

Umalusi

**Guidelines for implementation
of the
Policy for the quality assurance of private colleges for
Continuing Education and Training offering
qualifications on the General and Further Education and
Training Qualifications
Sub-framework (GFETQSF)**

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TABLE OF CONTENTS

TABLE OF CONTENTS	3
RELATED DOCUMENTS	5
ACRONYMS	6
DEFINITIONS	8
CHAPTER 1	12
Introduction	12
Purpose of this guideline	12
Intended audience	13
Legislative context	13
Umalusi's quality assurance approach	15
CHAPTER 2	17
FEES CHARGED FOR SERVICES	17
Accreditation fees	17
Quality promotion fees	18
Determination of financial obligations in respect of quality promotion, accreditation and post-accreditation fees	18
Factors determining fees	19
Payment of applicable fees	20
Non-payment of accreditation fees	20
CHAPTER 3	22
THE ACCREDITATION PROCESS	22
Steps in the Accreditation Process	23
Roles, Responsibilities and Processes	26
Level Descriptors	41
Accreditation criteria	41
Accreditation decisions	47
Seven years accreditation	47
Two years provisional accreditation	48
No Accreditation	49
Window Period	49
Deferral	49
Review	50
Concessions	50
Appeal Process	50
Notification to the Registrar	52

CHAPTER 4	53
Extension of scope	53
Change of ownership	54
Change of site / premises	54
Changes to a private college's application for accreditation	55
Deferral of site visit by a private college	55
Registration with the Department of Higher Education and Training	56
Reapplication for accreditation	56
Multiple sites	57
Continued offering of the qualification	57
Withdrawal from the accreditation process	57
Withdrawal of accreditation	58
Procedure for withdrawal of accreditation	58
CHAPTER 5	63
Quality Promotion Sessions and Pre-site Visit meetings	63
College Enquiries and support	63
Record keeping	63
Stakeholder Relations	64
Review of the Guideline document	64
APPROVAL	64

RELATED DOCUMENTS

The Guidelines for implementation of the quality assurance of private colleges for Continuing Education and Training, offering qualifications on the General and Further Education and Training Qualifications Sub-framework (GFETQSF) should be read in conjunction with the documents listed below:

Table 1

Document Name
National Qualifications Framework Act, 2008 (Act No. 67 of 2008); as amended.
General and Further Education and Training Quality Assurance Act, 2001 (Act No. 58 of 2001), as amended in 2008.
Continuing Education and Training Act 16 of 2006, as amended
Policy for the quality assurance of private colleges for Continuing Education and Training, offering qualifications registered on the General and Further Education and Training Qualifications Sub-framework and the accreditation of private assessment bodies (<i>Government Gazette no. 41887</i>).
Policy documents and guidelines pertaining to the General Education and Training Certificate: Adult Basic Education and Training (GETC: ABET), National Certificate (Vocational) NC(V)), and National Education Report 190/191 (NATED).
Standard Operating Procedures: Umalusi Evaluation and Accreditation unit
Open letter to Applicants – Private Adult Education and Training Colleges
Open letter to Applicants – Private Further Education and Training Colleges

ACRONYMS

A&C	Accreditation and Coordination
AAC	Accreditation Appeals Committee
ABET	Adult Basic Education and Training
ACC	Accreditation Committee of Council
CEO	Chief Executive Officer
CET	Continuing Education and Training
CIPC	Companies and Intellectual Property Commission
DHET	Department of Higher Education and Training
E&A	Evaluation and Accreditation
E&M	Evaluation and Monitoring
E&V	Evaluation and Verification
EXCO	Executive Committee of Council (Umalusi)
GENFETQA	General and Further Education and Training Quality Assurance
GETC	General Education and Training Certificate
GFETQSF	General and Further Education and Training Qualifications Sub-framework
IAC	Internal Accreditation Committee
ICASS	Internal Continuous Assessment
ISAT	Integrated Summative Assessment
LOI	Letter of Intent
NATED	National Education
NC(V)	National Certificate (Vocational)
NQF	National Qualifications Framework
QC	Quality Council
QP	Quality Promotion

PAJA	Promotion of Administrative Justice Act
POPI	Protection of Personal Information
SACE	South African Council for Educators

DEFINITIONS

In this document, any word or expression to which a meaning has been assigned in the *National Qualifications Framework Act, 2008 (Act No. 67 of 2008)* and the *General and Further Education and Training Quality Assurance Act 2001, (Act No. 58 of 2001) as amended in 2008*, has the same meaning, unless the context otherwise indicates:

“accreditation” means the outcome of a quality assurance process of evaluating a private college to determine whether it has, in accordance with the policy and criteria for quality assurance as set out in the policy, the capacity to offer a qualification or programmes leading to a qualification on the General and Further Education and Training Qualifications Sub-framework;

“assessment” means the process of identifying, gathering and interpreting information about a learner's achievement in order to:

- (a) assist the learner's development and improve the process of learning and teaching; and
- (b) evaluate and certify competence in order to ensure qualification credibility.

Assessment includes national examinations and site-based assessment.

“assessment body” means a juristic body accredited by Umalusi Council to quality assure internal assessment and conduct external examinations, or a department of education.

“certification” means the formal recognition by Umalusi of a qualification or part-qualification awarded to a successful learner.

“college” – means a private college that provides continuing education and training on a full-time, part-time or distance basis and which is registered or provisionally registered as a private college under Chapter 6 of the Continuing Education and Training Act 16 of 2006.

“continuing education and training” – means all learning and training programmes leading to qualifications or part-qualifications at levels 1 to 4 of the National

Qualifications Framework contemplated in the National Qualifications Framework Act, 2008 (Act 67 of 2008), provided for at a college in terms of the Continuing Education and Training Act 16 of 2006;

“**Council**” refers to Umalusi, the Quality Council for General and Further Education and Training; as contemplated in the *National Qualifications Framework, 2008 (Act No. 67 of 2008)* and the *General and Further Education and Training Quality Assurance Act 2001, (Act No. 58 of 2001, as amended in 2008)*;

“**curriculum**” means a statement which encompasses three components: intended curriculum, enacted curriculum and assessed curriculum; curriculum framework, and means the same as programme;

“**exit point**” means a point in General and Further Education and Training at which a learner is required to demonstrate competence with a view to obtaining documentary proof of proficiency;

“**external assessment**” means any assessment conducted by a public or accredited private assessment body, the outcomes of which count towards the achievement of a qualification;

“**Further Education and Training**” means all learning and training programmes leading to qualifications on Levels 2, 3 and 4 of the National Qualifications Framework (NQF);

“**General and Further Education and Training Qualifications Sub-framework**” means the sub-framework of the NQF for General and Further Education and Training that is developed and managed by Umalusi;

“**General Education and Training**” means all learning and training programmes leading to a qualification on Level 1 of the National Qualifications Framework;

“**Minister**” means the Minister responsible for Higher Education and Training;

“National Qualifications Framework” (NQF) means the national qualifications framework contemplated in the *National Qualifications Framework Act, 2008*;

“private college” - means any college that provides continuing education and training on a full-time, part-time or distance basis and which is registered or provisionally registered as a private college in terms of *Chapter 6 of the Continuing Education and Training Act, 2006*;

“private education institution” as contemplated in the *General and Further Education and Training Quality Assurance Act, 2001 (Act No. 58 of 2001)*;

“Processes and procedures for the assessment of learner achievement” as contemplated in the policy documents relating to the registered qualification.

“programme” means the same as curriculum;

“public institution” means a state or partially state funded body that offers any education or training programme that leads to a qualification or part-qualification registered on the NQF;

“qualification” - means qualification types and variants as defined on the General and Further Education and Training Qualifications Sub-Framework as contemplated in the *National Qualifications Framework Act, 2008 (Act No. 67 of 2008)*;

“quality assurance” - means the process of measuring, evaluating and reporting on quality against standards, and monitoring for ongoing improvement in the qualification, the curriculum/programme, the assessment, the implementation and delivery of the curriculum/programme and the capacity of the institution or assessment body to offer and/or assess the qualification;

“Quality Council (QC)” as contemplated in the *National Qualifications Framework Act, 2008 (Act No. 67 of 2008)*;

“registered qualification” – means a qualification registered on the *National Qualifications Framework* by SAQA in terms of section 13(1)(h) of the *National Qualifications Framework Act, 2008 (Act No. 67 of 2008)*;

“registration of a private college” – means the process of registration that private colleges must undertake with the Department of Higher Education and Training in order to operate in South Africa in accordance with the requirements of the Constitution of South Africa and the *Continuing Education and Training Act No. 16 of 2006*;

“Umalusi” – means the Quality Council for General and Further Education and Training established by the *General and Further Education and Training Quality Assurance Act, 2001 (Act No. 58 of 2001)*. In terms of the *National Qualifications Framework Act, 2008 (Act No. 67 of 2008)*, it is tasked to support the achievement of the objectives of the NQF and to develop and manage the General and Further Education and Training Qualifications Sub-Framework.

