MAKERERE UNIVERSITY

Quality Assurance Policy Framework

April 2007

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SUMMARY OF THE QUALITY ASSURANCE POLICY

1.   Background

Makerere University's Strategic Development Plan of 2000/1-2006/7 defined the direction Makerere University would follow during the period to serve and meet the changing needs of society by providing quality higher education in Uganda and beyond.

Key to achieving this strategy is the development of an effective and efficient Quality Assurance (QA) system underpinned by quality teaching, research development, curriculum development, student progression and welfare, focused on the needs of Makerere University, the African region and beyond.

A Quality Assurance system is now being proposed by the Senate Quality Assurance Committee based on findings and a report by the Quality Assurance Task force which was set up by the Vice-Chancellor in November, 2005.

Problem Statement

Currently Quality Assurance at Makerere University takes a variety of methods both internal and external. Internal Quality Assurance takes the form of moderation of examinations papers by peers, vetting by Senate committees the programmes proposed. External Quality Assurance measures comprise a system of engaging external examiners to vet examination and publications of staff that apply for promotion. These measures have been largely seen as not effective in coping with the rapid expansion of the University as revealed by the findings of baseline studies carried out by members of the taskforce. Student numbers have increased over the last 10 years, from 5,000 in 1994 to over 30,000 in 2006. These large student numbers poses a challenge to the management of learning and teaching within the different university units.

The baseline studies which were carried out in 2005 revealed the limitations of the current quality control methods in Makerere University, where in many cases, the emphasis had been mainly on controlling inputs, with comparatively little attention given to the processes and outputs. At institutional level, there has been little capacity to monitor educational performance in a systematic manner as well as failure to implement the quality related decisions in the university. It was observed during one of the workshop that implementation of decisions and outcomes of reports related to quality were weak partly because there was no responsible Unit within the University to make a follow up on issues agreed upon in such reports.

To address these critical issues, Makerere University needs to develop a Quality Assurance Framework that clearly spells out Principles, Guidelines, and Procedures for implementing institutional quality assurance process.

2. Quality Assurance Structure and Policy Framework

The framework provides goals and objectives for setting up the Quality Assurance Policy. It also lays down principles and guidelines which will guide in the implementation. The framework proposes that a Quality Assurance Management Structure be put in place to coordinate the implementation of the policy.

The significant features of the QA Structure include the setting up of a Joint University Council and Senate committee to be known as University Quality Assurance Committee (UQAC), Faculty/Institute/School Quality Assurance Committees and creation of Quality Assurance Directorate. The Non-teaching Departments will coordinate the implementation of the QA Policy through the Quality Assurance Administrative Team.

In general the implementation of the QA Policy will be spearheaded the University Top Management under the leadership of the Vice-Chancellor. The Policy shall apply to all units of the University through internal quality assurance mechanisms on a continuous basis and external quality Assurance strategies which will be periodic. The Internal Quality Assurance mechanisms shall focus on the quality of: programmes and courses; staff; teaching and learning experiences; staff/student performance assessment; support services; resources and facilities; and research.

3. Codes of Practices

Section three, of the Quality Assurance Framework provides codes of practices that shall serve as benchmarks and guidelines for implementation of the Quality Assurance Policy. The codes of practices are categorized as follows:

i. Sources of Information and Accessibility
ii. Maintenance of High Quality Research and Postgraduate Programmes
iii. Collaborative Provision on Quality and Standards
iv. Quality of Experiential and Flexible Learning
v. Academic Appeals and Student Complaints on Academic Matters
vi. Student Admission, Assessment & Quality Standards
vii. Programme Approval, Monitoring & Review
viii. Staff Recruitment, Development & Appraisal
ix. Career Guidance Based on Tracer Studies.
x. Equality of Opportunities.

The Quality Assurance activity is a continuous process. It is therefore hoped that lessons learnt during the implementation of this policy will be adapted into the laid down mechanisms to ensure the mission of University is achieved. Each of these key areas has a dedicated section providing precepts and general guidelines on quality assurance mechanisms, as organized in this report which may be revised whenever its principles are significantly affected by changes in policy or procedures as agreed by the joint University Council- Senate Committee.

Preamble

Whereas Makerere University is Uganda's premier and leading public institution of higher learning and;

Whereas the University is ranked as one of the largest and leading Universities in East and Central Africa,

Cognizant of the University' Vision to become a center of academic excellence, providing world class teaching, research and service relevant to sustainable development needs of society,

Cautious of the Universities and Other Tertiary Institutions Act, 2001 and Amendment 2006 which requires institutions of higher learning to ensure that their standards conform to the standards set by the National Council of Higher Education,

Aware of public concerns about the deteriorating standards at the University,

Aware of the many emerging institutions of higher learning in the country that could pose serious competition to the University, for not only students but also academic and other professional staff,

Informed by the University's Strategic Development Plan 2000/1-2006/7,

Now therefore, the Makerere University Senate through this policy instrument takes positive and proactive steps to ensure quality teaching, learning, research and outreach services relevant to the needs of the institution,

This policy specifies the University's approach to quality assurance and continuous improvement as well as its principles, features, structures and standards. The University wishes to assure quality teaching, learning, research, research training and service delivery through a regular review and improvement process.

Makerere University is a dynamic community of students, scholars and staff committed to performing at the highest standards. The University's aim is to provide a stimulating and innovative environment for teaching, learning, research and research training. Its approach to quality assurance and continuous improvement is to learn from best practice, locally and internationally, and benchmark against leading research universities.

QUALITY ASSURANCE POLICY

Purpose

International concerns about how to maintain quality control in an environment that increasingly puts acute pressure on the traditional modes of teaching, research, learning and management have forced most developed countries adopt a formal, transparent and credible systems of quality assurance with external verification of outcomes and processes.

The aim of the Makerere University's quality assurance policy is to enhance the effectiveness of its core activities of learning, teaching, research performance, research training and management. The policy addresses all areas of the University's activities focusing on their contribution to and in alignment with the University's Strategic Goals.

Quality Assurance Mission

Makerere University's Quality Assurance Mission therefore is:

To promote confidence in the academic provision (teaching, research and outreach services) that the quality and the standards of awards of Makerere University are safeguarded, enhanced and effectively managed.

This mission statement provides Makerere University with ample opportunities against which to build further and develop its quality of teaching, learning, and research base.

Features

1. A commitment to widespread involvement of staff, students and other stakeholders in the QA process.
    i. Critical self-evaluation and rigorous peer review of academic and administrative areas;

    ii. Methodical collection of evidence about service satisfaction and student experience, including external comparisons;

    iii. External assessment of professional courses through accreditation and international review;

    iv. Multiple avenues for student and staff input to QA and improvement: College, Faculty, School, Services, Academic Board and committees, student associations, and;

    v. Systematic use of client experiences to improve staff development and training.

2. A focus on efficient management, planning and resource processes to achieve excellence and to ensure continuous improvement.

i. University-wide strategic goals linked to plans, priorities and review system;
ii. Strong Academic Board and committee structure to develop, implement and oversee academic policies;
iii. A regular cycle of reviews of all faculties and administrative services units;
iv. Alignment between academic and administrative review processes;
v. A process for monitoring implementation of the recommendations of reviews through Makerere University administration (Senate and Council).
vi. Performance-based funding of teaching and research;
vii. Allocation of funding to address areas of improvement;
viii. Annually-updated faculty teaching and learning plans, linked to funding; and
ix. A performance management and development system for all staff, including managers.

3. A commitment to judging outcomes and processes against the highest external standards;
   i. Formal links with many of the world's leading universities: national and international benchmarking of academic standards and outcomes and;
   ii. National and international benchmarking of quality assurance processes with comparable research-led universities.

1.0 DEFINITIONS

1.1 Assessment
In the context of quality assurance, assessment is the process of identifying and ensuring that appropriate internal procedures are in place and operational and that outcomes of academic programmes and activities are in accord with established standards.

1.2 Audit
Audit is a process of identifying and ensuring that appropriate internal quality assurance processes are in place and operational.

1.3 Programme Review
Programme review is a process of holistic appraisal of a course/programme and resources, with a view to its further evolution and improvement.

1.4 Quality
In this document and in the context of academic programmes at Makerere University, the term quality refers to "fitness for purpose" (i.e. the institution and its components of activities have "quality" if they conform to the purpose for which they were designed).

1.5 Quality Assurance
The process whereby measures are established which ensure that outcomes of academic programmes and activities are of a prescribed standard.

1.6   Quality control
This is the process whereby outcomes are assessed to determine whether they are of the prescribed standard.

1.7   Quality Management
Quality management refers to all the processes that are in place to facilitate achievement of quality in an institution.

1.9   Stakeholders
The term stakeholders include agencies (government and private) that control tertiary institutions, individuals, groups that participate in or have responsibilities towards tertiary education in Uganda.

2.0   AIMS AND OBJECTIVES OF THE POLICY

Goals and Objectives
Effective institutional quality assurance processes assess quality against their mission and related objectives. The University will strive to be an example of an efficient and effective QA system development in Uganda. The University in this QA framework has adopted Quality as "*fitness for purpose''*: a concept that stresses the need to meet or conform to generally accepted standards such as those defined by an accreditation or quality assurance body, the focus being on the efficiency of the processes at work in the institution or programme in fulfilling the stated, given objectives and mission
Goals and Objectives are the key drivers of a "*fitness for Purpose"* model of quality assurance. They need to be set clearly and explicitly, and in ways that can be operationalized effectively. They set the framework for planning, monitoring and measuring outcomes. They also facilitate communication with stakeholders such as employer, industry, government, students and parents

2.1   The Academic Quality Management Policy aim is to support the university's efforts to achieve its Mission and Vision through development and implementation of academic programmes that meet national, regional and international standards.

2.2   The objectives of the Academic Quality Management Policy include the following:-

   (i)   To provide guidance in development and implementation of internal and external quality assurance procedures and practices.
   (ii)   To ensure that the quality of academic programmes at the Makerere University meet standards expected by stakeholders.
   (iii)   To ensure that graduates have attained skills and knowledge through Makerere University academic programmes that are valued by stakeholders.
   (iv)   To enable Makerere University to assure itself, its stakeholders and the National Council for Higher Education (NCHE) that the University's polices, systems and processes for the development, maintenance and enhancement of quality in all its educational provisions are functioning effectively;

(v)   To provide guidance in identifying internal and external standards and criteria consistent with internationally recognized standards.

(vi) To assist in maintaining and developing quality of academic programmes through enhanced support processes.

(vii) To facilitate development of a culture of continuous quality improvement to achieve academic excellence.

(viii) To enable identify areas of strength and excellence as well as areas in need of focused attention for continuous improvement in the short, medium and long-term;

(ix) Through the University organs to strengthen the independent role played by the Quality Unit in quality management and enhancement.

These aims can further be divided into specific implementation objectives as quality assurance management activities.

1. Harmonise various quality assurance aspects/activities within Makerere University;
2. To ensure an effective performance of staff and students;
3. To strengthen ties with Regional, National and International Quality Assurance agencies and universities;
4. To improve the University environs in order to attract and retain staff and students;
5. To continuously improve the QA system, through reviews, streamlining and modernizing of QA function, policies, procedures and their supporting protocols;
6. To provide leadership in the transformation of the Makerere University core Quality Assurance business processes through the implementation of Quality assurance initiative.

3.0   PRINCIPLES UNDERPINNING THE POLICY

Some of the principles underpinning Makerere University approach and *modus operandi* are outlined. A summary is provided below. These will need to shape, if not determine Makerere University methodologies of accountability and improvement. Several key principles are incorporated into this Policy. The principles relate to the quality framework and processes outlined in this document.

3.0.1 **Principle 1:**   *"Holistic"* approach.

3.0.2 **Principle 2:**   *"Based on self-assessment" – "Trust but verify".*

3.0.3 **Principle 3:**   *"Improvement focus".*

3.0.4 **Principle 4:**   "*Planning framework".*

3.0.5 **Principle 5:**   Data and resources

3.0.6 **Principle 6:**   Quality teaching, learning, research and administrative services **and** continuous improvement as a core value

3.0.7 **Principle 7:**   Benchmarking and evidence-based approach

3.0.8 **Principle 8:** Collegiality and Team Spirit.

4.0 QUALITY ASSURANCE MECHANISMS/FRAMEWORK
The notion of quality underpinning the framework adopted by the MUQA is of *"fitness for purpose"* (i.e., the institution and its components and activities have *"quality"* if they conform to the purpose for which they were designed). The framework reflects the MUQA's dual purpose; as a mechanism for accountability.

4.1 The policy shall apply to all Faculties/Schools/Institutes, and both academic and support staff at Makerere University through:

      4.1.1 Internal Quality Assurance Mechanisms – Continuous
      4.1.2 External Quality Assurance Mechanisms - Periodic

4.2 The University, through Council, shall determine and approve quality management frameworks for all Faculties/Schools/Institutes.

4.3 Regular internal audits will be conducted to ensure that the Quality Assurance Policy is implemented.

4.4 Areas of Internal Quality Assurance
    4.4.1 Internal quality assurance mechanisms are departmentally generated and are continuous. The mechanisms shall be coherent with the quality assurance framework set forth in this policy and approved by Council and shall include mechanisms to assess the following areas;

4.4.1.1   Quality of programmes and courses
4.4.1.2   Quality of academic staff
4.4.1.3   Quality of teaching and learning experience
4.4.1.4   Quality in student assessment: Internal moderation
4.4.1.5   Quality in support services
4.4.1.6   Quality of resources and facilities
4.4.1.7   Quality of research
4.4.1.8   Quality program review process

4.5 External Quality Assurance
To ensure that high quality standards are maintained, the following external mechanisms shall be utilized;

4.5.1 External Academic Review
    4.5.1.1 Quality of educational programmes shall be assured through External Academic Review by any of the following bodies:
        i. External Examiners
        ii. External Professional bodies
        iii. External accreditation agencies (for professional programmes that have recognized, credible professional accreditation agencies)
        iv. Employers
        v. Former students
        vi. Other Universities
        vii.

5.0   RESPONSIBILITY FOR POLICY IMPLEMENTATION
The Vice Chancellor shall oversee the implementation of the policy.

6.0   MISSION, VISION AND VALUES STATEMENT
6.1   Makerere University Vision, Mission and Values Statement shall underpin the execution of this policy. Makerere University's current **Mission Statement** is, "*to provide quality teaching, carry out research and offer professional services to meet the changing needs of society by utilizing world-wide and internally generated human resources, information and technology to enhance the University's leading position in Uganda and beyond.*"

Makerere University's **Vision** is, "*to be a centre of academic excellence, providing world-class teaching, research and service relevant to sustainable development needs of a society.*"

NB: The mission and vision statement is currently under review for 2007/2017 strategic plan

In pursuing Makerere University Mission, the University shall be mindful of maintaining and reinforcing its core values of:
   i.   ---a global outlook and outreach
   ii.   ---breath of vision, creativity and openness to change
   iii. ---collaboration and team work.
   iv.   ---excellence and continuous improvement
   v.   ---transparent and courteous internal and external communication in the organization
   vi.   ---the highest intellectual and ethical standards and;
   vii. ---the values of humane and just society; and
in realizing Makerere University as an internationally recognized and globally focused, research-intensive institution, with a vigorous learning and teaching environment; the University commits an equivocal commitment to high quality permeating all dimensions of academic activities and support services.

NOTES:
1.0   Introduction

1.1   These notes shall provide further clarification of the Quality Assurance Policy provided in this document.

1.2   It was recognized, however, that in order for Makerere University to achieve its Vision to be "a leading center of academic excellence in Africa, and the world", a system of quality management needed to be in place.

1.3   This document describes a policy and framework for Academic Quality Assurance at Makerere University that will facilitate achievement of the University Vision and the Uganda Government Vision 2017?

1.4   Experience has shown that "the rhetoric of quality is all about empowerment, however, the reality is different: People do not uniformly embrace quality

willingly. "(Rippin, White & Marsh, 1994, p.13). Consequently, the policy and framework proposed for academic quality assurance at Makerere University is a participatory model, the goal of which is to obtain ownership by students, academic staff, administrative and support staff.

1.5   Implementation of this policy and framework shall be facilitated and guided by the Makerere University Council

1.6   The policy and framework incorporate both internal and external quality management strategies. Some Faculties, may explore the possibility of accreditation by professional agencies and this is supported where disciplines have professional agencies to do this.

1.7   The following sections outline in greater detail the aims, principles, policy and structure of the proposed quality management system.

2.0   Principles underpinning the Academic Quality Assurance policy

2.1   The key principles incorporated into this policy related to the quality framework and processes outlined in the policy are further clarified in this section.

2.1.1   **Principle 1:**   *"Holistic"* approach. All aspects of the institution's activities, academic, administrative and managerial, on-shore and off-shore, will be subject to audit and reporting.

2.1.2   **Principle 2:**   *"Based on self-assessment"* – *"Trust but verify"*. The institution will be
judged according to its own objectives, that is, on whether or not it is achieving its own mission in a purposeful and clear fashion.

2.1.3   **Principle 3:**   *"Improvement focus"*. Makerere University Quality Assurance (MUQA) will have a focus on assisting and facilitating improvement within Makerere University. It sees audits as a value tool to assist Makerere University to enhance quality education. MUQA is a partnership, "cemented with a common will to improve".

2.1.4   **Principle 4:**   "*Planning framework*". The quality assurance model adopted presupposes a planning and evaluation framework to quality systems. Objectives must be planned, actions taken must be measurable in verifiable ways, reviews of the plans and measures be undertaken. Surveys particularly of employers and students are seen as crucial instruments for continuous improvement.
The set objectives must be *"SMART"*, i.e. Specific, Measurable, Achievable, Realistic and Time-bound.

2.1.5   **Principle 5:**   *Data and resources*. Whatever resources are needed by the MUQA should already be required by the institutions' own internal quality systems and process. The MUQA's self-assessment approach builds assessments around what already happens or should be happening.   In brief, the MUQA's operational catchwords are *"accountability" and "improvement" through* "self-assessment"

against objectives" achieved by good *"planning" and* "processes", but *"measured"* and periodically "reviewed."

2.1.6 **Principle 6:   Quality teaching, learning, research and support services or auxiliary services, continuous improvement as a core value.**
Quality teaching, learning, research are essential to the University's mission, goals and activities. The University's quality assurance processes are intrinsic to the work of all staff, who are undertaking or supporting teaching and the promotion of learning and research.

2.1.7 **Principle 7:   Benchmarking and evidence-based approach**
The University evaluates its achievements against appropriate national and international benchmarks. Its quality assurance methods are evidence-based, where outcomes and feedback from stakeholders (including students, staff, employers and the community) will provide the basis for analyses and conclusions on which improvements are planned.

2.1.8 **Principle 8:   Collegiality and Team spirit**
The University's procedures reflect the principles of rigorous peer review, as the is to identify areas for improvement, foster collaboration, and team spirit, exchange of best practice, and encourage an ethos of critical self-evaluation.

2.1.9 **Principle 9:   Modus Operandi**
Audit Processes. Members of audit teams will be independent of the institution they are auditing and will be trained in auditing techniques. To assist both auditors and institutions, audit guidelines will be developed collaboratively between the Makerere University Quality Assurance Unit and the Senate.

3.0   Academic Quality Management Policy

3.1   The policy shall be implemented and carried out in the context of the University's Vision, Mission and Values Statements.
3.2   The policy is based on the expectation that high quality standards shall be achieved and maintained and that academic programmes shall be internationally recognized.
3.3   Quality management shall include all of the following activities;

3.3.1   Mandatory internal moderation procedures to ensure validity of student assessments and reliability of marking
3.3.2   Assessment and monitoring of academic honesty
3.3.3   Monitoring academic staff performance standards
3.3.4   Self-study reports
3.3.5   Standardized programme and course development procedures, which include Senate approved guidelines/templates
3.3.6   An annual appraisal of
   i.   What the department is trying to do *(planning)*
   ii.   What it has done *(doing)*
   iii. Monitoring and evaluating processes and outcomes, *(Reviewing)* and,
   iv.   Making appropriate changes bases on the data *(improving)*

v. Academic and non academic staff performance
3.3.7 Taking measures to remedy gaps and mis-performance.

