



P . A . B

Professional Accreditation Body

DE-ACCREDITATION POLICY

1. Introduction

In terms of the SAQA Regulations, 9(1) An Education and Training Quality Assurance Body shall:

- (a) accredit constituent providers for specific standards or qualifications registered on the National Qualifications Framework;**
- (b) promote quality amongst constituent providers;**
- (c) monitor provision by constituent providers;**
- (d) evaluate assessment and facilitation of moderation amongst constituent providers;**
- (e) register constituent assessors for specified registered standards or qualifications in terms of the criteria established for this purpose;**
- (f) take responsibility for the certification of constituent learners;**
- (g) co-operate with the relevant body or bodies appointed to moderate across Education and Training Quality Assurance Bodies including but not limited to, moderating the quality assurance on specific standards or qualifications for which one or more Education and Training Quality Assurance Bodies are accredited;**
- (h) recommend new standards or qualifications to National Standards Bodies for consideration, or modifications to existing standards or qualifications to National Standards Bodies for consideration;**
- (i) maintain a data-base acceptable to the Authority;**
- (j) submit reports to the Authority in accordance with the requirements of the Authority; and**
- (k) perform such other functions as may from time-to-time be assigned to it by the Authority.**

The PAB must therefore conduct visits to any provider offering education and training in the PAB scope of accreditation during its development towards achieving full accreditation.

The word 'programme' as used in this document means the educational activities that lead to the award of a qualification that is recognized by the PAB and SAQA for programmes that fall within the PAB scope of accreditation.

The PAB is responsible for accreditation of Providers and Assessment houses; registration of assessors, moderators and learners; approval of programmes within the PAB scope of accreditation to establish:

- (a) Whether the qualifications awarded from the programmes meet the educational requirements.
- (b) Whether the Diplomats or Graduates from the respective programmes are ready for employment and are equipped to continue learning throughout their careers.
- (c) To establish the international comparability and development of the programmes.
- (d) To assure the public of the quality of the delivery of learning and the outcome achieved.

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(e) To encourage improvement and innovation in programmes that fall within the PAB scope of accreditation in response to national and global needs.

The purpose of this document is to record the PAB's policy and procedures concerning the de-accreditation of providers; withdrawal of programme approval; de-registration of assessors and moderators.

It must be noted that major developments are taking place in Education and Training as is being facilitated by the South African Qualification Authority and the National Skills Act 97 of 1998. These developments will affect the work of qualified graduates from programmes that fall within the PAB scope of accreditation and the related education and training in the future. This means that this policy must be reviewed and revised to ensure relevance on a regular basis during the next few years.

2. Explanatory notes on terminology

In this section we clarify terminology that has been used in this policy document, and their meaning, so that the reader can engage meaningfully with the contents of this policy.

This document should be read in conjunction with the Regulations promulgated by the South African Qualifications Authority (SAQA), as well as the definitions given to terminology by SAQA, and / or other SAQA documentation such as the Accreditation of the PAB as an ETQA.

The ETQA Advisory Committee is an internal operational Committee that meets as often as required in order to approve recommendations made on Accreditation matters by the ETQA. Typically four meeting per annum is scheduled at the first meeting of each year. It is a neutral unbiased Committee on which applicable organizations and bodies are represented, in order to uphold and address issues of provider accreditation, programme approval and registration of assessors, moderators and learners. The constitution may be obtained by submitting a written explanatory request to the PAB Director.

Because SAQA accredits ETQAs to accredit providers for unit standards based qualifications, outcomes based qualifications and /or unit standards registered by SAQA on the National Qualifications Framework, and limited to the primary focus area of the PAB, the PAB ETQA may not accredit providers for non-unit standards based qualifications and/ or qualifications/ programmes not registered on the NQF, or for education and training programmes outside of the PAB's primary focus area, as assigned by SAQA.

Until such time that the legacy qualifications are phased out and/ or integrated with unit standards, the PAB will be applying a certification policy through the verification of certificates for learners who successfully complete their qualifications against the current legacy qualifications on the NQF.

The PAB certificates will be issued to candidates that demonstrate competence for the SAQA registered qualification/s within the PAB's primary focus area, provided the learner has been registered by an accredited provider.

