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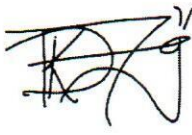
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EIZ Policy on Accreditation of Engineering Programmes

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DEFINITIONS

Academic support: A process that provides additional learning support to students who are not prepared for the normal curriculum; academic support may be provided prior to or in addition to the normal curriculum.

Accreditation: Formal recognition awarded to an education or training programme through a quality assurance procedure that ensures it meets the criteria laid down for the type of programme.

Accredited examinations: Examinations or other forms of assessment that address the exit-level outcomes within an accredited programme.

Accredited programme: A programme that has been evaluated and recognised by EIZ as meeting stated criteria.

Accredited qualification: A qualification awarded on successful completion of an accredited programme.

Accreditation criteria: Statements of requirements that must be satisfied by a programme to receive accreditation.

Assessment: The process of determining the capability or competence of an individual by evaluating performances against standards.

Assessment criteria: A set of measurable performance requirements which indicates that a person meets a specified outcome at the required level.

Hybrid: Combines modes of on-line education delivery with traditional face-to-face class and laboratory activities.

Branch of engineering / Engineering discipline: A generally recognised major subdivision of engineering such as the traditional disciplines of Chemical, Civil or Electrical Engineering or a cross-disciplinary field of comparable breadth, including combinations of engineering fields (e.g. Mechatronics) and the application of engineering in other fields (e.g. Bio-medical Engineering)

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Broadly defined engineering problems: A class of problems with characteristics as defined in document **E-02-PT**.

Class of membership: A mode of registration defined in or under the Engineering Institution of Zambia Act, 17 of 2010, that has a distinctive purpose, characteristic competencies, educational requirements and defined principal routes to registration.

Complex engineering problems: A class of problems with characteristics as defined in document **E-02-PE**.

Continuous quality improvement: A process based on the concept that improvement of a process is always possible subject to on-going assessment of the process and measures to maintain and improve quality.

Course / Module: A building block of a programme with defined prerequisites, content and learning objectives with assessment, which, if completed successfully, provides credit towards a qualification.

Credit: A measure of the volume of learning attached to a course or module calculated according to the procedure defined in the relevant standard for the type of programme; a level may be associated with a number of credits.

Critical: Describes a factor, component, process, issue or decision in an engineering activity from which other consequences follow; an entity or operation that must be successfully implemented or completed to ensure that a more complex operation or system can function – failure of the critical entity or operation compromises the whole.

Complementary studies: Studies that cover disciplines other than engineering sciences, natural sciences and mathematics that are relevant to the practice of engineering and include engineering economics, management, the impact of technology on society, effective communication, the humanities, social sciences and other areas that support an understanding of the world in which engineering is practised.

Computing and information technologies: These encompass the use of computers, networking and software to support engineering activity and as an engineering activity itself, is appropriate to the discipline.

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Dublin Accord: An agreement for the mutual agreement of engineering programmes that provide the educational foundation for professional engineering technicians.

Education Committee: The High Impact Committee established by Council to address all education matters.

Education provider: A public or private higher education institution or body that conducts programmes leading to accredited EIZ engineering qualifications of any type.

Educational objective: A statement of the intended achievement that graduates of a programme must accomplish, often with emphasis on the early years after graduation.

Engineering design and synthesis: The systematic process of conceiving and developing materials, components, systems and processes to serve useful purposes. Design may be procedural, creative or open-ended and it requires applying engineering sciences and working under constraints while taking into account economic, social, environmental, and health and safety factors in addition to codes of practice and applicable laws.

Engineering education programme: An educational programme that aims to satisfy criteria prescribed by EIZ.

Engineering fundamentals: Engineering sciences that embody a systematic formulation of engineering concepts and principles based on mathematical and natural sciences to support applications.

Engineering management: The generic management functions of planning, organising, leading and controlling, which are applied together with engineering knowledge in contexts that include the management of projects, construction, operations, maintenance, quality, risk, change and business.

Engineering problem-solving: The process of finding solutions through a conscious and logical approach that relies on the application of engineering knowledge, skills and generic competencies.

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Engineering sciences: These have roots in the mathematical and physical sciences and, where applicable, in other natural sciences; they extend knowledge and develop models and methods in order to lead to engineering applications and to solve engineering problems.

Engineering speciality: A generally recognised practice area or major subdivision within an engineering discipline (e.g. Structural and Geotechnical Engineering within Civil Engineering); the extension of engineering fundamentals to create theoretical frameworks and bodies of knowledge for engineering practice areas.

Evaluation: Determination of the compliance of a result with prescribed criteria based on documentation, inspection and the application of judgement supported by reasoning.

External moderation: A moderation process in which the moderators are not in the provider's employ; they have no input into the programme and they have no prior contact with the students.

Face-to-face programme: Programme offered where lecturers and students share the same physical space during learning process.

Final Accreditation: Accreditation of a programme that was given notification of termination of accreditation by the Education Committee after the previous interim accreditation.

Graduate: A qualifying learner, irrespective of whether the qualification is a degree or a diploma.

Graduate Attribute: A statement of the learning outcomes that a student must demonstrate at the exit-level to qualify for an award of a qualification; these actions indicate the student's capability to fulfil the educational objectives.

International Engineering Alliance (IEA): This is a global organisation that comprises members from 41 jurisdictions in 29 countries, across 7 international agreements. These international agreements govern the recognition of engineering educational qualifications and professional competence.

Interim Accreditation: Accreditation held at a time within the regular cycle stated by the Education Committee in the decision on the findings of the previous regular accreditation.

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Interim Report: An evaluation of certain aspects of a programme as required by the Education Committee in deciding on the findings of the previous accreditation.

Knowledge area: A classification of curriculum content into defined types.

Knowledge profile: A description of the knowledge of a graduate in terms of the type and balance of knowledge in defined areas.

Level: A measure of learning demands regarding types of problems, knowledge required, skills and responsibility, which are expressed in terms of level descriptors.

Moderation: The process of ensuring that assessment of an individual meets the required standard and is consistent, objective and fair.

Mathematical sciences: An umbrella term embracing the techniques in applied mathematics, numerical analysis, statistics and aspects of computer science cast in an appropriate mathematical formalism.

Natural sciences (formerly basic sciences): These comprise physics (including mechanics), chemistry, Earth sciences and the biological sciences that focus on understanding the physical world as applicable to the engineering context.

Notional hours: The estimated learning time taken by the 'average' student to achieve the specified learning outcomes of the course-unit or programme.

Online Accreditation: Remote accreditation conducted using videoconferencing or other virtual technologies.

One-higher: Applied to a teacher's qualifications; this means that the teacher has a relevant academic qualification of at least 120 credits that is at a higher level than the qualification being taught or is professionally registered in an appropriate category.

Online programme: Educational programme offered over any virtual network, predominantly the internet.

Pathway: Defined arrangement of teaching, learning and assessment within a programme that is one way of gaining the award of a qualification.

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Programme: A structured, integrated teaching and learning arrangement with a defined purpose and pathway that leads to a qualification.

Practice area – in the educational context: Synonymous with a generally recognised engineering speciality.

Practice area – at the professional level: A generally recognised or distinctive area of knowledge and expertise developed by an engineering practitioner through the path of education, training and experience.

Provider: A higher education provider except if the context indicates otherwise.

Provisional Accreditation: Accreditation of a new programme once the programme has been implemented and the first cohort of students has completed 50% of the academic credit requirements towards the programme.

Qualification: The formal recognition of a specified learning achievement that is usually awarded upon successful completion of a programme

Range statement: A context in which assessment may take place against an outcome and is expressed in terms of situations, activities, tasks, methods and forms of evidence.

Regular Accreditation: Accreditation according to the accreditation cycle.

Self-study report: A provider's account of how a programme meets each accreditation criterion and all applicable policy requirements while covering all methods of programme delivery and all possible pathways for completion of the degree.

Stage 1: A point in the process of professional or occupational development in engineering at which a person fulfils the educational requirements to register as a candidate in the relevant category.

Standards: These comprise statements of outcomes to be demonstrated and the levels of performance and content baseline requirements in the context of engineering educational programmes.

Sub-discipline: Synonymous with *engineering speciality*.

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Sydney Accord: An agreement for the mutual recognition of engineering programmes that provide the educational foundation for professional engineering technologists.

Washington Accord: An agreement for the mutual recognition of engineering programmes that provide the educational foundation for professional engineers.

Well-defined engineering problems: A class of problems with characteristics defined in document **E-02-PN**.