4.0 Areas for Internal Quality Assurance

The following areas for internal quality assurance are further described.

4.1 Quality of Programmes and Courses
Assessment of quality in the design and implementation of programmes and courses shall ensure that well-qualified staff members carry out such activities, which are based on the guidelines and procedures approved by Senate.

4.2 Quality of Academic Staff
Assessment of quality in academic staff shall include expectations with regard to qualifications, scholarly work and continuing professional development. Benchmarks for minimum qualifications, scholarly work and involvement in continuing professional development activities shall be determined by academic units. Guidelines and procedures from the Performance Management and Appointments and Promotions procedures shall be considered when developing these academic staff expectations.

4.3 Quality in Teaching and Learning Experience
4.3.1 Assessment of quality in teaching and learning shall cover the following;
  i. Use of well established tools such as the Head of Department's assessment,
  ii. Student Evaluation of Course and Teaching (SECAT)
  iii. Teaching portfolios and peer review
  iv. Individual performance management goals, Appointments and Promotions Procedures that pertain to teaching shall be included in the assessment of quality teaching
  v. The Centre for Academic Development/Quality Assurance Unit shall have an advisory and supportive role in the improvement of teaching, for example, through implementation of the induction courses for academic staff, ongoing professional development programmes, Teaching Improvement Grants and Teaching Excellence Awards.
4.3.2 Assessment level of student engagement in the teaching and learning experience.

4.4 Quality in Student Assessment: Internal Moderation
Quality assurance mechanism for determining quality of student assessments, both continuous and final shall be developed. In the absence of external examiners, departments shall develop systems that are coherent with the QA framework approved by Senate. These shall include a minimum of internal moderation procedures that ensure validity of student assessment and reliability of marking.

4.5 Quality in support services
Assessment of quality in the academic support services provided to Faculties/Schools/Institutes and departments including record keeping and

attention to process as it relates to academic excellence; shall be included in the framework for quality assurance.

4.6   Quality of resources and facilities
Assessment of quality of resources and facilities shall include measures of the availability and appropriateness of lecture rooms, library, book banks, ICTs, laboratory or practical facilities and equipment, etc

4.7   Quality of research
In order for MUK to keep an outstanding international reputation in research, it must be committed to maintaining and expanding its research capacity to achieve research and   research training of international distinction. Quality of research shall include for the following:
4.7.1   Assessment of capacity to perform research at the individual and Faculty/School/Institute level.
4.7.2   Assessment of the research relevance to the discipline, Makerere University, locally and globally.
4.7.3   Assessment of external research and internal funding
4.7.4   Assessment of research management
4.7.5   Assessment of research findings and dissemination
4.7.8   Assessment of research & research training strategies whether they reflect international best practices.

4.8   Program Review Process
4.8.1   A program is normally reviewed once every three years, or depending on the duration of the programme. In consultation with the Deans and Senior Administrators, the University's Academic Programme and Library Committee selects the programs to be reviewed and recommends the order of their review.
A program review features both quantitative and qualitative analysis. The quantitative analysis consists of gathering and analyzing numerical data related to the program. These data are reported in the self-study report. The qualitative analysis is embodied into two parts: a self-study completed by program representatives and a study by an external review team that augments and validates the self-study.
With a balance between quantitative and qualitative analysis, the program review process can ensure accountability and fairness.

4.8.2   **Purpose**
The primary purpose of a program review is to evaluate five aspects of a program;
  i.   Quality
  ii.   Resource use
  iii.   Contribution to the Mission and Vision of the institution
  iv.   Adaptability
  v.   Transferability and recognition of qualifications.

4.9   Implementation of the Internal Quality Assurance Framework

4.9.1 The participatory nature of the QA structure is critical and shall be reflected in the composition of all Makerere University committees and task forces, and proposals written for funding at Makerere University.

4.9.2 The available expertise and leadership in each department shall be exploited when identifying the leaders of teams, for example, where possible Professors, Associate Professors or where necessary, senior lecturers in good standing may be used in key positions.

4.9.3 Wherever possible current students and alumni will participate in the Quality Assurance Committees and Teams.

4.9.4 The direction and support provided by the Makerere University leadership, management and by the Joint University Council and Senate Quality Assurance Committee is critical to operationalizing the policy.

5.0 External Academic Review

5.1 Areas of External Review will include but not be limited to the following areas:

5.1.1 Courses/programmes content and delivery

5.1.2 Student assessment

5.1.3 Programme resources

5.1.4 Academic staff qualifications, scholarly work and professional development activities.

5.2 Procedures for External Review will include but not limited to the following areas:

5.2.1 Review of documents, i.e., staff and students records

5.2.2 Observations, e.g. lecture room teaching, laboratory work, counselling, etc.

5.2.3 Interviews with staff, students, senior management, etc

5.2.4 On site visits to the academic and support units at an agreed time and duration to examine the quality, reliability and validity of the self-study data through review of documents, observation and interviews with staff and students.

5.3 The following documentation should be available for the External Academic Reviewer (s). Other documents may be required and should be made available upon request of the External Reviewer (s)

5.3.1 Students assignments, tests, projects, examination papers, answer scripts

5.3.2 Academic staff course materials such as course outlines, handouts, monographs, laboratory manuals and study guides

5.3.3 Programme and course structure and content

5.3.4 Physical facilities: laboratories and equipment, library facilities, computer facilities

5.3.5 Information and Administrative support

5.3.6 Financial support information, i.e. research grants, conference funds, etc.

5.3.7 Academic staff Curriculum Vitae

5.3.8 Publications by academic staff

5.3.9 Student tracking information, i.e. progression and employment data

5.3.10 Records

5.3.11 Any other material in connection with teaching, research and publications as shall be requested by the External Academic Reviewer (s)

5.4 The Department Self-Study should include but not limited to the following areas of academic programme review;

5.4.1 Assessment methods analyses/evaluations

5.4.2 Marking guides/strategies

5.4.3 Assessment of teaching and learning environments including teaching strategies used, resource availability, etc.

5.4.4 Summaries of peer assessments

5.4.5 Statistical summaries of student evaluation of course and teaching scores

5.4.6 Academic staff information, i.e., qualifications, scholarly work and professional development activities

5.4.7 Student results

5.4.8 Department organizational structure including record keeping

SECTION TWO:
QUALITY MANAGEMENT STRUCTURE

The University is undergoing rapid expansion in terms of staffing, student enrolment and new programmes. An effective teaching and learning policy is a precondition for social change and economic development. There is at the same time an increasing number of institutions of higher learning posing competition. This calls for a review of the organization and administration of the QA function at Makerere. This creates the need to harness QA mechanisms for better and efficient staff, teaching and research, management and administration.

1.0 Principles for Quality Management and Enhancement

Makerere University reaffirms its commitment to the development and implementation of a formal, integrated Quality Assurance Management System as part of its strategic mission. It seeks to further engender a creative, dynamic and supportive quality assurance culture built upon the following overarching principles:

1.1.1 An Independent Quality Assurance Unit

Establishment of an Independent Quality Assurance Unit which has an overall responsibility for quality assurance function.

1.1.2 Quality teaching, learning and research

Ensuring that the University environment meets students and staff needs through good academic planning and evaluations. The need to focus on results, performance and outcomes of both students and staff, and provide leadership and motivation, to support staff development, career progression and high completion rates.

1.1.3 Outreach Professional Services

Identifying and disseminating good practices within and from outside the university in terms of upholding the highest standards of professionalism, ethics, gender mainstreaming and equal opportunities for all students and staff.

1.1.4 Collaboration

Ensuring that there is an effective liaison with stakeholders in offering out programmes. To build and sustain productive relationships within the university, government departments, regional bodies, and other universities while strengthening and promoting confidence in the public and the university herself that the quality of provision and awards are safeguarded, enhanced and maintained.

1.1.5 Commitment to Change & Innovation

Promoting an innovative quality assurance culture and continuous improvement, building on the experiences of the past, seeking opportunities for needed change and pursuing and promoting creativity among staff and students within the university.

The above principles form a basis for defining roles and responsibilities of different stakeholders and University organs in a quality assurance management system. It is therefore recommended that Quality Assurance organs be created by as follows:

1.2 University Quality Assurance Committee (UQAC)

1.2.1 Membership of the University Quality Assurance Committee
The University joint Council and Senate Committee on Quality Assurance shall provide the overall approval on the implementation and effectiveness of the QA strategy, facilitate in publicising the achievements made, and independence of the Quality Assurance Unit. Its composition shall be as follows:-
   i.   Chairperson (Representative from Council)
   ii.   Two representatives from Management
   iii.   Two representatives from Council
   iv.   One representative from the Ministry of Education
   v.   Two representatives from Senate
   vi.   One Administrative representative
   vii.   Two student representatives.
   viii. One representative of the public appointed by the Council
   ix.   Director Quality Unit (Secretary)

1.2.2 Terms of Reference
   i.   To promote a quality culture at the University;
   ii.   To establish and monitor quality standards and practices;
   iii.   To review and evaluate quality assurance system and procedures;
   iv.   To attend to specific recommendations as required from time to time by Council and Senate on Quality Assurance Issues.

The current Senate Quality Assurance Committee shall be dissolved upon approval by University Council the setting up of the University Quality Assurance Committee.

1.3.0   Quality Assurance Directorate (QAD)
The Quality Assurance Directorate (QAD) shall be managed by a Director of Quality Assurance who will see the day-to-day activities of the Unit on behalf of the Vice Chancellor.

1.3.1 Director of Quality Assurance Unit (at M3 level)
The main duties of the Director, Quality Assurance are to:
  i.   provide leadership for Quality Assurance and Good Practice at the University;
  ii.   shall be accountable for implementing the QA initiatives, managing its details and bringing it successful implementation

iii.   lead the development and oversee the implementation of University-wide Quality Assurance initiatives;

iv.   lead, co-ordinate and support Quality Assurance and Enhancement Management System across the University;

v.   contribute to the identification, development and promotion of the University's quality assurance protocols and mechanisms;

vi.   Contribute to the formulation of the University's Quality Assurance and Enhancement Policies and Practices and to their implementation and monitoring across the University and, where appropriate, in collaborative partner institutions.

1.3.2 Deputy Director (at M4 level)

The Director will be assisted by a Deputy Director at M4. The main duties of the Deputy Directors are to:

i.   Assisting in coordinating and supervising of all activities carried out at the Quality Assurance Unit.

ii.   Answering questions from all stakeholders regarding the Q.A policy and implementation of Quality at MAK as assigned by the Director.

iii.   Advising on Quality Assurance matters in all academic programmes.

iv.   Liaising with all Faculties, Schools Institutes and Departments so as to guide the research agenda in the desired direction.

v.   Developing and maintaining the publication of Quality Assurance Journal of Makerere University

vi.   Maintaining and updating the Quality Assurance Website.

vii.   Representing the Director in meetings within and outside the University as/and when instructed.

viii.   Oversee proper planning development and Managing Quality Assurance budgets.

ix.   Carrying out Evaluation and documentation of the Quality Assurance Unit Progress.

x.   Overseeing Programs and policies that promote quality and academic excellence in the University.

xi.   Writing Proposals for Resource mobilization for the Quality Assurance Unit.

xii.   Performing the functions of the Director in his absence when so instructed

1.3.4   Programme Officers (M5)

The Quality Assurance Unit shall have three Programme Officers responsible for (Curriculum Development, Research and Evaluation, and Support Services respectively**.**

1.3.5   Administrative Assistants (M7)

The Unit shall also have three Administrative Assistants will be responsible for provision of administrative support to the unit.

1.4   Quality Assurance Directorate Financing

i.   The University shall integrate its quality assurance management systems in the budgetary provisions for 2007/08 financial by allocation of funds from Internally Generated fund and subvention for activities of Directorate of Quality Assurance.

ii.   The various Units in the university shall include in their budget funds for quality assurance activities at unit level.

iii.   QAD to develop proposals to attract funding for quality assurance activities.

1.5   Faculty Quality Assurance Committee

Faculties have a Departmental Structure, in which Heads of Department have defined responsibilities that include the management and monitoring of the quality of the courses offered by the Department.

The existing Faculty Irregularities Committee is to be dissolved since its scope lies within the roles of the Faculty Quality Assurance Committee.

1.5.1 Membership of the Faculty/Institute/School Quality Assurance Committees
  i.   Chairperson, Dean/Director
  ii.   One representative from each Department
  iii. One representative for support staff
  iv.   One representative for Technical staff.
  v.   Two student representatives (Undergraduate and Post graduate)
  vi.   Faculty Quality Assurance Coordinator (Secretary)*(based in academic units providing a link with QA Unit at the rank of Registrar/Administrator)*.

1.5.2 Terms of Reference
  i.   To promote the University quality culture within the Faculty/School/Institute
  ii.   To establish and monitor quality standards and practices
  iii. Review and evaluate Quality Assurance Systems and procedures
  iv.   Attend to specific recommendations from UQAC on Quality Assurance issues
  v.   To handle irregularities issues of staff and students

1.5.3   Quality Assurance Committee for Research Institutions

The Quality Assurance Committee for Research Institutions will be constituted by members from the different Research Areas.

1.5.4   Administrative Quality Assurance Team

The support Departments will be represented on the Administrative Quality Assurance Team: This team shall have the same status as the Faculty Quality Assurance Committees. The composition of the team will be as follows:
 Chairperson *(to be elected by Committee members)*
At least one representative from Vice- Chancellors office,Library, Academic Registrar Department, Dean of Students Office, Human Resource Directorate, Bursars Office, University Secretary's office, Public Relations Office, Directorate for Information Communications Technology Systems, and Quality Assurance Directorate shall provide the Secretariat.

Terms of reference
  i.   To promote the University quality culture within the Central Administration
  ii. To establish and monitor quality standards and practices
  iii. Review and evaluate Quality Assurance Systems and procedures
  iv. Attend to specific recommendations from UQAC on Quality Assurance issues

1.5.5   Tenure of Membership

The members of UQAC shall serve for a period of four years and shall be eligible for reappointment. However the student representatives shall hold office for a period of one year.

2.0 ROLES AND RESPONSIBILITIES IN THE QUALITY ASSURANCE PROCESS

All members of the University community and its organs should be sensitized to strive for high quality in their activities. All members of the University, including teaching staff, researchers, support staff and students themselves-contribute directly or indirectly to the quality of the teaching, research and outreach services. This summary relates principally to the stakeholders most directly concerned with the quality of the academic provision.

2.1.1 Structure of Academic Provision
Makerere University academic provision forms a basis for defining roles and responsibilities of different stakeholders in a quality assurance management system. The academic provision of Makerere University is the responsibility of academic units i.e. faculties, institutes, schools and colleges.

2.1.2 Roles of Students
a) Students can make a significant contribution to the quality of their own learning and that of their fellow students. They can also contribute to the improvement of the learning opportunities of future students on similar programmes.
b) Some students' responsibilities are defined in the Academic Regulations. To maintain and enhance the quality of their own learning and that of others, students also have a responsibility to;

     i.   Attend regularly,
     ii.   Prepare for taught sessions, especially seminar and workshop sessions,
     iii.   Spend the recommended time in student managed learning,
     iv.   Use the information and guidance provided,
     v.   Take up available opportunities to receive academic advice and feed back on their work,
     vi.   Thoughtfully complete course questionnaires and other surveys and consultations,
     vii.   Use the system of academic boards, course representatives, and representations though the students' Union to raise issues for improvement.

2.1.3 Roles of Academic staff
a) The University's confidence in the quality of its programmes rests mainly on its expectations with regard to the professionalism of individuals, who are aggregated in programmes and course teams, organized and managed in departments and faculties and act within a policy framework laid down at institutional level. The majority of these guidelines relate to the institutional policy and procedural framework, but the professionalism of individuals is of great importance.

b) Individual staff are normally members of subject group of a department but may contribute to several programmes. Departmental and Faculty structures vary and though roles of subject groups and programme teams are set out separately below. The separation of responsibilities is not clear-cut. Staff have responsibilities both for the development of the research or subject area and for the coherence and quality of programmes as experienced by students.

2.1.4 Roles of Individual, subject group and programme team responsibilities
a) It is the responsibility of individual academic staff to:

i. undertake scholarly activities which underpin teaching and research,
ii. be well prepared for teaching,
iii. provide students with clear information and academic guidance in accordance with University regulations, both through written information and by making themselves accessible to students,
iv. where relevant, maintain contact with professional practitioners, professional and subject associations and wider academic community,
v. pursue professional development whether in the subject area or in pedagogic techniques which supports teaching.

b) It is the responsibility of subject groups to develop systems which ensure that:
i. The scope, content, learning outcomes and recommended reading and other sources for units in the subject remain current.
ii. courses are developed and enhanced to serve the needs of all programmes to which they contribute
iii. Programme and course content and learning strategies are appropriately matched to students' knowledge and skills at entry.
iv. units are monitored
v. course guides accord with University guidelines and are fit for purpose
vi. subject area external examiner comments are considered, appropriate action initiated, and response made

c) Additionally, teams of staff contributing to a programme (who may come from different subject groups or departments) have a responsibility to:
i. liaise with each other to ensure the coherence of the programme and the consistency and quality of support for students enrolled on the programme,
ii. attend Academic boards and engage in discussions with academic colleagues and student representative, with a view to improve,
iii. specify, implement and review the appropriateness of programme entry requirements,
iv. Use evidence to contribute to an annual report on the monitoring of the programme (as described in section 11).

2.1.5 Roles of Deans/Directors/Principals/ of Faculties/Institutes/Schools and Heads of Departments

Deans/Directors/Principals and Heads of Departments have the primary responsibility for ensuring that the programme portfolio is developed and enhanced, and that subject specific resources and operational systems appropriately support the quality of the learning experience. Faculty/Institute/School and Departmental roles include:

a) allocating individual roles and ensuring that staff are prepared for those roles,
b) developing the programme portfolio to optimise academic and vocational opportunities and student appeal and collaborating with other Faculties/Departments to achieve this where relevant,
c) Ensuring that the teaching and learning environment meets students and staff needs as fully as possible,
d) promoting contact with employers and with the wider academic community,

e) supervision and monitoring policies and procedures for selecting students and for assessing prior learning,

f) ensuring that there is an effective liaison with partners in offering collaborative programmes,

g) identifying and disseminating good practice within and from outside the Faculty /Institute/School or Department,

h) ensuring that course planning committees and review teams are adequately supported by senior staff experienced in evaluation and programme development, and that new and revised programmes receive thorough internal scrutiny before progressing to validation or review.

i) Attend to specific directives from UQAC or QAD on Quality Assurance issues

2.3 Role of the Quality Assurance Directorate in Best Practice.

i. The Quality Assurance Unit shall share best practice with key stakeholders in quality assurance implementation at Makerere University. This shall be done by organising Workshops to disseminate lessons learned, successful innovations, and difficulties encountered in implementing quality assurance system. The unit shall also put in place mechanism for an annual conference on quality assurance implementation and research for the University.

ii. The Unit shall develop website to provide information to students, staff and employers about the quality teaching and research and other key performance indicators expected of Makerere University .

2.5 Support Services Departments

Support services Departments equally have a responsibility to maintain professional standards appropriate to the service function, and to plan, manage and review the services they provide to ensure that those services align with institutional priorities, support academic developments and add to the quality of the student experience. Support Departments which provide services directly to students have an additional responsibility to:

i. Gather information on student needs and priorities to inform the planning of the service,

ii. Consider student feed back, through local surveys or through the student satisfaction survey,

iii. Develop an ethos of customer service.