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The PAB will be issuing certificates to endorse the certificates/ diplomas issued to learners for all SAQA registered qualifications. This will be done through application of the MoU/ co-certification agreement between PAB and assessment houses such as (but not limited to) ITEC, CIDESCO, CIBTAC, and SAAHSP. All of the endorsement certificates will be sent via registered mail to all providers to be dispersed to the learners. PAB will contact the learners to inform them when the certificates will be available for collection.

For unit standards based or outcomes based skills/ short course programmes the PAB will issue Statement of Results printed from the official PAB MIS, signed by the ETQA Manager on written application from learner. The PAB will, subject to the accredited provider signing the required declarations and undertaking to work according to the PAB requirements for using the PAB Logo on their certificates, be allowed to use this Logo on such provider certificates issued for unit standards based or outcomes based skills/ short course programmes

3. PAB ETQA policy statements

The ETQA policy statements subsumed in the “PAB Guidelines and Criteria for Accreditation” will guide the functioning of the PAB’s Education and Training Quality Assurance (ETQA).

The PAB promotes the five objectives and the thirteen principles of the NQF on a systemic and functional level: -

On the systemic level the PAB will integrate the promotion of access, integration of education and training, redress, full personal development of the learner and enhancement of the quality of education and training in its strategic operations.

On the functional level the PAB will do this to ensure quality delivery and assessment in the sector by evaluating, monitoring, auditing, verifying and validating that the NQF objectives and principles are embedded in the delivery and assessment of learning programmes, which will culminate in registered unit standards and qualifications in the PAB scope of accreditation.

3.1 Focus of PAB: -

The PAB’s primary focus areas for its quality assurance functions are the identified focus for learning and learning achievements within the sectors’ NQF registered qualifications and / or unit standards for which the providers have been accredited by PAB.

3.1.1 Who/What does the PAB Accredit: -

The PAB accredits a person, a body or a provider that has the capacity to deliver and assess or only assess a learner against a learning programme, which culminate in specified programmes in the PAB scope of accreditation related to NQF standards and / or qualification.

The PAB accredits specified qualification and skills programmes/ short courses and will ensure alignment of all legacy qualification/ programmes to unit standards once developed.

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3.1.2 PAB scope Providers/ Institutions / Sites of assessment: -

The provider is defined as: “A body, which delivers learning programmes, which culminate in specified NQF standards and / or qualification, and manages the assessment thereof.”

The constituent provider is defined as: “A provider accredited by the PAB for a specific area of provision within the PAB scope of accreditation.”

The Delivery and Assessment site is defined as: “A site that delivers in the PAB scope of accreditation related learning programmes and manages the assessment thereof.”

The Assessment-Only site/ house is defined as: “A site or body responsible for assessment, including recognition of prior learning against learning programmes in the PAB scope of accreditation. The site/ body needs to assist the learner through the assessment process of making explicit what it is that they know and can do, and preparing them for the assessment”.

3.1.3 Delivery Site for the Workplace Component: -

Approval of such sites is optional, and will only be done on request to promote quality. It is the provider’s responsibility to ensure compliance for learning obtained for all parts of the qualification or unit standards, that the provider has been accredited to provide.

The Delivery Site for the Workplace Component is defined as: “A site responsible for delivery of related experiential learning or workplace component for programmes in the PAB scope of accreditation and the assessment thereof.”

3.2 Types of Provider Accreditation Decisions: -

3.2.1 Types of Provider Accreditation:

There are two types of accreditation status identified:

2.3.1 Providers with an additional award as a centre of excellence:

Institutions who have met additional criteria stipulated and amended annually. The criteria for this award may be obtained from the PAB. Fully accredited as well as provisionally accredited institutions may be awarded as a centre of excellence should they comply with the set criteria.

2.3.2 Providers with Full accreditation:

Institutions with a report indicating no outstanding requirements and who has received a verification audit and external moderation audit.

These institutions will be published on the PAB website as Institutions with **Full accreditation**.

2.3.3 Providers with Provisional accreditation:

Institutions who have met all criteria in terms of SAQA minimum criteria.

These institutions will be published on the PAB website as Institutions with **Provisional accreditation** with the proviso that the conditions will be met by March of the new year. The

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Implementation plan must address the outstanding requirements and elevate the status of the Institution to full accreditation or higher.