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ABBREVIATIONS

AC	Accreditation Committee
Adv Cert	Advanced Certificate
Adv Cert (Eng)	Advanced Certificate in Engineering
Adv Dip	Advanced Diploma
Adv Dip Eng	Advanced Diploma in Engineering
BEng	Bachelor of Engineering
BEng (Hons)	Bachelor of Engineering (Honours)
BSc (Eng)	Bachelor of Science in Engineering
BEng Tech	Bachelor of Engineering Technology
BEng Tech (Hons)	Bachelor of Engineering Technology (Honours)
BTech	Bachelor of Technology
Dip Eng	Diploma in Engineering
Dip Eng Tech	Diploma in Engineering Technology
ECSA	Engineering Council of South Africa
EIZ	Engineering Institution of Zambia
GA	Graduate Attribute
HEA	Higher Education Authority
HEQC	Higher Education Quality Assurance Committee
HEQSF	Higher Education Qualifications Sub-Framework
LMS	Learning Management System
MEng	Master of Engineering
PGDip	Postgraduate Diploma
PPRND	Policy, Public Relations and National Development Committee
SADC	Southern African Development Community
SAFEQ	Southern African Federation of Engineering Organisations
SAQA	South African Qualifications Authority
ZAQA	Zambia Qualifications Authority
ZQF	National Qualifications Framework

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BACKGROUND

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

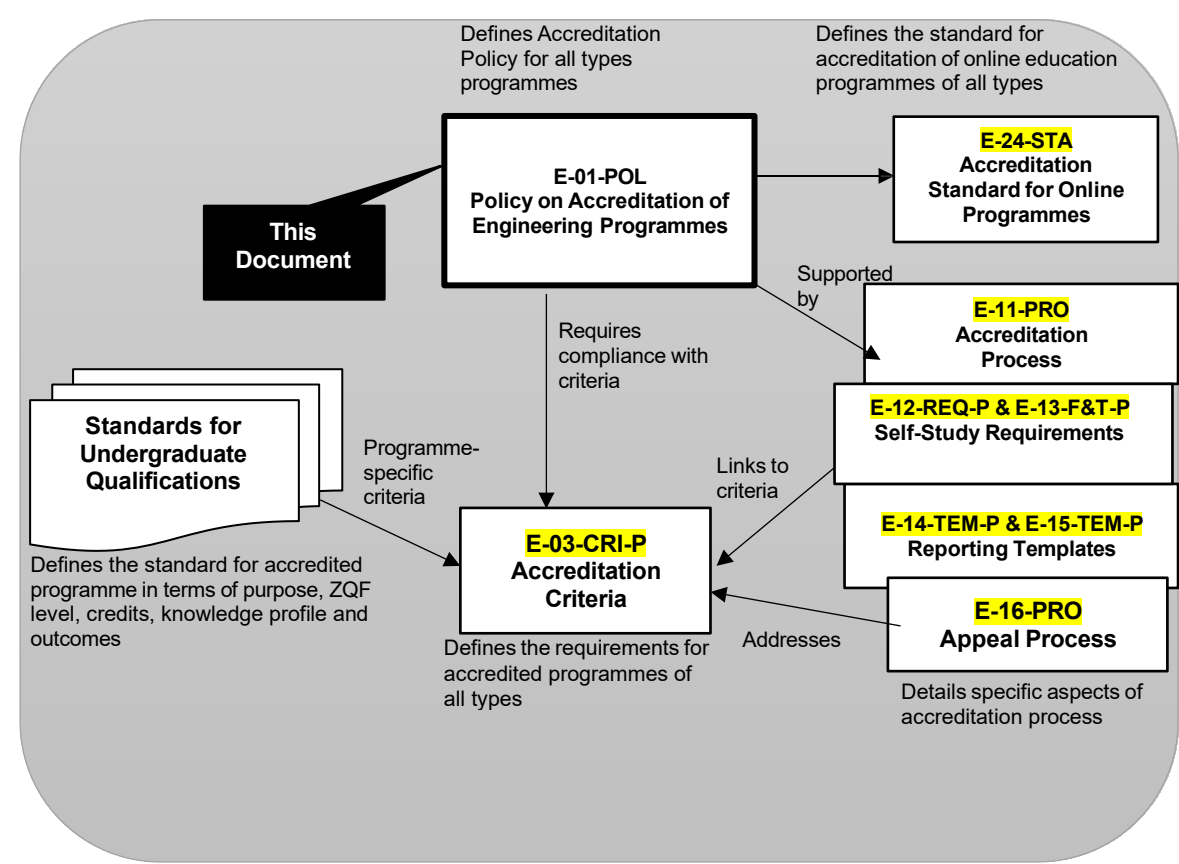


Figure 1: Documents defining the EIZ Accreditation System

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

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

2. APPLICABLE LEGISLATIVE FRAMEWORK

Higher Education Act

Programme Quality Assurance is required under the **Higher Education Act, No. 4 of 2013** and the Engineering Institution of Zambia Act, 17 of 2010, which empower EIZ to conduct accreditation evaluation to evaluate educational programmes. The Acts also determine the maximum interval between such evaluations. **The Acts empower EIZ to grant accreditation with or without conditions attached, to withdraw accreditation and to refuse accreditation.**

Accreditation of a programme signifies that the programme complies with the criteria regarding the educational requirements for registration in a professional category or as a candidate in the corresponding category. Accreditation focuses on programmes; the term *accredited* is not applied by EIZ to a department, school, faculty or education institution.

3. NATIONAL AND INTERNATIONAL COMPLIANCE

Graduates of accredited programmes practise in a globalised environment, even if they work locally. As such, local standards and practices converge to international norms. The accreditation system is, therefore, committed to international benchmarking of its standards and accreditation processes against the Graduate Attributes of the International Engineering Alliance (IEA) and IEA best practice (see Table 1). Criteria 1 and 2 are therefore designed to be substantially equivalent to the relevant Accord's Graduate Attributes. Criteria 3 and 4 and the accreditation process follow IEA best practice.

Table 1: Constituent educational accords of International Engineering Alliance

Agreement	Purpose of programmes is to provides the educational foundation for:
Washington Accord	Engineering practice at the professional level

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Sydney Accord	Engineering technologist practice
Dublin Accord	Engineering technician practice

EIZ endeavors to be a member of all three of these accords.

4. PURPOSE OF THIS DOCUMENT

This document defines EIZ's policy that governs the accreditation process for programmes meeting the Stage 1 requirements towards registration in the EIZ professional categories. The full range of programmes is listed in document **E-03-CRI-P** Schedule 1 and Figure 2 below shows the same programmes with the pathway to professional registration, also illustrated in document **E-23-PE**.

These include current programmes for the different professional roles:

- BSc(Eng) / BEng programmes meeting the requirements towards registration as a Professional Engineer.
- Combined MEng / PG Dip / BEng Tech Hons programmes meeting the requirements towards registration as a Professional Engineer.
- BTech / BEng Tech / Adv. Dip. (Eng) / programmes and other programmes as they are developed meeting the requirements towards registration as a Professional Engineering Technologist.
- Adv. Cert. (Eng Tech) / Adv. Cert. (Eng) / Dip. (Eng Tech) programmes and other programmes as they are developed, meeting the requirements towards registration as a Professional Engineering Technician.

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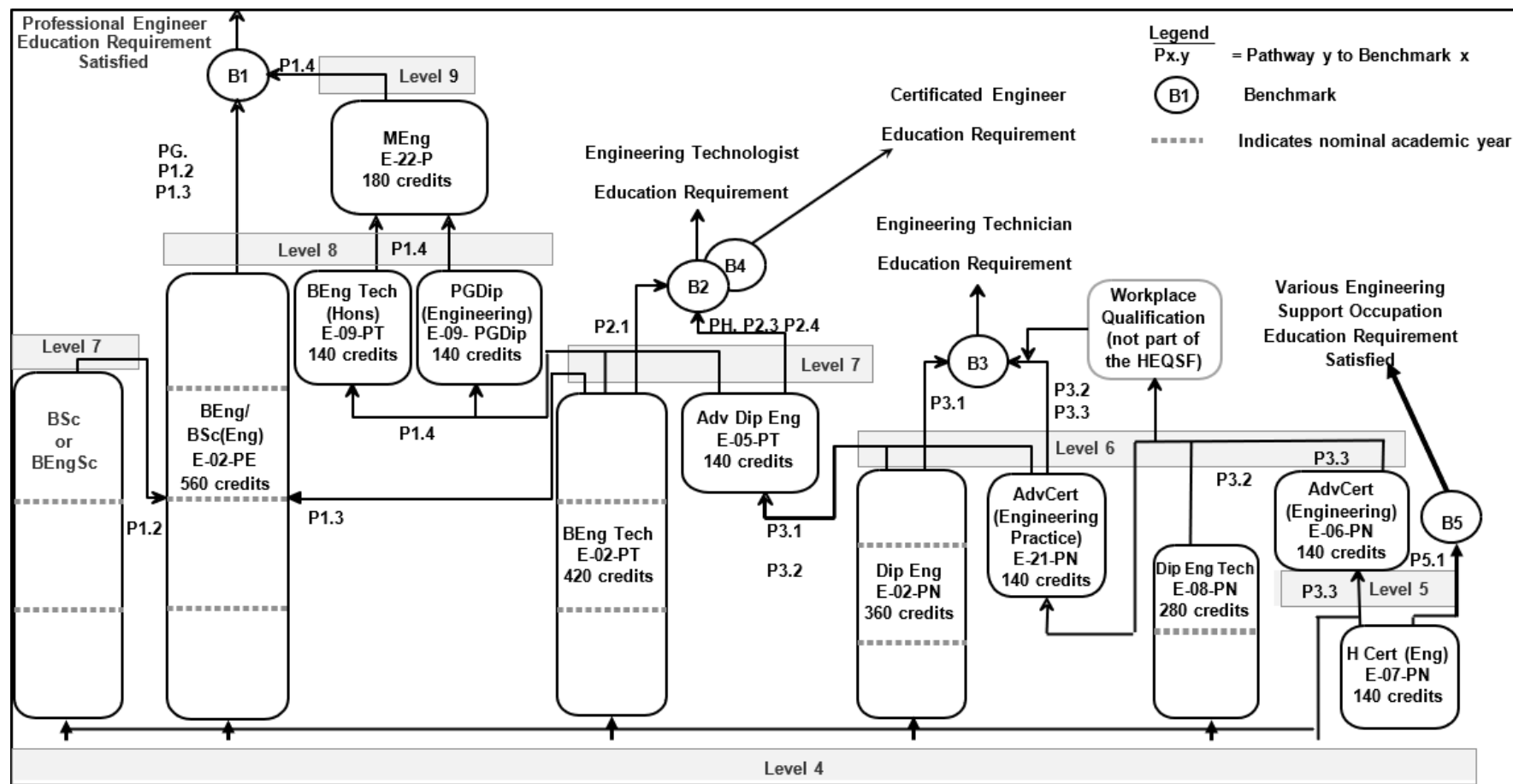


