

HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA

PROFESSIONAL BOARD FOR DIETETICS AND NUTRITION (DNB)

**SELF-EVALUATION DOCUMENTS TO BE COMPLETED BY HIGHER
EDUCATION INSTITUTIONS (HEI's) FOR EVALUATION OF
DIETETICS EDUCATION AND TRAINING PROGRAMMES**

This form is ONLY for the use of evaluation of Dietetic Training Programmes

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IMPORTANT NOTICE TO ALL USERS OF THIS DOCUMENT:

Please do not change the numbering system of the document. If there is no information for a specific point, please indicate with **Not Applicable** (N/A).

LIST OF ACRONYMS

CHE	Council on Higher Education
DHET	Department of Higher Education
ETQA	Education and Training Quality Assurer
HEIs	Higher Education Institutions
HPCSA	Health Professions Council of South Africa
MoU	Memorandum of Understanding
NQF	National Qualifications Framework
RPL	Recognition of Prior Learning
SAQA	South African Qualifications Authority
SETA	Sector Education and Training Authority

1. GLOSSARY OF TERMS

Appeal	Appeal means a formal request by an institution that the HPCSA undertakes an investigation to review its decision following an evaluation of a programme or a clinical site
Approval/ Recognition of Programme	The approval and recognition of professional programmes of study by the HPCSA. It is the recognition of academic and clinical quality by the HPCSA. Graduates of approved programmes are eligible for registration with the HPCSA, a legal requirement to practice the profession in South Africa.
Assessment	Systematic evaluation of a student's ability to demonstrate the achievement of the learning outcome intended in a curriculum
Clinical training facility/ unit	A Board approved public or private hospital/ medical centre/clinic/unit/training laboratory, or any other facility where learners receive their professional practice/clinical training during formal periods of study
Criteria for programme approval	Minimum standards required to support and enhance the quality of teaching and learning in a programme
Education and Training Quality Assurer (ETQA)	Body responsible for monitoring and auditing the level of achievement of national standards or qualifications offered by providers.
Evaluation	Verification of the elements of the HEIs or clinical training facility/unit to determine if it meets the requirements for the learning programme in respect of learning outcomes, purpose, assessment as well as evaluation guidelines to uphold the education and training standards of the profession.
Evaluators/ Evaluation panel	A team of experts appointed by the Board that meets requirements for registration with the HPCSA to evaluate professional education and training programmes and clinical training facilities to determine whether they meet the criteria for programme approval. The panel members should be external to the HEI and its approved clinical training facilities/units

Higher Education Institution	An approved organisation of higher education, offering a professional programme of education and training that meets requirements for registration with the HPCSA
Minimum standards	Requirements for a specific level of provisioning that a programme has to meet in order to be approved by the HPCSA
New programme	A programme which has not been offered before, or a programme whose purpose, outcomes, field of study, mode or site of delivery have been considerably changed
Professional Board	Professional Board, also referred to as the Board, as established in terms of Section 15(1) of the Health Professions Act no 56 of 1974
Professional programme	A programme that has to meet the licensure and other professional and work-based requirements of statutory councils
Programme	Any combination of courses (subjects/modules/practical's and/or requirements) leading to a professional qualification and registration with the HPCSA
Programme approval	Determination by a professional board of whether an HEI's professional programme of education and training meets the criteria for programme accreditation for registration of its graduates with the HPCSA
Programme evaluation	Processes undertaken by the Board (every 5 years) to assess whether an HEI's professional programme of education and training meets the criteria for programme accreditation for education and training in the profession
Programme evaluator	Subject matter experts with the expertise and training to undertake external evaluations of programmes
Qualification	A registered national qualification consisting of a planned combination of learning outcomes which has a defined purpose or purposes, intended to provide qualifying learners with applied competence and a basis for further learning and which has been assessed in terms of exit level outcomes, registered on the NQF and certified and awarded by a recognised body
Recognition of prior learning	Formal identification, assessment and acknowledgement of the full range of a person's knowledge, skills and capabilities acquired through formal, informal or non-formal training, on-the-job or life experience
Satellite centre	A public or private hospital/ medical centre/ clinic/unit which is used as an additional clinical training facility but does not take in candidates on its own. It may be used to offer exposure to learners for services or examinations, which are not performed at the main clinical training facility/unit
Self-evaluation/ review	Self-evaluation refers to the process by which an institution critically reviews and evaluates its programmes using the Professional Board's programme approval criteria. The process leads to the development of the self-evaluation report.

Site visit plan	A schedule of activities which the evaluation panel will undertake during the site visit to a HEI or a clinical training facility/ unit.
Site visit	A visit to institution by the evaluation panel for the purposes of programme evaluation. It typically includes, but it is not limited to interviews with learners, staff and the leadership; observation of learners' academic and clinical learning opportunities/ activities; visits to clinical training facilities/units; review of programme resources and documentation w
	.
The Act	Health Professions Act, 1974 (Act No 56 of 1974) as amended.
Work Based Learning	Workplace based learning means educational component of an occupational qualification that provides students with real life work experience where students can apply academic and technical skills and increase prospect of employability.
Work Integrated Learning, (WIL)	A characteristic of vocational and professionally oriented qualifications that may be incorporated into programmes at all levels of all three Sub-Frameworks. WIL may take various forms including but not limited to simulated learning, work-directed theoretical learning, problem-based learning, project-based learning and workplace-based learning.

3. PURPOSE OF FORM 271: EVALUATION AND APPROVAL OF PROFESSIONAL PROGRAMMES IN DIETETICS FOR REGISTRATION AT HPCSA

The general goal of evaluation is to exercise control over the quality of education and training in dietetics, and to serve as proof of the standard of performance of graduates from an approved programme. According to “HPCSA guidelines for evaluation of education and training institutions” (7 April 2011), the **purpose** of evaluations is as follows:

To promote excellence in educational preparation while assuring the public that graduates of approved programmes are educated in a core set of knowledge and skills required for competent, safe, ethical, effective, and independent professional practice. Approval requires Professional Boards to ensure the quality of education and training programmes as a facet of public protection. The Health Professions Act, and Boards’ regulations, criteria and standards identify basic elements that must exist in all approved education programmes.

4. EVALUATION APPROVAL PROCESS AND PROCEDURES

- 4.2.1 The evaluation process consists firstly of the completion of two documents by the provider/head (or co-ordinator) of Department of Dietetics/Human Nutrition/Nutrition) (Annexure A & B)

These Annexures (A & B) should be completed according to the timeline provided in Annexure D.

After submission of Annexure A and B to the Secretariat of the Professional Board for Dietetics and Nutrition (DNB) the distribution of duplicates to the evaluation panel will commence.

- 4.2.2 The external evaluation will be done by a panel of experts (evaluation panel), consisting of 3 persons of which at least one (1) will be a member from a Higher Education Institution, to be appointed by the DNB. The evaluation panel will review the completed Annexures A and B and will establish if any additional information and/or documentation is required **prior** to the evaluation virtual/online and/or onsite (University and training facilities included).

- The days of the visit will take place over a period of three (3) days of which two (2) days will be evaluation online/virtual and the third day may either be virtual/online or on-site, depending on the readiness of the institution for an online evaluation, for example, being able to provide evidence of effective training at Work Integrated Learning (WIL) training sites online and day four (4) will be allocated to report writing by the panel which will be done online and follow up of additional questions and aspects which needs clarity (see 2.3 for more details). The Chairperson of the Education, Training and Registration Committee and the Head of Department (HOD) of the University will finalise the date of the evaluation virtual/online and/or on-site as soon as possible after or at the first Education, Training and Registration Committee meeting of the Board for the year, and as soon as an evaluation panel has been appointed.
- Extra ordinary criteria for changing of evaluation dates:
 - Student unrest
 - Emergency situations
 - Change of Board members/evaluation panel

- 4.2.3 After the evaluation virtual/online and/or onsite, the evaluation panel compiles a report to be submitted to the Education, Training and Registration Committee of the DNB according to the timeline (Annexure D) whereafter the report will be returned to the evaluated institution for further comments and clarification of additional questions by the panel (via the DNB secretariat). The report and comments will then be re-submitted by the evaluated

institution to the secretariat of the DNB for attention of the evaluation panel for a recommendation to the Education, Training and Registration Committee of the DNB, and subsequently to the Professional Board for confirmation of the approval, including a period of approval, of the training programme.

The evaluation panel completes the Evaluation Report (Annexure C) based on the information obtained from the HEIs self-evaluation report according to guidance in Annexure G.

The report highlights findings of special importance as well as recommendations for improved performance and includes a brief motivation and reasons for

- Approval
- re-approval
- provisional approval
- no approval

5. LEGISLATIVE AND REGULATORY FRAMEWORK

- Health Professions Act of 1974 (as amended)
- National Qualifications Act Framework No 67 of 2008
- Higher Education Act, 101 of 1997
- Council on Higher Education, (CHE) Criteria for Programme Accreditation, November 2004.
- Criteria and Guidelines for Providers: Policy Document.
- Rule 112 of 2018, Payment of fees for accreditation of Education and Training offered by the Education and Training Institutions under the Health Professions Act, 56 of 1974.
- Policy and Criteria for Recognising a Professional Body and Registering a Professional Designation for the Purposes of the National Qualifications Framework Act, Act 67 of 2008 (As amended, September 2020)

6. FEES PAYABLE

As per in **Rule 112 of 2018**, "*payment of fees for approval of Education and Training offered by the Education and Training Institutions under the Health Professions Act, 56 of 1974*", the fees payable to the HPCSA for approval of Higher Education Institutions shall be determined on a cost recovery basis for each evaluation conducted.

Evaluation reports shall not be made available to the HEIs and Clinical Training facilities whose evaluation fees are not paid.

Re-evaluation of programmes shall not be conducted if outstanding evaluation fees are not paid.

7. RESPONSIBILITIES OF THE PROFESSIONAL BOARD

The Professional Boards, in accordance with the Health Professions Act and relevant regulations, ensures quality in professional education and training by evaluating and approving education and training programmes of professions that fall within their ambit. The Professional Boards delegate the function of evaluation of programmes to the Education Training and Registration Committees. (ETRCs).

The roles and responsibilities of the Professional Boards includes:

1. Standards setting
2. Scheduling evaluation of HEIs' professional education and training programmes, whether virtual/online or physical.
3. Setting frameworks for programme approval/recognition.
4. Appointment and training of evaluators
5. Determining approval status of education and training programmes
6. Managing outcomes of the programme approval process.
7. Supportive and developmental role.

7.1. RESPONSIBILITIES OF THE CONVENOR

7.1. The Convenor (of the evaluation panel), prior to the institution visit, supplies the co-ordinator with a proposed programme (see 2.3), where the co-ordinator can also make recommendations. The programme should be finalised in time for the co-ordinator (Institution) to arrange meetings with the institution staff ahead of time.

7.2 The Convener, **prior to the evaluation virtual/online and/or onsite**, develops a Draft Report (according to Annexure C) from the information supplied by the evaluated Institution (University).

