



Dar es Salaam Institute of Technology

Quality Assurance Policy

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May 2009



PREFACE

Quality Assurance Policy describes good practice in a technical education and training Institution based on National Council for Technical Education (NACTE) quality standards. These standards focus on assessing institutional effectiveness in meeting institutional purposes. Dar es Salaam Institute of Technology defines quality as the *degree of fit* between *what its customers want* and *what its customers get*. DIT's customers are primarily the learners, professional bodies and the employers, but with regard to DIT's staff, the customer is the very next person who receives their work.

- a) The policy outlines the quality-based management structure, duties and responsibilities. It also contains guidelines for internal institutional audit as well as external quality assurance evaluation plan.
- b) A QA/QC Bureau has been established make sure that the Institute maintains and continually improves the level of QA/QC across all its core mission activities, that is teaching, research and services to the public. The Structure of the QA/QC Bureau shall be such that, it is headed by an Institute QA/QC Bureau Manager, who shall be assisted by two QA/QC Coordinators, one responsible for teaching, learning & research and another for support and community services. The Bureau will be reporting directly to the Office of the Principal and the Quality Assurance process will be managed and facilitated by the QA/QC Bureau Manager.



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EXECUTIVE SUMMARY

ES1: Dar es Salaam Institute of Technology (DIT) was established in 1997 by an Act of Parliament: “the Dar es Salaam Institute of Technology Act No. 6 of 1997”. It has been established with a Vision to become the leading provider of high quality engineering education, research and consultancy, within Tanzania and the East African region. Realisation of the DIT Vision and corresponding Mission objectives as indicated in the establishing Act need guidance of Quality Assurance Policy which was put in place by the 19th meeting of the DIT Council that convened in 2003.

ES2: Quality Assurance Policy describes good practice in a technical education and training Institution based on NACTE quality standards. These standards focus on assessing institutional effectiveness in meeting institutional purposes. Dar es Salaam Institute of Technology defines quality as the *degree of fit* between *what its customers want* and *what their customers get*.

ES3: The 19th meeting of the DIT Council that convened on 11th November 2003 approved the Policy for Quality Assurance and Quality Control (QA/QC). The policy outlines the quality-based management structure, duties and responsibilities. During implementation of the Policy for Quality Assurance and Quality Control, there has been a good maintenance of QA/QC especially in academics. However, the desired qualitative and quantitative monitoring of quality assurance across the Institute was fully realized due to the following challenges:

- b) The Policy was incorrectly perceived as a policy for academic matters leaving out services which directly or indirectly affect the quality of learner’s achievement. The DIT Corporate Strategic plan has now moved from *Basic Transformation Phase (2003/2004-2007/2008)* to the *Capacity*



consolidation Phase (2008/2009-2012/2013) which emphasizes on quality and standards to *Enhance competitiveness of academic programmes offered* and *Achieve national reputation in terms of relevance and quality of outputs* necessitated the review of the DIT Quality Assurance Policy

- c) Accreditation and Re-accreditation require Policy for the Quality Assurance and Quality Control procedures for the activities of the Institute be in place.

ES4: Dar es salaam Institute of Technology has an institutional quality goal to achieve a quality level of greater than 4.2 out of 5 for all academic programmes and non-academic activities (In line with ISO 9000:2000, the rating scale). Quality happens at five different levels of fit within our institution, our reaction to each being vital to the success of maintaining a quality culture and aiming for the required quality level

- a) Quality level 1 - React to customer complaints.
- b) Quality level 2 - Correct system problems.
- c) Quality level 3 - Ensure functional capability.
- d) Quality level 4 - Benchmarking.
- e) Quality level 5 - Strive for superlative excellence.

ES5: Quality Assurance Policy Statements are:

- a) To assure the quality of the total integrated academic cycle.
- b) To assure the quality of the total student experience.
- c) To be committed to the principle of external peer involvement in assuring quality.
- d) To take into account the views of Institute learners.



ES6: Leading Quality Assurance Goals are:

- a) To ensure a framework of management, academic support and facilities that enhances the quality of the teaching and learning experience, research and community service quality;
- b) To ensure adequate strategic planning and review;
- c) To promote cost effective management;
- d) To ensure the ability to develop, deliver and evaluate learning programmes which culminate in registered standards or qualifications;
- e) To equip learners with the necessary capabilities to demonstrate competence in their chosen professions;

ES7: Quality Assurance Management Structure: Quality assurance is achieved by a participative process where all meeting agenda referred to in the QA Policy shall have 'Quality' as an agenda item. The Quality Assurance process is managed and facilitated by the QA/QC Manager, who reports to the Principal.

ES8: Quality Assurance activities are performed through Quality Assurance the following Committees: Departmental Meetings; Academic Board Meeting; The Management Board; Academic Committee Meeting; Finance and Planning Committee; Appointments and Disciplinary Committee; Students Affairs Committee; and the Council.