Figure 2: Graphical view of engineering qualifications in the HEQSF (taken from E-23-P)

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This document contains the following sections:

- The accreditation, its purpose and the types of degree and diploma programmes considered for accreditation.
- The accreditation cycle, the types of decisions and the terminology used for stating the findings of the accreditation process.
- The EIZ policy on the processes for the accreditation of programmes at various stages of their lifecycles.
- The accreditation team and the requirements for accreditation team members, accreditation team leaders and accreditation panel leaders.
- The policy on observers at accreditations and Education Committee meetings.
- The roles and responsibilities of key role players in accreditation.
- The EIZ policy on ensuring fairness of accreditation decisions, publishing accreditation decisions and confidentiality of the process.
- The EIZ policy on cost recovery.
- The policy applicable to accreditation evaluation outside Zambia.

5. RELATED DOCUMENTS

Figure 1 lists all the documents defining the accreditation system.

6. ACCREDITATION AND PROVISIONAL ACCREDITATION

6.1 Accreditation

Within this policy, *accreditation* signifies formal recognition through an EIZ quality assurance process that an education programme meets the accreditation criteria laid down for the type of programme. The accreditation criteria for all types of programmes are defined in document **E-03-CRI-P**. The types of programmes accredited and the categories to which they are relevant are listed in document **E-03-CRI-P** Schedule 1.

Accreditation of the programme means that the programme is recognised as satisfying the prescribed criteria and is able to continue to produce graduates who meet the criteria for a

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defined period of up to five years. Should a programme not satisfy all the criteria but evidence exists of commitment and capacity on the part of the provider to achieve full compliance within a stated time, the programme may be accredited for a period not exceeding three years.

Accreditation is granted by EIZ to an engineering programme and to the qualification awarded. For the purposes of Section 19(2)(b)(i) of the Engineering Profession Act, 46 of 2000, the examinations and other forms of assessment of graduate attributes are accredited as satisfying the required outcomes for the category.

An accredited qualification fulfils the requirements for a person to register as a member in the relevant membership class under Section 19(2)(b)(i) of the Engineering Profession Act. An accredited qualification meets the educational requirements towards registration as a professional in the relevant category. Graduates may also enjoy recognition in other jurisdictions under mutual recognition agreements.

6.2 Provisional accreditation

Provisional accreditation is a form of accreditation that may be awarded to a new or extensively revised programme through a quality assurance process shortly after the stage at which students have completed half the required academic credits. Credits are calculated according to the EIZ formula as explained and shown in Appendix A.

Provisional accreditation may be awarded to a type of programme listed in document **E-03-CRI-P** Schedule 1 and having the minimum credits reflected in the standard aligned to the Higher Education Qualifications Sub-Framework (HEQSF). The criteria for provisional accreditation are defined in document **E-03-CRI-P**.

Provisional accreditation indicates to the provider and the students in the programme that the sections of the programme already implemented are generally consistent with applicable criteria, and if the remainder of the programme is implemented as planned and identified deficiencies and concerns are addressed, the qualification is likely to be accredited. EIZ will not accredit the qualification at the provisional accreditation stage.

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Provisional accreditation is granted for a maximum period of three years. Provisional accreditation may be converted to accreditation of the qualification and programme by means of another accreditation. This accreditation must take place in the year following the first cohort of graduates. Thereafter, regular accreditations take place as scheduled for the provider.

Graduates meeting the requirements of the programme during the period of provisional accreditation are granted recognition retrospectively by EIZ when the programme is accredited. Should a programme that was granted provisional accreditation be denied accreditation as a result of the accreditation evaluation, the graduates are deemed not to hold an accredited qualification.

The procedure for provisional accreditation is defined in Section 8.1.2, step 2.

6.3 New programmes

EIZ does not accredit proposed new programmes but offers various advisory evaluations, which are detailed in Section 8.1. New programmes require accreditation by the Higher Education Quality Committee (HEQC) of the Higher Education Authority to enter the higher education system.

6.4 Responsibility for accreditation

The Education Committee is responsible for decision-making with regard to the accreditation of the BSc (Eng) / BEng, BTech, BEng Tech Hons , PGDip and ND programmes in addition to the HEQSF technology programmes (BEng Tech, Adv Dip, Adv Cert, DIP; Dip Eng Tech and postgraduate programmes).

The Council has delegated the authority to the Education Committee to grant accreditation for a defined period. In addition, the Education Committee may authorise provisional accreditation of programmes after consideration of the full report from the accreditation team and may approve recommended Interim or Final visits.

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The Council has also delegated authority to the Education Committee to withhold accreditation from non-accredited qualifications and programmes and withdraw accreditation from existing programmes.

The Education Committee's detailed responsibilities are listed in Section 11.

6.5 Recognition of autonomy of education providers

Accreditation of engineering programmes is mandatory under the Engineering Institution of Zambia Act and is required under the Higher Education Act. The EIZ respects the autonomy of education providers to design programmes to satisfy the prescribed standards, to develop teaching and learning processes to achieve the required quality standards and to deploy adequate resources to meet these goals.

The applicable standard for the type of programme sets the minimum requirements for accreditation in terms of the outcomes to be achieved and the profile of knowledge. Education providers are accorded flexibility to construct programmes to meet these requirements.

Once a qualification has been accredited, the provider is required to inform the EIZ timeously of material changes that potentially affect compliance with the accreditation criteria (see sections 7.4.4 and 8.2). This information may lead the EIZ to initiate an accreditation.

6.6 Programmes eligible for accreditation

The types of programmes listed in document **E-03-CRI-P** Schedule 1 may be considered for accreditation or provisional accreditation by the relevant Education Committee.

A provider offering a programme for accreditation must be responsible for the curriculum design in addition to assessing all graduate attributes, managing alternate entry mechanisms (including transfer of credits, recognition of prior learning) and awarding the qualification.

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It is recognised that with the move to outcome-based specifications and an education and training system that focuses on articulation and progression, educational institutions may propose new types of programmes, combinations of programmes or new pathways designed to meet the accreditation requirements. A provider wishing to pursue such initiatives should make a full proposal for preliminary accreditation under the procedure presented in Section 8.1, showing how the HEQSF programme intends to satisfy the accreditation criteria.

The programme to be evaluated and the qualification awarded must be identified in the provider's rules for programmes. Each branch (discipline) of the programme and option or major within a branch that is considered by the Education Committee to be distinct is accredited separately.

All routes to obtaining the qualification and the programme variants, including those planned or being phased in and out, must be identified in the visit documentation. EIZ may grant accreditation to a certain qualification obtained through a particular route or programme variant and not to another.

6.7 Accreditation modality

The accreditation evaluation could either be undertaken by face-to-face, virtual or hybrid methods. The EIZ Education Committee decides on the appropriate accreditation evaluation for a university, taking into account several factors including the availability of documentation, the type of accreditation and programme, the cost and the permissible logistics required.

Accreditation in terms of face-to-face will not be granted unless a site visit supported by the prescribed documentation has taken place. In terms of programmes that are offered on-line, accreditation will not be granted unless the required criteria have been fulfilled as well as the site visit, where necessary and practicable.

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6.8 Obligation to provide evidence of compliance with accreditation criteria

The onus rests on the programme provider to provide evidence that the accreditation criteria are being satisfied. The provider must therefore complete and forward all required documentation and supporting evidence, make available specified material, including accessible links to hybrid and online programmes and systems, prior to the accreditation and respond to requests for supplementary information before and during the accreditation.

Documentation in accordance with the requirements defined in document **E-12-REQ-P** must be submitted to EIZ within the prescribed time before the accreditation. Should the provider not submit documentation timeously, the accreditation may be cancelled.

Evidence or information supplied after the evaluation will not be considered by the accreditation team or the Education Committee.

Should relevant information not be provided, the team may report that certain evidence was unavailable and that compliance of the programme with one or more criteria could not be verified. Such a programme will be treated as deficient, and accreditation may, at best, be granted for a limited period with a revisit required.

7. THE ACCREDITATION CYCLE

The Regular Accreditation cycle is granted for 5 years. Accreditation may be granted for a shorter period (one to three years) to a programme that requires remediation to meet the accreditation criteria. The period of accreditation must not extend beyond the next Regular Accreditation.