CHAPTER 1

PURPOSE AND APPLICATION OF THE GUIDELINE FOR IMPLEMENTATION

Introduction

1. This document must be read in conjunction with the *Policy for the quality assurance of private colleges for Continuing Education and Training, offering qualifications registered on the General and Further Education and Training Qualifications Sub-framework and the accreditation of private assessment bodies (Government Gazette No. 41887 of 7 September 2018.)*
2. In accordance with sections 17A (2) (a), 23(1), 23(2) and 24(1) (b) of the *General and Further Education and Training Quality Assurance Act, 2001 (Act No. 58 of 2001)*, as amended in 2008, (GENFETQA Act), Umalusi is required to develop policy and criteria for the quality assurance of private education institutions. The GENFETQA Act further states that the Minister responsible for Higher Education and Training must approve the policy and criteria.
3. As contemplated in the GENFETQA Act, the *Policy for the quality assurance of private colleges for Continuing Education and Training, offering qualifications registered on the General and Further Education and Training Qualifications Sub-framework and the accreditation of private assessment bodies (published in Government Gazette no. 41887 of 7 September 2018) was developed.*

Purpose of this guideline

4. This Guideline is intended to outline the processes and procedures in terms of which Umalusi accredits private colleges to offer qualifications on the General and Further Education and Training Qualifications Sub-framework (GFETQSF).
5. The Guideline is also intended to outline the processes and procedure in terms of which accredited private colleges will be monitored for continued compliance with the accreditation criteria.

Intended audience

6. The intended audience is as follows:
 - a. for both an internal and external audience. It is meant to ensure that Umalusi's internal processes and procedures for the accreditation and monitoring of private colleges are applied fairly and consistently.
 - b. as a reference for external parties to understand the processes and procedures relating to the accreditation and monitoring of private colleges.

Legislative context

7. This Guideline is informed by the following key pieces of legislation:
 - a. The Constitution of the Republic of South Africa (1996). The Act provides for the registration of private education institutions¹.
 - b. Policy for the quality assurance of private colleges for Continuing Education and Training, offering qualifications registered on the General and Further Education and Training Qualifications Sub-framework and the accreditation of private assessment bodies: 7 September 2018 (*Government Gazette no. 41887.*)
 - c. The Continuing Education and Training Act 16 of 2006 (CET Act).
 - d. The *National Qualifications Framework Act, Act No. 67 of 2008* (NQF Act). The Act provides for the establishment of three Quality Councils (QCs); namely, the Quality Council for General and Further Education and Training

¹ Some of the conditions for the registration contemplated by the Constitution are that such private institutions will be established and maintained at the cost of their owners, and that the provision of education of such institutions will not be inferior to that of comparable public colleges.

- (Umalusi), the Council on Higher Education (CHE), and the Quality Council for Trades and Occupations (QCTO).
- e. The NQF Act further provides for the three QCs to develop sub-frameworks of qualifications. In respect of quality assurance, the QCs are further expected to:
- i) develop and implement policy for quality assurance;
 - ii) ensure the integrity and credibility of quality assurance;
 - iii) ensure that quality assurance as is necessary for the sub-framework, is undertaken.
- f. The *General and Further Education and Training Quality Assurance (GENFETQA) Act (No 58 of 2001)*, as amended in 2008. In line with the object of the GENFETQA Act, namely, to enhance the quality of general and further education and training, Umalusi was established with the purpose of maintaining norms and standards in general and further education and training. The mandate includes:
- i) Accreditation of private education institutions;
 - ii) Quality assurance of exit assessment of learner achievement in respect of qualifications that are registered on the sub-framework of Umalusi;
 - iii) Certification of learner achievements.
 - iv) Quality assurance of private education institutions; and
 - v) Accreditation and monitoring of private assessment bodies.
- g. Standard Setting and Quality Assurance of the General and Further Education and Training Qualifications Framework (November 2010).
- h. Policy for the General and Further Education and Training Qualifications Sub-framework, Government Gazette 38029 of 29 September 2014.
- i. Council policies and directives governing the qualifications on the general and further education and training sub-framework and on the conduct,

administration and management of the assessments and certification for such qualifications.

Umalusi's quality assurance approach

8. The objective of the GENFETQA Act is to enhance the quality of general and further education and training. Further to this objective, the GENFETQA Act further requires Umalusi to quality assure private education institutions and to assure the quality of assessment at exit points (of qualifications which are certified by Umalusi and offered by public and private colleges).
9. As part of its integrated approach to the quality assurance of private education institutions, Umalusi acknowledges through accreditation:
 - a. The capacity of a private college to offer a qualification that is registered on the GFETQSF. In this regard, Umalusi evaluates factors that are intended to create or support a conducive environment for effective teaching and learning, in line with the institution's vision and mission. Of particular interest to Umalusi is not only the suitability, appropriateness, and sufficiency of internal structures, human and financial resources but more importantly, the internal processes through which the input factors are put to use in order to advance the institution's goals.
 - b. The standard of the institution's implementation of the curriculum in support of the qualification that it offers. In this regard, Umalusi evaluates the institution's process and output factors. This relates to, among other things, the extent to which the institution is effective in delivering or enacting the intended curriculum. The latter is linked to the qualification which the institution is accredited to offer. The effectiveness of the institution's curriculum delivery is determined through its own outputs (i.e., the quality of its assessment outcomes, attainment and retention rates, and the standard of site based assessments).

10. Accreditation is therefore a status that is granted to institutions found to meet Umalusi's accreditation criteria, as approved by the Minister of Higher Education and Training in May 2010 and confirmed through the approved reviewed policy in September 2018².
11. Compliant private colleges are accredited to offer the curriculum leading to a qualification on the GFETQSF for private colleges for a period of seven years.
12. Once accredited, private colleges are required to maintain their accreditation status. This will be ensured through their participation in Umalusi's post-accreditation monitoring.
13. Accredited private colleges are required to reapply for accreditation in their sixth year of accreditation so that their application can be evaluated before the expiry of the seven-year accreditation.

² Policy for the quality assurance of private colleges for Continuing Education and Training, offering qualifications registered on the General and Further Education and Training Qualifications Sub-framework and the accreditation of private assessment bodies (Government Gazette no. 41887).

CHAPTER 2

FEES CHARGED FOR SERVICES

14. Section 29(3) of the Constitution of the Republic of South Africa, 1996, provides for the right of every citizen to establish and maintain private educational institutions (including private colleges) at their own expense.
15. Section 13(1) (c) of the General and Further Education and Training Quality Assurance Act, 2001 provides for money received by the Council in respect of fees charged for services.
16. In order to be accredited by Umalusi and to maintain their accreditation status, private colleges are required to pay the relevant fees³.
17. The amount payable is determined by the applicable fee at the time that the service is provided.

Accreditation fees

18. These fees relate to:
 - a. Processing and evaluation of the applicant's intent to apply for accreditation;
 - b. Desktop evaluation of the applicant's self-evaluation report and portfolio of evidence;
 - c. Evaluation of outstanding evidence subsequently submitted in the desktop evaluation report;
 - d. The verification site visit;
 - e. Evaluation of evidence submitted in respect of compliance with the requirements for provisional accreditation or a window period to improve;

³ A schedule of fees is available on the Umalusi website (Open letter to applicants). The fees are revised by Council on an annual basis.

- f. Evaluation of evidence submitted in respect of compliance with the requirements for extension of accreditation in respect of private colleges accredited to offer the NATED Report 190/191 N1-N3 Engineering Studies during the phase out period of the programme.
- g. Biennial accreditation fee; which is levied at the beginning of every second financial year during the accreditation period.
- h. Monitoring fee for accredited institutions which fail to submit the required report and/or evidence in the monitoring process.
- i. Verification of change of site;
- j. Processing and evaluation of the private college's application for extension of scope;
- k. Consideration of an appeal;
- l. Reapplication after an outcome of no accreditation.

Quality promotion fees

- 19. Private education institutions may be required to pay a quality promotion fee for their participation in Umalusi's quality promotion initiatives. These are, among others, capacity building workshops / meetings, conferences, forums, and provincial workshops.
- 20. All fees levied are revised by Council on an annual basis. Fees are indicated on the "Open letter to candidates" on the Umalusi website.