3.2.2 Denial of Accreditation:

If (continued) accreditation is denied, the provider applying for (continued) accreditation may request for reconsideration of the decision. A request for reconsideration together with arguments must be sent to the PAB within seven days, which will respond to the request within 2 months. The provider is to follow the procedure of the PAB contained in these Guidelines.

3.2.3 De-accreditation:

A Delivery and Assessment or Assessment-Only site that does not meet all the criteria as specified in Chapter 4, regulation 13 of the ETQA Regulations no. 1127 of 8 September 1998 and the PAB criteria over a period of time negotiated, will be subject to the PAB non-conformance policy and have a process of de-accredited initiated by the PAB.

De-accreditation may be applied to a provider's failure to comply with the outcomes for provider accreditation; withdrawal of programme approval may be applied to a Programme/Qualification that is registered on the NQF; de-registration may be applied to assessors and moderators.

Withdrawal of accreditation will apply in the instance that the PAB is in receipt of sufficient evidence which indicates that the provider has been involved in gross irregularities or if the PAB has findings, which is endorsed by SAQA, that indicates that the provider fails to perform the functions satisfactorily or where the provider has been provided with sufficient support and assistance and given a reasonable time frame to improve performance and the accreditation team reports that the provider fails to meet the accreditation criteria

3.3 Outcome of Accreditation Decisions of Providers and Qualifications/ Programmes

Accreditation is defined as: "The certification, usually for a particular period of time of a person, a body or a provider as having the capacity to fulfill a particular function in the quality assurance system set up by the South African Qualifications Authority (SAQA) in terms of the SAQA Act."

3.3.1 Period of Accreditation:

A Delivery and Assessment or Assessment-Only Site that meets all the criteria as specified in Chapter 4, regulation 13 and the PAB criteria will be accredited by the PAB for a period of 3 years. Verification of assessment or a quality assurance investigation may be conducted during the period of full accreditation announced or unannounced.

3.3.2 PAB Recommendations and Report: -

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The final report of the findings and recommendations of the PAB could be submitted to bodies such as SAQA, any relevant ETQA and other parties approved by the PAB Advisory committee.

The ETQA, advised by the Audit and Accreditation officer, decides on the type of accreditation at the next meeting of the PAB Advisory Committee. A copy of the final findings and decision is sent to the provider applying for accreditation. If the outcome is unfavourable, the PAB Advisory Committee will advise a course of action and both the provider and SAQA will be informed accordingly.

3.3.3 Effective Date of Decision: -

A decision to withdraw accreditation shall become effective thirty (30) days after the date on which the official notification on the decision was received by the de-accredited party. If the provider seeks reconsideration of the decision, the accreditation status decision shall not become effective until the date upon which a final decision is rendered on the reconsideration.

3.3.4 Publication of the Decision: -

The decision on accreditation is made public, but not the underlying arguments and site visit report. At the written request of the provider, the underlying arguments and the site visit report will be made public.

3.3.5 Informing relevant bodies or organizations:-

A provider that demonstrates non-compliance during the de-accreditation process and does not comply with further monitoring, maintenance and/ or other relevant requirements from PAB as deemed necessary during the de-accreditation process, may be required to transfer the learners currently enrolled to an accredited provider or be subject to further action from SAQA under the SAQA Act.

The PAB has agreements with various assessment house/ examining bodies and will inform them that no assessments may be conducted at a provider de-accredited by PAB.

All the information disseminated to learners currently enrolled at the provider regarding de-accreditation decisions will be monitored by the custodian ETQA.

3.3.6 Appeal:

Should the PAB see no grounds for reconsidering its decision on accreditation or de-accreditation, the provider applying for accreditation or continued accreditation may appeal to the PAB's Advisory Committee.

3.4 Interfaces with Providers, Other ETQAs and Other Relevant Bodies During De-accreditation

3.4.1 Provider Maintenance:

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Provider maintenance is defined as: “Audits, monitoring, validation and verification site visits conducted by a PAB staff member / ETQA representative at the site of the provider.”