-The Draft Report is placed on HPCSA SharePoint at the start of the evaluation by the appointed Convener of the specific panel (see Annexure D for timelines).

-Evaluation panel members comment on and make additions to the Draft Report and submit it to the Convener **before the evaluation virtual/online and/or onsite takes place**. The Draft Report should be populated through this process prior to the evaluation virtual/online and/or onsite.

The Draft Report acts as a basis for the identification of further relevant information to be gathered during the evaluation virtual/online and/or onsite. The Draft Report also acts as a matrix or template to develop the Final Evaluation Report.

8. GUIDELINES FOR PROGRAMME COMPILATION FOR EVALUATION AT THE HIGHER EDUCATION INSTITUTIONS (HEIs)

8.1 CO-ORDINATOR

8.1.1 The Institution concerned must appoint a co-ordinator to facilitate the evaluation panel's visit.

8.1.2 The co-ordinator must communicate with the institutional Quality Control Department informing them of the pending dates for the evaluation (virtual/online and/or onsite) by the DNB.

8.1.3 The institutional Quality Control Department may appoint a member to attend the evaluation visit.

8.2. PHYSICAL EVALUATION VISIT

8.2.1. Completion of Self-Evaluation Report: The institution conducts a self-evaluation and compiles a self-evaluation report (SER), describing how the professional education and training programme being offered meets the criteria and minimum standards for programme approval.

8.2.2. Proposed evaluation plan: The institution should, in collaboration with the panel compile an evaluation plan with timeframes.

8.2.3. Preparation of documentation for review by the evaluation panel during the evaluation.

8.2.4. Preparation for the evaluation, which could either be virtual/online and/or physical.

8.3. VIRTUAL/ONLINE PROGRAMME EVALUATION

8.3.1. Virtual/Online evaluations shall be conducted as per the Professional Board approved Virtual/Online Evaluation Guidelines.

8.3.2. Number of days for the evaluation shall be as determined by the relevant Professional Board.

8.4. HYBRID PROGRAMME EVALUATION

8.4.1. A hybrid or blended model entails a combination of physical and virtual programme evaluations.

8.4.2. The panel together with HEI or clinical training facility identify the components of the evaluation that will be conducted physically and virtually.

8.4.3. HEI ensures that the environment is conducive for panel to conduct the hybrid or blended programme evaluation.

8.4.4. A hybrid or blended model shall be followed for the evaluation of new and/or existing programmes and clinical training facilities.

9. PROGRAMME APPROVAL REQUIREMENTS FOR HIGHER EDUCATION INSTITUTIONS

9.1. *PROPOSED PROGRAMME FOR THE EVALUATION VIRTUAL/ONLINE AND/OR ON-SITE

**Tea breaks and lunches also need to be included in the final programme as well as time, usually a whole day, for evaluation virtual/online and/or onsite (see 2.4), studying and discussion of the exhibitions.*

**** Do not add the names of the evaluation panel on the program, as it may change on short notice.**

Task	*Agenda / **Name of interviewee	Allocation of time (approximate)
Evaluation Panel meeting on arrival at Institution		
Finalising the programme (Institutional co-ordinator to attend where possible). Co-ordinator to have class lists available for convenor to choose students for 2.3.10 (indicate class representative on the class list).		
Identify individual members of the Department/Faculty that the Evaluation Panel wish to interview personally.		
Agreement on responsibilities and divide panel members for training and teaching facility visits, which usually takes place simultaneously.		
Discussion: Draft Report- Identify strengths and weaknesses, problem areas and specific activities to be encouraged. Define areas for special attention during the evaluation virtual/online and/or on-site and share notes on questions to be asked.		
		2 hours

Task	*Agenda / **Name of interviewee	Allocation of time (approximate)
Initial meeting with the Head of the School (HOD)/Dean of the Faculty/Senior Management of the School/Faculty	School/Faculty management and structures	1 hour
Individual meeting with the Head of Department	Departmental management and structures	45 min
Meeting with Chairperson Research and members of the Research Committee	Research focus areas and outputs, students' role in research	30 min
Meeting with the Chairperson of the Education/Curriculum Development Committee	The curriculum, teaching and learning and assessment that relates to the curriculum	2 hours
Meeting with programme manager (or HOD if it is the same person) on subjects/modules offered by "service/support" departments (e.g. chemistry or microbiology). Individual meetings with relevant staff should be arranged	The curriculum, teaching and learning and assessment of "service/support" modules that relate to the curriculum	1 hour
Meeting with programme manager (or HOD if it is the same person) on subjects/modules offered by the Dietetic department. Individual meetings with relevant academic and support staff should be arranged.	The curriculum, teaching and learning and assessment that relate to the curriculum as well as support given to each module.	2 hours
Meeting with the Chairperson and members of Human Resources Development Committee or Unit/Centre responsible for Academic Development.	Human resource development/academic development that relate to education and training	30 min
Formal meeting with recent graduates (3-6 graduates).	Feedback on experience with the curriculum (strong and weak points)	1 hour working lunch
Individual meeting with student class representatives and two other class members from each year of the programme (at least three students per year group; 1 st to 4 th years) (4 groups)	Open agenda	2-3 hours
Meeting with representatives of all managerial levels of therapeutic, foodservice and community-based training facilities.	Open agenda	1 hour
Training facilities of all the departments (Hospitals; Clinics and Community Hospitals/Clinics; Foodservice Management) giving opportunity to see practical work by students in progress and to meet informally with members of the hospital /community /foodservices /private sector staff.	Evaluation panel will divide into 3 groups and visit the training facilities simultaneously, with a relevant staff member as guide.	3-5 hours
Courtesy feedback session with School Director, program leader/manager and Dean of the Faculty	Preliminary highlights and possible recommendations (first impressions)	30 min – 1 hour (end of day 3 or on day 4)
Report writing (day 4 of visit)	Access to all documents and a venue where the panel can work for the day will be appreciated.	6-8 hours (day 4 of visit)

9.2 EXHIBITIONS /TRAINING AND TEACHING FACILITY VISITS TO BE ARRANGED FOR PHYSICAL VISIT

- 9.2.1 Exhibition of study guides, assessments and *examination papers, etc. to support self-assessment documentation **(See Annexure K for Blooms revised taxonomy)**.
- 9.2.2 Exhibition of students’ work such as portfolios, assignments etc.
- 9.2.3 Teaching facilities, lecture and seminar rooms.
- 9.2.4 Computer laboratory facility
- 9.2.5 Skills laboratory facility
- 9.2.6 Library facilities

9.3 EXHIBITIONS REQUIRED FOR VIRTUAL ASSESMENT

This guidance is related to virtual evaluation to ensure that e-documents replace traditional exhibitions of training and teaching material, as well as visits to Work Integrated Learning (WIL) facilities

- 9.3.1 Detailed document providing information of all accredited Work Integrated Learning (WIL) facilities used by the Programme for Therapeutic Nutrition, Community Nutrition and Foodservice Management.

Provide the following information for each accredited facility:

Approved Work Integrated Learning (WIL) Site	Focus of training	Persons responsible for training and supervision- from WIL site and HEI	Year groups that use this WIL site	Value and benefits of activities at the WIL facility	Challenges, i.e., travel time, safety, relationship with staff, etc., relating to the use of the specific WIL facility

- 9.3.2. E-folders on Google drive, or similar electronic folders, containing the following for every year group for the past 5 years.

9.3.3. Weekly timetable per semester, Study guides of all modules in each semester for the past years.

9.3.4. For each module a folder – see Module contents file template. **Please note that embedded files and folders are not acceptable/allowable.**

9.3.5. Detailed document/s providing information of all teaching facilities, lecture, and seminar rooms, including Computer laboratory facility, Skills laboratory facility and Library facilities. This information can be shared in the electronic folder in form of a video, a Power Point or just descriptions with photos.

9.3.6. **Checklist of required information to accompany Form 271**

- Video, Power Point or document with information regarding all facilities
- Proof of staff HPCSA registration
- Modules – see separate list of possible content
- Student portfolio
- First year support
- Health and Safety
- Student lists for interviews

If not as addendums in Form 271 also include the following:

- Timetable
- WIL rosters
- Policies on assessment, examination, learning and teaching
- Prescribed booklist
- Staff publications
- Staff organogram

**Universities must complete the Bloom's taxonomy document (or equivalent) that should be available as part of the examination papers during the evaluation virtual/online and/or on-site.*

HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA

PROFESSIONAL BOARD FOR DIETETICS AND NUTRITION

SELF-EVALUATIONREPORT (SER) FOR UNDERGRADUATE PROGRAMME IN DIETETICS

Programme information

Name of University/Institution	
Name of Faculty	
Name of School (if applicable)	
Name of Department (if applicable)	
Name of undergraduate programme (as registered with SAQA)	
SAQA registration number	
Qualification delivered	
Annexure A of SER completed at HEI by: DATE:	
Annexure B of SER) completed at HEI by: DATE:	
Date of submission of SER to Secretariat;	

SELF-EVALUATION OF TEACHING AND LEARNING AIMED AT ATTAINING THE SPECIFIC OUTCOMES ACCORDING TO MINIMUM SKILLS AND COMPETENCIES AND GRADUATE ATTRIBUTES

A. SCREENING / NEEDS ASSESSMENT / SITUATION ANALYSIS		Module code(s) reference as proof of attaining of outcomes <i>(indicate all the module codes where a specific attribute is being addressed: e.g. A1: ABCD111, ADCD221, DCBA114, etc.)</i>
A1	Assess socio-demographic status	
A2	Compile a community profile	
A3	Demonstrate the various anthropometric measurements	
A4	Critically evaluate anthropometric measurements	
A5	Measure or estimate body composition	
A6	Critically evaluate body composition analysis techniques	
A7	Describe concept of quality assurance for dietary intake instruments	
A8	Describe the most important sources of error in assessment of dietary intake	
A9	Select the most appropriate instrument for assessing dietary intake	
A10	Design instruments for assessment of dietary intake	
A11	Demonstrate appropriate application of techniques in assessing dietary intake	
A12	Critically assess various standard techniques used in assessment of dietary intake	
A13	Identify and describe the symptoms and signs of nutritional deficiencies	
A14	Describe and apply basic concepts - clinical assessment of nutritional status	
A15	Holistic approach to the clinical evaluation of nutritional status	
A16	Critically evaluate biochemical measurements	
A17	Interpret biochemical data	
A18	Reflect nutritional status of patients - by analysis, integration, interpretation of data	

