

Namibia

Namibia Qualifications Authority Act, 1996

## Regulations for the Accreditation of Persons, Institutions or Organisations, 2006

Government Notice 124 of 2006

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# Regulations for the Accreditation of Persons, Institutions or Organisations, 2006

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Republic of Namibia  
**Annotated Statutes**

**Namibia Qualifications Authority Act, 1996**

**Regulations for the Accreditation of  
Persons, Institutions or Organisations, 2006**

**Government Notice 124 of 2006**

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**The Government Notice which publishes these regulations notes that they were made on the recommendation of the Council of the National Qualifications Authority.**

**Part 1 – PRELIMINARY**

**1. Definitions**

In these regulations a word or expression to which a meaning has been given in the Act bears that meaning, and unless the context otherwise indicates–

“**accreditation**” means the formal status granted by the NQA under Section 13 of the Act and these regulations;

“**accredited body**” means a person, organisation or institution accredited by the NQA in terms of these regulations;

“**education services**” means the provision of structured teaching or learning programmes linked to accredited courses or the provision of assessments and the making of assessment decisions related to such courses;

“**applicant**” means a person who, or an organisation or institution which applies for accreditation or an accredited body which applies for re-accreditation or expansion of the scope of educational services in terms of these regulations;

“**certificate**” means a certificate of accreditation issued in terms of regulation 7, 15 and 22;

“**NQF**” means the National Qualifications Framework established by Regulations Setting up the National Qualifications Framework published in Government Notice No. 125 of 28 August 2006;

“**register**” means the register kept by the Council in terms of regulation 29;

“**scope of accreditation**” means the course or range of courses for which an applicant applies for accreditation and for which accreditation has been granted;

“**system for managing quality**” means any robust, coherent and consistent system of policies, procedures and review mechanisms that are relevant to stated goals and objectives that are themselves supported by relevant stakeholders and that are realistic in terms of the size, nature and character of the organisation responsible for the described system; and

“**the Act**” means the Namibia Qualifications Authority Act, 1996 (Act [No 29 of 1996](#)).

## 2. Application and scope of regulations

- (1) These regulations apply to persons seeking accreditation, re-accreditation or expansion of educational services and to accredited bodies.
- (2) An applicant-
  - (a) must demonstrate that he or she or it shall be responsible and accountable for the quality of a substantial portion of services offered if he or she or it is to be eligible for accreditation; and
  - (b) shall seek accreditation for a course or courses.

## Part 2 – ACCREDITATION

### 3. Application for accreditation

- (1) An application for accreditation as contemplated in section 13 of the Act must be made on Form A1 of Annexure A.
- (2) The application referred to in subregulation (1) shall be-
  - (a) accompanied by the information referred to in subregulation (3);
  - (b) accompanied by the fee specified in regulation 17; and
  - (c) submitted to the Director.
- (3) The applicant must submit or make available supporting evidence that the applicant has an appropriate system for managing quality that covers and meets the requirements and criteria set for the grant of accreditation set out in Annexure B.

### 4. Assessment of application

- (1) On receipt of complete application made under regulation 3 the Director shall refer it to the Council which may-
  - (a) require the staff of the NQA to evaluate the application, conduct such verification of the contents of the application as is deemed necessary, and report to the Council on the level of compliance with the criteria set for accreditation;
  - (b) in evaluating the application or verifying the contents of an application, enlist the assistance of such industry or subject experts as necessary to determine the capacity of the applicant to deliver the named education services.

- (2) Before enlisting the services of specific industry or subject experts as contemplated in subregulation (1)(b), the Council shall give the applicant an opportunity to consent to the involvement of such experts and such consent shall not be unreasonably withheld.
- (3) An accredited body has the right to check for factual accuracy any report, on the level of compliance with the criteria set for accreditation, prepared by the staff of the NQA, before the report is presented to the Council.

## 5. Consideration and grant of application

- (1) On receipt of any evaluation report made in terms of regulation 4, the Council shall consider the application and, subject to subregulation (2), grant accreditation, if it is satisfied that the applicant has the required capacity for the specified scope of education services to be accredited and it is likely that such capacity will be maintained or enhanced.
- (2) The Council-
  - (a) shall grant accreditation for a specified scope of education services for a period not exceeding three years;
  - (b) shall grant accreditation only for a specified scope and for the organisational features listed in the application and supporting materials;
  - (c) shall authorise the Director to issue a certificate of accreditation; and
  - (d) may grant accreditation subject to any conditions imposed by the Council limiting or restraining the provision of any or all education services listed in the scope of accreditation.

## 6. Refusal of application

If for any reason the Council refuses to grant an application for accreditation the Council shall furnish the applicant with written reasons for the refusal.

## 7. Issue of certificate and registration

- (1) The Director shall issue to the applicant a certificate of accreditation set out in Annexure C.
- (2) The period of accreditation granted shall be deemed to have commenced on the date of authorisation by the Council to issue such a certificate.
- (3) When issuing a certificate of accreditation the Director shall record the following information into the register:
  - (a) the legal name and trading name, if different, of the accredited body;
  - (b) the accreditation number allocated to that body;
  - (c) the date accreditation was granted;
  - (d) the period of accreditation granted and where necessary, the scheduled date for re-accreditation;
  - (e) the site for which accreditation has been granted;
  - (f) the scope of accreditation granted; and
  - (g) any accreditation conditions imposed by Council.
- (3) The Council shall publish or cause to be published in the *Gazette* all accreditations granted and registered by it and any additions made to the register in terms of this Part.

## **8. Certificate to be displayed**

- (1) An accredited body shall, at the premises or place where it carries on its business of providing educational services, display its certificate in a prominent place, readily accessible to learners and the public.
- (2) The current scope of accreditation covered by the certificate must be displayed in close proximity to the displayed certificate.

## **9. Accreditation fees**

- (1) An application for accreditation shall be accompanied by a non-refundable deposit fee set out in Item 1 of the Schedule to Annexure D and such a fee shall cover the initial check of the completeness of the application and its supporting material and administration.
- (2) Any time spent on evaluation or verification of the application as contemplated in regulation 4, in excess of that covered by the initial deposit, shall be charged at an hourly rate shown in Item 1 of the Schedule to Annexure D and this includes any time spent by any industry or subject experts called upon to verify the application details.
- (3) Applicants will be required to meet any fair and reasonable additional travel and accommodation costs incurred by the NQA or its advisors in any verification of the details of an application.
- (4) Additional costs incurred under subregulations (2) and (3) shall be invoiced to the applicant by the NQA at the conclusion of any quality assurance activity linked to the grant of accreditation.

## **10. Effect of non-payment of fees**

If an applicant or an accredited body owes any money in the form of fees to the NQA, the Council may refuse to process and consider an application made by that applicant or body or to issue a certificate to that applicant or body.

## **11. Annual fees**

Each accredited body shall, as from the date of the first issue of a certificate and on each subsequent anniversary of the issue of such certificate pay, to the NQA the annual fee set out in Item 4 of the Schedule to Annexure D.

# **Part 3 – RE-ACCREDITATION**

## **12. Application for re-accreditation**

- (1) An accredited body which wishes to be re-accredited shall, not later than at least three months before the expiry of the current accreditation, apply for re-accreditation to the NQA.
- (2) An application referred to in subregulation (1) shall be-
  - (a) made on Form A2 which is set out in Annexure A;
  - (b) accompanied by the information referred to in subregulation (3);
  - (c) accompanied by the fee specified in regulation 16; and
  - (d) submitted to the Director.
- (3) The information mentioned in subregulation (2)(b) comprises the results of any self-evaluation or internal audit activities conducted by the body itself and the result must show that-
  - (a) the accredited body continues to remain compliant with the criteria set for accreditation;



- (b) it has a system for managing quality that continues to be relevant and realistic;
- (c) remedies or improvements are planned or are being actioned to address any identified shortcomings, areas to be enhanced, or opportunities for improvement in relation to the criteria set for accreditation;
- (d) stated goals and objectives are being substantially realised; and
- (e) relevant stakeholders endorse or otherwise support any changes to goals, objectives, or the character of education services offered.

