

HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA - THE PROFESSIONAL BOARD FOR OPTOMETRY AND DISPENSING OPTICIANS			
SUBJECT	GUIDELINES FOR THE EVALUATION AND APPROVAL OF PBODO PROGRAMS	DOC NO:	G 001
COMPILED BY:	EDUCATION, TRAINING AND REGISTRATION COMMITTEE	REVISION NO:	01
APPROVED BY:	PROFESSIONAL BOARD OPTOMETRY AND DISPENSING OPTICIANS	Page 1 of 49	
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**HPCSA GUIDELINES FOR EVALUATION AND APPROVAL
OF EDUCATION AND TRAINING INSTITUTIONS OFFERING
OPTOMETRY AND OR DISPENSING OPTICIANS
PROGRAMMES**

**PROFESSIONAL BOARD FOR OPTOMETRY AND
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ABBREVIATIONS / ACRONYMS

1. HPCSA Health Professions Council of South Africa
2. SVP Site Visit Plan
3. SV Site visit
4. PBODO Professional Board for Optometry and Dispensing Opticians

DEFINITION OF TERMS

1. Professional programme Optometry and or Dispensing Opticians Education and Training programme
2. Approval The approval of academic programme and clinical facility by an impartial body, in this instance, the HPCSA. Graduates of recognised programmes are eligible for registration with the HPCSA, a legal requirement to practice the profession in South Africa. Approval status is valid for 5 years.
3. Criteria for programme approval Acts, Regulations, standards, specified by the Professional Board with which an Institution's professional education and training programme must comply in order to be recognised.
4. Evaluation Panel A team of members appointed by the Board to evaluate an institution's professional education and training programme and facilities attached to the institution to determine whether it meets the Criteria for Programme Approval. The panel members are external to the educational Institution.

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5. Institution An organization of Higher Education, offering a professional programme of education and training that leads to registration with the HPCSA.

6. Minister The Minister of Health of South Africa

7. Program Approval Determination by the Professional Board of whether an Institution's professional programme of education and training meets the Criteria for Programme Approval for registration of its graduates with the HPCSA.

8. Programme Evaluation Processes undertaken by the Board (once every 5 years) to assess whether an Institution's professional programme of education and training meets the Criteria for Programme Approval for education and training in the profession.

9. Practical/ clinical training facility Internal and external site (Hospital/ clinic/ laboratory/ Optometry practice/ Dispensing Opticianry practice) that offers practical/ clinical training or professional practice work integrated learning/ exposure) to students during their formal years of study.

10. Practical/ clinical training facility approval Determination by the Professional Board whether the practical/ clinical training facilities (internal and external) of the Institution's professional programme meets the Programme Approval Criteria for registration of its graduates with the HPCSA.

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11. Practical/ clinical training facility evaluation
Processes undertaken by the Board (once every 5 years) to assess whether the practical/ clinical training facilities of Institutions offering the professional programme meets the Criteria for Programme Approval as guided by Acts, Regulations, standards and guidelines for evaluation/approval of the academic programmes specified by the Professional Board.

12. Board
A Professional Board for optometry and dispensing opticians established in terms of section 15 of the Health Professions Act, 1974 (Act No. 56 of 1974).

13. Self-evaluation/ review
A process undertaken by an Institution's professional programme of education and training to assess whether it meets the Criteria for Programme Approval.

14. Site visit
A visit to the practical/ clinical training facilities of an Institution offering the professional programme of education and training undertaken by the Evaluation panel. It involves: observation and assessment of clinical facilities and resources, documentation review, student clinical learning opportunities/ activities as well as interviews with students, staff and clinic supervisors.

15. Site visit plan
A schedule of activities which the Evaluation panel will undertake during the site visit to the practical/ clinical training facilities.

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16. “Act” the Health Professions Act, 1974 (Act No. 56 of 1974).
17. “manager of programme ” the manager of optometry/ dispensing opticians education programme or any person duly delegated
18. “Deputy Company Secretary” Manager for the professional board for optometry and dispensing opticians.
19. “Committee Co-ordinator” co-ordinator for committee of the professional board for optometry and dispensing opticians.
20. “training institution” optometry or dispensing opticians training institution.

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1. INTRODUCTION

The Health Professions Council of South Africa (HPCSA) was established by the Health Professions Act, Amendment number 29 of 2007. In terms of section 3 of the Amendment Act the function of the HPCSA is to control and exercise authority in all matters relating to the education and training of health care professionals - subject to legislation regulating health care providers and consistency with national policy as determined by the Minister. It is the quality assurance body for the education and training in the professions within its mandate.

Section 14 of the Amendment Act requires Professional Boards to recognise an Institution's professional programme of education and training. The scope of the evaluations extends to institutional governance, policies, systems, strategies, processes and resources for managing quality in the core areas of teaching, learning, clinical training, research and community engagement.

Approval follows an evaluation of the programme which includes (but is not limited to) institutional self-review and report; site visit and report by a Board appointed evaluation panel; and a determination by the Board of whether the criteria and standards have been met. The process relies on Institutional self-review and continuous quality development and is underpinned by the honesty and integrity of all concerned. Quality education may be achieved in a variety of ways and programme flexibility in the pursuit of excellence is acknowledged.

This document sets out the guidelines of the Professional Board for Optometry and Dispensing Opticians within the Health Professions Council of South Africa (HPCSA) to support the programme evaluation process leading to the approval of an Institution's education and training programmes and facilities falling within its mandate, for the purpose of student's registration with the HPCSA. The processes were derived following consultation with higher education institutions and in accordance with local and international guidelines.

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2. THE GOAL FOR APPROVAL

The guiding statement for the execution of the mandate of the Professional Board for Optometry and Dispensing Opticians is twofold that is, protecting the public and guiding the profession. The dimensions of the mandate of the Board, where the protection of the public and guiding the optometry opticianry professions are exercised, are in education and training, registration and licensing of optometrists and opticians, continuing professional development and professional conduct. The goals of the PBODO for approval of Optometry and Dispensing Opticianry education are: -

- a. assuring the public that graduates of recognised programmes are educated in a core set of knowledge, attributes and skills required for competent, safe, ethical, effective, and independent professional practice;
- b. fostering continuous enhancement of optometry and opticianry education and training in South Africa in terms of professional practice, universities community service and continuing professional development.

3. DURATION OF APPROVAL

An institution's professional education and training programme that meets the prescribed standards and requirements (as specified in the Act, and relevant Board regulations and criteria) is granted approval. Approval is valid for five years, after which the programme will be re-evaluated. Graduates of recognised programmes are eligible for registration with the HPCSA and thereby to legally practice the profession for which they have been educated and trained. Some Professional Boards also require graduates to write and pass the Board examination before registration with the HPCSA.

New programmes and existing education and training programmes which do not meet minimum standards will be required to comply with specific Board recommendations until approval status has been attained if the graduates are to be registered with the HPCSA.

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Students who complete an education and training programme which does not meet the minimum requirements set by the Professional Boards will not be registered by the HPCSA and will therefore not be permitted to practice.

4. ROLES AND RESPONSIBILITIES RELATING TO APPROVAL

4.1 PROFESSIONAL BOARDS

The approval of institutions offering education and training under the HPCSA is the responsibility of Professional Boards, which delegate it as a function to Education, Training and Registration committees.