Accreditation of a qualification and programme in a particular year means that members of the graduating class of that year are recognised as meeting the educational requirements towards registration in the relevant category. The graduating class of a particular year includes the students who qualify for the subsequent academic year through assessment without being required to re-register.

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A programme accredited for a shorter period than the full cycle with the requirement that deficiencies (defined in Section 7.4) are remedied remains accredited and should be so described to the public by EIZ and the provider.

7.1 Types of accreditation

Accreditations are classified into four types:

- **Provisional Accreditation:** Accreditation conducted on new programmes on completion of 50% of the academic credit requirements.
- **Regular Accreditation:** Accreditation according to the accreditation cycle.
- **Interim Accreditation:** Accreditation held at a time within the regular cycle stated by the Education Committee in the decision on the findings of the previous regular accreditation.
- **Final Accreditation:** Accreditation of a programme that was given notification of termination of accreditation by the Education Committee after the previous interim accreditation.

An Interim Report may be required from a Regular, Interim, or Provisional Accreditation that does not require another accreditation.

7.2 Accreditation findings and decisions

The Education Committee's decision on each programme is based on the accreditation team's report of the findings during the visit. Findings are reported using a structure defined in document **E-14-TEM-P** and they address the outcomes, content, effectiveness of teaching and learning and the critical success factors that confirm the programme's sustainability.

In the case of an Initial Evaluation, only the prose section of the accreditation report should be completed. This should, however, be comprehensive, guided by the detailed questions and should include the full set of the Higher Education Authority's (HEA) criteria for new programmes.

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7.3 Responsibility for reporting

The Accreditation Team Leader for a particular programme is responsible for the quality of the report submitted to the Education Committee. The report must clearly distinguish between matters that affect accreditation decisions and matters identified for academic programme improvement. The accreditation reports must provide sufficient detail for the Education Committee to make informed accreditation decisions. The reports are sent to the university and must clearly indicate matters that require remediation or that relate to programme improvement. Reports must not prescribe methods for addressing issues.

After preparation and agreement by the accreditation teams, the reports together with the Visit Leader's report must be reviewed by a panel of three consistency reviewers appointed by the Education Committee. The consistency reviewers must:

- determine if the draft accreditation reports reflect a logically consistent judgement of the evidence against the E-series accreditation criteria and whether recommendations on deficiencies and concerns, if any, relate to the accreditation criteria
- confirm that the reports conform to the prescribed format and the writing is of adequate quality for the various audiences, which include the Education Committee, university senior management, deans, heads, academics involved in the programme and the CHE
 - The Panel must confirm that the written reports are of adequate quality for the various audiences in a manner that is always respectful and collegial.
 - The Panel must edit the language of the report if necessary to meet the requirements of Section 8.2, in a way that respects the role of the Panel Leaders and Team Leaders and also in a manner that does not change the factual correctness of the report.
- The consistency reviewers must refer reports back to the Panel Leaders or Team Leaders for improvement when necessary. The consistency reviewers must not edit the reports to change judgements on the programmes or findings of the Teams.

7.4 Accreditation decisions

Document **E-03-CRI-P** defines the accreditation criteria and must be read with the relevant sections of the standard referred to in the criteria.

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7.4.1 Accreditation findings terminology

Elements of the Accreditation Team's findings for consideration by the Education Committee are defined as:

- **Deficiency:** Terminology used to identify a condition or a combination of factors that do not conform to an accreditation criterion or criteria.
- **Concern:** A matter not viewed as a deficiency but a matter that an accreditation team considers as potentially affecting the programme's future compliance with an accreditation criterion or criteria.
- **Comment:** Communicates impressions of the team to the academic unit and includes commendations or constructive criticism on negative factors that are not classified as deficiencies or concerns.

In terms of Section 6.8, a deficiency may be declared if the provider fails to produce evidence in the documentation or at the site visit to demonstrate that an accreditation criterion has been satisfied.

7.4.2 Addressing the accreditation criteria

The accreditation of a programme against the accreditation criteria is embodied in a set of key questions that are presented in document **E-14-TEM-P** which address the criteria. The accreditation teams are required to address the questions, to report in narrative form and to conclude with a recommendation to the Education Committee.

In addressing Criterion 2, teams should note that several sets of assessment criteria could be equally valid for each outcome. Education Providers should therefore be accorded flexibility to use either the set of exemplar assessment criteria if given in the standard for the particular type of programme or to use a fully documented set that demonstrates achievement of the graduate attributes.

Accreditation teams must apply two principles when evaluating evidence against Criterion 2:

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- The means of assessing students against a graduate attribute must be *robust* with respect to permitted choice, for example, courses or project topics or changes in the educational environment.
- The provider's Graduate Attribute assessment system must be *transparent* and *fully documented*.

Respective accreditation teams are required to indicate whether there are deficiencies and/or concerns relating to each question or not, clarifying with appropriate comments where necessary.

7.4.3 Decision rules

Decision rules D1–D9 below are guided by certain principles. A programme judged by the Education Committee to have:

- no deficiencies must be granted accreditation to the year of completion of the accreditation cycle
- deficiencies that after the Interim and Final accreditations still compromise the graduate's educational foundation for further formation in the appropriate professional role must not be granted further accreditation
- deficiencies that do not compromise the graduate's educational foundation for further formation in the appropriate professional role must be granted accreditation for a period not exceeding three years; this is conditional on the provider undertaking to improve the programme and verifying the improvements by means of an interim accreditation before the end of the period.

Accreditation decisions are made using the results of the key questions 1 to 4 in document **E-14-TEM-P** and the following **decision rules**.

(a) In the case of a programme that produces graduates

D1. Any type of accreditation. If no deficiencies are identified, grant accreditation until the year of the next Regular Accreditation. Concerns that may exist are to be addressed and the results

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assessed at the next Accreditation. If deficiencies are identified via the key questions, apply the rules D2 to D7 that are appropriate to the type of accreditation.

D2. A Regular Accreditation with identified deficiencies: Grant accreditation for a period not exceeding three years; the Education Committee judges will allow the provider time to bring about the required improvements. Select one of the mechanisms ((i) or (ii) below) for verifying that the provider has remedied the deficiencies:

- (i) An Interim Accreditation within one to three years of the original accreditation.
- (ii) The submission of an Interim Report within 6–24 months of the original accreditation.

The Education Committee must adopt this measure only if it is clear that:

- the result of the remediation can be assessed objectively
- deficiencies can be remedied within two years
- verification by report is appropriate.

Concerns may exist and are to be addressed and the results assessed at the next Regular Accreditation. The Education Committee must specify in the decision letter the sections of the documentation defined in document **E-12-REQ-P** that must be included in the accreditation's Self-Study Report.

D3. An accreditation by Interim Report with identified deficiencies: This requires an Interim Accreditation within six months of consideration of the report.

D4. An accreditation by means of an Interim Accreditation with newly identified or previously declared deficiencies: This requires notice to be issued to terminate accreditation and to conduct a Final Accreditation within 12 months of the Interim Accreditation.

D5. A Final Accreditation with newly identified or previously declared deficiencies: Withdraw accreditation. Determine whether withdrawal is to be immediate or whether accreditation extends to graduates of the current year.

D6. Any accreditation with current or previously declared deficiencies: If the Education Committee judges that there is a demonstrable lack of commitment or capacity on the provider's part to address deficiencies, issue notice to terminate accreditation. A Final

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Accreditation is required within six months of the decision. The provider must produce a plan for teaching out or transferring students registered in the programme.

D7. A non-accredited programme already producing graduates: Apply the principles/rules 2 and 3 in Section 7.4.3 to decide whether to grant, to grant for a period or to withhold accreditation.

D8. A programme that is new or judged to be extensively revised and has students who have attained one half of the academic credits for the programme at the time of the accreditation: If the Education Committee judges that the qualification and programme are likely to receive accreditation if implementation continues according to documented plans and identified deficiencies or concerns can be remedied, grant provisional accreditation.

D9. A programme in which requirements listed in D8 are not met: Do not grant provisional accreditation to the programme.

(b) Provider response in cases of decisions with identified deficiencies

In the case of Decisions D2, D4, D6 and D7 (other than accredit to the next Regular Accreditation), the provider must acknowledge the decision and commit to the timescale laid down for the next accreditation or report within two months of the date of the letter conveying the accreditation decision.

(c) In the case of a programme submitted for Initial Evaluation in terms of Section 8.1

The Education Committee must express an opinion on the planned programme taken from Opinion 1 (O1), Opinion 2 (O2) or Opinion 3 (O3), or O2 and O3 combined:

- **O1:** The planned programme as reflected in the documentation is free from deficiencies and concerns.
- **O2:** Aspects of the planned programme as reflected in the documentation are potentially deficient in the respects listed above.
- **O3:** Aspects of the planned programme as reflected in the documentation are cause for concern in respects listed above.

(d) General requirement

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For situations in which deficiencies and concerns are to be addressed, the provider must be given freedom by the Education Committee to determine the way it will bring about the necessary improvements and include alternative approaches.

7.4.4 Material change during a period of accreditation

During the period of a programme's accreditation, the provider is required to notify EIZ of:

- any changes to the programme that could potentially affect compliance with accreditation criteria, including changes to programme structure, content, outcomes assessed or the educational process
- altered conditions that could be detrimental to sustainability of the programme.

