

**Policy on Accreditation of  
Bachelor of Science in Engineering (BSc(Eng))/  
Bachelors of Engineering (BEng) Programmes**

**Status: Approved by the UAC**

**Document: PE-70****Version: Revision - 2****Date: 26 July 2004**

## 1. Purpose

This document defines the policy of the ECSA Council governing the Accreditation Process for Bachelor of Science in Engineering (BSc(Eng))/Bachelors of Engineering (BEng) or equivalent Programmes.

The document is structured as follows:

- Section 2** Lists the complete suite of documents related to Accreditation of BSc(Eng)/BEng Programmes.
- Section 3** Introduces Accreditation, its purpose and the types of degrees considered for Accreditation.
- Section 4** Defines the Accreditation cycle, types of decisions and the terminology used for stating findings of the evaluation process.
- Section 5** States ECSA Policy on Processes for Accreditation of Degrees at various stages in their lifecycles.
- Section 6** Defines the Accreditation Visit Team and the requirements for Team Members, Team Leaders and Visit Leaders.
- Section 7** Defines the responsibilities of the University Accreditation Committee.
- Section 8** States ECSA's Policy on ensuring fairness of Accreditation decisions, publishing Accreditation decisions and confidentiality of the process.
- Section 9** States ECSA's Policy on cost recovery.

## 2. Related Documents

The Standards for Accredited BSc(Eng)/BEng Programmes meeting the educational requirements toward registration as a Professional Engineer are contained in two documents:

- PE-60:** Background to Accreditation of University Engineering Bachelor Degrees;
- PE-61:** Standards for Accredited BSc(Eng)/BEng Programmes.

The Accreditation process is defined and supported by the following documents:

- PE-70:** Policy on Accreditation of BSc(Eng)/BEng Programmes (this document);
- PE-71:** Procedure for arranging and conducting an Accreditation Visit;
- PE-73:** Documentation to be prepared by the Provider prior to a Visit;
- PE-75:** Accreditation Team Report and Recommendations;
- PE-76:** Accreditation documentation templates;
- PE-77:** Visit Leader's Report format;
- G-10:** Policy on Observers at Accreditation Visits.

### **3. Accreditation and Provisional Accreditation**

#### **3.1 Accreditation**

Accreditation is granted by ECSA to an engineering bachelors degree qualification, normally designated B.Sc.(Eng.), B.Eng. or B.Ing., and to the Programme leading to the qualification.

The policy and procedures defined in **PE-70** and companion documents assumes that the Provider is responsible for delivering the Programme, assessment of students and awarding the qualification.

Accreditation of a qualification means that ECSA considers that graduates of the Programme have been assessed by the Provider as satisfying the required outcomes and other requirements. Accreditation of the Programme means that the Programme is judged to prepare students to meet the prescribed outcomes criteria and will continue to produce graduates who meet the outcomes criteria for a defined period of up to five years.

The consequence of Accreditation is that holders of the qualification are recognised as meeting the educational requirements toward registration as Professional Engineers with ECSA. Graduates may also enjoy recognition in other jurisdictions under mutual recognition agreements.

A Programme considered for Accreditation must fulfill the requirements listed in section 3.5.

#### **3.2 Provisional Accreditation**

Provisional Accreditation may be awarded to a new or extensively revised Degree Programme that has not yet produced graduates but has students who have completed one half of the required credits for the degree. Provisional Accreditation indicates to the Provider and the students in the Programme that those parts of the Programme already implemented are considered satisfactory and that, if the remainder of the Programme is implemented as planned, the qualification is likely to be accredited. ECSA gives no commitment to accredit the qualification at this stage.

The procedure for Provisional Accreditation evaluation is defined in section 5.1.

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 an evaluation Visit – the first Regular Visit – which must take place in the year after the first graduates have been produced.

Graduates meeting the requirements for the degree during the period of Provisional Accreditation are granted recognition retrospectively by ECSA when the degree is accredited. Should a degree which was granted Provisional Accreditation be denied Accreditation as a result of the Regular Visit, the graduates shall be deemed not to hold an accredited qualification.

#### **3.3 Responsibility for Accreditation**

The University Accreditation Committee (UAC) is responsible for most aspects of Accreditation of BSc(Eng)/BEng Programmes. The UAC's terms of reference are listed in section 7.

### 3.4 Recognition of autonomy of Universities

Accreditation of engineering programmes is mandatory under the Engineering Profession Act<sup>1</sup>. ECSA respects the autonomy of universities to determine the manner in which programmes are designed to satisfy the prescribed standards.