2.6 Management Function

Commitment from the top management is an essential pre-requisite for an effective quality assurance system. Members of top management are the bedrock, the anchors of Quality Assurance. The Leadership/Management roles will be as follows:-

i. Guide the University in reviewing the organizational performance for quality assurance.

ii. Establish a clear mission, articulate core values, and communicate high expectations of performance at all levels.

iii. Create and sustain an educational environment that promotes ethical values and equity for all stakeholders at Makerere University.
iv. Encourage research, innovations and pursue current and future opportunities for improvement.
v. Establish priorities for quality improvement to ensure that Makerere University's Mission is successfully achieved.
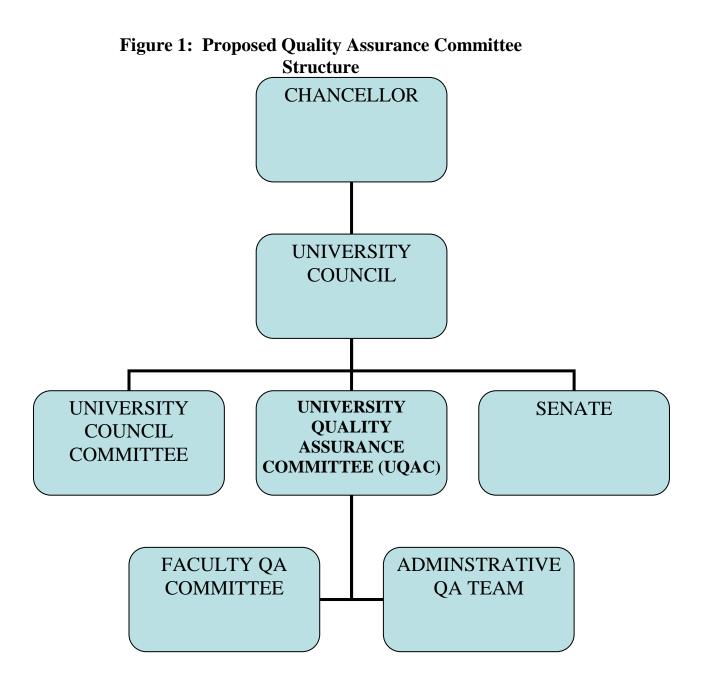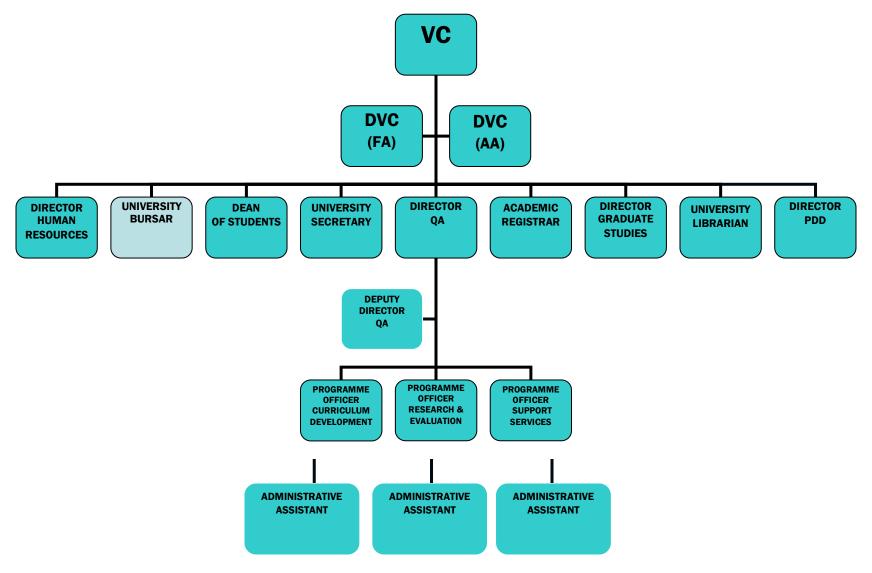vi. Ensure the University is strategically located to achieve its Mission and Vision.

Figure 1: Proposed Quality Assurance Committee Structure

Figure 2: Proposed Structure for the Quality Assurance Unit.

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| DIRECTOR HUMAN RESOURCES | UNIVERSITY BURSAR | DEAN OF STUDENTS | UNIVERSITY SECRETARY | DIRECTOR QA | ACADEMIC REGISTRAR | DIRECTOR GRADUATE STUDIES | UNIVERSITY LIBRARIAN | DIRECTOR PDD |

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   │    OFFICER     │   │    OFFICER     │   │    OFFICER     │
   │   CURRICULUM   │   │   RESEARCH &   │   │    SUPPORT     │
   │  DEVELOPMENT   │   │   EVALUATION   │   │    SERVICES    │
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SECTION THREE:
CODES OF PRACTICES

1.0   SOURCES OF INFORMATION AND ACCESSIBILITY

The University is required to gather certain classes of information regarding the standards and quality of its programmes, and to publish some of this information. This is in order to enable the general public and more specifically prospective and current students to have access to up-to-date, consistent and reliable information about the standards and quality of programmes offered.

1.1 Information for Students
University policy on information for student shall be that every student should receive a Student Handbook, a Programme Guide, and a Course Guide for every course for which he or she is registered.

Accurate and accessible information for students will assist them to:
a) understand what is required to achieve the standards for the award for which they are enrolled,
b) understand their responsibilities, both to maintain their enrolment and in respect of their own learning,
c) understand their responsibilities as members of the University community and, where relevant, their responsibilities in respect of professional conduct,
d) know how to derive maximum benefit from the learning opportunities available to them,
e) know how and in what circumstances to access support services,
f) understand the regulatory framework which governs decisions about progression and awards,
g) know how to use the systems which exists for students to express their views or to make complaints.

1.1.1 Course Guides
a. The purpose of Course Guides is to help students understand what is required to meet the learning outcomes of the course, in terms of supervised contact with staff, private study, preparation and assessment.

b. A Handbook for Academic Staff provides detailed guidance on the purpose of Course Guides, content which is required or desirable, the relationship between the Course Guide and what is approved at validation, and responsibilities for preparing the guides and checking their quality. For uniformity across the University, an electronic template for course Guides should be available on the QA Unit website.

c. Assessment criteria for course assessments should normally be in the Course Guide, but may alternatively be issued to students with the assessment task. Their purpose is to help students understand the attributes of their work for which marks will be allocated, and what is required to pass or achieve good marks for their work.

d. It is the responsibility of the Lecturer to prepare the course Guide. Each Department shall have in place a system to monitor the quality of Course Guides.

1.1.2 Programme Guides

The purpose of Programme Guides is to help students to:
i. Understand the aims and outcomes of the programme and the standards that they are expected to achieve to complete it successfully.
ii. understand how the separate courses of the programme contribute to its overall aims, the themes which run through the programme as a whole, and any pre-requisites or decision points in terms of options and award paths
iii. Understand the teaching and learning approaches used.
iv. plan their work with knowledge of the overall assessment workload for a semester
v. understand programme-specific regulations, and other programme-specific information
vi. know who to contact for academic, personal and administrative advice,
vii. Know how to access and benefit from relevant learning resources and support services.

viii. The Programme Guide must be compatible with the programme specification and may cover the whole programme, or may be issued for each year or level.

ix. It is responsibility of the Programme Department to prepare the Programme Guide, with support from the Programme Administrators. Each Department should have in place a system to monitor the quality of Programme Guides.

1.1.3 The Student Handbook
The purpose of the Student Handbook is to help students:
i. Understand the University's regulations and codes of behaviour,
ii. Recognize and accept their own responsibilities,
iii. know what University services are available, and any requirements which users must satisfy,
iv. know procedures for complaints, appeals and claims for mitigating circumstances,
v. The Student Handbook is prepared by Dean of Students. At registration students sign a declaration that they agree to be bound by the University's regulations.

1.1.4 Support Department Information

Information prepared for students by support departments aims to help them to:
i. make good use of services or resources or administrative procedures;
ii. Understand the rules for use of the services, and their responsibilities towards other users.

The Academic Registrar's office shall produce a range of information to help students develop or improve skills for learning; these could include the programmes for specific skills development in areas such as research, academic reading and writing.

The Library shall provide extensive information describing the resources available and how to use them.

The Dean of Students shall publish a student web page should also contain all above information, to improve information accessibility.

1.2 Information for Staff

The Quality assurance unit shall produce a regular University newsletter and a report on the state of quality standard as applied in Makerere University.

Similarly, Faculties/Schools/Institutes shall produce accurate and accessible information for staff assists them to:

a) understand their role,
b) understand University and Faculty/School/Institute/Departmental policies and procedures within which they must work,
c) give students advise which is consistent with University regulations,
d) know where to obtain advise on University policies, procedures and services,
e) understand the University's strategies and priorities,
f) to disseminate quality assurance practicess.

1.2.1 Faculty Handbooks and Websites

The scope of a Faculty Handbook is determined by the Faculty; they are intended to help staff understand their role in relation to:

i. University and Faculty operational systems,
ii. Programme and course management responsibilities within the Department or Faculty.
iii. Faculty and Department policies and quality assurance systems – for example, for checking Programme Guides, moderating assessed work, giving students feedback etc.
iv. The Dean/ Director/ Principal of the Faculty/ Institute/ School, or his/her nominee, is responsible for updating the Academic unit Handbook, and for ensuring that it is available to all staff in the Unit (including those newly appointed during the academic year) and to Heads of Support Departments which interact with the Academic Unit.

1.2.2 Assessment Calendar

A calendar detailing the dates by which functions associated with assessment must be completed is approved annually by the Faculty Academic Board on the advice of the Quality Unit, and circulated to all academic and relevant support staff. The purpose is to help academic and support staff to:

i. know their own responsibilities in relation to assessment,
ii. plan their workloads and fulfil their responsibilities within a timescale which enables internal and external moderation and compilation of data required for Academic Boards and for monitoring.

1.2.3 Academic Regulations

The Academic Regulations for Research and Taught Programmes, approved by Senate, enable staff to:

i. Understand the regulatory framework within which courses and programmes operate and admission and assessment decisions are taken,
ii. Advise students appropriately.

1.2.4 Policy statements

Policies and Procedures, approved by the Senate and Council, and Appointments and Promotions Policies, are from time to time published by University Academic Registrar, Student Guild or the Human Resources Department. Key policy documents should be issued to all new staff at the time of appointment.

1.2.5 Guidance on quality assurance and maintaining academic standards

Quality Management Handbook which can be derived from this report is published by the Quality Unit. The handbook should cover:

    i.   guidelines on course or programme validation and review;
    ii.   guidelines on exploring collaboration and approving collaborative   programmes;
    iii.   guidelines on academic irregularities;
    iv.   guidelines on appointing external examiners;
    v.   information for external examiners;
    vi.   Guidelines on examination conduct.

1.2.6 Teaching Quality Information

Makerere University Quality Assurance Unit shall be required to gather internally, as follows:-
    i.   quantitative information on the student profile at entry,
    ii.   data on student progression and non-completions,
    iii.   data on class of first degree achieved by students,
    iv.   data on graduates entering employment and further study
    v.   a commentary on the above data (optional),
    vi.   a commentary on how summary external examiner reports are structured,
    vii.   summaries of external examiner reports,
    viii.   a summary of the University's Learning and Teaching Strategy,
    ix.   a summary of how the University identifies employer needs,
    x.   reports of periodic internal reviews,
    xi.   Programme specifications.

The publication of information provided is managed by the Quality Unit.

1.2.7 Information Centre

The university should create an information centre which is closely linked to sources of information. This centre will process, store and disseminate information to staff, students and members of the public. This will act as one stop centre for information which is currently sought from various units. The information centre will be managed by the Quality Assurance Directorate in liaison with the office of the Vice-Chancellor.

2.0 MAINTENANCE OF HIGH QUALITY RESEARCH AND POSTGRADUATE PROGRAMMES

High quality graduate education depends upon the professional and ethical conduct of the participants. Academic staff and graduate students have complementary responsibilities in the maintenance of academic standards and the creation of high quality graduate programs. Excellence in graduate education is achieved when both Academic staff and students are highly motivated, possess the academic and professional backgrounds necessary to perform at the highest level, and are sincere in their desire to see each other succeed.

2.1 Precepts and General Principles

A major purpose of graduate education at the Makerere University is to instil in each student an understanding of and capacity for scholarship, independent research, critical thinking skills, and intellectual honesty.

2.1.1 The following essential framework is to guide graduate education.

1. Appropriate policies, procedures and regulation are in place for the student admission, selection and assessment at postgraduate level. These are communicated to all Postgraduate students and academic and administrative staff and implemented consistently across the institution and programme.

2. If alternative admission processes are to be applied to the programme, provide a description of these. Include a statement of the number of students to be accepted via this route and support mechanism in place to assist students admitted via the route. Plans to provide support for students admitted to postgraduate programs via alternative routes should include crosscutting support on research methodology, ICT Skills, statistical analysis, etc.

3. Profile of proposed supervisors (CV's details of supervisors experience, details of academic/research standing/stature). The selection and appointment criteria in place for Postgraduate supervisors are acceptable to the research community in the area of study. These include the following:

    3.1 The supervisor has a qualification in a relevant filed of study higher than, or at least at the same level as, the exit level of the Postgraduate programme he/she is supervising.
    3.2 The supervisor has an appropriate research track record, as well as experience, expertise and peer recognition in the filed of study.
    3.3 In the case of inexperience or new supervisors, there is on going staff development and support and joint supervision is explored as an option.
    3.4 Plans in place for the training of inexperience supervisors.
    3.5 Training completed/proposed by supervisors.
    3.6 Institutional regulations on supervisors/student contracts.
    3.7 Example of contract between supervisors and students.
    3.8 Plans for monitoring student progress and relationship between supervisors and students (e.g. kinds of progress reports required, frequency, complaints procedure).
    3.9 Polices on ethics, code of conduct, plagiarism, Intellectual Property Rights and confidentiality where appropriate.

3.10 Description of monitoring mechanisms for supervisors and student progress. Explicit guidelines exist on the roles and responsibilities of supervisors and students and other matters relevant to the performance of research. These include the following:

    i. The nature format and expected turnaround time for work submitted to the supervisor.

    ii. Forms of assessment and the communication of feedback to the student which include:

        a) The periodicity of contact between student and supervisor, the schedule for the submission or progress reports and written work.

        b) Research ethics, code of conduct, regulations on plagiarism and intellectual property rights.

        c) Examination and qualification requirements

4. Provide details on policy and practices regarding assessment of the dissertation/thesis/research report, does it specify?

    i. Appointment procedure for examiners.

    ii. The arrangements for communication with examiners.

    iii. How the examination process will be conducted.

    iv. How and in what format the thesis/dissertation is to be made available to examiners.

    v. How the examiners reports are handled.

    vi. Dispute procedures.

5. Stated requirements in relation to the award of the qualification./ What are the specifications regarding the award of the qualification.

6. All these to be included in postgraduate handbooks.

2.1.2 As a community of scholars, graduate students shall:

1. Conduct themselves in a mature, professional, and civil manner in all interactions with staff.

2. Recognize that the Academic Supervisor/advisor provides the intellectual and instructional environment in which the student conducts research, and may, through access to teaching and research funds, also provide the student with financial support

3. Recognize that Academic staff have broad discretion to allocate their own time and other resources in ways which are academically productive.

4. Recognize that the research supervisor /advisor is responsible for monitoring the accuracy, validity, and integrity of the student's research because careful, well-conceived research reflects favourably on the student, the faculty advisor, and the University

5. Exercise the highest integrity in taking examinations and in collecting, analyzing, and presenting research data.

6. Acknowledge the contributions of members of the research team to the student's work in all publications and conference presentations.

7. Maintain the confidentiality of the faculty advisor's professional activities and research prior to presentation or publication .

8. Take primary responsibility to inform themselves of regulations and policies governing their graduate studies.
9. Devote an appropriate amount of time and energy toward achieving academic excellence and earning the advanced degree.
10. Be aware of time constraints and other demands imposed on Faculty members and program staff.
11. Take the initiative in asking questions that promote understanding of the academic subjects and advance the field.
12. Communicate regularly with faculty advisors, especially in matters related to research and progress within the graduate program.

2.1.3 In like manner, the Lecturers and Supervisors of Graduate Students shall

1. Create in the classroom, lab, or studio supervisory relations with students that stimulate and encourage students to learn creatively and independently
2. Familiarize themselves with policies that affect their graduate students.
3. Provide clear maps of the requirements each student must meet, including course work, research tools, examinations, and thesis or dissertation; and delineate the amount of time expected to complete each step.
4. Evaluate student progress and performance in regular and informative ways consistent with the practice of the field
5. Help students develop artistic, interpretive, writing, verbal, and quantitative skills, when appropriate, in accordance with the expectations of the discipline
6. Assist graduate students to develop grant writing skills, where appropriate
7. Take reasonable measures to ensure that each graduate student initiates thesis or dissertation research in a timely fashion, when appropriate, encourage graduate students to participate in professional meetings or perform or display their work in public settings
8. Create an ethos of collegiality so that learning takes place within a community of scholars
9. Counsel students on career and employment opportunities.

2.2   Graduate Student Selection

The selection process ideally should match the knowledge, interests and skills of applicants with the requirements and characteristics of graduate programs and the research and training interests of their faculty.

2.2.1 Best Practices in Graduate Admissions

1. The ultimate goal of the admissions process is to enrol top quality graduate students who can complete the program and contribute to research and professional achievement.
2. Policies and procedures should facilitate, not impede, reaching this goal. University graduate admission baseline standards, including a bachelor's degree with minimum

grade point average, standardized tests and language requirements, and administrative procedures, including requirements for Faculty admissions committees and record-keeping, need to be clearly articulated and widely disseminated.

3. Best graduate admissions practices require timely and complete communication with applicants and responsible action on the part of Graduate School staff, departmental graduate advisors and admission committee, and student applicants.

2.2.2 School of Graduate Studies

The graduate school, as the only office on campus with the authority to provide official admission offers to new graduate students, has the responsibility to ensure that the admission process is completed fairly on behalf of the prospective graduate student. As such, it is the responsibility of the Graduate School to:

i. Approve departmental and college admission procedures, including requirements for admission committees and record-keeping. These procedures should be consistent with university governance and subject to review by appropriate university governance bodies.

ii. Provide all students with accurate information about the costs they will incur during the course of their graduate study

iii. Receive information about applicants in confidence and respect the private nature of these data consistent with federal, state, and local statutes.

iv. Accept and deem official only those transcripts issued by the registrar's office of the institution(s) or other agencies the candidate currently attends or has attended.

v. Inform candidates promptly and in writing if they are clearly inadmissible.

vi. Review any offers of admission when candidates have not submitted an application, turned in required credentials, nor met admission standards established by the University.

vii. Provide, in a timely manner, an official offer of admission that includes all terms and conditions of the offer

viii. Establish and publicize a minimum set of documents required for consideration of any applicants.

ix. Inform students promptly about new or changed admission requirements, especially those which may adversely affect applicants. Ensure that applicants are required to meet only those admission criteria in force at the time the application was received.

x. Develop and maintain web-based inquiry, application, status and test score transmittal system and provide appropriate system training.

xi. Encourage applicants to fulfill their responsibilities in the admission process, including: a) complying with requests for information in a timely way, and b) responding to institutional deadlines when required to do so.

xii.   Inform applicants that, as stipulated in the Council of Graduate Schools *Resolution Regarding Graduate Scholars*, *Fellows, Trainees, and Assistants,* admitted students with an offer of financial support have until April 15 to make a decision on acceptance of the offer. The Graduate School should make departmental advisors, admission committees and applicants aware of this rule.