ES9: Quality Assurance Evaluation Procedure

- a) Time Frame: the evaluation should be conducted at once a year according to the almanac of the Institute activities.
- b) Evaluation Committee membership is as follows:



- a) QA/QC Bureau - Chair
 - b) Head of Department or Unit - Secretary
 - c) Senior staff and staff representation from the institutional function.
 - d) Stakeholder representatives (employers, students, other departments which are supplied by this function) – if applicable.
 - e) Peers (local, national, international, other institutions) – if applicable
- c) Evaluation Agenda
- i) Opening and adoption of Agenda
 - ii) Follow up of previous actions from action plan
 - iii) Documentation review
 - iv) Visit laboratories, the library or other practicum/service localities (evaluate the supply of materials/equipment and fulfilment of the aims and goals of the learning programme or services provided)
 - v) Discuss with Departmental staff members over the evaluation finding/report
 - vi) Recommendations for action plan
 - vii) Conclusion**

ES10: Documentation procedure

- (b) The evaluation report will be prepared by the QA/QC Bureau office in conjunction with the respective HoD..
- (c) The QA/QC Bureau office submits the report to the Principal for onward transmission to the Council through appropriate Committee
- (d) Matters pertaining to the possible incrimination of staff members must

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not be reported. Such matters must be handled through relevant Institutional procedures.

- (e) The final decisions on the contents of the reports will be communicated to the Council for deliberation and direction

ES11: Establishment of the Quality Assurance and Quality Control Bureau

(a) Aim of the QA/QC Bureau

The aim of the QA/QC Bureau is to make sure that the Institute maintains and continually improves the level of QA/QC across all its core mission activities, that is teaching, research and services to the public, and in particular to:

- (i) Oversee operationalisation of the Quality Assurance Policy of the Institute
- (ii) Monitor and assist to improve quality of Teaching, learning, Research and Community services at the Institute.
- (iii) Audit the quality assurance procedures in accordance with the Quality Assurance policy of the Institute.
- (iv) Coordinate development of standards, benchmarks and best practices for the Institute

(b) Expected Outcomes from the QA/QC Bureau

- (i) Enhanced student performance and success in learning
- (ii) Improved work performance of academic and other staff
- (iii) Enhanced satisfaction of society's and stakeholders' interest, expectations and needs
- (iv) Improved relations with stakeholders and the wider society
- (v) Enhanced capacity towards becoming a leading provider of high quality engineering education, research and community services



within Tanzania and the East African Region

(c) Structure of the QA/QC Bureau

- (i) The Structure of the QA/QC Bureau shall be such that, it is headed by an Institute QA/QC Bureau Manager, who shall be assisted by two QA/QC Coordinators, one responsible for teaching, learning & research and another for support and community services. The **QA/QC Bureau Manager** will serve as a Quality Manager.
- (ii) The Bureau will be reporting directly to the Office of the Principal and the Quality Assurance process will be managed and facilitated by the QA/QC Bureau Manager

(d) The Qualifications of Quality Manager

The Bureau Manager will have status as an Academic Head of Department. She/He will therefore be required to have the at least qualifications like any other HOD, which are as follows:

- (a) At least a Masters degree
- (b) Teaching experience of at least four years of good record in Teaching, Marking scripts and invigilation.
- (c) Experience in Leadership/ Administration
- (d) Interest / orientation towards research
- (e) Strong participation in consultancy activities
- (f) Command respect in Academics at DIT



ACKNOWLEDGEMENTS

The Management of Dar es Salaam Institute of Technology wishes to appreciate the wealth of knowledge gained from the experiences of various individuals and institutions that has influenced the Institute's policies and procedures on Quality. We are grateful to:

- National Council for Technical Education (NACTE) from which we have adopted their guidelines on Quality Assurance and Control as the basic model to be followed.
- European Foundation for Quality Management (EFQM) whose model has been used as guidance (See item 3 of the document on Quality level 4).
- International Standard Organization 9000:2000 (ISO 9000:2000) whose Quality Assurance Rating Scale has been used (See Table 3.1 of the document).
- Peninsula Technikon whose documents on Quality have benefited us a lot. In particular we would like to thank Prof. J. Tromp (former Deputy Vice-Chancellor of Peninsula Technikon) and Dr. D. Coetzee Quality Manager of Peninsula Technikon) for having shared with us their knowledge on Quality.

It is impractical to mention all such individuals and institutions whose contributions have made this exercise a reality, but, indeed, we are grateful to each of them.



1. INTRODUCTION

1.1 Preamble

Quality Assurance Policy describes good practice in a technical education and training Institution based on NACTE quality standards. These standards focus on assessing institutional effectiveness in meeting institutional purposes. This Quality Assurance Policy brings together in one area the various policies, procedures and references that ‘help make quality happen’ at the Dar es Salaam Institute of Technology. It covers most aspects of Quality Assurance policies, procedures and management within our institution. It does so in full alignment with the Vision, Mission and Values of the Dar-es-Salaam Institute of Technology (DIT).

1.2 Vision

The vision of Dar es Salaam Institute of Technology (DIT) is to become the leading technical education Institution in addressing societal needs.

1.3 Mission

The mission of Dar es Salaam Institute of Technology is to provide competence based technical education through training, research, innovation and development of appropriate technology.

1.4 Definition of Quality

Dar es Salaam Institute of Technology defines quality as the *degree of fit* between *what our customers want* and *what our customers get*. Our customers are primarily the learners, professional bodies and the



employers, but with regard to our staff, the customer is the very next person who receives our work.

1.5 Quality levels

Dar es salaam Institute of Technology has an institutional quality goal to achieve a quality level of greater than 4.2 out of 5 for all academic programmes and non-academic activities. Quality happens at five different levels of fit within our institution, our reaction to each being vital to the success of maintaining a quality culture and aiming for the required quality level.

