




WCCN Programme review Policy

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Author	Position	Signature	Date
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Approved by	Position	Signature	Date
College Senate	Head of Academia		2022/02/03

All Change requests should be submitted to WCCN

REVISION	TITLE OR BRIEF DESCRIPTION	ENTERED BY
2022/02/03	Rebranding	Dr T M Bock
2024/01/15	Re-branding	Dr T M Bock

SENATE PREAMBLE

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

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

This policy covers the process of providing evidence and making judgements about a programme offered at the WCCN. And preparation of the WCCN for a CHE accreditation visit. Ensuring that the programmes offered at the WCCN is in line with SAQA, CHE and SANC standards. Further inquiring that the programme is aligned with the Mission and Vision of the WCCN and adheres to prescribed standards. The programme review will further reflect upon the level of progress towards attaining WCCN's strategic objectives.

2. THE PURPOSE OF THIS POLICY

This policy addresses the process of programme review and is applicable to the Western Cape College of Nursing (WCCN). This Policy is part of the Quality Management system of the Western Cape College of Nursing. The findings of the review will deepen the quality of the academic programme, learning outcomes and assure the DoH and the public that graduates are educated according to the standards as set out by the CHE, SAQA and SANC.

3. OBJECTIVES

- 3.1 To ensure programme quality aligned with the WCCN's vision, mission and values.
- 3.2 To meet CHE/HEQC and SAQA programme standards.
- 3.3 To address the requirements of SANC and/or significant employer groups.
- 3.4 To ensure that the outcomes of a programme are of a valid HEQSF standard and/or industry/professional standard.
- 3.5 To ensure that programmes are purposively reviewed, and adjustment strategies are implemented to enhance program standards and quality.

4. DEFINITIONS

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

5. REFERENCES

CPUT. 2013. Guideline Document for Programme Review. CPUT Quality Management Directorate.
CHE. 2012. Framework for the National review of Programmes. Council of Higher Education

6. RELEVANT INSTITUTIONAL POLICIES

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

7. LEGISLATION

Higher Education Act (1997) (Act No. 101 of 1997).
CHE/HEQC Criteria for Institutional Audits
CHE/HEQC Criteria for Programme Accreditation
HEQSF (2013)

8. REVIEW CYCLE AND PRACTICES

The review cycle is three years. Over and above the review as stipulated by CHE and HEQC, the programme remains open to review by the SANC at its discretion. During a programme review the following aspects will be evaluated.

8.1 Programme purpose and design

- Does the programme have a clear purpose and objective, and is it designed to meet those purposes and objectives?
- Is it coherent, balanced and well structured?
- Are the regulations governing the programme adequate, appropriate and clear?
- Does the programme attract a diverse range of students?
- What are the graduate attributes?

8.2 Curriculum content and organization

- Is the curriculum comprehensive, based on appropriate and up to date knowledge, well organised, including a sense of progression at each level?
- Is the curriculum relevant in relation to the current state of knowledge, academic and health care environments?
- How is continued relevance assured?
- Are there content areas that should be introduced, expanded, reduced or deleted?

8.3 Teaching, learning and assessment

- What is the teaching and learning strategy?
- What is the overall quality of the teaching and learning programme and how is this supported and improved?
- Are the teaching methods appropriate to the curriculum and course content?
- Are assessment methods appropriate to the curriculum and course content?
- Are assessments appropriate and how are they moderated?
- Do teaching methods meet the needs of a diverse student body?

8.4 Learning resources

- Are the learning resources appropriate and adequate to maintain the quality of the programme?

8.5 Student Achievement

- Is the programme meeting its objectives in terms of achievement indicators such as pass rates and completion rates?
- Is the stated graduate profile being achieved?

8.6 Programme management, quality assurance and enhancement

- How appropriate and informative is the guidance and advice offered to students concerning the programme?
- How well are programme processes. e.g. year-plans, timetables, assessments and feedback managed?
- How are feedback and other inputs from students, employees, moderators, external moderators taken into account in the curriculum design and improvements?

9. SELF-EVALUATION REPORT FOR PROGRAMME REVIEWS

The CHE requires that each institution completes a self-evaluation with the view to

improve the quality of programmes (CHE 2012:11). This required the WCCN to engage in critical self-evaluation leading to evidence-based claims on the achievement of minimum standards, the identification of areas of good practice, areas for improvement and any other interventions which might be required to enhance the quality of the programmes. HEQC will use the same criteria for programme review to further accredit the institution to offer the currently accredited programmes.

9.1 Lectures and HOD

All staff must be involved in the self-review (Critical reflection on the programme). This includes HOD's, Curriculum officers, HOC's, Lecturers, Sim lab coordinators, WIL coordinators and Subject coordinators. These categories of staff will also be questioned by the formal review panel.

9.2 Students

Students form part of this critical reflective self-review and therefore all students and SRC should form part of this critical self-evaluation report.

10. CRITERIA FOR CONSIDERATION OF PROGRAMME REVIEW (HEQC: 2021)

PROGRAMME DESIGN

CRITERION 1

The programme is consonant with the institution's mission, forms part of the institutional planning and resource allocation, meets the national requirements, the needs of students and other stakeholders, and is intellectually credible. It is designed coherently and articulates well with other relevant programmes, where possible.