Professional Boards, in accordance with the Act and relevant regulations, ensure quality in professional education and training by evaluating and recognising professional education and training programmes within their ambits. To this end, the roles and responsibilities of the committees include Standards setting; Scheduling Approval of Institutions' Professional Education and Training Programmes; Setting Frameworks for Approval; Appointment and Training of Evaluators; determining approval status of Education and Training Programmes and managing outcomes of the approval process. These roles and responsibilities are detailed as follows:

4.1.1 PRE-EVALUATION

a. Standards setting

The Professional Board has set standards and criteria for professional education and training which are reflected in the following documents:

- **Minimum standards for undergraduate curricula and professional examinations in Optometry and Dispensing Opticianry documents.**

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- **Regulations defining the Scope of the profession / practice**
- **Clinical guidelines for dispensing opticianry practice**
- **Clinical guidelines for optometry practice**
- **Clinical Practice Audit Document**
- **Guidelines for Good Practice in the Health Care Profession**
- **Regulations relating to the registration of students**
- **Health Professions Act of 1974 (as amended)**
- **Continuing Professional Development: Guidelines for the Health Care Professionals**
- **Policy Document on Business Practices**
- **Ethical Rules of Conduct for Practitioners registered under the Health Professions Act, 1974**
- **Guidelines for Good Practice in the Health Care Professions: National Patients' Rights Charter**
- **Guidelines for Good Practice in the Health Care Professions: General Ethical Guidelines for the Health Care Professions**

b. Approval Schedule

The Education, Training and Registration Committee of the Board, at its first meeting, must schedule respective institutions' education and training programme for evaluation during its term of office. Programme evaluation for approval occurs once in a 5-year period. Follow up evaluation visits may be undertaken where indicated.

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4.1.2 DURING THE EVALUATION PROCESS

The Education, Training and Registration Committee via the Education and Training Division of the HPCSA liaises with and supports institutions and evaluators during the approval process.

4.1.3 POST EVALUATION

The role of the Education, Training and Registration Committee will be to: -

- a. Determine approval status

Education, Training and Registration Committee will convene meetings or teleconferences to review and consider the Programme Evaluation Report compiled by the evaluation panel, and the response of the institution to this report. The committee will then make a decision with respect to approval.

The options are:

- i. Full approval is granted for a five-year period subject to bi-annual report stating how quality is maintained.
- ii. Conditional approval may be granted subject to specified requirements, e.g. issues of concern are addressed within specified time frames together with the right to revisit the institution. Institutions granted conditional approval will be required to submit annual reports.
- iii. Conditional approval may be granted for shorter periods of time if there are significant concerns which warrant re-evaluation within a prescribed period.
- iv. Approval may be suspended if an institution's programme does not meet the requirements for approval.

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b. Manage the outcomes of the approval process

The Education, Training and Registration Committee will -

- i. communicate the approval status to the institution within one week after the Education, Training and Registration Committee meeting;
- ii. in the event that approval is granted; monitor the recognised programmes to ensure that quality is being maintained;
- iii. in the event that approval is withheld/declined, then the committee must, in its communication to the institution -
 - a. document the reasons why approval is being withheld;
 - b. communicate the implications thereof;
 - c. specify conditions/ requirements which the institution must meet in order for:
 - graduates of the programme to register with the HPCSA;
 - the professional education and training programme to be recognised;
 - d. request the institution to submit and implement a plan of action, with time frames and resources, to address the issues raised;
 - e. review the institution's plan of action, make additional recommendations if necessary, and then approve the plan for implementation. It is the institution's responsibility to implement this plan;
 - f. provide counseling and guidance to institutions using persons with expertise to support such processes;
 - g. maintain regular contact with institutions to ensure that issues of quality assurance are addressed continuously;

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h. should the institution lodge an appeal around the decisions taken, it can do so in accordance with Section 20 of the Health Professions Act: **Right to appeal**

- (1) Any person who is aggrieved by a decision of the council, a professional board or a disciplinary appeal committee, may appeal to the appropriate High Court against such decision.
- (2) Notice of appeal must be given within one month from the date on which such decision was given.

[S. 20 repealed by S4 of Act 33 of 1976 and inserted by S18 of Act 89 of 1997]

The Education, Training and Registration Committee will provide reasonable and appropriate information on the approval of programmes to the Professional Board and relevant authorities.

5. PROFESSIONAL EDUCATION AND TRAINING PROGRAMMES AT HIGHER EDUCATION INSTITUTIONS

The roles and responsibilities of the Education and Training Programme in the Approval process is described.

5.1 PRE-EVALUATION

a. Self-review

The institution conducts a self-review and compiles a self-review report (as per template in Appendix D), describing how the professional education and training programme it offers meets the criteria for

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Programme Approval. This report is submitted to the Secretariat within the time frame determined and communicated by the Board.

b. Proposed Site Visit Plan

The institution should propose a plan (with timeframes) for the site visit (as per the template in Appendix E).

The following documentation must be submitted to the Board Secretariat before the site visit:

- i. Self-Review Report
- ii. Proposed Site Visit Plan

c. Preparation of documentation for review by the Evaluation Panel during the Site Visit

The institution must prepare, label and coherently organise a variety of documents for the evaluation panel to review during the Site Visit (SV). The list of these documents is in Appendix F.

Quantitative and Qualitative information (never taken at face value) will be analysed and interpreted in a relational and contextual manner with the purpose of -

1. Assessing the quality of Teaching, Learning, Clinical Training, Research, Institutional Administrative Support, Resource Allocation and Community Engagement
2. Improving/enhancing the institution's capacity to plan, implement, monitor and review academic processes /practices to improve education and training standards.

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Information becomes evidence when it is assessed against agreed criteria that are used to indicate institutional performance in various audit areas

d. Preparation for the Site Visit

The Evaluation Panel should review documents that are submitted by the institution and make suggestions for amendments to the Site Visit Plan (SVP). The amendments may be informed by areas in the self-evaluation reports requiring further attention or to acquire information on aspects not adequately covered in the report. The amendments should be communicated to the Institution (via the HPCSA administration) at least two weeks prior to the Site Visit.

The Institution must:

- i. Review and accommodate amendments to the Site Visit Plan (SVP) proposed by the evaluation panel.
- ii. Negotiate and arrange for the availability of staff/ students/ management/ leadership for interviews/ meetings, academic and clinical teaching and learning activities as outlined in the updated SVP.
- iii. Dedicate an area for the evaluation panel to use for the interviews, document review, etc.

5.2 DURING THE EVALUATION/ SITE VISIT

- a. Meet, greet and introduce the Evaluation Panel to all relevant parties.
- b. The staff of the institution should facilitate execution of the SVP.
- c. The Professional Board will determine the length of the entire SVP taking into consideration time needed for evaluation of both academic education and clinical training.

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5.3 POST EVALUATION

- a. Complete an evaluation form for each of the evaluations
- b. The institution is sent a copy of the evaluation report within three weeks of the approval visit.
- c. The institution may not discuss the report directly with the evaluators – all communications must be via the Board/ Board Secretariat.
- d. The institution will have two weeks to respond, in writing, to the factual correctness of the report.
- e. The Education, Training and Registration Committee will determine approval status upon receipt of the Institution's report.
- f. Institutions will be notified of the Board's decision within two weeks of the meeting.
- g. If deemed necessary -
 - an institution will submit a Plan of Action within a stipulated time frame;
 - the Professional Boards will approve the Plan of Action and notify the institution so that the plan can be implemented.

6. THE EVALUATORS

The roles, responsibilities and processes pertaining to the evaluators/evaluation panel are described.