Once a qualification is accredited, the Provider is required by sections 4.4 and 5.2 to inform ECSA of material changes, which information may lead to ECSA initiate an evaluation Visit.

ECSA does not prescribe standard or compulsory programme structures, curriculum details or teaching methods. Universities are accorded flexibility to construct degree programmes in order to meet the prescribed outcomes.

### 3.5 Degree Qualifications considered for Accreditation

A Degree Programme must not be considered for Accreditation or Provisional Accreditation by the UAC unless the following requirements are satisfied:

1. The Programme is a Bachelors Degree Qualification in Engineering normally resulting from programmes with at least 560 SAQA credits, that is four-year full-time equivalent duration at South African Universities. These Programmes normally follow 12 years of schooling.
2. It is recognised that, with the move to outcomes-based specifications and an education and training system focussing on articulation and progression, educational institutions may propose alternate routes and qualifications to meeting the requirements of **PE-60** and **PE-61**. Institutions wishing to pursue such routes or qualifications should make a full proposal for preliminary evaluation under the procedure in section 5.1 showing how the outcomes are satisfied and verified, how the content requirements are met.
3. The Qualification and Programme leading to the qualification must be identified in the Provider's rules for degrees. Each branch (discipline) of the degree and option or major within a branch considered by the UAC to be distinct is accredited separately.
4. All routes to obtaining the qualification and programme variants, including those planned or being phased in, must be identified in the Visit documentation. ECSA may grant Accreditation to a qualification obtained by a particular route or programme variant but not to another.
5. Documentation in accordance with the requirements must be submitted to ECSA by the prescribed time before the Visit.
6. An on-site Visit must take place.

## 4. The Accreditation Cycle and Decisions

The Accreditation cycle required by the ECSA Act is five years<sup>2</sup>. Accreditation may be granted for a shorter period from 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 Visit. 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 requirement toward registration as a Professional Engineer. The graduating class of a particular year includes those students who qualify through assessment in the new year without being required to re-register for the subsequent academic year.

---

<sup>1</sup> Programme Quality Assurance is required under the Higher Education and Engineering Profession Acts. It is anticipated that the ECSA Accreditation system will serve that purpose.

<sup>2</sup> The Council has determined that the four-year period under the Engineering Profession Act is impractical and has taken steps to regularize the practice and change the Act.

A Programme accredited for a shorter period than the full cycle with the requirement that deficiencies be remedied remains accredited and should be so described to the public.

#### 4.1 Types of Accreditation Evaluations

Accreditation evaluation Visits are classified into three types:

- Regular Visits,** that is Visits according to the five-year cycle;
- Interim Visits,** that is Visits held at a time within the cycle as required by the UAC in the decision on the findings of the previous Visit;
- Final Visit,** a Visit to a Programme which has been given notification of termination of Accreditation by the UAC after the previous Visit.

A form of evaluation not requiring a Visit is:

- Interim Report,** an evaluation of aspects of a Programme as required by the UAC in the decision on the findings of the previous Visit.

#### 4.2 Accreditation Findings and Decisions

Decisions of the UAC on each Programme are based on the report of the Accreditation Team's findings at the Visit. Findings are reported using a structured questionnaire defined in document **PE-75** addressing the outcomes, content, effectiveness of teaching and learning, and critical success factors which confirm the sustainability of the Programme.

#### 4.3 Obligation to provide evidence of compliance with Accreditation Criteria

The onus rests on the Provider of the Programme to provide evidence that the Accreditation criteria are being satisfied and therefore to complete all required documentation, make available specified material during the Visit and to respond to requests for supplementary information before and during the Visit. Should relevant information not be provided, the Team may report that such evidence is has not been provided 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 and a revisit required.

#### 4.4 Elements used to report the Visit Findings

Elements of the Accreditation Team's findings are identified in the report to the UAC as belonging to one of the three categories:

- Deficiency:** A matter which prevents full-term Accreditation being granted and requires remediation and verification. A deficiency could result from the cumulative effect of a number of issues, each of which taken in isolation would not preclude Accreditation. One or more deficiency precludes Accreditation until the next regular Visit and requires an interim evaluation of the Programme.
- Concern:** A matter which the Accreditation Team believes adversely affects the quality of the Programme but which does not preclude granting of Accreditation. Concerns must be satisfactorily resolved by the next Regular or Interim Visit. A concern not resolved by the next Visit may then be judged to be a deficiency.
- Comment:** Communicates to the academic unit impressions of the Team, commendations or constructive criticism on negative factors which are not classified as deficiencies or concerns.