(i) *Quality level 1 - React to customer complaints.*

For those complaints or queries we get, to react as fast and efficient as possible to satisfy the complainant.

(ii) *Quality level 2 – Correct system problems.*

To use our corrective and preventive action system (Quality Improvement Plan) for closing out non-conformances and evaluation findings.

(iii) *Quality level 3 – Ensure functional capability.*

To ensure that our processes are fit for purpose and are capable of complying to Dar es Salaam Institute of Technology standards and the relevant statutory requirements.

(iv) *Quality level 4 – Benchmarking.*

To ensure that our processes are always compared and adjusted to the



‘best in class’ practices as internationally observed, using guidance models such as the EFQM (European Foundation for Quality Management).

(v) ***Quality level 5 – Strive for superlative excellence.***

To be the best-in-class and a unique and innovative centre of excellence in everything that we do. In line with ISO 9000:2000, the rating scale in Table 1.1 is proposed for the QA evaluation of each key activity:

TABLE 1.1: QUALITY ASSURANCE RATING SCALE.

Quality level	Performance level	Guidance
1	No formal approach	No systematic approach evident, no results, poor results or unpredictable results.
2	Reactive approach	Problem- or corrective-based approach; minimum data on improvement results available.
3	Stable formal system approach	Systematic process-based approach, early stage of systematic improvements; data available on conformance to objectives and existence of improvement trends.
4	Continual improvement emphasised.	Improvement process in use; good results and sustained improvement trends; evidence of the use of benchmarking.
5	Best-in-class	Strongly integrated improvement process;

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	performance.	best-in-class benchmarked results demonstrated.
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1.6 Strategic Quality goals

- (i) Customers' identification.
- (ii) Doing it right the first time.
- (iii) Establishing centres for excellence.
- (iv) Providing what the customer wants, not what we can offer.
- (v) Providing quality education.
- (vi) Launching quality awareness campaign.

2. QUALITY ASSURANCE POLICY RATIONALE

- (a) The Vision of the Dar-es-Salaam Institute of Technology is to become the leading provider of ***high quality*** engineering education, research and consultancy within Tanzania and the East and Central African region.
- (b) The mission of the Institute is, among other things, to
 - (i) Provide access to ***high quality*** technical education and training for students in Applied Sciences, Engineering, Entrepreneurship and related disciplines as well as to conduct relevant research and consultancy.
 - (ii) Promote the development and usage of appropriate technology that meets national, regional and ***international needs and standards*** through skills and practical-oriented training, research and consultancy.



- I Accreditation requires the implementation of Quality Assurance and Quality Control procedures for the activities of the Institute. The policy demands the presence of the Quality Assurance Manager to manage and facilitate Quality Control.
- (d) The Corporate Strategic plan, especially the Capacity consolidation Phase (2008/2009-2012/2013) emphasizes on quality and standards as follows:
- (i) Enhance competitiveness of academic programmes offered
 - (ii) Achieve national reputation in terms of relevance and quality of outputs



3. QUALITY ASSURANCE POLICY STATEMENTS

In the effort to realise its vision, mission and objectives, DIT shall consistently monitor and systematically evaluate the implementation of all its mandated activities. The Institute shall review all its existing policies, regulations and procedures and, where such instruments are lacking, develop appropriate ones, so as to ensure that all these guides are in line with its vision, mission and overall objectives.

In addition, the Institute shall ensure that at all times it has in place well stipulated and widely understood criteria for judging performance standards in all its core mission activities. This entails compilation and distribution of a comprehensive Quality Assurance policy. In line with these guides, DIT shall constantly monitor and evaluate all its day to day activities in the core mission areas of teaching/learning, research, service to the public and support services to students and staff.

Purpose of Quality Assurance Policy

International concerns about how to maintain quality control in an environment that increasingly put 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.

Quality assurance policy is to enhance the effectiveness of its core activities of learning, teaching research and management. The policy addresses all areas of the Institute activities focusing on their contribution to and in alignment with the Institute's strategic plan.

3.1 To assure the quality of the total integrated academic cycle.

Policies and procedures shall be in place for maintaining, monitoring and evaluating the academic output standard. The academic standard shall be in line with the established goals of outcomes based education.

3.2 To assure the quality of the total student experience.

The focus of our quality assurance policies and procedures is not just on

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maintaining the academic output standard of our courses, although this is a vital element if we are to meet the needs of our learners. We must also assure the quality of the learners' experience while they are studying at the Institute. We recognise that all areas of the Institute's operation affect (directly or indirectly) the quality of that experience and may ultimately have an impact on learner achievement.

3.3 To be committed to the principle of external peer involvement in assuring quality.

We recognise that an important factor in assuring quality involves constant re-examination of our own approach against those of our peers. In this way we can assure ourselves that we are maintaining appropriate standards and also demonstrate accountability to external bodies for the use of public funds.

We are therefore committed to the involvement of external peers in our quality assurance process. (In this context, the term 'peer' is broadly defined to incorporate academic staff, practitioners and employers.)

3.4 To take into account the views of Institute learners.

We recognise that learners can make a valuable contribution to the assurance and assessment of quality within the Institute. We are therefore committed to seeking the views of our learners and using the feedback that we gain to improve the quality of their experience.

