

**EUROPEAN COUNCIL ON CHIROPRACTIC
EDUCATION
QUALITY ASSURANCE AND ACCREDITATION
COMMITTEE**

EVALUATION TEAM REPORT

**DEPARTMENT OF CHIROPRACTIC
DURBAN UNIVERSITY OF TECHNOLOGY
DURBAN, SOUTH AFRICA
27-29 September
2022**

TABLE OF CONTENTS

1. Executive Summary	4
2. Introduction.....	7
3. Department of Chiropractic and Somatology, DUT.....	10
4. ECCE Standards Compliance	11
4.1 Aims and Objectives	11
4.2 Educational Programme	14
4.3 Assessment of Students	20
4.4 Students.....	21
4.5 Academic and Clinical Faculty (Staff)	24
4.6 Educational Resources	25
4.7 Relationship between Teaching and Clinical or Basic Science Research.....	28
4.8 Programme Evaluation.....	29
4.9 Governance and Administration	31
4.10 Continuous Renewal and Improvement.....	33
5. Conclusions.....	34
5.1 Summary	34
5.2 Commendations, Recommendations and Concerns	34
5.3 Acknowledgements	35
APPENDIX (TIMETABLE).....	36

1. EXECUTIVE SUMMARY

1. The Department of Chiropractic (henceforth referred to as the Department) is a department in the Faculty of Health Sciences at Durban University of Technology (DUT) in Durban, South Africa.
- 1.2 The programme provides undergraduate chiropractic education and training in the following qualifications; Bachelor of Health Sciences: Chiropractic and Master of Health Sciences: Chiropractic. The MHSc: Chiropractic degree is the only exit level award that enables registration with the Allied Health Professions Council of South Africa (AHPCSA) and which allows graduates to legally practice as a chiropractor in South Africa.
- 1.3 Prior to a merger in 2001 of ML Sultan Technikon and Technikon Natal (forming Durban Institute of Technology, which became the Durban University of Technology in 2005), undergraduate chiropractic education and training had been provided by Technikon Natal (now Durban University of Technology, DUT) since 1989.
- 1.4 The merger of the Somatology and Chiropractic programmes to form the Department of Chiropractic and Somatology was effected in 2008.
- 1.5 In April 2022, DUT submitted its Self-Study Report (SSR) with appendices for the continuation of full accredited status with the ECCE. The documentation was reviewed and accepted by the Quality Assurance and Accreditation Committee of the ECCE and the decision was made to proceed with the evaluation visit.
- 1.6 A three-day Evaluation Visit took place during 27-29th September, 2022. The site visit provided further documentary and oral evidence to the previously submitted documents. DUT was given feedback at the end of the visit and informed verbally of commendations, recommendations and/or concerns regarding its provision of chiropractic education and training.
- 1.7 Members of the Evaluation Team extend their thanks to DUT for the courtesy shown to them during the evaluation visit, and for conducting the visit in an open and transparent manner, thereby affording the Team full access to members of staff, students and documentation.
- 1.8 This document is the Evaluation Report (henceforth referred to as the Report, or Evaluation Report) compiled by the Evaluation Team based on the evidence provided beforehand and during the on-site visit to DUT. The Report was sent in draft format to DUT for factual verification on 6 November, 2022, and the final Report was submitted to the Quality Assurance and Accreditation Committee on 23 November, 2022.
- 1.9 This Report addresses the compliance of DUT with each of the ECCE Standards in the provision of chiropractic education and training through the MHsc: Chiropractic award. The outcomes of the Report are as follows:

Commendations:

1. The updated anatomy and physiology laboratories enhance the learning and training opportunities for the students.
2. Continued integration of the basic science service teaching within the programme, particularly in anatomy and physiology, is considered exemplary and provides an excellent foundation for the subsequent chiropractic training of the students.
3. The two-year supervised clinical training, together with satellite clinics, outreach activities and community events, provides an opportunity for students to experience a wide variety of patients and clinical conditions and broaden their clinical skills.
4. There are robust programme management and quality assurance procedures in place at the Department, Faculty and University levels.
5. The enthusiasm of the student body for the programme and the chiropractic profession is a credit to the teaching staff and the University.
6. Student support services within the University are of a high quality. The additional services provided by the Academic Development Ambit within the Faculty of Health Sciences are considered exemplary.
7. Student support services within the University are of a high quality. The additional services provided by the Academic Development Ambit within the Faculty of Health Sciences are considered exemplary.

Recommendations:

1. While there is good communication within and between the different levels of the Department, Faculty and University, there remains more limited communication between students and the various levels of the University. It is recommended that student representatives be included in committees at all levels where relevant education aspects occur.
2. The existing needs of academic staff need to be definitively addressed in a consistent and sustainable manner, to overcome the existing overload and the multitasking nature of the existing staff: full-time academic staff matching the full extent of the educational and academic needs of the Chiropractic program is highly recommended.
3. The faculty needs to present a clear and demonstrable alignment between assessment, content, methods of teaching and learning and learning outcomes, to overcome the existing concerns regarding the "semesterisation" of the new curriculum.
4. There is continued evidence that graduation is delayed for several students due the demands of the final dissertation. Mechanisms should be in place to ensure that all students can complete the programme within the normal six-year registration period, except in exceptional circumstances.
5. This recommendation is carried over from the 2017 reaccreditation visit. The uneven distribution of workload amongst the academic staff may inhibit career development and

the future growth of a vibrant research culture in the Department. A robust appraisal and promotion scheme operated within the University would assist in addressing these inequalities. Additionally, the workload levels impact the ability of the staff to supervise students.

6. The number of qualified chiropractic staff employed within the clinic for the delivery of the programme should be increased to enhance clinical training and aid in the supervision of clinical students and reduce potential waiting time for student clinician consultation and patients waiting for treatment.
7. The chiropractic practical lecture room needs to be refurbished and updated to match the high-quality facilities in other parts of the Department. Consideration needs to be given to the establishment of an additional practical room together with a second well equipped laboratory facility in which students can undertake their research projects.
8. There continues to be an urgent need for the participation of patients as stakeholders within the clinical aspects of the programme.

Concerns:

There were none.

2. INTRODUCTION

- 2.1 Durban University of Technology (DUT) was first accredited by ECCE in 2009 and was most recently granted accreditation for 5 years in 2017. A Self-study report with appendices for re-accreditation was submitted to the Quality Assurance and Accreditation Committee in April 2022. A site visit was arranged based on the submitted documentation and the evaluation visit took place on 27th-29th September 2022.
- 2.2 Members of the Evaluation Team were appointed by the ECCE Executive and each member received the SSR, appendices and written comments from the Quality Assurance and Accreditation Committee related to the documents prior to the visit. The members of the Evaluation Team were:

Rui Amaral Mendes	Chair, Case Western Reserve University (USA) and Centre for Research in Higher Education Policies (CIPES), University of Porto, Portugal
Tharsan Sellathurai	Secretary, Private Practice, The Netherlands
Mark Langweiler	Member, London South Bank university, UK
Esmarie Hougaard	Member, Private Practice, South Africa

Professor Rui Amaral Mendes acted as Chair to the team and Tharsan Sellathurai acted as Secretary. Members of the Evaluation Team were allocated specific areas of responsibility before arriving at DUT.

- 2.3 The purpose of the Evaluation Visit was to verify the SSR and other evidence presented by DUT, and to evaluate the institution in terms of its compliance with the ECCE Standards in Chiropractic Education and Training (hereafter referred to as the ECCE Standards, or Standards). Based on the SSR and its supporting documents, and on oral and other documentary evidence given and consulted during the on-site visit, an Evaluation Report compiled by the Evaluation Team was submitted to DUT for correction of any factual errors, and thereafter to the Quality Assurance and Accreditation Committee for a decision on the accreditation of DUT.
- 2.4 All members of the Evaluation Team were presented by name to DUT, and no objection to any member was received. All members of the Evaluation Team signed confidentiality and conflict of interest statements before the on-site visit. No conflicts of interest by any of the members were declared.
- 2.5 A draft timetable for the visit was sent to DUT and the final schedule agreed with DUT. A copy of the schedule is appended to this Report (Appendix 1).
- 2.6 Members of the Evaluation Team held a meeting in Durban on 26th September to complete the final preparations prior to the visit. The on-site visit was from 27th to 29th September 2022 (inclusive). Meetings were held with the institution over the first three days and time was allocated for the Evaluation Team to hold private meetings as the visit proceeded. This allowed the Evaluation Team to reflect on the (written and oral) evidence it had been presented with and enable the Evaluation Team to request further evidence where clarification was necessary. The Report was compiled during the visit, and part of the final day (29th September) was set aside to complete the draft Report and feedback orally to the institution.