A deficiency or concern may be declared if the academic entity fails to produce evidence in the documentation or at the site Visit to demonstrate that an outcome is being assessed, the Programme content is acceptable or that the Programme is sustainable.

#### 4.5 Accreditation Decisions

Document **PE-61** defines the Accreditation criteria. The following sections of PE-61/NLRD 48694 are not considered to be Accreditation criteria: 1, 2, 3, 11, 12, 18 and need not be addressed by Teams.

The evaluation of a Programme involves four essential facets embodied in the following **key questions**:

**Q1.** Does the Programme have:

- 1.1: The minimum required credits (section 4 of PE-61);
- 1.2: An acceptable breakdown by knowledge area (section 10.1 of PE-61);
- 1.3: A coherent core of mathematics, basic sciences and engineering sciences (section 10.2 of PE-61);
- 1.4: Specialist study in at least one sub-discipline (section 10.2 of PE-61);
- 1.5: A designation (qualifier) consistent with the purpose and complement of engineering sciences (section 7 of PE-61)?

**Q2. 1-10.** Does the assessment within the Programme ensure that all graduates satisfy each exit level outcome defined in PE-61 section 13:

- (a): Using a set of assessment criteria that, taken together, demonstrate the outcome is satisfied; and
- (b): At a level indicated by the range statement?

Note: Several sets of assessment criteria could be equally valid for each outcome. Providers should therefore be accorded flexibility to use either the set of specified assessment criteria or an alternative fully documented set that demonstrates achievement of the learning outcome.

**Q3.** Does the Programme provide an effective teaching and learning process toward achievement of the outcomes?

**Q4.** Considering the leadership, staff commitment and capacity, institutional commitment, resources, internal quality assurance processes and the student body:

- 4.1:** If the Programme meets the requirements Q1-Q3, is it sustainable until the next regular Visit?
- 4.2:** If there are deficiencies in any of Q1-Q3, is there the capacity and commitment to remedy deficiencies within 1, 2 or 3 years and to sustain the Programme thereafter? Are the remaining aspects of the Programme sustainable for the chosen period?

**Q5.1:** In the case of concerns identified at the previous Visit, have these been addressed by the university? If No, does any previously identified concern rank as a deficiency?

**Q5.2:** In the case of an Interim Report, Interim Visit or Final Visit, are there outstanding deficiencies from the previous Visit report?

The Accreditation Team is required to indicate whether there are deficiencies or concerns relating to each question and make comments as appropriate.

Accreditation decisions are made, using the results of the key questions 1 to 4 using the following **decision rules**:

**In the case of a Programme which produces graduates:**

- D1.** **For any type of Visit:** If no deficiencies are identified, grant Accreditation until the next Regular Visit. Concerns may exist and are to be addressed and the result assessed at the next Visit. If deficiencies are identified via the key questions, apply rules D2 to D7 appropriate to the type of Visit.
- D2.** In the case of a **Regular Visit** with identified deficiencies: grant Accreditation for 1, 2 or 3 years. Select one of the mechanisms (a) and (b) for verifying that the Provider has remedied the deficiencies:
- (a) An Interim Visit within one to three years of the original Visit; **or**
  - (b) The submission of an Interim Report within 6 to 24 months of the original Visit. The UAC must adopt this measure only if it is clear that:
    - (i) the result of remediation can be assessed objectively;
    - (ii) deficiencies can be remedied within two years; and
    - (iii) verification by report is appropriate.
- Concerns may exist and are to be addressed and the result assessed at the next Visit.
- D3.** In the case of evaluation by Interim Report with identified deficiencies: require an Interim Visit within 6 months of consideration of the report.
- D4.** In the case of evaluation by means of an Interim Visit with identified new or previously declared deficiencies: issue notice to terminate Accreditation and require a Final Visit within 12 months of the Interim Visit.
- D5.** In the case of a Final Visit with identified new or previously declared deficiencies: withdraw Accreditation. Determine whether withdrawal is to be of immediate effect or whether Accreditation extends to graduates of the current year.
- D6.** At any Visit with current or previously declared deficiencies: Accreditation may be summarily withdrawn from a Programme if the UAC judges that there is a demonstrable lack of commitment or capacity on the part of the Provider to address deficiencies.
- D7.** In the case of a non-accredited Programme already producing graduates: If deficiencies exist, Accreditation is withheld from the Programme.

**In the case of a Programme which is new or which has been judged to be extensively revised and has students who have attained one half of the credits for the degree at the time of the Visit:**

- D8.** If the UAC judges that the Qualification and Programme is likely to receive Accreditation if implementation continues according to documented plans, grant Provisional Accreditation. Otherwise,
- D9.** Provisional Accreditation not be granted to the Programme.