6.1 PRE-EVALUATION

- a. **Appointment as an evaluator to evaluation panel**

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The processes relating to the nomination and appointment of the evaluators to serve on the Evaluation Panel are described in Appendix C.

- i. Individuals will be sent a letter notifying them of their appointment as an evaluator.
- ii. The individual must indicate her/his acceptance of the appointment/ or decline, in writing, to the Board Deputy Company Secretary.
- iii. Individuals who have accepted the appointment will constitute the pool of evaluators.

b. Appointment to Evaluation Panel

Evaluators will be notified at least four (4) months before the approval/evaluation site visit.

c. Code of Conduct

Evaluators are expected to conduct themselves in accordance with the highest standards of ethical, moral and professional behavior during all phases of the process. Each evaluator must review, sign the Code of Conduct in Appendix G and submit it to the Board Deputy Company Secretary together with the written acceptance of the appointment to an Evaluation Panel – prior to receiving any documentation from the institution. Any conflict of interest must be declared in writing to the Board Deputy Company Secretary prior to finalisation of appointment.

d. Preparation for the site visit

Evaluators are expected to familiarize themselves with -

- i. the institution's Self Review Report;
- ii. Site Visit/ Programme Evaluation Guidelines – worksheet (Appendix H).

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- iii. Panel members will meet to discuss the Site Visit Plan from the institution consultation prior to the visit

e. Site Visit Plan

- i. Review the institution’s proposed Site Visit Plan.
- ii. Review the academic and clinic schedules and training sites.
- iii. Review the requirements for the Site Visit Plan as detailed in Appendix E.
- iv. The institution must be advised of the Panel’s requests/ amendments to the Site Visit Plan via the Board Secretariat in a timely fashion (at least three weeks before the Site Visit).
- v. Panel members should take on the responsibility for managing specific aspects of the evaluation process to ensure/ monitor that necessary and sufficient information has been gathered in all areas.

6.2 DURING PROGRAMME EVALUATION

NOTE: It is important that the Panel exercise time management in order to complete the evaluation of the programme.

a. Site Visit

On arrival at the institution, the panel of evaluators -

- i. meet and greet the Institutional/Faculty Leadership/Head of Programme and other staff;
- ii. confirm the Site Visit Plan;
- iii. proceed to conduct the programme evaluation as per Site Visit Plan, and the Site Visit/ Programme Evaluation Guidelines – Worksheet (Appendix H).

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- Meet with all parties.
- Schedule follow-up interviews if necessary.
- Conduct tours of on - and off-site facilities.
- Observe academic and practical/ clinical teaching and learning activities. The evaluators must prioritise and observe the educational processes that unfold at the sites where clinical education is occurring. Evaluators are required to reflect critically on how the education programme serves the interests of meeting exit-level outcomes for the profession.
- Review of prepared documentation as per Appendix F.
- Arrange a time for closure with the relevant staff and head of the programme.
- Thank the institution for their preparation, cooperation and support during the evaluation.
- Evaluators should **not provide recommendations** re: approval status.
- Explain the process going forward with timeframes:
 - Report to be compiled by evaluators and sent to the Education and Training Division of the HPCSA
 - Report sent to institution for written response on factual correctness.
 - Education, training and registrations committee meets to review reports and makes a determination regarding approval.
 - Education and Training Division of the HPCSA will communicate approval status to the institution.

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NOTE:

- ❖ The panel must **not** provide feedback to the HoD, staff members or Dean on the outcomes of the evaluation process, or discuss recommendations regarding the institution's approval status. Verbal feedback may be misconstrued and interpreted differently from the written feedback and may create a false positive or negative impression.
- ❖ It is the responsibility of the Professional Board to review the panel's report, the institution's written response and other supporting documentation, and to determine approval status.

6.3 POST PROGRAMME EVALUATION

- a. The panel may spend time at the institution with co-evaluators, consulting on the compilation of the report and with ready access to the documentation of the training institution.
- b. Request clarification from institutional staff, if necessary.
- c. Each evaluator analyses the data arising from the areas allocated, and contributes to the written report.
- d. **All statements/ conclusions in the report should be supported with evidence.**
- e. The panel should compile, consolidate and submit the Programme Evaluation Report (a separate document from the Institution's Self-Review Report) – as per the template for the Programme Evaluation Report (Appendix I), within the two weeks of the site visit, to the Board Deputy Company Secretary.
- f. Panel members must ensure strictest confidentiality throughout the process and all communication with members of the institution must be through the Secretariat.

7. BOARD SECRETARIAT

Role and responsibilities of the Board Secretariat:

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- 7.1. Manage all the administrative processes through the Education and Training Division of the HPCSA effectively and efficiently as set out in this document in the “Timeframes for the Approval Process” Appendix A.
- 7.2. Facilitate effective communication between Professional Board, education providers, evaluators and the Education and Training Division of the HPCSA.
- 7.3. Maintain the highest standards of professionalism.
- 7.4. Submit a report to the ETQA standing Committee through the Education and Training Division of the HPCSA.

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APPENDIX A

The Approval process with Timeframes

All parties must abide by the timeframes specified

PRE-PROGRAMME EVALUATION		
Responsibility	Action	Time frames
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 site visits to occur during the Institution's academic year	A year before the site visit
	Select and constitute the pool of evaluators for the panel	Within the first year of its term of office
Coordinator: Education and Training	Notify evaluators of appointment	Within a month of appointment
Professional Boards	Appoint the members of the evaluation panel	Four months before the site visit
Coordinator: Education and Training	Notify the institution & provide guidelines Notify the members of the evaluation panel & send Code of Conduct	Four months before the site visit

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Evaluators	Accept / Decline appointment Sign Code of Conduct	One week within receipt of notification
Coordinator: Education and Training	Send members of the panel documents reflecting the Criteria for Approval	Within a week of receipt of acceptance & Code of Conduct
Institution	Submits to Coordinator: Education and Training <ul style="list-style-type: none"> • Self-Review Report • Proposed Site Visit Plan • Academic and Clinic Schedules 	Seven weeks prior to site visit
Coordinator: Education and Training	Submits to the evaluation panel the institution's documents i.e. <ul style="list-style-type: none"> • Self-Review Report • Proposed Site Visit Plan • Academic and Clinic Schedules 	Within two days of receipt from the institution, but at least six weeks prior to the site visit
Evaluation Panel	Reviews institutions documents, consult other members of the panel and make suggestions for amendments to the institution's Site Visit Plan	At least three weeks before the date of the site visit
Coordinator: Education and Training	Communicates evaluation panel's suggestions for amendments to the Site Visit Plan to the Institution	At least two weeks before the date of the site visit

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DURING PROGRAMME EVALUATION		
Coordinator: Education and Training	Facilitates communication between all parties	As soon as possible
Evaluation Panel	Conducts site visit and programme evaluation	First two days of site visit
POST EVALUATION		
Evaluation Panel	Drafts report	Third day of Site Visit
	Submit to Board Secretariat the final report on the programme evaluation	Within two weeks of the site visit
Coordinator: Education and Training	Sends the institutions a copy of the final report on the programme evaluation	Within one week of receipt – i.e. three weeks post site visit
Institution	Review and respond, in writing, to the factual correctness of the report	Within two weeks of receipt
Professional Boards	Review reports and meet (teleconference if necessary) to determine approval status	Within two weeks of receipt of the institution's report
Coordinator: Education and Training	Notify institution of the Board's decision	Within two weeks of the Education, training and

