



Accreditation Team Report and Recommendation Template

EIZ-E14-TEM-P

REVISION 0:

10th September 2025

Document No.: EIZ-E14-TEM-P	Revision No.: 0	Effective Date: 10/09/2025	
Subject: Accreditation Team Report and Recommendation			
Compiled by: TQM	Approved by: The Registrar/CEO	Next Review Date: 09/09/2026	Page 2 of 36
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Version	Changes from Previous Editions (Section: Documentation Revised or Discarded)	Date Changed MM/Year
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Development, Review and Approval					
Prepared by:	Date	Reviewed by	Date	Approved by	Date
 Rex H. Kalangu Technical & Quality Manager	13/08/2025	 Eng. Julianna Musonda Mutashi Deputy Registrar & Director - Operations	13/08/2025	 Eng. David Kamungu Registrar & Chief Executive Officer	13/08/2025

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DEFINITIONS

The definitions for terms used in the E-series policy documents are listed document E-01- P.

ABBREVIATIONS

The abbreviations used in the E-series policy documents are listed in document E-01-P.

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BACKGROUND

Figure 1 below defines the documents that comprise the Engineering Institution of Zambia (EIZ) system for Accreditation of programmes that meet the educational requirements for professional categories. The illustration also locates the current document.

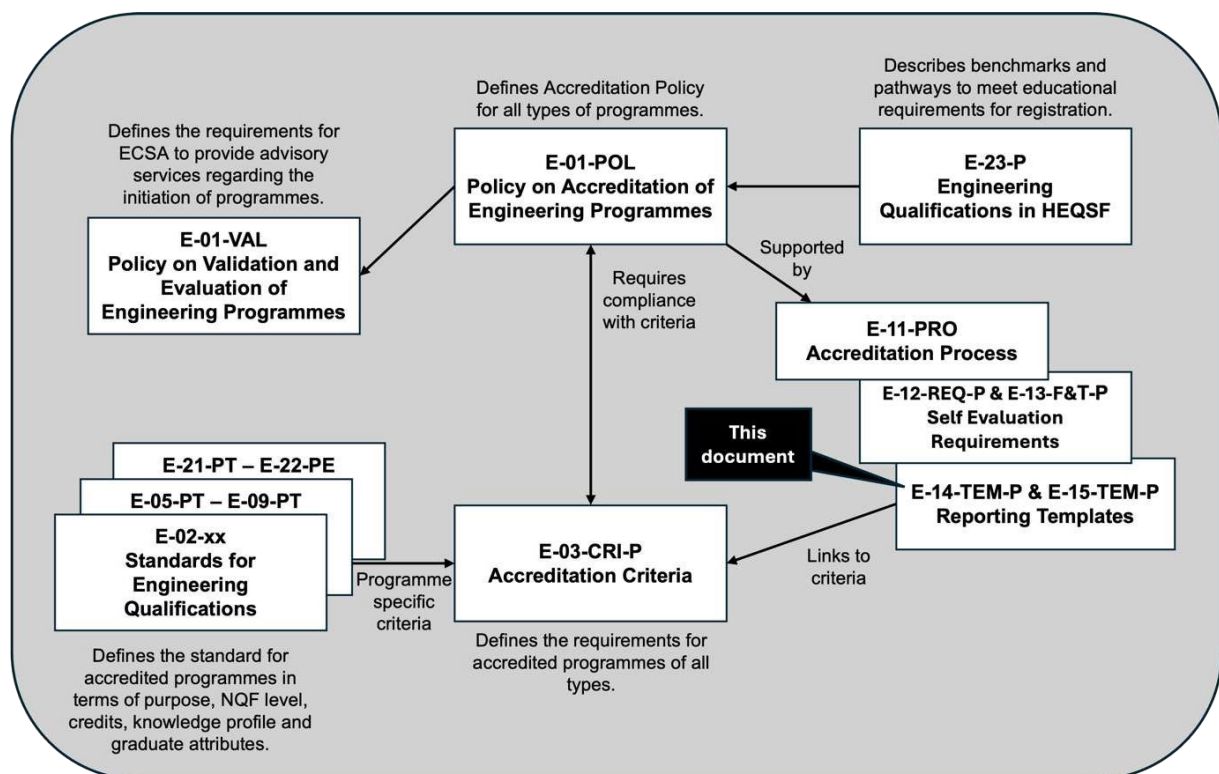


Figure 1: Documents defining the EIZ Requirements for Accreditation

1. POLICY STATEMENT

EIZ develops and operates a quality assurance system that leads to the Accreditation of various engineering education programmes. The standards, criteria, policies and procedures that define the Accreditation system are defined in this set of documents.