**In the case of a program submitted for Initial Evaluation in terms of section 5.1:**

The UAC must express an opinion on the planned Programme taken from O1, O2 or O3 or O2 and O3 in combination:

- 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 the respects listed above.

## **General Requirement:**

Where deficiencies and concerns are to be addressed, the Provider must be given freedom by the UAC to determine the way it will bring about the necessary improvements, including alternative approaches.

### **4.6 Compatibility of Decisions with those granted in 1997 or earlier**

The UAC Guidelines up to and including Revision 7, which were in force until 1997, provided for decisions termed full Accreditation and Conditional Accreditation. The relationship between types of decisions defined in section 4.1.2 and the earlier forms are as follows:

1. **Full Accreditation** is replaced by **Accreditation until the next Regular Visit**.
2. Programmes granted **Conditional Accreditation** for a first period are deemed to have been granted **Accreditation for a specified period with the requirement for an Interim Visit or Interim Report**.
3. Programmes granted **Conditional Accreditation** for a second consecutive period are deemed to be **on notice to terminate Accreditation**.

### **4.7 Material change during a period of Accreditation**

During the period of Accreditation of a Programme, the Provider is required to notify ECSA of:

1. Major changes to the Programme, its content or outcomes assessed which potentially affect the Accreditation status of the Programme; or
2. Altered conditions which 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 provide ECSA with information that it may request. The UAC or its Executive Committee, having considered the information provided, must determine a course of action within the policy and procedures.

When changes to curriculum, assessment processes, or key resources are planned or are in progress at the time of an Accreditation Visit, the changes must be identified in the documentation. The documentation must identify all the possible cohorts of students who will qualify under the existing and changed conditions.

## **5. Accreditation Evaluation Processes**

The Accreditation Policy accommodates evaluation of Programmes at various stages in their lifecycle as detailed in the sections 5.1 – 5.5.

### **5.1 New Degree Programmes<sup>3</sup>**

A Provider department wishing to introduce a new Degree Programme is advised to take the following steps:

---

<sup>3</sup> It is anticipated that the process for new programmes will be changed under a forthcoming agreement with the Council for Higher Education.

1. **Seek an Initial Evaluation:** At the planning stage, documentation conforming to the maximum possible extent with the requirements of document **PE-73** should be submitted to ECSA for initial evaluation. Documentation must reflect the planning for and institutional commitment to the proposed Programme, resourcing the Programme, and the process for assessment of students. The documentation must give the schedule for implementation of the new Programme.

The initial evaluation is conducted as follows:

- (a) On receipt of the documentation, the UAC must set up an Accreditation Team, with composition specified in section 6.2.
- (b) In the case of a Provider with accredited Programmes, the Team would not normally carry out an on-site Visit at this stage examine. The Team must examine the documentation and assess the likely accreditability of the Programme if implemented as planned. The Team must confer at least by teleconference and may meet if necessary. The Team should be guided by **PE-75** in its evaluation and must complete as much of the report as is possible at this stage.
- (c) In other cases, including a established Provider introducing a Programme in a discipline in which the Provider has not been active in the past, an on-site Visit must be held.
- (d) The Team must advise the UAC on the likely accreditability of the Programme, if implemented as planned. The Team must use evaluation form **PE-75** but should answer the questions in the light of the proposals of the Provider ob the curriculum, how outcomes will be verified, Programme breakdown and the resources that have been committed to the Programme.
- (e) The UAC must consider the Team's report and give the Provider an opinion and comment on whether the following are consistent with the Programme ultimately achieving achieving accreditation:
  - (i) proposed Programme, the consistency of the content with the designation, and its breakdown by subject area;
  - (ii) the planned outcomes assessment method;
  - (iii) the planned teaching and learning strategy;
  - (iv) the resources devoted to the Programme.

Potential deficiencies and concerns in any of these areas must be identified.

2. **Seek Provisional Evaluation:** Once the Programme has been implemented, the department should initiate an Accreditation Visit with a view to attaining Provisional Accreditation once the first group of students has completed 50% of the credit requirements toward the degree.

The documentation must reflect the already implemented part of the Programme and detail the planning for and institutional commitment to the as yet unimplemented part of the Programme, resourcing the Programme, and the process for assessment of students.

The Provisional Evaluation is carried out as follows:

- (a) The UAC must appoint an Accreditation Team to undertake an on-site Visit.
- (b) The Accreditation Team advises the UAC on whether Provisional Accreditation should be granted, subject to implementation continuing as planned.