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		registrations committee meeting
Institution	Submits a plan of action (if necessary), indicating how matters arising will be addressed, specifying timeframes and resource allocation	Within one month of receipt of the Board's decision
Professional Board	Review and approve the Plan of Action	Within two weeks of receipt of the plan
Institution	Implement Plan of Action	As soon as is possible

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APPENDIX B

Documents reflecting standards and criteria for education and training

1. Minimum standards for undergraduate curricula and professional examinations in Optometry and Dispensing Opticianry documents, including clinical hours and patient numbers/ cases guideline.
2. Regulations defining the Scope of the profession / practice
3. Clinical Practice Audit Document
4. Guidelines for Good Practice in the Health Care Profession
5. Regulations relating to the registration of students
6. Health Professions Act 56 of 1974 (as amended)
7. Continuing Professional Development: Guidelines for the Health Care Professionals
8. Policy Document on Business Practices
9. Ethical Rules of Conduct for Practitioners registered under the Health Professions Act 56 of 1974 (as amended)
10. Guidelines for Good Practice in the Health Care Professions: National Patients' Rights Charter
11. Guidelines for Good Practice in the Health Care Professions: General Ethical Guidelines for the Health Care Professions

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APPENDIX C

Composition and Constitution of the Evaluation Panel

The Professional Board is responsible for managing the selection, appointment and training of the members of the Evaluation panel.

1. Criteria for Evaluation Panel membership

- i. Postgraduate qualification in the relevant profession.
- ii. Recognised professional clinical expertise.
- iii. In good professional standing, including CPD.
- iv. Relevant and in-depth knowledge of educational processes is desirable.
- v. Familiarity with the health and education issues related to national and international trends is desirable.

2. Nomination and appointment of Evaluators

- i. The Board may request members of the profession to nominate eligible and willing candidates to the pool of potential evaluators:
 - a. Heads of the professional programmes at Education and Training Institutions or representative.
 - b. Professional associations/ institutes/forum.
- ii. Names of nominees must be accompanied by a resume reflecting:
 - a. How the criteria have been met.

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- b. All affiliations with other Higher Education institutions e.g. previous and current employment; external examiner status; current and previous registration for study.
 - c. Any potential conflict of interest relating to participation in the approval process of any Institution.
- iii. Professional Boards -
- a. review all supporting documentation and criteria;
 - b. select and appoint individuals as evaluators;
 - c. inform individuals of their selection/appointment and their roles and responsibilities as an evaluator via the Board Secretariat.
- iv. Individuals so appointed must indicate their acceptance of the appointment/ or decline in writing to the Board Deputy Company Secretary within one week on receipt of the letter of appointment.

3. Composition of the Evaluation Panel

- i. At least two evaluators per professional Evaluation Panel.
- ii. The composition of each panel must reflect an optimal mix of experiences, skills and abilities for a successful approval process.
- iii. As not all individuals will be selected to participate on evaluation panels in that particular year, it should be clarified that she/he has successfully qualified to be an evaluator for the specific Board. She/he will constitute the pool upon which the Board will draw for a particular institution. She/he will be notified of their appointment to an evaluation panel at least 4 months before the site visit.

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APPENDIX D

Template for the Self-Review Report

The following section contains guidelines for the preparation of the self-review report to be compiled by the Institution's Professional Education and Training Programme following an in-depth self-review. This report should address all areas mentioned in these guidelines. At a minimum, description, analysis and critique must be included in the self-review report with reference to each criterion and its sub-item. A list of appendices for documented evidence in support of the response **to each criterion as well as sub-items must be developed** and the file/s in which those documents (appendices) are placed should be labelled, for ease of reference.

INTRODUCTION

Include comments on

- a) **Current status** of the programme.
- b) An overview of the recommendations of the **previous evaluation** and how they have been addressed.

CRITERION 1: PROGRAMME DESIGN

The programme is consonant with the institution's mission, has appropriate governance structures, forms part of institutional planning and resource allocation, reflects values underpinning the design, meets national professional requirements, responds to societal priorities, meets the needs of learners and other stakeholders, measures its impact and is intellectually credible. It is designed coherently and articulates well with other appropriate programmes, where possible.

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1	2	3	4
Does not comply	Needs improvement	Meets minimum standards	Commend
did not comply with the majority of the minimum standards specified in the criteria	did not comply with all the minimum standards specified in the criterion. Problems/ weaknesses could be addressed in a short period of time	minimum standards as specified in the criterion were met.	all the minimum standards specified in the criterion were fully met and in addition, good practices and innovation were identified in relation to the criterion.

1.1. Relation to institution’s mission and planning

- 1.1.1. There is clear institutional mission, and goals and objectives are inspired by societal needs and actively pursued to achieve the mission.
- 1.1.2. The mission, goals and objectives of the Programmes are clearly articulated and are consistent with the national education and health imperatives, regulatory body policies and reflects responsiveness to priority health needs.
- 1.1.3. There is explicit reference to the values upheld in the programme and reference to alignment with the needs of the populations served.
- 1.1.4. The goals and objectives of the programme provides a significant focus on the output of the programme in terms of producing graduates with knowledge, skills and competencies that are contextually relevant and who demonstrate graduate attributes necessary to serve the public effectively.
- 1.1.5. Information on the rationale for, and circumstances under which, the programme was developed is clearly documented.

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- 1.1.6. The programme is explicitly socially accountable and hence informed by the needs of the society that the graduates are mandated to serve.
 - 1.1.7. The extent to which this programme overlaps with, or differs from, the other programme/s within the institution and Optometry/ Opticianry programmes nationally is clear.
 - 1.1.8. There are clear strategies, outcomes and targets which are used to evaluate, through stakeholder engagement, the impact and effectiveness of the programme.
 - 1.1.9. There are mechanisms to regularly review alignment to the mission, goals and objectives of the programmes and to make revisions where necessary to ensure continuous effectiveness.
 - 1.1.10. There are grounds on which the continued existence of this programme is justified and warranted.
 - 1.1.11. Major threats/challenges/problems that have been associated with the programme are identified and strategies for their resolution documented.
 - 1.1.12. Future plans for review of the programme design to maintain relevance is evident.
- 1.2. Governance, Management and Leadership for the Optometry or Dispensing Opticians Programme**
- 1.2.1. There is a clear governance structure for the programme which is effective in the formulation and implementation of policies which make the programme fulfill its mission, goals and objectives.
 - 1.2.2. There are clear, transparent and effective human resource recruitment policies for the programme.
 - 1.2.3. There are clear and effective mechanisms for allocating resources to the programme in order to sustain and further develop the programme on a continued basis.
 - 1.2.4. The head of the programme and academic staff for core modules of the programmes are appropriately qualified and experienced practitioners/academics who have maintained their registration with the HPCSA.

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- 1.2.5. The academic head of the department is appropriately qualified, experienced in academia and the professions, receives necessary institutional support and engages with staff on an ongoing basis to ensure that the standard of the offerings are monitored and maintained at the highest level at all times.
- 1.2.6. There is a clear and effective performance management system (including stakeholder input) for academic staff and administrators in the programme.
- 1.2.7. The administrative support structures are adequate for the efficient and effective running of the academic programme.
- 1.3. Programme design in relation to the South African context and in meeting the needs of learners and other stakeholders.**
- 1.3.1. The programme design, though globally and regionally benchmarked, is relevant to the South African context and is aligned with national health and education policies.
- 1.3.2. The programme clearly articulates the populations/communities it is intended to serve.
- 1.3.3. There is an explicit declaration of the values espoused to and evidence of its integration across the programme, e.g. equity, cost-effectiveness, relevance, quality.
- 1.3.4. There is evidence of engagement with the relevant communities that graduates will serve and professional bodies to enable input in identifying priority health needs that inform curriculum design and research agendas as well as to measure the impact of the programme.
- 1.3.5. The programme identifies and addresses the specific challenges that students experience and there is evidence of systems to enhance the learning experience of students, irrespective of demographic profile.
- 1.3.6. There is an awareness of which other programmes serve the same needs regionally and nationally.