Determination of financial obligations in respect of quality promotion, accreditation and post-accreditation fees

- 21. Quality assurance, accreditation and post-accreditation fees are shared by Umalusi and private colleges as follows:
 - (1) The applying private education institution pays for the professional services rendered in respect of:

- a. Screening of the Letter of Intent (LOI) to apply for accreditation;
 - b. Desktop evaluation of the applicant's self-evaluation report and portfolio of evidence;
 - c. Verification site visits;
 - d. Evaluation of evidence following a window period to improve or provisional accreditation;
 - e. Preparation of accreditation reports;
 - f. Biennial accreditation fees;
 - g. Evaluation of change of site applications;
 - h. Evaluation of Extension of Scope applications;
 - i. Evaluation of Extension of Accreditation applications (only applicable to private colleges accredited to offer the NATED Report 190/191 N1-N3 Engineering Studies programme whose seven year accreditation expires during the phasing out process);
 - j. Evaluation of reapplications;
 - k. Consideration of an appeal,
- (2) Umalusi carries the cost for:
- a. Setting up and maintaining a system for the quality assurance, accreditation and monitoring of private education institutions and private assessment bodies including all administration and data management.
 - b. The facilitation of processes of quality promotion, accreditation, and monitoring.

Factors determining fees

22. The following are considered in determining quality assurance, accreditation and monitoring fees for private colleges:
- a. The number of programmes and subjects for which the private college is applying for accreditation.

- b. The stage of the application process and the type of the application.

Payment of applicable fees

23. Payment must be made per step of the accreditation process. This means that payment for each step must be made before the next step can take place.
24. Applicants for accreditation are required to pay the applicable fees within ninety (90 days) of the date of each invoice raised per stage in the process. Failure to do so will result in the rejection of the application irrespective of the step at which the applicant is.
25. No step will be executed before all amounts the applicant is invoiced for are settled. This includes invoices for other services provided by Umalusi, such as certification fees.
26. Applicants will not be refunded once a service has been rendered.
27. The applications of private colleges that do not pay the required accreditation fees within the specified period will not be processed, the applications will be nullified, and the private college will not be refunded for fees already paid for services rendered within the accreditation process.
28. Should an institution wish to cancel their application, there will be no refund for steps in the accreditation process that have been executed.
29. Applicants whose invoices were not settled and their applications rejected, will be required to reapply for accreditation at full cost to the applicant. There will be no transfer of funds from previous applications that have been rejected after a service has been rendered. The applicant will not have access to documents already submitted in the case of the rejection of an application.
30. Accredited private colleges are required to pay the biennial accreditation fee.

Non-payment of accreditation fees

31. A private college's application will move to the next step in the accreditation process once the required fees have been paid in full.

32. Invoices issued for any step of the process must be settled within 90 days. Failure to do so will result in the rejection of the application irrespective of the step at which the application is.
33. If a private college does not pay the required fee for evaluation of evidence following a window period or provisional accreditation, no further communication and evidence will be considered. The window period or provisional accreditation will lapse at the end of the allocated period and the private college will be considered as not accredited.
34. Accreditation may be withdrawn following due process if a private college does not pay the required biennial accreditation fees.

CHAPTER 3

THE ACCREDITATION PROCESS

35. A private college must have a valid CIPC registration prior to seeking accreditation with Umalusi.
36. The application for accreditation must be in line with the premises at which the private college intends to operate.
37. Accreditation is directly linked to the CIPC number and physical address, therefore a separate application for accreditation is required for each separate CIPC registration number and physical address.
38. Only one private college may operate at a site. (A site is defined as a specific floor or floors in a multi-story building or a separate physical address.) A private college may not share premises and facilities with another college (public or private).
39. Umalusi accredits a private college to offer a qualification on the GFETQSF. Consequently, the private college must apply for accreditation for a complete qualification/programme (N1-N3 Engineering Studies / NC(V) Levels 2 – 4 / GETC: ABET Levels 1–4).
40. Colleges that are accredited to offer a programme/qualification in a face-to-face mode, may only offer the programme/qualification through this mode. Should they wish to offer the qualification through an online or distance education mode they must apply for accreditation to offer that mode of delivery.
41. Since accreditation attests to the **capacity** of a private college to offer a qualification on the GFETQSF, a private college seeking accreditation must:
 - a. offer the full curriculum for the qualification themselves, i.e., not make use of another provider to provide some or all subjects / instructional offerings within the qualification.
 - b. offer and apply for accreditation for a complete qualification.

- c. In the case of a college registered to operate as a physical college, enrol and offer tuition to enrolled learners on the registered physical premises by lecturers employed by that college to offer tuition on those premises. Only in the case of an officially declared state of disaster or state of emergency during which colleges may not function in a physical mode, may a college offer the curriculum using an online mode of delivery to students already registered at that college, by lecturers employed at that college.
- d. In the case of a private college registered to offer online / distance education, enrol and offer tuition to enrolled learners by lecturers employed by that college to offer tuition.

Steps in the Accreditation Process

42. The steps in the accreditation process are outlined as follows:

Table 2

1.	Online Expression of an intent to apply for accreditation (Letter of Intent – Lol).
2.	Upfront payment at each step of the process before access to that step is granted.
3.	Attendance by the college at a Quality Promotion meeting conducted by Umalusi. (Overview of the accreditation process and criteria and preparation for submission of the self-evaluation report)
4.	Self-evaluation report and uploading the required evidence (online). Umalusi considers submission of a self-evaluation report as submission of an application for accreditation.
5.	Desktop evaluation process by appointed evaluators. (Send back to the institution if it does not meet requirements. A fee will be payable on each re-submission.)
6.	Referral to the DHET for provisional registration as a private college and registration as an examination centre.

7.	Once registered, the college must provide a full cycle of teaching, learning and assessment, conduct an external examination at the end of the cycle, and analyse the results.
8.	Liaison between the college and Umalusi re payment and logistical arrangements for the site visit (email or telephonic communication).
9.	Payment of the site visit fee by the applicant.
10.	Verification site visit by the evaluation team (preceded by an online pre-site visit meeting to discuss arrangements). An Umalusi Assistant Manager, Manager, or Senior Manager may monitor the site visit.
11.	Consolidation and moderation of the desktop and site verification reports. Recommendation of accreditation decision by the evaluation team.
12.	Quality assurance of the accreditation report by Umalusi. Check for consistency in the reporting on evidence and allocated scores, comments, and the accreditation recommendation.
13.	Consideration of the report and an accreditation recommendation by the Accreditation Committee of Council (ACC).

	Scenario 1	Scenario 2	Scenario 3	Scenario 4
14.	The college does not meet the requirements for accreditation at the first presentation of the report to the ACC.	The college meets most, but not all, the minimum requirements at the presentation of the report to the ACC.	The college does not meet the minimum requirements after a window period to improve or provisional accreditation.	The college meets the minimum requirements for accreditation.
15.	Window period to improve	Two years provisional accreditation	No accreditation	Seven years accreditation

	Scenario 1	Scenario 2	Scenario 3	Scenario 4
16.	Feedback sent to the applicant.	Approval of the accreditation decision by the CEO on behalf of Umalusi Council.	Approval of the accreditation decision by the CEO on behalf of Umalusi Council.	Approval of the accreditation decision by the CEO on behalf of Umalusi Council.
17.	The college is advised of areas of non-compliance and the time period within which to meet the minimum requirements for accreditation. The DHET is notified of the outcome.	Feedback sent to the applicant. The college is advised of areas of non-compliance and the time period within which to meet the minimum requirements for accreditation. The DHET is notified of the outcome.	Feedback sent to the applicant. The DHET is notified of the outcome.	Feedback sent to the applicant. The DHET is notified of the outcome.
18.	College to <ul style="list-style-type: none"> • Work on the areas needing improvement • Maintain areas where they did meet the minimum requirements • Pay the required fee for follow-up evaluation by the specified date; 	College to <ul style="list-style-type: none"> • Work on the areas needing improvement • Maintain areas where they did meet the minimum requirements • Pay the required fee for follow-up evaluation by the specified date; 	The college may reapply for accreditation to offer the GETC: ABET or NC(V) programme/s. (All fees are payable for the reapplication and new evidence submitted and considered). OR	Post-accreditation monitoring and Payment of the biennial accreditation fee. The college to reapply for accreditation in year six of the seven year

	Scenario 1	Scenario 2	Scenario 3	Scenario 4
	<ul style="list-style-type: none"> Where necessary, undergo a site visit (announced or unannounced⁴) to verify the implementation of the minimum requirements for accreditation. 	<ul style="list-style-type: none"> Where necessary, undergo a site visit (announced or unannounced⁴) to verify the implementation of the minimum requirements for accreditation. 	<p>The college may appeal the accreditation outcome. (Appeal fee payable; no new evidence considered).</p>	accreditation.
19.	Back to step 11.	Back to step 11.		

Roles, Responsibilities and Processes

43. The role of Umalusi officials in each process is indicated in *Table 3* below.

Table 3

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
1.	On-line application – Letter of intent to apply for accreditation (LOI) and LOI payment	Finance Unit	<ul style="list-style-type: none"> Verify payment of LOI fees.
		E&A Assistant Manager	<ul style="list-style-type: none"> Screen and evaluate LOI. Accept or reject LOI or send back for further information. Applications from providers who do not fall within Umalusi's quality assurance mandate will be rejected. Feedback from the Assistant Manager(s) is sent to the private college automatically by the online system, indicating acceptance of the

⁴ All officials conducting unannounced site visits will have letters granting them authorisation to conduct the site visits and contact details of officials at Umalusi to verify the authenticity of the officials conducting the unannounced site visit.