2.2.3   Graduate Advisors and Admission Committees

The goal of graduate admission at the college, program, or departmental level is to enrol top quality graduate students who can complete the program and contribute to teaching, research and professional achievement. It is the responsibility of directors, advisors and admission committees to:

i.   Establish, maintain, and publicize appropriate admission and selection criteria and ensure that all stated admission criteria are used in admission decisions.

ii.   Appropriately carry out any tasks related to admission decisions, including timely communication with the Graduate School about recommendations for admission and funding.

iii.   Ensure that recruitment and admission policies are consistent with stated university goals of maintaining and improving the quality of graduate programs and increasing student diversity.

iv.   Utilize available and appropriate websites to communicate graduate program information to prospective students and to publicize admission processes and selection criteria.

v.   Attempt to match the knowledge, interests and skills of applicants with the requirements, characteristics and capacity of graduate programs and the research and training interests of their faculty.

vi.   Periodically assess the effectiveness of admission procedures and appropriateness of admission criteria.

vii.   Receive information about applicants in confidence and respect the private nature of these data consistent with federal, state and local statutes. Retain confidentiality in departmental admission and financial support deliberations.

viii. Process applications and respond to inquiries in a timely manner, with attention to stated and relevant deadlines.

ix.   Provide applicants with realistic assessments of current and future prospects of financial support.

x.   If waiting lists for admission or financial aid have been established, ensure that they are a) reasonable in length; b) maintained for shortest possible time periods; and c) not dependent upon a deposit being received nor an enrollment commitment being made until an official offer of admission is issued.

2.2.4   Students
Applicants should seek admission to graduate programs that can assist them to develop their abilities, interests, and skills and can effectively place them in appropriate occupational or educational situations. It is the responsibility of applicants to:

1. Seek detailed information about program content, admission procedures, selection criteria, and financial and other resources at all universities to which they seek admission

2. Conduct themselves in a mature, professional, and civil manner in all interactions with Graduate School Admission staff, graduate advisors, and admission committees throughout the application and admission process.

3. Recognize that the Graduate School and graduate programs have distinct roles and procedures in the graduate admission process.

4. Recognize that, at The University of Toledo, each graduate program has its own set of admission requirements and selection criteria.

5. Comply with requests for information in a timely way, and respond to institutional deadlines when required to do so.

6. Comply with the stipulation of the Council of Graduate Schools *Resolution Regarding Graduate Scholars*, *Fellows, Trainees, and Assistants* that admitted students with an offer of financial support make a decision on acceptance of their offers by April 15th.

7. Accept no more than one offer of admission or financial support and notify the graduate school of this decision in a timely manner. The acceptance of an admission slot or financial support signifies a firm intention to matriculate at the university and to undertake work associated with the commitment from the university of financial support. In unusual circumstances, when students find that they cannot complete these commitments, they should notify the Graduate School and the appropriate academic unit immediately.

2.3   Program of Study
Graduate education is intended to answer the personal needs of students and the special needs of society not satisfied through undergraduate training. Graduate degrees programmes should indicate that the holders have sufficiently mastered a program in a particular field to pursue creative projects in that specialty. The degrees are awarded for completion of a coherent program -- formalized as the program or plan of study -- designed to assure the mastery of specified knowledge and skills.

2.4   Continuous Graduate Registration Requirement
After completing all Course work courses included in the planned programs or plans of study for degrees, all graduate students must remain continuously registered in each regular semester up to and including the semester in which their degree programme are awarded.

i. Filing applications for graduation initiates degree checks in the Graduate School Office. The students and their Supervisors receive a graduation checklist which indicates any deficiencies the students must clear. Students should contact their Supervisors if there are questions about the checklist. The application for graduation also places candidates' names in the graduation program. In addition, when completion of degree requirements have been certified by the Director graduate school, the Academic Registrar's Office authorizes the Degree Award order.

ii. Specific deadlines for all graduate requirements are announced in the schedule of the academic year. Students are responsible for being aware of and meeting these deadlines. The registrar will certify degree completion if students' academic records (transcripts) show that they have completed all of the requirements listed on the approved program/plan of study.

2.5 Regulatory Obligations and Quality Assurance

Chairpersons of Faculty Graduate Studies and Research committees must become familiar with University rules, regulations, policies, and procedures below:

(a) Each applicant recommended to the Board of Graduate Studies for admission must meet the formal requirements for admission, as specified in the relevant rules including the University's minimum requirement

(b) The proposed research project must be appropriate for the degree and must be able to be completed within the maximum time limit for the degree.

(c) The Department/school/faculty/Institute must be an appropriate academic location for the proposed research, and appropriate resources (including fieldwork funds) and physical facilities must be able to be provided and maintained through the research period.

(d) All statements made by a candidate and/or supervisor through the regular reporting procedures established by the University must be validated by the signature of the Head of Department. Any issues raised for the attention of the Head of Department should be followed up with the candidate, supervisor or the Director of the School of Graduate Studies as appropriate.

(e) Supervisors must be made aware of the requirement to keep the School of Graduate Studies, via the Head of Department, of Variation to Candidature or any changes to circumstances which might impact on a supervisor's ability to supervise via the Head of Department.

(g) Supervisors must be made aware of their responsibilities toward research candidates and assisted to ensure they fulfil all academic and administrative requirements promptly and satisfactorily.

2.6 Graduate Research Community

(a) Appropriate opportunities should be provided, by way of seminars and the like, for candidates to develop their skills at presenting their work, and to be integrated into a cohesive group. Supervisors and candidates should be encouraged to attend.

(b) Candidates and supervisors should be encouraged to participate in other appropriate training activities, such as Workshops in the University.

(c) Appropriate opportunities must be provided for candidates to participate in the intellectual activity of the School and to interact with and develop profitable intellectual relationships with one another.

(d) Each candidate must be provided with information about the school, including resource allocation, its staff and other candidates' projects, normally in the form of a school

induction. Candidates and supervisors should also be encouraged to attend University induction activities.

(e) The School should, where possible, facilitate contact between the candidate and other researchers in related areas, including external agency, industry, or other institutional links.

2.7   Supervision and Candidate-Supervisor Relationship

Supervision must be arranged, provided and maintained in accordance with the relevant University rules and the Board of the Graduate Studies. Specific responsibilities in relation to thesis preparation, submission and examination:

(a) At the time of submission, the Head of Department must certify that the thesis is properly presented, conforms to the relevant University rules and is, therefore, prima facie, worthy of examination.

(b) Examiners must be nominated and recommended to the Board of the Graduate Research, School or Faculty, as appropriate in a timely fashion, and normally three weeks prior to submission of a thesis for examination.

2.8   Grievances and Appeals

(a) An appropriate School Of Graduate studies procedure to deal with situations which might be perceived as involving conflicts of interest- including incidences where the Head of the Department is a candidate's supervisor, These provisions must exist and candidates must be made aware of them.

(b) An appropriate School procedure to deal with unresolved conflicts between supervisor(s) and candidates and this must be known by all candidates.

2.9   Deposit of Theses/ Dissertations (T/Ds) with Library:

After the candidate formally defends the T/D before their supervisory committee, the committee members sign the approval page of the T/D. The candidate then makes any final revisions requested by committee members at the defence and prints two copies on archival quality, as specified in the formatting guide. The final step in the process is deposit of these two, unbound copies of the T/D with the University Library. Theses and Dissertations must be published on microfilm

2.10 CODES OF PRACTISE FOR QUALITY IN RESEARCH

2.10.1 Scope and purpose

This Code of Good Practice in Research (the Code) sets out the standards of performance and conduct expected of all those engaged in research in the Makerere University. The University and its researchers have a responsibility to ensure that research is undertaken in conformity with the law and in accordance with best practice. To these ends, the University will provide an environment where good research practice is encouraged throughout its research activities.

The Research Code applies to everyone (University employees, students, and visiting researchers (including those holding Honorary University appointments)) conducting research within, or on behalf of, the University.

The quality of the research itself is assured primarily by external peer-review of the research outputs. In contrast, assurance of the quality of the research processes is achieved by the University's internal Quality Assurance in Research system.

2.10.2 Professional standards

(i) Honesty

At the heart of all research is the need for researchers to be honest in respect of their own actions and in their responses to the actions of others. This applies to the whole range of work encompassed within the research process from the initial formulation of concepts and hypotheses, through methodological and/or experimental design, through analysis of data or ideas, to the publication of results and the acknowledgement of the contributions of others. All researchers must refrain from plagiarism, infringement of intellectual property rights, and the fabrication of results.

(ii) Openness

While recognising the need for researchers to protect their own research interests in the process of planning and executing their research, and the interests of research funding bodies, the University encourages researchers to be as open as possible in discussing their work with other researchers and the public. Once results have been published, researchers should make available relevant data and materials to others on request for appropriate purposes. Researchers should contact Deputy Director Graduate studies for advice about protecting intellectual property rights and their potential exploitation before the release of results by public disclosure.

(iii) Accountability

Researchers must ensure that the research they undertake is consistent with the terms and conditions as defined by the funding body and/or covered by agreements between the University and the funding body. This includes the need to ensure that the research is carried out as defined in the original proposal to the funding body unless amendments have been agreed in writing; that finance is used solely for the purposes for which it was intended unless permission for alternative use has been granted; that reports are both

timely and accurate; and that conditions relating to publication and the ownership of intellectual property are met.

(iv) Conflict of interest
Researchers must be honest about conflict of interest issues whether real, potential or perceived, throughout the research process or when research is sponsored by an organisation that might have a vested interest. This is especially important when reviewing the work of others such as in the assessment of research proposals and in the refereeing and reviewing of papers, articles and books.

(v) Responsibilities
Senior managers in the University are ultimately responsible for the overall quality of research conducted in the University, including compliance with the organisation's research and management policies. The University Board for Research, under the Chairmanship of the Deputy Vice Chancellor Academic Affairs is the primary body where issues related to Research Governance, including this Code, are considered. Faculties' institutes and Schools have a responsibility to ensure a climate of good research practice in research centers, groups or teams, including the development of appropriate research skills. Heads of Schools are responsible for the research conducted within their Schools.
Investigators are also charged with implementing the Code as it applies to their research projects.

All staff and students should have defined responsibilities in relation to the particular project they are engaged on and be aware of those responsibilities. The Strategy for Research and management structure for research in the University should be drawn by the board of research.

(vi) Principles of good research practice
For its part, the University promotes an organisational culture in which high standards of personal conduct and integrity are expected, academic misconduct and fraud are forbidden, and appropriate steps are taken to deal fairly and firmly when misconduct is alleged or suspected. In return, the University requires that all those engaged in research will follow this Code which is an important element of the University's framework for Research Governance .Good research practice includes the following:-

   i.   The clear organisation of, and understanding of the responsibilities for, the overall quality of research throughout the University with senior managers and Senate and Council carrying the ultimate responsibility.
   ii. Competence in those carrying out the research and supervision of those being trained to the required competences in order that their contribution is not compromised by inexperience.
   iii. Awareness of and compliance with relevant Health and Safety regulatory requirements.
   iv. Maintenance of professional standards; ensuring ethical approvals are obtained and guidelines followed; questioning one's own results and conclusions; acknowledging and attributing appropriately the work of others.
   v.   The careful planning of research programmes, rigorous analysis and interpretation of results including statistical methods where appropriate.

vi. The documented operation, maintenance and calibration of equipment used in the research.
vii. The appropriate use of document control procedures.
viii. The preparation and regular updating of standard operating procedures, methods and protocols.
ix. The identification, storage and documentation of samples and research materials.
x. The maintenance, storage and appropriate archiving of samples and other research materials the authorization, securing and storing of primary data and results.
xi. Openness in the dissemination of work and the making available to others the data and materials where appropriate.

(vii) Appropriateness of research Funders
The University reserves the right to withhold permission for its staff to engage in research Contracts with certain funding bodies. In certain cases, permission may need to be obtained from the Vice Chancellor.

(viii) Ethical approval
Ethical approval must be obtained for all research that falls within the scope of the Ethics and Research Committee. The Deputy Director Graduate Studies (Research) is responsible for ensuring that they have procedures in place and that all projects undergo ethical scrutiny.

(ix) Misconduct
The University has specifically identified research misconduct as a disciplinary offence under its general disciplinary procedures as they apply to staff and students, and it will act accordingly in respect of such misconduct under those procedures. Research misconduct which is misconduct arising in the course of research or its reporting includes:
i. Fabrication or falsification of results
ii. Plagiarism, misquotation or misappropriation of the work of others including the unethical use of material provided for review or assessment.
iii. Research misconduct also includes any misconduct which brings the name of the University into disrepute.
Any member of the University wishing to initiate disciplinary action on the grounds of research misconduct is advised to consult the Deputy Director graduate studies in charge of research Services in the first instance on the appropriate procedures in the circumstances of the particular case.

2.10.3 Guidelines for Approval of Research:
The office of Deputy Dean –Graduate Studies and Research in consultation with the School of Graduate Studies shall give guidance on the following:-

i. The quality of management systems in research;
ii. The evaluation of researchers – their standing within a discipline;
iii. The evaluation of research proposals, projects and output;
iv. The extent to which research programmes develop capacity–human resources;
v. The extent to which resources are mobilized to contribute to the quality of life of people;

vi. The extent to which resources are mobilized to contribute to generation of wealth in the community;

vii. The extent to which research programmes strive for excellence.

2.10.4 Guidelines for Evaluation of Research

The evaluation of researchers and their output is very much a matter of peer review. Guidelines for reviewers need to be drawn up but the following issues should be taken into account:

i. How the individual stands in a field of study;

ii. The impact of the work done;

iii. The impact factor of the journal/s in which research is published;

iv. The quality of researchers output; normally the volume of output does not reflect quality or value of output;

v. Output in the dramatic and performing arts cannot be assessed in the same manner as that in more formal disciplines; and

vi. Notions of quality, value and relevance of research are context derived.

3.0 COLLABORATIVE PROVISION ON QUALITY AND STANDARDS

This section is intended to provide an overview of the University's Precepts, Principles and Guidelines on collaboration with other organizations or interdepartmental collaboration in offering taught programmes, the process for approving such partnerships, such as joint awards, affiliation and the regulations on collaboration. The principal purpose in developing such links with other education provides in Uganda and elsewhere, is the enrichment of educational opportunity and experience, although the University also regards income generation as a legitimate rationale for collaboration.

3.2 Models of Collaboration in Makerere University

3.2.1. Cooperation/Partnership

Cooperation/Partnership presupposes collaboration and/or cooperation, which exist between friendly institutions to create an enabling environment in which students and academic staff are willing to participate. Therefore, collaboration/partnership with a purpose has to be backed up by cooperative understanding between institutions.

An example of cooperation/partnership is a Joint Award of a qualification in a University System. It means an award following jointly executed: teaching, supervision and examination or all such multi-disciplinary responsibilities between more than one Department in Makerere University and other relevant and recognized Universities. A Joint Award presupposes that collaboration/co-operation exists between the partner institutions to create an enabling environment in which students academic staff and other stakeholders are willing to participate.

The purpose of cooperation/partnership is two-fold:
  i. To utilize related and relevant expertise towards a course, Degree Award or closely related specialities.
 ii. To establish partnerships between different Universities for their mutual benefits in terms of:
      a. Human Resource Utilization,
      b. Technological Advantage,
      c. Comparative Resource advantage,
      d.   Research Cooperation,
      e.   inter-disciplinarily of knowledge,
      f. Attracting funding,
      g. Partnership with the Private Sector
      h. Situational uniqueness for training others and for research.
iii. Therefore, Cooperation/Partnership would:
      a. Promote Mutual Learning
      b. Strengthen Collaboration through research sharing
      c. Yield nation and international visibility by excellence in research on global issue.

3.2.2. Affiliated Institutions

Affiliated Tertiary Institution or College means the Tertiary Institution or College established under Section 71 or 111 of the Universities and Other Tertiary Institutions Act, 2001.

The Universities and Other Tertiary Institutions Act, 2001 under Section 71 empowers a Tertiary Institution as defined under that Act to affiliate with a Public University upon satisfaction of basically two conditions, as follows:

Before any institution is approved to affiliate with Makerere University, the Senate must satisfy itself under section (1) of statute XI with the following:-

1. that a College, Faculty, Institute or School in the University is in position to administer in like manner as the internal awards, the external award or awards of the University for which affiliation is sought.
2. That the institution is recognized by the National Council for Higher Education under the Universities and Other Tertiary Institutions Act of 2001 as amended by Act No. 7 of 2003
3. That the institution is established on a permanent basis under the laws of the country in which it is situated and is recognized by the National Council for Higher Education.
4. That the members of staff who are designated to teach courses for awards of the University have the academic stature and qualifications which are acceptable to the University and have reached such a standard as would be required for teachers of the University.

3.3 General Principles

i. The University should ensure that whenever programmes taught and/or assessed at a partner organization contribute to credit for Makerere University award. Makerere has a responsibility for ensuring that those programmes are equivalent in standard to the same or similar provision at Makerere University.
ii. That the learning experience of students at the partner organization, and the learning support given, is broadly equivalent to that available at Makerere University.
iii. It is the responsibility of Makerere University to know the partner programme well enough, on an ongoing basis, to verify its continuing compatibility with the linked course at Makerere University.s
iv. Managing equivalence plays a vital part in ensuring the quality and standard of collaborative programmes.
v. That the members of staff who are designated to teach courses for awards of the University have the academic statutes and qualifications, which are acceptable to the University and have reached such a standard as would be required for teachers of the University.
vi. Ensure that the fees chargeable for registration, examination, graduation and other purposes shall be determined from time to time by the University Council.

3. 4. Roles and Responsibilities

a) Depending on the experience and maturity of the partner organization, the detailed quality systems applied may to a greater or less extent be those of the partner, agreed with responsible School or Faculty at Makerere University and approved at point of validation or collaborative approval. The partner's detailed

systems (e.g. for student feedback) may be the source of data for summative reports used by Makerere University in monitoring.

b) When the same course is offered (wholly or partly) at Makerere University and at one or more partner organization the quality systems followed should generally be broadly the same in all locations.

c) Responsibility for the management of collaborative links lies mainly with the academic school (s) or faculty/(ies) at Makerere University to which the collaboration is assigned. The principal systems to be followed are normally summarized in the Memorandum of Cooperation between the partners. Detailed arrangements may vary according to the maturity of the partnership, the experience of the partner, the type of partnership, the number of students and programmes involved, the location of the partner, and the extent of cultural difference involved.

d) Facilitating regular discussion of further developments and of ways in which liaison can be improved.

e) Ensuring that the partner sees external examiner comments and feedback on monitoring, and has opportunity to discuss these.

f) Checking annually whether the terms of agreement have been followed.

g) Ensuring that there is a forum for student representation.

h) Working together to ensure that the assessment criteria are clear, and understood in the same way by staff in locations.

i) Monitoring the operation of the partnership.

j) Periodic review of collaborative programmes.

3.5   Internal collaboration between units

Cooperation between units will be promoted especially in sharing of resources to optimise its usage one such area is sharing of human resource.

Joint/Cross Appointment of Academic Staff
3.5.1   Definition
Where a member of staff from other Disciplines or Department offers service in another unit and the service offered could be any scholarly activity like teaching or participation in research.

3.5.2   Advantages
i)   That formalization will lead to solving problems of staff having heavy teaching load.

ii)   That formalization of the service offered by of individuals will also enable it to be recognized by the primary unit and secondary unit.

iii)   That staff members who want to offer service in other units will not be required to resign or ask for transfer service.

iv)   That it will promote interdisciplinary arrangements

v)   That the current staff will be able to continue discharging their duties as well as collaborating with other units.

vi)   That   ultimately Human Resource within the University will be utilized optimally.

vii)   produce a good quality graduate who is versatile,

viii)   Guard against duplication of courses and programmes.