3.4.2 Period of Provider Maintenance in the de-accreditation process:

The period is defined as: “Verification or validation site visit will be conducted the first year of de-accreditation to ensure the phasing out of learners currently enrolled at the provider. The following year an audit site visit will be conducted to confirm the completion of the process.”

Scheduled or unscheduled monitoring site visits may be conducted during the de-accreditation period when stakeholders / learners/ lecturers/ guardians/ parents raise concerns.

3.4.3 Memoranda of Understanding with Other ETQAs:

Memoranda of Understanding (MoUs) will be signed between ETQAs that has been accredited and assigned functions by SAQA under section 5(1) (b) (i) of the SAQA Act as bodies responsible for monitoring and auditing achievements in terms of national standards and qualifications; or have been established as ETQAs in terms of their founding legislation.

3.4.4 Learning Programme withdrawal:

Each ETQA will refer primary focus providers who have learning programmes that fall within the primary focus area of the other ETQA to that ETQA for learning programme approval.

Should a provider request withdrawal of approval for a programme in the primary focus/ scope of PAB, it will form part of a process through the custodian ETQA that has accredited the provider. The custodian ETQA will then send the withdrawal of approval application to the relevant ETQA, as per application to a MoU.

The accreditation status of this type of provider with the ETQA and their listing on the NLRD will reside with the custodian ETQA.

3.4.5 Status of Enrolled Students at De-accreditation:

Should a programme, qualification or provider have its accreditation/ approval withdrawn at any time while students are enrolled, only those students in the final year (twelve months) of the programme will be considered to be graduates of an approved programme. Those students must successfully complete the programme within the original time frame scheduled for their graduation to be considered graduates of the programme during its period (cycle) of approved status.

If the provider seeks reconsideration of the decision, the status decision shall not become effective until the date upon which a final decision is rendered on the reconsideration. If the reconsideration does not result in reversal of the adverse decision and the provider elects to appeal the decision, the effective date will remain the date established by the reconsideration decision.

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3.4.6 The role of the custodian ETQA:-

The custodian ETQA will remain responsible for the monitoring and audit of this provider during de-accreditation and will remain the body responsible for ensuring their compliance to applicable legislation and the de-accreditation process.

The custodian ETQA of a provider will remain responsible to upload info regarding learners, during the de-accreditation process, to the NLRD.

The de-accreditation process will be handled in conjunction with SAQA according to the regulations once the PAB Advisory Committee has made their recommendations.

Should the de-accreditation decision be upheld, the Provider will be listed as such.

3.4.7 Liability:-

A provider whose accreditation status had been withdrawn by the PAB will not be allowed to continue with programmes or qualifications, student admission, graduation and conferment of academic awards. Any attempt to do any of these acts will render the owner or directors of the provider liable to sanctions permissible by law.

3.4.8 Accessing learning from primary focus of another ETQA: -

Learners from each ETQA will not be permitted to obtain unit standards or qualifications from the primary focus areas of the other ETQA if the provider has been de-accredited for the primary focus qualifications or unit standards.

3.5 Assessor and Moderator De-registration

The designated PAB / ETQA Representative will represent the PAB at the paper-based panel assessment of a constituent assessor or moderator to be panel assessed before s/he is de-registered as a Subject Matter Expert (SME) or recommendations for de- registered as an assessor or moderator with the ETDP Seta is made.

The PAB will verify panel assessments against the PAB criteria and implement the de-registration decision of the assessor or moderator.

The PAB will de-register constituent assessors that do not continue to comply with the PAB criteria to measure the achievement of learners against sector related registered unit standards or qualifications.

De-register constituent moderators that do not comply with ETQA criteria to moderate the assessment process against sector related registered unit standards or qualifications.

The PAB will recommend de-registration of constituent assessors or moderators that do not continue to comply to the ETDP Seta criteria to measure the achievement of learners according to legislation.

3.5.1 The assessment panel:

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The assessment panel may consist of one generic assessor registered and certificated with the ETDP SETA on unit standard 115753; 115755, one generic moderator registered and certificated with the ETDP SETA on unit standard 115759; 117865, the relevant PAB representatives, as well as one Subject Matter Expert (SME) that has current experience of at least three (3) years in the relevant area where the assessment will be conducted, provided that this experience is at the level of the qualification or unit standards to be assessed by the assessor evaluated.