	A. SCREENING / NEEDS ASSESSMENT / SITUATION ANALYSIS	Module code(s) reference as proof of attaining of outcomes <i>(indicate all the module codes where a specific attribute is being addressed: e.g. A1: ABCD111, ADCD221, DCBA114, etc.)</i>
A19	Predict type and severity of health issues for nutrition intervention, based on the application of standard screening tools	
A20	Compile nutritional diagnosis based on integration of nutritional assessment data	
A21	Describe effect of disease on nutritional status - explaining underlying mechanisms	
A22	Identify the potential cause(s) of health issues based on nutrition assessment data	
A23	Social and cultural factors which affect food preferences and eating behaviour	
A24	Assess food preferences using appropriate skills/tools	
A25	Conduct food wastage studies - appropriate techniques - client satisfaction	
A26	Identify causes of plate-waste by investigating contributory factors	
A27	Assess and classify the nutrition knowledge using appropriate techniques	
A28	Nutrition education & health promotion - integrating knowledge & cause analysis data	
A29	Identify food service needs and need for nutritional support in institutions	
A30	Identify individuals for referral to support services/programmes	
A31	Assess needs for training; development of people involved in nutrition service delivery.	
B	B. PLANNING, IMPLEMENTATION, EVALUATION AND DOCUMENTATION OF NUTRITION SERVICE DELIVERY	
B1	Intervention strategies to address health issues of groups	
B2	Collaborate with relevant stakeholders to address problems	
B3	Facilitate and monitor community or public participation	
B4	Appropriate nutrition care and education for specific needs/ diseases	

	A. SCREENING / NEEDS ASSESSMENT / SITUATION ANALYSIS	Module code(s) reference as proof of attaining of outcomes <i>(indicate all the module codes where a specific attribute is being addressed: e.g. A1: ABCD111, ADCD221, DCBA114, etc.)</i>
B5	Collaborate with members of health care team - re specific needs	
B6	Promote and monitor patient/client compliance with the nutrition care plan	
B7	Compile menus to comply with patient/client and/or group needs	
B8	Food procurement, storage, production, distribution & consumption of final product	
B9	Develop and standardise recipes for specific needs	
B10	Conduct a sensory evaluation of food products	
B11	Establish food quality standards & procedures to monitor these standards	
B12	Interpret and apply specifications	
B13	Compile food and nutritional product specifications	
B14	Integrate the food service system in nutrition service delivery	
B15	Integrate management principles, quality assurance, and the system	
B16	Monitor satisfaction with nutrition service delivery	
B17	Adapt strategy based on feedback - monitoring of quality of nutrition service delivery	
C	C. COMMUNICATION	
C1	Effectively communicate with individuals and groups	
C2	Communicate effectively orally	
C3	Communicate effectively in writing	
C4	Communicate effectively using electronic media	

A. SCREENING / NEEDS ASSESSMENT / SITUATION ANALYSIS		Module code(s) reference as proof of attaining of outcomes (indicate all the module codes where a specific attribute is being addressed: e.g. A1: ABCD111, ADCD221, DCBA114, etc.)
C5	Word	
C6	Excel	
C7	PowerPoint	
C8	Food intake analysis using electronic aids (e.g. FoodFinder® or. Dietary Manager® analysis programme)	
C9	Advocate for nutrition-related issues.	
D	D. MANAGEMENT	
D1	Describe, interpret and apply human resource management principles	
D2	Role of the dietitian in preparation of the budget	
D3	Calculate operational budget - policies and budgetary constraints; recommendations and discuss factors that influence cost control.	
D4	Effectively manage aspects of a nutrition delivery service	
D5	Compile, implement, monitor and evaluate a business plan/project	
D6	Interpret, implement & integrate internal/ external policy and legislation	
D7	Discuss and interpret quality assurance principles and systems	
D8	Apply and manage quality assurance systems	
E	E. RESEARCH	
E1	Plan, write composite literature review, critically evaluating different viewpoints	
E2	Develop a research proposal and undertake the research	
E3	Evaluate a problem; identify research question/s and aims and objectives	

	A. SCREENING / NEEDS ASSESSMENT / SITUATION ANALYSIS	Module code(s) reference as proof of attaining of outcomes <i>(indicate all the module codes where a specific attribute is being addressed: e.g. A1: ABCD111, ADCD221, DCBA114, etc.)</i>
E4	Select the appropriate survey design when developing a research project	
E5	Different ways of obtaining data in order to select and use the appropriate methods	
E6	Put measures in place in order to ensure quality of data collected	
E7	Enter data into software programme – spread sheets and basic statistical software	
E8	Basic statistical procedures, selection of tests according to normality of the data	
E9	Critically discuss the findings of the study; compare them with similar studies	
E10	Plan and demonstrate a scientific presentation	
E11	Develop a research report, article and abstract	
E12	Critically evaluate results; appropriate and feasible recommendations	
F	F. INTRA-PROFESSIONAL CRITICAL CROSS-FIELD SKILLS, COMPETENCIES AND ATTRIBUTES	
F1	Comprehend and apply prescribed standards of practice and ethics	
F2	Perform tasks in a professional manner	
F3	Perform professional tasks without prejudice	
F4	Promote nutrition and - care as a basic human right	
F5	Participate and work effectively in health care team	
F6	Work effectively with peer group - complex tasks	
F7	Manage and organise activities responsibly and effectively	

A. SCREENING / NEEDS ASSESSMENT / SITUATION ANALYSIS		Module code(s) reference as proof of attaining of outcomes (indicate all the module codes where a specific attribute is being addressed: e.g. A1: ABCD111, ADCD221, DCBA114, etc.)
F8	Apply the nutritional care process- assessment, planning, intervention and evaluation.	
F9	Perform electronic data search and critical reviews of the literature	
F10	Present talks to diverse groups	
F11	Present information using audio visual and electronic media	
F12	Show sensitivity for diversity in dealing with clients.	
F13	Function in diverse groups and contexts	
F14	Solve problems in unspecified health and nutrition related contexts	
F15	Behave in a manner fitting to the profession and professional board	
F16	Perform self-study tasks	
F17	Take responsibility for own learning	
G. ETHICS*		Module code(s) reference as proof of attaining of outcomes (indicate all the module codes where a specific attribute is being addressed: e.g. A1: ABCD111, ADCD221, DCBA114, etc.)
G1	Display thorough understanding of ethical guidelines and standards for good clinical practice as pronounced by HPCSA	
G2	Show respect for patients and colleagues without prejudice, with an understanding and an appreciation of diverse of background and opportunity, language and culture	
G3	Strive to improve patient care, reduce inequalities in health care delivery, by optimizing the use of health care resources in societies	
G4	Use of professional capabilities to contribute to community and individual patient welfare	
G5	Demonstrate awareness, through action or in writing, of the legal and ethical responsibilities involved in individual patient care and the provision of care to populations	
G6	Consider the impact of healthcare on the environment and the impact of the environment on health	

A. SCREENING / NEEDS ASSESSMENT / SITUATION ANALYSIS		Module code(s) reference as proof of attaining of outcomes <i>(indicate all the module codes where a specific attribute is being addressed: e.g. A1: ABCD111, ADCD221, DCBA114, etc.)</i>
G7	Demonstrate knowledge, skills and attitudes consistent with professional ethical practice, human rights and medical law	
G8	Understand the need to refer to or consult with a variety of stakeholders, including practitioners with more professional ethics and human rights experience, or institutional ethics committees in making tough ethical decisions	
G9	Demonstrates an ability to engage in ethical reasoning and decision making	

* Source: Proposed Core Curriculum on Human Rights, Ethics and Medical Law for Health Care Practitioners – Compiled by: The Committee on Human Rights, Ethics and Professional Practice

- Add any skills, competencies and attributes not covered in the table, in a paragraph (if needed)
- Reflect on the content of the table above in short to indicate strong points and shortcomings identified, which should be addressed.
- Also include a complete list of accredited training sites used by your institution including the period of approval.

List of HPCSA Approved Training Sites			
Discipline	Name of Site	Date of Approval	Approval Period
Community			
Food Service			
Therapeutic			

QUESTIONNAIRE/GUIDELINES FOR SELF-EVALUATION OF UNDERGRADUATE PROGRAMME IN DIETETICS

1 MANAGEMENT/ GOVERNANCE/ SUPERVISORY STRUCTURES WITHIN THE HEI

1.1 Management structures

Please complete the following table:

Which body/bodies is/are responsible for the overall management of the learning programmes of the Faculty/School/Department?	What are the main functions of this body/these bodies?	What group(s) report to this body (these bodies), and what are their functions?	How is the membership of the various groups made up?	How are junior staff and students involved in the processes of these groups and bodies?

1.2 Supervisory structures

<p>Diagrammatic representation of the supervisory structure(s) responsible for managing the Faculty, School and /or Department (Organogram)</p>
<p style="text-align: center;">[Blank area for diagrammatic representation]</p>
<p>Diagrammatic representation of the supervisory structure(s) responsible for academic planning and support as well as managing the teaching and learning in the programmes of the Faculty, School and/or Department (Organogram)</p>
<p style="text-align: center;">[Blank area for diagrammatic representation]</p>

1.3 Explain the role of students in the management structures.

2. STUDENT AND STAFF PROFILE

2.1 Entrance requirements and selection procedures (entry qualification and description of selection procedures) (Complete set of supporting documents to be available at the institution)

2.2 Number of students i.e., actual numbers enrolled over the past five full academic years (from previous evaluation until current) according to gender and ethnic distribution per study year; undergraduate and post-graduate.

	20...					20...					20...					20..					20...					
	Male		Female			Male		Female			Male		Female			Male		Female			Male		Female			
	*B/ C/I	*W	B/C/ I	W	*ST	B/C /I	W	B/C/ I	W	*ST	B/C /I	W	B/C/ I	W	*ST	B/C/ I	W	B/C/I	W	*ST	B/C/ I	W	B/C /I	W	*ST	
1 st year																										
2 nd year																										
3 rd year																										
4 th year																										
Total																										
Hons (if any)																										
MSc																										
PhD																										
Total																										

Student profile should indicate evidence of how registration with HPCSA is managed
 Staff profile should indicate evidence of how registration with HPCSA is managed
 University should indicate how they deal with students who have moved out of the programme

*B/C = Black, Coloured, Indian (This information and breakdown is required by Department of Higher Education. They only have 2 categories, namely White and all the other, in this case B/C)

*W = White

*O = Other

*ST = Sub-total

2.3 State the number of students that graduated for the past five full academic years

Number of graduates							
	Male		Female		Total number of graduates	**Graduation rate	***Success rate
	B/C/I	White	B/C/I	White			
20..							
20..							
20..							
20..							
20..							
Total							

Reference: Statistics on Post-School Education and Training in South Africa: Released in March 2021, DHET (2019)

**Graduation rates (the number of students who graduate divided by the total number of students enrolled in that year). (A calculation based on the number of students who have graduated in a particular year, irrespective of the year of study, divided by the total number of students enrolled at the universities in that particular year.)

***Success rate expresses the proportion of the undergraduate credit values that students complete in a particular year as a proportion of those they enrol for in that year. A proportion of Full-Time Equivalent (FTE) passes relative to FTE enrolments at a Post-school education and training (PSET) institution.

The Department should request system administration to provide graduate and success rate.