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			LOI or the reason for the LOI being rejected or sent back requesting further information.
2.	Quality Promotion Meetings	Manager Assistant Managers	<ul style="list-style-type: none"> ▪ Compulsory Quality Promotion (QP) Meetings are conducted online with providers to explain the accreditation process and criteria and provide guidelines for the self-evaluation process before colleges can submit their self-evaluation report and supporting evidence.
3.	Completion and submission of Self-Evaluation instrument and supporting evidence, and payment	Finance Unit	<ul style="list-style-type: none"> ▪ Invoice and verify payment for the self-evaluation process.
		Manager Assistant Managers Admin Assistants	<ul style="list-style-type: none"> ▪ The self-evaluation instrument focuses on: <ul style="list-style-type: none"> a. compliance criteria; and b. the quality/effectiveness of teaching and learning/ curriculum delivery); ▪ The submitted documents are screened by Assistant Managers and/or Admin Assistants; ▪ incomplete submissions are rejected for the applicant to provide further evidence.
4.	Evaluation of self-evaluation reports	Manager Assistant Managers	<ul style="list-style-type: none"> ▪ Train desktop evaluators and subject specialists; ▪ Allocate Desktop Evaluators within 7 days of the college submitting; ▪ Allocate Subject Specialists once the site visit deployments are approved (at least two subjects per programme); ▪ Send back unsatisfactory self-

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			<p>evaluation submissions to colleges - a maximum of two times for correction at the relevant fee for resubmission.</p> <ul style="list-style-type: none"> ▪ Should the evidence still not be satisfactory on the third submission, the application must be rejected. The college will be required to start the process from the beginning and pay all the related costs.
		Evaluators Subject Specialists	<ul style="list-style-type: none"> ▪ Conduct desktop evaluation to determine the relevance, appropriateness, sufficiency and quality of compliance evidence provided by the applicants; ▪ Develop desktop evaluation reports guided by an evaluation guideline which provides guidelines in making professional judgements.
5.	Referral to the DHET	E&M and E&V Assistant Managers, Managers, and E&A Senior Manager E&V Admin Assistant E&A Senior Administrator	<ul style="list-style-type: none"> ▪ The E&M Assistant Manager develops a list of colleges that have satisfactorily completed the self-evaluation process. ▪ The list is provided to the Assistant Manager in the E&V sub-unit responsible for referral to the DHET. ▪ Letters to the DHET Registration Directorate and the providers are prepared. ▪ On approval by the Senior Manager, the letters are sent to the DHET by the Senior Administrator. ▪ Individual letters are sent to each college that is referred to the DHET by the admin assistant in the

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			<p>Evaluation and Verification sub-unit.</p> <ul style="list-style-type: none"> ▪ DHET to inform Umalusi of colleges that they have provisionally registered.
6.	Site verification visit and payment	Finance Unit	<ul style="list-style-type: none"> ▪ Verify payment for site visit
		Private College	<ul style="list-style-type: none"> ▪ Advise Umalusi that the college is registered to offer the qualification and has conducted a full academic cycle of teaching and assessment, including the conduct of a national examination, and analysed the results. ▪ Raise an invoice on the online system and make payment for the site visit
		E&V Assistant Managers; Admin Assistants	<p>Planning</p> <ul style="list-style-type: none"> ▪ Plan and Coordinate site visits and prepare the team of site evaluators; ▪ Send the following documents to the college before the verification site visit is conducted: <ul style="list-style-type: none"> a. Letter / email informing the college about the site visit. b. The draft programme for the site visit; c. The names and profiles of the possible team of evaluators; d. Site verification guideline documents. e. Letter to confirm acceptance of the site visit. ▪ Take the following into account in planning the site visits: <ul style="list-style-type: none"> a. The site visits are conducted on one day.

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			<p>b. The main purpose of the site visit is to verify implementation of the evidence submitted during the desktop evaluation process.</p> <p>c. Site verification covers all criteria and at least two subjects per programme/qualification</p> <p>d. The evaluation team consists of evaluators, and subject specialists. Team coordinators may accompany the evaluators and subject specialists.</p>
		<p>E&V Assistant Managers; Admin Assistants Evaluators Subject Specialists</p>	<p>The Site Visit</p> <p>The activities during the site verification visit are as follows:</p> <p>a. Focus group interviews. This involves interviews with the college Management Team, the staff, and students (where applicable). The interviews are intended for the evaluation team to triangulate observations and judgements made during the desktop evaluation and site verification processes.</p> <p>b. Verification of implementation of evidence. This relates to verification of evidence submitted by the applicant as part of their self-evaluation submission. It includes verification of staff qualifications and SACE registration, and implementation of Site Based Assessment; as well as the effectiveness of teaching and learning; and</p>

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			<p>c. Site inspection of premises and facilities. This activity is intended for the evaluation team to verify the extent to which the college's premises and facilities comply with health and safety regulations and standards; the resources as stipulated in the curriculum guidelines for subjects with a practical component and the extent to which the premises and facilities are conducive to safe, effective teaching and learning.</p> <p>d. Evaluators and subject specialists develop site verification reports, guided by an evaluation guideline which provides guidelines in making professional judgements.</p>
		Manager Assistant Manager Admin Assistants Senior Manager	<p>Unannounced site visits</p> <p>Umalusi may send Umalusi officials to conduct unannounced site visits as and when required. The officials must have letters granting them authorisation to conduct the site visits.</p>
		E&V Manager and Assistant Managers	<p>Evidence submitted after a site visit</p> <p>a. Evidence submitted subsequent to a site visit will only be considered up to the sitting of the Accreditation Committee of Council if it does not require on-site verification.</p> <p>b. Evidence received after the start of the ACC sitting, or after the site visit and before the ACC sitting but requires on-site verification, will not be</p>

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			taken into account at that sitting, but may be considered at subsequent submissions should the college be granted an outcome of provisional accreditation or a window period to improve. Should a college be granted the outcome of no accreditation, they can either appeal the decision or reapply for accreditation.
7.	Consolidated Accreditation reports	Manager Assistant Managers Report Writers	<ul style="list-style-type: none"> ▪ Desktop and site visit reports are consolidated into one consolidated accreditation report with a recommendation on the outcome of the application for accreditation, based on the minimum indicators for accreditation decisions. ▪ The designated report writer develops the consolidated accreditation report. ▪ The sub-unit Manager / Assistant Manager moderates / quality assures the consolidated accreditation report and approves / rejects the recommendation; ▪ Approved reports are submitted to the Accreditation and Co-ordination sub-unit for quality assurance; ▪ Unapproved reports are returned to the designated report writer / assistant manager for reworking.
8.	Submission of the consolidated report with recommendations to the Accreditation and Co-	Evaluation and Verification Manager Assistant Manager	<ul style="list-style-type: none"> ▪ The sub-unit Manager / Assistant Managers ensure that the following electronic documents are available: <ul style="list-style-type: none"> ▪ Desktop evaluation reports

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
	ordination Sub-unit and Accreditation Committee of Council (ACC).	Accreditation and Co-ordination sub-unit staff	<ul style="list-style-type: none"> ▪ Site verification reports ▪ Consolidated accreditation report ▪ Tracking forms ▪ The consolidated accreditation report and supporting documents are submitted to the Accreditation and Co-ordination sub-unit
9.	<p>Accreditation recommendation by the Accreditation Committee of Council (ACC)</p> <ul style="list-style-type: none"> ▪ 7 years accreditation ▪ 2 years provisional accreditation ▪ Window period to improve ▪ No accreditation ▪ Deferral (back to the Accreditation and Co-ordination sub-unit) ▪ The ACC may use their discretion to grant a concession for provisional accreditation or a window period to improve. 	<p>Accreditation Committee of Council</p> <p>Accreditation and Co-ordination sub-unit</p> <p>E&A Senior Administrator</p>	<ul style="list-style-type: none"> ▪ The Accreditation Committee of Council is set up to consider the recommendations of the evaluation team and verify applications for accreditation and reports and make recommendations on the outcome of the accreditation application to the Chief Executive Officer (CEO). ▪ In reviewing the evaluation team's recommendation, the ACC considers, among other things: <ul style="list-style-type: none"> ▪ Consistencies in respect of allocated scores and motivations provided on each accreditation report; and ▪ General recommendation for accreditation and its consistency with allocated scores and motivations provided for each accreditation report. ▪ In cases where the ACC is concerned about aspects of the accreditation report, the report is deferred to the Accreditation and Co-ordination sub-unit for the requisite improvement. ▪ The A&C sub-unit records