Accreditation or provisional accreditation may be reviewed if such changes take place. The provider is expected to supply EIZ with all information requested. The Education Committee, having considered the information provided, must determine a course of action within the policy and procedures.

When changes to the curriculum, assessment processes or key resources are planned or are in progress at the time of an accreditation visit, the changes must be identified as specified in document **E-12-REQ-P**. The documentation must identify all the possible cohorts of students who will qualify under the existing and changed conditions.

If the change is considered major (more than 50% of credits affected), Section 8.2 may apply.

8. ACCREDITATION PROCESSES

The accreditation policy accommodates evaluation of programmes at various stages in their lifecycle as detailed in sections 8.1–8.7.

8.1 New programmes

A provider wishing to present a programme in one of the categories below must apply to EIZ for an evaluation.

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8.1.1 Initial Evaluation

This policy provides two mechanisms to accommodate face-to-face, online and hybrid programmes that are newly designed and programmes that are already producing graduates and are presented for accreditation for the first time:

1. **Initial Evaluation:** An electronic evaluation of a proposed programme based on comprehensive planning information. Available to education providers that do not have programmes accredited by EIZ for at least one cycle.
2. **Desktop Evaluation:** A comprehensive electronic evaluation of an existing unaccredited programme that produces graduates. May be required as a precondition to an accreditation visit in the case of education providers that do not have programmes accredited by EIZ but have completed one accreditation cycle.

A provider wishing to present a programme in one of the above categories must apply to EIZ for an evaluation. On receipt of approval of the type of evaluation, a Self-Study in accordance with the policy in document **E-12-REQ-P** that is appropriate to the type of evaluation must be submitted as specified in Table 1 of document **E-12-REQ-P**.

The outcomes of the Initial or Desktop Evaluations are advisory. In addition, the Desktop Evaluation indicates whether proceeding to an accreditation visit is premature.

South African education providers introducing a new programme must submit the programme to EIZ for endorsement before submission to the CHE for accreditation.

8.1.2 Provisional Accreditation

Once a programme having the minimum credits reflected in the standard aligned to the Higher Education Qualifications Sub-Framework (HEQSF) has been implemented and the first cohort of students has completed 50% of the academic credit requirements towards the programme, the provider should initiate an accreditation with a view to attaining provisional accreditation. The accreditation should take place within six months of students attaining the required credits.

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The documentation must follow the guidelines in document **E-12-REQ-P**. The Provisional Accreditation is carried out as follows:

1. The EIZ Regulatory Functions Division must assemble an Accreditation Team as described in Section 9.2 to undertake an on-site visit.
2. The Accreditation Team advises the Education Committee on whether provisional accreditation should be granted, subject to implementation continuing as planned and remediation of deficiencies and concerns.

8.1.3 Regular Accreditation

Once the programme has produced its first cohort of graduates, an accreditation must be initiated. The accreditation should take place within six months of students attaining the required credits. The subsequent cycle of visits may be adjusted to coincide with other programmes in the home faculty.

The EIZ may decline to accredit a programme until sufficient graduates have been produced to allow a full and valid judgement of the attainment of outcomes and assessment of sustainability.

8.2 Extensive revision of accredited programmes

A provider wishing to restructure an existing accredited programme extensively is required to inform EIZ of its intentions. The Education Committee must determine an appropriate course of action in each case in consultation with the Dean and the person responsible for the programme. Some or all the steps for new programmes described in Section 8.1 may be invoked and the accreditation status of the programme may be reviewed. Such a revised programme may require treatment as a new programme due to CHE requirements if more than 50% of the programme is changed.

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8.3 Accreditation of currently accredited programmes

At least 12 months before the end of the period of accreditation, the EIZ Regulatory Functions Division will remind the provider by a letter to the Vice-Chancellor, copied to the Dean, of the termination date of the current accreditation. In addition, the provider will be advised to initiate an accreditation to take place during the last year. Detailed steps and timelines are defined in document **E-11-PRO**.

Regular Accreditations are usually arranged to occur simultaneously for all programmes in a faculty.

8.4 Accreditation of existing non-accredited programmes

A provider may invite EIZ to conduct an accreditation of an existing programme that is not currently accredited but is producing graduates.

EIZ conducts such an accreditation in two stages:

1. If the programme has previously been refused accreditation or has had a previously awarded accreditation withdrawn, the provider must apply for approval as a new programme according to the procedure in Section 8.1.
2. The submission must describe the steps that have been taken to meet the EIZ accreditation requirements.

8.5 Procedure for accreditations other than regular accreditations

The following procedure must be followed in the case of an accreditation other than a Regular Accreditation. The EIZ Regulatory Functions Division in consultation with the Education Committee must:

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1. determine the purpose of the accreditation
2. appoint an Accreditation Panel Leader, Deputy Panel Leader if required, Accreditation Team Leaders and Accreditation Team Members, as described in Section 9.2
3. take into account the required pre-accreditation documentation
4. determine the process to be followed
5. determine the duration of the accreditation and set the timeline/timetable for accreditation activities
6. define the elements that must be reported on by the team.

8.6 Evaluation based on the Interim Report

When a provider is required to submit an Interim Report on the remediation of the deficiencies of a face-to-face, online or hybrid programme, the report is assessed according to the following procedure:

1. The initial Accreditation Team is reassembled to consider the report. If it is not possible to restore the entire team, persons may be co-opted to serve on the reassembled team.
2. The Accreditation Team must consider the report.
3. The Accreditation Team Leader determines the detailed work plan for the Accreditation Team.
4. The Accreditation Team convenes online.
5. The Accreditation Team prepares a report using the relevant sections regarding the format prescribed in document **E-14-TEM-P** and inserting the findings from the evaluation of the provider's report.
6. The report is presented to the Education Committee following the normal procedure.

Detailed steps and timelines are defined in document **E-11-PRO**.

8.7 Expiry of period of accreditation

Should a provider not initiate an accreditation visit in time to allow the accreditation process to be completed, accreditation terminates at the end of the period stated in the decision letter and recorded in the list of accredited programmes for the type of programme.

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Provisional accreditation expires at the end of the period unless extended or converted to accreditation as a result of an accreditation

When accreditation or provisional accreditation expires, the Regulatory Functions Division must satisfy itself that the EIZ has taken all reasonable measures to initiate the accreditation and that failure to arrange a visit is a consequence of the provider's wishes, refusal or default. Expiry of accreditation without an accreditation must be reported to EIZ's Education Committee which will determine the course of any further action. The recommendation by the Education Committee must be forwarded to Council for the final decision. Such a decision must be reported to the CHE.

8.8 Programmes delivered at multiple sites

A provider offering programmes with pathways at more than one site must indicate the following at the initial stage of setting up the accreditation: the sites of delivery; programmes delivered at each site; persons responsible for the programmes and sites; and the ways that the pathways are designated and identified on the qualification certificate and academic transcript.

In the case of an identically designated programme that is offered at more than one site, accreditation must be carried out for at each site based upon the documentation and supporting evidence provided from each site, and the accreditation teams must report and make recommendations on the programme at each site individually. If the provider identifies the site of delivery on the qualification certificate or transcript, a separate accreditation decision must be made on each programme at each site by the Education Committee. The decision may differ from site to site.

If the provider does not identify the site of delivery on the qualification certificate or transcript, a single accreditation decision must be made that is applicable to all sites. The decision to accredit or to accredit for a period will be based on all sites at least meeting the conditions that warrant the decision. (The decision appropriate to the worst site applies to all sites.)

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8.9 Distance education programmes

Distance education programmes must satisfy all accreditation criteria. When evaluating the programme against Criterion 3, the accreditation team must consider:

- the effectiveness of the distance delivery platform
- whether there is adequate and effective face-to-face learning support
- whether the provider takes full responsibility for quality assurance of the programme, including activities at remote sites.

8.10 Online education programmes

Online education programmes must satisfy all accreditation criteria. When evaluating the programme against Criterion 3, the accreditation team must consider:

- the effectiveness of Learning Management System (LMS) and other online delivery platforms
- whether there is adequate student engagement and access to necessary support when required
- whether adequate physical or e-laboratory facilities as required have been provided
- whether the provider takes full responsibility for quality assurance of the programme, including activities at laboratory sites.

Programmes offered online must satisfy all accreditation criteria according to the approved standards refer to document **E-24-STA**. Moreover, the following aspects of the programme must be considered:

- **The learning design:** How the learning environment promotes student engagement and assists the student to learn in meaningful ways.
- **The learning resources:** How accessible and current the course content is, and how it provides multiple perspectives and conceptual underpinning.
- **The delivery processes:** How the delivery scaffolds for learning. How learners are supported and what contexts for communication and collaboration are provided.

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- **Students and /or lectures with disability:** Content must allow assistive devices for users.

A provider of online programme must supply the quality assurance plan that demonstrates quality assurance process where the following aspects are considered:

- Assessment of educational needs
- Feedback gathered from students and other stakeholders
- Demonstration of utilisation of feedback to modify programmes, teaching, learning and assessment approaches.