- 3. Seek Evaluation as on Regular Visit:** Once the Programme has produced its first graduates, an Accreditation Visit should be initiated. The subsequent cycle of Visits may be adjusted to coincide with that for other programmes in the home faculty.

ECSA may decline to accredit a Degree Programme until sufficient graduates have been produced to allow a full and valid judgement of the attainment of outcomes and sustainability to be made.

## 5.2 Extensively revised Degree Programmes

A Provider department wishing to extensively restructure an existing accredited Programme is required to inform ECSA of its intentions. The UAC must determine an appropriate course of action in each case in consultation with the Dean and Head of Department. Some or all of the steps for new degrees described in section 5.1 may be invoked.

## 5.3 Evaluation of currently Accredited Degree Programmes

At least 12 months before the end of the period of Accreditation, ECSA will remind the Provider, by letter to the Dean, of the termination date of the current Accreditation and that the Provider should initiate an Accreditation Visit to take place during the last year.

Regular Visits are usually arranged to occur simultaneously to all Programmes in a faculty.

## 5.4 Evaluation of existing Non-Accredited Programmes

A Provider may invite ECSA to conduct an evaluation of an existing Degree Programme which is not currently accredited but which is producing graduates. ECSA conducts the evaluation in two stages:

1. The Provider is asked to prepare documentation fully as specified in document **PE-73**. In addition, if the Programme has previously been refused Accreditation, or has had previously awarded Accreditation withdrawn, the documentation must describe the steps that have been taken to meet ECSA's requirements for Accreditation. The UAC must set up an Accreditation Team which, on the basis of the documents submitted and guided by **PE-75**, advises the UAC whether there is a prima-facie case for an Accreditation Visit.
2. If the Programme is considered to hold a reasonable prospect of Accreditation, the Team appointed in 1 carries out the evaluation Visit.

## 5.5 Procedure for Visits other than Regular Visits

The following procedure must be followed in the case of a Visit other than a regular Visit.

1. The UAC or the UAC Exco, whichever meets first, must
  - (a) determine the purpose of the Visit;
  - (b) appoint a Visit Leader and Team;
  - (c) determine the process to be followed;
  - (d) define Pre-visit documentation required and on-site documentation;
  - (e) determine the duration of the Visit and set the timetable for Visit activities.
2. The information in 1 must be conveyed to the Dean for comment.
3. The Visit Leader, in consultation with the UAC Chairperson must finalise the Visit details.
4. The Visit Report to the UAC must be based on **PE-77** and those parts of **PE-75** relevant to the purpose of the Visit.

## 5.6 Evaluation on basis of Interim Report

When a Provider is required to submit an Interim Report on remediation of deficiencies of a Programme, the report is assessed according to the following procedure:

1. The UAC appoints an Accreditation Team, as close as possible in composition to the Team that carried out the Accreditation Visit.
2. The Team considers the report without carrying out a site Visit. The Team Leader must determine the detailed workplan for the Team. The Team must confer at least by teleconference and may meet if necessary.
3. The Team must prepare a report using the format in **PE-75**, inserting findings from the report evaluation and carrying over the remaining findings from the first report.
4. The report is presented to the UAC following the normal procedure.

## 5.7 Expiry of period of Accreditation

Should a Provider not initiate an Accreditation Visit in time to allow the evaluation process to be completed, Accreditation shall terminate at the end of the period stated in the decision letter and be so recorded in the list of Accredited Degrees in **PE-80**.

Provisional Accreditation shall expire at the end of the period unless extended or converted to Accreditation as a result of an Accreditation Visit.

When Accreditation or Provisional Accreditation expires, the UAC must satisfy itself that ECSA has taken all reasonable measures to initiate the evaluation and that failure to arrange a Visit is as a consequence of the Provider's wishes, refusal or default. Expiry of Accreditation without an evaluation Visit must be reported to the Executive Committee (EXCO) of ECSA who must determine the course of any further action. The CHE must be informed.

# 6. Accreditation Team

The following types of evaluators are involved in an Accreditation process:

- Team Member:** A person, registered as a Programme evaluator in terms of section 6.1, appointed by the UAC to an Accreditation Team.
- Team Leader:** A person, designated in the register of evaluators as a Team Leader, appointed by the UAC to lead an Accreditation Team.
- Visit Leader:** A person, designated in the register of evaluators as a Visit Leader, appointed by the UAC to lead a multi-team Visit.