The Accreditation system assures the public, students, employers, funders and other stakeholders that firstly, the programme fulfils its key purpose of providing the graduate with

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the educational foundation for engineering in a stated role at the professional level; and secondly, the teaching, learning and assessment processes are effective.

2. PURPOSE

The Accreditation Team Report consists of the elements defined in this document. The accompanying template is provided in electronic form and should be completed using MS-Word. Instructions to rapporteurs are italicized.

This form is to be used for Provisional, Regular, Interim and Final Accreditations. In the case of a Provisional Accreditation, the evaluation is based on implementation already completed (if any) and planning information; the Team must evaluate the actual element if already implemented or the plans for satisfying each criterion. The Team must choose wording to indicate whether an actual or a planned aspect is evaluated.

The reporting forms for an initial and desktop evaluation of newly proposed and/or un-accredited programmes are provided in **E-EVAL-P**.

3. REPORT

The Accreditation Team is required to report on the programme holistically, including the evaluation against the Accreditation criteria and any issues of concern and deficiency. In the case of a Provisional Accreditation the Team must comment on the prognosis of the programme meeting the criteria when fully implemented.

The Report must be suitable for the various audiences that may engage with its findings, such as the Accreditation and Training Committee, the Dean, the Head of Department and the staff responsible for the programme. In addition, the audience may include University executives outside the faculty who are also responsible for the programme. These reports are also submitted to the Accreditation Directorate of the Council on Higher Education.

A prescribed reporting template is available in: **E-14-TEM-P: Annexure 1: Template for Accreditation Reports on Engineering Programmes**, and **Annexure 2: Accreditation Support Forms**.

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The template requires reporting under the following headings:

3.1 Institution, programme and team details

Details including the name of the University, department, title of qualification (plus branch/option designators) and the abbreviation must correspond exactly to the official form, for example, as reflected in the relevant University rule book.

3.2 Background to the accreditation

For relevant background or contextual information, refer to previous Accreditation decisions.

3.3 Criteria and procedures applied

List policies, criteria, standards and applied processes, referring to relevant documents and giving the revision number and date. This should be in a table format

3.4 General observations of the programme and its provider

Provide holistic observations of the programme and the provider responsible for the programme (e.g. department or school, faculty or university level).

3.5 Structure, content and knowledge breakdown (Criterion 1)

- Comment on the evidence (extent, adequacy, etc.) presented against this criterion in the SER and other material.
- Present further information obtained during the Accreditation site visit (if relevant).
- Comment on the Team's evaluation of the evidence against this criterion (reasoning of the Team, leading to the recommendation that is to be given).
- Comment on the Team's conclusion regarding compliance of programme with this criterion.
- Introduce any deficiencies and concerns (Formal statement of concerns and deficiencies in format prescribed in Section 10).

3.6 Assessment of graduate attributes (Criterion 2)

Follow approach detailed in section 3.5 above.

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3.7 Quality of teaching and learning (Criterion 3)

Follow approach detailed in section 3.5 above.

3.8 Resources and sustainability and capacity for improvement (Criterion 4)

Follow approach detailed in section 3.5 above.

3.9 Response to previously identified deficiencies and concerns (Criterion 5)

In the case of deficiencies and concerns identified during the previous Accreditation, such deficiencies and concerns must be adequately addressed.

3.10 Recommendation

- Preamble: Overall reasoning of the Team leading to the recommendation.
- Recommendation using one of the standard texts in Appendix A.
- A clear, complete statement of any deficiencies and concerns in the format prescribed in Appendix B must be given.

3.11 Acknowledgements

3.12 Signatures

The Accreditation Team Leader, Accreditation Panel Deputy Leader and the Accreditation Panel Leader must sign and date the *final* version of the report.