- 2.7 Members of the Evaluation Team were very well hosted by DUT, afforded every courtesy and had full access to documentation and to staff, students and other stakeholders in the institution. Members of the Evaluation Team and the ECCE extend their thanks and appreciation to DUT.
- 2.8 The report was finalized by the Chair of the Team and send to Team members for comments. Based on these, the final draft Report was sent to DUT for factual verification on 6 November 2022. The response was received from DUT on 13 November, 2022. The Chair and Secretary finalized the Report, and this was submitted to the Chair of the Quality Assurance and Accreditation Committee members on 22 November 2022 and the decision meeting was held on 13 December 2022.
- 2.9 The Report includes an Executive Summary, a description of DUT and the findings of the Evaluation Team regarding compliance of DUT with the ECCE Standards. The Report ends with the Conclusions of the Team and Commendations, Recommendations and/or Concerns the Team wished to draw to the attention of the Quality Assurance and Accreditation Committee. The Evaluation Report was based on the ENQA Guidelines for external reviews of quality assurance agencies in the European Higher Education Area (www.engq.eu)

3. DEPARTMENT OF CHIROPRACTIC AND SOMATOLOGY, Durban University of Technology (DUT)

- 3.1 The Department is one of ten departments within the Faculty of Health Sciences, which in turn is one of six faculties at the Durban University of Technology (DUT). The Department is responsible for the provision of undergraduate chiropractic education and training. There is one other ECCE accredited institution delivering undergraduate chiropractic education and training in South Africa (University of Johannesburg).
- 3.2 DUT is an established university in South Africa with over 25,000 registered students, recognized within the country's legislation, and in receipt of government funding through the Department of Education (DoE). The chiropractic provision of the Department of Chiropractic is a valid undergraduate programme delivered by the university, delivering the following levels of study; Bachelor of Health Sciences: Chiropractic and Master of Health Sciences: Chiropractic. The MHS: Chiropractic degree is the only exit level award that enables registration with the Allied Health Professions Council of South Africa (AHPCSA) and which allows graduates to legally practice as a chiropractor in South Africa.
- 3.3 Decisions regarding the provision of chiropractic education and training made at departmental level are ratified by either the Faculty Board of Health Sciences or directly by the Office of the Dean/Deputy Dean of the Faculty of Health Sciences. The decision-making process then proceeds through the Senate, which is the highest academic decision-making authority of the University. The Department thus operates within clearly defined and proper structures within the University.
- 3.4 Besides its own internal University quality assurance procedures, the chiropractic programme(s) is subject to external review by the Higher Education Quality Committee (HEQC) of the Council for Higher Education (CHE) through the DoE, which is, by legislation, charged with the accreditation of institutions and programmes in higher education at the national level. Programmes and institutions are reviewed by HEQC on a five-yearly basis and. Additionally, there is also a review done by the Allied Health Professions Council of South Africa.
- 3.5 The quality of all University programmes, including the chiropractic programme, is undertaken by HEQC.
- 3.6 Chiropractic education and training provided by DUT is firmly established in national legislation, and in addition to satisfying internal quality assurance procedures within the university, aligns itself with a number of external stake holders, including the DoE (i.e. South African Qualifications Authority (SAQA) and HEQC) and the DoH (i.e. AHPCSA), as well as the chiropractic professional body in South Africa (Chiropractic Association of South Africa - CASA).
- 3.7 It should be noted that there was little impact in terms of the admissions cycle, new intake, resources or funding during the latest student unrest suffered by the universities across South Africa.
- 3.8 The vision and mission of the Department of Chiropractic are defined as:

Vision:

The Department is committed to excellence in producing quality chiropractors who are orientated towards achieving excellence in their professional and personal capacities in order to contribute meaningfully to the society in which they reside.

Mission:





To produce clinician-scientists within the field of chiropractic who espouse the ideals of:

- Excellence in their professional/practice environments with regard to ethics, patient care, business practice and professional development as well as their private environments.

- Work within a multidisciplinary team through evidence-based medicine in partnership with the patient for the betterment of holistic patient care.

3.9 The following section details the findings of the Evaluation Team with regard to the compliance of the University with ECCE Standards in the provision of chiropractic education and training through the award of MTech: Chiropractic. The findings of the Evaluation Team are based on documentation presented by the University prior and during the on-site visit.

3.10 The colour-coded system outlined below was used by the Evaluation Team to indicate the level of compliance with each standard:

	<u>Dark Green</u> = Fully compliant/no risk. (This is on track)
	<u>Light Green</u> = Substantially compliant/low risk. (Broadly on track with some areas which could be addressed)
	<u>Yellow</u> = Partially compliant/medium risk. (Some significant areas which could be detrimental if not addressed)
	<u>Red</u> = does not comply/High risk. (Serious concerns threaten this area; high risk in the organisation's overall performance).

4. ECCE STANDARDS COMPLIANCE

4.1 AIMS AND OBJECTIVES

4.1.1 Statement of Aims and Objectives

The institution/programme must define the overall aims and objectives of the first qualification chiropractic programme and make them known to its stakeholders. The statements must describe the aims and objectives resulting in a chiropractor that is competent and safe to enter practice as a primary contact practitioner in the current healthcare environment, with the appropriate foundation for postgraduate education and training, and a commitment to, and capacity for, life-long learning.

4.1.1 a Description

The Chiropractic Department provides undergraduate chiropractic education and training via the following qualifications, Bachelor of Health Sciences: Chiropractic, Master of Health Sciences in Chiropractic and Doctor of Health Sciences: Chiropractic. The previous National Diploma: Chiropractic, Bachelor in Technology of Chiropractic and Master in Technology of Chiropractic are no longer open and are now phasing out. In the South African context, the first qualification is the Master of Health Sciences: Chiropractic degree, this is followed by a period of internship as is mandated by the Allied Health Professions Council, following which the graduate can register as a chiropractor in order to legally practice in the South African context.

The Department is fully committed to produce high quality chiropractors with excellent professional and personal attributes to contribute the healthcare system worldwide. The Department has clearly articulated Aims and Objectives for their programmes of study and these are linked to central values of the institution in terms of providing high teaching and learning, research and innovation, and contributions to community and society. The Aims and Objectives have been shaped in liaison with external bodies over many years. The latest overall revisions were made in 2016/2017 further changes may be considered within the new programme that is currently with the Department of Higher Education for assessment/evaluation. Key outcomes of the curriculum are clearly defined so as to produce:

- Primary contact practitioners with skills and competence in differential diagnosis
- Specialist assessors of the neuro-musculoskeletal system and other conditions amenable to chiropractic care
- Specialists in the field of spinal and extremity manipulation
- Wellness and holistic practitioners trained in the prevention of disease
- Develop practitioners able to work within a multidisciplinary team, through evidence-based medicine and in partnership with the patient, for the betterment of holistic patient care.

4.1.1 b Analysis

The Aims and Objectives statements allow the knowledge, skills and attitudes necessary for safe and competent practice as a primary contact chiropractic practitioner within a range of healthcare settings. The programme enables the graduate to be equipped for continued learning throughout professional life, in line with competencies outlined in the Standards.

4.1.1 c Conclusion

DUT fully complies with Standard 1.1



4.1.2 Participation in formulation of Aims and Objectives

The overall aims and objectives of the chiropractic programme must be defined by its principal stakeholders.