## 6.1 Registration of Programme Evaluators

Accreditation Teams are made up of individuals who are registered programme evaluators. The UAC is required to maintain a register of programme evaluators for BSc(Eng)/BEng Programmes. Evaluators are required to be competent both in the field of the Programme and in Accreditation of BSc(Eng)/BEng Qualifications and Programmes. Evaluators for such Bachelors Degree Programmes are therefore required to:

1. Be registered as Professional Engineers;
2. Have post-registration experience in relevant practice or in an academic or research position for 3 years;

3. Complete training in the method of Accreditation, as prescribed by the UAC; and
4. Undertake retraining in the event of a major change in policy or practice.

The UAC Executive Committee (Exco) must ensure that sufficient registered evaluators are available for Programmes to be visited in the following three years. Potential Programme evaluators are identified in consultation with the relevant Professional Advisory Committee (PAC) and recognised professional institution.

Individuals on the register of evaluators may be identified by the UAC as Team Leaders provided that the person satisfies the following criteria:

1. Has experience of at least two Accreditation Visits as a Team member;
2. Is identified by the Team Leaders and the Visit Leaders of those Visits as a potential Team Leader.
3. Reattends a training Programme, as prescribed by the UAC.

The UAC Exco must ensure that sufficient Team Leaders are identified for anticipated Visits over the following three years.

The initial register of Team Leaders must be drawn from persons experienced as Team Leaders who are selected by the UAC Executive Committee and who complete the training programme.

Individuals on the register of evaluators who have experience as Team Leaders may be designated as Visit Leaders provided that the person satisfies the following criteria:

1. Has experience of at least two Accreditation Visits as a Team Leader;
2. Is identified by the Visit Leaders of those Visits as a potential Visit Leader;
3. Reattends a training programme, as prescribed by the UAC.

Where possible, the Visit Leaders should be members of the UAC. Alternatively, the UAC should co-opt persons designated as Visit Leaders who are likely to be called on to lead Visits over the following three years.

The initial register of Visit Leaders must be drawn from persons experienced as Visit Leaders who are selected by the UAC Executive Committee and who complete the training programme.

## **6.2 Composition of the Accreditation Team**

The Accreditation Team to evaluate a Qualification and the Programme leading up to the qualification must be constituted according to the rules:

1. An Accreditation Team is appointed for each Degree Programme or distinct option identified by the UAC to be evaluated.
2. All Team members must be registered as evaluators of BSc(Eng)/BEng Programmes.
3. The Team must have not less than three and not more than four members subject to there being not less than one academic and not less than two members who are currently active in industry or professionally in the discipline of the Degree Programme being evaluated.
4. A member of the Team is appointed by the UAC as Team Leader. The Team Leader may, in turn, designate a Team member as rapporteur but the Team Leader retains final responsibility for the report.

5. Where two or more Programmes being simultaneously evaluated are judged by the UAC to have significant overlap in engineering content, the Teams may have common membership, provided there must be a minimum of three members per Programme.
6. The Team member's individual specialities should be spread as evenly as possible across the sub-disciplines of the Degree Programme under evaluation.

### **6.3 Process for appointing Teams**

Most Visits require several teams for the Programmes on offer. The UAC appoints Teams, Team Leaders and a Visit Leader by the following process:

1. Not later than six months before the Visit the UAC selects the Visit Leader and Team Leaders;
2. The UAC Executive Committee in consultation with the Visit Leader and the leader of each team selects the remaining Team members.
3. Names of the proposed Team members are submitted to the Dean for comment.
4. The UAC Executive Committee deals with contingencies arising in this process.

During the phasing in of the outcomes based criteria and related Accreditation procedures, the UAC may appoint a Facilitator to assist the Visit Leader and Team Leaders in procedural matters and in interpretation of the criteria.

### **6.4 Observers**

Observers are permitted to take part in Accreditation Visit subject to ECSA's policy on observers at Accreditation Visits to Universities and Technikons contained in document G-10.

### **6.5 Visit Leader's Responsibilities**

A Visit Leader accompanies a multi-team Visit. In accepting appointment, a Visit Leader commits to the following duties:

1. Finalisation of the Team membership;
2. Finalisation of the Visit timetable;
3. Pre-visit liaison with Team Leaders to ensure Teams are fully prepared for Visit;
4. General co-ordination and problem solving during the Visit, liaison between Teams on mutual interests;
5. Courtesy Visits to executive officers of the Provider;
6. Meeting with student leadership;
7. Assisting Team Leaders to produce consistent recommendations across Teams and across Visits;
8. Ensure that Team reports are complete, consistent and contain fully justified conclusions, particularly when these are negative or critical;
9. Presentation of reports at the UAC meeting;
10. Checking the decision letters;
11. Post-visit evaluation of process and Team performance; and
12. Identification of potential Team and Visit Leaders for training for future Visits.