3.5.3 Procedure/Guidelines

i) The Terms and Duties under joint appointment shall be agreed upon by both departments parent/secondary.

ii) That there should be a formal agreement between the parent and service unit in terms of recognition of the service to be rendered and the period in terms of hours per Semester or year.

iii) That the agreement between Units on joint appointment can only be implemented when an official appointment has been issued by the Vice-Chancellor on the recommendation of the parent unit and the secondary unit.

iv) The contract for joint appointment shall range from 2 to 5 years renewable when necessary.

v) The Primary (parent) unit shall remain responsible for handling the appointment and promotion of staff.

vi) Joint appointments should not affect staff establishment (i.e. staff appointment under this arrangement should not fill existing positions).

vii) Joint appointment should not lead to double salary payment on the pay roll. Payment if any should be on the basis of hours offered or honorarium as agreed between departments.

viii) That the rank on which an individual currently holds will be the rank he/she will be appointed to in the secondary unit.

ix) That academic staff in administration (VC, DVC, AA, DVC FA, Deans, Directors and other Administrators etc) may be recommended for promotion or appointment at appropriate level by secondary unit as long as they continue to engage in scholarly work. This is because the administration is not an academic unit.

4.0   QUALITY OF EXPERIENTIAL AND FLEXIBLE LEARNING

4.1 Precepts

Given the emphasis that the University has placed on the quality of the student learning experience, it is essential that academic standards, pastoral care and social life of students are maintained and enhanced where areas for further development are identified in terms of staff development, learning resources, physical environment, flexible learning (e.g. e-learning, i-learning, etc), student assessment and student support.

The term "experiential" is a learner-centred approach involving experience followed by process of reviewing, reflecting, and applying what has been learned. Participatory methods keep learners active in the learning process. They are involving and interactive, and they encourage communication and group work. They are action oriented and experience based. This experiential and participatory approach was chosen to enhance effective skill transfer, to facilitate conceptual and attitudinal development, and to encourage appropriate changes in participants' behavior. The experiential learning cycle is especially useful for skill training because most of its techniques are designed to involve the participants in practicing the skill. The experiential model helps people assume responsibility for their own learning because it asks them to reflect on their experience, draw conclusions, and identify applications. Participants ground the lessons in their actual work environment by considering the question of what can or should be done differently as a result of this training experience. Experiential training seems to mean letting people participate in a presentation, having a question and answer session after a lecture, or a role play or case study.

4.1 Policy Objectives

i.   To enhance staff professional development and performance;
ii.   To enhance students core and employability skills;
iii. To develop a profiling system for students which monitors their skills development;
iv.   To develop further support systems to enhance student achievement;
v.   To enhance learning resources;
vi.   To ensure that quality monitoring and enhancement systems are fit for purpose

4.2   Strategies and Action

a) **To enhance staff professional development and performance, the University shall**
i.   Enhance information and communication technology skills of staff;
ii.   Establish a framework for staff development activities, especially for staff who support student learning to enable them to work effectively;
iii. Make provision for and encourage sharing of good practices across, faculties, institutes, schools, and departments;
iv.   Provide opportunities for staff who support student learning to develop their skills further to enhance student's core and employment skills;
v.   Review and adapt staff induction, mentoring, appraisal, development and reward processes.

b) To enhance students' core and employability skills, the University shall:

i.   Make provision for students' core skills development flexible learning in the delivery of programme of study.
ii. Develop programme specifications for all courses.
iii. Develop a profiling system for students which monitors their skills development
iv. Develop employability skills of students.

c) **To develop support systems to enhance student achievement, the University** shall:

i.   Support learning in the class room,
ii. Make provision for support of students independent and flexible learning,
iii. Enhance the relationship between assessment and learning outcomes,
iv. Enhance pre entry guidance,
v.   Enhance student orientation exercise,
vi. Enhance on-course guidance including general welfare support and personal tutoring,
vii. Enhance specialist support.

d) **To enhance learning resources, the University shall:**

i.   Improve the physical environment,
ii. Enhance the use of ICT support of teaching, learning and assessment,
iii. Use ICT to provide more flexible learning opportunities for students and to maximize the teaching time resource for activities which directly supports students learning needs.

e) **To ensure that quality monitoring and enhancement systems are fit for purpose, the University shall:**

i.   Adopt current monitoring and review systems so that they better take account of the student experience and student feedback,
ii. Ensure that high academic standards are maintained.

4.3 Responsibility for Implementation, Monitoring and Evaluation

Since the strategy is an emerging one, the activities tend to concentrate entirely, although not exclusively, on the early stages of the planning period to which the strategy applied.

a) University level

The University Quality Unit and senior management Team will have responsibility for the overall strategy. The universities Academic Programme and Library Committee which includes representatives from academic units as well as relevant support services will be charged with the maintenance, further development, monitoring and evaluation. The Deputy Vice Chancellor Academic Affairs will have the individual responsibility for ensuring that the committee fulfils this task.

The University will make available the Learning and Teaching Strategy on the intranet to assist in consultation on the emerging versions of the strategy, and to ensure communication of the final version.

b) Faculty/School/Institute and Departmental level

Faculty /Institutes/Colleges and Schools' learning and Teaching plans will be developed in the light of the University's learning and Teaching Strategy and will be approved by Senate. These plans will not only serve to provide further details of the implementation of the current strategy but will also inform its further evaluation and review.
Departments (i.e. support services including property services) will be requested to consider the learning and Teaching Strategy along side the Strategic Plan when establishing their own Departmental plans.

c) Individuals

Roles of Heads of Departments/Subject areas will be defined which reflect their responsibilities in respect of contributing to the implementation of the strategy and monitoring its effectiveness. All staff who support students in their learning will be expected to be aware of the strategy and how it impacts on there area of work, and to act accordingly. All staff will have the opportunity to contribute to the development of the strategy and will be consulted about it as indicated in 5.1 above.

4.4   QUALITY ASSURANCE SYSTEM FOR DISTANCE LEARNING

It is University policy to promote Distance Learning as a mode of increasing access to higher education.

4.4.1   The Distance Learning entity will be represented in the University-wide planning process producing strategic plans. From this the Distance Education (DL) Entity will undertake a strategic plan, based on an agreed cycle. This plan, and the process required to complete it, will be a participatory and will ensure that the DL plan is consistent with the University plan.

4.4.2   The DL Entity Strategic Plan will be reviewed annually where progress will be evaluated against planned objectives and activities. Appropriate adjustments will be made to the plan.

4.4.3   Each component (section) of the DL entity will develop annual plans consistent with the entity 's Strategic Plan.

4.4.4   The DL Entity will constitute, from its staffing ranks, a Management Team which will comprise the Head of the entity and Heads of entity sections, as well as Learning Centre Co-ordinator representatives/s. Monthly meetings of the Team will consider reports from all sections against section plans using as agreed format.

4.4.5   The DL Entity will undertake regular monitoring of delivery and management systems, involving:

(a)   Materials effectiveness (against agreed criteria)
(b)   Student retention and completion rates
(c)   Assignment completion and return rates (against agreed criteria and marking turnaround time)
(d)   Examination marking
(e)   Entity budgeted and planned activities implementation.

4.4.6   The DL Entity will review all learner materials used against agreed criteria and using an agreed time cycle (4-6 years.)

4.4.7   Before introducing any new courses or programmes the DE entity and collaborating Faculty will undertake an appropriate Needs Assessment.

4.4.8   Appropriate DL methodology training will be provided, both initially and on-going, to all staff involved in DE delivery. Such staff training will be reflected in the DE Entity budget. Training will include:

(a)   DL materials development and writing
(b)   DLassignment and examination marking
(c)   Use of ICT's in DL
(d)   Distance Learning facilitation methods

(e)   Support for, and communication with, the DL learner
(f)   Record-keeping, monitoring and evaluation in DL
(g)   Other areas as appropriate.

4.4.9   Where appropriate and relevant, staff should be provided with staff development opportunities to undertake further, supported Programmes/s of study which will strengthen the individual, entity and institutional skills-base.

4.4.10 The DL Entity will require all professional staff to undertake research in DL, focusing on effectiveness of the delivery models being used and its management.

4.4.11 The DL Entity Quality Assurance Committee will work with the main Quality Assurance Committee (in line with the University Quality Assurance Policy) to establish appropriate quality standards (benchmarks) and practices for DL and undertake appropriate and regular, reviews of this.

5.0   EXTERNAL EXAMINING

External examining is one of the ways of ensuring academic excellence in Universities. Under this arrangement, external examiners are engaged to evaluate the program content and the process of student assessment. . External examiners reports act as reference points against which the university may be evaluated and accredited. It is an assessment tool used to measure the academic standard of staff and graduates of a particular university.

5.2 General Principles

In general, external examiners are expected to comment on the validity of the assessment instruments, the quality of student performance and the standard of student attainment, the reliability of the marking process and any concerns or irregularities with respect to observation of the University regulation. Therefore the conduct of external examinations at Makerere University is governed by Senate regulations. The following are the General Principles that should guide the external examination process:

a) To provide external and unbiased evaluation of the fairness and suitability of the University's student assessment process in line with Senate regulations

b) To verify that standards of student performance are appropriate for the award for which the external examiner has been appointed

c) Verify that the student assessment methods are r**eliable or precise** (will produce similar results if repeated with students of comparable standard and comparable circumstances and similar assessors); **valid** (measures the competence it is intended to measure); has **educational impact** (it promotes appropriate student learning behaviour; is **acceptable** to all assessors and students; and is **feasible** within the resources available

d) Work with the University to uphold the high academic standards of its programmes and awards

e) To compare the academic standard of the University with those of similar institutions

f) Write a report detailing his/her observations, conclusions and recommendations to the Deputy Vice-Chancellor (Academic Affairs) who will submit it the Quality Assurance Committee for consideration and action.

g) External Examiners should be identified for each academic programme by the respective departments and nominations forwarded to the Faculty Board for consideration and recommend appointment to Senate. Senate should appoint external examiners or the Deputy Vice-Chancellor (Academic Affairs) on behalf of Senate.

h) The principles and guidelines on external examining should be made public so that they can be accessed by students, staff and other stakeholders

i) The University should create audit mechanisms to ensure that external examiners are invited annually for each academic programme.

5.3 Roles and Responsibilities for External Examiners

The principle roles of external examiners include:

a) To verify that standards are appropriate for of each unit of study and to provide independent impartial comment on standards set and student achievement of those standards. The capacity to fulfil this is based on knowledge of standards set and

achieved in other higher education institutions, of subject benchmark statements and where applicable of the expectations of Professional and Statutory Bodies or co-awarding bodies.
b) To verify that the process of deciding assessment outcomes for individual students is fair, fairly operated, and in line with the University's regulations

Arising out of the principle roles of external examiners the specific roles and responsibilities of external examiners are given here below:

1. Make judgements independent of the internal examiners
2. Have powers to recommend to the Faculty Board the adjustment of marks for individual or all students examined
3. Have access to the assessed parts of the programme (student scripts and coursework)
4. Determine the method and extent of sampling of students' work to scrutinize
5. May recommend to the Faculty Board for the remarking of a student's script
6. Select students for and determine to nature of VIVA VOCE
7. Check cases of suspected cheating
8. Endorse mark and pass lists before they are published
9. The external Examiner should in specific cases the extent to which medical and other extenuation circumstances were taken into account.

5.4 Nominations and Appointments

An external examiner should have enough recent examining experience, including external examining experience, to assure the Faculty Board and Senate of his/her competence in assessment and understanding of academic standards in a broad higher education context.

The external examiner should be a critical friend so as to offer constructive comments, criticism and suggestions for enhancement in the area of assessment practice. For Makerere University, the external examiner should be an Academic Professor or Senior Lecturer or practicing professional at the rank of consultant or the equivalent.

The process of nomination and appointment of external examiners should be as follows:
a) The head of relevant department through informal contacts establishes willingness and availability of nominee to serve as external examiner and solicits a his/her Curriculum Vitae
b) The academic members of the department study the Curriculum Vitae to satisfy themselves that the nominee has the necessary expertise, experience and seniority to serve as external examiner.
c) External examiners for Undergraduate Programmes are appointed by the University Senate or the Deputy Vice-Chancellor (Academic Affairs) on the recommendation of the respective Faculty Board.
d) External examiners for Graduate Programmes are appointed by the Board of Graduate studies or the Deputy Vice-Chancellor (Academic Affairs) on the recommendation of the respective Faculty Board.

e) External examiners should be appointed for a period of three years with a possible **one year extension**. This will permit arrangements to be made well in advance and avoid delays and last minute rash.

f) Thereafter the same external examiner cannot be re-appointed until a period of one year has elapsed.

g) A former member of the teaching staff of the University will not be eligible for appointment until a period of three years has elapsed

h) An external examiner will not be appointed from a department in which a member of staff of the relevant department at Makerere University is serving as an external examiner or teaching.

5.5 Status of External Examiners

External examiners will be Ex-Officio members of the relevant Examiners' Boards.

a) Information to be availed to the external examiners upon Appointment

The host department will send to the newly appointed external examiner the following information:

i. Programme and course aims, objectives and syllabuses
ii. Copies of past examination papers
iii. Methods of assessment/Marking Scheme
iv. Ways in which marks of individual parts of the examination are aggregated, averaged to produce the final result
v. The method by which the pass mark (cut-off point) at and above which students are pronounced passed and below which they are declared to have failed. The two alternatives are:
   a. **Absolute or Criterion Reference Test** where the pass mark is set and students scoring below that fail regardless of the number.
   b. **Relative or Norm Reference Test** method where the pass mark can vary depending on students' performance.
vi. Proposed dates of departmental and faculty examiners' board meetings
vii. The external examiner should be given a face to face briefing
viii. The route by which external examiners can raise matters that are important and of a sensitive nature is by making a confidential report to the Deputy Vice Chancellor (Academic Affairs)

5.6 Facilitating and Hosting

The following should be done to facilitate and streamline the work of External Examiners:

a) Air ticket and in country transportation arrangements should be made well in advance.

b) The external examiners should be met by University support staff whose role is to collect and deliver External Examiners to their prearranged accommodation.

c) Per Diem or out of pocket allowance should be paid to External Examiners on arrival.

d) Any refunds for transit expenses should be processed in a timely fashion and paid to External Examiners before they depart for home.
e) External Examiners should be given the scripts to look at upon arrival at their accommodation.
f) Payment of examiners' fees is authorized once the reports are received.

5.7 Moderation of Examination Papers

The external examiner should review, moderate and approve all examination papers. Therefore:

a) Draft examination papers should be sent to the external examiners well in advance allowing enough time for them to propose any modifications they feel necessary
b) Draft examination papers should be sent with marking schemes or model answers.
c) External examiners may be invited to propose one or more questions to be included in the examination papers.
d) Dissertations where appropriate will be sent to the External Examiner at least a month in advance.
e) Care must be taken to safeguard the examination against leakage and dissertations against loss
f) Departments should always carry out internal moderation of examination questions.

Access to written scripts and coursework that contribute to the final assessment
External examiners will be given unfettered access to the following:
  i. All marked examination scripts
  ii. All evaluated coursework materials

5.8 Participation in Oral and Clinical Examinations

External examiners are required to participate in oral and clinical examination as follows:

a) Where only a proportion of students are subjected to oral examination, the criteria for selection of those students should be agreed upon with the external examiner in advance.
b) Be involved in the selection of content of the examination, in the marking and making final judgements
c) The external examiner will be allowed to meet with the students examined to assess their opinion on the conduct of the examination process should the need be.

5.9 Participation in Examination Board Meetings

Aware that most of the courses in the fist semester are prerequisites for most of the academic programmes, external examiners will be invited during the second semester examination season and the following will apply:

  i. He/she will attend the main Examiners' Board meetings at which final examination results are reviewed and approved before they are published.

ii. With regard to the conduct of the Examiners' Board meeting a formal minute must be kept noting the following:
  a. Members present
  b. The final decisions taken
  c. In specific cases the extent to which medical and other extenuating circumstances were taken into account
  d. Any general comments made by internal and external examiners

5.10 External Examiners' Reports

External Examiners must annually make a report on the student assessment process to the Deputy Vice-Chancellor (Academic Affairs) with a copy to the respective Faculties and Departments. The report must include answers which to some extent will act as indicators as to whether the students received the knowledge, skills, values expected to be provided by the respective courses. The external examiner's report should be well define and the structure of the report should include the following:
  i. The Curriculum Design and its relevance
  ii. Comparability of the program with those offered in other institutions of Higher Education internationally.
  iii. Variability in the assessment process
  iv. Academic standards of awards
  v. Academic standards of student achievement.

In that respect the external examiner's report will include answers to the following questions:
  a) Were the structure, content and methods of assessment used appropriate and adequate?
  b) How satisfactory was the administration of the examination process?
  c) Was the assessment process appropriate to the course (or subject); **the level students (1st, 2nd or third year or postgraduate)**; and competencies of interest?
  d) Were the examinations sufficiently comprehensive with regard to the programme or course being examined?
  e) Were the materials and facilities used for practicals and clinical examinations appropriate and adequate?
  f) Was the external examiner given adequate access to examination scripts of all borderline candidates and coursework for forming a reasonable opinion?
  g) Was the internal marking appropriate, fair and consistent?
  h) Was the Examiners' Board meeting conducted in an impartial and fair manner?
  i) Was the programme structure, content and objectives well defined and appropriate to the subject matter and the level at which it was taught?
  j) Was the quality of teaching and methods used, as revealed by the examination, effective and appropriate?
  k) Was the general standard of performance of the students satisfactory and comparable to similar institutions?
  l) Was the failure rate acceptable or too high?
  m) Was the distribution of honours comparable to other institutions

The External Examiners' reports must:

a) On completion of the exercise, the external examiner should submit his/her report directly to the Deputy Vice-Chancellor (Academic Affairs) and copied to the respective Faculties and Departments. The Deputy Vice-Chancellor (Academic Affairs) will submit the report to the Quality Assurance Committee for consideration and action.

b) The Quality Assurance Unit should ensure that the respective Faculties and Departments attend to the concerns/suggestions of the External Examiners.

It is important to note that External examiners' reports are part of the University's annual quality assurance audit system.

5.11 Other Roles of External Examiners

External Examiners may be consulted on possible review of existing programmes and the process of external examination for purposes of improving the assessment process.

5.12 Termination of Appointments

The appointment of an external examiner may be terminated by the Faculty Board if the Board judges that the responsibilities of the appointment have not been or cannot be fulfilled in the manner or to the standard which the University requires. Reasons for termination may include, but not limited to:

i. failure to provide reports on the assessment process required by the University;

ii. in the case of an examiner appointed to an Award and Progression Examination Board, inability to attend two successive such boards;

iii. a change in the external examiner's circumstances which brings about potential conflicts of interest which might jeopardize objectivity.

iv. persistent refusal to work within the University's academic regulations;

v. conduct which in the case of an employee of the University would be the subject of disciplinary action;

a) When circumstances arise which are considered as possible grounds for termination of an external examiner's contract, the Chair of the Board of Examiners will notify the Deputy Vice-Chancellor (Academic Affairs) of the relevant details. The Deputy Vice-Chancellor (Academic Affairs) will write formally to the examiner to inform him/her that the termination is being considered and to offer the opportunity for the examiner to explain the circumstances and request that the termination is not effected.

b) The Chair of the Faculty/ School/ Institute Quality Assurance Committee, acting on behalf of the Faculty Board, will take the final decision regarding the termination; the external examiner will be notified in writing of this decision. The Chair of the Quality Assurance Committee will inform the Faculty Board of the circumstances of the case and of its outcome.