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			recommendations of the ACC.
10.	Tracking forms	Assistant Managers Accreditation & Coordination Manager and Assistant Managers	<ul style="list-style-type: none"> Tracking forms contain a record of all the accreditation processes followed for a particular application, and a summary of the extent to which the institution meets the accreditation criteria. <p>Tracking forms are signed by the Chair of the ACC meeting in which the recommendation on the outcome of the application was made, as well as the CEO or E&A Senior Manager.</p>
11.	<p>Approval by the CEO on behalf of Council</p> <ul style="list-style-type: none"> 7 years accreditation 2 years provisional accreditation No accreditation (post the window period to improve) 	Accreditation and Co-ordination sub-unit Senior Manager CEO	<p>In considering the ACC's accreditation recommendations, the CEO takes into consideration the following:</p> <ul style="list-style-type: none"> Whether the Chairperson of the ACC has signed all the tracking forms reflecting the various recommendations for accreditation; <ul style="list-style-type: none"> Consistencies on the tracking forms; and Recommendations for accreditation and related motivations. In cases where the CEO is concerned about the quality and substance of the tracking forms, they are referred to the Accreditation and Co-ordination sub-unit for the requisite improvement.
12.	Correspondence sent to colleges for which the ACC recommends a window period to improve.	Accreditation & Coordination sub-unit staff Senior Manager	<ul style="list-style-type: none"> Letter and feedback form indicating the areas where the college was found not to be compliant, the date by which the minimum requirements for accreditation must be met, and

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			<p>the date by which payment for the evaluation must be made.</p> <ul style="list-style-type: none"> ▪ Letters are signed by the Senior Manager. ▪ The letters are emailed to the colleges and sent by courier to the physical address on record.
13.	Correspondence sent to colleges for an outcome of seven years accreditation, two years provisional accreditation, or no accreditation.	<p>CEO</p> <p>Senior Manager: E&A</p> <p>Accreditation and Co-ordination sub-unit</p>	<p>No accreditation:</p> <ul style="list-style-type: none"> ▪ No accreditation letter with feedback report on requirements for accreditation that were not met. <p>2 years provisional accreditation:</p> <ul style="list-style-type: none"> • Provisional accreditation letter • A feedback report indicating the areas in which the institution did not meet the minimum requirements for accreditation and the timeline by which the college is required to meet all the minimum requirements for accreditation and pay the required fee for the follow-up evaluation. <p>7 years accreditation:</p> <ul style="list-style-type: none"> • Accreditation letter • A feedback report indicating recommendations / areas of improvement needed (where applicable): • A certificate bearing the CEO's signature is issued to the college at / following an accreditation certificate presentation ceremony.

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
14.	Monitoring of accredited private colleges	E&M sub-unit A&C sub-unit Senior Manager	<ul style="list-style-type: none"> ▪ Differentiated monitoring for accredited providers. ▪ Monitored institutions are required to submit a completed monitoring instrument and accompanying evidence. ▪ The report and supporting evidence are evaluated and a report completed indicating the level of compliance to the core criteria. ▪ The E&M sub-unit submits the moderated monitoring reports to the A&C sub-unit. ▪ Recommendations on notice of intent to withdraw accreditation are presented to the IAC. ▪ Recommendations on continued accreditation and final notice of intent to withdraw accreditation are presented to the ACC. ▪ Letters based on recommendations are generated by the A&C sub-unit. ▪ The E&A Senior Manager signs the letters for continued accreditation and the first notice of intent to withdraw accreditation. ▪ Final notice of intent to withdraw accreditation and withdrawal of accreditation letters are for signature by the CEO.
15.	Extension of Scope	Finance unit	<ul style="list-style-type: none"> ▪ Verification of payment for extension of scope
		Evaluation and Monitoring sub-unit	<ul style="list-style-type: none"> ▪ Lol ▪ Attendance of a QP meeting

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
		Assistant Managers and Manager	<ul style="list-style-type: none"> ▪ Submission of a desktop self-evaluation report. ▪ Desktop evaluation of the self-evaluation report. ▪ Verification site visit ▪ Consolidation of the desktop and site visit reports into an extension of scope report. ▪ Submission of the report to the ACC for a recommendation on the outcome of the application.
16.	Change of name / Change of site	<p>Evaluation and Monitoring sub-unit Assistant Managers and Manager</p> <p>Evaluation and Verification sub-unit Assistant Managers and Manager</p>	<ul style="list-style-type: none"> ▪ The E&M sub-unit prepares the reports on change of site and change of name of accredited institutions and presents them to the IAC and then the ACC. ▪ Change of site and change of name applications received prior to the college being accredited are handled by the E&V sub-unit.
17.	Internal review process	<p>E&V sub-unit</p> <p>Internal Accreditation Committee (IAC)</p>	<ul style="list-style-type: none"> ▪ The E&V sub-unit prepares the reports on reviews, deferrals, and institutions recommended for no accreditation due to non-submission and/or non-payment and presents them to the IAC. ▪ Reports on the appeals submitted by institutions against the no accreditation decision are prepared and presented to the IAC by the E&V sub-unit. ▪ The IAC considers the information presented in the appeal and

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			<p>supporting evidence and makes a recommendation to the ACC.</p> <ul style="list-style-type: none"> Recommendations of the IAC and supporting reports are presented to the ACC for consideration.
18.	Appeal process (in the case where an institution requests an appeal of the “no accreditation” decision	Manager: E&V Manager: A&C IAC ACC AAC	<ul style="list-style-type: none"> Institutions have fifteen (15) working days from receipt of the accreditation outcome to lodge an appeal on the requisite appeal form and to pay the appeal fee⁵. An appeal must be based on evidence that was in place at the time of the decision, not measures that were subsequently put in place or intend to be put in place. The E&V manager investigates the reasons provided by the institution for the appeal. The findings of the investigation are presented to the IAC for a recommendation to the ACC. The recommendation of the IAC, together with the motivation for the recommendation, is presented to the ACC for consideration. If it is found that there are grounds for amending the decision, the ACC will rescind the original decision and make a new recommendation. If the ACC stands by the original decision and decides that there are no grounds to rescind or amend the

⁵ Applicable as from 1 April 2023. Prior to that date, 10 working days to submit an appeal on the requisite form.

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			<p>decision, the applicant will be informed accordingly.</p> <ul style="list-style-type: none"> ▪ The applicant is given 10 working days to indicate in writing whether they want the appeal to proceed to the Accreditation Appeals Committee or whether they accept the no accreditation decision. ▪ If the applicant indicates in writing within the specified time that they wish to lodge the appeal with the Accreditation Appeals Committee, the appeal is submitted to the Accreditation Appeals Committee for consideration at the next scheduled sitting of the committee. • The appeal fee will be refunded if the finding is in favour of the applicant.
19.	Improvement reports	<p>E&V sub-unit</p> <p>Contracted evaluators and subject specialists</p> <p>A&C sub-unit</p> <p>ACC</p>	<ul style="list-style-type: none"> ▪ Improvement reports are reports on the follow-up evaluation subsequent to a window period to improve or provisional accreditation. ▪ The E&V sub-unit prepares improvement reports with a recommendation on the outcome of the accreditation application based on the follow-up evaluation. ▪ Improvement reports are submitted to the A&C sub-unit for quality assurance. ▪ Improvement reports, together with evidence provided during the follow-up evaluation, are assigned to ACC members to report on during the ACC

	PROCESS	UMALUSI RESPONSIBILITY	ADMINISTRATIVE PROCESSES INVOLVED
			<p>meetings by the A&C sub-unit.</p> <ul style="list-style-type: none"> ▪ In reviewing the evaluation team's recommendation on the outcome of the application for accreditation, the ACC considers, among other things: <ul style="list-style-type: none"> ▪ Consistencies in respect of allocated scores and motivations provided on each improvement report; and ▪ General recommendation for accreditation and its consistency with allocated scores and motivations provided for each improvement report. ▪ In cases where the ACC is concerned about the aspects of the improvement report, the report is deferred to the Accreditation and Co-ordination sub-unit for the requisite improvement.

Level Descriptors

44. The rating scale used for evaluation of evidence is based on the following level descriptors:

Table 4

SCORE	RATING	EXPLANATION
1	Weak / not relevant / not compliant	The level of implementation and the sufficiency of evidence provided are inadequate to meet the required standard. The weaknesses are more than the strengths. Considerable improvement is required.
2	Not fully compliant	The level of implementation and the supporting evidence is adequate in most instances. Some evidence requirements must be improved to meet the minimum standard.
3	Fully compliant	The level of implementation and the supporting evidence meet the minimum standard.

Accreditation criteria

45. Accreditation decisions are based on the criteria as promulgated in the *Policy for the quality assurance of private colleges for Continuing Education and Training, offering qualifications registered on the General and Further Education and Training Qualifications Sub-framework and the accreditation of private assessment bodies*: 7 September 2018 (Government Gazette no. 41887.)