### **6.6 Team Leader's Responsibilities**

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

1. Assist with selection of remaining Team members;

2. Before the Visit, read the documentation fully in order to identify issues that require investigation and instances where additional information is required;
3. Communicate with Team members regarding issues and information requirement that they have identified. Collate issues and information requirements using the format in Appendix A of **PE-71**. Communicate information requirements to the person responsible for the Programme. Maintain a record of these actions.
4. During the Visit, ensure that all necessary information to support the Team's findings and recommendation is collected and verified;
5. Allocate duties to Team members;
6. Ensure that all deficiencies and concerns are identified to the Head during the Visit;
7. Advise the Head of Department of matters of concern and deficiencies identified by the Team;
8. Ensure that the draft report is written by the end of the Visit;
9. Ensure that the final report is produced, checked for consistency by the Visit Leader, approved by the Team and submitted to the ECSA Secretariat.

### **6.7 Eligibility for membership of Teams and to be Visit Leader**

Persons may not serve as Visit Leaders, Team Leaders, members of Teams or as observers if they have any relationship with the Provider concerned to such an extent that their judgement may be unduly influenced by such relationship (i.e. staff or members of the Provider's advisory committees): provided that this restriction does not apply to persons who act as external examiners for the Provider.

## **7. The University Accreditation Committee duties and functions**

Council has delegated authority to the Accreditation Committee for University Engineering Degree Programmes (UAC) to grant Accreditation and Provisional Accreditation to Degree Programmes and and withhold Accreditation from non-accredited Programmes. Power to terminate Accreditation is reserved by the Council or its Executive Committee.

The obligations and delegated functions of the Accreditation Committee for University Engineering Degree Programmes (UAC) are:

1. To operate within the framework of the ECSA Standards and Procedures System (S&P) and to use standards and procedures approved by Council;
2. To draw up detailed operational procedures ensuring that these are consistent with the S&P;
3. To approve the registration of persons as evaluators, to identify evaluators as Team Leaders and to identify Team Leaders as Visit Leaders;
4. To consult with such institute and professional advisory committees as it may consider expedient for purposes of identifying potential evaluators;
5. To appoint Accreditation Teams for each Degree Programme, Team Leaders and, in the case of regular Accreditation Visits, a Visit Leader;
6. To approve attendance by observers;
7. To delegate such powers, other than making Accreditation decisions, and prescribe the accompanying procedures to the Executive Committee or the Chairperson of the UAC as may be necessary to complete the necessary appointments when the UAC is not in session;
8. To approve Accreditation Visit schedules, reporting deadlines and dates of meetings of the UAC;

9. After consideration of the full reports of Accreditation Teams, to grant Accreditation for a defined period; to grant Provisional Accreditation to Degree Programmes; to recommend termination of Accreditation of an existing qualification to Council or the Executive Committee, whichever meets first; and to withhold Accreditation from non-accredited Qualifications and Programmes;
10. To confirm the expiry of Accreditation of any Degree Programme in the event of a Provider failing to initiate an Accreditation Visit and to advise the Council or the Executive Committee, whichever meets first, of such occurrence;
11. To issue a list of degrees accredited by the UAC, updating the list as Accreditation decisions are made;
12. To institute such observation exercises as may be necessary to ensure that ECSA's Accreditation standards are substantially equivalent to those of accrediting bodies with whom ECSA has entered into a mutual recognition agreement;
13. To 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.

## **8. Transparency, Confidentiality and publication of Decisions**

The Accreditation process requires confidentiality in some aspects while being transparent in others. This section describes ECSA's approach to achieving the correct balance between transparency and confidentiality.

### **8.1 Confidentiality**

Apart from reflecting the outcome of each Accreditation evaluation in the list of recognised degrees, ECSA will not divulge details of investigations, documentation, correspondence and discussions between ECSA, the Accreditation Team and the Provider concerned without the approval of the Provider. ECSA may supply Team and Visit Leader reports to the Council for Higher Education in terms of agreements that are in force from time to time.

### **8.2 List of Accredited Degrees**

After each set of Accreditation decisions, the UAC, on behalf of Council, publishes document **PE-80** containing a list of all Providers' Degrees accredited at the time and in the past. The list shows the initial and final year of the Accreditation period(s). In the case of a Programme no longer accredited the previous period(s) of Accreditation are shown. Provisionally accredited programmes are identified in the list.