4. QUALITY ASSURANCE GOALS

- (a) To ensure a framework of management, academic support and facilities that enhances the quality of the teaching and learning experience, research and community service quality;
- (b) To ensure adequate strategic planning and review;



- I To promote cost effective management;
- (d) To ensure the ability to develop, deliver and evaluate learning programmes which culminate in registered standards or qualifications;
- (e) To equip learners with the necessary capabilities to demonstrate competence in their chosen professions;
- (f) To ensure that critical cross-field outcomes are incorporated in learning programmes;
- (g) To ensure the regular assessment of teaching and learning methods;
- (h) To ensure the continuous relevance of qualifications by remaining responsive to national needs, and providing for the participation of all stakeholders in the planning and co-ordination of DIT standards and qualifications;
- (i) To maintain national- and international value and acceptance of qualifications;
- (j) To allow for multiple pathways to the same learning ends (credit transfer);
- (k) To provide ease of entry to appropriate levels of education and training for all prospective learners in a manner which facilitates progression;
- (l) To provide for learners, on successful completion of accredited prerequisites, to move between components of the delivery system and promote progression;
- (m) To enable learners to transfer their credits or qualifications from one learning institution and/ or employer to another;
- (n) To ensure equal opportunities for all;
- (o) To ensure up to date staff development in line with academic needs;

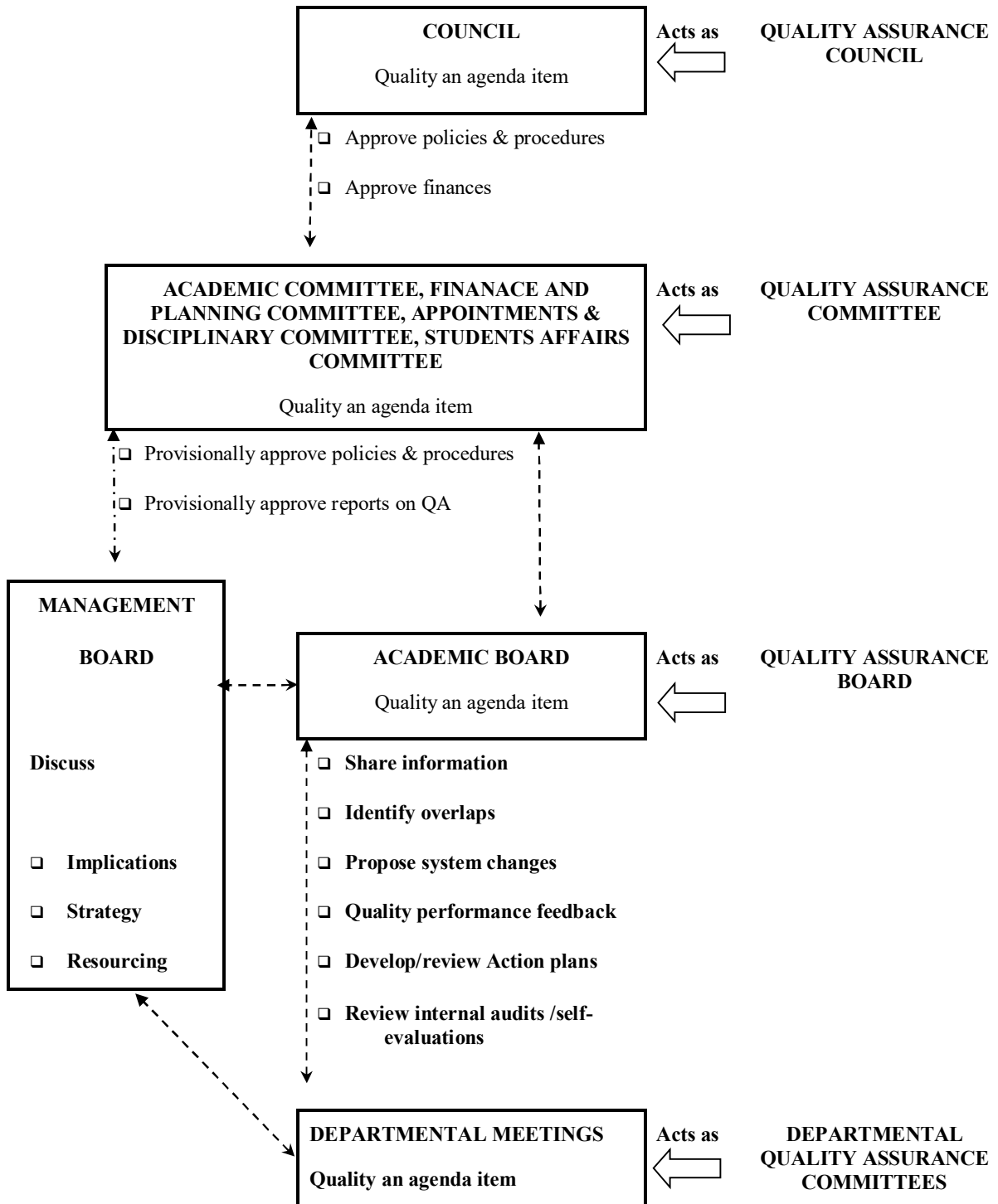


- (p) To provide for the counselling, support and guidance of learners by specially trained individuals who meet nationally recognised standards for educators and trainers.
- (q) To ensure that an international standard of research is maintained;
 - I To ensure adequate community development;
- (s) To recognise ongoing improvement towards these goals.