### 13. Assessment of application

- (1) On receipt of a complete application made under regulation 12 the Director shall refer it to the Council which shall subject the results of any self-evaluation or internal audit report to an audit conducted by staff of the NQA and any industry or subject persons deemed necessary to provide expert advice.
- (2) An audit referred to in subregulation (1) shall seek to verify the substance of any claims made in the self-evaluation or internal audit report and to verify the validity and rigour of any processes used to derive such claims.
- (3) Before enlisting the services of specific industry or subject experts as contemplated in subregulation (1), the Council shall give the applicant an opportunity to consent to the involvement of such experts and such consent shall not to be unreasonably withheld.
- (4) An accredited body has the right to check for factual accuracy any audit report prepared by the staff of the NQA before the report is presented to the Council.

### 14. Consideration of and grant of application

- (1) On receipt of any audit report made in terms of regulation 13 the Council shall consider the application and subject to subregulation (2), grant re-accreditation for a period not exceeding three years, if the Council is satisfied that the accredited body continues to meet the criteria set for accreditation and that the body is being effective in its provision of education services.
- (2) When granting re-accreditation the Council-
  - (a) shall authorise the Director to issue a new certificate of accreditation; and
  - (b) may impose any conditions limiting or restraining the provision of any or all education services listed in the scope of accreditation.
- (3) An existing accreditation does not expire if an application for re-accreditation has been lodged in accordance with regulation 12 and is being processed by the NQA at or before the date of the scheduled expiry.

### 15. Issue of certificate and registration

- (1) The Director shall issue to the applicant a certificate of accreditation set out Annexure C.
- (2) The period of accreditation granted shall be deemed to have commenced at the date of an authorisation by the Council to re-issue such a certificate.
- (3) The Council shall update or cause to be updated the details of the re-accreditation of the accredited body in the register of accredited bodies.
- (4) The Council shall publish or cause to be published in the *Gazette* all reaccreditations granted and registered by it and any changes made to the register on reaccreditation in terms of this Part.

## 16. Re-accreditation fees

- (1) An application for accreditation shall be accompanied by a non-refundable fee set out in Item 3 of the Schedule to Annexure D and such a fee shall cover the initial check of the completeness of the application and its supporting material and administration.
- (2) Any time spent on evaluation or verification of the application as contemplated in regulation 13 in excess of that covered by the initial fee shall be charged at an hourly rate shown in Item 3 of the Schedule to Annexure D and this includes any time spent by any industry or subject experts called upon to verify the application details.
- (3) Applicants are required to meet any fair and reasonable additional travel and accommodation costs incurred by the NQA or its advisors in any verification of the details of an application.

## 17. Effect of non-payment of fees

If an applicant or an accredited body owes any money in the form of fees to the NQA, the Council may-

- (a) refuse to process and consider an application made by that applicant or body or to issue a certificate to that applicant or body; or
- (b) subject to regulation 27, withdraw the accreditation granted to that applicant or accredited body.

## Part 4 – EXPANSION OF SCOPE OF ACCREDITATION

## 18. Application for expansion of scope

- (1) An accredited body which wishes to expand the scope of the education services covered by it shall apply for such expansion to the NQA.
- (2) An application referred to in subregulation (1) shall be-
  - (a) made on Form A3 which is set out in Annexure A;
  - (b) accompanied by the information referred to in subregulation (3);
  - (c) accompanied by the fee specified in regulation 23; and
  - (d) submitted to the Director.
- (3) The information referred to in subregulation (2)(b) consists of such supporting material as is necessary to demonstrate clearly that the system for establishing and managing the quality of education services offered has been suitably amended to ensure that the system remains both relevant and realistic and in compliance with the criteria set for accreditation.

## 19. When application for expansion can be made

- (1) An application for expanding the scope of accreditation shall be made if-
  - (a) additional courses are to be offered in a subject area not covered by the existing accreditation;
  - (b) additional courses are to be offered in a subject area at a level higher than that covered by an existing accreditation; or
  - (c) there is to be an addition to the delivery sites covered by an existing accreditation.
- (2) A application in terms of subregulation (1) may be made at the time of seeking re-accreditation or may be made at a time independently of a re-accreditation activity.

**[The phrase “A application” should be “An application” to be grammatically correct.]**

## 20. Assessment of application

- (1) On receipt of an application made under regulation 18 the Director shall refer it to the Council which may-
  - (a) require the staff of the NQA to evaluate the application, conduct such verification of the new details submitted to the Council as is deemed necessary, and report to the Council on the level of compliance with the criteria set for accreditation;
  - (b) in evaluating the application or verifying the new details, enlist the assistance of such industry or subject experts as necessary to determine the capacity of the applicant to deliver the named education services.
- (2) Before enlisting the services of specific industry or subject experts as contemplated in subregulation (1)(b), the Council must give the applicant an opportunity to consent to the involvement of such experts and such consent shall not to be unreasonably withheld.
- (3) An accredited body has the right to check for factual accuracy any report prepared by the staff of the NQA before any report is presented to the Council.

## 21. Consideration and grant of the application

- (1) On receipt of any report made in terms of regulation 20, the Council shall consider the application and, subject to subregulation (2), grant an expansion of scope of accreditation for a period not exceeding three years, if the Council is satisfied that the accredited body has the capacity to provide the new education services or expand its services to new sites.
- (2) When granting expansion of scope of accreditation, the Council-
  - (a) shall authorise the Director to issue a new certificate of accreditation; and
  - (b) may impose any conditions on any or all of the new education services granted in an expansion to accreditation or any education services covered by the accreditation of the applicant across any or all of its delivery sites.

## 22. Issue of certificate and registration

- (1) The Director shall issue to the applicant a certificate of accreditation set out in Annexure C.
- (2) The period of accreditation shall be deemed to have commenced upon the Council's authorisation to expand the coverage of the certificate.
- (3) The Council shall update or cause to be updated the details of the expansion to accreditation of the accredited body in the register of accredited bodies.
- (4) The Council shall publish or cause to be published in the *Gazette* all expansions to accreditations granted and registered by it and any changes made to the register on expansion to accreditation in terms of this Part.

## 23. Expansion of accreditation fees

- (1) Where consideration of an expansion of accreditation is carried out independently of an application seeking re-accreditation, the fees and charges payable shall be the same as for a new application for accreditation.
- (2) Where consideration of an expansion of accreditation is concurrent with the consideration of an application for re-accreditation, the fees and charges payable shall be included within the costs incurred in the re-granting of accreditation.

## 24. Effect of non-payment of fees

If an applicant or an accredited body owes any money in the form of fees to the NQA, the Council may-

- (a) refuse to process and consider an application made by that applicant or body or to issue a certificate to that applicant or body; or
- (b) subject to regulation 27, withdraw the accreditation granted to that applicant or accredited body.

[The word “accredited” is misspelt in the Government Gazette in both the introductory phrase of regulation 5 and in paragraph (b), as reproduced above.]

## Part 5 – GENERAL

## 25. Change of circumstances

- (1) An accredited body must immediately notify the NQA of its becoming aware of, or the occurrence of, any of the following circumstances to it:

- (a) a change in ownership;
- (b) a change in legal status;
- (c) a decision to cease operations;
- (d) a change in the location of any head office;
- (e) a change in the make up of the governing body;

[The word “make-up” appears in the Government Gazette without the requisite hyphen, as reproduced above.]