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Please tick [✓] appropriate

	Regionally	Nationally
CPUT		
UFS		
UJ		
UKZN		
UL		

1.3.7. Pre-requisite skills or experiences needed in order to be accepted into this programme is provided (provide selection criteria (Annexure __)).

1.3.8. Pre-requisite skills or experiences needed in order to succeed in this programme is provided.

List the pre-requisite skills/ experience that are needed to be			
admitted into the programme		succeed in the programme	

1.3.9. Formal stated outcomes and values underpinning the programme are available and provided to learners at commencement of the programme.

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1.3.10. Stated outcomes are feasible and realistic in terms of the abilities of the target population, available time and resources and are aligned with the professional/vocational competency requirements and adult life skills that graduates will require for future employment and functioning outside the institution.

1.4. Credit value of the programme

- 1.4.1. The programme/s meets the requirements of the NQF level at which the programme/s is/are registered.
- 1.4.2. There is an appropriate allocation of credit(s) at each level and that is/are awarded for successful completion of the programme(s).
- 1.4.3. Credits for the programme can be applied towards fulfilment of graduate and other degree, diploma or certificate requirements.
- 1.4.4. The programme offers learning and career pathways to learners with opportunities for articulation with other programmes within and across institutions.
- 1.4.5. The programme fits into the overall academic offering of the sponsoring school and faculty.
- 1.4.6. In which departments, if any, is the programme cross-linked? Why? How does this fit into the educational offerings of these departments or faculties?

Complete the number of credits awarded for each year:

Credits	1st Year	2nd Year	3rd Year	4th Year	5th Year	Masters	PhD	Total
Bachelors' Degree								
Master's Degree								
PhD								

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1.5. Intellectual Credibility

- 1.5.1. The programme has a good international, regional and national approval and status.
- 1.5.2. Evidence of stakeholders, relevant to the eye/health care industry, involvement in the on-going development of the programme.

1.6. Characteristics and needs of professional and vocational education

- 1.6.1. The characteristics and needs of professional and vocational education are catered for in the design of the programme, with specific reference to -
 - a. how the theoretical educational framework underpinning the vocational education is integrated in the design of the programme;
 - b. how techniques and skills which are required for the specific eye care profession and varied health contexts are mastered,
 - c. how clinical training/practice in eye care and professional ethics form an integral part of the curriculum.

2. CRITERION 2: CURRICULUM DESIGN AND DELIVERY

The curriculum is informed by the priority health needs of the country, is coherent in design, comprehensive in delivery, fosters graduate attributes and values required to adequately serve communities and to contribute to the overall development of an efficient and equitable health system.

2.1. Mission, goals and objectives

- 2.1.1. The curriculum is consistent with the mission, goals and objectives as defined in the programme.

2.2. Sound educational principles

- 2.2.1. The curriculum is underpinned by sound educational principles and is structured to meet the stated academic and clinical outcomes for the profession.

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2.3. Alignment with approved scope of professional practice

2.3.1. The curriculum reflects alignment with the approved scope of professional practice, relevant national education policies, professional regulatory rules and regulations, national and regional health imperatives and global trends and technological developments.

2.4. Public health, health promotion and ethics

2.4.1. Public health, health promotion and medical ethics features prominently throughout the programme.

2.5. Alignment of duration and credits and goals

2.5.1. The minimum duration of the programme is consistent with its total credits and the goals of the programme (i.e. minimum four years).

2.6. Scientific foundation

2.6.1. Principles of scientific foundation are adequately included in the programme to develop understanding of theoretical concepts upon which vision science and clinical optometric care is based and to facilitate life-long learning.

2.7. Method of delivery

2.7.1. The delivery of the programme is through teaching, learning, laboratory activities, research and supervised clinical experience geared to enhance visual science knowledge and focusing on the examination, diagnosis and management of patients.

2.8. The standard and range of clinical cases

2.8.1. The standard and range of clinical cases and contexts to which students are exposed to enable them to meet minimum clinical competencies required for entry level practitioners and to be able to function across the various sectors in health.

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2.9. Evidence of regular curriculum review

2.9.1. There is evidence of regular curriculum reviews with participation of relevant stakeholders e.g. students, staff, community representatives, industry and academic peers.

2.10. Effective engagements

2.10.1. There is effective engagement with the eye care industry for the continued development of the programme.

2.11. Curriculum outcomes

2.11.1. The curriculum leads to the development of both technical as well as critical cross field outcomes.

2.12. Critical evaluation of the extent to which the curriculum meets the exit level outcome requirements detailed in the Regulations relating to the scope of the profession reveals:

2.12.1. Documented mechanisms for curriculum planning.

2.12.2. Learning outcomes clearly specified with appropriate assessment criteria.

2.12.3. Content is informed by the priority vision and eye health needs of the community, is contextually appropriate and current.

2.12.4. Teaching and learning methodologies to implement the curriculum are educationally sound, regularly updated, varied and responsive to the educational backgrounds and learning needs of the learners.

2.12.5. Learners rotate through all levels of care within the health system and there is evidence of inter-professional training.

2.12.6. Assessment

2.12.6.1. Assessment criteria are transparent and informed by sound educational theory.

2.12.6.2. Learners are provided with clearly stated outcomes for each course/study level that must successfully be achieved in order to be deemed competent.

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- 2.12.6.3. Assessment practices are comprehensive and appropriate to the teaching and learning within the programme.
- 2.12.6.4. The design, moderation, implementation and recording of assessments is rigorous and managed securely and effectively.
- 2.12.6.5. Assessment criteria are regularly reviewed to ensure that learner success produces graduates capable of practicing their profession competently, efficiently, ethically and with the attributes to engage in the broader health context.

2.13. Dispensing Opticianry education, supervision and clinical/ practical hours

- 2.13.1. There is an appropriate orientation programme to introduce students to their clinical training.
- 2.13.2. Clinical practice commences early in the programme, is informed by community needs and conducted in suitable and adequately equipped facilities both on the campus and in community-based clinical training sites.
- 2.13.3. Adequate training opportunities created in different contexts and at various levels of care such as primary health care clinics, community health centres, district, regional and tertiary hospitals.
- 2.13.4. Systems in place to ensure that learners practice within the scope of profession and maintain high ethical standards.
- 2.13.5. Structured methods for recording student learning such as logbooks and learning portfolios are used.
- 2.13.6. Adequate supervision (in time and numbers) by registered professionals reflected in the timetable of the programme.
- 2.13.7. The supervision team is made up of a mix of appropriately experienced professionals required to ensure effective training and assessment of students.
- 2.13.8. Supervisors are demographically diverse, Optometrists and/or Dispensing Opticians, experienced and engage in continuous education in clinical and educational protocols to ensure high clinical standards.
- 2.13.9. There are appropriate methods of monitoring and assessing the development of students

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during training.