4.1.2 a Description

The Chiropractic Programme of Chiropractic is located at the Mansfield School on the Ritson Road Campus. The programme provides undergraduate chiropractic education and training in the following qualifications, Bachelor of Health Sciences: Chiropractic and Masters of Health Sciences: Chiropractic. The MHSc: Chiropractic degree is the only exit level award that enables registration with the Allied Health Professions Council of South Africa (AHPCSA) and which allows graduates to legally practice as a chiropractor in South Africa.

The Chiropractic Programme defines the following documents as elements in **considering its aims and objectives:**

- The WHO Educational standards document published in 2005.
- The WFC guidelines on Chiropractic Identity published in 2005. This would be consonant with the role of chiropractic as espoused by the Chiropractic Association of South Africa (CASA). ECCE, CCEI and other regulatory agency publications are relevant
- The AHPCSA mandate on what is legally required by the AHPCSA for registration of a chiropractor in South Africa (Act 63 of 1982 as amended).
- The Programme of Health's National Strategic Plan (most recent 2019 – 2024).
- The Council of Higher Education approved Audit Criteria (2005).
- The South African Qualifications Authority (SAQA), standards generating body documents that were prepared for final registration with SAQA in 2002 -2003 after interim registration in 1999.
- The DUT strategic vision and mission (ENVISION 2030). <https://www.dut.ac.za/wp-content/uploads/2020/03/Envision-2030-strategy-map.pdf>
- The Faculty of Health Sciences strategic vision and mission.
- Reviews and advisory board meetings (including internal and external stakeholders).

In addition to the above, further avenues are used including students across the programmes, full- time and part-time staff.

4.1.2 b Analysis

Staff within the Department and those who provide the service teaching in the earlier years were fully cognisant of the key Aims and Objectives of the chiropractic programme. There was also good evidence of the engagement of the student body in defining the Aims and Objectives. The Department has strong links to the external agencies and the professional associations within South Africa and these bodies are fully informed and utilized within the shaping of the provision. As a carry-over from the 2017 re-accreditation, there needs to be a formalized mechanism to be set-up for the patients, who use the chiropractic clinics at the University and the various remote sites, to be used as stakeholders. Use of such persons to regularly review and contribute to the aims and objectives of the chiropractic programme continues to be recommended.

4.1.2 c Conclusion

DUT fully complies with Standard 1.2



4.1.3 Academic autonomy

The institution/programme must have sufficient autonomy to design and develop the curriculum.

4.1.3 a Description

The curriculum of the chiropractic programme has been designed and shaped by staff in the Chiropractic Department with inputs by other staff at Faculty and institutional levels. There are clearly defined rules and regulations at the institutional/Faculty level for any changes or revisions to the set curriculum. The University operates a central repository for all subject and module descriptors that is freely accessible to all staff.

4.1.3 b Analysis

The Chiropractic Department has full autonomy over the design and development of the curriculum in line with rules and regulations appertaining to the policies and procedures of the Faculty and the institution. The staff in the service teaching departments are also fully and formally engaged in this process through several communication channels.

4.1.3 c Conclusion

DUT fully complies with Standard 1.3



4.1.4 Educational outcome

The institution/programme must define the competencies (exit outcomes) that students will exhibit on graduation in relation to their subsequent training and future roles in the profession and the wider healthcare system.

4.1.4 a Description

The exit outcomes/competencies of the programme are defined and available to students in the Chiropractic. Further detail of the exit level outcomes was provided in Appendix B1: Magister Technologiae. Students must acquire the knowledge, skills and attitudes to enable them to graduate and practice as a safe and competent practitioner within the wider healthcare community in South Africa.

4.1.4 b Analysis

The educational outcomes are based on both the requirements of the university and the chiropractic profession. These are met in full by the Durban University programme. The exit outcomes/competencies align with the ECCE Standards.

4.1.4 c Conclusion

DUT fully complies with Standard 1.4



4.2 EDUCATIONAL PROGRAMME

4.2.1 Curriculum model and educational methods

The institution/programme must define a curriculum model and educational (teaching and learning) methods consistent with the objectives of the curriculum.

The curriculum and educational methods must ensure the students have responsibility for their learning, and prepare them for lifelong, self-directed learning throughout professional life.

4.2.1 a Description

The curriculum model focuses on the basic sciences in the first two years of the programme with the emphasis shifting to the clinical sciences in years 3 and 4 culminating with clinical training in years 5 and 6. The University has recently stipulated that scheduled staff/student contact time should be no more than 40% of the total staff contracted working hours.

The Chiropractic Department provides undergraduate chiropractic education and training via the following qualifications: Bachelor of Health Sciences: Chiropractic, Master of Health Sciences: Chiropractic and Doctor of Health Sciences: Chiropractic. After this, students can undertake an internship with the AHPCSA. Completion of the internship allows full registration with the council and the right to practice chiropractic.

The Faculty of Chiropractic has instituted a new curriculum model mandated by DUT. This moved the programme from the continuous annual model to semesters. Each semester is 16 weeks including preparation, assessments, marking and re-examinations. This has led to a misalignment between the contents, methods of teaching, assessments and outcomes and a lack of vertical and horizontal integration of module contents. The modules should be reframed to better fit into the 16-week semester.

4.2.1b Analysis

The curriculum model is based on the traditional semester and generally consistent with the objectives of the curriculum. The current modules need to be reframed into the 16-week semester and enhance the vertical and horizontal structure learning outcomes

4.2.1 c Conclusion

DUT substantially complies with Standard 2.1 

4.2.2 The Scientific Method

The institution/programme must teach the scientific method, other forms of research inquiry and evidence-based practice, including analytical and critical thinking.

The curriculum must include elements for training students in scientific thinking and research methods.

4.2.2 a Description

Students are introduced to the scientific method from their first year and this is continued in a structured fashion through to year 5 on the programme. Scientific methods are taught both in the classroom and using laboratory practical sessions. Modules include a wide range of scientific topics including, for example, Philosophy, History and Principles; Epidemiology; Chiropractic Principles and Practice and Research Methods and Techniques. From year 4 scientific thinking and research methods are reinforced as all students engage in a self-selected research project. This element requires a detailed research proposal, research and ethics committee approval and a dissertation in the form of a bound thesis. Academic support and additional physical facilities are provided to support all students undertaking their project component.

4.2.2 b Analysis

The design of the curriculum allows for development of strong scientific thinking and research skills over the whole programme. The skills acquired in the early years are used to define and fully develop the research project proposal in the fourth year. The process of approval of the students' proposals continues to be encumbered by central processes and perceived as overly complicated by students and current system that is in place needs review. However the standards are fully met.

4.2.2 c Conclusion

DUT fully complies with Standard 2.2. 

4.2.3 Biomedical Sciences

The institution/programme must identify and include in the curriculum those contributions of the basic biomedical sciences that enable a knowledge and understanding of the basic sciences applicable to the practice of chiropractic.

4.2.3 a Description

The basic biomedical science including anatomy and physiology have both lecture and laboratory components with students' professional needs at their centre. The anatomy dissection room is well equipped and offers students an ideal means to visualize and understand the structures of the human body. The chiropractic programme benefits from the expertise, resources and facilities that the Service Departments of the University make available. Basic biomedical sciences are taught mainly in the first two years of the programme.

4.2.3 b Analysis

There is ample evidence that the curriculum contains the basic sciences applicable to the practice of chiropractic. The service staff teaching the basic sciences appear to have a very good understanding of what is required for the chiropractic programme and regularly communicate with chiropractic staffing this regard. The team felt this was an example of good practice.

4.2.3 c Conclusion

DUT fully complies with Standard 2.3 

4.2.4 Behavioural and Social Sciences, Ethics and Jurisprudence

The institution/programme must identify and include in the curriculum those contributions of the behavioural sciences, social sciences, ethics, scope of practice and legal requirements that enable effective communication, clinical decision-making and ethical practice.

4.2.4 a Description

The programme includes several modules or partial modules examining the philosophical, historical and ethical needs of the doctor-patient relationship including those relating to jurisprudence, clinical decision making, communication and professionalism.

4.2.4 b Analysis

There is ample evidence that there is sufficient contribution from these subject areas for students to understand the importance of effective communication and be able to develop effective, professional, ethical and clinical decision-making skills.