- (f) a change in senior management personnel;
  - (g) a change in funding sources;
  - (h) a change in any franchising or partnership arrangements;
  - (i) an increase or decrease in student numbers of more than 10% in any one year;
  - (j) a major change in the profile of the student body;
  - (k) a change of a delivery site;
  - (l) the opening of a new site outside of Namibia;
  - (m) a significant change in the mode of delivery of any course covered by an existing accreditation; or
  - (n) a change in the delivery method of any course.
- (2) On receiving such notification, the Council shall initiate such investigations as are necessary to determine the consequences of any change in terms of the accredited body continuing to meet the criteria for accreditation and for that purpose the Council may request the staff of the NQA to prepare a report for its consideration.
  - (3) At the conclusion of any investigation initiated and on receipt of a report prepared in terms of subregulation (2), the Council may-
    - (a) institute revocation proceedings as contemplated in regulation 27, either in whole or in part, of the accreditation granted to the accredited body;
    - (b) impose conditions or further conditions to the accreditation granted; or

- (c) allow the accreditation to continue until the next scheduled re-accreditation.
- (4) The Council shall update the relevant particulars on the register to reflect any new conditions imposed or any new details pertaining to the character of the accredited body.

## 26. Reporting to Council

- (1) Where accreditation has been granted for a period exceeding 12 months an accredited body shall furnish an annual report of its activities to the NQA within three months prior to the anniversary of the grant of accreditation to it.
- (2) The annual report submitted in terms of subregulation (1) shall provide-
  - (a) details of the current and projected financial position of the accredited body;
  - (b) details of major activities and achievements;
  - (c) details of major trends or challenges faced by the accredited body and the response taken to such trends or challenges; and
  - (d) an updated list of education services offered.

## 27. Revocation of accreditation

- (1) Accreditation may be revoked in whole or in part should the Council have good cause to believe that an accredited body-
  - (a) no longer meets the criteria set for accreditation;
  - (b) has failed to meet its financial obligations in terms of these regulations or the Act; or
  - (c) has failed to submit annual reports as required by regulation 26.
- (2) Before revoking an accreditation the Council shall write to the manager, person in charge or the governing body of the accredited body-
  - (a) notifying them that the Council has good cause to believe that all or any of the circumstances referred to in subregulation (1) exist in respect of that body;
  - (b) specifying the grounds constituting this belief;
  - (c) indicating the steps that must be taken for accreditation to remain valid; and
  - (d) inviting representations on the matter.
- (3) After considering any representations made to it, the Council may-
  - (a) re-confirm the accreditation until the next scheduled re-accreditation;
  - (b) re-confirm the accreditation with conditions imposed; or
  - (c) revoke the accreditation.
- (4) If accreditation is revoked or new conditions are imposed on the accreditation, the Council shall-
  - (a) update the register to reflect the revocation or new conditions; and
  - (b) publish such new information in the *Gazette*.
- (5) Where accreditation has been revoked, the accredited body must immediately return the certificate of accreditation to the NQA.
- (6) Where new conditions have been imposed as contemplated in subregulation 3(b), a suitably revised certificate of accreditation shall be issued to the accredited body.

- (7) Where an accredited body has its accreditation revoked, a new application for accreditation may not be made by the same body within two years of the decision to revoke the accreditation unless the Council accepts that it is in the national interest for an application to be received within this time period.

## **28. Powers to obtain information**

- (1) The NQA may, at any time and with the consent of an accredited body, enter the premises of the accredited body or seek such information as is necessary to ascertain whether the criteria for accreditation continue to be met.
- (2) Council members, staff of the NQA or any specialist personnel assisting with an authorised quality assurance activity conducted by the NQA may not disclose the contents of any documents or any details regarding the activities of the accredited body to any other party except where required to do so under the laws of Namibia.

## **29. Register**

The Council shall keep or cause to be kept a register wherein-

- (a) all the information required to be recorded or kept by the NQA under these regulations or under the Act; and
- (b) any information as may be determined by the Council, shall be recorded or kept.

## **30. Records**

When an accredited body voluntarily ceases to provide education services, or has its accreditation revoked by the Council under regulation 27, full and complete records of the attainment of recent and past learners shall be forwarded to the NQA.

## **31. Appeals to Minister**

- (1) An accredited body or an applicant aggrieved by the decision of the NQA made in terms of these regulations may, within 14 days of receipt of a decision of the NQA and in writing, appeal against that decision to the Minister.
- (2) An appeal shall contain the grounds for the appeal as well as any supporting documentation on which such an appeal is based.
- (3) The person appealing shall serve copies of the appeal on the NQA and on any other interested person and both shall have the right to reply to each ground of appeal raised and such reply shall also be served on the appellant.
- (4) The Minister shall consider the appeal as well as the reply and make a decision which is just and appropriate in the circumstances.

## **Annexure A**

### **(Forms A1 - A3)**

**[Editorial note: The forms have not been reproduced]**

## **Annexure B**

### **Requirements and criteria to be met for the grant of accreditation**

#### **Introduction**

In granting accreditation, the Council of the Namibia Qualifications Authority (NQA) must be assured that an applicant meets the standard of delivery of a course or courses and the assessment of the performance of people taking a course or courses set by the Authority.

The expected standard is set out in the NQA Standard for Accreditation. This Standard has three elements, each element being amplified through the statement of requirements and criteria that shall form the basis of determining any decision on the grant of accreditation.

#### **Standard for Accreditation**

Elements 1 and 2 must be met in order to become accredited. Element 3 is considered at the time of determining the re-accreditation of an accredited body.

The person, institution, or organisation:	
1.	Clearly states measurable goals and objectives, supported by relevant stakeholders, that are relevant to a specified range of education services for a specified cohort of learners in specified learning environments and contexts.
2.	<p>Has the necessary internal structures and systems to achieve the stated goals and objectives, where such structures and systems ensure:</p> <ul style="list-style-type: none"> <li>2.1 appropriate and adequate governance, operational and educational management, and quality management</li> <li>2.2 the design and documentation of appropriate and adequate courses</li> <li>2.3 fair, transparent and equitable access granted to learners to education and assessment services offered</li> <li>2.4 the recruitment, management and development of appropriate and adequate staff</li> <li>2.5 the provision of adequate and appropriate learning facilities and resources in physical contexts that are conducive to learning</li> <li>2.6 the consistent delivery of planned courses</li> <li>2.7 that learners are well informed, guided and supported throughout their learning</li> <li>2.8 fair, valid and consistent assessment of learner performance</li> <li>2.9 learner enrolment, progression and achievement records are safely maintained</li> <li>2.10 appropriate, adequate and ethical research is carried out in relation to degree-level courses and programmes (where applicable)</li> <li>2.11 the breadth and quality of learning opportunities are enhanced through well documented and soundly-based franchise and partnership arrangements (where applicable)</li> <li>2.12 the regular and robust review of the systems related to the above and the adoption of appropriate opportunities for improvement.</li> </ul>



3.	Substantially achieves, through the application of its internal structures and systems, stated goals and objectives and builds upon them.
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### **“Appropriate” and “adequate”**

Throughout the expression of the Standard for Accreditation, its elements, requirements and associated criteria, the terms “appropriate” and “adequate” are extensively used or implied.

In meeting the accreditation criteria, applicants must present evidence that they have met the requirements in a manner that is realistic to the type and nature of organisational structure that exists for them rather than a hypothetical, ‘norm-based’ organisational structure. Further, in meeting the accreditation criteria, the nature and range of education services will influence the manner in which the criteria are attained.

Thus, meeting the requirements and criteria must be in a manner that is “fit for a specified purpose in a specified context”. The information and evidence presented for Element 1 of the Standard has, therefore, a significant bearing on the manner in which the application will be considered.

In some circumstances, the contents of any submission relevant to Element 1 may render as irrelevant some of the requirements and criteria for the remaining Elements. If this is deemed to be so, the applicant should note in their application where they consider there to be an irrelevant criterion and give an explanation as to why they hold this view.