5. QUALITY ASSURANCE MANAGEMENT STRUCTURE

Quality assurance is achieved by a participative process where all meeting agenda referred to in the QA Policy shall have ‘Quality’ as an agenda item. Processes in support of quality management are outlined in Figure 4.1



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Figure 4.1 Quality Assurance Management Structure

6. QUALITY ASSURANCE RESPONSIBILITIES

The Quality Assurance process is managed and facilitated by the QA/QC Manager, who reports to the Principal. In order to underpin the institute's Academic Goals, objectives, monitoring and the QA duties for each level of responsibility is given in the table below:

Level	Quality Assurance responsibilities and duties.
(a) The Council	Validates the quality strategy, quality policy, quality assurance policy and all other policies and procedures. Approves funds for the quality assurance Process.
(b) The Principal	Leads quality assurance issues through chairmanship of the Audit Committee, the Management board and the Academic Board meetings. Critical Duties: (i) Develop Quality Policy. (ii) Develop Quality Assurance Policy. (iii) Develop all Policies and procedures. (iv) Develop Academic Quality Assurance Framework. (v) Validate Internal Quality Assurance Self-evaluation reports. (vi) Decisions on follow-up of report findings.



- I Deputy Principal Academic, Research and Consultancy (DPARC).** Focuses on the implementation of the strategic quality management process of academic matters of the institution through the Academic board, Heads of Departments.

Critical duties:

- (i) Set and review academic goals.
- (ii) Provide teaching and learning strategy.
- (iii) Implement, maintain and improve the Academic Quality Assurance Framework.
- (iv) Develop Quality Assurance Manual.
- (v) Follow – up corrective and preventive actions from self – evaluation reports and decisions taken at the Academic Committee, Academic Board and the Management board.

- (d) Deputy Principal Administration and Finance , (DPAF).** Oversees the implementation of the strategic quality management process of Finance and Administration of the institute through the Management Board, Heads of Departments.

Critical duties:

- (i) Set and review goals in the aspects of Finance, Human Resource and Administration



- (ii) Implement, maintain and improve the Quality Assurance Framework in Finance, Human Resource and Administration
- (iii) Develop Quality Assurance Manual.
- (iv) Follow – up corrective and preventive actions from self – evaluation reports and decisions taken at the Finance and Planning Committee, Appointments and Disciplinary Committee and the Management board.

(e) Heads of Department.

Heads of Department (HODs) have a Quality Assurance function in ensuring that their Departments implement their QA functions in such a way that they demonstrate accountability for quality and measured quality improvement. HODs must identify from amongst their staff members those who would support the HOD in fulfilling such duties.

Critical duties:

- (i) Implement and review academic goals.
- (ii) Arrange Quality assurance feedback from staff and students.
- (iii) Carry out self-evaluation in the department
- (iv) Discuss moderation- and examination reports and give feedback to the Office of Registrar.
- (v) Review of student feedback surveys



(vi) Review of research quality.

(f) Lecturers

Lecturers need to maintain lecturing and learning methodologies, course notes and assessments to the required standard.

Critical outcomes:

- (i) Implement student feedback mechanisms. Action findings.
- (ii) Implement Quality Improvement actions. Ensure action is adequate and prevents problems from happening again.
- (iii) Ensure ongoing research quality.
- (iv) React to moderator and examination findings.

(g) Non-teaching staff. Each staff member contributes to the success of the Unit / Department / Division's quality assurance and takes co-responsibility for the control and attainment of the required quality levels. Self-evaluation in the units takes place in anticipation of an external evaluation. It takes place on an annual basis. Every action in the unit is subject to the assurance and quality evaluation determined by the Council and adapted for the unit.

(h) Learners

The implementation of the quality assurance process involves the representatives of learners in each program throughout the process. Learners are afforded full



membership of the various committees that exist in the institution that deal with quality assurance.

7. QUALITY ASSURANCE BOARD COMMITTEES

(a) Departmental QA Board

Quality Assurance activities are performed by the staff as indicated above. Relevant issues are then discussed at one of the regular departmental meetings on a monthly basis. Such matters are appropriately minuted for action with reference to the Quality Improvement Plan. In addition, progress on matters arising from self-evaluations and external evaluations are reviewed.

The meeting serves as the Departmental Quality Assurance Board Meeting. The Quality Manager is an ex officio member of this meeting with regard to quality matters.

(b) Academic Board

The Academic Board Meeting acts as the Quality Assurance Board of Dar es Salaam Institute of Technology. The Board consists of a multi-disciplinary membership from, senior academic and administrative staff.

The meeting focuses on:

- (i) Review of all internal and external evaluation reports, and their recommendation for approval by the Academic Committee Meeting.
- (ii) Review of QA ratings and actions for follow-up with reference to the



Quality Improvement Plan. This includes the identification of longstanding action items for subsequent decision by the Academic Committee Meeting.

- (iii) The discussion of all revisions to policies and procedures, with a recommendation to the Academic Committee Meeting for approval.
- (iv) The identification of QA system duplication and overlap.
- (v) The identification and implementation of new or revised needs with regard to institutional policies and procedures, as approved by the Academic Committee Meeting.

I The Management Board

The Management board meets on a weekly basis, and presents a decision-making forum for any Quality Assurance issues that require discussion, a strategy or resourcing before or after presentation to the Academic Committee.