6.0 ACADEMIC APPEALS AND STUDENT COMPLAINTS ON ACADEMIC MATTERS

1.2 Precepts and General Principles

a) The University principles have effective procedures for resolving student complaints and academic appeals. Students will have full opportunity to raise individually or collectively matters of proper concern to them without fear of disadvantage and in the knowledge that privacy and confidentiality will be respected.

b) The rights of staff members and students should be taken into account and protected when handling appeals. That there should be policy on protection of information/data regarding appeals.

c) The Academic Appeals procedure form a part of the institutions overall framework for quality assurance. There structures to handle students appeals at every faculty/institute/school. There should be staff student's liaison system/official at every faculty/school/institute. The Dean of students, the health services, academic units should be part of the academic support system for appeals.

d) The University will ensure that its procedures are fair and that the decisions made are reasonable and have regard to any applicable law.

e) The University will address student complaints and appeals in a timely manner, using simple and transparent procedures. Informal resolution should be an option at all stages of the complaints procedure which should operate, in the first instance at the level at which the matter arose.

f) Information on complaints and appeals procedures will be published, accurate, complete, clearly presented, readily accessible and issued to students and staff.

g) Sources of impartial help, advice, guidance, and support will be advertised widely within the university.

h) The complaints and appeals procedures should identify the persons or bodies from whom authoritative guidance may be sought on the applicability and operation of the procedures.

i) Those responding to investigating or adjudicating upon complaints or appeals must do so impartially and must not act in any matter in which they have a material interest or in which any potential conflict of interest might arise.

j) A complaint or appellant should be entitled to be accompanied at all stages of the complaints or appeals process by a person of his her choosing.

k) The documentation should indicate what further internal procedures, if any, are open to a student dissatisfied with the response to a complaint or outcome of an appeal.

l) The University will ensure that where a complaint or appeal is upheld appropriate remedial action is implemented.

m) The University will have in place effective arrangements for the regular monitoring evaluation, and review of complaints and appeals.

n) That academic appeals system should be viewed as mediating arbitration, monitoring process which should go beyond handling the current examination malpractice.

o) The University will keep their monitoring, evaluation and review arrangements under scrutiny, taking into account good practice. That there should be tools or instruments for collecting complaints from students.

6.3 Scope of the Academic Appeals and Complaints System

That the mechanism to handle appeals be categorised as follows;

a) staff student relations
b) Teaching supervision and delivery
c) Assessment
d) Procedures of appeals/complaints
e) Protection of due process
f) Sanctions
g) Rewards
h) Monitoring

If a student has reason to believe that an academic decision reached by the University is incorrect one has in some way been based on incorrect or partial information, a student has a right to appeal against that decision without fear of reprisal or victimisation. The university to deal with an academic appeal seriously, impartially, within in a reasonable timescale and as appropriate, in confidence.

6.3.1 Academic Appeals

The University's general Regulations prescribe two sorts of circumstances in which, or good reason, you may appeal against n academic decision of the University.

(a) Those in which the University suspends or terminates your registration on the recommendation of your Board of Studies. This may results from examination failure or because a students academic progress is considered unsatisfactory (e.g. failure to attend classes or to submit work for assessment).

(b) Those in which the university awards what a student believes is incorrect class or category of degree or other qualification or decides that a student may have not fully satisfied the academic and/or professional requirements for an award.

6.3.2 Grounds for Appeal

These are the grounds on which the University will consider an appeal against an academic decision;

(a) That in reaching it decision the university was unaware of factors which had affected your performance (e.g. family or personal circumstances or ill health), which for valid reasons you had been unable to known earlier.

(b) That there had been mathematical or procedural error in recording or calculating the marks on which a decision was based.

(c) That there had been irregularities or administrative errors in the conduct of an examination or other form(s) of assessment of such a nature as to cause reasonable about the examiners decision.

(d) That you have reason to believe that one or more of the examiners was prejudice or biased.

The University will not consider appeals on grounds other than the above, particularly;

(a) Those made against the academic judgement, properly exercised, or duly appointed examiners, including external examiners.

(b) Those made mischievously or frivolously without justifiable ground.

(c) Those made on the basis of alleged insufficiencies in teaching or supervision or the provision of materials or equipment.

(d) Those based on ill-health or other circumstances which could and should have been reported to the school at the time of their occurrence

(e) Where the general regulations preclude appeals in circumstances in which a student has been allowed to be addressed or to re-present a dissertation or thesis.

6.3.3 Procedures for appeals

a) If a student decides to submit an appeal against an academic decision of the university, he/she should do so within 14 days of formal publication or otherwise receiving notification of the results.

b) The appeal should be addressed to the Dean of students, setting out in writing the specific grounds on which   the appeal is being made. The Dean of student's office will treat any personal information which is received in the course of dealing with students appeal as confidential. Such information will be kept, used and shared where necessary and appropriate with other members of university staff, only for the purposes of investigating and determining the outcome of your appeal.

c) If you require advice on whether you have proper grounds for an appeal or if you need help to present the grounds of the appeal, you can seek assistance from the students guild or from the Dean of Students.

d) In the first instance, the Dean of students will normally refer your appeal to the head of the academic unit for comment and for any further information required to enable it to be considered. On receiving the Faculty/Institute/Schools response, the Dean of students will consult where appropriate with the Academic Registrar and the Deputy-Vice Chancellor to establish whether there are grounds for appeal.

e) If it is decided that the ground for appeal do not accord with those prescribed in the general regulations, the Dean of students will inform the student that decision and the reasons in writing usually within 15 working days of receiving the initial appeal. The appeal will be dismissed and no further action will be taken.

f) If it is decided that the grounds for appeal do accord with those prescribed in the general regulations, the Dean of students will take one of the following courses of action, depending on the grounds of the appeal;

g) In the case of an appeal involving a mathematical or procedural error in calculating your eligibility for an award, he/she will ordinarily consult with the chair of the Board of Examiners. If an error is found then the examiners decision will be amended if appropriate, including the pre-classification of an award.

h) In the case of an appeal involving irregularities in the assessment process, circumstances which had not been known at the time a decision was made or allegations of bias, the matter is referred to Appeals Committee.

i) A student who is dissatisfied with the decision of a Committee may appeal to the Senate Appeals Committee within 30 days from the date of the letter communicating the decision.

j) The appeal shall be in writing addressed to the Academic Registrar and copied to the y Committee stating clearly the grounds of appeal. The Academic Registrar shall acknowledge in writing to the student and Chairperson of Faculty/School/Institute Committee receipt of the appeal.

k) A student who pleaded guilty to an offence before the Faculty/School/Institute Committee shall have a right of appeal only with respect to the penalty.

l) The Senate Appeals Committee shall hear the appeal expeditiously. The student appealing shall be notified in writing of the date when the appeal will be heard and should be given an opportunity to appear before the Senate Appeals Committee and be heard.

m) The Academic Registrar shall officially notify the Faculty Committee that made the decision in the first instance of the date of hearing of the appeal. The Faculty/School/Institute Committee shall have a right of representation.

n) At the hearing of the appeal, the student shall have an opportunity to be heard and the Faculty/School/Institute Committee shall have a right to respond to the student's presentation.

o) The Senate Appeals Committee shall have power on cause being shown to allow the student present additional evidence before it.

p) Where additional witnesses are called they will be subject to cross-examination by the representative of the Faculty/School/Institute Committee. The Faculty/School/Institute Committee may also adduce additional evidence, which may be responded to by the student.

q) The Senate Appeals Committee will then deliberate in the absence of the student and Faculty/School/Institute Committee representative preferably on the date of hearing.

r) The Senate Appeals Committee may confirm, vary or set aside the decision of the Faculty/School/Institute Committee.

s) The Senate Appeals Committee shall take into account the rules of natural justice.

6.3.4 Appeals Committee
a) The appeals committee is composed of members who will not have been directly involved in the universities original decision.
b) It will include student members.
c) The Appeals Committee has authority to determine the way in which it will consider the appeal before it.

6.4 Code of Practice

a) A student appealing and other parties involved in the appeal, have access, prior to the meeting of the committee, relevant papers, including written commentaries on the appeal and responses to the appeal.

b) A student applying will be given adequate notice of the date, time and venue for the meeting and also be invited to attend.

c) The appellant is entitled to be accompanied by "a friend" of his/her choosing during the hearing.

d) The appellant shall be informed in writing of the result of the appeal within 10 working days of the meeting. In case of delay due to need for further investigation notification   should be given.

e) Staff not to sit in judgment of their own cause

7.0   STUDENT ADMISSION, ASSESSMENT AND QUALITY STANDARDS

7.2   Precepts and General Principles

Recruitment documentation informs potential students of the programme accurately and sufficiently and admission adheres to current legislation. Admission and selection of students are commensurate with the programs academic requirements, within a framework of widened access and equity. The number of students selected takes into account the programs intended learning outcomes, its capacity to offer good quality education and the needs of the particular profession (in the case of professional and vocational programs). In order to meet the PRINCIPLES, the following is required as a minimum:

i.   Advertising and promotional materials contain accurate and sufficient information on the programme with regard to admission policies, completion requirements, and academic standards. Marketing and advertising are done properly according to the set regulations and accurate information should be provided about the status of the programme.

ii.   Admission, matriculation exemption etc adheres to legislation.

iii.   The programs admission criteria are in line with the National goal of widening access to higher education. Equity targets are clearly stated as are the plans to attain them. Provision is made, where possible for flexibly entry routes, which include diploma entry scheme and mature age entry scheme and admission of students through these routes should not constitute more than 10 percent of the student intake for the programme.

iv.   Admission requirements are in line with the Degree of complexity of learning required in the programme, within the context of widening access and promoting equity.

v.   Selection criteria are explicit and indicate how they contribute to institutional plans for diversity. The number of students selected for the programme does not exceed the capacity available for offering good quality education. The number of students is balanced against the intended learning outcomes of the programme and takes into account the mode(s) of delivery and the programs components (modules/courses).

vi.   In case of professional and vocational programs, the quality and number of students admitted takes into account the needs of the particular profession. Constant with the appropriate equity consideration.

7.3.   Institutional Information Sources
The following are examples of information sources on student recruitment that should be available at the institution.

i. Copy of the institution and Faculty/School policies and procedures for approval of advertising and promotional material for programs including approval procedures and responsibilities.
ii. The recruitment plan for the programme, with details on strategies to recruit a diversity of students (in terms of region and gender).
iii. The programs advertising and promotional materials.
iv. Institutional admissions and student placement policies.
v. Institutional Access Policies.
vi. Examples of testes, if used as selection instruments (with scoring system)
vii. Interview procedures and selection of panels for interviews (if applicable)
viii. Provide details of professional/vocational specifications in relation to student recruitment, if applicable.
ix. Copy of relevant regulations to be provided or any other vocational specification, if applicable.

Before a new academic programme is started the following information should be supplied with the application:

i. Admission requirements.
ii. Selection criteria and procedure (if applicable)
iii. Expected enrolments.
iv. Fees structure

7.4 University Assessment System

9.4.1 Principles

i) The institution has an assessment policy and clear and effective procedures for its implementation. The policy and its procedures ensure academic and professional standards in the design, approval, implementation and review of assessment strategies for programmes and modules, and for the qualifications it awards. In order to meet the criterion, the following are examples of what would be expected:

ii) Guidelines or regulations for the following: formative assessment, provision of feedback to students, weighting of class marks (continuous assessment) and examinations, security procedures, disciplinary and appeals procedures, regulations for marking, grading, aegrotats, retaking examinations, condoned passes, etc.

iii) **Responsibility** allocated for the implementation of institutional assessment policy to Faculties/Schools/Institutes and departments/. The assessment decisions by the committees/boards at these levels are validated by The Senate through its Examination committee.

iv) At the programme and course/module level, **assessment is systematically and purposefully** used both to generate data for summative purposes (grading, ranking, selection, predicting) and also for formative and diagnostic purposes, such as providing time-outs feedback to inform teaching and learning.

v)   Effective monitoring of assessment practices: This should take place at the management level. The institution has efficient internal and external procedures to moderate and validate its assessment procedures and results, in order to ensure their reliability and to ensure the integrity of the qualifications it awards.

vi)   Reliability of Assessment Practices: The principles, procedures and practices of assessment are explicit, fair and consistently applied throughout the institution.

vii)   Rigour and Security of the Assessment System: Assessment is conducted rigorously within a framework of institutional/ Faculty/Professional rules and regulations governing assessment.   Security arrangements in relation to recording and documenting assessment decisions are in place to ensure the credibility of outcomes.

viii)   **Recognition of Prior Learning (RPL):** The institution has a policy and effective procedures for recognising prior learning and for assessing current competence.

ix)   **Assessment Training**: The academic staff responsible for official decisions on assessment are appropriately trained, experienced and competent to assess. The institution offers its teaching staff development opportunities in order to improve and professionalise its assessment practices.

x)   **Assessment Of Work-Based Learning:** The assessment of work-based learning is conducted efficiently and with clear criteria In order to meet the criterion, the following are examples of what would be expected:

   a. Academics as well as workplace-based assessors (for example mentors and/or supervisors), provide an input into assessment, depending on the specific nature of the task to be assessed.
   b. The criteria for assessment are clearly spelled out, depending on the purposes of the assessment within the workplace environment. Assessment tasks are developed in a manner that advances the required competences.

xi)   **Assessment of Distance learning programmes**: The institution can demonstrate that formative and summative assessment procedures for distance learning programmes are appropriate for the delivery mode and the circumstances in which the programmes are studied.

7.5   The Quality Management and Enhancement of Assessment

University regulations define the purpose of assessment as follows:
The purpose of assessment is to measure students learning, skills and understanding. It also contributes to students learning because students reflect on their learning and through feedback, are helped to recognized and enhance their achievements. Assessments enable students to demonstrate that they have fulfilled the objectives of the programme of study on which they are enrolled and achieved the standard for the award for which they are candidate. This includes:

i)   A summary of University- wide administrative procedures and regulations which are intended to safe guard the integrity of assessment and to reinforce consistent

treatment of students and consistent decision-making. Most of these procedures and regulations are separately documents in full either in the regulations or in procedural documents.

ii)   A summary of responsibilities which the University devolves to Faculties and Schools, which are intended to ensure that assessment fulfils its purpose and is valid and reliable.

iii)   An outline of the operational arrangements by which examination boards ensure accuracy and consistency.

iv)   An outline of the external examiner system as applied at Makerere University including principles, roles, and criteria for appointment and for termination of contracts and how external examiners reported are used.

The Makerere University Academic Regulations for Taught Courses must define the basis of assessment for the University awards and academic credit, and procedures intended to ensure consistency in the following areas of assessment practice. The University-designed examinations should have the following principles:

i)   *Comprehensiveness*: submitted evidence should cover knowledge and skills throughout the course or program
ii)   *Multiple judgments*: submitted evidence should involve more than one source or involve multiple judgments of student performance
iii)   *Multiple dimensions*: submitted evidence should provide information on multiple dimensions of student performance – i.e. they should yield more than a summative grade.
iv)   *Directness*: submitted evidence should involve at least one type based on direct observation or demonstration of student capabilities – i.e. they should involve more than simply a self-report.
v)   Arrangements for submitting coursework and for agreeing an extenuation to a course work deadline.
vi)   Rules for conduct in examinations
vii)   Arrangements for claiming and for considering mitigating circumstances in relation to assessment.
viii)   The procedure for investigating allegations of academic misconduct.
ix)   Appeal against the decision of an Examination Board.

Additional administrative procedures for assessment are from time to time agreed by the SENATE or its sub committees and published to supplement the regulations. These include:

i.   The annually published calendar for the conduct of assessment.
ii.   A standard pro forma for giving feedback on marked coursework.

7.6   Responsibilities Devolved to Academic Units

The Makerere University Senate 1999 devolved the major task of managing examination process to Academic units. Therefore the responsibility for ensuring that the assessment is

reliable, valid at the appropriate level and matched to learning outcomes rests with the relevant academic staff. Systems for fulfilling these responsibilities may be defined for a whole Faculty, or a School, or a Division. However, the University expects such systems to include:

i)   Systems, based on independent internal corroboration, which ensure that assessment tasks are clearly specified, at the appropriate level, allow students to demonstrate that they have met the learning out comes, are capable of discriminating between stronger and weaker candidates and avoid inappropriate overlap between different elements of assessment in the same unit and as far as possible, also between different units taken by the same student.

ii)   Development of assessment criteria which explain how the allocation of marks rewards the different standard achieved by different students. Such criteria may be generic (applicable to many units) or specific to an individual assessment task. Criteria should be published to students and to relevant staff involved in marking, or giving advice and feedback (including those offering the same unit at any partner organization).

iii)   Marking schemes which detail how marks will be allocated for a specific piece of assessment work (e.g. for specific issues covered, or for dimensions of work such as analysis, presentation, content) and any features of work for which a student may be penalized. Marking schemes must be clear enough to support consistency between markers, but should reflect the criteria and the out comes and not just the examples used in the delivery of the course.

iv)   Systems for modernization of marking. Some form of moderation between colleagues is always expected, but the method may be decided in relation to the number of students, the number of staff involved in marking, and the strength and maturity of assessment criteria and marking schemes. In many cases, a system based on moderation of sample of work may be sufficient, with arrangements to identify and act upon marking discrepancies identified through sampling. Double marking is usual for level 3 projects and for Masters Dissertations.

v)   Arrangements for feedback to students, which ensure that different Markers give broadly the same level of feedback, and that feed back is timely and useful to the student. Feedback systems may vary, to reflect the mode of delivery and the number of students. For example, each student may receive a general analysis of strengths and weaknesses which helps to set brief and individual feed back in context. Systems may also include arrangements for students to meet a designated member of staff, sometimes a personal or group tutor, to receive feed back on overall performance.

vi)   Protocols for quality management of forms of assessment such as presentations, group work, oral examination or peer assessment. Such protocols should provide for internal corroboration and moderation and for external examiner sampling.

7.6.1. Enhancement of Assessment

There is a need for a system of getting feed back on the various assessment methods. This could be issues arising in monitoring and in feedback from external examiners reports. The feedback out of monitoring system enables the university to enhance the assessment process.

The University will offer training on an annual basis for academic and administrative staff with key roles in examination processes. The key staff includes:- Deans, Deputy Deans in charge of examination, Heads of department. Faculty Registrars and Programme Coordinators.

7.6.2. Examination Boards

i)   The membership and remit of Examination Boards and the regulations relating to awards and progression are detailed in the Senate guidelines.

ii)   There are two types of Examination Boards which are equally important, but functionally different.

   a) **Departmental Examination Board has** responsibility for a set of Courses in cognate subject of discipline. It makes decisions about the mark to be awarded to each student who has studied each course.

   b) **The Faculty Examination Board** considers the overall profile of each student enrolled on a course, on the basis of the marks awarded in each unit during the academic session and where relevant, during previous sessions. Several courses may be considered at the same award and progression board.

7.6.3 Responsibilities in Preparing for Examination Boards:
1. The annual assessment calendar should always be made and specifies the weeks within which Departmental Examination boards and Faculty Examination boards will take place after each semester examination. The calendar should be approved by the Senate Examination committee before the beginning of the academic year in July of the preceding year, and circulated to all staff. It is the responsibility of the Head of Department or subject area Leader to ensure that :
   i.   That there should be an established functioning departmental Examination committee
   ii.   In conjunction with the Faculty examination officer, that all examination papers must be set **Moderated, Typed, Produced, Sealed** and kept in a strong room within the Faculty at least one month before the beginning of the end of the Semester Examinations
   iii.   Discipline /Subject area examiners are informed of the date of the examination process and the date of the meeting of the Examination Board
   iv.   Members of the Board are informed of the date, time and location of the Board and receive an agenda

2. The Head of Departments are responsible for:
   i. Completing marking and internal moderation by the date set in the assessment calendar
   ii. Providing the Faculty Registrar/ administrator, by the date specified with marks for each element of assessment for each students registered for the unit.

3. The Faculty/Institute/School office is responsible for:
   i. Creating examination strong room and marking Centers which offers security of examination.
   ii. Entering all unit marks on the student record system by the date specified in the assessment calendar.
   iii. Making all practical arrangements for meetings including external examiners overnight accommodation.
   iv. Notifying any other relevant offices of changes in the provisional marks made at the Subject Area Board.
   v. Informing the Senate Examinations Office of the date, time and location of all Examination Boards, and sending to the examinations office the full agenda for each award and progression board.
   vi. Providing a Minute taker for every Examination Board.