2.4 Envisaged (planned) student enrolment numbers for the next five years (per year).

	Male		Female		Total
	*B/C/I	*W	B/C/I	W	
20..					
20..					

20..					
20..					
20..					
Total					

*B/C /I = Black, Coloured, Indian (This information and breakdown is required by Department of Higher Education. They only have 2 categories, namely White and all the other, in this case B/C/I)

*W = White

*O = Other

2.5 Indicate the transformation strategy used since the last formal DNB evaluation virtual/online and/or on-site to market the programme to diversify the student population (detailed documentation to be available during the evaluation virtual/online and/or on-site), as well as the challenges encountered during this process.

2.6 Academic/teaching staff profile of all staff members since last assessment

* Insert (or delete) extra rows in table where needed.

Insert all data for each staff member in one line.

ALSO Indicate the role of **retired** or **resigned** staff members during the past 5 years.

Name of staff member (Professor)	Part time	Full time	Permanently appointed (yes or no)	Educational qualifications (only give the highest qualification: e.g. PhD Dietetics OR MSc Diet, etc)	HPCSA registration number	Modules lectured for the last full academic year	Number of students for each module you lectured
Example: A Kemp (retired)		x	Yes	PhD Dietetics	DT 0001234	ABCD111 ABCD112 ABCD123	25 56 38
Name of staff member (Associate-professor)							

Name of staff member (Professor)	Part time	Full time	Permanently appointed (yes or no)	Educational qualifications (only give the highest qualification: e.g. PhD Dietetics OR MSc Diet, etc)	HPCSA registration number	Modules lectured for the last full academic year	Number of students for each module you lectured
Name of staff member (Senior lecturer)							
Name of staff member (Lecturer)							
Name of staff member (Junior lecturer)							
Name of staff member (Support staff)							

Give a general interpretation of the staff profile for the past 5 years.

2.7 Calculate the overall student: FTE staff ratio.

Use the information given in point 2.2 to execute the calculation:

Total number of staff head count (a)	a =	Total number of full time enrolled student head count (b)	b =	Calculate: Student numbers ÷ staff numbers = staff ratio*
Total number of staff members involved in teaching-learning (<i>excluding temporary staff members at training facilities</i>)		All students enrolled for all the modules lectured by staff (a) from 1 st to 4 th year are calculated and used in the equation.		b ÷ a = student: staff ratio

* Higher ratio means more students per staff member. There is no recommended average ratio, but if the ratio is too high, it may be detrimental to training of students and overworked staff members.

Example:

Total number of staff members (a)	a = Staff FTE's - 10.29 a = staff headcount 10	Total number of full-time enrolled students (FTS) (b)	b = Students FTE's - 99.838 b = student head count 115 in 2014	Calculate: Student numbers ÷ staff numbers = FTE staff ratio*
Total number of staff members involved in teaching-learning (<i>excluding temporary staff members at training facilities</i>)		All students enrolled for all the modules are calculated and used in the equation.		b ÷ a = FTE staff ratio: 99.838/10.29 = 9.70 b ÷ a = 115/10 = 11.5

According to CHE (Vital stats Public Higher Education, 2014, page vi; "the student: staff ratio refers to the average number of students per academic staff and gives an indication of the average teaching load carried by each academic staff member and it is calculated by dividing the number of FTE academic staff by the number of FTE students". According to CHE (2014, p57) the staff: student ratio using headcount for permanent staff was 1:55 and when using staff and student FTEs 1:26 in 2012 for all Higher Education Institutions, and for SET including Health Science at 1:20.

2.8 Research and publication profile

** Insert (or delete) extra rows in table where needed. Use only 1 line for each staff member. Also add information for retired or resigned staff for the past 5 years.
A complete set of outputs to be made available at the evaluation virtual/online and/or on-site(include all peer reviewed articles, chapters in books, books, peer reviewed conference proceedings, etc).*

Name of staff member	Publication outputs for the past 5 years for each individual staff member (<i>only total number: n=...</i>) (<i>Add a publication list as an Annexure</i>)

2.9 Supervision of MSc and PhD students

Indicate in the table the participation in post-graduate supervision during the past 5 years:

Name of Lecturer	Masters supervision (*n)	PhD supervision (*n)	Supervisor / Promotor (*n)	Co-supervisor / Co-promotor (*n)
<i>Example</i>	<i>10</i>	<i>5</i>	<i>5/3</i>	<i>5/2</i>

*n= number

3 QUALIFICATION/PROGRAMME, CURRICULUM, CONTENT AND ORGANISATIONAL DESIGN

3.1 State the:

3.1.1 Educational and curriculum design philosophy, and

3.1.2 The teaching, learning and assessment policy of the Faculty, School or Department.

(Detailed information to be available during the evaluation (virtual/online and/or onsite))

3.2 Programme details:

NQF level	Modules <i>(list the module name and code in relevant line)</i>		Number of credits/module	Number of *notional hours/module	Number of hours of lectures per week/module [e.g. 6h:ABCD123]	Number of hours of group work per week/module <i>(indicate size of groups)</i> [e.g. 12 hours: n=6]	Number of hours of directed/ self-directed learning/ structured self-study/week <i>(Per year group OR per block OR phase).</i>	Describe the support students receive for self-directed learning <i>(Elaborate in a paragraph if needed)</i>
	Name and module code	Indicate 1 st , 2 nd semester OR full year module						
5 (1 st year)								
6 (2 nd year)								
7 (3 rd year)								
8 (4 th year)								
Total:								

*10 notional hours = 1 credit

Note: When descriptions such as sufficient or adequate is used during report writing, it should be quantified

3.3 Briefly describe the content of the programme offered

3.4 Describe the special features, emphases and challenges of the programme.

- 3.5 Describe the structures in place to manage continuous curriculum design, development and review.
- 3.6 Describe, in detail, the role of students and alumni in the curriculum development and review processes.
- 3.7 Describe interdepartmental co-operation in curriculum development (e.g. Physiology, Biochemistry, Food Sciences, Chemistry, etc).
- 3.8 How is a community-based and primary health care approach reflected in your programme design (e.g. WIL)? Briefly reflect.

4 **AIM, RATIONALE, PURPOSE AND OUTCOMES OF THE PROGRAMME**

- 4.1 Aim/broad purpose of the programme (macro-level).
- 4.2 Briefly reflect on the exit-level outcomes of your programme (what capabilities constitute the overall competence?)
- 4.3 Reflect on the specific outcomes (in terms of knowledge, skills & attitudes; abilities and ethical behaviour) students must demonstrate to be considered capable in terms of exit-level outcomes (Refer to ANNEXURE A).
- 4.4 What materials/aids do students receive (e.g. study guides, student manuals, portfolios, training kits, etc.) to ensure that constructive learning is taking place for the duration of the programme?
- 4.5 Explain how the burden of factual overload is reduced without sacrificing quality, while referring to Table with Specific outcomes in Annexure A.
- 4.6 Explain how your programme content is integrated and designed:
 - 4.6.1 Vertical and horizontal integration (by means of a ***diagram***)
 - 4.6.2 If your programme is still strictly discipline-based with no (*or almost no*) vertical and horizontal integration, please justify that approach while taking into consideration your university, faculty and programme aims, objectives and philosophy? If you should require any assistance while answering this question, please contact the evaluators of your programme.

5. KNOWLEDGE BASIS OF STANDARDS OF THIS PROGRAMME (TEACHING, LEARNING AND ASSESSMENT) AND HOW IT RELATES TO GRADUATE ATTRIBUTES (Annexure B)

5.1 Teaching, Learning and Assessment

5.1.1 The teaching, learning and assessment philosophy of the School/Department.

5.1.2 Innovation in teaching and learning and assessment (focus on independent learning, group work, multi-professional co-operation)

5.1.3 Instructional methods and techniques mostly used for teaching and learning (complete the following table):

(Use the same information as in Programme Detail (Section 3.2) to populate the 3 columns on the left-hand side of this table)

	Modules (list the module name and code in relevant line)		Instructional methods and techniques	Indicate any problems you may experience with the instructional method (e.g. <i>classroom size, classroom layout, absence of multimedia, number of training sites, etc.</i>) and suggest solutions for it.
NQF level	<i>Name and module code</i>	<i>Indicate 1st, 2nd semester OR full year module</i>		
5 (1 st year)				
6 (2 nd year)				
7 (3 rd year)				
8 (4 th year)				
Total:				

- 5.2 Describe the extent to which resource-based learning is utilised, including the internet.
- 5.3 Give a brief summary of special regulations to ensure quality of the end-product, in other words, the student graduate (e.g. re-evaluations, repeating modules/academic years; electives; class attendance; clinical residency, student facilitation/assistance, supplemental instruction, development of generic skills set, etc.).
- 5.4 What systems are used for the assessment of student learning (e.g. *diagnostic, formative, summative and evaluative assessment).
- *(Diagnostic assessment is a type of assessment which examines what a student knows and can do prior to a learning program being implemented. Assessment of students' skills and knowledge upon entry to the program provides a baseline against which to assess progress. It is particularly important in re-engagement programs due to the complex learning needs of students in these programs, which must be taken account of in design and delivery of the individual learning program).*
- 5.5 How are the achievements of students in terms of generic skills assessed?
- 5.6 Describe the assessment criteria employed in the academic and practice setting and the relevancy thereof (how will the assessor know the learner is competent in/capable of performing a certain task according to set standards?) (For this question cross-reference to ANNEXURE A is permissible).
- 5.7 Are the assessment criteria known to students as well as staff? How are they informed? Reflect on formative and summative assessment, and on self- and peer assessment.
- 5.8 Does the assessment system encourage appropriate learning skills and reduce emphasis on uncritical acquisition of facts (rote learning)? How do you know/ensure that? Please explain.
- 5.9 Does the assessment structure reflect the educational approach (e.g., subject specific, integrated assessment in an integrated programme; problem-based assessment in a problem-based approach)? Please explain (for example: *Provide appropriate examples where the linkages between theoretical knowledge in lower levels, i.e., 2nd year knowledge of maternal nutrition and exclusive breastfeeding is built onto when in following levels the development of evidence-based policy is taught. Then, when the implementation of all prior knowledge and understanding is assessed through using the Mother Baby Friendly Initiative [MBFI] assessment tool, student must be able to write a report with recommendations and furthermore reflect on this experience).*
- 5.10 Describe the external evaluation and examination or moderation systems (processes) for the programme (modules). Also reflect on the role of the external examiner in ensuring quality control (*Detailed documents of evaluations for all third and fourth year dietetic modules to be available during the evaluation (virtual/online and/or onsite).*).
- 5.11 Which academic staff development processes/programmes regarding teaching, learning and assessment practices are in place? Add details of formal or informal processes/programmes if possible. Also explain if these are not available at all.