2.13.10. Staff (academic, clinical and administrative) at all the clinical training facilities are aware of the exit level outcomes students are expected to meet.

2.13.11. Students meet the required number of clinical hours/patient numbers, in a range of areas within the scope of the profession.

2.14. Clinic/ Optical Laboratory Management and Patient Care

2.14.1. The programme has access to clinical patient care facilities and equipment to support effective realization of programme mission, goals and objectives

2.14.2. There is a well-coordinated system of clinical governance, management, administration and evaluation in place for all the clinics which are managed by the programme

2.14.2. Clinical and Dispensing protocols for all areas of training are documented and available to stakeholders.

2.14.3. The eye and vision care services provided by the Programme are consistent with accepted and well-established healthcare standards (e.g. PBODO clinical practice guidelines).

2.14.4. Patients' rights are known and adhered to by students and staff and patient confidentiality is secured at all levels.

2.14.5. There is a defined set of clinical/ optical dispensing competencies which must be attained by students as entry level practitioners and effective monitoring systems to ensure that these are achieved.

2.14.6. The regulated scope of practice is covered in the clinical/ optical dispensing programme delivery.

2.14.7. There is adequate support for historically disadvantaged / underprepared students in terms of academic development opportunities for clinical training.

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2.15. Learning materials development

- 2.15.1. There are documented policies and /or procedures in place for developing and evaluating learning materials and ensuring their alignment with programme goals?

2.16. Quality Assurance

- 2.16.1. There is an institutional Quality Management Structure.
- 2.16.2. There is a detailed description and critique of how quality is assured in the programme.
- 2.16.3. All staff and learners are aware of required programme quality standards.
- 2.16.4. Optometry/ opticianry department engages in quality assurance and quality enhancement activities regularly.
- 2.16.5. Reports of quality reviews of the academic and support systems and measures for improvement are readily available.

2.17. Interpretation of academic freedom and autonomy

- 2.17.1. The programme is responsive to updated regulatory requirements, has implemented stipulated exit level outcomes and minimum clinical training requirements, and addressed issues of redress, equity and access as defined by the relevant regulatory authorities, within the context of academic freedom.

2.18. Impact and Review

- 2.18.1. There is evidence of the policy and processes related to the measurement of the programme impact and review.
- 2.18.2. Staff and students are aware of the impact of the programme at a local, provincial and national level.
- 2.18.3. Relevant stakeholders are engaged to obtain feedback on the quality of graduate education, competence, attributes and overall impact on the health of the communities served.
- 2.18.4. Evidence exists of initiatives to implement feedback and recommendations from stakeholders.

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3. CRITERION 3: STUDENT RECRUITMENT, ADMISSION, SELECTION AND SUPPORT

The programme is widely accessible, recruitment documentation informs potential learners of the programme accurately and sufficiently and national and institutional policies/legislation regarding access/admission is adhered to. Admission and selection policies and practices are transparent and commensurate with the academic requirements of the programme. The profile of students selected takes into account the programme’s intended learning outcomes, its capacity to offer good quality education, widened access and equity, the demographic profile of the particular profession and needs of the communities served. There is sufficient support to students academically, financially and socially. Students are aware of these services and can access them or be referred to when required. There are sufficient resources to support quality teaching and learning; both staff and students can access the required relevant resources, and these resources are continuously maintained. The reviewing process is in place to assess the impact of the programme. The management is able to freely innovate and put measures in place to improve teaching and learning.

1	2	3	4
Does not comply	Needs improvement	Meets minimum standards	Commend
did not comply with the majority of the minimum standards specified in the criteria	did not comply with all the minimum standards specified in criterion. Problems/ weaknesses could be addressed in a short period of time	minimum standards as specified in the criterion were met.	all the minimum standards specified in the criterion were fully met and in addition, good practices and innovation were identified in relation to the criterion.

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3.1. Recruitment

- 3.1.1. There are transparent mechanisms to ensure recruitment and admission of qualifying students for the programme.
- 3.1.2. The admission policy of the programme is aligned with national and institutional policies relating to access and equity. Community eye health needs inform admission policy.
- 3.1.3. The department has a recruitment policy/strategy that is well managed and the programme is widely marketed/advertised in both urban and rural areas.
- 3.1.4. Advertising and promotional material contains accurate and sufficient information on the programme with regards to admission policies, costs, completion requirements and academic and clinical standards.
- 3.1.5. The marketing strategy adheres to the regulations of the Department of Higher Education and Training (DHET), HPCSA, Council for Higher Education (CHE) and the South African Quality Assurance (SAQA). There are clear and well communicated criteria for student selection and admission
- 3.1.6. The institution/faculty has a bursary office to assist financially disadvantaged learners.
- 3.1.7. There is an indication of what percentage of learners accepted to the programme that apply for bursaries, are not afforded them and this information together with reasons are communicated to the relevant authorities.
- 3.1.8. The admission criteria into the programme is readily available and transparent.
- 3.1.9. Legislation regarding admission, RPL/age exemption is applied.

3.2. Widening of Access

- 3.2.1. Recruitment and marketing focuses on underserved areas.
- 3.2.2. Selection criteria factors in health HR needs and access policies.
- 3.2.3. Selection criteria is made explicit through various sources and contributes to the programme's plans regarding demographic representivity.

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3.2.4. Efforts are in place at the institution to widen access to academically disadvantaged learners.

3.3. Equity Policy

3.3.1. There are clearly documented equity targets and transformation goals.

3.3.2. Tabulated composition of the student body: number, race, sex, linguistic background, disability, etc. is available.

3.3.3. Past and current profile and throughput of the student body in relation to the profession’s need for transformation is documented.

3.3.4. Where deficient, plans have been laid down to attain these targets in future.

3.4. Approval of Prior Learning (RPL)

3.4.1. Provision is made for flexible entry routes, for example, approval of prior learning (RPL)?

3.4.2. There is a specific RPL policy.

3.4.3. RPL is being implemented on a practical level and does not constitute more than 10% of the entire learner intake.

Complete the following table:

Number of learners awarded with RPL over past 5 yrs.	List type of outcome: Exit level, critical, or specific	List outcomes for which RPL was awarded

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3.4.4. Problems/successes generally experienced by learners who enter the programme through RPL is documented

3.5. Community/Professional Needs

3.5.1. Details of how the needs of the particular community and profession is taken into account with regard to:

- 3.5.1.1. the demographic profile of the profession.
- 3.5.1.2. the general health and eye disease profile of the community.
- 3.5.1.3. the number of learners the programme can admit.

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3.6. Capacity of the Programme

Please complete the following table:

	2016				2017				2018				2019				2020				Total							
Annual Intake of registered learners																												
Gender distribution (F/M)	F		M		F		M		F		M		F		M		F		M		F		M					
Race distribution	B	C	I	W	B	C	I	W	B	C	I	W	B	C	I	W	B	C	I	W	B	C	I	W	B	C	I	W
Total number of graduates/ Diplomats																												

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Number and profile of Master level registrations																			
Number and profile of Doctorate level registrations																			
Learner numbers projections for the next three years																			
Age range when registering for 1 st year	<18	>18 <25	>25	<18	>18 <25	>25	<18	>18 <25	>25	<18	>18 <25	>25	<18	>18 <25	>25	<18	>18 <25	>25	

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	2016	2017	2018	2019	2020	Total
Class sizes						
1 st year						
2 nd year						
3 rd year						
4 th year						
Post-graduate						
TOTAL						

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3.7. Student support

- 3.7.1. There are effective student support services provided to students for personal counselling and students have access to campus healthcare services.
- 3.7.2. There are effective student support services dealing with debt counselling, financial aid, academic support, learning support, information technology support.
- 3.7.3. There is student access to management of the programme and there are mechanisms to ensure that students are given opportunities to participate in student governance and leadership development activities.