4.2.4 c Conclusion

DUT fully complies with Standard 2.4 

4.2.5 Clinical sciences and skills

The institution/programme must identify and include in the curriculum those contributions of the clinical sciences that ensure students have acquired sufficient clinical knowledge and skills to apply to chiropractic practice in a primary contact setting.

4.2.5 a Description

The curriculum is designed to focus on neuromusculoskeletal, and non-musculoskeletal conditions commonly seen in practice in South Africa. The clinical skills include History Taking, Physical Examination, General Diagnosis, Diagnostic Imaging, Laboratory diagnostic procedures, Radiography, Pain management, Manual therapies, Supportive techniques, Physiotherapeutic Modalities, Patient care and management, Patient advice and education, Disease prevention and Health promotion, Nutrition and Rehabilitation.

The students' knowledge and skills are tested both clinically in a practical setting as well as a theoretical setting.

There is a lack of reflective practice and tools. It is urged adding this to the modules would encourage and enhance critical thinking and continued self-learning. Additionally, it is recommended that patient reported outcomes (PROMS) be instituted as a clinical educational tool.

4.2.5 b Analysis

The clinical sciences component of the curriculum is quite solid and robust. A reframing of the 16-week semesters requires more vertical and horizontal integration and a proper alignment between learning outcomes, learning tools and assessment. The students receive adequate training in neuromusculoskeletal conditions commonly seen by the chiropractor as well as visceral conditions commonly seen by primary health care providers in South Africa.

4.2.5 c Conclusion

DUT fully complies with Standard 2.5 

4.2.6 Chiropractic

The institution/programme must foster the ability to participate in the scientific development of chiropractic.

4.2.6 a Description

The programme is based on the principles of the scientific method and evidence-based practice and the curriculum contains subjects and modules that address Chiropractic history and Development and Appreciation of research. Chiropractic skills are taught by an experienced staff familiar with current practices within the profession

4.2.6 b Analysis

The curriculum provides the students with knowledge and appreciation of the Chiropractic history and how it relates to the current status of the profession. The students are taught to be critical and to exercise reasoning. The team finds the programme fosters the ability to participate in the scientific development of chiropractic.

4.2.6 c Conclusion

DUT fully complies with Standard 2.6 

4.2.7 Clinical training

The institution/programme must identify and include a period of supervised clinical training to ensure the clinical knowledge and skills, communication skills and ethical appreciation accrued by the student can be applied in practice, and so enable the student to assume appropriate clinical responsibility upon graduation.

Every student must have early patient contact leading to participation in patient care.

4.2.7 a Description

Clinical training is mainly provided in years 5 and 6. The requirements for patient numbers of 35 new patient contacts, which includes a full case history and physical examination, and 350 follow up patient encounters. Clinical training is performed at the Chiropractic Day Clinic on campus. The students also have access to satellite clinics (Marburg, Cato Ridge, Narian Jeawon Vedic Center) and Sports and Community events. The students rotate through these settings in a controlled way,

except for the Sports and Community events that are of volunteer participation, though there is a good take up by the students. Transportation is provided by the DUT for all these settings, except for one of the satellite clinics. Also, all students are insured as the schedule for all the activities and rotations is sent ahead of time to the insurance company. Because of forced clinic closures caused by elements beyond the control of the DUT, students can complete their requirements using the satellite clinic network and the *ad hoc* events.

4.2.7 b Analysis

The clinical training component of the programme is of good quality. The campus clinic provides a good environment for this training to take part. In this clinic, the file system is well organized, and storage is adequate. Besides the Chiropractic Day Clinic, the access to a network of satellite clinics in social-challenged areas exposes the students to a wide variety of clinical conditions, range of age and case-mix that prepare the students for clinical practice upon graduation. Due to time constraints, the team did not visit the satellite clinics. The satellite clinics provide good interaction between the students and other health professionals. Interactions include referrals to and from these professionals. Students were pleased with the proactive outreach placement opportunities and felt that these broadened their clinical skills.

The programme provides satellite clinics thus allowing further opportunities for the students to complete the requirements for clinical training. The students propose the care plan that is approved by the supervising clinician. As recognized in the 2017 reaccreditation, the team identified the lack of use of PROMs (Patient-Reported Outcome Measures) in the Chiropractic Day Clinic. Outcome measures could improve patient care, provide a clinical education tool and data for future research projects for the final dissertation. More extensive contact with the clinic and chiropractic care through a well-structured clinical observation system for years 1 through 3 is advisable. Digital patient records should be implemented when the infrastructure allows.

There is a need to improve the clinical supervision of students by improving the number of staff and facilities, to ensure proper educational feedback and supervision.

4.2.7 c Conclusion

DUT substantially complies with Standard 2.7 

4.2.8 Curriculum Structure, Composition and Duration

The institution/programme must describe the content, duration and sequencing of courses that guide both staff and students on the learning outcomes expected at each stage of the programme, and the level of integration between the basic sciences and clinical sciences.

4.2.8 a Description

The programme has in the past included much didactic delivery. There is a move towards more self-directed study. The teaching and learning strategy has changed across the institution limiting tutor-led contact time to 40% with the remaining 60% dedicated to directed and self-directed study. It was felt that Year 3 had a very heavy workload when compared with other years.

The chiropractic programme team have chosen to weight the Master's dissertation at 50% (90 credits of the total credits for the Master's level of the programme). This has been done mainly to encourage research output within the department. National guidelines advise that Master's dissertations should be at least a quarter of the credits.


4.2.8 b Analysis

The content, duration and sequencing of courses is mapped out together with learning outcomes for each stage of the programme. The Self Evaluation Report recognises that integration between subjects is not optimal and considers that the new curriculum will go some way to address this.

The depth and content of the final year dissertation the students must produce remains over-ambitious, so that the research work and write-up often cannot be completed in an acceptable timeframe. Both staff and students had issues with the dissertation; staff with regard to the number of dissertations each staff member has to supervise and the amount of time this takes and students with the time it takes to complete the dissertation. Additionally, students are informed that the wait time for research results and other final dissertation components would be 8-12 weeks. It appears, however, that students are waiting up to 6 months for feedback with the potential negative impact of delaying graduation. This issue of student progression is compounded by time pressures on staff and the lack of suitably qualified and experienced project supervisors.

All aspects of the research project need to be addressed urgently to enhance the learning experience for the students.

4.2.8 c Conclusion

DUT Substantially complies with Standard 2.8 

4.2.9 Programme management

A curriculum committee (or equivalent (s)) must be given the resources, responsibility, authority and capacity to plan, implement and review the curriculum to achieve the aims and objectives of the chiropractic programme.

4.2.9 a Description

The curriculum development and review committee members perform the role of the curriculum review. External stakeholders including Chiropractic Association of South Africa (CASA) and the Allied Health Professions Council of South Africa (AHPCSA) also play a role in the programme management. These submissions are then considered by the CQPA. It is evident that the staff were loyal and eager to contribute to the success of the program and students

4.2.9 b Analysis

A robust programme management is in place and all courses undertake a 6 year periodic review with annual monitoring reviews. The annual quality assurance of the programme is done at a modular level where the department then has to submit it at a faculty level along with a development success plan.

4.2.9 c Conclusion

DUT fully complies with Standard 2.8 

4.2.10 Linkage with subsequent stages of education and training, chiropractic practice and

the health care system

Operational linkage must be assured between the first qualification programme and the subsequent stage of training or practice that the student will enter after graduation.

The curriculum must reflect the environment in which graduates will be expected to work and be responsive to feedback from graduates, the profession and the community.


4.2.10 a Description

In year 6, students fill out a registration form for the internship programme. Upon fulfillment of all requirements to be awarded the MTech: Chiropractic, graduates receive an internship number from the AHPCSA allowing them to start with clinical hours that can be completed off campus under supervision. On completion of this and submission of a portfolio, the chiropractor can apply to the AHPCSA for permanent registration. The organization of the internship, which requires a minimum of 675 hours, is undertaken by AHPCSA. Throughout the internship programme, there are strong links between the Department and external stakeholders through the inclusion of various members of full-time and part-time academic chiropractic staff on various committees and international bodies. The Allied Health Professions Council of South Africa (AHPCSA) does not recognize any education or training qualifications prior to the completion of the MHsc Chiropractic.