6. STUDENT DEVELOPMENT, SUPPORT AND GUIDANCE AND HOW IT RELATES TO THE ETHICAL GUIDELINE PRINCIPLES (available on HPCSA website: www.hpcs.co.za)

- 6.1 Provide details of the yearly induction/orientation programme for enrolled students at university and programme level
- 6.2 Briefly describe:
 - 6.2.1 The systems which are in place to ensure that students have sufficient academic support during the early years (1st-2nd year at least)
 - 6.2.2 The mentoring/tutoring (or similar) system in place whereby senior students/lecturers act as mentors to students.
- 6.3 Briefly describe what systems are in place to ensure that students have sufficient personal support from Faculty, School or Department in both the early years and the practice training (experiential learning in hospitals or communities)?
- 6.4 What mechanisms are in place to identify students with academic and/or personal problems, and how are these problems approached?
- 6.5 Briefly describe how you ensure the development of students' generic skills; also refer to the resources and modules that are used for the development of these skills? (You may refer to section F in Annexure B).
- 6.6 How does the programme/department/division ensure that students are properly exposed (intra and extra curricula) to practise dietetics in a diverse society?
- 6.7 How are the following generic skills set for students developed in the practice (WIL) setting:
 - 6.7.1 Professional conduct and role modelling.
 - 6.7.2 Working as a team (including multi-professional teamwork).
 - 6.7.3 Attention to bio-psycho-social (human rights) elements of patient/client's care.
 - 6.7.4 Promotion of the concept of integrated and holistic patient/client care.
 - 6.7.5 Equipment of students to deal with patients with highly infectious diseases (measures in place).

7. RESOURCES

- 7.1 Describe how the availability of resources (e.g. libraries, other information centres, information technology/computer centres, hospitals, clinics, community, simulation labs, food labs, IT software, i.e. *FoodFinder*®, etc.) facilitate student learning?
- 7.2 Indicate which of the following resources (equipment) are available for teaching/training for Therapeutic Nutrition, Community Service, and Foodservice Management.

AVAILABLE RESOURCES	Yes/No
Scale (adults)	
Scale (Baby)	
Scale [body composition]	
Scale (for small weight ingredients: FSM)	
Scale (for large scale ingredients: FSM)	
Stadiometer (fixed, wall mounted)	
Stadiometer (non-fixed, portable)	
Measuring mat (Height) for babies	
Calipers (Harpندن)	
Calipers (plastic)	

AVAILABLE RESOURCES	Yes/No
Measuring tapes (general haberdashery)	
Measuring tape Lufkin (non-stretchable)	
Clip boards for data capturing	
Calculators	
Blood glucose monitor	
Cholesterol monitor	
Haemoglobin monitor and cuvettes	
Blood pressure monitors	
Thermometers and probes	
Measuring cups (set = 250 ml)	
Measuring cups/jugs (250 - 1000 ml)	
Measuring jugs (> 1 l)	
Mixing bowls of different, appropriate sizes	
Electric hand mixer (table model)	
Electric large scale mixer (floor model)	
Knife sets for multi purposes	
Cutting boards: colour coded for different area usage	
Electric stove: household	
Electric stove: industrial	
Gas stove: household	
Gas stove: industrial	
Combination steamer	
Tilting frying pan	
Steam jacketed kettles/pots	
Oil jacketed kettles/pots	
Water jacketed kettles/pots	
Store room for chemicals	
Store room for groceries (Dry food)	
Store rooms/fridges for perishable goods	
Fridges for meat and meat products	
Fridges for milk and milk products	
Fridges for fresh vegetables	
Freezers	
Other: indicate and give relevant details	

- 7.3 Describe the **practice settings and all other physical facilities** in terms of appropriateness, efficiency, accessibility and effectiveness. d
- 7.4 Describe the **teaching venues/group rooms and related facilities/services** in terms of suitability and appropriateness, size and accessibility, fitness for the purpose etc.
- 7.5 To what extent does the provision or lack of provision of facilities and equipment influence teaching, learning, research and services in the School or Department? Briefly reflect (refer to 5.1).
- 7.6 Describe the student administration and support facilities (e.g. health clinic, academic assistance, registration, etc) (Detailed information should be available during the evaluation (virtual/online and/or onsite)).

8 FINANCES

- 8.1 Describe the operational financial situation in the School or Department with reference to dependence on state subsidies (e.g. Clinical Training Grant), provincial health department support, own funding, etc.
- 8.2 To what extent does the financial situation in your Faculty, School or Department influence the educational process delivery of the programme? Briefly reflect.

9. STAFF DEVELOPMENT

- 9.1 Describe **(for the staff)** the research support services, as well as the academic staff support and development resources and facilities in terms of applicability, appropriateness, sufficiency, efficiency and effectiveness, etc.
- 9.2 Describe the training given to staff in programme/curriculum design, instructional strategies and methods, assessment, student support, and other related matters. Indicate the frequency of training sessions, and whether these are optional or compulsory.
- 9.3 Describe the training of on-site supervisors (involved in the training of under-graduate students) in educational methods and techniques, assessment of students, student counselling and support.
- 9.4 Describe any initiatives undertaken to promote teaching-learning as a valuable activity, and state whether and how teaching-learning excellence is rewarded.
- 9.5 Describe any initiatives to promote educational (teaching-learning) research, and whether and how this is recognised and rewarded.
- 9.6 Describe any initiatives to promote community engagement and whether and how this is recognised and rewarded
- 9.7 Describe any other initiatives/interventions in the field of academic staff development and support in the Faculty, School or Department, and state who takes responsibility for these activities.

10. QUALITY ASSURANCE AND ENHANCEMENT

- 10.1 What mechanisms are in place for **assessing and enhancement** of the **quality** of -
- teaching and learning in the Faculty, School or Department;
 - teaching and learning in a clinical context (i.e. in hospitals, community, foodservice, etc.);
 - instructional materials;
 - student support and development;
 - staff development; and
 - assessment procedures.
- 10.2 What **remedial/developmental** actions are taken in each of these when quality is found to be lacking/improvement is required:
- teaching and learning in the Faculty, School or Department;
 - teaching and learning in a clinical context (i.e. in hospitals, community, foodservice etc);
 - instructional materials;

- student support and development;
- staff development; and
- assessment procedures.

10.3 Is these self-evaluation documents (Annexure A and b) with a view to evaluation, the only self-evaluation exercise of the programme? Describe any other self-evaluation processes in place in the Faculty, School or Department and how it is implemented in program renewal.

11 HUMAN RIGHTS, ETHICS AND MEDICAL LAW

Give evidence of the inclusion of the “Proposed core curriculum on Human Rights, Ethics and Medical Law for Health Care Practitioners” (**Human Rights Core Curriculum -Dhais FINALE EDITION 10.11.061**: 2 September 2011). You may refer to Annexure A - section G. Evidence should be made available during the evaluation (virtual/online and/or onsite).

**HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA
PROFESSIONAL BOARD FOR DIETETICS AND NUTRITION**

**RECOMMENDED STRUCTURING OF AN EVALUATION REPORT FOR DIETETICS
PROGRAMMES**

Name of University	
Name of Faculty	
Name of School (if applicable)	
Name of Department	
Name of undergraduate programme (as registered with SAQA)	
SAQA registration number	
Qualification delivered	
Questionnaire (Annexure B) completed by:	
Questionnaire (Annexure C) completed by:	
Date of completion of the report:	
Date submitted to the PROFESSIONAL BOARD FOR DIETETICS AND NUTRITION	

VISITING PANEL MEMBERS

Names

THE MAIN TASKS OF THE VISITING PANEL

- To analyse the Self-Assessment Report (SAR) prior to the virtual/online or on-site evaluation of the Institution.
- To gather evidence during the Institution virtual/online or on-site evaluation
- To write the Quality Assessment Report (Annexure D)
- To recommend approval/ re-approval/ provisional approval or no approval

PROGRAMME

(Insert copy of final programme here)

A brief summary of the Education and Training programme and information on Committees, groups and persons interviewed during the virtual/online or on-site evaluation to be given and/ or the programme of the virtual/online or on-site evaluation could be attached as an annexure to the document.

EVALUATION OF THE SELF-ASSESSMENT REPORT OF THE SCHOOL OR DEPARTMENT

Comments on the comprehensiveness, quality, etc.

SPECIFIC COMMENTS

1.1 MANAGEMENT/ GOVERNANCE/ SUPERVISORY STRUCTURES WITHIN THE INSTITUTION

1.1.1 Management and organisational structures

1.1.2 Supervisory structures

1.2. STUDENT AND STAFF PROFILE

1.2.1 Entrance requirements and selection procedures (entry qualification and description of selection procedures)

1.2.2 Number of students i.e. actual numbers enrolled over the past five full academic years (from previous evaluation until current) according to gender and ethnic distribution per study year; undergraduate and post-graduate.

1.2.3 Number of students that graduated for the past five full academic years.

1.2.4 Envisaged (planned) student enrolment numbers for the next five years (per year).

1.2.5 Transformation strategy used to market the programme to diversify the student population.

1.2.6 Academic/teaching staff profile (according to rank and qualification)

1.2.7 The overall student: staff ratio.

1.2.8 Research and publication profile of staff for the past 5 years.

1.3 QUALIFICATION, PROGRAMME, CURRICULUM, CONTENT AND ORGANISATIONAL DESIGN

1.3.1 Curriculum design and philosophy

1.3.1.1 Educational and curriculum design philosophy;

1.3.1.2 The teaching, learning and assessment policy of the Faculty, School or Department.

1.3.2 Programme and details:

1.3.2.1 Time allocated for reflection and self-study.

1.3.2.2 Duration of the programme.

1.3.2.3 Number of credits.

1.3.2.4 National Qualifications Framework (NQF) Level of the programme.

1.3.3 Content of the programme offered (teacher-centred or student-centred; discipline-based or integrated; content-driven or outcomes-based, knowledge (facts) acquisition or problem-driven; community- or hospital based; etc.)

1.3.4 Special features/emphases of the programme.

1.3.5 Structures in place to manage curriculum design/development and review; innovation in curriculum development and review.

1.3.6 Role of students and alumni in the curriculum development and review processes.

1.3.7 Interdepartmental co-operation in curriculum development.

1.3.8 Is a community-based and primary health care approach reflected in the programme design?

1.3.9 Quality of curriculum documents available such as study guides with an organisational and study component containing learning outcomes and references of reading material.

1.4 AIM, RATIONAL, PURPOSE AND OUTCOMES OF THE PROGRAMME

- 1.4.1 Aim/broad purpose of the programme (macro-level).
- 1.4.2 The exit-level outcomes of the programme (what capabilities constitute the overall competence?)
- 1.4.3 Specific outcomes (in terms of knowledge, skills & attitudes; abilities and ethical behaviour) students must demonstrate to be considered capable in terms of exit-level outcomes.
- 1.4.4 What materials/aids do students receive (e.g. study guides, student manuals, portfolios, training kits, etc.) to ensure that constructive learning is taking place for the duration of the programme?
- 1.4.5 How was the burden of factual overload (curriculum load) reduced without sacrificing quality?
- 1.4.6 Programme content integration and design:
 - 1.4.6.1 Vertical and horizontal.
 - 1.4.6.2 If the programme is still strictly discipline-based with no (*or almost no*) vertical and horizontal integration, please justify that approach while taking into consideration the university, faculty and programme aims, objectives and philosophy?