The assessment panel will be responsible to conduct the assessment and write a detailed report on their recommendations.

All members of the assessment panel are required to sign the PAB Assessor or Moderator Status Form once a decision is made as to the de-registration of the assessor or moderator.

3.5.2 Constituent assessor and constituent moderator appeal: -

The PAB will investigate the assessor's / moderator's appeal after the relevant consultation with the assessment panel has been exhausted.

The appeal and outcome of the appeal will be submitted to SAQA, and if the appeal leads to de-registration with the Education, Training, Development and Practices Sector Education and Training Authority (ETDP SETA) must be informed of the appeal and its outcome.

4. RECONSIDERATION

4.1 Purpose of Reconsideration

A request for reconsideration asks the PAB to conduct its own review of its accreditation status decision for the purpose of determining whether it committed any error or made any oversight or omission in its decision-making process or whether matters have arisen since the on-site visit or the PAB's decision which require relief from the original decision.

By way of contrast, an appeal calls upon a special Appeal Panel to review the decision of the PAB. A request for reconsideration must be made before an appeal is filed. An appeal may not precede a request for reconsideration

4.2 Filing of Request for Reconsideration

Within thirty (30) calendar days after receipt of the official notification of an adverse decision, the owner/ director of the provider may file a Request for Reconsideration of the status decision by the PAB at the earliest practicable regularly scheduled meeting of the PAB.

The request shall be made in writing and addressed to the ETQA manager of the PAB.

If a request for reconsideration is not filed within this time period, the provider will have lost its right to reconsideration and subsequent appeal. A decision is defined as adverse if the accreditation/ approval status is withdrawn from a programme or provider initially accredited by the PAB.

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4.3 Contents of Request for Reconsideration

The Request for Reconsideration shall state concisely or in outline form the provider's reasons for seeking a reversal or modification of the PAB's decision and should include any alleged errors, omissions, or oversights.

Statement in Support of Reconsideration and Supplementary Documentation: -

Not later than forty-five (45) calendar days prior to the next meeting of the PAB Advisory Committee, the provider shall submit to the Chair of the PAB twelve (12) copies of a *Statement in Support of Reconsideration*. This statement shall discuss in detail the matters outlined in the Request for Reconsideration. The statement shall be accompanied by any documents that the provider relies upon to support reconsideration of the adverse decision.

4.4 Requests for Reconsideration Hearing:

Should the provider desire the opportunity to present oral testimony or argument in support of reconsideration, it shall submit a request for an oral hearing at the same time it submits its Request for Reconsideration.

The request for an oral hearing shall briefly state the reasons why such a hearing is necessary and shall specify the names and titles of all persons who will offer testimony or argument. The provider will be notified of the date, time and location no later than thirty days prior to the hearing.

4.5 Reconsideration Hearing Procedures

At the hearing on reconsideration, the provider has the burden of adducing evidence which proves that the PAB's decision was erroneous or materially deficient or that there has been a change in facts or circumstances which require that the PAB's decision be altered. To this end, the provider may present oral testimony and documentary evidence, question any member of the on-site the PAB Representatives, and make any arguments which it believes substantiates its case.

The hearing shall commence with an opening statement by the Chair of the Advisory Committee, which briefly describes the parties and the issues involved in the reconsideration and summarizes the procedures to be followed at the hearing. The representatives of the provider may then make an opening statement following which the provider's witnesses shall be called. Any member of the PAB Advisory Committee may cross-examine any of the provider's witnesses. After all of the witness testimony has been presented, the provider's representative may make a closing argument. The hearing record shall then be closed and the hearing adjourned.

A provider which desires to question a member or members of the on-site PAB Representatives must so advise the Chair of the PAB at the time it files its request for a hearing (within thirty days of receipt of the decision). All reasonable expenses incurred by witnesses attending the hearing shall be borne by the party requesting their presence.

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The hearing shall be conducted by the Chair of the PAB so as to bring out all relevant facts. The rules of evidence shall not be strictly applied, but the Chair shall exclude irrelevant, repetitious, or frivolous materials and testimony.

A transcript of the reconsideration hearing shall be made and placed in the record of the proceeding. The costs of such a transcript shall be shared equally between the PAB and the provider that requested reconsideration.