STUDENT RECRUITMENT, ADMISSION AND SELECTION

CRITERION 2

Recruitment documentation informs potential students of the programme accurately and sufficiently, and admission adheres to current legislation. Admission and selection of students are commensurate with the programme's academic requirements, within a framework of widened access and equity. The number of students selected considers the programme's intended learning outcomes, its capacity to offer good quality education and the needs of the particular profession (in the case of professional and vocational programmes.)

STAFFING 1 (HR)

CRITERION 3 + Criterion 4 can be considered simultaneously.

CRITERION 3

Academic staff responsible for the programme are suitably qualified and have sufficient relevant experience and teaching competence, and their assessment competence and research profile are adequate for the nature and level of the programme. The institution and/or other recognised agencies contracted by the institution provide opportunities for academic staff to enhance their competencies and to support their professional growth and development.

CRITERION 4

The academic and support staff complement is of sufficient size and seniority for the nature and field of the programme and the size of the student body to ensure that all activities related to the programme can be carried out effectively. The ratio of full-time for part-time staff is appropriate. The recruitment and employment of staff follows relevant legislation and appropriate administrative procedures, including redress and equity considerations. Support staff are adequately qualified, and their knowledge and skills are regularly updated.

TEACHING AND LEARNING STRATEGY

CRITERION 5

The institution gives recognition to the importance of promoting student learning. The teaching and learning strategy is appropriate for the institutional type (as reflected in its

mission), mode of delivery and student composition, contains mechanisms to ensure the appropriateness of teaching and learning methods, and makes provision for staff to upgrade their teaching methods. The strategy sets targets, plans for implementation, and mechanisms to monitor progress, evaluate impact and effect improvement.

STUDENT ASSESSMENT POLICIES AND PROCEDURES

CRITERION 6

The different modes of delivery of the programme have appropriate policies and procedures for internal assessment, internal and external moderation, monitoring of student progress, explicitness, validity, and reliability of assessment practices, recording of assessment results; settling of disputes; the rigor and security of the assessment system; RPL; and for the development of staff competence in assessment.

INFRASTRUCTURE AND LIBRARY RESOURCES

CRITERION 7

Suitable and sufficient venues, IT infrastructure and library resources are available for students and staff in the programme. Policies ensure the proper management and maintenance of library resources, including support and access for students and staff. Staff development for library personnel takes place on a regular basis.

PROGRAMME ADMINISTRATIVE SERVICES

CRITERION 8

The programme has effective administrative services for providing information, managing the programme information system, dealing with a diverse student population, and ensuring the integrity of processes leading to certification of the qualification obtained through the programme.

PROGRAMME COORDINATION

CRITERION 10

The programme is effectively coordinated to facilitate the attainment of its intended purposes and outcomes.

ACADEMIC DEVELOPMENT FOR STUDENT SUCCESS

CRITERION 11

Academic development initiatives promote student, staff and curriculum development and offer academic support for students, where necessary.

TEACHING AND LEARNING INTERACTIONS

CRITERION 12

Effective teaching and learning methods and suitable learning materials and learning opportunities facilitate the achievement of the purposes and outcomes of the programme.

STUDENT ASSESSMENT PRACTICES

CRITERION 6, 13 and 14 can be considered simultaneously.

CRITERION 13 The programme has effective assessment practices which include internal (or external) assessment, as well as internal and external moderation.

CRITERION 14

The programme has taken measures to ensure the reliability, rigour and security of the assessment system.

COORDINATION OF WORK-BASED LEARNING

CRITERION 15

The coordination of work-based learning is done effectively in all components of applicable programmes. This includes and adequate infrastructure, effective communication, recording of progress made, monitoring and mentoring.

STUDENT RETENTION AND THROUGHPUT RATES

CRITERION 17

Student retention and throughput rates in the programme are monitored especially in terms of race and gender equity, and remedial measures are taken, where necessary.

PROGRAMME IMPACT

CRITERION 18

The programme has taken steps to enhance the employability of students and to alleviate shortages of expertise in relevant fields, in cases where these are the desired outcomes of the programme.

PROGRAMME REVIEW

CRITERION 19

User surveys, reviews, and impact studies on the effectiveness of the programme are undertaken at regular intervals. Results are used to improve the programme design, delivery, and resourcing, and for staff development and student support, where necessary.

11. SELF EVALUATION REPORTS (SER)

Self-evaluation reports are to be drafted as per the CHEQ criteria as per section 10 of this policy.

This self-evaluation report should be made available to the HEQC panel performing the assessment.

The Self-evaluation report should be used to draft a Departmental Quality Improvement plan in preparedness for an official HEQC visit.

Self-evaluation reports should be submitted to the Quality Assurance Officer of the WCCN two weeks prior to the commencement of the programme review.

12. PANEL FOR PROGRAMME REVIEW

Chairperson from another HEI

Specialist panel members to evaluate specialties within the programme

Member of teaching and learning from another HEI.