4. NAMING OF REPORTS

For ease of reference and identifying reports at the different stages of development and finalisation it is recommended that the following file naming convention be applied:

The first report at the end of the accreditation site visit:

DRAFT 1+Abbreviation of provider+Year+Abbreviation of programme

The edited report that will be submitted to the APL and for Consistency Review:

DRAFT 2+Abbreviation of provider+Year+Abbreviation of programme

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Following the consistency review the APL submits a further edited report to EIZ which is then send to the education provider to verify factual correctness:

DRAFT 3+Abbreviation of provider+Year+Abbreviation of programme

The further edited report that will be signed off and submitted via the APL to EIZ for consideration by the ATC:

FINAL+Abbreviation of provider+Year+Abbreviation of programme

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REVISION HISTORY

Revision Number	Revision Date	Revision Details	Approved By
Rev. 0	10 Sep 2025	First Draft	EAC
Rev. 0	10 Sep 2025	Approval and Publishing	Registrar & CEO

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Rev. 0	10 Sep 2025	The document has been revised to ensure alignment with changes on E-01-POL, and reflect the changes implemented in the processes and procedures for accreditation of Engineering programmes.	
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Template for:

Accreditation Team Report and Recommendation

Revision 0 dated 10 September 2025 and consisting of 11 pages has been Recommendation for approval and reviewed for adequacy by the EIZ Accreditation Committee and is approved by the Registrar & CEO:

.....
 Technical & Quality Manager

 10 September 2025

 Date



 The Registrar & CEO

 10 September 2025

 Date

This definitive version of this policy is available on our website.

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APPENDICES

Appendix A: Accreditation Support Forms

The support forms lead the Team through the Accreditation criterion 1 to 5 and provide spaces to record judgements and supporting notes against criteria and their sub-items. While Annexure 2 is attached to the report, the body of the Report guided by Annexure 1 must stand alone.

Appendix A1: Possible recommendation formats

The Accreditation Team recommends to the Accreditation and Training Committee (ATC) that ... (Choose one of the following recommendations and delete the others.)

D1: At any type of Accreditation or evaluation by an Interim Report (If the programme has no deficiencies)

The degree/diploma programme is Accredited until the next Regular Accreditation.

D2(a): At a Regular Accreditation (If the programme is deficient and an Interim Accreditation within 24 months is appropriate)

The degree/diploma programme is Accredited until the year..... Deficiencies identified in this report are to be addressed. An Interim Accreditation is required in(year) to evaluate the results of actions to overcome the deficiencies.

D2(b): At a Regular Accreditation (If the programme is deficient and an Interim Report within one year is appropriate)

The degree/diploma programme is Accredited until the year..... Deficiencies identified in this report are to be addressed. An Interim Report is required by (year), detailing actions undertaken to overcome the deficiencies and objective measures that indicate the success of these actions.

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D3: In the case of evaluation by an Interim Report (*Deficiencies persist from the previous Accreditation and/or new deficiencies appear*)

The degree/diploma programme is Accredited until the year Deficiencies identified in this report are to be addressed. Notice is given that an Interim Accreditation must be initiated within months.

D4: During an Interim Accreditation (*Deficiencies persist from the previous Accreditation and / or new deficiencies appear*)

The degree/diploma programme is Accredited until the year Deficiencies identified in this report are to be addressed. Notice is given that Accreditation will be withdrawn if the deficiencies are not satisfactorily remedied. A Final Accreditation is required not later than(date) to evaluate the results of actions undertaken to overcome the deficiencies.

D5: During a Final Accreditation (*Deficiencies persist from the previous Accreditation or new deficiencies appear*)

Accreditation of the..... degree/diploma programme is to be withdrawn with effect from(date).

D6. During any of the above Accreditations (*Current or previously declared deficiencies for which there is a demonstrable lack of commitment and lack of capacity to improve*)

Notice is hereby issued that Accreditation of the programme will be terminated if deficiencies identified in this report are not remedied within six (6) months of the decision being communicated to the provider. A Final Accreditation must be conducted within this period. The provider must provide a plan for teaching out or transferring students registered in the programme should Accreditation be withdrawn.

D7: Not in use.

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D8: For a programme evaluated for Provisional Accreditation (Programme is judged likely to receive Accreditation if implementation continues according to documented plans)

The degree/diploma programme is provisionally Accredited until the year..... The first Regular Accreditation must take place the year after the first graduates are produced.