<b>1. Statement of goals and objectives</b>		
	<b>Requirements</b>	<b>Criteria</b>
1.	Statement of mission, strategic direction, goals and objectives	<p>a. The goals and objectives link to the overall mission and strategic direction of the provider and are related to education and/or training.</p> <p>b. The goals and objectives link to national, regional or local economic, social, cultural or technological needs.</p> <p>c. The goals and objectives are clear, focused, specific, measurable, auditable, realistic, achievable and time-bound.</p> <p>d. Methods for measuring achievement of the goals and objectives are valid.</p> <p>e. The goals and objectives have been approved by the governing body.</p> <p>f. Relevant stakeholders were consulted in determining goals and objectives and are supportive of them.</p>
2.	List of courses to be offered and/or assessed	<p>a. Courses are listed in terms of title, duration, level, mode of delivery, and qualification to be awarded.</p> <p>b. Courses are consistent with the statement of goals and objectives.</p>
3.	Statement of feasibility	<p>a. Feasibility is quantified through recent or updated studies, needs assessments, or business plans.</p>
4.	Statement of delivery sites	<p>a. Delivery sites are consistent with stated goals and objectives.</p>

		b. There is a clearly identified head office or main campus where the provider has or intends to have multiple delivery sites.
5.	Description of characteristics of expected learners for each course	a. Learner profiles are consistent with the nature and level of courses listed. b. Learner profiles demonstrate recognition of national access and equity policies and commitments. c. Learner profiles are consistent with stated goals and objectives.
6.	Description of nature of learning approach for each course	a. Pedagogical approach is consistent with nature of course and stated goals and objectives. b. Residential/live-in nature of any course is consistent with stated goals and objectives.

### 2.1 Governance and management requirements

	Requirements	Criteria
1.	The person, institution or organisation is a body corporate	a. Legal status in Namibia is current and substantiated through relevant documents. b. The trading name of the provider does not duplicate an existing provider and does not mislead as to the nature and scope of education services offered. c. The name and/or trading name of the provider does not offend, demean, defame, or discriminate against particular persons, groups or organisations. d. Information provided to learners and stakeholders

		regarding legal status is accurate.
2.	Description of governance structures	<p>a. The governance body includes persons of credibility and expertise across the fields of education and training, business management, and financial management.</p> <p>b. The governance body is inclusive of learner representation.</p> <p>c. Names of persons legally and financially responsible for the provider are the same as those listed in relevant Articles of Association (or similar).</p> <p>d. Named person(s):</p> <p>i. has/have not individually or collectively within the previous ten years been convicted without pardon within or outside of Namibia of a criminal offence and sentenced in a court of competent jurisdiction to imprisonment of six months or more without the option of a fine</p> <p>ii. has/have not been disqualified or suspended, being the holder of professional qualifications, from practising any profession, skill or trade in Namibia or any other country by order of a competent authority</p> <p>iii. has/have not been adjudged or otherwise become insolvent or bankrupt under any</p>

		<p>law in any country and has not been rehabilitated or discharged</p> <p>iv. has/have not made an assignment to, or arrangement or composition with creditors that has not been rescinded or set aside</p> <p>v. is/are of sound mind.</p> <p>e. Information about governance structures is accurate and accessible to learners and stakeholders.</p>
3.	Description of management structures	<p>a. An organogram shows the organisational structure and lines of authority and accountability as they exist in the provider.</p> <p>b. The organogram shows management positions that are realistic and relevant to the scope of education services offered.</p> <p>c. Senior managers or officers and their respective responsibilities are identified. The credentials of each person is commensurate with the requirements of their respective position.</p> <p>d. At least one principal officer or senior management position is assigned to a person capable of and able to effectively provide educational leadership. In the case of providers offering degree-level courses, a minimum of 25% of senior academic staff must hold a doctorate (or be actively be working towards this qualification).</p> <p>e. At least one principal officer or senior</p>

		<p>management position is assigned to a person capable of and able to effectively manage and report on the financial practices and positions.</p> <p>f. Job or role descriptions for senior managers or officers detail responsibilities, accountabilities and authorities and are comparable to public service positions of a similar scale.</p> <p>g. Multiple delivery sites are clearly accountable to a single management body, with clear lines of reporting and accountabilities between any sites and head office.</p> <p>h. Policy-making committees are named and their respective membership stated. Committee membership and function is consistent with the size and nature of the provider and the scope of its education services.</p> <p>i. Information about management and management structures is accurate and accessible to learners and stakeholders.</p>
4.	Proof of financial viability	<p>a. The most recent statement of accounts is provided showing, as a minimum:</p> <ul style="list-style-type: none"> <li>• financial position at balance date;</li> <li>• operating statement reflecting the revenue and expenses for the year;</li> <li>• statement of cash flows during the year;</li> <li>• statements of financial</li> </ul>

		<p>performance to be achieved;</p> <ul style="list-style-type: none"> <li>• statement of commitments;</li> <li>• statement of contingent liabilities;</li> <li>• statement of accounting policies.</li> </ul>
	b.	The Accounts fully and fairly show transactions, assets, liabilities and funds.
	c.	The Accounts are kept and presented in a form not inconsistent with that required by the Namibia Institute of Chartered Accountants in Namibia and/or the Auditor General.
	d.	The Accounts show that the provider is a 'going concern' being likely to be able to successfully continue its operations into the future. It is able to pay its debts as they become due in the normal course of business and the value of easily liquefied assets is greater than the value of current liabilities, including contingent liabilities.
	e.	Control of the provider is in the hands of the 'proprietors' and not in the hands of creditors. The Accounts show a positive owner's equity and relative stability in equity positions over the past 12 months.
	f.	Cash flows show that funds are directed to activities clearly related to teaching, learning and assessment.
	g.	Comparative figures are shown for the preceding year, estimates for the current year, and forecast targets for the next two years.

		<p>h. An accountant registered by a competent authority has vetted current and forecast accounts and budgets. There is attestation from that accountant that they have viewed the accounts and budgets and they are satisfied that they:</p> <ul style="list-style-type: none"> <li>• comply with accepted accounting policies and calculations;</li> <li>• have been compiled on the footing of the assumptions stated;</li> <li>• are presented on a basis consistent with accepted accounting procedures;</li> <li>• reflect sound financial management practices.</li> </ul> <p>i. Confirmation is given by the same accountant that:</p> <ul style="list-style-type: none"> <li>• forecast figures are consistent with information provided in business plans or similar documents and the last, audited, financial statements;</li> <li>• outcomes are realistic and achievable;</li> <li>• the evidence supporting the assumptions suggest the assumptions are a reasonable basis for any projected financial positions.</li> </ul> <p>j. An independent auditor has audited the Accounts for the previous year.</p>
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		<p>k. Sound instruments are in place to protect any assets, funds and any pre-paid fees and other payments made by learners.</p> <p>l. Fees and payment protection instruments fully secure the interests of the learners.</p>
5.	System for managing quality	<p>a. Management processes are linked to and directed towards the achievement of stated goals and objectives.</p> <p>b. A coherent and logical set of documented policies, procedures and review mechanisms is presented that is complete and covers the requirements for Accreditation; is current; understood by its users; reflects actual practice; and is fully implemented.</p> <p>c. The design of the system reflects the size, nature and complexity of the provider.</p> <p>d. The system clearly shows versions of policies and procedures, review and update dates, and is capable of tracking changes.</p> <p>e. The system is accessible to all staff in all sites as applicable.</p> <p>f. There is a planned and effective internal review process, inclusive of stakeholders, to monitor compliance of the system with the requirements for accreditation and the effectiveness of the system in producing planned results.</p>
6.	Statements of stakeholder support	<p>a. Statements of who the stakeholders are and how they were identified are provided.</p>

