and memorandums for three years			
	 Marked and moderated examination scripts for previous three years in each course/subject) Evidence of external moderation for exit level subjects Evidence that all moderation took place prior to the uploading of final marks As per the assessment policy, in large classes a selection of best, average and borderline students scripts should be provided for each examination paper (minimum of 20% or at least 20 scripts whichever is the lesser) 			
10.	Moderation reports for previous three years			
11.	Evidence that moderator's comments have been used to improve the course			
12.	 Explanation of how continuous assessment is used in the course Exemplars of the moderated examination papers, scripts and moderators reports for each evaluation of the course/subject. In large classes a selection of best, average and borderline students scripts should be provided for each assessment (minimum of 20% or at least 20 scripts whichever is the lesser) 			
13.	Where exams deviate from the formal assessment system, • Evidence of approval for type of assessment • How assessment is incorporated into and support the overall assessment strategy			

	Evidon on of the gratege road growth a local foregraph and a local	Т	
	Evidence of the system used must be kept (examples should in a large the system).		
	include the work of good, average and borderline students).		
14.	Students examples of:		
17.	Assignments		
	Projects		
	Laboratory Work		
	Portfolios (if applicable)		
15.	Individual student records should be accessible on request.		
	ent support and academic intervention		
17.	Examples of student support practices used by the course		
18.	Analysis of effectiveness of support practices		
19.	Examples of student evaluation of support practices		
20.	Explanation of academic interventions undertaken by the lecturer		
21.	Examples to show practice and analysis of impact of practice		
22. WIL fi			
23.	Workplace integration followed in the department with explanation		
	of modalities undertaken by each course		
24.	Examples of guidelines given to students to support the different WIL		
	modalities		
25.	Details and evidence of how quality assurance of WIL takes place		
26.	Where WIL takes the form of work placement		
	Work preparedness timetable		
	Work preparedness documentation Criteria for all size of works land as		
	Criteria for choice of workplacesEvidence of work placed mentors		
	 Evidence of work placed methods Evidence of visitation by mentors in the workplace 		
	Evidence of visitation by the more in the workplace Evidence of learning taking place in the workplace		
	Evidence of assessment and moderation Structured		
	experiential training programmes for each specific discipline.		
	Work preparedness programme		
	•		
27.	Training records of WIL students regardless of modality		
	WIL guideline		
	WIL eligible and placement figures per year (Statistics) Where WIL consists of a modelity that requires industry ligitant.		
	 Where WIL consists of a modality that requires industry liaison: Lists of industries and mentors with registration numbers, 		
	qualification and experience		
	Where mentors are not registered, documentation on		
	competence		
	Evidence of assessed and moderated student work		
	Evidence of quality assurance applicable to the WIL		
20. 5	modality		
_	artmental and Programme files		
29.	Institutional perspective		
30.	Departmental administration documents		
	Organizational charts		
	Departmental committees		
	Departmental Handbook/Rule book		
31.	Departmental vision and mission statement		
32.	Departmental strategic plan		
33.	Departmental operational plans, Budgets since last accreditation		

	and budget		
34.	Departmental annual reports for the past three years		
35.	Policy documents		
	WCCN (officially compiled blue cover ECSA doc) • Institutional		
	Departmental		
36.	 Faculty and departmental policy and procedures in respect of Admission rules Progression rules 		
	 Exclusion rules Alternate admissions such as addressing recognition of prior learning (RPL) and providing foundation programmes (ECP) 		
37.	 CV's of academic staff (should indicate the qualifications and experience that justify the individual's competency for the work they are doing in the programme). Include service subject, PT and contract lecturers. Also include CV's of technical staff involved in laboratory and practical work and projects. Status of post, years of service, highest formal qualification, specialist area of teaching, specialist area of research, teaching responsibility, research output, community responsiveness Technical staff to include any training required by law (
38.	Statistics such as:		
	 Student composition Staff student ratios Gender profiles Race profiles Trend analysis for past three years of number of students, equity profile, number of graduating also in terms of equity All Subject Pass rates Subject review information Enrolment and graduation figures Qualification reviews (throughput) Industry requirements Departmental standing relative to other departments in the same or similar disciplines (benchmarking) 		
39.	Previous programme review panel report and QIP		
40.	Research thrust together with examples of outcomes where applicable: i.e. departmental research record - Have WCCN research reports available in venue		
41.	 Plans for Continuing Professional Development (CPD) of academic staff upon SANC commencement Evidence of 5-year training programme including upgrading of qualifications Evidence of schedule for industry training for academic staff, where applicable Evidence of staff training and training courses attended Evidence of workshop, seminar, conference attendance 		
42.	Minutes:		
	 All Departmental Minutes of meetings All minutes/ reports of departmental substructures 		

WCCN N0 17 Quality Management Policy

	Minutes of Advisory Board or equivalent committee (should)			
	indicate the cooperation with the industry served)			ĺ
43.	Programme information			
	Undergraduate and other relevant			
	Curriculum for each programme			
	Subject lists			
	 Pre-requisites/co-requisite/progression rules 			
	Timetables for all programmes			
	 Timetables of all staff involved in programme 			
	 Timetable of facilities usage i.e. classrooms, laboratories etc. 			
44.	Lecturer evaluations/Student feedback			
45.	List of library books, usage logs, budgets since last accreditation			
46.	Tutor appointments and training			
47.	Evidence of Industrial visits and feedback			
48.	Service Learning/Community involvement			
49.	Student files			
50.	Evidence of internal quality assurance (e.g. Self-evaluation			
	documentation)			
51.	SIM laboratory files			





ANNEXURE 12 MINIMUM REQUIREMENTS FOR FIRST AID BOXES

In terms of all workplaces with more than 5 employees must have a fully equipped first aid box.

It should be noted that these are only minimum requirements. An employer may add items to this list that is relevant to the risks that employees are exposed to.

Contents of a First Aid Box:

- 1. Wound cleaner/ antiseptic (100 ml)
- 2. Swabs for cleaning wounds
- 3. Cotton wool for padding (100 g)
- 4. Sterile gauze (minimum quantity of 10)
- 5. 1 Pair of forceps (for splinters)
- 6. 1 Pair of scissors (minimum size 100 mm))
- 7. 1 Set of safety pins
- 8. 4 Triangular bandages
- 9. 4 Roller bandages (75 mm x 5 m)
- 10. 4 Roller bandages (100 mm x 5 m)
- 11. 1 Roll of elastic adhesive (25 mm x 3 m)
- 12. 1 Non-allergic adhesive strip (25 mm x 3 m)
- 13. 1 Packet of adhesive dressing strips (min quantity, 10 assorted sizes)
- 14. 4 First aid dressings (75 mm x 100 mm)
- 15. 4 First aid dressings (150 mm x 200 mm)
- 16. 2 Straight splints
- 17. 2 Pairs large & 2 pairs medium disposable latex gloves
- 18. 2 CPR mouth pieces or similar devices

CHECKED: DATE:	NAME	
SIGNATURE:		