D9: For a programme that demonstrates actual or potential deficiencies (Deficiencies make Accreditation unlikely if implementation continues according to documented plans)

Provisional Accreditation will not be granted to the programme.

In the case of a programme submitted for initial evaluation, the opinion on the planned programme is one of the following or a combination of items O2 and O3:

O1: The planned programme for.....as reflected in the documentation meets the criteria.

O2: Aspects of the planned programme for as reflected in the documentation potentially fail to meet the criteria listed above.

O3: Aspects of the planned programme for..... as reflected in the documentation are cause for concern regarding the criteria listed above.

If necessary, for any type of Accreditation, add:

Concerns recorded in this report must be addressed and will be reviewed at the next Regular Accreditation.

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Appendix B: Format for recording deficiencies or concerns

The programme is deficient in relation to Criterion X [item Y] in that ... *<Insert what was found and state why it does not meet the criterion.>*

The Team is concerned that the programme ... *<Describe the condition that is cause for concern and that relates to possible future non-compliance with criteria.>*

The Team comments that ... *<Describe the condition that is good or bad in the programme.>*

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ANNEXURE

Annexure 1 to E-14-P: Template for Accreditation Reports on Engineering Programme

1. Institution, programme and Team details

1.1	University		
1.2	Department		
1.3	Qualification: Full title, including branch/option		
	Qualification abbreviation		
1.4	Person responsible for programme		
1.5	Date of Accreditation		
1.6	Team	Leader	
		Member	
		Member	
		Member	
1.7	Observers: Name and affiliation		
1.8	Type of Accreditation: Regular Accreditation, Interim Accreditation/Report or Final Accreditation		
1.9	Date of Previous Accreditation		
1.10	Decision of Previous Accreditation		

See main document, **E-14-P** for instructions on completing the Report.

1. **Background to the Accreditation**
2. **Criteria and procedures applied**
3. **General observations of the programme and its provider**
4. **Structure, content and knowledge breakdown (Criterion 1)**
5. **Assessment graduate attributes (Criterion 2)**

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6. Quality of teaching and learning (Criterion 3)
7. Resources and sustainability and capacity for improvement (Criterion 4)
8. Response to previously identified deficiencies and concerns (Criterion 5)
9. Recommendation
10. Acknowledgements

As Accreditation Team Leader, I certify that this report has been approved by the Team.

Accreditation Team Leader Date:

Report noted:

Accreditation Panel Deputy Leader:

Date:

Report Noted:

Accreditation Panel Leader

Date

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Annexure 2: Accreditation Support Form

Instruction: In the right-hand column, insert a word or words that indicate the team's judgement of the programme against the criterion or item. For example:

Yes/No / Complies / Concern exists / Partly compliant / Non-compliant / No evidence / Not Applicable

Comment as required or use the spaces marked with < > to insert prose notes on potential deficiencies or concerns. Such entries support but do not remove the need for a properly reasoned account in the main body of the report.

xx refer to the credits defined for the qualification in the Standard.

Criterion 1: Structure, content and knowledge breakdown

Question 1.1: Does the programme purpose statement indicate the primary purpose of meeting the educational requirements for <Category>?	Yes/No
< >	

Question 1.2: Does the programme comprise a minimum of <required credits> as defined in the relevant standard document with at least 120 credits at the exit level?	Yes/No
< >	

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Question 1.3: Does the programme breakdown by knowledge area conform to the minima specified in the relevant standard? Use columns three and four in the table below for reporting.

Knowledge area	Minimum Credits per Standard	Actual Credits	Compliance Yes/No
Mathematical Sciences	xx		
Natural Sciences	xx		
Engineering Sciences	xx		
Design and Synthesis	xx		
Complementary Studies	xx		
Subtotal	xx		
For reallocation	≥xx		
Total	≥xx		

< >

Question 1.4: Does the programme have a coherent core consistent with the Level Descriptor and Range Statement of GA 2?	Yes/No
< >	

Question 1.5: Does the programme have specialised study as described in the relevant standard document.	Yes/No
< >	

Question 1.6: Does the name of the programme match its purpose?	Yes/No
< >	

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Question 1.7: Does the programme have explicit rules of combination and progression?	Yes/No
< >	

Question 1.8: Does the programme have explicit horizontal and vertical articulation options?	Yes/No
< >	