Table 5: Accreditation Criteria and Core Indicators

PRIVATE COLLEGES		
Criteria	Description in Policy	Core indicators for accreditation
Criterion 1	(i) Mission directed leadership and management which are concerned with-	<ul style="list-style-type: none"> The private college is registered as a company in terms of the CET Act; It has the capacity to offer a qualification that is registered on the

PRIVATE COLLEGES		
Criteria	Description in Policy	Core indicators for accreditation
Mission Directed Leadership and Management	<p>(aa) the attainment of the vision and mission as informed by-</p> <p>(aaa) its legal framework and context;</p> <p>(bbb) national priorities;</p> <p>(ccc) strategic leadership and effective governance structures and strategies; and</p> <p>(ddd) the effectiveness with which the qualification or part-qualification mix and provision is selected, planned, managed, quality assured and improved;</p> <p>(bb) the appropriate allocation of resources to ensure that the institution is viable and sustainable;</p> <p>(cc) a reflection of the institutional commitment to monitor and evaluate in order to improve quality; and</p> <p>(dd) the establishment of the required infrastructure and</p>	<p>GFETQSF;</p> <ul style="list-style-type: none"> • Its ethos promotes and is not in conflict with the values of the South African Constitution; • The college principal is professionally qualified in the education sector and registered with the South African Council of Educators (SACE). • The governance and academic structures provide strategic direction, and consult and communicate with all relevant stakeholders; • An active governance structure is in place; • The private college is provisionally registered/registered as a private college in line with the requirements of the CET Act; • The management of learner records is comprehensive, authentic and reliable; • The management establish the strategic direction of the college and ensure that the institution's vision and mission promote an ethos that is not in conflict with the South African constitution. • The Academic Head / Principal responsible for academics holds a professional teaching qualification and is SACE registered.

PRIVATE COLLEGES		
Criteria	Description in Policy	Core indicators for accreditation
	<p>processes to ensure quality provision.</p>	<ul style="list-style-type: none"> • Audited financial statements for the most recent financial year are available. • In the case of a group where the group has the same CIPC number there should be a budget for each separate college and the site's income and expenditure statement. • A current Health and Safety Certificate (not older than two years). Certificates issued by a private company must be accompanied by a report and evidence that the person who conducted the audit is registered/ accredited to do so by SAIOSH <p>Evidence of servicing of fire equipment (not older than twelve months). A certificate issued by the company servicing the fire extinguishers or the invoice and proof of payment regarding the servicing of the fire equipment.</p>
<p>Criterion 2</p> <p>Teaching, Learning and Training</p>	<p>(i) The private college is professionally staffed to support the qualifications or part-qualifications it offers.</p> <p>(ii) Learning and assessment are at the core of the enactment of the curriculum.</p> <p>(iii) The private college implements the curriculum and assessment requirements at the required standard and</p>	<ul style="list-style-type: none"> • The private college is sufficiently resourced and sustainable, has adequate teaching and learning resources, suitable facilities, premises, and human and financial resources and structures to manage the programmes offered and enhance the quality of teaching and learning • Teaching staff are suitably qualified, experienced and SACE registered.

PRIVATE COLLEGES

Criteria	Description in Policy	Core indicators for accreditation
	<p>in accordance with the directives, policy and regulation requirements of the qualifications or part-qualifications registered on the GFETQSF.</p> <p>(iv) The curriculum is enacted to reflect appropriate instructional approaches that support learning in respect of qualifications or part-qualifications the institution is accredited to offer.</p> <p>(v) Suitable learning programmes and materials in support of the qualifications or part-qualifications offered are developed.</p> <p>(vi) Teaching proficiency is increased through the development of appropriate pedagogy and methodology by means of staff development.</p>	<ul style="list-style-type: none"> • The teachers demonstrate capacity in the delivery of the qualification; • Curriculum requirements (including practical's) are implemented at the required standard; • There is evidence of staff training and development in line with the qualification applied for. • Monitoring of classroom / lesson delivery is conducted; • Appropriate instructional approaches are implemented; • Students/learners are satisfied with the teaching provided.
<p>Criterion 3</p> <p>Assessment and Results</p>	<p>(i) The private college manages and conducts internal continuous assessment of an acceptable standard and in line with directives, policies and regulations of the qualification and provides developmental feedback to learners.</p>	<ul style="list-style-type: none"> • The private college is registered as an examination centre with a public or accredited private assessment body; • The private college demonstrates capacity in the conduct and management of internal assessment and external examinations, and provides developmental feedback

PRIVATE COLLEGES		
Criteria	Description in Policy	Core indicators for accreditation
	<p>(ii) The private college is registered as an examination centre that undertakes external examinations in compliance with the directives, policies and regulations of Umalusi and the relevant qualification.</p> <p>(iii) Quantitative and qualitative data are used to track learner achievement and improve learner success.</p>	<p>and support to learners;</p> <ul style="list-style-type: none"> • The teachers demonstrate capacity in the conduct and development of ICASS / ISAT tasks that are of acceptable standards in accordance with Umalusi's directives and the regulations pertaining to the qualification; • The private college demonstrates alignment of records of learner achievement for ICASS / ISAT per level of the qualification / programme offered. • Appropriate processes (monitoring and moderation) are in place to ensure assessment instruments, are in line with the purpose and context of subject assessment requirements. • Assessment tasks are planned and analysed, and conform to the cognitive levels, number and types of assessments as indicated in the Subject Assessment Guidelines. • The registered examination centre undertakes external assessment in compliance with the national policy and regulations (with no irregularities).
<p>Criterion 4</p> <p>Learner Support</p>	<p>Learner support is evident through-</p> <p>(i) academic guidance and support; and career guidance and support.</p>	<ul style="list-style-type: none"> • The institution provides activities, programmes and services that meet the academic, cultural, moral, and physical progression of learners/students.

PRIVATE COLLEGES

Criteria	Description in Policy	Core indicators for accreditation
		<ul style="list-style-type: none"><li data-bbox="975 306 1501 383">• The institution must provide learner/student support.

Accreditation decisions

Seven years accreditation

46. A private college will be granted seven years accreditation if it meets all the minimum standards for accreditation (achieves level 3 in all the criteria). The college should demonstrate that it has the capacity to offer a qualification on the GFETQSF. This is demonstrated by meeting the minimum requirements as indicated in Table 5 above.
47. Eligible colleges will be granted accreditation for 7 years, subject to the following conditions:
 - a. For the duration of its accreditation, the institution must offer the qualification it is accredited to offer.
 - b. The accreditation of the institution pertains to the physical address as indicated in the accreditation letter.
 - c. The accreditation status is not transferrable to other sites, campuses or another private college.
 - d. The private college must pay the biennial accreditation fee on receipt of the invoice.
 - e. The college must participate in and meet the requirements of Umalusi's post-accreditation monitoring
 - f. The private college must continue to meet the accreditation criteria.
 - g. The institution must continuously improve and maintain its capacity to offer the programme/qualification and its standard of teaching and learning.
 - h. The college must participate in compulsory Umalusi information sessions, the details of which the college will be timeously advised.
 - i. The accreditation may be withdrawn with immediate effect if the private college:
 - i. is implicated in serious assessment and/or examination irregularities / malpractices.

- ii. registers learners receiving tuition at another college for examinations conducted at the accredited college.
- iii. uses the accreditation status to offer programmes for which it is not provisionally accredited.

Two years provisional accreditation

- 48. A private college will be granted provisional accreditation for two years if it achieves at least level 2 for each of the accreditation criteria as indicated in Table 5 above.
- 49. Private colleges granted this status must demonstrate compliance with the accreditation requirements before the expiry of their two-year provisional accreditation period. The provisional accreditation period commences on the date specified on the accreditation letter and terminates on the date indicated on the letter, the date by which the college must have met the requirements, failing which the status of the college will be reflected as not accredited and the DHET Registration Directorate will be informed accordingly.
- 50. Private colleges are required to pay the follow-up evaluation fee by the end of the first year of the two years provisional accreditation and submit the required evidence upon request by Umalusi to enable Umalusi to finalise the outcome in the second year of the provisional accreditation.
- 51. The provisional accreditation will lapse at the end of the two-year provisional accreditation, or with the outcome of the follow-up evaluation if sooner.
- 52. Private colleges are granted two years provisional accreditation subject to the following conditions
 - a. For the duration of its provisional accreditation period the institution must offer the qualification / programme.
 - b. The provisional accreditation of the institution pertains to the physical address as indicated in the provisional accreditation letter
 - c. The provisional accreditation may be withdrawn if the private college:
 - i. is implicated in serious assessment and/or examination irregularities / malpractices.

- ii. registers learners receiving tuition at another college for examinations conducted at the accredited college.
- iii. uses the accreditation status to offer programmes for which it is not provisionally accredited.