4. The Academic Registrars department will provide:
   i. Coordination and Monitoring of all Examination processes to ensure the achievement of the evaluation programme on the one hand and the declaration of the results and their safe record keeping and report to Senate.
   ii. The issuing of the academic Transcript and serving as secretariat. to the Faculty Board and Senate Committees.

7.6.4 Deciding the marks for a Course at the Departmental/Subject Area Board

1. Before the meeting of the departmental Board:

   i. Internal examiners mark the work, using the agreed marking scheme.
   ii. Marks are moderated in accordance with the Faculty, School or Department Policy
   iii. Publish all Continuous Assessment (Coursework) marks.
   iv. The External Examiner for the Unit reviews an agreed sample of the assessed work in light of the assessment criteria and marking scheme.

2. For each course the Departmental/Subject Area Board receives:
   i. a list of provisional marks for all students in the elements of assessment
   ii. a short (usually oral) report from the Course Coordinator when ever relevant, explaining any issues which may have affected the assessment
   iii. Any comments the external examiner wishes to make on the basis of sampling.

3. External examiners are members of the Board, sharing in it remit. They are asked to moderate assessed work and not to remark it. They may not require a change to n individual mark seen as part of a sample.

4. The Board may decide to scale the unit marks on the basis of:
    i. Information from the Course Coordinator about problems or errors in the delivery of assessment of the Course, which may have affected the achievement of all students registered for the unit, or of defined group of students.
    ii. External examiners advise that the marking has been too harsh or too generous.

5. If marks are scaled upwards, the Departmental Board must be satisfied that there is evidence that students who receive a pass mark have met the learning outcomes of the course, and that making reflects the published assessment criteria on marking scheme. The method used should not disproportionately reward students with the lowest marks (e.g. it should not be done by adding the same number of marks for all students).

6. The decision to scale the marks rests with the Departmental Board and not with the External Examiner alone. However, the Board should have particular regard for the external examiner's advice and should carefully consider and record any decision counter to that advice.

7. If the external examiner's views of the marks differ from that of the internal marker, but not to a significant extent, the Board may decide to offer advice for the future. An external view that marking has been marginally too generous or too harsh might also lead the Board   to modify individual marks very close to the pass/fail border, without changing others for the same course.

8. If the external examiner is concerned about lack of consistency in marking, he or she may ask to look at a larger sample, perhaps together with an internal marker, to assist the Board in deciding the marks.

9. In marking decisions, the Faculty Board must exercise discretion within the regulations, where relevant using published protocols concerning discretion at the margins of honors degree classification bands.

10. To support consistency in decision making:
    i. All chairs of boards must be constantly sensitized through training programmes/seminars.
    ii. A representative of the Registrar attends at minimum those parts of the Board meetings which are concerned with Award decisions or with consideration of penalties where an allegation of academic misconduct has been sustained.

11. Registrars representative are responsible for:
    i. Advising the Faculty Boards on options available within the regulations and on consistency with previous decisions.

ii. Providing the Conferment Units with details of awards agreed by the award and Progression Board.

7.7 Application to Graduation

Completing degree requirements does not automatically result in conferral of the degree. Students must request that the University review their academic record and certify that degree requirements have been met. To make this request, students must file applications for graduation with the Academic Registrar /Graduate School at the beginning of the last semester.

7.8 Regulations Supporting to Quality Assurance Framework.

The following important policy documents support the assessment process and have been recently passed or under review:-

1. The semester regulation.(Currently being reviewed by a Senate committee)
2. The Rules of handling Examination Malpractice And Irregularities.
3. Procedure for appeals and remarking of scripts.

8.0   PROGRAMME APPROVAL, MONITORING, & REVIEW

8.1   Manual to Guide Academic Units in Curriculum Development.

The university needs to produce a manual to guide units in curriculum development and the following procedure is recommended.

First step:
Head of Department or Programme initiator liaises with the Senate office at an early stage for advice to ensure that the programme is developed in accordance with the University formats. The proposed curriculum should include:-
   i.   Title,
   ii.   Objectives/outcomes,
   iii. Justification,
   iv.   Entry requirements,
   v.   Detailed course content ,
   vi.   Course Categorisation
              a.   Core
              b.   Electives
              c.   Audit
              d.   Pre-requisite
   vii. Duration,
   viii. Classification of the awards,
   ix.   External review by professional association or the prospective employer
   x.   Resources include Staffing, (full-time, part-time, technicians,) Equipment, General operating costs/fees structure; Resources also include relevant Library Materials, ICT, Space/ Accommodation, (Lecture rooms, Labs, Workshops, Studios, Land, Internship facilities etc).and even photocopying.
   xi.   **Balance theory, practical skills**: There is need to balance theory, practical skills and Internship.
   xii. The proposed Programme must have a Coordinator whose qualifications are in the major courses to be conducted in the Programme.

Second step:
The Unit quality assurance committee examines the proposed programme to ascertain that allthe above formats have been adhered to and then recommends it to next step

Third step
The Senate Academic Programmes and Library Committee (in case of undergraduate Programmes) or the Board of graduate studies (in case of the graduate Programmes)examines:-
   i.   Programme content relevance /justification. The content should be assessed objectively by instituting Technical committee or Peer reviewing (internally and or externally).
   ii.   To ensures that it is in harmony with the University policies (semester regulations) and mission.

iii. Quality of delivery (to verify information provided i.e availability of facilities, equipment, Core Staff including staff-load,)
iv. Whether the unit proposing the Programme has the mandate to house it.
v. That in order to allow ample time for assessments of curriculum and preparation for implementation, there should be an almanac set by the Academic Programmes Committee which spells out the dates or deadlines for the units to follow each academic year when developing academic Programmes.

Fourth Step: : The Senate considers the proposed Programme

Fifth step.

 The proposed academic programme shall be submitted to the Quality Assurance Committee. The proposal shall include information on:
i) Name of the academic programme
ii) Objectives of the programme
iii) Justification for introduction of the programme
iv) Physical facilities for the programme
v) Human resource for the programme
vi) Evidence to show that there is demand for the programme.

The Quality Assurance Committee will consider the proposal and will establish whether:

i) Whether the Department proposing the Programme has the mandate to run the Programme.

ii) Whether the proposed curricula meets the required standards mentioned in table four bellow.

Sixth step:
Quality Assurance Committee recommends it to the University Council for final approval. The University Council examines mainly the justification and whether there are enough resources to mount the Programme.

Final step:
Once the University Council has approved the Programme, it is then launched by the respective Academic unit with the guidance of the Academic Registrars office.

8.2 Curriculum Design
A curriculum should be able to facilitate a balanced learning process and ensure that students are able to acquire such cognitive, effective and psychomotor skills as are consistent with the educational goals and aspirations of Uganda as may, from time to time be defined by the National Council for higher Education (NCHE). Account shall be taken in the design of every curriculum to ensure that the programme proposed:-
   a) Is broad-based or integrated;
   b) Is practical oriented ;
   c) Is diversified;

d) Does not compromise the standards of excellence set by the National Council for higher Education (NCHE); and
e) Contributes to the overall national human resource development and requirements.(*based on NCHE statutory instruments 2005 No. 85)*

Every curriculum shall clearly specify the following:-
a) Pass mark or grade for each course
b) Minimum number of courses that a student must undertake to qualify for an academic award ;(minimum graduation load)
c) Condition for Progression
d) Assessment requirements(coursework and written examinations)
e) The distribution of marks between coursework and written examinations
f) Detailed content per course as follows,
    i.   Course description
    ii.   Objective statements must in the final analysis refer to some intended change/effect in or with regard to the target group(***student***), **is aimed at.** e.g.
- *Obj 1 =   To improve student's awareness or knowledge of X.*
- *Obj2 =   To assist emerging researchers in writing scientific reports.*

    iii.   Course outline refers to the topics to be covered in the course.
    iv.   Learning outcomes are about change: New knowledge, skills changed attitudes or values
    v.   Method of teaching/delivery
    vi.   Mode of assessment
    vii.   Reading /reference materials
g) Duration,
h) Classification of the awards,
i) External review by professional association or the prospective employer
j) Resources include Staffing, (full-time, part-time, technicians,) Equipment, General operating costs/fees structure; Resources also include relevant Library Materials, ICT, Space/ Accommodation, (Lecture rooms, Labs, Workshops, Studios, Land, Internship facilities etc).and even photocopying.
k) Balance theory, practical skills: There is need to balance theory, practical skills and Internship.
l) The proposed Programme must have a Coordinator whose qualifications are in the major courses to be conducted in the Programme.

8.2.1 Content of Curriculum
A curriculum or Programme of study shall:-
    m) Clearly indicate the core courses;
    n) Clearly indicate the elective courses;
    o) Provide common courses;
    p) Provide a full content description in a form readily accessible to each student of every course in the syllabus that the programme is proposing;
    q) State whether the programme being proposed is a specialised or general one or some other variant of the programme;
    r) Indicate whether all courses in the syllabus are expected to be taught by staff drawn wholly from within the faculty or department concerned or partly by staff from elsewhere: and

s) Specify in terms of lecture hours the minimum load for each course which is to be offered in every academic year or section of the year.

Every curriculum shall clearly specify the following:-
a) Pass mark or grade for each course
b) Minimum number of courses that a student must undertake to qualify for an academic award ;(minimum graduation load)
c) Condition for Progression
d) Assessment requirements(coursework and written examinations)
e) The distribution of marks between coursework and written examinations
    a. (in accordance with guidelines set by the University).
    b. *(based on NCHE statutory instruments 2005 No. 85)*

8.2.2 Consultation with stake holders

Consultations are the key features of curriculum design, development and review. The key question to be answered is not what the Lecturer can offer but what the needs of the learners and society are. "*What do you want graduates of your program to have learned and/or accomplished, and how will you know that they have learned and/or accomplished it?*"The opinion of relevant internal and external individuals/bodies on the proposed/new curricula is paramount. The stakeholders to be consulted during curriculum design should include current and past students, academics, professional bodies and employees in both private and public sectors.

8.3   Student intake

The student intake should take into consideration the approved staff/student ratio.

The recommended staff student ratio (SSR). The National Council for Higher Education ideal SSR, University Council approved and designated staff/ student ratio (SSR) are as follows:

Table Three: Staff/Student Ratio

FACULTY	MAKERERE UNIVERSITY DESIGNATED SSR(1995)	NATIONAL COUNCIL FOR HIGHER EDUCATION IDEAL SSR	NATIONAL COUNCIL FOR HIGHER EDUCATION ACCEPTABLE SSR
Agriculture, Forestry, Technology, Science	1:10	1:10	1:20
Arts, Social Sciences	1:15	1:15	1:30
Education, Statistics, Commerce, Law, BLIS, Fine Art	1:10	1:15	1:25
Medicine, Veterinary Medicine	1:6	1:8	1:15

To determine what things a person entering the curriculum would need to know: Opportunities and arrangements for student support and guidance should: be effectively communicated, and available to all students on the programme. Programmes and course outlines / modules should be effectively described and communicated:-

i.   to meet the information needs of all users
ii.   to define credit ratings of programme pathways and component to make students and prospective students aware of expectations of them and of their responsibilities as learners
iii.   personal development planning, within and beyond university
iv.   Guidance on curricular choice.

8.4 Role Quality Assurance Unit in Curriculum Approval

Provide expertise required for curriculum design and development and also review by Initiating actions or to spear head tracer studies.
Design and produce a manual to guide in curriculum production and management.
To liaise with stakeholders on curriculum issues.

8.5 Framework for the Evaluation of Academic Programs

In order to guide the development process and approval the following framework needs to be followed. This framework is based on identification of characteristic of primary importance when evaluating Academic Programmes. An academic Programme should :-

i.   Be of high quality,
ii.   Be in demand by students and the public,
iii.   Be resource efficient.

In addition to the three primary characteristics related to quality, demand and resource, for some programs it is also important to consider:

i.   The unique features of a programme, and
ii.   The relevance of the programme.

Makerere University being a national and international institution must also have commitment to fair and equitable access to its programs, to equality, to environmental responsibility and to an international perspective in its endeavours. The University should be committed to developing programmes, which exhibit the three primary characteristics above. The unique features of a programme and their relevance should be viewed as characteristics of secondary importance, having first established the quality of, demand for and costs associated with a programme. On the other hand, being unique assumes greater importance where the cost of delivering a programme is high or relates to building on economic or other strength that already exist. On the other hand a programme may serve as a nucleus, contributing expertise and services, which would otherwise be unavailable to the community.

The table that follows identities essential components for each of the primary characteristics and general criteria associated with them. The components are not necessarily independent and therefore similar criteria may appear for different components e.g. both curriculum and learning environment have a criterion related to education equity.

Table Four: Framework for Evaluation of new Academic Programmes

Characteristics	Components	Criteria
High quality	Curriculum	i. Curriculum is designed to meet the objectives for the programme (e.g. array and sequence of courses, modes of instruction and evaluation, development of skills, acquisition of knowledge, and synthesis of information. ii. Programme provides students with the elements of a liberal education by encouraging the development of broadly informed, reflective, and literate minds capable of independent and critical thinking. iii. Programme includes opportunities for synthesis, application and integration of knowledge within and between disciplines iv. Programme is current, both in content and modes of instruction delivery, and reflects a responsiveness to change in the discipline. v. Curriculum reflects the goals of education equity vi. Curriculum provides sufficient flexibility to individual students to choose courses according to their own interests within and outside their manor discipline (e.g. electives) vii. Programs meet or exceed accreditation and/or national standards (if they exist).
	Academic staff	i. Academic staff responsible for/involved in programme are well-qualified i.e. have the appropriate academic and/or professional qualifications to support and develop the programme. In the case of graduate programs, this includes active involvement in scholarly work. ii. Academic staff maintains and updates the skills and knowledge appropriate to their discipline through involvement with academic, professional and/or scientific organizations. iii. Academic staff are nationally/internationally recognized for their scholarly and/or professional work e.g. have obtained awards and/or local/national/international invitations to present their work to colleagues in their discipline. iv. Scholarly work of Faculty has made a significant contribution to the discipline. v. Staff are committed to developing their teaching skills.
	Learning and Environment	i. Programme incorporates a variety of modes of instruction, accommodates different learning styles and where possible allows flexibility in scheduling. ii. Teaching within the programme demonstrates responsiveness to new developments in the filed, including incorporating practical experiences where appropriate. iii. Programme integrates teaching and scholarships. iv. Approaches to instruction and students reflect a commitment to the goals of education equity. v. Instruction methods and philosophies are consistent with programme objectives vi. Scholarly work of Academic staff enhances are the learning environment.

Continuation of Table 10.1: Framework for Evaluation of new Academic Programmes

Characteristics	Components	Criteria
	Infrastructure	i. Adequate numbers of appropriately trained staff are available to support the programme. ii. Necessary facilities and equipment are provided. iii. Appropriate library resources are available. iv. The organization and administration of the programme and the academic unit(s) delivering the programme are effective and supportive of the programme.
	Outcome	i. Programmes achieve its educational objectives. ii. Students are satisfied that the programme will /had helped them achieve their personal and/or professional goals. iii. Students completing graduate programs are successful in that they find employment of pursue endeavours which utilize the advanced training in their filed of study iv. The academic load does not impose undue barriers to completion such that students can complete the programme in the regular allocated time. v. Qualifications of students graduating from specific professional programs are accepted to licensing bodies and/or employees. vi. Students are successful in the examinations or competitions. vii. Employers or subsequent graduate supervisors are satisfied with performance and academic preparation of students.
In demand	Student demand market demand and/or societal nee	i. Interest by students of the province is sufficient to establish or to maintain a programme and to allocate resources to it. ii. Market demand (, national) for graduates justifies the size of the programme which is offered. iii. The programme attracts outstanding students from within and outside the country, while still providing general access to other applicants. iv. High demand for junior 'service' courses is sufficient to maintain programs within an academic area.
Uses resources sufficiently		i. Program is delivered on a cost-effective manner, relative to other similar programs. ii. Where students demand for a program is low, high demand for service courses justifies maintenance of the area of study and the incremental cost of offering the program is low. iii. Major areas of research scholarly or artistic work are associated with opportunities for graduate education
Unique		Programme is unique in content (e.g. specialization) and or approach nationally/regionally in descending order or priority.
Relevance		i. Program builds on and contributes to social development and economic strength of Uganda ii. Staff and other personnel associated with the programme provide services and expertise otherwise unavailable

8.6 Programme Review

i. That new programmes should be reviewed involving external input after the first cohort of graduates have completed their studies and thereafter periodically.

ii. Quality Assurance Unit/Committee should initiate a mandatory review of academic Programmes involving external input, after every three years.

iii.   Quality Assurance Unit/Committee should create a panel of knowledgeable and experienced persons to periodically review University courses/programme so as to advise on their validity and relevance.

iv.   The Senate Academic Programmes and Library Committee should initiate mechanism of harmonisation of courses to address the issue of duplication of courses and mandates.

9.0 STAFF RECRUITMENT, DEVELOPMENT AND APPRAISALS

One of the important resources for learning and teaching environment at any University is its Staff. This appropriate resource should be available to promote Academic Standards and Quality of learning. Staff –complement resources such as Library, Computing/IT, teaching accommodation, specialist equipment, facilities and opportunities; other resource -e.g. fieldtrips, internships play also an important role.

9.1   Background

University staff as a strategic resource should be carefully identified, effectively deployed, developed and managed. The rules and processes that govern selection, promotion and reward of staff in various positions at Makerere University.

These set standards are comparable to the international standards. The proposed national standard by the Uganda National Council for Higher Education (NCHE) is quite lower than that set by Makerere University.

9.1.2. Staff Workload

The maximum workload (hours per week) for teaching members of staff were weighted in terms of hours as follows:

(i)	Lecture Preparation	12
(ii)	Lecturing	6
(iii)	Tutorial/Seminar	2
(iv)	Marking	6
(v)	Practical /Clinical	2
(vi)	Supervision	4
(vii)	Research	4

Maximum workload per week   40.

The mandatory contact hours are based on visible and monitorable workload. **(ii), (iii),** and **(v)** which should be a minimum of __10 contact hours per week and maximum of 12 hours per week__ for a member of staff.

 At postgraduate level only staff who posses a PhDs or who are at the rank of Senior lecturer should teach and supervise graduate students . Furthermore the approved staff/student ratios to guide in deciding the intake capacity to graduate programmes shall be as follows:-

i.	Masters programmes	1:5 one lecturer to five students
ii.	PhD programmes	1:3 one lecturer to three students
iii.	Postgraduate Diploma programmes	1:10 one lecturer to 10 students

9.2.   Staff Values

The University is a community of scholars, students and staff. A community implies the shared acceptance by its members of common values. The concept of values implies not only rights but also obligations, for the community itself and for its individual members. This

values when adhered to should result in quality assurance. These values should be the guiding principles in QA framework.

The University mission statement should tally with the statement of Values. These values provide a framework that informs and governs what is considered by the University community to be appropriate and acceptable behaviour. The Statement also serves as the foundation for a range of University policies and guides the management of particular aspects of University life. As a value-based community, we should aspire to an encompassing ethos which:

1. Promotes academic excellence and the attainment of the institutional goal of becoming a world-class University.
2. Preserves what is valuable in the history of the institution and of this country, and responds to the challenges posed by past injustices and unfair discrimination.
3. Achieves social transformation, empowerment and participative governance.
4. Encourages the institution and all its members to accept responsibility for the welfare of the community and for behaving in accordance with these community values.

9.2.1 Commitment to Values
Staff shall commit themselves to:
1. Truth, fairness, consistency, and integrity in both academic and other work, and in all personal and institutional relationships.
2. Compassion, generosity and concern for the needs and aspirations of others, and in particular for the challenges faced by the less privileged in our society.
3. Respect and tolerance for cultural, religious, political, and other differences and acknowledge of the value of diversity in society.
4. Respect for individual privacy, dignity, and the right to personal choice.
5. Intellectual honesty, vigour in debate, openness to alternative ideas and respect for other views, beliefs and opinions.
6. Commitment to high standards, personal fulfilment and the pursuit of excellence.
7. The protection and responsible use of the University's assets and resources.
8. Contributing to national development
9. Fostering global competences among students
10. Promoting the use of technology
11. Quest for excellence.