1.5. KNOWLEDGE BASIS OF STANDARDS OF THIS PROGRAMME (TEACHING, LEARNING AND ASSESSMENT) AND HOW IT RELATES TO GRADUATE ATTRIBUTES (Annexure B)

- 1.5.1 Teaching, Learning and Assessment
 - 1.5.1.1 The teaching, learning and assessment philosophy of the School/Department.
 - 1.5.1.2 Innovation in teaching and learning and assessment (focus on independent learning, group work, multi-professional co-operation).
 - 1.5.1.3 Instructional methods and techniques mostly used for teaching and learning.
- 1.5.2 Extent to which resource-based learning is utilised (e.g. use of library, internet, etc.).
- 1.5.3 Special regulations to ensure quality of the end-product and development of students' generic skills (e.g., communication, writing, reading and information gathering skills, etc.).
- 1.5.4 Systems used for the assessment of student learning (e.g., *diagnostic, formative, summative and evaluative assessment).
- 1.5.5 Assessment of students' achievements in terms of generic skills? (e.g. students' level of computer literacy).
- 1.5.6 Assessment criteria employed in the academic and practice setting.
- 1.5.7 Were the assessment criteria known to students as well as staff? How were they informed? Relevancy of assessment modalities utilized.
- 1.5.8 Does the assessment system encourage appropriate learning skills and reduce emphasis on uncritical acquisition of facts (rote learning)? How do you know/ensure that?
- 1.5.9 Does the assessment structure reflect the educational approach (e.g., subject specific, integrated assessment in an integrated programme; problem-based assessment in a problem-based approach)?
- 1.5.10 Structures or moderation systems (processes) in place to ensure fair, valid and reliable external evaluation and examination for the programme (modules).
- 1.5.11 Academic staff development regarding teaching, learning and assessment practices.

1.6. STUDENT DEVELOPMENT, SUPPORT AND GUIDANCE

- 1.6.1 The relevancy and comprehensiveness of the yearly induction/orientation programme for enrolled students at university and programme level
- 1.6.2 Briefly describe:
 - 1.6.2.1 The systems which are in place to ensure that students have sufficient academic support during the early years
 - 1.6.2.2 The mentoring/tutoring (or similar) system in place whereby senior students/lecturers act as mentors to students

- 1.6.3 Systems in place to ensure that students have sufficient personal support from Faculty, School or Department in both the early years and the practice training (experiential learning in hospitals or communities).
- 1.6.4 Mechanisms in place to identify students with academic and/or personal problems, and how these problems are approached.
- 1.6.5 The development of students' generic skills; also refer to the resources and modules that are used for the development of these skills (Section F in Annexure B).
- 1.6.6 The programme/department/division ensure that students are properly exposed (intra and extra curricula) to practise dietetics in a diverse society.
- 1.6.7 Generic skills set for students developed in the practice (WIL) setting:
 - 1.6.7.1 Professional conduct and role modelling.
 - 1.6.7.2 Working as a team (including multi-professional team work).
 - 1.6.7.3 Attention to bio-psycho-social (human rights) elements of patient/clients care.
 - 1.6.7.4 Promotion of the concept of integrated and holistic patient/client care.
 - 1.6.7.5 Equipment of students to deal with patients with highly infectious diseases (measures in place).

1.7. RESOURCES

- 1.7.1 The availability of resources (e.g., libraries, information technology/computer centres, practice teaching and learning facilities such as hospitals, clinics, community, skills laboratory, food labs, food software IT, etc.) to facilitate student learning.
- 1.7.2 Resources (equipment) available for teaching/training for Therapeutic Nutrition, Community Service, and Foodservice Management.
- 1.7.3 **Practice settings and other physical facilities** in terms of appropriateness, efficiency, accessibility and effectiveness.
- 1.7.4 Teaching venues/group rooms and related facilities/services in terms of suitability and appropriateness, size and accessibility, fitness for the purpose etc.
- 1.7.5 To what extent does the provision or lack of provision of facilities and equipment influence teaching, learning, research and services in the School or Department? Briefly reflect (refer to 5.1).
- 1.7.6 Student administration and support facilities (e.g., health clinic, academic assistance, etc) (Detailed information should be available during the virtual/online or on-site evaluation).

1.8 FINANCES

- 1.8.1 Operational financial situation in the School or Department with reference to dependence on state subsidies (e.g. Clinical Training Grant), provincial health department support, own funding, etc.
- 1.8.2 The impact of the financial situation on the educational process delivery of the programme.

1.9. STAFF DEVELOPMENT

- 1.9.1 Research support services for staff, *as well as the* academic staff support and development resources and facilities in terms of applicability, appropriateness, sufficiency, efficiency and effectiveness, etc.
- 1.9.2 Training given to staff in programme/curriculum design, instructional strategies and methods, assessment, student support, and other related matters. Indicate the frequency of training sessions, and whether these are optional or compulsory.
- 1.9.3 Training of on-site supervisors (involved in the training of under-graduate students) in educational methods and techniques; assessment of students, student counselling and support.
- 1.9.4 Initiatives undertaken to promote teaching-learning as a valuable activity, and whether and how teaching-learning excellence is rewarded.
- 1.9.5 Initiatives to promote educational (teaching-learning) research, and whether and how this is recognised and rewarded.

- 1.9.6 Initiatives to promote community engagement and whether and how this is recognised and rewarded.
- 1.9.7 Other initiatives/interventions in the field of academic staff development and support in the Faculty, School or Department, and who takes responsibility for these activities.

1.10. QUALITY ASSURANCE AND ENHANCEMENT

- 1.10.1 Mechanisms/structures in place for assessing and enhancement of the **quality** of -
- teaching and learning in the Faculty, School or Department;
 - teaching and learning in a clinical context (i.e. in hospitals, community, foodservice, etc.);
 - instructional materials;
 - student support and development;
 - staff development; and
 - assessment procedures.
- 1.10.2 Remedial/developmental actions taken in each of these when quality is found to be lacking/improvement is required:
- teaching and learning in the Faculty, School or Department;
 - teaching and learning in a clinical context (i.e. in hospitals, community, foodservice etc);
 - instructional materials;
 - student support and development;
 - staff development; and
 - assessment procedures.
- 1.10.3 Is this self-evaluation documents (Annexure B and C) with a view to evaluation, the only self-evaluation exercise of the programme? Describe any other self-evaluation processes in place in the Faculty, School or Department.

1.11 HUMAN RIGHTS, ETHICS AND MEDICAL LAW

- 1.11.1 Give evidence of the inclusion of the “Proposed core curriculum on Human Rights, Ethics and Medical Law for Health Care Practitioners” (**Human Rights Core Curriculum -Dhai FINALE EDITION 10.11.061: 2 September 2011**) as well HPCSA Ethical Guideline Booklets. You may refer to Annexure B- Section G. Evidence should be made available during the virtual/online or on-site evaluation.

1.12 **Descriptive notes about the interviews with all year groups** (at least 3 students per group to ensure anonymity). Include the following information (not an exhaustive list):

- Is proper study guides available?
- Handbooks and reference material?
- Access to computers while at the training site?
- Accommodation?
- How far do they travel each day?
- Is there proper supervision at the training facility?
- How regularly does the lecturer visit?
- Do they have regular meetings with the academic staff at the university?
- How regularly do they submit assignments? In what format?
- When do they receive their marked assignments back?
- Do they have the opportunity to evaluate the program?

- Time allocated to the specific topic, is it enough? Do they learn what they are supposed to learn?
- Etc.....

1.13 Descriptive notes about the interviews with all staff members and accredited training staff at training sites for the different training areas (*Therapeutic Nutrition, Foodservice Management, Community Nutrition, and Research*)

GENERAL AND SPECIFIC RECOMMENDATIONS

Comments on strengths and weaknesses: specific mention of commendable features of the programme; recommendation as to the enhancement of the quality of the programme.

Commendable features:

- 1.
 - 2.
 - 3.
 - 4.
- (add as many numbers as required)

Recommendations:

- 1.
 - 2.
 - 3.
 - 4.
- (add as many numbers as required)

RECOMMENDATION REGARDING APPROVAL

Period of approval to be specified:

Option	Mark one applicable selection	Date of decision	Motivation
Recommend approval (new programmes)			
Recommended re-approval			
Provisional approval			
No approval			

THE EVALUATION PROCESS WITH TIMELINES

All parties (HEI and Board) must abide by the timelines specified in the programme:

PRE-PROGRAMME APPROVAL: UNIVERSITY NAME:			ALLOCATED DATE OF APPROVAL:
Responsibility	Action	Timelines	Remarks/Date schedule
Professional Board	Schedule each institution's education and training programme for evaluation at least once during its 5-year term of office	First meeting post inauguration of the Board	
	Schedule the particular institution's programme evaluation and virtual/online or on-site evaluation to occur during the Institution's academic year	ETR to plan for HEIs evaluation at least one year before the virtual/online or on-site evaluation	
	Plan annual training session for evaluators. Constitute a pool of evaluators for the panel according to the guideline for appointment of evaluators. See Addendum?	ETR to constitute a pool of evaluators within the first year of its term of office and update annually.	
	Appoint the members of the evaluation panel	Cycle of Evaluations at HEIs and appointment of evaluation panel is a standing point on ETR and DNB agenda. Appointment of evaluation panels to be finalised at least one year before the virtual/online or on-site evaluation.	
Board administration	Notify the Institution & provide guidelines. Notify the members of the evaluation panel of appointments & send Code of Conduct	Notify HEI and panel members at least six months before the virtual/online or on-site evaluation.	
Evaluators	Accept /Decline appointment. Sign Code of Conduct	Within twenty working days (1 month) of receipt of notification	

Board administration	Send members of the panel documents reflecting the Criteria for Evaluation	Within a week of receipt of acceptance & Code of Conduct	
HEI	Submits to Board Secretariat: <ul style="list-style-type: none"> • Self-Review Report • Proposed (Draft) programme for the virtual/online or on-site evaluation Plan. • Academic and Clinic Schedules 	Six weeks prior to virtual/online or on-site evaluation	
Board administration	Submits to the evaluation panel the institution's documents i.e. <ul style="list-style-type: none"> • Self-Review Report • Proposed programme for the virtual/online or on-site evaluation Plan • Academic and Clinic Schedules • Previous Evaluation Report 	Immediately upon receipt	
Evaluation Panel	Reviews programme and Self-evaluation report (SER). and consult with the other members of the panel and make suggestions for amendments to the institution's program and SER	At least three weeks before the date of the virtual/online or on-site evaluation	
Board administration	Communicates evaluation panel's suggestions for amendments programme and SER to HEI.	At least two weeks before the date of the virtual/online or on-site evaluation	
HEI	Submit class lists and additional documents (See Point 9.3)	At least two weeks before the date of the evaluation	
DURING PROGRAMME EVALUATION			
Board Secretariat	Facilitates communication between all parties	When required	
Evaluation Panel	Conducts virtual/online or on-site evaluation and programme evaluation.	First three days of virtual/online or on-site evaluation or hybrid.	