4.2.10 b Analysis

The programme is structured in a way to follow up the student from the completion of the undergraduate degree to the Master's Degree, since the AHPCSA does not recognize any education prior to the completion of the Master's Degree. The programme offers all the necessary steps to obtain full registration, making this process a seamless one.

4.2.10c Conclusion

DUT fully complies with Standard 2.10 

4.3 ASSESSMENT OF STUDENTS

4.3.1 Assessment methods

The chiropractic institution/programme must define and document the methods used for assessment, including the criteria for progression and appeals procedures. Assessment methods must be regularly evaluated, and new assessment methods developed as appropriate.

4.3.1 a Description

Assessment remains in line with University policy and regulations and has not changed substantially since the initial accreditation in 2009. Assessment is subject to published University policies and regulations and is administered by the Centre for Quality Promotion. The Chiropractic course handbook for each year gives a clear description of what is expected and what examinations will be done throughout the year. There are policies developed that are linked to continuous assessment through the programme, which are outlined for each subject in the

handbook.

Multiple assessments are done throughout the year to assess clinical competence in the form of OSCEs, competencies, written, practical and oral tests. No continuous final year assessments appear to be in place though there is a clinical exit examination to assess student knowledge and skill in patient management. It is recommended that a more formal approach be taken with regard to the final year and this be communicated to both full-time and part-time clinical floor staff.

4.3.1 b Analysis

External moderators or examiners are brought in for exit exams in third, fourth and fifth year. The Master's thesis is sent for external moderation and marking by two external examiners selected by the Faculty. There are guidelines that have been put in place for marking the Master's thesis and a system is in place for inconsistent marking. As a carry-over from the 2017 visit, the turn-around for marking should be 6-8 weeks but has taken significantly longer in some cases which has impaired students being able to graduate on time.

4.3.1 c Conclusion

DUT fully complies with Standard 3.1. 

4.3.2 Relation between assessment and learning

The assessment principles, methods and practices must be appropriate to the learning outcomes and the educational aims and objectives, and promote appropriate learning practices.

4.3.2 a Description

Policies regarding assessment and learning outcomes for modules are set out clearly in the Chiropractic Study Guides. The pre-requisites for tests and the required pass rate are clearly set out in the chiropractic guide. A wide range of assessments and examinations are used throughout the year. Students that require extra time for examinations can apply through the student counselling centre for additional time in examinations. The assessments are set with an emphasis placed on the year of study with clinical application to theory and practical being enforced as the level of study increases.

4.3.2 b Analysis

The Department gives clear guidance of their expectations for almost all students in assessments and examinations. Learning outcomes are addressed by the lecturing staff for students to have a clear understanding of what is expected of them. Although, it is noticed that students in 6th year don't have a clear understanding of how they will be assessed and what is expected of them. It is advised to take a formal approach regarding assessment in 6th year and to make use of the CELT provided by the University. This to diversify the spectrum of existing teaching and assessment tools.

There is a particular concern from the students needing to pay for assessment review and remarking of the final written summative examinations. Reviewing the assessments has the potential to serve as a learning tool and needs to be encouraged. It is recommended that the practice of payment for review and remarking of final assessments be discontinued.

4.3.2 c Conclusion

DUT substantially complies with Standard 3.2. 

4.4 STUDENTS

4.4.1 Admission policies and selection

The institution/programme must have a clearly defined admission policy that is consistently applied, and that includes a clear statement on the rationale and process of selection of students.

4.4.1 a Description

The student admission policy for the University resides with the office of the Academic Registrar and is reviewed periodically. A clear admission policy is in place, formally stated in the Programme Handbook. There is a well-defined mechanism from once an applicant initially applies to DUT for a place to their subsequent induction on the course. Student applications are routed through the Central Applications Office (CAO) of KwaZulu Natal, then onto the DUT admissions team, and then to the Faculty and Department for consideration. Applicant interviews have transitioned from a face-to-face environment to a virtual environment in 2020 because of the SARS-Cov-2 pandemic, and they will continue to use virtual methods for first-year applicant interviews for as long as SARS-Cov-2 persists. In terms of admission of students, there is no minimum intake of any particular type of applicant, however, the institution has set maximum guidelines. The institution has a prospectus for recruiting new students which are updated annually. Furthermore, the University hosts career fairs, and school tours through the Faculty to create awareness.

4.4.1 b Analysis

The admission process is seen to be fair and rigorous. University target numbers are being met by the Department. The Department is proactive in terms of its recruitment campaigns in highlighting the chiropractic profession within schools and to the community in general via the use of student ambassadors, open days and information leaflets, and as a result there has been an increase in the number of applicants even with the presence of SARS-CoV-2.

4.4.1 c Conclusion

DUT fully complies with Standard 4.1 

4.4.2 Student intake

The size of student intake must be defined and related to the capacity of the chiropractic institution/programme to provide adequate resources at all stages of the education.

4.4.2 a Description

The enrolment plan is set for three-yearly cycle. University management determines the student intake with input from Department/Faculty level. The programme admits students to year 1 depending on qualifications. Student enrolment is stable which allows for accurate resource

planning. Applicants accepted are equally distributed between Caucasian, Black African and Indian.

4.4.2 b Analysis

The size of the student intake is controlled and related to available resources. Parallel to the school's plan to overcome the persistently low number of full-time staff and clinical supervisors and to enhance its strategy for faculty development, it's pivotal that the number of students remains aligned with the available human resources, in order to secure that the best educational methodologies are in place and remain aligned with an evidence-based educational paradigm.

4.4.2 c Conclusion

DUT fully complies with Standard 4.2

4.4.3 Student support and counselling

The institution/programme must offer appropriate student support, including induction of new students, counselling in terms of student progress and other academic matters, and personal and social needs of students.

4.4.3 a Description

The Programme has a student support system that is built in at both institutional and faculty level. The lecturing staff monitor and identify the at-risk students who are then approached on a one-on-one basis and referred to the relevant support systems if necessary. Full-time and part-time lecturing staff are easily accessible for guidance or support for students either by appointment or directly after lectures.

There are also tutors/demonstrators to assist the lecturer during practical sessions. Since 2019, the programme has re-instituted the first-year mentorship programme. The mentorship programme is called Chiropractic Coaching and Mentorship Programme (CCMP). This programme is where senior students guide and mentor first year students. The programme has worked closely with the Centre for Excellence in Learning and Teaching (CELT) to ensure that the first year Chiropractic students have support for their transition into tertiary education. The programme bridges the gap for first year students moving from secondary to tertiary education with weekly courses implemented into the lecture timetable dealing with referencing, study techniques, time management and basic computer skills. At-risk students can also be sent by the Faculty or self-refer for consultations to assist where necessary.

Students also have access student counselling which is free for all registered DUT students. Support is given on an academic and personal level. The student counselling centre includes HIV/Aids support unit, student counselling and health clinic. They started the Chiropractic Programme Food Drive in 2021, where members of the Chiropractic Programme, students and CASA members donate food.

4.4.3 b Analysis

Student support and counselling is well developed within the University.

4.4.3 c Conclusion

DUT fully complies with Standard 4.3 

4.4.4 Student representation

The institution/programme must support student representation and appropriate participation in the design, management and evaluation of the curriculum, and in other matters relevant to students.

4.4.4 a Description

The chiropractic students have a class representative within each year, elected by the students. The class representatives meet with the Department once a month to raise any concerns relevant to the students.

There appears to be good student-staff communication within the different levels of the Department and Faculty. However, there is a more limited communication between the students and the various university levels. It is recommended that student representatives be added at all levels. Students also participate in the international chiropractic student forum, the World Congress of Chiropractic Students (WCCS).

4.4.4 b Analysis

Students complete Subject Evaluation Questionnaires to assist with the curriculum development. Student representatives across the cohort meet regularly with academic staff and subject heads. Formal path of communication between students and leadership needs to be developed ensuring that student representatives are present at all levels of the University and the school, particularly in all the committees that deal with pedagogically and educational relevant topics.