Criterion 2: Assessment of graduate attributes

Questions 2.1 and 2.2: Does the assessment process within the programme - ensure that all graduates satisfy each graduate attributes defined in the relevant standard document? - use a documented set of assessment criteria and processes, which taken together demonstrate that the outcomes are satisfied at the level indicated by the range statement?	Team's Evaluation <i>Complies</i> <i>Concern exists</i> <i>Partly compliant</i> <i>Non-compliant</i> <i>No evidence</i> <i>Not applicable</i>
< >	

Criterion 2: Assessment of Graduate Attributes

2.1: Problem-solving <i>Learning outcome:</i> Identify, formulate, analyse and solve <i>complex/broadly defined/well defined engineering</i> problems. (See the relevant standard document for level descriptor)	
< <i>Provide brief evidence to support your evaluation</i> >	

2.2: Application of scientific and	
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engineering knowledge <i>Learning outcome:</i> Apply knowledge of mathematics, natural sciences, engineering fundamentals and an engineering speciality to solve <i>complex/broadly defined/well defined</i> engineering problems. (See the relevant standard document for Level Descriptor and Range Statement)	
< Provide brief evidence to support your evaluation >	

2.3: Engineering design <i>Learning outcome:</i> Perform creative, <i>procedural</i> and <i>non-procedural</i> design and synthesis of components, systems, engineering works and products or processes. (See Range Statement for GA 3)	
< Provide brief evidence to support your evaluation >	

2.4: Investigations, experiments and data analysis <i>Learning outcome:</i> Demonstrate competence to design and conduct investigations and experiments. (See Range Statement for GA 4)	
< Provide brief evidence to support your evaluation >	

2.5: Use of engineering tools <i>Learning outcome:</i> Demonstrate competence to use appropriate engineering methods, skills and tools, including those based on information technology. (See Range Statement for GA 5)	
< Provide brief evidence to support your evaluation >	

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2.6: Professional and technical communication <i>Learning outcome:</i> Demonstrate competence to communicate effectively, both orally and in writing, with engineering audiences and the community at large. (See Range Statement for GA 6)	
< Provide brief evidence to support your evaluation >	

2.7: The engineer and the world <i>Learning outcome:</i> Demonstrate critical awareness of the sustainability and impact of engineering activity on the social, industrial and physical environment. (See Range Statement for GA 7)	
< Provide brief evidence to support your evaluation >	

2.8: Individual, and collaborative teamwork <i>Learning outcome:</i> Demonstrate competence to work effectively as an individual, in teams and in multidisciplinary environments. (See Range Statement for GA 8)	
< Provide brief evidence to support your evaluation >	

2.9: Independent learning ability <i>Learning outcome:</i> Demonstrate competence to engage in independent learning through well-developed learning skills. (See Range Statement for GA 9)	
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< Provide brief evidence to support your evaluation >

2.10: Engineering professionalism

Learning outcome: Demonstrate critical awareness of the need to act professionally and ethically and to exercise judgement and take responsibility within own limits of competence.

(See Range Statement for GA 10)

< Provide brief evidence to support your evaluation >

2.11: Project management and finance

Learning Outcome: Demonstrate knowledge and understanding of engineering management principles and economic decision-making.

(See Range Statement for GA 11)

< Provide brief evidence to support your evaluation >

2.12: Work Integrated Learning (where applicable)

Learning Outcome: Demonstrate an understanding of workplace practices to solve engineering problems consistent with academic learning achieved.

(See range statement for GA 12)

< Provide brief evidence to support your evaluation >

< >

Criterion 3: Quality of teaching and learning

Question 3: What is the Team's assessment of the programme in providing an effective teaching and learning process towards achievement of	Team's Evaluation <i>Complies</i> <i>Concern exists</i> <i>Partly compliant</i>
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the outcomes as evidenced by the following?	<i>Non-compliant</i> <i>No evidence</i> <i>Not Applicable</i>
3.1: The content, learning objectives, expected outcomes and method of assessment for each module of the programme are defined and documented and are available to staff and students.	
< >	
3.2: For each graduate, the information considered in 3.1 clarifies the modules in which the graduate attribute assessment takes place, the method of assessing the graduate attribute, the level of achievement required of the students and the consequences for the student of not satisfying the graduate attribute.	
< >	
3.3: The teaching and learning strategy and methodology is designed to achieve the outcomes of the programme with students who meet the stated admission criteria.	
< >	
3.4: Suitable learning opportunities are provided to facilitate the acquisition of knowledge and skills specified in the programme outcomes.	
< >	
3.5: The programme is effectively coordinated.	
< >	
3.6: The learning process encourages independent learning attitudes and abilities, and an appropriate mix and balance between different teaching and learning methods is maintained to encourage active participation of students in the teaching and learning process.	
< >	
3.7: The learning progress of students is	