In the evaluation of programme content, the effectiveness of content in a course needs to be tested. Therefore, providers should demonstrate how the following have been achieved:

- How the content integrates with the most important developments in the field of study, the balance between classical concepts and cutting-edge research in the field, the reliability of the sources and suggested readings.
- How to ensure that the content is free of spelling and grammar mistakes.
- How to ensure that the content flows from the perspective of the student, how it aligns with the learning outcomes and whether there is a smooth progression between topics.
- How to ensure that the design of the course and the tools selected fit the purposes of the course and the selected activities

9. THE ACCREDITATION TEAM

The following types of assessors are involved in the accreditation process:

- **Accreditation Panel Leader:** the person appointed to lead a multi-team.
- **Accreditation Panel Deputy Leader:** the person appointed to assist the Accreditation Panel Leader with the effective management of the accreditation in the case of an accreditation with multi-programmes and/or a multisite accreditation.
- **Accreditation Team Leader:** the person appointed to lead the programme accreditation team.

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- **Accreditation Team Member:** a person appointed into a programme accreditation team.

9.1 Registration of programme assessors

The EIZ Regulatory Functions Division and the Education Committee must ensure that sufficient assessors are available for programme accreditations for the following three years.

The Education Committee in conjunction with the EIZ Regulatory Functions Division must ensure that sufficient accreditation panel leaders, accreditation team leaders and accreditation team members are identified for anticipated accreditations over the subsequent three years.

Accreditation teams comprise individuals listed as programme assessors. The EIZ Regulatory Functions Division is required to maintain a list of accreditation assessors for all programmes.

Identified persons may serve as accreditation panel leaders, accreditation team leaders, accreditation team members or observers providing they do not have a relationship with the provider concerned to the extent that their judgement may be unduly influenced by the relationship (e.g. staff, members of the provider's advisory committees, external examiners or moderators).

Accreditation teams must have completed the mandatory annual refresher training for accreditations due in that financial year and training in the method of accreditation which includes face-to-face / Online Accreditation, refer to document E-24-STA.

Schedule 1: Preferred Registration of assessors for different types of programmes

Type of Programme	Registration Category
BSc (Eng) or BEng,	Professional Engineer
BTech, BEng Tech; BEng Tech (Hons), Adv Dip Eng, PG Dip, MEng	Professional Engineer, Professional Engineering Technologist

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Dip Eng	Professional Engineer, Professional Engineering Technologist, Certified Engineering Technician
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9.1.1 Accreditation Panel Leaders

An individual on the list of assessors who has experience as an Accreditation Team Leader may be identified by the EIZ Regulatory Functions Division in consultation with the Education Committee and be designated an Accreditation Panel Leader, providing the individual satisfies the following criteria:

- Is registered in the relevant category as shown in Schedule 1
- Has three years post-registration experience
- Has experience of at least three accreditation visits as an Accreditation Team Leader
- Has been identified by the Regulatory Functions Division and ratified by the Education Committee as a potential Accreditation Panel Leader

9.1.2 Deputy Accreditation Panel Leaders

An individual on the list of assessors who has experience as an Accreditation Team Leader may be identified by the EIZ Regulatory Functions Division in consultation with the Education Committee and be designated a Deputy Accreditation Leader, providing the individual satisfies the following criteria:

- Is registered in the relevant category as shown in Schedule 1
- Has three years post-registration experience
- Has experience of at least four accreditations of which one must be as an Accreditation Team Leader
- Has been identified by the Regulatory Function Division and ratified by the Education Committee as a potential Deputy Accreditation Panel Leader.

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9.1.3 Accreditation Team Leaders

An individual on the list of assessors who has experience as a Team Member may be identified by the EIZ Regulatory Functions Division in consultation with the Education Committee and be designated as an Accreditation Team Leader, providing the individual satisfies the following criteria:

- Is registered in the relevant category as shown in Schedule 1
- Has at least three years post-registration experience
- Has experience of at least three accreditations as an Accreditation Team Member
- Has been identified by the Regulatory Functions Division, Accreditation Leaders and Team Leaders and ratified by the Education Committee as a potential Accreditation Team Leader

9.1.4 Accreditation Team Members

An individual on the list of assessors may be identified by the EIZ Regulatory Functions Division in consultation with the Education Committee and be designated an Accreditation Team Member, providing the individual satisfies the following criteria:

- Is registered in the relevant category as shown in Schedule 1

The Regulatory Functions Division must ensure a representative composition in terms of diversity, experience, discipline and competency.

9.2 Composition of the accreditation team

An accreditation team is appointed for each identified programme, pathway or distinct option to be evaluated.

1. The accreditation team that evaluates a programme must be represented as follows:

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- The Education Committee plays an oversight role in selecting the accreditation teams.
 - The EIZ Regulatory Functions Division selects and appoints the Accreditation Teams.
2. The Team must have no less than three (and usually no more than four) members and must comprise no less than one academic and no less than two members who are currently active in the industry or are professionals in the discipline of the programme being evaluated.
 3. Where two or more programmes are evaluated simultaneously and are judged by the Education Committee to have significant overlap in engineering content, the teams may have common membership, providing there is a minimum of three members per programme.
 - (a) The accreditation team members' individual specialities should be dispersed as evenly as possible across the sub-disciplines of the programme under accreditation.
 - (b) Subject to item 6, all accreditation team members must be registered as assessors for the type of programme, bar one member who may not yet be registered as an evaluator but must have attended training.
 - (c) Where the Regulatory Functions Division considers it necessary, one member of the team who is not a registered assessor may be appointed as:
 - a regional assessor in terms of Section 12 of this policy;
 - a programme evaluator in a jurisdiction that is a signatory to the relevant mutual recognition agreement; or
 - an engineering education expert recognised by the Regulatory Functions Division and/or the Education Committee/Chairperson, providing the latter is not the sole academic.

Note: A team of four could therefore be two registered evaluators, one international/educational expert member and one novice.

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4. The Accreditation Team Leader may designate an Accreditation Team Member as rapporteur, but the Accreditation Team Leader retains final responsibility for the report.
5. Additional requirements regarding the composition of the Team for each type of programme are defined in Schedule 2.

Schedule 2: Composition of accreditation teams for different types of programmes

Programme Type	Composition
A: MEng / PG Dip / BEng Tech Hons	An appropriate mix of Professional Engineers from disciplines consistent with the programmes being evaluated must be included in the team.
B: BSc (Eng) / BEng and Equivalent Programmes	The team should not have more than four members for a single programme.
C: BTech / BEng Tech / Adv Dip (Eng) / ND / Dip (Eng) / Adv Cert (Eng Tech) / Adv Cert (Eng) / Dip (Eng Tech) / Cra.Cert. (Eng)	A single accreditation team is appointed to evaluate all technology programmes if offered in the same discipline. An appropriate mix of Professional Engineers, Professional Engineering Technologists and Certified Engineering Technicians consistent with the programmes being evaluated must be included in the team.

9.3 Process for appointing teams

Most accreditations require several teams for the programmes on offer. The EIZ Regulatory Functions Division appoints Accreditation Panel Leaders, Accreditation Team Leaders and Accreditation Team Members through the process defined in Section 12.2 above and using the timelines defined in document **E-11-PRO**:

- In the case of an accreditation with five or more programmes or a multi-site visit, persons qualified to be Accreditation Panel Leaders may be appointed as Deputy Accreditation Panel Leaders as required for effective management of the Accreditation. The Accreditation Panel Leader must assign responsibilities to the Deputy Accreditation Panel Leaders but retains overall responsibility of the Accreditation Panel Leader functions.
- Names of the proposed Accreditation Team Members are submitted to the Dean to ensure no conflict of interest exists for any Accreditation Team Member in accordance with timelines defined in document **E-11-PRO**.

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- The EIZ Regulatory Functions Division and the Accreditation Panel Leaders deal with contingencies arising in this process

During the phasing in of the outcome-based criteria and related accreditation procedures, the EIZ Regulatory Functions Division in consultation with the Education Committee may appoint a Facilitator to assist the Accreditation Panel Leader and Accreditation Team Leaders in procedural matters and in interpretation of the criteria.

9.4 Accreditation Panel Leader's responsibilities

An Accreditation Panel Leader accompanies a multi-team. In accepting the appointment, an Accreditation Leader commits to the following duties:

1. Finalising the Accreditation team membership in consultation with the Regulatory Functions Division.
2. Finalising the accreditation timetable/timeline in consultation with the Regulatory Functions Division.
3. Pre-accreditation liaising with Accreditation Team Leaders to ensure teams are fully prepared.
4. General co-ordinating and problem-solving during the accreditation and liaising among accreditation teams on mutual interests.
5. Electronic courtesy/accreditation business communication with executive officers of the provider.
6. Electronic communication with student leadership.
7. Assisting Accreditation Team Leaders to produce consistent recommendations across teams and across visits.
8. Ensuring that accreditation team reports are complete, consistent and contain fully justified conclusions, particularly when conclusions are negative or critical.
9. Presenting reports at the Education Committee meeting.
10. Checking the decision letters.
11. Evaluating the accreditation process and the performance rating of Accreditation Team Leaders post the accreditation.

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12. Identifying Accreditation Team Leaders to be trained in the future as potential Accreditation Panel Leaders.