4.6 Decision on Reconsideration

As soon as practicable after the close of the hearing, or, if there was no hearing, after the submission of the Statement in Support of Reconsideration, the PAB shall act to affirm, modify, or reverse its status decision. The PAB may also take any other action that it believes is just and proper.

If the PAB changes its original status decision, it must place the provider in one of the accreditation or non-accreditation classifications, and may not defer action.

The owner or director of the provider, any relevant ETQA, SAQA and the assessment house (if relevant) shall be notified promptly in writing of the PAB's decision on reconsideration.

When the decision to withhold or withdraw accreditation is upheld upon reconsideration, the provider may appeal that decision to an Appeal Panel of SAQA.

4.7 Expedited Reconsideration

A provider may seek expedited reconsideration of the PAB's status decision; however, it must prove to the PAB that there exist extraordinary circumstances that require expedited reconsideration and that the failure to grant such reconsideration would be grossly inequitable.

Requests for expedited reconsideration will not be liberally granted, except in the cases of withhold initial accreditation which will be automatically expedited upon request of the provider.

A request for expedited reconsideration shall be filed with the Chair of the PAB as soon as possible after the provider receives notice of the PAB's status decision and prior to the thirty-day deadline. In cases of accreditation withdrawn, upon receipt of the request, the Chair shall poll at least two-thirds of the Advisory Committee of the PAB to determine if expedited reconsideration should be granted. The request shall be approved upon the consent of a majority of the PAB Advisory Committee polled, and the Chair shall establish with the provider a mutually acceptable schedule for expedited consideration.

Granting a request for expedited reconsideration signifies that the PAB has been convinced that failure to grant such reconsideration would be grossly inequitable. Because *the Statement in Support of Reconsideration* is submitted after the request for an expedited process, granting the expedited process does not imply that the PAB has made any judgment about the merits of the programme's or Provider's evidence provided in the *Statement in Support of Reconsideration*.

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If the request for expedited reconsideration is granted either automatically or following a poll of the PAB Advisory Committee, the programme must submit the *Statement in Support of Reconsideration* no later than forty-five (45) days following the request for expedited reconsideration.

An expedited reconsideration for a programme or Provider which has initial accreditation/ approval withheld may be considered and decided by a one day on-site assessment of conditions by a duly constituted team.

A team will be appointed by the Chair, will consist of three members of the PAB, including at least one reviewer of the programme and will be accompanied by an Advisory Committee member of the PAB. The visit expenses incurred will be borne by the provider.

The provider and programme will be notified of the PAB's decision in writing within ten (10) working days of the expedited reconsideration visit.

5. ETQA ACCREDITATION REVIEW COMMITTEE

The composition of the PAB Accreditation Review Committee will be the ETQA Manager, Accreditation and Audit officer and the Director. If needed the relevant PAB / ETQA Advisory Committee Representative may be required to be present at the ETQA Accreditation Review Committee meetings.

The ETQA Accreditation Review Committee will be responsible for upholding or rejecting recommendation made by the PAB Accreditations and Audit officer or Assessment Panel regarding de-accreditation, de-registration, withdrawal of approval or re-accreditation recommendations, approval or rejection of an application for extension of primary focus.

The ETQA Accreditation Review Committee will be responsible for upholding or rejecting recommendation made by the PAB Accreditations and Audit officer or Assessment Panel on provider learning programme/ qualification/ standards approval, review, re-accreditation or de-accreditation recommendations.

The ETQA Accreditation Review Committee will be responsible for upholding or rejecting recommendation made by the PAB Accreditations and Audit officer or Assessment Panel on provider mentoring, compliance and corrective actions recommendations.

The ETQA Accreditation Review Committee will be responsible for upholding or rejecting recommendation made by the PAB Accreditations and Audit officer or Assessment Panel on assessor or moderator de-registration, de-accreditation, re-registration and re-accreditation recommendations.

The ETQA Accreditation Review Committee will be responsible for upholding or rejecting recommendation made by the PAB Accreditations and Audit officer or Assessment Panel on provider, learner, guardian, parent, assessor and moderator appeal recommendations after the process and policy relating to the appeal has culminated and a final decision is required.

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