The list of accredited degrees must indicate the branch, discipline or option of the qualification. In addition, the list may specify the route or programme variant by which the qualification was obtained.

Dates of validity of Accreditation of each degree refer to the academic year in which the individual completes the requirements to graduate, including 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.

Universities are expected to inform the students in each Degree Programme of the current Accreditation status of the qualification.

Universities are encouraged to publicise the fact that their degrees are accredited by ECSA. Provisional Accreditation status must be clearly stated.

### 8.3 Ensuring fairness in reporting in decision making

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

1. Evaluation of the Qualification and Programme must be performed using the standards in document **PE-61**, read with **PE-60**, and the reporting form defined in **PE-75**.
2. Identified or potential deficiencies, concerns, comments and constructive criticism must be raised with the Head and relevant staff members at interviews during the Visit.
3. The Accreditation Team must prepare a complete first draft report, and discuss it with the Head of Department, by the close of the Visit.
4. The Team Leader must prepare a second draft report for agreement by the Team members.
5. The agreed second draft report and recommendations of the Accreditation Team must be submitted to the Dean of the Faculty for comment by an agreed date. The principal objective is to ensure that the report is free of factual errors. The Dean may respond to the findings and recommendations.
6. In the case of the Dean raising matters of fact or responses to the decisions, the Team Leader must, in consultation with Team members and the Visit Leader, consider the matters raised and, if necessary amend the report.
7. The final report must then be prepared and be approved on behalf of the Team by the Team Leader.
8. The report(s) on the Degree Programmes, together with the Visit Leader's report, must be circulated to the UAC members prior to the meeting.
9. The Dean of the Faculty, in respect of which a report is being presented, if he/she so elects, is entitled to be present at the meeting of the UAC while the reports are being presented. The Dean may answer questions from the Committee, and make such representations to the Committee as he/she may deem necessary. The committee must request the Dean to recuse himself/herself from the meeting at the stage when the committee is ready to deliberate and decide on the matter.
10. The UAC must take into account in its deliberations any unresolved matters raised by the Dean both in response to the second draft report and at the meeting.
11. The Chief Executive Officer must inform the Provider of the decision(s) by letter to the Vice-Chancellor or Rector, 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 requirements of section 4.4 to notify ECSA of material change during the period of Accreditation. The Visit Leader Report and individual Team reports must be attached to the decision letter.

### 8.4 Appeals

Document **PE-91** defines the procedure to be followed to appeal a decision of the UAC or Council.

## 8.5 Formative aspects of Accreditation

While the Accreditation Team and the UAC have a duty to the profession and the public to withhold Accreditation from Qualifications and Programmes which do not satisfy the stated outcomes, there is a complementary duty to encourage Programmes which are deficient to improve and attain accredited status. Interim Visits and Interim Reports in the Accreditation cycle provide the opportunity for universities to respond to deficiencies identified by the Team. Teams may also identify areas of concern. ECSA therefore requires Accreditation Teams to formulate their reports, particularly where deficiencies and concerns are identified, in a firm but constructive way. The formative process cannot however continue indefinitely: if deficiencies persist or new deficiencies are identified at a Final Visit, Accreditation must be withdrawn. Similarly, if there is clear evidence that a Provider lacks the commitment or the capacity to remedy deficiencies, Accreditation must be withdrawn.

## 8.6 Assistance to Universities

ECSA is prepared to offer general assistance to universities in the form of workshops and briefings on the standards and procedures for accrediting BSc(Eng)/BEng Programmes. ESCA cannot however offer detailed advice on issues relating to particular Programmes except as arises from the processes described in this document.

## 9. Costs

The ECSA Council determines costs to be levied for conducting Accreditation Visits. In addition, the Provider is expected to bear the costs of documentation, and on-campus meals and refreshments during the Visit.

## 10. Revision History

Version	Date	Revision Authorised by	Nature of Revision
Concept-A	15 Oct 1999	UAC	Adapted from section 1 of UAC Policy & Procedures Ver 8
Draft-A	18 Jan 2000	UAC	Minor corrections
Draft-B	18 April 2000	UAC Working Group	Refinement of policy and procedures
Draft-C	20 July 2000	UAC	Minor corrections
Rev – 0	11 Aug 2000	Council	Converted to PDF Format
Rev-1 Draft-A	20 Nov 2001	UAC	Expand 4.2.2, Reformat 5.1, Minor change to 8.2
Rev-1	9 July 2002	UAC	Enhance procedures for Initial Evaluation
Rev-2	26 July 2004		Clarification and harmonization with revised <b>PE-61</b> , Rev-2