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4. CRITERION 4: STAFFING

The academic staff responsible for the programme, are demographically diverse, suitably qualified, have sufficient relevant experience and competence in teaching and assessment and research adequate for the nature and level of the programme. The academic and support staff complement is of sufficient size and seniority for the nature and field of the programme and the size of the learner body to ensure that all activities related to the programme could be done effectively. The institution and/or other recognised agencies provide opportunities to academic staff to enhance their teaching, assessment competencies, research capacity and to support their professional growth and development. An appropriate ratio exists between full-time and part-time staff and relevant legislation and appropriate administrative procedures are followed in the recruitment and employment of staff. Redress and equity considerations are accounted for in the appointment of staff. Support staff are adequately qualified and their knowledge and skills are regularly updated.

1	2	3	4
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4.1. Staff

- 4.1.1. Staff demographics addresses equity: race, gender, location.
- 4.1.2. Staff members are suitably qualified: have relevant academic qualification higher than the exit level of the programme.
- 4.1.3. Academic staff members for postgraduate programmes have relevant academic qualifications at least on the same level as the exit level of the programme.
- 4.1.4. There is a good mix of qualifications, expertise, international & national status/profiles, research capacity and administrative and leadership experience.
- 4.1.5. The majority of full-time academic staff members have two or more years of teaching experience in a recognised higher education institution, and in areas pertinent to the programme.
- 4.1.6. Staff have contributed to national/regional/local health policies and serve on health and social structures within the communities that students are trained.
- 4.1.7. Workload, courses/modules taught and throughput rates are available for each member of staff for the last three years.
- 4.1.8. Staff-student ratio is appropriate for the effective delivery of the programme.
- 4.1.9. Staff development opportunities exist in higher education policy and practice, curriculum development and teaching methodologies.
- 4.1.10. Appropriately qualified and registered practitioners are employed to supervise students' clinical practice: have at least two years of (relevant) experience in the field of practice.
- 4.1.11. All staff engage in Continuing Professional Development.

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4.2. Qualifications/ Teaching Experience

4.2.1. Full Time Staff - Please complete the following table:

Name	Qualification(s)	Rank	Race	Institutional/ External Position Held	Teaching Experience	Years of service at Institution	Instructional Offering (list subjects)

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4.2.2. Particulars of Current Part-Time Academic/Clinical Staff

Name	Qualification(s)	Rank	Race	Position Held	Teaching Experience	Years of professional practice	Instructional Offering (list subjects)

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4.2.3. If there is more than one instructor, what are the duties and responsibilities of each?

Instructional Offering	No. of Instructors	Names of Instructors	Duties and responsibilities of each Instructor

4.2.4. What problems have resulted from this division of responsibilities?

4.2.5. Selection criteria for part time instructors/ expertise – motivate?

4.2.6. Complete the following table:

	<i>Provide Number</i>
Number of new staff (current year).	
Number of staff on leave, or sabbatical	
Number of resignations during the past three years.	
Number of frozen posts.	
Number of joint staff appointments (province and institution)	
Number of externally funded posts.	

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4.3. Staff Assessment Competence

4.3.1. Academic staff responsible for the programme have at least two years' experience of learner assessment at the exit level outcome:

Name	Qualification	Teaching/Assessment Experience	Assessment policy at exit level of the programme

4.3.2. Professional development and training is provided for staff as assessors to ensure that assessment is in line with SAQA requirements and acceptable education practices.

4.3.3. Learner assessment is at the appropriate level for the year of study and assessment processes are conducted by staff in a fair and transparent manner.

4.3.4. Feedback is provided by staff to promote student formative learning.

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4.4. Staff Research Profile

4.4.1. All staff are actively involved with research:

Name	Publications in subsidy approved journals in last 5 yrs.	Publications in non-subsidised /other journals in last 5 years	Papers at international conferences in last 5 years	Papers at local conference in last 5 years

4.4.2. Staff members contribute to the overall research profile of the department through supervision of post-graduate students.

Name of staff member	No of research learners	Supervisor(s)	Year of study	Publications; provide details

4.4.3. Research is aligned to the mission and vision of the institution, aligned with health policies, informed by community stakeholders and

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impacts on the improvement of the health system, contributes to professional advancement and informs policy changes.

- 4.4.4. Health systems research is undertaken and disseminated to relevant policy makers and communities.
- 4.4.5. Staff research capacity development and mentorship programmes are available for young researchers.
- 4.4.6. There is adequate access to funding for research projects conducted by staff

4.5. Staff Development

4.5.1. Provision is made for staff development within:

- 4.5.1.1. the programme
- 4.5.1.2. the faculty
- 4.5.1.3. the institution
- 4.5.1.4. the profession

4.6. Size and Seniority

4.6.1. What are the contact hours per staff member?

Name	Position	Instructional Offering	Contact hrs. per week – academic/ theory (T)	Contact hrs. per week – clinical/ practical (C/P)

4.6.2. What is the staff-to-learner ratio for academic staff; expressed in full-time equivalents (FTE's)?

4.6.3. What is the staff-to-learner ratio for technical/clinical staff; expressed in full-time equivalents (FTE's)?

4.6.4. The ratio between part-time/support staff and full-time staff appropriate to ensure working conditions conducive to teaching and learning, and research.

4.7. Legislation and conditions of service

4.7.1. Are the stipulations of the Labour Relations Act and the conditions of service adhered to with regard to recruitment and employment of staff?

4.7.2. How are redress and equity taken into consideration when appointing staff?

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4.8. Procedures for selection, appointment, induction and payment

4.8.1. Transparent systems exist for the:

- 4.8.1.1. selection
- 4.8.1.2. appointment
- 4.8.1.3. induction
- 4.8.1.4. payment, of staff members

4.8.2. Staff profile is reflective of the demographic profile of the region.

4.8.3. The current remuneration policy encourages academic staff to stay at the current institution, by allowing them to earn on a competitive scale.

4.9. Staff achievements

Staff Achievement	Name of staff members	Details of Achievement/Award
Professional Honours/ Teaching Award		
Award for Research/ Publication		
Grants/ Research Contract		
Staff Development & Training		
Record of completion of studies		
Service record		
Other relevant		

4.9.1. Has any staff member needed to reduce his/her workload for reasons of stress or burnout?

4.9.2. Are there fair, transparent requirements for promotion?

4.9.3. Professional experience is acknowledged as one of the criteria for promotion with research

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output.

4.10. Contractual arrangements

4.10.1. Orientation and induction opportunities are provided by the institution and/or other recognised agencies contracted by the institution, in which new academic staff members can participate.

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4.11.2. Clinical/ Technical staff (Please complete the following table)

Name	Qualification(s)	Rank	Position held	Working Experience	Years of service at Institution	Duties	Capacity Development in Optical Technology in the past 3 years

5. CRITERION 5: PHYSICAL RESOURCES AND INFRASTRUCTURE

There are adequate physical resources and infrastructure suitable for student education and training. Both the students and staff have access to these resources and services when required.