The Director of Studies leads discussions on the QA process on Academic matters and the Director of Administration and Finance presents QA process on all academic support services.

The Principal acts as Chairperson of the Management board, Audit Committee, Secretary of the Academic Committee.



(d) Academic Committee

The Academic Committee as the highest academic body in the institution demonstrates commitment to the quality assurance process by discussing matters pertaining thereto and by encouraging staff to actively participate in the process. It further demonstrates commitment by actively supporting measures for the remedying of shortcomings.

The support of the Academic Committee for the quality assurance process is evident from the decisions it takes and from the encouragement of all to participate. It motivates the allocation of funds for furthering the cause of quality assurance.

The Academic Board actively implements any decisions from Council and the Academic Committee on quality assurance and oversees the successful implementation thereof by all staff. Quality Assurance issues dealt with at Academic Committee level include:

- (i) Programme review and development
- (ii) New programme development.
- (iii) Programme and –support quality assurance through the implementation of the decisions of the Council. In the case of external evaluation and programme accreditation needs, such documents will be validated for approval by Council.
- (iv) Student promotion.



- (v) Admission procedures and regulations
- (vi) Examination procedures and regulations
- (vii) Research policy
- (viii) Community services
- (ix) Professional/Short courses

(d) Finance and Planning Committee

The Finance and Planning Committee as the highest Finance and Planning body in the institution, demonstrates commitment to the quality assurance process by discussing matters pertaining thereto and by encouraging students and staff to actively participate in the process. It further demonstrates commitment by actively supporting measures for the remedying of shortcomings

The support of the Finance and Planning Committee for the quality assurance process is evident from the decisions it takes and from the encouragement of all to participate. It motivates the allocation of funds for furthering the cause of quality assurance.

The Management actively implements any decisions from Council and the Finance and Planning Committee on quality assurance and oversees the successful implementation thereof by all staff. Quality Assurance issues dealt with Finance and Planning Committee level include:

- (i) Controls financial and accounting operations of the Institute
- (ii) Approves established financial policies
- (iii) Ensure financial control procedures are adhered to
- (iv) Approves the prepared budget



(e) Appointment and Disciplinary Committee

The Appointment and Disciplinary Committee as the highest Appointment and Disciplinary body in the institution, demonstrates commitment to the quality assurance process by discussing matters pertaining thereto and by encouraging students and staff to actively participate in the process. It further demonstrates commitment by actively supporting measures for the remedying of shortcomings

The support of the Appointment and Disciplinary Committee for the quality assurance process is evident from the decisions it takes and from the encouragement of all to participate. It motivates the allocation of funds for furthering the cause of quality assurance.

The Management actively implements any decisions from Council and the Appointment and Disciplinary Committee on quality assurance and oversees the successful implementation thereof by all staff. Quality Assurance issues dealt with at Academic Committee level include:

- (i) Responsible for deliberation and approval of all matters pertaining to staff appointment, discipline, deployment, development and evaluation and promotion.

(f) Students Affairs Committee

The Students Affairs Committee as the highest students Affairs body in the institution, demonstrates commitment to the quality assurance process by discussing matters pertaining thereto and by encouraging students and staff to actively participate in the process. It further demonstrates commitment by actively supporting measures for the remedying of shortcomings.

The support of the Students Affairs Committee for the quality assurance



process is evident from the decisions it takes and from the encouragement of all to participate. It motivates the allocation of funds for furthering the cause of quality assurance.

The Office of the Dean of Students actively implements any decisions from Council and the Students Affairs Committee on quality assurance and oversees the successful implementation thereof by all students and staff. Quality Assurance issues dealt with at Students Affairs Committee level include:

- (i) Approves Regulations and Policies concerning students welfare
 - (ii) Ensures laid down regulations are adhered to
 - (iii) Manages acceptable Code of conduct and morality for students
 - (iv) Students guidance and Counselling
 - (v) Recreation and Sports
 - (vi) Accommodation
 - (vii) Scholarship and Study Loans (HESLB) advise
- (g) The Council.**
- (i) The Council validates the institution's key policies and procedures.
 - (ii) The Council validates all the self –evaluation reports of the institution and subsequent corrective and preventive actions.
 - (iii) Council members may be required to participate as members of QA evaluation panels.



8. QUALITY ASSURANCE EVALUATION PROCEDURE

8.1 Timeframe

The evaluation should be conducted at once a year according to the almanac of the Institute activities.

8.2 Evaluation Committee

- a) QA/QC Bureau – Chair
- b) Head of Department or Unit – Secretary
- c) Senior staff and staff representation from the institutional function.
- d) Stakeholder representatives (employers, students, other departments which are supplied by this function) – if applicable.
- e) Peers (local, national, international, other institutions) – if applicable

iii Quality Assurance (QA) Evaluation Framework

The QA evaluation framework is given in Figure 8.1. The framework consists of five broad categories, namely:

- a) **Institutional functions quality assurance**, which includes human resources, finance, information technology, management information, strategic planning, international relations and marketing.
- b) **Institutional services quality assurance**, which includes campus planning, communications, protection services, technical support, landscaping and gardening services.
- c) **Student services quality assurance**, which includes student residences, financial aid, counselling and health, student development, sports administration and judicial affairs.
- d) **Academic programme quality assurance**, which includes programme management, resourcing and funding of programmes, staffing, facilities, workstations, laboratories, the programme academic structure, curriculum, study guides, admission and



registration, teaching and learning, industrial training, research, assessment and new programmes.