		<ul style="list-style-type: none"><li>b. The identified stakeholders are consistent with the scope of education services offered.</li><li>c. Statements of how stakeholders were included in and consulted on the determination of goals and objectives, course design, development and implementation are included and verified by supporting documentation.</li><li>d. Documented evidence of stakeholder support for the education services offered is provided.</li></ul>
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2.2 Course design and documentation requirements		
	Requirements	Criteria
1.	Documented processes for course design	<p>a. There is a standard process for developing courses that is capable of:</p> <ul style="list-style-type: none"> <li>identifying needs and standards to be achieved;</li> <li>developing and expressing outcomes of learning (profile of learning outcomes);</li> <li>identifying and expressing appropriate pedagogical approaches;</li> <li>identifying human, physical and learning resources required;</li> <li>developing detailed course structures, prescriptions and plans, and content;</li> <li>developing assessment plans and schedules;</li> <li>developing review and evaluation procedures.</li> </ul> <p>b. There is clear evidence that the standard process is utilised.</p> <p>c. Course design procedures demonstrate a clear and effective synergy between the provider and potential future 'employers' of any graduates, being inclusive of stakeholder input and consultation, with evidence that stakeholder views are incorporated into the courses designed.</p>

		d. Designed courses meet substantiated national, regional or local economic, social, cultural, and/or technological needs and align with international standards.
2.	Course statements for each course	<p>a. Course or programme descriptions or statements clearly state:</p> <ul style="list-style-type: none"> <li>• the rationale for the course;</li> <li>• the proposed outcomes of learning that will be achieved and the performance standards to be attained;</li> <li>• entry requirements;</li> <li>• the mode, sequence and weighting of teaching and learning methodologies;</li> <li>• the composition of the programme or course in terms of modules or significant learning activities;</li> <li>• key resources required;</li> <li>• assessment methodologies, and the mix and relative weighting of each methodology;</li> <li>• learner progression;</li> <li>• evaluation sources and methods.</li> </ul> <p>b. The course descriptions are sufficient to enable prospective learners to make informed decisions on the suitability of any course for their personal needs and goals.</p>

		<p>c. Publicity statements on the nature of a course, the expectations of and on learners, and any fees payable are comprehensive and are not misleading.</p> <p>d. Information contained in the course statements is not inconsistent with structural features or contents of the NQF.</p>
3.	Integration of any “off-site” learning or assessment activities	<p>a. Off-site and/or workplace components have a sound educational rationale linked to the learning outcomes of the relevant course(s).</p> <p>b. Written agreements between the parties to such components detail:</p> <ul style="list-style-type: none"> <li>• the objectives of the activity;</li> <li>• responsibilities of either party (inclusive of health and safety, and the monitoring and support of learners);</li> <li>• accountabilities and standards for the provision of any instruction or the conduct of any assessment;</li> <li>• names and contacts of all parties;</li> <li>• duration of any agreement.</li> </ul>
4.	Statements of articulation and cross-crediting between courses	<p>a. Articulation and cross-crediting arrangements between courses and with those of any other accredited provider enhance the progression of learners.</p> <p>b. Articulation and cross-crediting arrangements are consistent with the</p>

		content, delivery and attainment requirements of the relevant course.
5.	Statements of procedures for course review and evaluation	a. Policies and procedures for the review and evaluation of courses include and involve relevant industry experts, stakeholders, learners and staff and, where useful, recognised expertise from other recognised providers.
6.	Suitable courses linked to degree-level qualifications (where applicable)	<p>a. Courses emphasise general principles and basic knowledge as the basis for self-directed work and learning.</p> <p>b. Courses are structured to provide sound and balanced academic progression across the requirements for a qualification.</p> <p>c. Course and programme duration and composition are commensurate with internationally accepted definitions of “degree-level”.</p> <p>d. Courses and programmes provide an appropriate foundation for further study and research.</p>
<b>2.3 Entry and access by learners requirements</b>		
	<b>Requirements</b>	<b>Criteria</b>
1.	Documented policies for learner entry and selection	<p>a. There is a commitment and adherence to clear and transparent criteria for selecting learners.</p> <p>b. Entry policies and criteria do not represent unnecessary barriers for intending learners and do not unfairly discriminate.</p> <p>c. Entry policies and selection criteria and procedures optimise opportunities</p>

		<p>for people from under-represented groups in education and training to participate fully and have a realistic chance of success.</p> <p>d. Entry criteria optimise the enrolment of learners into courses in which they will have a reasonable chance of success.</p> <p>e. Entry policies optimise the recognition of a learner's prior learning and attainments.</p>
2.	Enrolment information	<p>a. Enrolment information is clear, complete, accurate, current and is not misleading.</p> <p>b. Learners are kept informed of the current status and outcome of their application.</p> <p>c. Information provided includes details of the full costs of the course, including all course-related costs (such as trips, class materials, etc) that may be incurred through the course.</p>
3.	Induction processes	<p>a. Learners are provided with clear and accurate information about course start dates, times, venues, materials requirements, and contact details.</p> <p>b. Induction material and processes familiarise learners with their new environment.</p> <p>c. Induction material and processes include lists of key contacts so learners know who to contact to discuss concerns or obtain further information.</p>
4.	Policies on withdrawals and refunds	<p>a. There are clear and accessible statements</p>

		<p>indicating the procedures to be followed when a learner withdraws from a course or when the provider cancels a course.</p> <p>b. There are clear and accessible statements on the level of refund of any fees paid by a learner or sponsor should a learner withdraw from a course or the course is cancelled before its completion.</p> <p>c. The procedures and level of refunds are fair and reasonable to the respective interests of both learner and provider.</p>
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2.4 Staff appointment and development		
	Requirements	Criteria
1.	Documented recruitment and selection processes	<p>a. The recruitment sources, processes and criteria are fair, valid and rigorous and are likely to secure persons with relevant competencies and experiences that are commensurate with the scope and level of education services offered.</p> <p>b. Statements of service include, as a minimum:</p> <ul style="list-style-type: none"> <li>• statement of duties; responsibilities and accountabilities;</li> <li>• subject-related and teaching/assessing qualifications (where applicable) and/or experience needed;</li> <li>• person specifications;</li> <li>• remuneration and allowances;</li> <li>• code of conduct requirements;</li> <li>• service conditions and expectations.</li> </ul> <p>c. Advertisements clearly reflect position descriptions for the position advertised.</p> <p>d. Selection criteria do not unfairly discriminate against some prospective applicants.</p> <p>e. Interview questions relate to the position and provide opportunities for persons to share information on their skills, knowledge and experience, and person qualities that are applicable to the position.</p>

		f. The procedures for recruitment and selection are adhered to and are effective.
2.	Employment of appropriate staff	<p>a. The structure and levels of professional (teaching) and administration (ancillary) staff is relevant and appropriate to the scope of services and the size and nature of the provider.</p> <p>b. The provider has staff with skills in the following areas:</p> <ul style="list-style-type: none"> <li>• teaching and subject knowledge;</li> <li>• assessment and moderation expertise;</li> <li>• educational management expertise;</li> <li>• quality management expertise;</li> <li>• student support skills;</li> <li>• financial and administration expertise;</li> <li>• research mentoring and monitoring (where degree-level programmes are offered).</li> </ul> <p>c. All professional staff have minimum qualifications and/or sector/industry/ work experiences that are consistent with the need to ensure the attainment of the types of qualifications to be awarded and are generally qualified one level higher than the qualification for which the course is intended. In the case of degree-level courses, the minimum</p>

		<p>qualification to be held is a Masters degree.</p> <p>d. Professional staff have qualifications and/or experiences stipulated by recognised stakeholder groups for the teaching and awarding of national qualifications.</p> <p>e. All administration staff have minimum qualifications that are consistent with the need to provide the level of support needed to ensure the smooth running of the provider and its courses, and the attainment of goals and objectives.</p> <p>f. Staff demonstrate a clear commitment to and interest in the learning and attainments of their learners.</p> <p>g. The sourcing of staff from any franchise or collaborative partner does not compromise the continuity of teaching and learning.</p>
3.	Fair conditions of employment	<p>a. The provider complies fully with current employment-related legislation regarding appointment, conditions of employment, health and safety, discipline, and dismissal requirements.</p> <p>b. There is an induction process that assists new staff become familiar with their new surroundings, organisational values, and policies and procedures.</p> <p>c. The provider acts as a “good employer” in regards to the health, welfare and ethical treatment of all staff.</p>