POST EVALUATION		
Evaluation Panel	Drafts the report	Fourth day of virtual/online or on-site evaluation
	Submit to Board Secretariat the draft final report on the programme evaluation	Within two weeks of the virtual/online or on-site evaluation
Board administration	Sends the institutions a copy of the draft final report on the programme evaluation to the HEI immediately in receipt of document from panel.	Immediately
HEI	Review and respond to DNB, in writing, to the factual correctness of the report, and add any additional information of importance.	The HEI should respond to the draft final report within three weeks of receipt thereof. Should the institution have a problem with this timeframe, they should inform the Board Management of the final date of submission attainable, in writing. No more than 2 weeks extension for final comments will be granted.
Convenor of assessment panel	Return comments to the panel for consideration and finalization of the report.	Within two weeks following receipt of the comments from HEI.
Professional Board (DNB)	<u>Final Evaluation report tabled at first DNB after finalisation of Evaluation Report for approval</u> status even if late for Agenda.	First DNB after finalisation.
Board administration	Notify institution that the DNB has finalised the Evaluation. Send pro-forma invoice to the institution.	Within two weeks after DNB
HEI	Pay Evaluation fee as soon as possible	
Board administration	Submit Final Evaluation Report and letter of approval decision to HEI.	Within two weeks after DNB meeting
HEI	Submits a plan of action, indicating how matters arising will be addressed, specifying timeframes and resource allocation.	Within <u>one month</u> of receipt of the Board's decision and approval letter.

ETR	Review and approve the Plan of Action	Within two weeks of receipt of the plan	
HEI	Implement Plan of Action	As soon as is possible	
Secretariat	Follow up on dated recommendations	As indicated in recommendations	
ETR	To assess progress report and respond.		

ANNEXURE E: DISPUTES HANDLING AND APPEALS

1. An appeals process is available to any HEI and/or clinical training site whose application for approval was rejected, or which is awarded conditional approval pending compliance with conditions set for full approval.
2. The lodged appeal shall be submitted as an agenda item to the Education and Training Registration Committee (ETRC) of the relevant Professional Board.
3. Appeals shall be lodged using the prescribed Appeals Application Form, within 30 days after the final decision by the Professional Board.

ANNEXURE F: RECOMMENDATIONS' TRACKING FORM for DNB - FOR OFFICIAL USE ONLY

SECTION A

Name of University/Institution	
Name of Faculty	
Name of School (if applicable)	
Name of Department (if applicable)	
Name of undergraduate programme (as registered with SAQA)	
SAQA registration number	
Qualification delivered	
Annexure A OF SER completed at HEI by: DATE:	
ANNEXURE B OF SER completed at HEI by: DATE:	
Date of completion of the final report for DNB	
Name of Convenor	
Names of Evaluation team	

SECTION B

(*Add lines as needed in the table)

PANEL'S RECOMMENDATIONS	DATE SUBMITTED TO ETR COMMITTEE	COMMENTS

--	--	--

SECTION C

(*Add lines as needed in the table)

ETR COMMITTEE RECOMMENDATIONS	DATE SUBMITTED TO PANEL	COMMENTS

SECTION D

REPORTING FRAMEWORK

(*Add lines as needed in the table)

NAME OF UNIVERSITY	REQUESTED INFORMATION	DATE	RESPONSE FROM THE UNIVERSITY	DATE	COMMENTS

SECTION E

PERIOD OF EVALUATION TO BE SPECIFIED:

	*Option (period of evaluation to be indicated)	Date of decision	Additional comments as needed
Recommend evaluation (new programmes)			
Recommended re-evaluation (previously evaluated programmes)			
Provisional evaluation (previously evaluated programmes)			
No evaluation (previously evaluated programmes)			

**Mark one applicable selection*

ANNEXURE G: DNB GUIDELINE WITH CRITERIA FOR EVALUATION PANEL MEMBERSHIP, THE EVALUATION PANEL AND THE EVALUATION REPORT

1. OBJECTIVES OF EVALUATION

- 1.1. To develop and review the criteria and guidelines for the evaluation of the educational effectiveness of the relevant programmes with a view to ensuring appropriate standards, and where applicable improvement of academic standards in the education and training of students.
- 1.2. To improve the quality of education and internship training programmes in dietetic and nutrition programmes.
- 1.3. To guarantee the quality of education and training to all users, concerned bodies and individuals in that evaluation is linked to standards.
- 1.4. To provide clear criteria and guidelines and set minimum requirements for curricula and programmes and to review every five years.
- 1.5. To promote comparability and equality of standards in nutritionist and dietetics training facilities in South Africa.

2. PRINCIPLES AND VALUES

- 2.1. Criteria used for evaluation should be explicit and made known to all parties involved in the process.
- 2.2. There should be periodic re-evaluation and re-approval of programmes to ensure maintenance of quality and, where necessary, quality improvement/enhancement.
- 2.3. Cognisance must always be taken of the autonomy of institutions/ facilities requiring a spirit of cooperation and a fine balance with regard to the respective responsibilities and powers of the Board and academic institutions.
- 2.4. Information regarding the purpose, underlying principles, functions and procedures is to be made available to all parties concerned on a continuing basis. The process used should promote the self-regulation of training academic institutions by promoting internal self-evaluation and the maintenance of quality in education and training.
- 2.5. There should be no attempt to restrict diversity in instructional methods and curriculum content – the minimum or core curriculum as prescribed by the Board (where applicable) must of course be adhered to, but within that broad framework, and beyond the core, Faculties should still be allowed academic freedom with regard to strategies, medium of instruction, approaches and the way in which the curriculum is organised over the various study years.
- 2.6. The curriculum should be reviewed and revised periodically to ensure that national and international developments and newer technologies and tools that support teaching, learning and assessment, are taken into account.
- 2.7. It should be clear to all concerned, that the evaluation process is not inherently punitive in nature, but rather supportive, encouraging and developmental, fair and objective.

3. CRITERIA FOR EVALUATION PANEL MEMBERSHIP

- 3.1. Relevant and in-depth knowledge of educational processes is desirable.
- 3.2. In good professional standing, including CPD.
- 3.3. Familiarity with the health and education issues related to national and international trends is desirable.
- 3.4. The convener of the panel should preferably be a current member of the Professional Board.
- 3.5. Recognized professional expertise.
- 3.6. Post-graduate qualification in the relevant profession is recommended.

4. THE EVALUATION PANEL ("THE PANEL")

- 4.1. The members of THE PANEL are proposed by the Education, Training and Registration Committee on behalf of the Board (final appointment is by the Board).
- 4.2. The task of THE PANEL is to determine whether generally accepted standards are maintained, and conditions met in the training programs as determined by the Board.
- 4.3. At least one panellist/ evaluator should be an academic peer from the fields related to the programme for evaluation.
- 4.4. A panel shall normally comprise three members including, one person who act as the panel convener, and will act as the Chair of meetings during the evaluation process. Representation on the panel must provide for a balance of experience/expertise from the disciplines and also between educational, practice and research expertise. The following procedure is recommended:

- a. The ETR Committee/DNB shall provide regular training workshops to prepare registered dietitians and nutritionists, who are eligible to serve as evaluators. Invitations to attend the training workshops will be addressed to all HEIs offering Dietetics and Nutritionist training programs, to nominate persons who are eligible and willing to serve on an Evaluation Panel.

Names of nominees for the training workshop of evaluators must be accompanied by a resume reflecting:

- i. How the criteria to be an evaluator have been met.
 - ii. All affiliations with other Higher Education Institutions e.g., previous and current employment; external examiner status; current and previous registration for study.
 - iii. Any potential conflict of interest relating to participation in the evaluation process of any Institution.
- b. The database/register of eligible, trained evaluators should be regularly updated and approved by the Board.
 - c. The Committee is to appoint a panel for each evaluation visit from the register/database of trained evaluators. The PANEL should not comprise of members predominantly from one institution. Furthermore, panel members should not be from the same region/area where the specific programme is located that will be evaluated.
 - d. An appointed evaluator cannot be a current enrolled post-graduate student at the HEI where the specific programme is located that will be evaluated.
 - e. Nominees should indicate whether they accept or decline the appointment.
 - f. Nominees should recuse themselves in the event of a conflict of interest* to the HEI being evaluated.

g. The panel of appointed evaluators should preferably include one panel member who was part of the previous evaluation panel to the HEI being evaluated.

** Identified conflict of interests in the context of Programme evaluations:*

- i. Evaluator working at a HEI in a radius of 200 km from the HEI, regarded as the same area.*
- ii. Evaluator is currently enrolled for a postgraduate qualification at the HEI being evaluated.*
- iii. Evaluator is a recent graduate at the HEI being evaluated. Less than 2 years ago regarded as potential for conflict of interest.*
- iv. Evaluator not allowed to be employed for contract or consultation work at the HEI being evaluated.*
- v. This does not apply to professionals who are acting as external examiner or moderator.*

5. THE REPORT

- a. A report is prepared by the Chair of the panel. The report should detail the findings, comments, commendations and recommendations of the visiting panel, and a recommendation regarding approval. Areas of excellence, those requiring attention and areas of special interest should be mentioned. Members of the panel are given the opportunity to ratify the report and have the option of a minority opinion to be noted in the case of major disagreement.
- b. The Panel's finalised report is then sent to the Dean of the evaluated institution for verification of facts in case the panel has misinterpreted factual evidence which may have influenced any of the recommendations. The HEI's response is then returned to the Chairperson. The panel then considers the response and finalises the report. The finalised report is then tabled for consideration and approval by the Board.

THE PROFESSIONAL BOARD FOR DIETETICS AND NUTRITION

HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA

CODE OF CONDUCT FOR THE EVALUATORS OF EDUCATION AND TRAINING INSTITUTIONS

A. PURPOSE

- A.1 In order to give practical effect to the expected behaviour while in the employ of the HPCSA during the evaluation period.
- A.2 The Code aims to act as a guideline to evaluators on conduct expected of them from an ethical point of view, both in their individual conduct and in their relationship with others. Compliance with the Code can be expected to enhance professionalism and help to ensure confidence in the service provided to Education and Training Institutions.
- A.3 The primary purpose of the Code is a positive one, *viz.* to promote exemplary conduct.

B. INTRODUCTION

- B.1 The need exists to provide direction to evaluators with regard to their relationship with other evaluators and the Education and Training Institutions and to indicate the spirit in which evaluators should perform their duties, what should be done to avoid conflicts of interest and what is expected of them in terms of their personal conduct at Education and Training Institutions.