- e) **Academic Support quality assurance**, which includes support for industrial training, research administration, assessment administration, teaching development, curriculum development, short courses and community services.

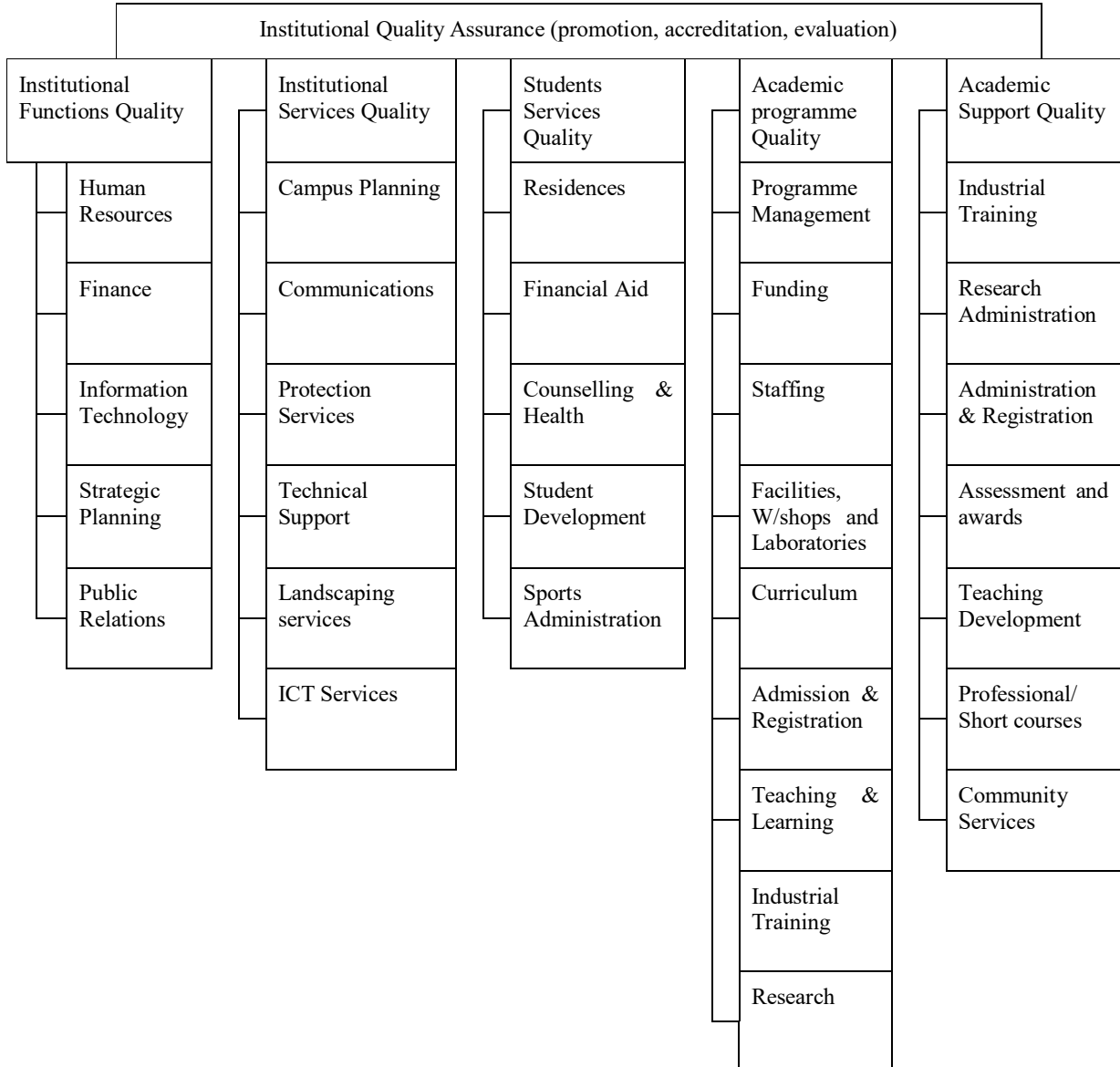


Fig. 8.1: Details of the various activities under Institutional Quality Audit

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iv **Preparation for Evaluation**

- a) The HOD, together with appropriate staff, prepare an information and data report that suitably underpins the evaluation content as outlined in the specific annexure for evaluation. The HOD should circulate this report to the evaluation committee at least two weeks before the evaluation date.
- b) The HOD arranges the availability of the Evaluation Committee on the appropriate date.
- c) The HOD organises the availability of the relevant documentation for the evaluation, including:
 - ii) Agenda
 - iii) Information and data report.
 - iv) Previous evaluation
 - v) Action plans and quality improvement plan.
 - vi) Proof of compliance and improvement trends.

iii **Evaluation Agenda**

- a) Opening and adoption of Agenda
- b) Follow up of previous actions from action plan
- c) Documentation review
- d) Visit laboratories, the library or other practicum/service localities (evaluate the supply of materials/equipment and fulfilment of the aims and goals of the learning programme or services provided)
- e) Discuss with Departmental staff members over the evaluation finding/report
- f) Recommendations for action plan
- g) Conclusion