Curriculum officer and a curriculum officer from another HEI

WIL Coordinator e.g. from DNS

Any other member at the request of the Quality assurance team

12.1 Appointment of external panel members

All appointments shall be made via the office of the Director as the WCCN does not have a Quality management Directorate, all findings shall be submitted to the office of the Director and College Council.

- The director is asked to suggest potential external chairpersons and specialist panel members that they wish to include in the panel. Based on previous evaluations of the suitability of chairpersons, as well as other information sources, College Council will indicate acceptance of the chairperson.
- Panel members should be selected based on their professional and personal credibility with the relevant discipline. This includes knowledge, skills and personal attributes and means that industry members could contribute great value to the process. Industry members should be considered for specialist input. In general, the chairperson should be from another university and have a strong academic background
- Director may request additional persons on the panel, but depending on finances, it is possible that only the chairperson will be paid. The only exception to this is where faculties have restructured departments and a department now houses more than one

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programme. Where there would traditionally have been separate panels for each suit of qualifications consideration will be given to including additional specialists, who might be reimbursed at a rate less than that of the chairperson.

- Panel members are not to be associated with the department in any way. For example, they cannot have familial connections to anyone in the department, have children registered as students on the programme, be part-time lecturers, assessors or moderators, or be in competition with the department in terms of projects in industry etc. Advisory board members could be considered.
- It is preferable that the chairperson is someone from another HEI, but a motivation can be made for an industry member to be the chairperson.

APPENDIX 1: Documentary evidence and files

DOCUMENTS		PROVIDED AS EVIDENCE		
		YES	NO	N/A
1.	Registration documents: SAQA, SANC, CHE			
Course/Subject Files				
2.	Curriculum for each course / subject			
3.	<ul style="list-style-type: none"> Course Material: Subject guide 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 internal and external 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			
9.	<ul style="list-style-type: none"> 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.	Continuous evaluation: <ul style="list-style-type: none"> 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) 			

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13.	Where exams deviate from the formal assessment system, <ul style="list-style-type: none"> • Evidence of approval for type of assessment • How assessment is incorporated into and support the overall assessment strategy • Evidence of the system used must be kept (examples should include the work of good, average and borderline students). 			
14.	Students' examples of: <ul style="list-style-type: none"> • Assignments • Projects • Laboratory Work • Portfolios (if applicable) 			
15.	Individual student records should be accessible on request.			
16. Student 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 files				
23.	Model of WIL followed in the WCCN 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 <ul style="list-style-type: none"> • Structured work-placed learning for each specific discipline. • WIL preparedness programme • WIL preparedness timetable • WIL preparedness documentation • Criteria for choice of workplaces • Evidence of work placed mentors • Evidence of 50% visitation by WIL coordinators in the workplace • Evidence of learning taking place in the workplace • Evidence of assessment and moderation for work placed WIL modalities 			
27.	Training records of WIL students regardless of modality			

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	<ul style="list-style-type: none"> • WIL guideline • WIL eligible and placement figures per year (Statistics) <p>Where WIL consists of a modality that requires industry liaison:</p> <ul style="list-style-type: none"> • 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 modality 			
28. Departmental and Programme files				
29.	WCCN perspective			
30.	WCCN administration documents <ul style="list-style-type: none"> • Organizational charts • Departmental committees • WCCN Rule book and programme guide 			
31.	Departmental vision and mission statement			
32.	Departmental strategic plan			
33.	<ul style="list-style-type: none"> • Departmental operational plans, 3-5 years that describe how the qualification will operate - includes financial planning (capital, maintenance and operational) and building plans. • Budgets since last accreditation and budget for 2013 			
34.	Departmental annual reports for the past three years			
35.	Policy documents <ul style="list-style-type: none"> • WCCN Policy Folder 			
36.	WCCN policy and procedures in respect of <ul style="list-style-type: none"> • Admission rules • Progression rules • Exclusion rules • Alternate admissions such as addressing recognition of prior learning (RPL) 			
37.	<ul style="list-style-type: none"> • 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. 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 (i.e. OHS certification) 			
38.	Statistics such as: <ul style="list-style-type: none"> • Student composition 			

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	<ul style="list-style-type: none"> • 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 • WCCN standing relative to other departments in the same or similar disciplines (benchmarking) 			
39.	Previous programme review panel reports and QIP			
40.	Research thrust together with examples of outcomes where applicable: i.e. departmental research record			
41.	<ul style="list-style-type: none"> • Plans for Continuing Professional Development (CPD) of academic staff • 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 • publications? Journal articles, chapters in books? 			
42.	<p>Minutes:</p> <ul style="list-style-type: none"> • All Departmental Minutes of meetings • All minutes/ reports of departmental substructures • Minutes of Academic Governance and Academic Planning meeting 			
43.	<p>Programme information</p> <ul style="list-style-type: none"> • Undergraduate, postgraduate • 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			

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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.	Teaching and Learning file			
50.	Evidence of internal quality assurance (e.g. Self-evaluation documentation)			
51.	Occupational Health and Safety files			