4.4.4 c Conclusion

DUT substantially complies with Standard 4.4 

4.5 ACADEMIC and CLINICAL FACULTY (STAFF)

4.5.1 Faculty (Staff) recruitment

The institution/programme must have a faculty recruitment policy which outlines the type, responsibilities and balance of faculty required to deliver the curriculum adequately, including the balance between chiropractic and non-chiropractic faculty, and between full-time and part-time faculty.

4.5.1 a Description

DUT has a policy for staff recruitment, mechanisms to identify where additional staff may be required and subsequently recruited. There is a formal induction process operated by the Center for Excellence in Learning and Teaching for new staff members which lasts a year and there they also undergo pedagogical training. Currently there are five full-time members of chiropractic lecturing staff, with one vacant post. There are also five part-time members of lecturing staff and

12 part-time clinical supervision staff. Most staff provide support of the research project component. The programme is assisted by many other staff across the faculty and University in the early years teaching.

4.5.1 b Analysis

The number of full-time staff on the programme remains at a very low level, with the predictable consequences in terms of work overload of existing staff. There are still one vacant post amongst the chiropractic staff. This is the leading cause of one of the present weaknesses of the Faculty/Programme: an evidently overloaded and multitasking academic staff.

The Department and the Faculty are aware of the urgent need to overcome the lack of full-time academic staff in order to match the full extent of the educational and academic needs of the Chiropractic program. Moreover, the lack of sufficient staff holding a Doctoral degree also poses an additional challenge as it generates further problems regarding the adequate supervision of the Master's dissertation in the final two years of the programme.

There is a centralized workload planning system in place for academic staff across the University. Recently this has resulted the teaching commitments of staff being altered significantly with some consequences across the delivery of the programme. One issue that needs to be addressed is that of the institution remains struggling with project supervision at the Master's level.

Overall, the overarching structure of the teaching staff relies on overloaded teaching staff and in part-time teaching staff which is missing the needed cohesiveness in terms of assessment and the desired learning outcomes, potentially hindering the student's supervision, support and assessment.

4.5.1 c Conclusion

DUT partially complies with Standard 5.1



4.5.2 Faculty Promotion and Development

The institution must have a faculty policy that addresses processes for development and appraisal of academic staff, and ensures recognition of meritorious academic activities with appropriate emphasis on teaching and research.

4.5.2 a Description

Currently the Faculty does not have a fully functioning formal process of evaluating, promoting and rewarding staff. DUT is in the process of introducing a centralized system. DUT does provide for recognition of meritorious achievements both for teaching and research activities. The institution supports CPD and encourages staff to undertake research and enroll in PhD programmes either at DUT or elsewhere. The CELT (Centre for Excellence in Learning and Teaching) offers workshops to staff to help them improve their teaching and research skills.

4.5.2 b Analysis

There is much interest in career development amongst the chiropractic staff, however, there is little take up due to the time constraints placed on the full-time lecturers. Some members of staff are engaging in or exploring opportunities for PhD study. A doctoral qualification is now necessary at DUT for promotion to a senior lecturer. The slow introduction of a formal review/appraisal

process at departmental level is unfortunate and needs to be encouraged to promote best practice and the formulation of both personal fulfillment and motivation and for attaining more strategic departmental goals. The school needs to proactively encourage Doctoral programmes by their academic staff.

4.5.2 c Conclusion

DUT partially complies with the Standard 5.2 

4.6 EDUCATIONAL RESOURCES

4.6.1 Physical facilities

The institution/programme must have sufficient physical facilities for the faculty, staff and the student population to ensure that the curriculum can be delivered adequately, and library facilities available to faculty, staff and students that include access to computer-based reference systems, support staff and a reference collection adequate to meet teaching and research needs.

4.6.1 a Description

Since the 2017 review of the programme the physical facilities have not changed with the exception of an added shared faculty practical room. The DUT is divided across several campuses around the Durban area. The programme is concentrated mainly on the Ritson, Steve Biko and M Sultan campuses and this has not changed since the last evaluation visit.

The library has an adequate collection of textbooks and relevant journals. Any article needed by the students can be obtained via interlibrary exchange system. The library has computers to serve the student population and also has a dedicated area that opens during regular and extended hours. The laboratories for the Basic Sciences double function as laboratories and lecture rooms at the same time. All laboratories are fitted with AV equipment, and the Anatomy Dissection Lab provides enough material for the learning of Anatomy and includes a museum. There is one technique room that serves for both practice and lecture from year 1 through 5 equipped with chiropractic tables, modality instruments, tables and chairs and Smartboard for e-learning and teaching.

The Chiropractic Day Clinic, where most of the clinical training takes place, is new and has a reception, files storage room, laundry, 23 treatment rooms, 6 modality rooms, one rehabilitation room, one common area with lockers for the students and a clinician supervising room. There is also a radiography clinic where x-rays are taken by the students and also an ultrasound facility (the latter not used by chiropractic students). The DUT has additional resources such as the language laboratory to help students whose English is not their primary language, and computer laboratories with computer literacy training available. The University possesses a range of recreational facilities across its three campuses.

Since the last review in 2017, the health and safety concerns have been resolved by the erection of a fence around the clinic preventing parties from occurring there. The SARS-CoV-2 pandemic and transition to blended teaching and learning has resulted in changed practices for assessments with some assessments being conducted on the Moodle platform. The Center for Excellence in Teaching and Learning at the DUT developed a curriculum conversations platform which focuses on all aspects of the curriculum, materials development, alternative ways for thinking about assessments and what will be enacted in the online learning and teaching spaces.

4.6.1 b Analysis

The physical facilities available for the programme are adequate and give support to the curriculum taught. The student support resources are commendable. The infrastructure needs to be enhanced to secure the engagement of teaching staff in Doctoral programmes.

As recommended in the 2017 review, the chiropractic practical lecture room needs to be updated to match the high-quality facilities in other parts of Department, not only size-wise, but, more importantly, in terms of the available clinical teaching staff needed to ensure proper supervision and feedback, as to enhance the students learning curve.

4.6.1 c Conclusion

DUT partially complies with Standard 6.1

4.6.2 Clinical training resources

The institution/programme must ensure adequate clinical experience and the necessary resources, including sufficient patients with an appropriate case-mix, and sufficient clinical training facilities including sufficient equipment and treatment rooms.

4.6.2 a Description

The Chiropractic Day Clinic has 23 treatment rooms, 6 modality rooms, one rehabilitation room, reception area, reception room, clinician office and a student common room. There is direct access to the clinic from the main road and it has its own parking facilities. The clinic is connected to the Radiography Clinic where x-rays are taken by the students under supervision of radiography technicians. Supervision in the clinic is provided by full time and part time clinicians. There is one supervisor per 12-15 students, except between 11:30 to 12:30 where there are two supervisors. Clinical training is also performed at the off-site clinics (Marburg Clinic, Cato Ridge, Narian Jeawon Vedic Center Clinic). These clinics are of small dimension, but have chiropractic equipment, files storage, transportation provided by the DUT and insurance for the students. These satellite clinics are in different areas serving the local populations. Also, in these clinics there are other health professionals with whom the chiropractic students interact during patient care. The accreditation team was unable to visit these satellite clinics due to time constraints. The patient “numbers” requirements for the students are reviewed monthly via a tracking system. This tracking process allows for at-risk clinic students to be identified and monitored.

Since the last review in 2017, new equipment was sourced and acquired. The clinic beds have been upgraded in all clinic rooms. The acquisition of a traction bed and Shockwave unit has added to the management options available to patients. The equipment in the clinic is serviced on an annual basis in keeping with health and safety protocols.

4.6.2 b Analysis

The clinical training resources on campus need to be revised in a manner that allows for students to receive proper and timely feedback. The present structure of the clinic and teaching staff allocated does not allow this to happen. It is recommended that multiple supervisors be on the floor to enhance the students’ individual learning curve and secure patient’s overall safety.

Overall, the number of academic staff needs to be quickly improved to provide the students with timely and adequate supervision, support and feedback.