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appropriately monitored and where necessary, academic development support is provided to students through structured and monitored interventions.	
< >	
3.8: Assessment practices and procedures provide feedback to students at regular intervals.	
< >	
3.9: An internal process including moderation ensures that all forms of summative assessment of student performance within the programme are effective, fair and rigorous and address the stated learning objectives and outcomes.	
< >	
3.10: Graduate attribute assessment is subject to external moderation.	
< >	
3.11: The teaching and learning process is monitored by an effective quality assurance process that supports continuous improvement.	
< >	
3.12: Student retention and throughput rates are monitored, and measures are taken to identify and address factors that adversely affect throughput, both overall and for distinct groups.	
< >	

3.13: Where the rules of the programme require work-based learning for credit towards the qualification, the academic provider ensures that such learning is executed effectively and includes the following:	<i>Evaluate each section</i>
a) The learning objectives and outcomes to be achieved are defined and agreed upon with the workplace provider.	

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b) Effective placement of students and ongoing communication in the workplace takes place. c) Suitably qualified mentors who are technically competent in the discipline and the art of mentoring are available in the workplace. d) Students are mentored in the workplace, and their performance is monitored and recorded in relation to specified objectives. e) The student's performance and competence are assessed through a rigorous process; this assessment is the responsibility of the academic provider. Quality assurance of work-based learning processes by the academic provider ensures achievement of the objectives defined in (a) above.	
< >	

3.14: Additional accreditation criteria required for online programmes.	<i>This section should only be filled out if the programme is fully online.</i>
3.14.1 All online material is available to students on a stable and effective network connection.	
< >	
3.14.2 The dedicated LMS makes provision for consultation, async and sync collaboration, communication, and feedback.	
< >	
3.14.3 The LMS makes provision for virtual simulation and WIL where required.	
< >	
3.14.4 The multipliers used for calculation of credits also account for async interaction with the learning material	
< >	

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3.14.5 The virtual contact in async lecturing mode is clearly specified and is verifiable through the timetable, learning guides and LMS records.	
< >	
3.14.6 The learning progress of students is appropriately monitored for success, and where necessary academic development support is provided through structured and monitored online interventions.	
< >	
3.14.7 The method of assessment for each module is defined and documented in order to achieve and ensure assessment integrity.	
< >	
3.14.8 Method of identity verification for each student is defined and documented to achieve and ensure assessment integrity.	
< >	
3.14.9 The complexity of assessment making use of continuous evaluation is at the correct NQF level and the evaluation can be externally moderated.	
< >	
3.14.10 The integrity of assessment of graduate attributes conducted online, is demonstrated.	
< >	
3.14.11 Institutional assistance with computer literacy is provided to students where required.	
< >	

Criterion 4: Resources and sustainability and capacity for improvement

Question 4. What is the Team's assessment of the programme in regard to it being adequately planned, resourced, led and executed to ensure that it is	Team's Evaluation <i>Complies</i> <i>Concern exists</i> <i>Partly compliant</i>
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sustainable over the period of Accreditation as evidenced by the statements below?	<i>Non-compliant</i> <i>No evidence</i> <i>Not applicable</i>
4.1: The selection criteria of students are commensurate with the programme's academic requirements.	
< >	
4.2: The number of students admitted takes into account the capacity of the programme to offer quality education and meet professional requirements.	
< >	
4.3: The selection and admission of students is linked to the institution's equity and diversity plans.	
< >	
4.4: The staff members responsible for leadership, planning and assessment of graduate attributes are professionally and technically competent in the respective disciplines. Registration with EIZ in the appropriate professional category is required.	
< >	
4.5: A strategy for recruitment, development and retention of academic staff is in place and is aligned with the diversity plan of the institution.	
< >	
4.6: The academic staff responsible for the programme are suitably qualified and have sufficient relevant experience and teaching and assessment competence.	
< >	
4.7: The number of academic and support staff is sufficient for the programme.	
< >	
4.8: The academic staff members possess a range of specialities and abilities to teach at the fundamental and specialist levels required by the programme.	