1	2	3	4
Does not comply	Needs improvement	Meets min. standards	Commend
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5.1. Capacity for effective delivery

- 5.1.1. There are adequate resources (staff, physical, financial) for effective delivery of a quality, socially accountable optometry/ opticianry programme.
- 5.1.2. Teaching, learning and clinical practice facilities and equipment are adequate and effectively maintained to support the achievement of the mission, goals and objectives for the programmes.
- 5.1.3. Identify, describe and evaluate the resources available to offer the professional training programme. This should include:
 - 5.1.3.1. Operating budget
 - 5.1.3.2. Physical space
 - 5.1.3.3. Clinical Equipment and consumables
 - 5.1.3.4. Consumables for laboratory and clinical training
 - 5.1.3.5. Computers, internet access and other technological equipment for modern-day teaching and learning
 - 5.1.3.6. Library facilities: There is adequate staff and student access to well-maintained library and information and facilities to support the effective delivery of the online elements of the Optometry/opticianry programme. Adequacy of library support in terms of access to current prescribed and recommended literature and additional readings.
 - 5.1.3.7. Access to training sites on campus and within communities.

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- 5.1.3.8. Laboratory Supplies
- 5.1.3.9. Transport
- 5.1.3.10. Student academic and social support services
- 5.1.3.11. Graduate placement programme
- 5.1.3.12. Counselling/ career development
- 5.1.3.13. Other

NB.: The Self-Evaluation review for clinical training facilities template by the university for each clinical facility attached to it should be used in conjunction with this template (as an attachment).

SUMMARY

Include reflections on:

- i. Strengths
- ii. Challenges /Weaknesses
- iii. Opportunities for further development of the education and training programme
- iv. Threats

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APPENDIX E

Site Visit Plan

The Institution should propose a plan (with timeframes) for the site visit as per the template in Appendix A). This proposal should be submitted together with Academic and Clinical timetables and the Self Review Report – at least seven weeks before the site visit. The evaluation panel will review it and make suggestions for changes – which will be communicated to the Institution at least a week prior to the site visit.

1. Arrival, greeting and introductions.
2. Review of prepared documentary evidence
3. Request for additional/outstanding documents
4. Meetings with -
 - 2.1 the Leadership/Management of the Institution e.g. Dean, Director of the Department/ School;
 - 2.2 members of Staff (most/all) for 30 to 60 minutes without Head of Programme present;
 - 2.3 students (at least 50%) of the final year students for approximately an hour;
 - 2.4 students (representatives from other levels)
 - 2.4 Head of the Programme and other senior members of staff;
 - 2.5 Head and Programme staff for closure meeting.
5. Observation of academic and clinical teaching and learning activities. Visit and observation of students and staff in a wide range of clinical teaching and learning activities reflecting the different areas of the scope of the profession. Ensure that as many of the practical training areas are represented in the sites selected for review.

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6. Tour of on-and off- site facilities.
7. Review of additional documentation.
8. Closing meeting

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APPENDIX F

Documents for review by the Evaluation Panel during the Site Visit

The institution will prepare, label and coherently organise the documents listed for the Evaluation Panel to review during the site visit. A list of appendices for documented evidence in support of the response **to each criterion as well as their sub-items must be developed** and the file/s in which those documents (appendices) are placed should be labelled, for ease of reference.

1. Staff profile by at least race, gender, qualifications, registration, courses/modules taught for the last three years. Key performance criteria.
2. Departmental and institutional policies on admissions.
3. Student profile by at least race, gender, disability, levels of study, South African, foreign, etc. for the last three years.
4. Performance indicators in terms of throughput rate for the last three years.
5. The full learning programme (undergraduate and postgraduate) offered by the institution.
6. Curriculum documentation for all courses including teaching and learning, and assessment.
7. Records of assessments and examinations: question papers, memoranda and marked examination scripts for all courses, assignments, clinical session plans, clinical assessment and progress reports as well as copies of written feedback from students on clinical performance.
8. Quality assurance practices, including internal moderation, and external examiner reports for all courses.
9. Students' records of clinical practice.

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A complete verified record of students' clinical contact hours must be available. The records for at least three years of graduating classes as well as records for all students currently enrolled in the programme.

10. Minutes of Departmental and Faculty Board meetings, stakeholder meetings.
11. Evidence of staff engagement with CPD.
12. A report on staff development activities and research outputs in the last three years.
13. A library report on prescribed books, recommended books, journals, online resources etc. that students can access in the library.
14. Contracts signed for community partnerships for training, service and research,

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APPENDIX G

Code of Conduct for Evaluators

Evaluators are expected to conduct themselves in accordance with the highest standards of ethical, moral and professional behavior during all phases of the process. Each evaluator must review, sign this Code of Conduct and submit it to the Board Deputy Company Secretary together with the written acceptance of the appointment to an Evaluation Panel – prior to receiving any documentation from the Institution.

I _____ (name) agree to uphold and conduct myself in accordance with the highest standards of ethical, moral and professional behavior at all times. With respect to the Programme Evaluation and Site Visit, I will:

1. Treat peers, staff and students at the institution, and the Board/ HPCSA with courtesy and respect.
2. Exercise punctuality at all times.
3. Maintain strictest confidentiality. The results and outcomes of the process will only be discussed with the Board Deputy Company Secretary and/or the Education, training and registrations committee of the Board.
4. Conduct the evaluation in an objective, fair and impartial manner.
5. Evaluate the programme on its merits i.e. does it meet the Board specified criteria/ requirements.
6. Evaluate the programme (i.e. nature of learning opportunities provided by programme) and not individual students' performance.
7. Respect differences – methods of attaining requirements are variable and are the right of the programme.
8. Avoid comparisons with own training or training programmes.
9. Refrain from offering advice to the programme/institution.
10. Recuse myself in the event of a conflict of interest.
11. Sign and submit (to Board Deputy Company Secretary) the Code of Conduct and Confidentiality Agreement prior to receiving the Institution's Self Review Report.
12. I will not discuss the report directly with the institution - all communications will be via the Board/ Board Secretariat.

Signature

Date

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APPENDIX H

Template for the Programme Evaluation Report

To be compiled by the evaluation panel following the site visit and programme evaluation.

Guidelines for the Evaluation Report

This report should address all areas mentioned in the Board's Regulations document. The institution will have conducted a self-review and compiled a report reflecting the required information. The evaluation panel is expected to assess, analyze and critique the institution's programme to offer quality education and training that meets that Board's Regulations document.

The panel is encouraged not to repeat the information shared by the institution in its report – but rather confirm the information in the self-evaluation report; describe the panel's assessment, analysis and critique of the programme in all of these areas. The intention of the process is to assess and improve the quality of programmes, and reports should therefore, be constructive and offer quality development guidelines where applicable. This requires that the programme manager provides the panel members with a well outlined list of appendices referencing the documented evidence in support of the responses to each criterion as well as their sub-items; the file/s in which those documents (appendices) are placed should be clearly labelled for ease of reference. Confidentiality of the evaluation process and its outcome is to be respected. It is not permissible to divulge any information regarding the evaluation or the evaluation report to persons other than the Board Deputy Company Secretary.

The report should include comments on:

- a) **Current status** of the programme.
- b) An overview of the recommendations of the **previous evaluation** and how they have been addressed.

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- c) Panel findings for criterions 1 to 5.
- d) Summary, including reflections on:
 - i. Strengths
 - ii. Challenges /Weaknesses
 - iii. Opportunities for further development of the education and training programme
 - iv. Threats
- e) Panel recommendations