4.	Regular appraisal of staff performance	<ul style="list-style-type: none"> <li>a. Staff appraisal is based on an assessment of performance against relevant and transparent criteria and expectations.</li> <li>b. Appraisal is a regular though not burdensome activity.</li> <li>c. The appraisal process is fair and equitable.</li> <li>d. Appraisal is focused on the determination of successes and the identification of skills, knowledge and performance gaps that need closing.</li> <li>e. The appraisal process is well documented and enables outcomes to be actioned and monitored. Information on the process is clear, transparent and accessible to staff.</li> <li>f. The appraisal system is applicable to all staff.</li> <li>g. The performance appraisal system is followed as documented.</li> </ul>
5.	Commitment to staff development	<ul style="list-style-type: none"> <li>a. There are sufficient and realistic opportunities for staff to remedy any performance gaps.</li> <li>b. Staff development is adequately resourced and is consistent with the financial position of the provider.</li> <li>c. Staff development processes and priorities are responsive to the rate of knowledge and/or technological change in the subject areas taught and assessed, and ensures that the skills, knowledge and abilities of all staff remain current and relevant to their role and position.</li> </ul>

		d. Staff development opportunities are made available to all staff.
<b>2.5 Learning facilities, resources and contexts requirements</b>		
	<b>Requirements</b>	<b>Criteria</b>
1.	Adequate and appropriate buildings	<p>a. Evidence is given that the provider has regular legal rights and/or access to any sites and premises required to deliver the education services offered.</p> <p>b. Site plans show the current location of key buildings and services.</p> <p>c. Local authority zoning laws permit the conduct of the education services offered.</p> <p>d. Premises meet building, health, environment and safety regulations set by local and/or national authorities.</p> <p>e. Premises are clean and well maintained.</p> <p>f. Premises are sufficient for the type and range of education services offered and the number and profile of staff and learners.</p> <p>g. Premises are sufficient to meet any staff or learner residential demands (where applicable).</p>
2.	Adequate and appropriate facilities	<p>a. Library facilities have sufficient space to hold the resources and reader-seating volumes that are consistent with the type of courses offered and learner enrolments.</p> <p>b. Library facilities have sufficient texts and electronic search facilities to meet the demands of the education services offered</p>

		<p>and the demands made by staff and learners.</p> <p>c. Student amenities are consistent with enrolment numbers and learner profiles.</p> <p>d. Staff amenities are consistent with staff numbers.</p> <p>e. Specialist rooms and teaching facilities are sufficient for the number and type of courses offered, learner numbers and maximum capacity levels.</p> <p>f. All buildings and facilities are capable of accommodating the needs of persons with disabilities.</p> <p>g. There are sufficient operational ablution facilities for the number of staff and learners on site at any one time.</p> <p>h. The number, size and type of housing or accommodation units, where applicable, are sufficient to meet the numbers of staff and learners requiring such residences.</p> <p>i. The nature of any residences provides a standard of accommodation and comfort consistent with residences found in similar circumstances.</p>
3.	Adequate and appropriate teaching materials and equipment	<p>a. An Assets Register is maintained.</p> <p>b. Sufficient financial provision is made to provide for the acquisition and maintenance of equipment and specialist materials and equipment of an appropriate volume, form and currency that is</p>

		<p>relevant to the outcomes of learning being developed.</p> <p>c. Teaching materials and equipment is of a kind that matches that currently used in the industry settings relevant to the intended outcomes of each course.</p> <p>d. Teaching materials and equipment is of a kind, currency and volume relevant to the mode of delivery and enrolments for each course and is accessible at the time of need.</p> <p>e. The lease or loan of equipment and specialist materials is covered by agreements that ensure access and availability at the time of need.</p>
4.	Adequate and appropriate learning materials and equipment	<p>a. Textbook and learning materials acquisition, distribution and maintenance procedures are sufficient to meet the needs of staff, learners and the learning demands generated by the intended outcomes of each course.</p> <p>b. Learning materials and equipment are relevant to materials and equipment in current use in the industry setting relevant to the intended outcomes of the course.</p>
<b>2.6 Delivery of courses requirements</b>		
	<b>Requirements</b>	<b>Criteria</b>
1.	Transfer of subject and education and/or training expertise of staff into well developed instruction and facilitation of learning	<p>a. Teaching staff are aware of and responsive to the different learning styles of their learners, with a variety of learning and teaching techniques being</p>

		<p>used to meet the different needs of learners.</p> <p>b. Lessons or learning activities are well organised and prepared.</p> <p>c. Teaching staff are flexible in their approach to teaching and learning and are able to respond to different situations and contingencies as they arise.</p> <p>d. Teaching aids used are functional, interesting, and relevant to the application of the learning in the outside world.</p> <p>e. Courses delivered match those described in the relevant course statements.</p>
2.	Systematic review of courses	<p>a. There is a planned schedule of reviews of courses that is consistent with the size and nature of each course and the extent of knowledge and technology changes in the subject areas. (Degree level courses are normally expected to be reviewed every three years. Shorter courses may be reviewed on an annual basis).</p> <p>b. The review process includes a review of content, outcomes of learning, course structure, staffing requirements, physical resources required, attainment standards, and the overall management of the course.</p> <p>c. The review process is inclusive of learners and stakeholders. In the case of degree-level programmes, though not exclusively, the review must be inclusive of at least one senior and respected staff member of another, reputable provider offering a similar course.</p>



		<p>d. The tools for seeking learner and stakeholder feedback are user friendly and effective for the intended purpose.</p> <p>e. The views of learners and stakeholders are taken into account where this contributes to enhanced learning and the relevance of outcomes attained.</p>
<b>2.7 Learner guidance, welfare and support requirements</b>		
	<b>Requirements</b>	<b>Criteria</b>
1.	Written information for learners regarding the provider, courses, and learning.	<p>a. Information is provided on:</p> <ul style="list-style-type: none"> <li>• site layout and facilities;</li> <li>• staff and management structures;</li> <li>• governance structures and the involvement of learners;</li> <li>• courses and qualifications available, including academic regulations for each;</li> <li>• entry and selection criteria and processes;</li> <li>• total enrolment costs and the total costs of pursuing a course of study or training;</li> <li>• withdrawal and refund policies and procedures;</li> <li>• orientation or familiarisation processes;</li> <li>• pastoral care, course and career guidance,</li> </ul>

		<p>welfare and student support services;</p> <ul style="list-style-type: none"> <li>• health and safety requirements;</li> <li>• rules and regulations;</li> <li>• disciplinary procedures;</li> <li>• reassessment and assessment appeals procedures;</li> <li>• recognition of prior learning and credit transfer arrangements.</li> </ul> <p>b. Information and publicity materials are a current, true and accurate representation of the facts.</p> <p>c. Information and publicity materials are readily available and accessible to all learners at all delivery sites.</p>
2.	Guidance services to support learning.	<p>a. Academic and career support is available prior to and after enrolment, with appropriate access to support and guidance related to progress through a course being available.</p> <p>b. Academic and career support policies ensure that learners working in isolation from the principal learner body (eg, distance learners) receive the same level and quality of support and guidance.</p>
3.	Guidance and support services to support learner health and welfare.	<p>a. Policies and practice related to learner health and welfare recognise the provider's responsibilities to offer information and relevant assistance regarding:</p> <ul style="list-style-type: none"> <li>• Major health concerns (such</li> </ul>