9.3 Quality of Academic Staff

The staff of the university are appointed on the basis of their academic qualities (see the University Appointment and Promotion policy). This policy document sets broad guidelines but does not give detailed specification to be used at unit level. There is need at Makerere University for a strong professional Academic staff who:

1. Hold adequate qualification/certification in the disciplines they teach.
2. Maintain high expectations for student achievement that is evident in every aspect of classroom work.
3. Teach students how to learn by Helping them to see the continuity in their learning and offering them the encouragement to apply learned skills in one field to other fields and to everyday living experiences.

4. Provide students with ample opportunities to practice skills taught in order to grasp concepts.
5. Create consistency in learning methods that include problem- solving, thinking and creative activities.
6. Hold students responsible for completion of work assigned within established standards for quality.
7. Set challenging and interesting classroom assignments that are appropriate to the subject and that clearly relate to other lessons taught.
8. Use a wealth of materials and many different approaches to teaching concept.
9. Relate, as often as possible, the objectives of lessons taught to students' backgrounds, communities, and cultures.
10. Maintain discipline in the classroom to foster the optimal learning environment.
11. Keep students consistently informed on how they are doing and what they will be doing next, and discuss the significance of each step and its relationship to concepts previously taught.
12. Keep students informed as to how well they are doing by occasionally conveying to them their level of success.
13. Use testing and evaluation as a tool to measure student progress as well as determine curriculum changes and teaching strategies in order to accommodate the diverse needs of groups of students.

9.3.1 Specific Recommendations on Appointment and Promotion of Staff

1. Fill all the vacant posts by recruiting more permanent staff and part-time Lecturers.
2. Re- analysis of teacher/student ratio based on programmes and categories of students rather than on department. Staff-student ratios within departments impact considerably on the quality of learning and teaching and on the student experience. The University should develop a robust model for calculating staff-student ratios. The current model does not address the increase in programmes and student numbers
3. The staff Development policy should be reviewed so that workload of staff who go for further studies does not affect the performance of those who remain.
4. There should be time frame for one to progress from Assistant Lecturer to Professor not to stagnate. Guidelines and procedure for appointments, promotion and reward are reviewed.
5. That a ceiling for the maximum lecture hours for lectures be put at 15 contact hours per week. This should be monitored by use of ARIS system.
6. Appointments of part time lecturers need to be streamlined and they should be given contracts.
7. Staff development is an important part of our overall approach to quality and is important for quality enhancement. We have extensive policies relating to all aspects of staffing, but of particular relevance to quality are the following points:
    i. Need for self evaluation or culture of self assessment. To identify the weaknesses and strengths.
    ii. Pedagogical training for new teaching staff. short teaching method courses could be offered by the Department of Higher Education for Training;
    iii. Staff induction, new members of staff are should have a well planned probationary period. For example by let a Senior Staff Member mentor

Teaching Assistants/Assistant Lecturers during their first year on the job when conducting lectures and tutorials.

9.4.   Makerere University's Staff Appraisal System

The following instruments were designed for staff appraisals:

    i.   The annual progress appraisal forms.
    ii.   Instruments by students' asses their Lecturers.
    iii.   Appointment and Promotion guidelines

Although the first two instruments exist there is no mechanism of administering them and also analysis. In this regard the following is recommended.

1.   The University's staff appraisal system needs to be re-designed to not only evaluate but also to support and develop staff capabilities;
2.   To promote a culture of self-evaluation and sense of responsibility.
3.   Instruments by students to asses their Lecturers be administered and mechanism of analysis, reporting and follow up.
4.   There is a need to introduce **peer observation of lecturers** as a means of enhancing the quality of teaching and also as one means of developing the individual's professionalism as a teacher. All full time academic staff should have their teaching observed by a colleague for at least one teaching session per year. It is important that peer observation is conducted in a spirit of professional development and professionalism. Just as teachers help students learn by changing the way they think, so too can colleagues help one another understand.

9.5.   Awards for Excellence

Awards should be created and given to staff who excel in their scholarship. The criteria should have the following ideals:

    i.   Interest and enthusiasm in undertaking teaching and promoting student learning.
    ii.   Ability to arouse curiosity and to stimulate independent learning and the development of critical thinking skills.
    iii.   Ability to organise course material and present it cogently and creatively.
    iv.   Command of subject matter including the incorporation of recent developments in the field of study.
    v.   Evidence of innovation in the design and delivery of units.
    vi.   Evidence of participation in the effective and sympathetic guidance and advising of students.
    vii.   Evidence of research which leads to discoveries and is highly acclaimed.
    viii.   Provision of appropriate assessment with worthwhile feedback to students on their learning.

ix.   Ability to help students from equity groups, where appropriate, participates and achieves success in their courses.

x.   Professional and systematic approach to teaching development.

xi.   Participation in professional activities and research related to teaching.

Rewards (Carrots)

Carrots for infusing quality assurance framework in Makerere University by all employees shall include (but not limited to):

1)   Remuneration for best performance
2)   Promotion
3)   Financial support to Faculty/School/Institutes/Departments or individuals
5)   Excellence Awards by Vice-Chancellor, Deans Directors for best practices
6)   A condition for contract renewal of part time appointment

Punishment   (Sticks)
Staff who fail to measure up to the quality assurance standards of Makerere University shall be subject to the following (but not limited to):

1)   Reprimand
2)   Suspension
3)   Removal from office of responsibility
4)   Criminal Investigation
5)   Denial of benefits
6)   Dismissal

The Human Resource Directorate in collaboration with the Quality Assurance Directorate shall develop the criteria for awarding staff who excel and penalties for staff who fail to measure up.

9.7   The Work Environment

Makerere University should all strive to provide a safe environment in which all members are able to reach their full academic or other work potential. There is a need not to tolerate any threat or act that interferes with an individual's performance at work or in study, or that creates an intimidating, hostile or demeaning work or study environment because of an individual's race, gender, beliefs or sexual orientation.

9.7.1   Sexual Harassment
 Sexual harassment is defined as requests for sexual favours, or unwelcome, or repeated or flagrant sexual advances, or demeaning verbal or other expressive behaviour of a sexual nature when:

i.   Submission is made either explicitly or implicitly a term and condition of an individual's employment or status as a student;

ii.   Submission or rejection by an individual is used as a basis for employment or academic decisions affecting him or her, or for awarding or withholding favourable employment or academic opportunities, evaluations or assistance;

Remedies: Makerere has recently passed sexual harassment policy which created committees at various levels. This is welcome move which awaits implementation.

9.7.2   Special Relationships between Staff and Students

Special relationships (including, but not limited to romantic relationships, kinship, and relationships with a history of serious interpersonal conflict) between students and staff may undermine, or be perceived to undermine this integrity, and they may compromise fairness or objectivity, or be perceived to do so. (For example, the relationship of a staff member to, or with, a student may influence objectivity in assessment, or be perceived to do so; this will have negative consequences for the parties involved and for other staff and students). Members of staff should consider carefully the possible consequences for themselves and for the student before allowing a romantic relationship to develop.

Rules have been formulated to address this problem so as to protect the integrity of the academic process and to provide an environment in which all students may reach their full academic potential.

9.7.3   Professional Ethics.

Special relationships between members of staff, that may undermine, or be perceived to undermine employment integrity, and may compromise fairness or objectivity, or be perceived to do so. Special relationships may include, but are not limited to: romantic relationships; husband/wife; kinship; contractual or financial (i.e. where some form of agreement exists between two parties which may, for example, include nomination of a beneficiary or evidence that the relationship is of a long term nature built upon mutual dependency and trust such as a joint bank account, joint ownership of property, or long term cohabitation); and relationships with a history of serious interpersonal conflict.

A member of staff who has any special relationship to, or with, a member of staff or job applicant in the department or section of which he or she is a member shall disclose the relationship to the Head of Department or Dean. In the case of a Head of Department who has a special relationship with a member of staff or job applicant the relationship must be reported to the relevant Dean, Director, Registrar, Deputy Vice-Chancellor, Vice-Chancellor or Council.

10.0 CAREER GUIDANCE BASED ON TRACER STUDIES

These guidelines are intended to help Makerere University to ensure both that its meeting students' expectations in respect of their preparedness for their future career, and that the its producing graduates equipped to meet the demands of the employment market of today and tomorrow. These guidelines will complement other quality assurance developments including the general practice on industrial/internship learning and the guidance produced by the quality assurance task force on in respect of programme specification and student progress records.

10. 2. General Principles

a)   The University should have a clear documented and accessible policy for career guidance, information and guidance, including statements of the University Quality Assurance objectives and of students' entitlements and responsibilities.

b)   Career education, information and guidance provision should be impartial, client focused, confidential, collaborative, and accessible in accordance with the Makerere University's equal opportunities policy.

c)   Career education, information and guidance provision should be subject to Makerere University quality assurance procedures.

d)   The University should seek to identify and cater for the special needs of students who may be disadvantaged in the labour market.

10.3 Roles and Responsibilities:

Makerere University should consider;

a) Ensuring that statements of service makes it clear who is responsible for the delivery of different aspects of career education, information and guidance including definitions of the role of academic staff and the expert contribution of a dedicated career service staff.

b) Providing explicit statements of service that set out clearly and concisely how the university career education, information and guidance provision is intended to meet the individual needs of students.

c) The extent to which the University policy on equal opportunities is integrated with its career provision to avoid discriminatory practices which disadvantage individuals or groups of students.

d) How best to make career education, information and guidance provision, as detailed in the University's statements of service, available to all students including part time, overseas/distance learning students based on different campuses.

e) Implementing procedures to support a collaborative approach, which strengthens and supports links with relevant internal contacts e.g other student service staff, academic staff) and with relevant external organisations (e.g. career companies in the public and private sector, other guidance and counselling services, audit guidance net works, further education sector etc).

f) The adoption of national higher education quality standards for career education, information and guidance services.

g) The impact of relevant statutory requirements or National Higher Education Council and regional policy on career education, information and guidance provision.

h) Promoting the importance of skills development for students in relation to employment and life long learning through, for example, progress records.

i) Referring to statements of transferable abilities contained in relevant subject benchmark statements.

j) Ensuring that responsibilities for providing references for students, including their format coverage and quality are clearly located and effectively discharged.

k) How best to promote career education, information and guidance provision as detailed in the statement of service to part time/overseas/distance learning students/e-learning/i-learning students/students based on different campuses.

l) How best to use Information and Communication technologies (ICTs) to promote and deliver career education, information and guidance

10.4 Students

Students should be provided with information on the services available to them while registered at the University and those which will continue to be available to them when they have left.

The institution should be clear in its information to prospective and present students how the skills and knowledge acquired during study are intended to be of use to them in the development of their careers.

10.5 External Relations

The University should promote close collaboration between employers and career education, information and guidance providers to maximise the benefits of both students and employers.

Makerere University should ensure that its career education, information and guidance provision takes account of development in the employment market and work opportunities in the community at large.

10.6 Staff

The University should ensure that all members of its staff involved with career education, information and guidance provision, including academic staff, have the skills, knowledge and training appropriate to the role they are undertaking.

a) The University shall consider supporting any staff involved in developing their relevant professional expertise through continuing professional development.

b) The University shall consider proving training required for academic and other appropriate staff to fulfil their role in proving career education, information and guidance.

10.7   Monitoring, Feedback, Evaluation and Improvement

The Makerere University Quality Assurance Unit or its equivalent be required to account formally and regularly for the quality and standards of its career education, information and guidance with the objective of promoting continuous improvement.

The University through its Quality Assurance Unit or its equivalent should provide the training required for academic and other appropriate staff to fulfil their role in providing career education, information and guidance

a) The quality Assurance unit or its equivalent should incorporate from key stakeholders into Career education, Information and Guidance.

b) The University should setup appropriate targets in or to measure the performance of the Career Education, (Information and Guidance.

c) Record unmet requests for information with a view of amending the statement of service.

d) Produce an annual reports on provision, performance and outcomes of the career education, information and guidance publicised in detail and submitted to the Deputy Vice Chancellor Academic Affairs

e) Undertaking regular reviews on the career education, information and guidance policies, to include development, monitoring and resourcing.

f) To collect data centrally and through academic units, on graduate destinations

SECTION THIRTEEN
GUIDELINES ON EQUALITY OF OPPORTUNITIES

13.1 Background for disability

This section provides a reference to practices for quality assurance for equality of learning and teaching opportunities for students and staff at Makerere University Makerere University should ensure that policies, procedures and activities, including planning and resource allocation consideration is given to equal opportunity all students participation in all aspects of the academic and social life of the University. Makerere University is committed to provision of equality for all irrespective of disability, race, gender and religion in all aspects of the academic and social life of the University.

13.2 Objectives

i.   To plan and provide resources for maintenance of equality in opportunities;
ii. To develop a culture of tolerance to embrace the value of diversity in society.

13.3 Precepts and General Principles for disability

Makerere should consider:

a) Implementing procedures which ensure that the needs of students with disabilities are addressed at all stages and levels of academic and resource planning;
b) Embedding the fair and equal treatment of disabled students in all operational practices;
c) Identifying clearly the locus of senior management responsibilities in relation to arrangements for students with disabilities;
d) ensuring that senior managers and other key staff have an adequate understanding of the legal framework concerning disabled people;
e) ensuring that management systems include the gathering of information to enable well-informed decisions to be made regarding participation and progression of students with disabilities.
f) including the needs of disabled students within the remits of all resource allocation, academic management, estates and services committees;
g) incorporating the views of disabled students in the development and review of the physical environment, academic programmes and services;
h) identifying designed contact(s) for disabled students with specialist expertise and effective channels of communication with senior managers;
i) providing staff development in disability awareness/equality for all staff;
j) monitoring and reviewing the impact of all institutional policies, procedures and practices on students with disabilities with a view to continuous improvement;
k) The implications for disabled students of collaboration provision and articulation and arrangements involving study in more than one institution and/or other partner organization.

13.3 Roles and Responsibilities

a) The Physical Environment

- Makerere University ensure that disabled students can have access to the physical environment in which they will study, learn, live and take part in the social life of the University.
- The University should ensure that facilities and equipment are as accessible as possible to disabled students.

b) Information for applicants, students and staff

- The University publicity, programme details and general information should be accessible to people with disabilities and describe the opportunities for disabled students to participate.

c) The selection and admission students

- In selecting students institutions should ensure equitable consideration of all applicants.
- Disabled applicant's support needs should be identified and assessed in an effective and timely way, taking into account the applicant's views.

d) **Enrolment, registration and orientation**

- The arrangements of enrolment, registration and induction of new entrants should accommodate the needs of disabled students.

- Learning and teaching, including provision for research and other postgraduate people.

- Programme specifications should include no unnecessary barriers to access by disabled people.
- Academic support services and guidance should be accessible and appropriate to the needs of disabled students.
- The delivery of programmes should take into account the needs of disabled people or, where appropriate, be adapted to accommodate their individual requirements.
- The University should ensure that, wherever possible, disabled students have access to academic and vocational placements including field trips and study abroad.
- Disabled research students should receive the support and guidance necessary to secure equal access to research programmes.

e) Examination, assessment and progression

- Assessment and examination policies, practices and procedures should provide disabled students with the same opportunity as their peers to demonstrate the achievement of learning outcomes.
- Where studying is interrupted as a direct result of a disability-related cause, this should not unjustifiably impede a student's subsequent academic progress.

f) Staff development

- Orientation and other relevant training programmes for all staff should include disability awareness/equality and training in specific services and support.

g) Access to general facilities and support

- Students with disabilities should have access to the full range of support services that are available to their non-disabled peers.

h) Additional specialist support
- Makerere University should ensure that there are sufficient designated members of staff with appropriate skills and experience to provide specialist advice and support to disabled applicants and students and to the staff who work with them.
- The University should identify and seek to meet the particular needs of individual disabled students.
- Internal communications systems should ensure that appropriate' staff receive information about the particular needs of disabled students in a clear and timely way.
- The University should have a clearly defined policy on the confidentiality and disclosure of information relating to a person's disabilities that is communicated to applicants, students and staff.

i) Complaints
- The University should ensure that information about all complaints and appeals policies and procedures is available in accessible formats and communicated to students.
- The University should have in place policies and procedures to deal with complaints arising directly or indirectly from a student's disability.

j) Monitoring and evaluation and improvement
- Makerere University information systems for example ARIS should monitor the applications, admissions, academic progress and nature of impairment of disabled students.
- The University should operate systems to monitor the effectiveness of provision for students with disabilities, evaluate progress and identify opportunities for enhancement.

13.2 Strategies and Actions

l) Makerere University shall develop and implement procedures which ensure that the needs of students with disabilities are addressed at all stages and levels of academic and resource planning;

m) Makerere University shall ensure that a fair and equal treatment of disabled students is incorporated in all operational practices;

n) Makerere University shall identify clearly the locus of senior management responsibilities in relation to arrangements for students with disabilities;

o) Makerere University shall ensure that management systems include the gathering of information to enable well-informed decisions to be made regarding participation and progression of students and staff with disabilities;

p) Makerere University shall designate contact(s) for disabled staff /students with specialist expertise and effective channels of communication with senior managers;

q) Makerere University through relevant Departments shall provide staff development in disability awareness/equality for all staff;

r) The Quality Assurance Committee shall monitor and review the impact of all institutional policies, procedures and practices on students/staff with disabilities with a view to continuous improvement;

APPENDIX C: OTHER SOURCES OF INFORMATION

Information which should be available at Makerere University

Institutional context:
  i. Mission statement.
  ii. Relevant sections of the Makerere university strategic plan
  iii. Statement of quality assurance policies and processes.
  iv. Learning and teaching strategy and periodic reviews of progress.

Student admission, progression and completion:
  i. Student qualifications on entry.
  ii. Range of entrants classified by age, gender, socio-economic background,
  iii. disability and geographical origin;
  iv. Progression and retention data for each year of each course/programme, differentiating between failure and withdrawal.
  v. Data on student completion.
  vi. Data on qualifications awarded.
  vii. Data on employment/training outcomes from the Survey.

Internal procedures for assuring academic quality and standards:
  i. Programme approval, monitoring and review:
  ii. Programme specifications;
  iii. a statement of the respective roles, responsibilities and authority of different Senate Committees
  iv. Key outcomes of programme approval, and annual monitoring and review processes;
       a. reports of periodic internal reviews by departments or faculties;
       b. Accreditation or monitoring reports by professional, statutory or regulatory bodies.
  v. Assessment procedures and outcomes:
       a. assessment strategies, processes and procedures;
       b. the range and nature of student work;
       c. external examiners' reports, analysis of their findings, and the actions taken in response;
       d. Reports of periodic reviews of the appropriateness of assessment methods used.
  vi. Student satisfaction, covering the views of students on:
       a. arrangements for academic and tutorial guidance, support and supervision;
       b. library services and IT support;
       c. suitability of accommodation, equipment and facilities for teaching and learning;
       d. perceptions of the quality of teaching and the range of teaching and learning methods;
       e. assessment arrangements;
       f. Quality of pastoral support.

ix. Evidence available Quality assurance Task Force own reviews of quality and standards:
    a. the effectiveness of teaching and learning, in relation to programme aims and curriculum content as they evolve over time;
    b. the range of teaching methods used;
    c. the availability and use of specialist equipment and other resources and materials to support teaching and learning;
    d. staff access to professional development to improve teaching performance, including peer observation and mentoring programmes;
    e. the use of external benchmarking and other comparators both at home and overseas;
    f. the involvement of external peers in the review method, their observations, and the action taken in response.