8.6 Documentation

(a) The evaluation report will be prepared by the QA/QC Bureau office in conjunction with the respective HoD. The report will be limited to three or four typed pages, under the appropriate headings. The following headings may be appropriate for the evaluation of the learning programmes:

- ii) Department evaluated
- iii) Programmes or Unit evaluated
- iv) Teaching and learning implementation and development
- v) Student Guidance and support services
- vi) Library/Resources centre services
- vii) Research and academic linkage activities
- viii) Consultancy activities/ Community Services
- ix) Staff Appraisal and Development
- x) Administrative and Technical Support Staff
- xi) Resources and teaching materials utilisation
- xii) Laboratory Provision and utilisation
- xiii) Student ICT application and support
- xiv) Curriculum implementation and development
- xv) Industrial Training, linkages and Alumni activities
- xvi) Examinations administration
- xvii) Student evaluation of staff and course
- xviii) Quality assurance mechanisms
- xix) Internal Relations
- xx) Planning, Marketing and Public Relations
- xxi) Success of self-evaluation

(b) The QA/QC Bureau office submits the report to the Principal for onward transmission to the Council through appropriate Committee

(c) Matters pertaining to the possible incrimination of staff members

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must not be reported. Such matters must be handled through relevant Institutional procedures.

- (d) The final decisions on the contents of the reports will be communicated to the Council for deliberation and direction

9.0 ESTABLISHMENT OF THE QUALITY ASSURANCE AND QUALITY CONTROL BUREAU

(a) Aim of the QA/QC Bureau

The aim of the QA/QC Bureau is to make sure that the Institute maintains and continually improves the level of QA/QC across all its core mission activities, that is teaching, research and services to the public, and in particular to:

- (i) Oversee operationalisation of the Quality Assurance Policy of the Institute
- (ii) Monitor and assist to improve quality of Teaching, learning, Research and Community services at the Institute.
- (iii) Audit the quality assurance procedures in accordance with the Quality Assurance policy of the Institute.
- (iv) Coordinate development of standards, benchmarks and best practices for the Institute

(b) Expected Outcomes from the QA/QC Bureau

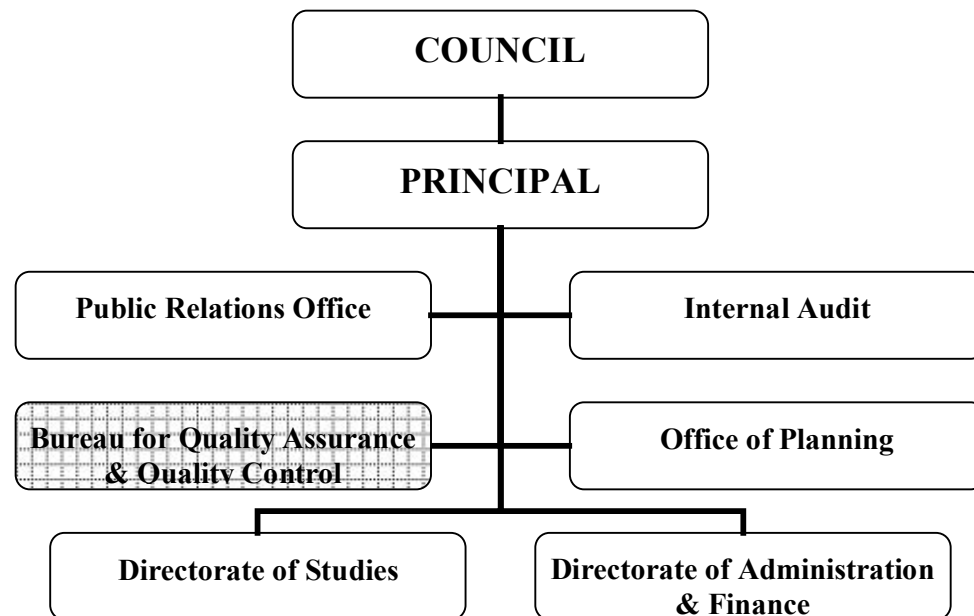
- (i) Enhanced student performance and success in learning
- (ii) Improved work performance of academic and other staff
- (iii) Enhanced satisfaction of society's and stakeholders' interest, expectations and needs
- (iv) Improved relations with stakeholders and the wider society
- (v) Enhanced capacity towards becoming a leading provider of high



quality engineering education, research and community services within Tanzania and the East African Region

(c) Structure of the QA/QC Bureau

- (i) The Structure of the QA/QC Bureau shall be such that, it is headed by an Institute QA/QC Bureau Manager, who shall be assisted by two QA/QC Coordinators, one responsible for teaching, learning & research and another for support and community services. The **QA/QC Bureau Manager** will serve as a Quality Manager.
- (ii) The Bureau will be reporting directly to the Office of the Principal and the Quality Assurance process will be managed and facilitated by the QA/QC Bureau Manager



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(d) The Qualifications of Quality Manager

The Bureau Manager will have status as an Academic Head of Department. She/He will therefore be required to have the at least qualifications like any other HOD, which are as follows:

- (a) At least a Masters degree
- (b) Teaching experience of at least four years of good record in Teaching, Marking scripts and invigilation.
- (c) Experience in Leadership/ Administration
- (d) Interest / orientation towards research
- (e) Strong participation in consultancy activities
- (f) Demand respect in academics at DIT