9.5 Accreditation Team Leader's responsibilities

In accepting the appointment, an Accreditation Team Leader commits to perform the following duties:

1. Assist with the identification of Accreditation Team Members if such a need arises.
2. Read the documentation fully before the accreditation to identify issues that require investigation and instances where additional information is required.
3. Communicate with Accreditation Team Members regarding issues and information requirements that they have identified. Collate issues and information requirements. A template is available in Appendix A of document **E-14-TEM-P**. Communicate information requirements to the person responsible for the programme. Maintain a record of these actions.
4. During the accreditation, ensure all necessary information to support the team's findings and recommendations is collected and verified.
5. Allocate duties to Accreditation Team Members.
6. Ensure all deficiencies and concerns are communicated to the Head of Department during the accreditation.
7. Ensure the draft report is written by the end of the accreditation.
8. Ensure the Final Report is produced, approved by the Accreditation Team, signed and checked for consistency by the Accreditation Panel Leader and submitted to the EIZ Regulatory Functions Division through the Accreditation Panel Leader.
9. Identify potential Accreditation Team Leaders for training for future accreditations.

9.6 Accreditation Team Member's responsibilities

In accepting the appointment, an Accreditation Team Member commits to perform the following duties:

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1. Before the accreditation, read the documentation fully to identify issues that require investigation and instances where additional information is required.
2. Identify points lacking information for further investigation.
3. Be available for the entire accreditation.
4. Perform duties assigned by the Accreditation Team Leader.
5. Conduct/participate in staff and student interviews via video conferencing.
6. Scrutinise any additional documentation.
7. Contribute to Draft 1 of the Report and Recommendation.
8. After the accreditation, work with the Accreditation Team Leader to produce Draft 2 of the Report.
9. After the accreditation, work with the Accreditation Team Leader to produce the agreed Final Report.

9.7 Composition of the Education Committee

To evaluate the accreditation reports, the Education Committee must be constituted as defined in the Education Committee's Terms of Reference.

The Education Committee must co-opt additional members as necessary to ensure the following criteria are met:

- There is no less than one academic and no less than two members who are currently active in the industry or working professionally in the category of the programme being accredited.
- Co-opted members must meet the criteria of an Accreditation Panel member.

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10. POLICY ON OBSERVERS AT ACCREDITATION AND EDUCATION COMMITTEE MEETINGS

10.1 Accreditations

Observation of accreditations and Education Committee meetings plays an important part in validating and improving EIZ processes and informing interested parties about its practices. With its well-developed accreditation system for engineering and engineering technology programmes, EIZ is in a position to assist bodies that are developing accreditation systems. EIZ encourages observers from interested parties to attend accreditations. Potential observers include the following:

- International observers
- Representatives of related standards and quality assurance bodies
- Persons approved by the Regulatory Functions Division.

(a) Observers at accreditations are bound by the following rules:

- Participation as an observer may be initiated by EIZ or an interested organisation.
- The observer must be disclosed to the institution whose programmes are being accredited to identify actual or potential conflict of interest that may disqualify the observer.
- The observer may not communicate directly with the institution before or after the accreditation on matters relating to the accreditation. Communication should only be directed to the EIZ Regulatory Functions Division.
- Observers are expected to be present for the full duration of the accreditation, including the accreditation team meetings. Observers may be present at all accreditation team activities, including closed accreditation team meetings.
- Observers are supplied with relevant EIZ documents on standards and procedures and general visit documentation when requested.

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- During the investigation phase of the accreditation, observers should be present at interviews with staff and students. Observers may not independently pose questions to staff and students.
- Observers are free to contribute to the discussion in closed accreditation team meetings.
- An observer may not influence the accreditation team recommendation. Observers should be available during the formulation of the team report and recommendation and may only contribute to the recommendation if the contribution does not influence the accreditation team's final decision.
- During the accreditation, the observer follows a programme of activities that has been agreed upon by the Accreditation Panel Leader and affected Accreditation Team Leaders. Definition of and ruling on limitations of an observer's activities while on the accreditation is the sole prerogative of the Accreditation Panel Leader, except in the case of a monitoring visit.

10.2 Education Committee meetings

Observers at Education Committee meetings may participate in the discussion if their objective is to contribute their expertise and knowledge to the discussion. Observers may be present at all phases of the meeting but must not influence the committee's final decision.

10.3 General requirements for both accreditation visits and Education Committee meetings

The general requirements are presented below:

- Observers are expected to treat documentation and verbal information gained on an accreditation or at a meeting as confidential and not to release such information to another party without EIZ's and the provider institution's consent.

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- Observers are expected to present a short report to the EIZ on their impressions of the accreditation. Should the report be marked confidential, it must be treated as such by EIZ.
- Observer organisations are expected to meet all costs of their participation unless EIZ waives this requirement.

11. DUTIES AND FUNCTIONS OF THE EDUCATION COMMITTEE AND THE REGULATORY FUNCTIONS DIVISION

11.1 Education Committee

The obligations of the Education Committee are to:

- operate within the framework of EIZ's Terms of Reference and Standing Orders for Council and Committees of Council
- ensure sufficient capacity for the list of persons acting as Accreditation Panel Leaders, Accreditation Team Leaders and Accreditation Team Members
- keep the Executive Committee and Council informed of decisions taken in terms of these delegated powers and to report on trends or other matters of professional and public concern arising from its activities
- grant accreditation for a defined period and provisional accreditation to programmes after consideration of the full report from the accreditation team and to approve recommended Interim or Final Accreditation
- withhold accreditation from non-accredited qualifications and programmes and to withdraw accreditation from non-compliant existing programmes
- approve accreditation, schedules, reporting deadlines and dates of the Education Committee meetings
- recommend reviews as necessary to ensure that EIZ's accreditation standards are substantially equivalent to those of accrediting bodies with whom EIZ has entered into a mutual recognition agreement.

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11.2 Regulatory Functions Division

The obligations of the Regulatory Functions Division are to:

- draw up a preliminary accreditation schedule for approval by the Education Committee
- approve attendance of observers
- appoint the relevant accreditation teams
- keep the Higher Education Authority informed of accreditation activities and decisions.
- deal with all administrative requirements pertaining to Accreditation
- consult with the Education Committee and relevant role players to identify potential accreditation assessors
- issue a list of programmes accredited by the Education Committee and to update the list as accreditation decisions are made.

12. TRANSPARENCY, CONFIDENTIALITY AND PUBLICATION OF DECISIONS

The accreditation process requires confidentiality in certain aspects and transparency in others. This section describes the approach adopted by the EIZ to achieve the correct balance between transparency and confidentiality.

12.1 Confidentiality

Apart from reflecting the outcome of each accreditation in the list of recognised programmes, EIZ will not divulge details of investigations, documentation, correspondence or discussions among EIZ, the accreditation team and the provider concerned without the provider's approval. From time to time, EIZ may supply accreditation team and an Accreditation Panel Leader reports to the CHE in terms of agreements that are in force.

Reports may be supplied to co-signatories of international accords to which EIZ is a signatory in the course of reviews of the EIZ accreditation system.

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12.2 List of accredited programmes

After each set of accreditation decisions, the EIZ Regulatory Functions Division on behalf of Council publishes document **E-20-PE**, **E-20-PT** or **E-20-PN** as appropriate to the programme. The document contains a list of all education providers' programmes accredited at the time and in the past. The list shows the initial and the final year of the accreditation periods. In the case of a programme that is no longer accredited, the previous periods of accreditation are shown. Provisionally accredited programmes are also identified in the list. The list of accredited programmes indicates the qualification title and branch and the discipline or option of the qualification. In addition, where the qualification may be attained by different pathways, the entry specifies the pathways to which the accreditation applies.

Dates of validity of accreditation are specified in month/year format and except in the case of summary withdrawal of accreditation, dates demarcate academic years or semesters, depending on the programme's arrangement. Dates of validity of accreditation of each programme refer to the academic year in which the individual completes the requirements to graduate and includes re-examination without re-registration early in the following year. The last year of registration of a graduate must be established from the academic transcript.

12.3 Information to students in providers' programmes

Education providers are expected to inform the students in each programme of the current accreditation status of the qualification. In the case of a new programme, the provider must keep the student body apprised before and after the provisional accreditations and before and after the actual accreditation.

Education providers are expected to publicise the fact that their programmes are EIZ accredited. Provisional accreditation status must be clearly stated.

In the event of withdrawal of accreditation or refusal of accreditation after provisional accreditation, graduates who wish to register as candidates may apply to EIZ for individual

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evaluation. The provider is expected to deal with all other consequences of the programme not being accredited.

12.4 Ensuring fairness in accreditation reporting and decisions

EIZ requires the following minimum set of measures to ensure fairness and adequate transparency in reporting the findings:

- Accreditation of the programme must be performed using the accreditation criteria defined in document **E-03-CRI-P** and read with the relevant standard and the reporting format defined in document **E-14-TEM-P**.
- Identified or potential deficiencies, concerns, comments and constructive criticism must be raised with the Head of Department and relevant staff members during the accreditation.
- The accreditation team must prepare a complete first draft report and discuss it with the Head of Department by the close of the accreditation.
- The Accreditation Team Leader must prepare a second draft report in consultation with the Accreditation Team Members to obtain mutual agreement.
- The consistency review mechanism described in Section 10.3, which strives for consistency of judgement and reporting across visits and teams, must be implemented.
- The agreed second draft report and recommendations of the accreditation team after consistency review must be submitted to the Dean of the faculty for comment by an agreed date after the accreditation. The principal objective is to ensure that the report is free of factual errors. The Dean may respond to the findings and recommendations. No new information or description of remedial measures may be submitted at this stage.
- In the case of the Dean raising matters of fact or responses to the decisions, the Accreditation Team Leader must, in consultation with Accreditation Team Members and the Accreditation Panel Leader, consider the matters raised and, if necessary, amend the report.
- The Final Report must then be prepared and approved on behalf of the Accreditation Team by the Accreditation Team Leader.