		<p>as STDs and HIV/AIDS);</p> <ul style="list-style-type: none"> <li>• Citizenship and living skills.</li> </ul> <p>b. Health and welfare support policies ensure that learners working in isolation from the principal learner body receive the same level and quality of support and guidance.</p>
4.	Complaints and appeals procedures.	<p>a. Complaints procedures are documented in terms of processes, obligations, and any limits applicable to all parties.</p> <p>b. Disciplinary procedures are clearly outlined and make a distinction between minor and major transgressions or misconducts. Steps involved in the process are clearly outlined.</p> <p>c. Rules, regulations and grievance procedures are likely to promote harmony and instill the conduct of good behaviour. The procedures respect the rights of individuals to complain and seek redress on reasonable grounds.</p> <p>d. Procedures for reassessment are clear, detailed, transparent and unambiguous, and treat learners fairly.</p> <p>e. Appeals against assessment, or any other decision, allow for the inclusion of a party capable of independent and objective input.</p>
<b>2.8 Assessment of learner performance requirements</b>		
	<b>Requirements</b>	<b>Criteria</b>

1.	Documented assessment plans	<p>a. Assessment plans and associated instruments (eg tests, marking schemes, etc) are developed for all courses.</p> <p>b. Assessment plans clearly detail:</p> <ul style="list-style-type: none"> <li>• the assessment process and methodologies to be used;</li> <li>• dates and times of assessment and other related regulations regarding the conduct of the assessment;</li> <li>• the criteria to be used to determine 'success';</li> <li>• appeals procedures.</li> </ul> <p>c. Assessment plans and associated instruments are subject to internal and, where necessary, external review and moderation before use.</p>
2.	Adherence to principles governing good assessment	<p>a. Assessment uses methodologies that are:</p> <ul style="list-style-type: none"> <li>• appropriate to the abilities being assessed;</li> <li>• fair to all candidates and do not disadvantage, hinder, or otherwise limit opportunities for candidates to demonstrate or provide evidence of their ability;</li> <li>• integrated into learning, training, or workplace activities;</li> <li>• manageable, straightforward, readily arranged,</li> </ul>

		cost effective and unobtrusive (where possible) to other activities.
	b.	<p>Evidence used to make decisions is:</p> <ul style="list-style-type: none"> <li>• valid and relates to the relevant outcomes of learning and performance expectations;</li> <li>• direct and sourced from activities that are commensurate with activities associated with the outcomes being assessed;</li> <li>• authentic and attributed to each individual candidate without undue external influences;</li> <li>• sufficient, clearly demonstrating that all criteria and performance contexts have been met and that performance was not the result of a chance event.</li> </ul>
	c.	<p>Assessment decisions are:</p> <ul style="list-style-type: none"> <li>• based on available and suitable evidence;</li> <li>• based on clear, unambiguous and transparent criteria that reflect stakeholder-endorsed standards of expected performance;</li> <li>• consistent over time and across assessors faced with the same evidence.</li> </ul>
	d.	Assessment processes are:

		<ul style="list-style-type: none"> <li>• systematic, with planning and recording being of sufficient rigour to enhance and promote fairness to all candidates;</li> <li>• open and transparent, and are inclusive of the involvement of candidates in planning the assessment and evidence gathering processes where this is reasonable and feasible;</li> <li>• consistently applied by all assessors and over time.</li> </ul> <p>e. Assessment is carried out by those with proven knowledge, skill and expertise to conduct assessments and make sound assessment decisions.</p>
3.	Comprehensive internal moderation systems	<p>a. There is a planned and systematic process to identify what must be internally moderated, when, and the size of any samples used in the moderation process.</p> <p>b. Moderation systems look to enhance the quality of assessment processes and instruments, and the quality of assessment outcomes.</p> <p>c. Assessment materials are updated as a result of internal moderation findings.</p> <p>d. Assessor skills and expertise are managed as a result of any internal moderation findings.</p>

4.	Compliance with any national or inter-provider assessment systems (external moderation)	<p>a. External moderation activities and responsibilities are complied with fully.</p> <p>b. Sufficient resources and financial allocations are made available to ensure obligations to external moderation requirements are met.</p> <p>c. Systems are in place to ensure that any candidate work or other assessment materials required for external moderation purposes is secured until required, thereafter it is returned to the candidate or otherwise disposed of.</p> <p>d. Findings from external moderation activities are used to enhance assessment process and practice.</p>
<b>2.9 Learner records and reporting requirements</b>		
1.	Current and secured learner enrolment records	<p>a. Enrolment data, including details of courses enrolled in and any file notes regarding the attendance and behaviour of the learner, is accurate and current. The data is sufficient to serve the interests of the learner in any case of voluntary or forced transfer to another provider.</p> <p>b. Data is entered into a centralised database as soon as practicable after the data has been generated.</p> <p>c. Data is securely stored in two separate physical locations. Computer records are regularly backed-up and a copy is stored separate from the originals.</p>

		d. Record-keeping, access, release and storage protects the privacy rights of the learner.
2.	Current and secured learner attainment records and results	a. Progressive and final assessment results are recorded accurately and are stored securely. b. Back up [Back-up] copies of progressive and final assessment results are kept in secure store off-site. c. Final assessment results are archived indefinitely in a safe yet easily retrievable location and format. d. Systems are in place to ensure that progressive and final assessment results may only be accessed, updated or amended by authorised persons.
3.	Timely and informative reporting of learner progress and attainment	
<b>2.10 Research</b>		
Note: This sub element is required to be met only by those providers who wish to be accredited for courses that contribute to the award of degree-level qualifications, including graduate and post-graduate certificates and diplomas.		
	<b>Requirements</b>	<b>Criteria</b>
1.	A commitment to research activities	a. Progressive attainment results are issued to learners as soon after an assessment as is practicable. b. Reported results clearly and fully reflect each candidate's achievements in relation to the outcomes of learning and associated awarding criteria for each course enrolled in.



		<ul style="list-style-type: none"> <li>c. Reporting of attainment results respects the privacy rights of the learner.</li> <li>d. Progressive and final learner attainment results are forwarded timeously to a centralised system where this is required under the registration terms for NQF qualifications.</li> </ul>
2.	The conduct of meaningful research	<ul style="list-style-type: none"> <li>a. A schedule of current and planned research activities is accessible.</li> <li>b. Requirements for the submission of theses specify conditions related to length, format, authenticity, and the presentation of evidence.</li> <li>c. There is a requirement and provision for the supervision of research activities. Complaints procedures are inclusive of grounds for, and processes governing, complaints regarding supervision.</li> <li>d. Research is carried out ethically and is open to public and professional scrutiny.</li> </ul>
<p>Note: Basic or fundamental research involves experimental or theoretical work undertaken primarily to acquire new knowledge without any particular application or use in view. Applied research involves the development or testing of existing knowledge towards specific practical objectives or the evaluation of policies or practices. Strategic research is intended to generate new knowledge in an area that has not yet advanced sufficiently to enable specific applications to be identified.</p> <p>Research activities are conducted in accordance with recognised ethical standards and are subject to peer and public scrutiny.</p>		

**2.11 Franchising and collaborative arrangements**

	<b>Requirements</b>	<b>Criteria</b>
1.	Formalised agreements between parties	<ul style="list-style-type: none"> <li>a. Auditable Memoranda of Agreement are produced for any relationship with a franchise partner or where there are plans to subcontract course or assessment-related services from or to another party.</li> <li>b. The terms of any memoranda are likely to enhance the attainment of the goals and objectives stated for the provider applying for accreditation and contribute to the long-term viability of that provider.</li> <li>c. Any memoranda must clearly state the duration of the agreement, the roles, accountabilities and respective powers of each party.</li> <li>d. The terms of the Memorandum of Agreement enables the NQA to apply such sanctions as necessary to the course and/or provider where there are concerns regarding the quality of provision of any course and the awarding of any qualification.</li> <li>e. Plans to subcontract any service or component includes provisions to ensure the extended application of the applicant provider's system for establishing and management of quality and the protection of the interests of learners involved.</li> </ul>