No Accreditation

53. The private college will not be granted accreditation if it fails to meet the minimum accreditation standards as outlined above i.e.,
- achieves level 1 in any of the criteria after being granted a “window period” to improve or
 - achieves level 1 or 2 in any of the criteria after provisional accreditation.
54. The private college may then reapply for accreditation, in which case all the relevant fees will apply.

Window Period

55. In accordance with the provisions of the Promotion of Administrative Justice Act, 2000, there must be due process in respect of all administrative decisions which may adversely or materially affect private colleges. In this regard, private colleges which fail to meet the requirements for accreditation (achieve level 1 in any of the criteria indicated in Table 5 will be granted a reasonable period (window period) within which to comply with the requirements for accreditation. At the expiry of this period, the ACC may affirm the accreditation of the private college or withdraw the accreditation as from the date specified by Council.

Deferral

56. Deferral will be granted if the report on the private college and/or the supporting documents do not provide sufficient information to inform the decision-making process. The report will be deferred to the Accreditation and Co-ordination sub-unit to ensure that adequate data is provided for the ACC to make an informed accreditation recommendation.

Review

57. A review refers to a report that was presented to the Accreditation Committee of Council and a recommendation was made by the ACC, but, during the ensuing quality assurance process, issues are noted which may lead to a different recommendation by the ACC. The report is then returned to the ACC with details of the findings. The ACC then considers the matters brought to their attention, and then either rescinds, amends, or upholds their original recommendation.

Concessions

58. The ACC may use its discretion to grant a concession for an institution to be granted provisional accreditation.
59. The ACC may extend the provisional accreditation outcome for private colleges where circumstances justify the need.

Appeal Process

60. An accreditation decision may be appealed through the formal appeals process established by Umalusi Council.
61. The basis for an appeal must be that the institution believes, and has evidence to support the claim, that an incorrect decision was made taking into account evidence that was presented at the time of the decision. Measures put in place after the evaluation do not constitute grounds for an appeal.
62. The procedure for consideration of an appeal is as follows from 1 April 2023:
 - a. An intent to appeal the no accreditation outcome is received from the institution within fifteen (15) working days of notification of the outcome.
 - b. The intent to appeal is recorded in the appeals register.
 - c. The requisite form for submission of an appeal and an invoice for the appeal fee is emailed to the institution within 2 working days of receiving the request.

- d. The institution must return the completed appeal form and proof of payment of the appeal fee within fifteen (15) working days of the date of notification of the outcome.
- e. The completed appeal form containing the reason for the appeal and supporting evidence submitted is brought to the attention of the relevant manager to investigate the matter.
- f. The relevant manager presents the appeal and findings to the Internal Accreditation Committee (IAC).
- g. The appeal and findings together with the recommendation of the IAC are presented to the Accreditation Committee of Council (ACC).
- h. The ACC considers the findings and the recommendations of the IAC, and either:
 - reviews their original decision, or
 - Stands by their original decision.
- i. The institution is advised of the decision of the ACC and must advise the A&C manager in writing within ten (10) working days if they intend to proceed with the appeal to the Accreditation Appeals Committee.
- j. If the institution wishes to proceed with the appeal, the appeal will be presented to the next scheduled sitting of the Accreditation Appeals Committee.
- k. The Accreditation Appeals Committee considers the evidence submitted by the appellant in support of their appeal and makes a recommendation to the Umalusi Executive Committee of Council (EXCO).
- l. The EXCO considers the appeal from the institution and the recommendation of the Accreditation Appeals Committee and makes a decision on the outcome of the appeal.
- m. The appellant is informed of the EXCO decision on the outcome of the appeal.
- n. If the finding is in favour of the appellant, the appeal fee is refunded to the appellant.

Notification to the Registrar

63. The DHET Registrar of private colleges (or his/her designated official) will be advised of the outcome of the accreditation application.

CHAPTER 4

Extension of scope

64. A private college granted seven years accreditation to offer the NC(V) may apply for an extension of scope to offer additional NC(V) programmes to a maximum of 3 additional programmes in any application. The cost will be determined per programme applied for.
65. A private college granted seven years accreditation to offer subjects within the GETC: ABET may apply for an extension of scope to offer additional subjects in that qualification.
66. A college may only apply for extension of scope up to their fourth year of accreditation. Thereafter the college may include the additional programmes/subjects in the reapplication.
67. The following process will apply
 - a. A letter of intent (Lol) to apply for extension of scope must be submitted.
 - b. The Lol process must determine whether the application for extension of scope falls within the parameters for extension of scope, and whether the institution continues to meet the minimum requirements in the programmes / subjects it is accredited to offer (a desktop evaluation process).
 - c. If an institution no longer meets the minimum requirements for accreditation, a notice of intent to withdraw accreditation must be issued. The extension of scope application may only proceed once the institution meets the minimum requirements for accreditation in the programme / subjects it is already accredited to offer.
 - d. A portfolio of evidence must be submitted in line with the requirements of the self-evaluation report pertaining to the extension of scope applied for.
 - e. The private college will be required to pay the fee pertaining to the desktop evaluation, site verification visit, and reporting on the evidence submitted in support of the application for extension of scope before the evaluation process commences.

- f. The evaluation, site verification and consolidated reporting process will be followed.
- g. A college must meet the all the accreditation criteria (including in those programmes / subjects already accredited to offer) for a private college to be granted extension of scope.
- h. The consolidated report will be submitted to the ACC for a decision on the accreditation status of the private college.
- i. The extension of scope will be linked to the college's existing accreditation status. The extension of scope becomes effective once recommended by the ACC and approved by the CEO on behalf of Council and will be included in the subsequent monitoring processes.
- j. The private college must be provisionally registered by the DHET to offer the additional programmes / subjects before it starts to offer them.

Change of ownership

- 68. Accreditation is not automatically transferred on change of ownership. A college must notify Umalusi within 14 days of the change.
- 69. A change of ownership involving a change in CIPC number necessitates a new application for accreditation at the applicable cost.
- 70. The CIPC document indicating change of directors must be submitted.
- 71. A change of ownership of an accredited private college is presented to the Accreditation Committee of Council for approval.

Change of site / premises

- 72. Accreditation / provisional accreditation is linked to a specific site. Therefore, the accreditation of a private college will lapse if the college changes site without approval from Umalusi.

73. A private college must apply for approval of a change of site within 14 days of the change of premises. The request for approval must be accompanied by evidence that the notification of the change of site has been submitted to the DHET.
74. After verification of payment of the required fee within the specified period, a site visit will be conducted to verify whether the new site meets all the health, safety, and resource requirements and that the private college continues to meet the minimum requirements for accreditation.
75. A recommendation on the continued accreditation for the private college to operate at the new site is presented to the Accreditation Committee of Council for approval.

Changes to a private college's application for accreditation

76. A private college that wishes to make changes to the programmes or subjects applied for in the initial application, must:
 - a. Notify Umalusi in writing on an official letterhead / email with the official college signature.
 - b. Pay the relevant fees.
77. The change must be requested by a director of the college as indicated on the CIPC document.
78. A change may only be made prior to referral to the DHET for provisional registration, i.e. up to the desktop evaluation stage.
79. Changes requested after referral to the DHET for provisional registration will not be accommodated until the college meets the requirements to apply for Extension of Scope.

Deferral of site visit by a private college

80. Umalusi will contact a private college to arrange a date for the site visit. Should a private college request a deferral of the site visit, the following conditions will apply:
 - a. The private college must submit the request for the deferral of the site visit in

writing not later than four (4) calendar weeks before the date of the proposed site visit.

- b. The private college may only submit **ONE** request for a deferral of a site visit.
- c. The deferral may not be for a period longer than 3 months from the original date that Umalusi proposed.
- d. Should the private college not be able to accommodate Umalusi within the three month period of the original date proposed by Umalusi, then the status of the college will be reported as “not compliant with Umalusi’s processes”. A delay by the college of more than 6 months will lead to the lapse of the application, with no refund of costs. The college will then have to re-apply for accreditation and pay all applicable costs.

Registration with the Department of Higher Education and Training

- 81. A private college that meets the minimum requirements at the desktop evaluation stage of the accreditation process is referred to the DHET for registration. Registration with the DHET as a private college to offer the programme / subjects is a pre-requisite for accreditation.
- 82. The desktop evaluation will remain valid for a period of 12 months from the date of referral to the DHET while the institution seeks registration with the DHET as a private college. Should the institution not secure provisional registration with the DHET during the 12-month period, the accreditation application will be terminated. The private college will then be required to start the accreditation application from the beginning at full cost to the college, should a new application for accreditation be lodged.
- 83. The 12-month period may be extended if the private college provides evidence that the delay in registration is due to the processes of the DHET and not due to issues related to the college.

Reapplication for accreditation

- 84. A private college that is deregistered by the DHET may only reapply for accreditation after the cooling off period as specified by the DHET.

85. A private college that receives an outcome of no accreditation may reapply for accreditation but may not enrol students for the qualification / programme until it is authorised to do so by the DHET.