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< >	
4.9: Staff members have research profiles relevant to the programme. (See document E-03-CRI-P)	
< >	
4.10: Appropriate research development opportunities and programmes for staff members are in place.	
< >	
4.11: The allocation of budget and necessary resources to the school or department where the programme is located, together with the appropriate utilisation of these resources by the school or department forms part of the institutional planning and quality assurance processes.	
< >	
4.12 : Budgetary allocations for the programme are adequate and are effectively utilised: • Staffing budgets and resulting packages • Laboratory equipment • Computing and networking • Hybrid learning requirements • Running expenses • Library facilities • Work-based learning where applicable	<i>Respond to each item.</i>
< >	
4.13: Office, teaching and laboratory accommodation and equipment are adequate.	
< >	
4.14: Studies on the effectiveness of the programme in meeting its objectives are undertaken at regular intervals. The results are used to improve programme design, delivery and resourcing and, where	

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necessary are used for staff development and student support.	
< >	
4.15: Where academic development programmes for students are offered within or are associated with the programme, the following are fulfilled: a) The programme is designed to meet student state of preparation and progression towards the main programme. b) Staff responsible for the academic development programme are adequately qualified, experienced and skilled. c) Funding for the programme is adequate. d) Realistic criteria are applied for acceptance of students into the academic development programme. The academic development programme is quality assured.	<i>Respond to each item.</i>
< >	

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4.16 Digital Resource requirements for programmes	
4.16.1 Is the following ICT infrastructure available and suitable for the task?	
• Computing	
< >	
• Networking	
< >	
• Security and integrity	
< >	
• Software	
< >	
• Licenses	
< >	
• Suitability	
< >	
• Invigilation	
< >	
• Maintenance	
< >	
4.16.2 Are the budgetary allocations for capital and maintenance for the programme adequate and effectively used for:	
• Computing	
< >	
• Networking	
< >	
• Software	

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< >	
• Licenses	
< >	
• Updates and replacements	
< >	
• Maintenance	
< >	
4.16.3 Logistical requirements for remote Accreditation of programmes,	<i>Only respond if used.</i>
• Access to the internet through a fast and reliable internet connection is provided for use by the Team members.	
< >	
• Access to IT support is always available, to assist Team members.	
< >	
• Access to all online teaching platforms (LMS) in use is provided for Team members where required.	
< >	
• Access to suitable video conferencing/ communication software and network connectivity is provided for stable communication between Team members, staff and students when necessary.	
< >	

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Communication between Team members, and Dean and HOD's, is always available, during the remote Accreditation. Staff are available for remote interview purposes as far as possible during the Accreditation, where required.	
< >	
Live online video and pre-recorded videos are available to provide evidence of activities during the Accreditation.	
< >	
If applicable, live on-line video tours of students in action in laboratories are available during the Accreditation, preferably allowing interaction between students, staff, and team members	
< >	
Pre-recorded video evidence of layout and equipment in the laboratory's is provided.	
< >	

Criterion 1–4: If the programme is free from the deficiencies in Criterion 1–4, is the programme capable of sustaining acceptable outcomes until the next Regular Accreditation?	Yes/No
If deficiencies are identified in Criterion 1–4, is the provider judged to be capable of and committed to remedying the deficiencies to the required level within one, two or three years?	Yes/No

Criterion 5: Criterion 5: Response to previously identified deficiencies and concerns, capacity for improvement and programme review

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Question 5.1: In the case of concerns identified at the previous Accreditation, have these been addressed by the university?	Yes/No
If not, does any previously identified concern rank as a deficiency?	Yes/No
<i>If not, identify the unresolved concerns here and assess the consequences of lack of resolution.</i>	
Question 5.2: In the case of an Interim Report, Interim Accreditation or Final Accreditation, are there outstanding deficiencies from the previous Accreditation report?	Yes/No
<i>If present, identify the unresolved concerns here and assess the consequences of lack of resolution</i>	
< >	

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