4.6.2 c Conclusion

DUT partially complies with Standard 4.6.2 

4.6.3 Information Technology

The institution/programme must have sufficient IT facilities for faculty, staff and students to ensure the curriculum can be delivered adequately, and that IT is effectively used in the curriculum.

Students must be able to use IT for self-learning, accessing information and managing patients.

4.6.3 a Description

Various rooms are available on campus that have dedicated IT facilities that the students may access over long periods of the day. Provision in this area is increasing so as to help students in the early years of study and who do not have access to their own personal computer. The University has introduced Smart boards in some of the lecture rooms. Much of the University now uses e-learning for the delivery of the curriculum. The IT infrastructure has implemented WIFI accessibility throughout the campus and residences. The Library facilities for electronic searching of databases are available to all students and guidance of how to undertake such searches is readily available. The programme has a first-year orientation for the incoming first year students. The students have presentations by the various ambits/support structures at the DUT one of which include IT devices. The programme is the only programme to host a well-structured first year orientation.

4.6.3 b Analysis

DUT has taken deliberate steps in installing new computer facilities and upgraded the Wi-Fi system across the institution.

4.6.3 c Conclusion

DUT fully complies with Standard 6.3 

4.6.4 Educational expertise

The institution must ensure the appropriate use of educational expertise in the design and development of the curriculum and instructional (teaching and learning) and assessment methods.

4.6.4 a Description


The Centre for Excellence in Learning and Teaching (CELT) provides pedagogical support for teaching staff. All new full-time staff go through an induction programme in the first year of employment which includes pedagogical training. The programme is run by CELT but is not a degree programme so no certificate or diploma is awarded on completion. There is no formal training for part time staff but support is available from the department. Currently, there is one full-time staff member and one

part-time staff member with a Doctoral qualification. There are three full-time and one part-time staff member involved in Doctoral studies. One full-time staff member joined the DUT Doctoral Mentorship Programme for 2022 and at least three full-time staff members being journal reviewers. This in turn feeds in the programme in terms of research development. The participation of staff and students in studies conducted by students from the University of Johannesburg also adds to the appreciation of research. In addition, the programme has been successful in the appointment of two adjunct research professors (both international) who will assist the programme with research supervision and to increase the publication rate.

4.6.4b Analysis

Educational expertise is available for support in curriculum design and development which ensures the appropriate use of educational expertise in the design and development of the curriculum, instructional and assessment methods.

4.6.4 c Conclusion

DUT fully complies with Standard 6.4. 

4.6.5 Administrative and technical staff

The administrative and technical staff of the institution/programme must be appropriate to support the implementation of the undergraduate programme and other activities, and to ensure good management and deployment of its resources.

The management must include a programme of quality assurance, and the management itself should submit itself to regular review to ensure best employment of its resources.

4.6.5 a Description

Sufficient administrative and technical staff are provided by the University. Some support staff are specific to the chiropractic department while others work across departments and faculties.

4.6.5b Analysis

Based on the evidence provided on site and on the documentation, the team found that there was sufficient administrative and technical staff to support the delivery of the programme, the implementation of other activities, and to ensure good management and deployment of its resources.

4.6.5 c Conclusion

DUT fully complies with Standard 6.5 

4.7 RELATIONSHIP BETWEEN TEACHING AND CLINICAL OR BASIC SCIENCE RESEARCH

The chiropractic institution/programme must facilitate the relationship between teaching and research, and must describe the research facilities to support this relationship as well as the research priorities at the institution/programme.

4.7 a Description

The DUT has three strategic focus areas – teaching and learning, research and community engagement. In terms of the programme and with specific reference to research, the research priorities for the programme are:

- the teaching and learning associated with the MHS: Chiropractic students,
- the publication of those research findings and
- participation in research in a personal capacity (including PhD)

The processes for obtaining approval of research proposals follows a three-step approach, involving 1) the Programme Research Committee (DRC), which deals with: a) - Topic approval; b) - Proposal review, and 2) the Faculty Research Committee, which deals with: a) Topic ratification; b) Proposal review (for all clinical studies or studies involving patients) and c) Proposal review and approval (for any study not including patients e.g. systematic review) and, finally, 3) the Institutional Research and Ethics Committee (IREC), which deals with: a) Proposal ratification (non-clinical e.g. systematic review); b) Proposal approval (for all clinical studies or studies involving patients). The DUT Deputy Vice Chancellor: Research, Innovation and Engagement oversees the research policies and procedures which are governed by the IREC.

Research students have been reported to have access to research funds, which can be utilised for items or services required for their research (e.g. electrodes for EMG, audio recorder, proofreader or statistician). In addition, students also have opportunities for internal and external funding (DUT Masters Scholarship and NRF funding).

The new curriculum has created the development of a research thread which runs transversal to the programme. Supervision for students is available from the fourth-year level in BHSc where students obtain approval for their topics and proposals at the DRC. The approval of a topic and proposal is a requirement for registration into the MHS. The student can only obtain IREC approval after registration into the MHS is complete.

Despite efforts to increase the number of faculty staff with Doctoral degree, only one full-time staff member and one part-time staff member hold a PhD, with 3 additional full-time faculties and 1 part-time faculty involved in Doctoral studies.

4.7 b Analysis


Despite an evident attempt to improve the level of engagement of the faculty members in Research & Development activities, the programme still struggles to achieve tangible and sustainable results. The current 3-step approach leading to the approval of the research projects needs to be expedited to prevent delays that ultimately will negatively impact the students work and also their timely graduation.

Moreover, it has become evident that, due to the prevailing under-staffing, the existing faculty members have to dwell in a context that demands them to engage in “academic multi-tasking”, thus significantly adding to what is already an evident situation of academic staff’s overload. The teaching and administrative workload of the staff should be assessed in order to avoid hindrance to the development of research activities.

If R&D activities are to be promoted consistently, then the bureaucratic procedures need to be simplified and staff given dedicated time to pursue their research and their professional development. Given that a significant number of students are unable to finalize their dissertation within the 5 years of the programme there needs to be a review of the causes of delay in

acceptance by the supervisor and approval by the ethics committee. Given the fact that student's supervisors are presently required to hold a Doctoral degree, unless the limited number of Doctoral staff is addressed, it is likely this problem will have an increased impact in the programme. The Programme might benefit from a different approach that favors interprofessional collaborative projects.

4.7 c Conclusion

DUT substantially complies with Standard 7.1 

4.8 PROGRAMME EVALUATION

4.8.1 Mechanisms for programme evaluation

The institution/programme must establish a mechanism for programme evaluation that monitors the curriculum, quality of teaching, student progress and student outcomes, and ensures that concerns are identified and addressed.

4.8.1 a Description

Academic quality assurance monitoring is overseen by the Centre for Quality, Performance and Assurance (CQPA). As part of the annual quality assurance cycle, the Head of the Department also prepares an annual quality monitoring report for the faculty to review, which is afterwards submitted to the Senate. Strategic planning discussions at the programme, faculty and institutional levels include these annual reports, thus enabling this overarching educational framework to address the weaknesses, improve areas of strength, limit areas of threat and optimise areas of opportunity or expansion.

Programme review is undertaken every six years. The chiropractic programme is subject to external review by the Allied Health Professions Council of South Africa (AHPCSA) and the Council of Higher Education (CHE) (the last CHE review of the programme was in 2006; the last institutional review was 2008/2009; 2015/2016). External moderators provide externality to programme evaluation at the point of exit. This means there is no annual external oversight at all levels of the programme. Though the programme does submit annual monitoring reports to the ECCE as per the AMoR reporting system.

4.8.1 b Analysis

Programme evaluation and monitoring appears to be extensive and thorough. The University has a very well-defined Quality Assurance framework that provides both the Faculty and the Department with valuable feedback regarding the educational outcomes and the alignment between the School's academic outcomes and mission.

4.8.1 c Conclusion

DUT fully complies with Standard 8.1 

4.8.2 Faculty and student feedback

Both faculty and student feedback must be systematically sought, analysed and responded to so as to develop and improve the curriculum.