Multiple sites

86. An application for accreditation pertains to a specific site. Should it be discovered at any point in the application that the college occupies more than one site, only the site approved by Umalusi and the DHET as the physical address for provision of the qualification will be considered for accreditation purposes. The college will have to apply for accreditation for each of the additional sites at the applicable cost.
87. Separate applications per site are required, even in the case where a head office manages all sites.
88. A private college may not use the accreditation of one site to advertise other, non-accredited sites or qualifications.

Continued offering of the qualification

89. A private college must offer the programmes / qualification for which it is accredited throughout the period of accreditation. Should a private college discontinue offering the programmes / qualification, the accreditation may be withdrawn after following due process.

Withdrawal from the accreditation process

90. Colleges that wish to withdraw their accreditation application or relinquish their accreditation status due to a change in the qualification offering, must inform the Evaluation and Accreditation unit in writing on a college letterhead. The letter must be signed by a director(s) of the company.
91. Colleges that do not pay the required fees within the specified period will be considered as having terminated their application for accreditation.

Withdrawal of accreditation

92. The *Policy for the quality assurance of private colleges for Continuing Education and Training, offering qualifications registered on the General and Further Education and Training Qualifications Sub-framework and the accreditation of private assessment bodies, 2018* (Government Gazette no. 41887) provides for Umalusi to withdraw its accreditation.
93. In withdrawing accreditation, Umalusi must follow due process as guided by the PAJA Act, 2000, and paragraphs 25(1), (2), (3) and (4) of the GENFETQA Act.
94. As per the above-mentioned policy (*Government Gazette no. 41887*), withdrawal of Umalusi's accreditation has implications on the registration status of a college. This is because legitimate private colleges are required to be registered by the DHET **and** accredited by Umalusi to offer qualifications on the GFETQSF.
95. Umalusi may decide to withdraw the accreditation if:
 - a. The accredited college fails to comply with accreditation / monitoring requirements; or
 - b. There are serious legitimate complaints from learners, parents, the DHET, assessment bodies, etc. that require investigation, or
 - c. The private college is implicated in serious examination and/or assessment irregularities; or
 - d. The college is de-registered by the DHET or
 - e. The college fails to pay the required accreditation fee.
96. Umalusi will notify the registrar of the decision to withdraw accreditation.

Procedure for withdrawal of accreditation

97. The processes and procedures for the withdrawal of accreditation are outlined in *Table 6* below.

Table 6: Withdrawal due to non-compliance with the requirements for accreditation

	Step in process	Structures involved	Recommended Output	Authority / Signatory
1	Notice of intent to withdraw accreditation	Assistant Manager responsible for Monitoring	Report highlighting areas of non-compliance	Assistant Manager & Manager responsible for monitoring
		IAC	Confirmation of the non-compliance. Recommendation of the stipulated period to comply. Guideline: <ul style="list-style-type: none"> ▪ No current Health and Safety certificate: 3 months ▪ Other requirements not met: 6 months ▪ Urgent matters: dependent on the risk – can be less than 3 months. 	Minutes of IAC meeting
		A&C	Letter to the institution outlining: <ul style="list-style-type: none"> ▪ Notice of intent to withdraw accreditation ▪ Nature and extent of the non-compliance ▪ The period within which the private education institution must comply. 	Senior Manager
2	Evaluation of the steps taken by the institution to remedy the non-compliance	Assistant Manager responsible for Monitoring	Report indicating how the institution has complied / not complied with the areas needing remediation within the specified time.	Assistant Manager & Manager responsible for monitoring
	2.1 Institution has remedied	IAC	Confirmation of the level of compliance.	Minutes of IAC meeting

	Step in process	Structures involved	Recommended Output	Authority / Signatory
	the areas of non-compliance	A&C	Letter to the institution affirming the accreditation.	Senior Manager
	2.2. Areas of non-compliance have not been remedied	IAC	Confirmation of the continued non-compliance; Recommendation to the ACC to proceed with the withdrawal of accreditation.	Minutes of IAC meeting
		ACC	Recommendation to withdraw accreditation as at a specified date. <ul style="list-style-type: none"> ▪ Serve final notice to the institution of administrative action to withdraw the accreditation of the institution at a specific date (end of academic year). ▪ Give the institution an opportunity to provide reasons in writing as to why the Council should not withdraw accreditation (30 days from date of notice). 	Minutes of ACC Chair of ACC (Tracking Form)
		A&C	Prepare a letter communicating the ACC recommendation to the private education institution.	Umalusi CEO
3	Evaluation of the reasons provided by the private education institution why accreditation	IAC	Recommendation on the evidence provided.	Minutes of IAC meeting
		ACC At the meeting after the	Consideration of the representation provided. Determine whether to confirm the withdrawal of the accreditation, or	ACC Minutes Chair of ACC (Tracking Form)

	Step in process	Structures involved	Recommended Output	Authority / Signatory
	should not be withdrawn	expiry of the date to provide reasons and prior to the intended date of withdrawal	confirm continued accreditation, or to give the institution an extended period to address the areas of non-compliance.	
A&C		If the accreditation is to be withdrawn: Notification to the Registrar (DHET) of the intent to withdraw accreditation and the date of the intended withdrawal (include a copy of the letter to the institution).	Umalusi CEO	
A&C		Letter to the private education institution confirming the approval by the CEO of the recommendation of the ACC.	Umalusi CEO	

98. The processes and procedures for the withdrawal of accreditation of a private college that has closed down or is no longer offering the qualification are outlined in *Table 7* below.

Table 7: College that has closed down or is no longer offering the qualification

	Step in process	Structures involved	Recommended Output	Authority / Signatory
1	Receipt of communication indicating that the institution has closed down or is	IAC	Recommendation to withdraw accreditation based on the evidence provided.	Minutes of IAC meeting
ACC		Consideration of the representation provided.	ACC Minutes Chair of ACC	

	Step in process	Structures involved	Recommended Output	Authority / Signatory
	no longer offering the qualification.		Confirm the withdrawal of the accreditation.	(Tracking Form)
		A&C	Notification to the Registrar (DHET) of the date of withdrawal (include a copy of the letter to the institution).	Umalusi CEO
		A&C	Letter to the private education institution confirming the approval by the CEO of the recommendation of the ACC.	Umalusi CEO
2	Withdrawal of accreditation	A&C	Update the MIS to reflect the accreditation status.	A&C Manager
			Follow processes to retrieve the accreditation certificate from the institution, including liaising with QCC to cancel the certificate.	A&C Manager

CHAPTER 5

Quality Promotion Sessions and Pre-site Visit meetings

99. Umalusi will conduct compulsory quality promotion meetings for unaccredited providers to provide support in the implementation and understanding of manuals and guidelines to meet the minimum accreditation criteria, and how evidence should be organised to facilitate the submission of the self-evaluation report.
100. Umalusi will conduct online pre-site visit meetings to discuss the requirements for successful site verification visits and how evidence should be organised to facilitate the smooth running of the site visit.

College Enquiries and support

101. Colleges may be supported telephonically or through an online platform by E&A unit staff members.
102. One-to-one support of the private colleges by Umalusi staff should take place only at Umalusi premises or online through scheduled meetings.
103. Communication regarding the accreditation process of a private college will be between Umalusi and the college, not through a third party.
104. The Umalusi "acceptance of gifts" policy will apply to the acceptance of gifts or any sort of benefit from a private college by any Umalusi staff/contract staff.

Record keeping

105. Secure, accurate records must be kept to ensure compliance with the Promotion of Administrative Justice Act, 2000, the Protection of Personal Information (POPI) Act, the Umalusi file plan, and to ensure an effective accreditation and monitoring system for private colleges.
106. As part of the accreditation and monitoring processes, the following reports are produced by the Evaluation and Accreditation unit.
 - a. Desktop evaluation reports

- b. Site verification reports
- c. Consolidated accreditation reports
- d. Improvement reports
- e. Extension of Scope reports
- f. Monitoring reports
- g. Tracking Forms
- h. Accreditation letters to Private colleges

Stakeholder Relations

107. The following activities are intended for the E&A unit to establish and maintain stakeholder relations:

- a. Meetings with officials from the Department of Higher Education and Training and private assessment bodies to discuss matters of common interest relating to the registration of private colleges as institutions of teaching and learning, registration of private colleges as examination centres, and accreditation of private colleges.
- b. Umalusi may meet with any organised private college association to discuss issues pertaining to the quality assurance/evaluation and accreditation of such private colleges.
- c. A conference, seminar, or forum may be hosted when the need arises.
- d. Any other meeting that may be initiated by the sub-unit and approved by the Senior Manager and/or Executive Manager.

Review of the Guideline document

108. This guideline shall be reviewed every two years and as and when the need arises.

APPROVAL

Approved by Dr MS Rakometsi: Umalusi Chief Executive Officer on 29 November 2022.