2.	Assurances of quality	<ul style="list-style-type: none"> <li>a. There is proof of legal recognition and accreditation of any direct or indirect franchise partner in the partners' own country.</li> <li>b. A national or international education quality assurance agency of a standing similar to that of the NQA has conferred accreditation to any direct or indirect franchise partner through the application of documented criteria comparable to those applied by the NQA.</li> <li>c. Franchise controllers regularly and rigorously monitor and review courses or services offered on their behalf.</li> <li>d. The quality and nature of any course offered under a franchise agreement is the same as that offered in the country in which the course was developed and/or first accredited.</li> <li>e. The customisation of any course is permitted by and is within the terms of the Memorandum of Agreement and provides relevance to the local context without compromising the integrity of the original course.</li> <li>f. Local stakeholders and providers have supported the 'imported' programme and will give due recognition to any graduates from it.</li> <li>g. The credentials of any sub-contracted party are provided and are such that they will unlikely compromise the credibility of the applicant provider and their courses and/or</li> </ul>
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		in any way embarrass the government of Namibia.
<p>Note: Section 13 (1) (a) of the Namibia Qualifications Act restricts the jurisdiction of the NQA to the accreditation of persons, institutions and organisations who have the proven capacity to provide courses of instruction or training and to assess the performance of persons taking those courses. The NQA would not, therefore, be able to accredit a provider operating under a franchise arrangement where a substantial onus and responsibility for teaching and assessing was not granted to the 'local' provider under the terms of the franchise arrangements.</p>		
<b>2.12 Review processes requirements</b>		
	<b>Requirements</b>	<b>Criteria</b>
1.	1. Systems for the review of policies and procedures	<ul style="list-style-type: none"> <li>a. Processes for the development of new and amended policies and procedures are documented and followed.</li> <li>b. Authorities and responsibilities for the development of new and review of existing policies, procedures and review mechanisms are defined and carried out as defined.</li> <li>c. Review processes are inclusive of the views of and feedback from learners, staff, relevant stakeholders, assessment and regulatory bodies.</li> </ul>
2.	Review of education services	<ul style="list-style-type: none"> <li>a. All courses, assessment, support and guidance systems are the subject of regular, scheduled and systematic review</li> <li>b. External persons with appropriate subject expertise and reputation are appointed to monitor and evaluate the effectiveness of the provider's quality management systems as it relates to specific degree-level courses and evaluate the success of the courses.</li> </ul>

<b>3. Achievement of goals and objectives</b>		
	<b>Requirements</b>	<b>Criteria</b>
1.	Substantial attainment of stated goals and objectives	<p>a. Valid quantitative and/or qualitative evidence derived from and related to the performance measures planned to be used is accessible and is used as an input into formal review processes.</p> <p>b. Where attainment has not been substantial (ie 50% or more of target), valid commentary has been provided explaining the variation and consequential actions to be taken.</p>
2.	Identification of areas for improvement and initiating action towards improvement	<p>a. The review mechanisms stated in the system for quality management have been initiated and confirm ongoing compliance with Accreditation Criteria</p> <p>b. Action plans detailing actions, responsibilities, timeframes and monitoring points and measures are in place to address any significant non-compliances, shortcomings and/or areas for improvement.</p> <p>c. Goals and objectives are updated as necessary.</p>

## **Annexure C**

### **Forms**

[Editorial note: The forms have not been reproduced]

## **Annexure D**

### **Schedule of fees and charges**

[Note: All charges shown are exclusive of VAT.]

### 1. Initial Accreditation

A non refundable [non-refundable] application fee of N\$ 5 000 is required to be paid at the time of lodging an application with the Namibia Qualifications Authority (NQA) seeking accreditation. This application fee covers:

- (a) the initial administration costs associated with processing an application; and
- (b) the first 12 hours of checking and analysis of the application by NQA staff.

Additional analysis time in excess of these 12 hours will be charged at N\$ 400 per hour.

Additional costs will be incurred if the scope of accreditation applied for requires the involvement of professional or industry experts following initial evaluation by NQA staff. The number of experts required will be dependent on the nature of the principal subject areas and levels for which accreditation is sought. The costs incurred will be passed onto the applicant by the NQA. Each expert will be engaged for a maximum of 16 hours.

Fair and reasonable costs of travel, accommodation and subsistence incurred in any consideration of an application are additional to those shown above.

### 2. Expansion of accreditation

A non refundable [non-refundable] application fee of N\$ 2 000 is required to be paid at the time of lodging an application seeking an expansion of the scope of an existing accreditation. This application fee covers:

- (a) the initial administration costs associated with processing an application; and
- (b) the first five (5) hours of checking and analysis of the application NQA staff.

Additional analysis time by NQA staff in excess of these five hours will be charged at N\$ 400 per hour.

Additional costs will be incurred if the new area(s) of accreditation applied for require the involvement of professional or industry experts following initial evaluation by NQA staff. The number of experts required will be dependent on the nature of the principal subject areas and levels for which expansion of accreditation is sought. The costs incurred will be passed onto the applicant through the NQA. Each expert will be engaged for a maximum of 16 hour

Fair and reasonable costs of travel, accommodation and subsistence incurred in any consideration of an application are additional to those shown above.

### 3. Re-accreditation scheduled quality audits

A non refundable [non-refundable] application fee of N\$1 000 is required to be paid at the time of lodging an application seeking re-accreditation. This fee will be waived if an Expansion of Accreditation is sought at the same time as the application of re-accreditation.

An estimate of the time expected to complete the quality audit required for the reconfirmation of accreditation will be provided to the institution before the audit takes place. The estimate will include time for planning, fieldwork, reporting and post audit follow-up. Each hour will be estimated at N\$ 400 per hour.

Additional costs will be incurred if the quality audit requires the involvement of professional or industry experts. The costs incurred will be passed onto the applicant through the NQA and will be included in the preliminary estimate.

Should the quality audit take less time than estimated, only the actual time incurred will be charged. If the quality audit identifies significant non-compliance, further charges will be incurred to enable the NQA to review any actions taken by the institution to address the identified non-compliance matters. Any additional time involved will be charged at N\$ 400 per hour.

Fair and reasonable costs of travel, accommodation and subsistence incurred in any quality audit are additional to those shown above.

#### 4. Annual Fee

An Annual Fee, based on the total number of student enrolments for each calendar year is payable to cover the cost of generic quality assurance actions incurred in the time between the grant and renewal of any accreditation. Such costs arise through work undertaken by the NQA such as:

- Ongoing advice and guidance to accredited bodies;
- Ongoing monitoring of institutions between quality audit cycles;
- Database maintenance;
- Initial investigation of any complaints;
- Legal work;
- Publications; and
- Liaison with other agencies, and the Minister's Office.

The Annual Fees payable are given in the following table and are payable as of the first issue of a Certificate of Accreditation.

**Table of annual fees**

Total Number of Enrolments	Annual Fee
Less than 100	N\$2 000
100 to 499	N\$3 500
500 to 2499	N\$5 000
2500 to 4999	N\$6 000
5000 plus	N\$8 000

#### 5. Unscheduled Quality Audits

The cost of unscheduled audits arising through complaints or concerns raised by the NQA under regulation 27 will not be passed onto the institution concerned.

## 6. Summary

Activity	Application Fee	Additional Hours	Involvement of Experts	Additional Costs
<b>Accreditation</b>	N\$5 000	N\$400 per hour	At cost	Annual Fee
				Travel, accommodation and subsistence
<b>Expansion of Accreditation</b>	N\$2 000	N\$400 per hour	At cost	Travel, accommodation and subsistence
<b>Reaccreditation</b>	N\$1 000	N\$400 per hour	At cost	Travel, accommodation and subsistence