C. APPOINTMENT AS EVALUATORS

- C.1 Evaluators are expected to conduct themselves in accordance with the highest standards of ethical, moral and professional behaviour during all phases of the evaluation. Each evaluator must review, sign this Code of Conduct and submit it to the Head of Division: Education and Training together with the written acceptance of the appointment to an Evaluation Panel prior to receiving any documentation from the Institution.
- C.2 Evaluators need to accept or decline the appointment formally by responding to the Head of Division: Education and Training in writing within 20 working days of receiving the initial appointment.

D. DECLINING THE APPOINTMENT AND RESIGNATION AS EVALUATOR

- D.1 Should the invited evaluator wish to decline the appointment; this should be done timeously in writing to the Evaluation convener and Head of Division: Education and Training.
- D.2 Should the evaluator wish to resign from the Committee; this should be done in writing to the Education, Training and Registration Chairperson and the Education and Training Division as soon as possible.

E. APPLICATION FOR LEAVE NOT TO ATTEND A MEETING

- E.1 If an evaluator is not able to attend the evaluation, a leave form not to attend the meeting must be completed.

F. DOCUMENTS TO NOTE

- F.1 Evaluators are expected to study and attest to having read the following documents namely:
- i. guideline of the evaluation process document;
 - ii. documents to be provided by the Board as received from the training institution prior to the evaluation;
 - iii. template for compilation of the evaluation report; and
 - iv. expected evaluation report time frames;

G.1 CONFIDENTIALITY AND PROTOCOL OF COMMUNICATION

- G.1.1 The evaluators will not discuss the report directly with the Institution or any other outside party at any time before, during or after finalisation of the virtual/online or on-site evaluation – all communications will be *via* the Board/Board Secretariat.
- G.1.2 The evaluators are obliged to share all information influencing the evaluation outcome, either verbally or *via* the written report, with the DNB and/or Education, Training and Registration Committee should they be required to do so.
- G.1.3 Protection of Personal Information Act (POPIA), it sets some conditions for responsible parties to lawfully process the personal information of data.

G.2 RELATIONSHIP WITH THE EDUCATION AND TRAINING INSTITUTIONS

An evaluator –

- G.2.1 will serve the Education and Training Institutions in a courteous, unbiased and impartial manner in order to create confidence in the Education and Training Institutions service;
- G.2.2 is helpful and reasonably accessible in her or his dealings with the Education and Training Institution at all times treating members of the Education and Training Institution as customers who are entitled to receive high standards of service and courtesy;
- G.2.3 has regard for the circumstances and concerns of the Education and Training Institutions in performing her or his official duties and in the making of decisions affecting them;
- G.2.4 is committed through timely service to the development and improvement of all Education and Training Institutions;
- G.2.5 does not unfairly discriminate against any member of the Education and Training Institutions on account of race, gender, ethnic or social origin, colour, sexual orientation, age, disability, religion, political persuasion, conscience, belief, culture or language;
- G.2.6 does not unfairly discriminate against the Education and Training Institution on account of how their programme was compiled and which modules were included to address the outcomes set by the DNB;
- G.2.7 will refrain from making any recommendations, comments or derogatory remarks (orally or in writing) to the Education and Training Institution regarding the shortcomings of the programme specifically during the evaluation period.

G.3 RELATIONSHIP AMONG EVALUATORS

An evaluator –

- G.3.1 should be courteous and co-operate fully with other evaluators to advance the Education and Training Institutions interests;
- G.3.2 refrains from abusing his or her authority and/or influence on another evaluator, nor is influenced to abuse her or his authority;
- G.3.3 uses the appropriate channels to air her or his grievances or to direct representations;
- G.3.4 deals fairly, professionally and equitably with other evaluators, irrespective of race, gender, ethnic or social origin, colour, sexual orientation, age, disability, religion, political persuasion, conscience, belief, culture or language.

H.1 PERFORMANCE OF EVALUATION DUTIES

An evaluator –

- H.1.1 strives to achieve the objectives of her or his duties cost-effectively and in the Education and Training Institutions' interest;
- H.1.2 is creative in thought and in the execution of her or his duties, seeks innovative ways to solve problems and enhances effectiveness and efficiency within the context of the law;
- H.1.3 is punctual in the execution of her or his duties;
- H.1.4 executes her or his duties in a professional and ethical manner at all times;
- H.1.5 does not engage in any transaction or action that is in conflict with or infringes on the execution of her or his official duties;
- H.1.6 will recuse herself or himself from any official action or decision-making process which may result in improper personal gain and this should be properly declared by the evaluator;
- H.1.7 accepts the responsibility to avail herself or himself for ongoing training and self-development throughout her or his elected period;
- H.1.8 is honest and accountable in the indirect spending of Education and Training Institutions' funds (e.g. transport hired for the occasion: do not drive more than necessary) and uses the Education and Training Institutions services property and other resources effectively, efficiently, and only for authorized official purposes;
- H.1.9 promotes sound, efficient, effective, transparent and accountable administration;
- H.1.10 in the course of her or his official duties, shall report to the appropriate authorities, fraud, corruption, nepotism, mal-administration and any other act which constitutes an offence, or which is prejudicial to the Education and Training Institutions;
- H.1.11 shall evaluate the programme on its merits (i.e. does it meet board requirements and set entry level outcomes as a whole, and not on account of the number of a specific set of modules included in the programme) and give honest and impartial recommendation, advice, based on all available relevant information, to the committee or Professional Board, (refer to SGB documents);
- H.1.12 shall take into account the recommendations drafted by the previous evaluators, as a starting point to evaluate if change and growth has taken place;
- H.1.13 shall refrain from comparing the Institution being evaluated with any other one presenting the same or similar programme, either verbally or in writing;
- H.1.14 shall respect differences (i.e. that methods of attaining and meeting outcome requirements are variable and the methods used to reach the outcomes are the right of the programme owner or the institution).
- H.1.15 engagement with students should be contextualised;

- H.1.16 needs to be sensitive to the confidentiality of information made available and insights gained during the evaluation process, and relay all such information to the Education, Training and Registration Committee and/or DNB which functions within the boundaries of confidentiality;
- H.1.17 channel all communication (general, sensitive and confidential) regarding the evaluation report and process through the Education, Training and Registration Committee of the Board; and
- H.1.18 communicate the recommendations and findings of the evaluation process in the form of an evaluation report submitted and contributed to the Education and Training Division for deliberation and consideration by the Education, Training and Registration Committee and/or the Board.

I.1 CONFLICT OF INTEREST - PERSONAL CONDUCT AND PRIVATE INTERESTS

An evaluator --

- I.1.2 shall be objective, fair and impartial to the evaluation. Recusal is expected if there is any conflict of interest;
- I.1.3 does not use her or his official position to obtain private gifts or benefits for herself or himself during the performance of her or his official duties nor does she or he accept any gifts or benefits when offered as these may be construed as bribes;
- I.1.4 does not use or disclose any official information for personal gain or the gain of others.
- I.1.5 formally accepts/acknowledges his/her appointment.

I, _____, accept my appointment as an evaluator of the Professional Board for Dietetics and Nutrition for the program offered by _____ (institution) and hereby attest that I read and understood the code of conduct and will adhere with the provisions of the document and that I am confident that I am competent to conduct an evaluation.

That I have been provided with the confidentiality statement which I have signed and submitted together with the code of conduct to the HPCSA Head of Division: Education and Training.

Signed in _____, on _____

Date _____ 20...

Evaluator (Full Name and Surname) _____

THE PROFESSIONAL BOARD FOR DIETETICS AND NUTRITION

HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA

ASSESSMENT OF THE EVALUATION PANEL

The evaluation panel members are expected and agreed in writing to conduct themselves in accordance with the highest standards of ethical, moral and professional behaviour during all phases of the process and at all times.

With regards to the Programme Evaluation and virtual/online or on-site evaluation, please take some time to assess the Evaluation Panel to help the Professional Board for Dietetics and Nutrition (DNB) to improve on the quality of service delivery. The Institution (Dietetics/Nutrition staff members) can assess the Evaluation Panel members individually, or as a team. If you give a score of 1-3 please motivate your score. This information will be handled with the utmost confidentiality and will only be made available to the Education, Training and Registration Committee of the DNB, AFTER the final report outcome and letter of evaluation has been submitted to the University/Institution.

**See legend for answers at bottom of page*

Question	Did they?	*1	*2	*3	*4	*5
1	Treat peers, staff, students and the management of the university with courtesy and respect?					
Remarks:						
2	Exercise punctuality at all times?					
Remarks:						
3	Maintain strict confidentiality? The results and outcomes of the process may only be discussed with the Education and Training Division, the Education, Training and Registration (ETR) Committee of the Board or the Board itself.					
Remarks:						
4	Conduct the evaluation in an objective, fair and impartial manner?					
Remarks:						
5	Evaluate the programme on its merit, <i>i.e.</i> does it meet the Board specified minimum outcomes criteria/ requirements as set in the assessment document and not according to the range of modules included in the programme?					
Remarks:						
6	Evaluate the programme (<i>i.e.</i> nature of learning opportunities provided by programme) and not individual students' performance?					
Remarks:						
7	Respect differences? (<i>i.e.</i> that the method of attaining and meeting outcome requirements are variable at different institutions and the methods used to reach the outcomes are the right of the programme owner or the institution, and not the DNB or ETR committee or evaluation panel).					

Remarks:						
8	Compared the evaluated institution with panel member's own training institution or other training programmes across the country?					
Remarks:						
9	Continuously offered own advice to the programme/ institution?					
Remarks:						
10	Recuse him/her in the event of a conflict of interest?					

*1 = Very poor performance; 2 = poor performance, 3 = adequate performance; 4 = good performance; 5 = outstanding performance

Please indicate any other information or details of events regarding the virtual/online or on-site evaluation you would like to bring to the attention of the Education, Training and Registration Committee and the DNB, which would need further investigation and action:

Institution/University

Date of evaluation

Signature (Voluntary)

Date

DNB BLOOMS TAXONOMY: PROPOSED PERCENTAGE ALLOCATION PER YEAR GROUP



We have included the new Blooms Taxonomy. Furthermore, we propose that combined Bloom’s levels, which are a more user-friendly approach to use, is employed.

Please check and provide analysis for all tests as well as examinations to show that the desired level of assessment for each year level as per Bloom’s Taxonomy has been achieved.

Table 1: Proposed guidelines per year of study.

	1 st year (NQF level 5)	2 nd year (NQF level 6)	3 rd year (NQF level 7)	4 th year (NQF level 8)
Level 1 Remembering and Understanding	75-85 % (NQF =80%)	55 - 65% (NQF =60%)	35-45% (NQF =40%)	15-25% (NQF =20%)
Level 2 Applying and analyzing	10 - 15% (NQF =10%)	15 – 25% (NQF =30%)	35 - 45% (NQF =40%)	45- 55% (NQF =50%)
Level 3 Evaluating and Creating	0-5% (NQF =10%)	5-15% (NQF =10%)	15- 25% (NQF =20%)	25 -35% (NQF =30%)