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- The reports on the programmes together with the Accreditation Panel Leader's report must be circulated to the Education Committee members prior to the meeting at which the reports are considered.
- The Dean of the faculty or school to which the report refers is entitled to be present at the meeting of the Education Committee while the reports are being presented. The Dean may answer questions from the Committee and make representations to the Committee as deemed necessary. The Dean is excused from the meeting by the Committee at the stage when the Committee is ready to deliberate and decide on the matter.
- In its deliberations, the Education Committee must take into account any unresolved matters raised by the Dean, both in response to the second draft report and at the meeting.
- The Chief Executive Officer must inform the provider of the decisions via a letter to the Vice-Chancellor or Rector and copied to the Dean. Deficiencies and concerns as applicable to each decision must be clearly indicated in the letter. The decision letter must stipulate the requirement to notify EIZ of material change during the period of accreditation (see Section 8.5) and the obligation on the provider to inform students of the programme's accreditation status. The Accreditation Panel Leader Report and individual team reports must be attached to the decision letter.

12.5 Appeals

Document **E-16-PRO** defines the procedure to be followed to appeal a decision of the Education Committee.

12.6 Formative aspects of accreditation

While the accreditation team and the Education Committee have a duty to the profession and the public to recommend withholding accreditation from qualifications and programmes that do not satisfy the stated outcomes, there is a complementary duty to encourage programmes that are deficient to improve and attain accredited status.

Interim Accreditations and Interim Accreditation Reports in the accreditation cycle provide the opportunity for education providers to respond to deficiencies identified by the Accreditation

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Team. Accreditation Teams may also identify areas of concern. The EIZ therefore requires accreditation teams to formulate their reports in a firm but constructive way, particularly where deficiencies and concerns are identified. The formative process cannot, however, continue indefinitely, and if deficiencies persist or new deficiencies are identified at a Final Accreditation, accreditation must be withdrawn. Similarly, if there is clear evidence that a provider lacks the commitment or the capacity to remedy deficiencies within a specified period not exceeding three years, accreditation must be withdrawn.

12.7 Assistance to education providers

EIZ is prepared to offer general assistance to education providers on the standards and procedures for accrediting engineering programmes, for example, in the form of workshops and briefings. EIZ cannot, however, offer detailed advice on issues relating to particular programmes except for issues that arise from the processes described in this and related documents. EIZ does not recommend or prescribe approaches to address specific deficiencies and concerns for programme improvement

13. COSTS

From time to time, EIZ determines the accreditation fees per programme based on average costs levied for conducting accreditations within South Africa. In addition, the provider is expected to bear the costs of documentation, on-campus meals and refreshments, transport and accommodation during an on-site accreditation if this is required.

14. POLICY VARIATIONS FOR TRANSNATIONAL ACCREDITATION VISITS

- (a) In a state belonging to the Southern African Development Community (SADC) or the Southern African Federation of Engineering Organisations (SAFE0), the Education Committee may, upon request from an appropriate party defined in items (d) and (e) below and after concluding an appropriate agreement, conduct accreditations in that territory. A request for accreditation beyond SADC or SAFE0 must be referred for approval to the Stakeholder Relations before entering into an agreement to conduct such accreditations.

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This must be in conjunction with an evaluation of the merits and risks of such an arrangement by the EIZ **Regulatory Functions Division**.

- (b) The policy, standards and process for transnational accreditations are as defined in the present document.
- (c) EIZ must observe the sovereignty of the jurisdiction in which the programme is delivered and ensure compliance with the legal and regulatory requirements of the jurisdiction.
- (d) Appropriate parties that may request regional accreditations include a group of education providers, universities or a single university and the authoritative local engineering body, which may be a registration or a voluntary body.
- (e) Requests to conduct accreditation activities in one or more education provider should be supported by the authoritative local engineering body, if present. The local engineering body will be expected to participate in the accreditation process by:
 - providing observers at accreditations, subject to the policy on observers in Section 10
 - identifying persons who meet the requirements to qualify as regional members of accreditation teams as defined in items (g) to (i) below.
- (f) Requests to conduct accreditation of programmes offered in regional states will be considered only for programmes that produce graduates in the first instance. Once an education provider has programmes accredited by the EIZ, the Initial Evaluation and the Provisional Accreditation mechanism defined in this document may be invoked for new programmes.
- (g) The following applies in lieu of Section 9.1.1. To qualify as a regional assessor, a person must:
 - be registered with a body recognised by the Education Committee for this purpose in an equivalent category to the category shown in Schedule 1
 - have post-registration experience in relevant practice or in an academic or research position for three years

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- have completed training in the method of accreditation as prescribed by the Education Committee
 - have attended further training in the event of a major change in policy or practice.
- (h) Regional evaluators may progress to Accreditation Team Leader and Accreditation Panel Leader status, as stated in sections 9.1.2 and 9.1.3.
- (i) The following applies in lieu of Section 9.2, clause 6. In the case of regional accreditation, two members of the accreditation team may be regional members, providing the other team composition requirements in Section 9.2 are satisfied.
- (j) On first receiving a request to evaluate a programme or programmes in a regional state, EIZ should offer the education provider or university or universities and the local engineering body an Accreditation Training Workshop for all staff and members involved.
- (k) EIZ should then request the education provider or university to submit self-study documents as required by document **E-12-REQ-P**. An electronic submission of all documents as required in document **E-12-REQ-P** must be made.
- (l) Following the process defined in document **E-11-PRO**, a Desktop Evaluation is carried out, culminating in a report to the Education Committee. The report is as defined in document **E-14-TEM-P**, but accreditation recommendations are not made. The Education Committee may indicate that an accreditation may be premature.
- (m) In the absence of an indication that the accreditation may be premature, the education provider or university may request EIZ to carry out accreditation for particular programmes.
- (n) Cost recovery for transnational accreditation is based on actual costs of the accreditation.

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REVISION HISTORY

Revision number	Revision date	Revision details	Approved by
Rev 0 Draft 1	11 July 2024	The document PPRND/IEA/E-01-POL/0001 (Policy on Accreditation of Engineering Programmes) was drafted and customized for Zambia.	Working Group
Rev. 1	TBA	Review and Recommendation for Approval	IEA Committee of PPRND
Rev. 1	TBA	Ratification	Council

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The Policy on Accreditation for

Engineering Programmes

Revision 0 dated 12 July 2024, and consisting of 60 pages, reviewed for adequacy by the Director of Operations and is approved by the Registrar and Chief Executive Officer.

.....
Deputy Registrar/Director of Operations

.....
Date

.....
Registrar/ CEO

.....
Date

This definitive version of this policy is available on our website

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APPENDIX A – CALCULATION OF CREDITS

All reference to credits within the standards, policies and procedures means credits calculated according to the procedure presented in Table 2 below.

The method of calculation assumes that certain activities are scheduled on a regular basis while others can only be quantified as a total activity over the duration of a course or module. This calculation uses the following estimates:

- Scheduled contact generates notional hours of the student's own time for each hour of scheduled contact. The total is given by a multiplier applied to the contact time. The maximum notional hours for assessment in a semester, including student preparation time, is given by a multiplier applied to the actual hours of assessment.
- All multipliers used need to be determined by the education provider and must be justified.
- Assigned work generates only the notional hours judged to be necessary for completion of the work and is not multiplied.

The education provider must assign the values indicated in Table 2 for each course or module identified in the rules for the degree.

Table 2: Values to be assigned for each course or module

Type of Activity	Time Unit in Hours or Fractions of	Contact Time Multiplier
L = total lectures	T_L = duration of a lecture period	M_L = total work per lecture period
T = total tutorial	T_T = duration of a tutorial period	M_T = total work per tutorial period
P = total practical periods	T_P = duration of a practical period	M_P = total work per practical period
X = total other activity contact periods	T_X = duration of other period	M_X = total work per other period
A = total assignment non-contact Hours	T_A = 1 hour	
E = assessment hours outside time accounted for by L, T, P, X	Hours	M_E = total work <i>outside</i> L, T, P, X and A per assessment hour

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Note: Contact includes face to face or virtual

The EIZ credit for the course is:

$$C = \{L_T L_M + T_T M_T + P_T M_P + X_T X_M + A_T A + E_M E\} / 10$$

Note: 1 credit = 10 notional hours

The education providers must be able to justify all values used. The resulting credit or value for a course may be divided between multiple additional knowledge areas. In allocating the credit for a course to multiple knowledge areas, only new knowledge or skills that are explicitly assessed may be counted towards a particular area. Knowledge and skills developed in other courses and used in the course in question may not be counted. Such knowledge is classified by the nature of the area in which it is applied. In summary, no knowledge is counted more than once as being new.

Credits for Work-Integrated Learning are accrued at a rate of one credit per 30 hours of work or an equivalent activity.

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