4.8.2 a Description

The Lecturer Evaluation Questionnaire and Subject Evaluation Questionnaire system is implemented in the programme for annual quality monitoring. These questionnaires are sent to the CQPA for data capturing and analysis which is sent to the Head of Department for internal review. External stakeholders, the AHPCSA, have recently performed a full evaluation of the Chiropractic programme at DUT. DUT is awaiting feedback from the professional body for improvement or recommendations to the curriculum and programme.

4.8.2 b Analysis

Surveys are regularly undertaken for continuous assessment of the programme so as to eliminate and minimize any concerns or issues raised. Students have, however, felt that feedback from the evaluation is not always clear or given as student progress from one year to the next, this is something which could be improved by the programme team. In order to enhance student engagement, they need to make students feel appreciated more in order to develop the programme.

4.8.2 c Conclusion

DUT fully complies with Standard 8.2 

4.8.3 Student cohort performance

Student cohort performance must be analysed in relation to the curriculum and the aims and objectives of the programme.

4.8.3 a Description

Student cohort performance is formally reviewed twice per year at examination board meetings. Strategies for improvement are developed and agreed for the following year where appropriate. At-risk students are identified and counselled. The EXCO & FMQC committees representative updates each student's progress reports based on the outcomes of the examination board in preparation for the next academic cycle.

4.8.3 b Analysis

Student cohort performance is appropriately analysed and managed in relation to the curriculum and the aims and objectives of the programme.

4.8.3 c Conclusion

DUT fully complies with Standard 8.3 

4.8.4 Involvement of stakeholders

Programme evaluation must involve the governance and administration of the institution, the faculty, staff and the students, and the outcomes communicated to a range of stakeholders.


4.8.4 a Description

Programme evaluation occurs through an internal process that involves staff, faculty and students. The profession representation (CASA), regulatory body (AHPCSA) and Council on Higher Education (CHE) provide input in the evaluation of the programme. Members of staff take an active part with different national & international professional organizations.

4.8.4 b Analysis

There is evidence of an outstanding relationship between the programme staff and the professional and the regulatory bodies. The structure in place allowing for feedback into the programme is established and clear. Although, this could be improved by ensuring that patients engage a representative patient organization.

4.8.4 c Conclusion

DUT substantially complies with Standard 8.4 

4.9 GOVERNANCE AND ADMINISTRATION

4.9.1 Governance

Governance and committee structures and functions of the chiropractic institution/programme must be defined, including their relationships within the university (as appropriate).

4.9.1 a Description

The University operates a robust, fully integrated and hierarchical committee structure that is similar to most other higher education institutes. Each of committees has a standard operating procedure, designated Chair and representation together with a secretariat for minutes and record keeping. There is both staff and student participation across nearly all committees.

4.9.1 b Analysis

The University operates a well-defined and balanced set of committees to facility the effective delivery and quality assure the chiropractic programme. Although it is advised that student representatives are integrated within structures at all university levels.

4.9.1 c Conclusion

DUT fully complies with Standard 9.1 

4.9.2 Academic leadership

The responsibilities of the academic head of the first qualification chiropractic programme, and of the academic management structures, must be clearly stated.


4.9.2 a Description

Academic leadership is provided at Faculty level by the Dean of Faculty and at programme level by the Head of Programme. The Head of Programme has leadership responsibility for teaching staff on the chiropractic programme.

4.9.2 b Analysis

The responsibilities of academic management at programme level are clearly defined and understood. The governance structure is well-defined, both at the school and University level, with a clear definition of each's responsibilities and duties. The academic management of the programme is aligned with the University's strategic plan and evidence has been provided regarding the University's leadership overall commitment to the development of the Chiropractic programme.

4.9.2 c Conclusion

DUT fully complies with Standard 9.2 

4.9.3 Educational budget and resource allocation

The institution/programme must have a clear line of responsibility and authority for the curriculum and its resourcing, including remuneration of teaching staff, in order to achieve the overall aims and objectives of the programme.

4.9.3 a Description

There is a robust finance management system in place within DUT that feeds down from the centre via the Faculty to departments. DUT operates on five year financial plan cycle. The institution is financially viable with a good annual student intake. Annually the Department submits its requirements in terms of budgetary needs. This is principally in relation to the human resource funding in order to effectively deliver the programme. The financial viability of the chiropractic programme is sound and there is an operational profit annually. Consequently, the programme is financially viable and contributes positively to the Faculty. Within the programme the responsibility for financial management lies with the Head of Department and the Finance administrator who operationalises any requisitions that need to be processed into the finance system.

The Dean of Faculty can make a faculty decision affecting elements of the programme and the Institution is empowered to dictate additional curricula requirements, external to the chiropractic programme to fulfill its institutional educational aims.

4.9.3 b Analysis

There is a clear management system in place across all levels within DUT with associated lines of responsibility for the curriculum and its resourcing. In chiropractic department is in a strong position in the Faculty being able to access the additional special funds (money generated by the clinics) with the potential to increase of number of clinicians, supervisors and tutors.

As recommended in the 2017 review, the chiropractic practical lecture room needs to be updated

to match the high quality facilities in other parts of the Department, not only size-wise, but, more importantly, in terms of the available clinical teaching staff needed to ensure proper supervision and feedback, as to enhance the students' learning curve.

4.9.3 c Conclusion

DUT fully complies with Standard 9.3 

4.9.4 Interaction with professional sector

The institution/programme must have a constructive interaction with the chiropractic and chiropractic-related (health-related) sectors of society and government.

4.9.4 a Description

The programme engages the profession at the regional Chiropractic Association of South Africa (CASA) branch and national CASA meetings, the national internship meetings of the AHPCSA, and consistently participates in conferences, seminars and meetings of international organisms such as WFC and FICS. The interaction with hospital systems allows for rotations in the hospital for diagnose training and the rotation through the satellite clinics foments an excellent level of interaction with the health professions.

4.9.4 b Analysis

The engagement of the CASA with the programme is outstanding. CASA provides financial support to the students-centered activities and for awards for excellence.

The World Congress of Chiropractic Students (WCCS) DUT Chapter of students are quite active. Since 2017, they have organised and facilitated two successful African Regional events in 2019 and 2021. The programme supports the WCCS DUT Chapter of students in terms funds to attend the international meetings organised by the WCCS.

4.9.4 c Conclusion

DUT fully complies with Standard 9.4 

4.10 CONTINUOUS RENEWAL AND IMPROVEMENT

The chiropractic institution/programme must have procedures for regular reviewing and updating of its structure and functions to rectify deficiencies and meet changing needs. (See 8.1 of standards) The outcomes of these procedures should be made public(i.e. institutional websites) and should lead to continuous improvement of the programme. Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to-date and readily accessible.

4.10.1 a Description

The chiropractic department follows the university's policies and procedures for programme review and update. Programme information is made public through the institution's website and

internally through the institutions VLE. The Department liaises with its external stakeholders within the healthcare sector in South Africa and chiropractic professional bodies. The current programme has updated their curriculum in line with the new HEQSF requirements, which is approved.

4.10.1 b Analysis

There is evidence that the curriculum is regularly reviewed and updated in line with university, national and international quality standards. Currently, the programme is addressing the 2016 internal and 2017 external review recommendations through a quality improvement plan. Also, there is an inclusion of general education into the new curriculum (as a DUT requirement). This has been implemented in 2020 with the running of the BHSc degree. Furthermore, the programme has implemented the Bachelors in Health Sciences: Chiropractic in 2020 & the Masters in Health Sciences: Chiropractic in 2021.

4.10.1 c Conclusion

DUT fully complies with Standard 10.1



5. CONCLUSIONS

5.1 Summary

In conclusion, the Evaluation Team was overall satisfied with the quality of the chiropractic education and training provided by the University and with the Department leadership's evident and strong commitment to sustain the quality of the programme. The following strengths, weaknesses and concerns are highlighted:

5.2 Commendations, Recommendations and Concerns

For the purposes of this Report the Evaluation Team adopted the following definitions from the Standards:

- Commendations** – Areas that meet or exceed the *Standards* and are worthy of specific recognition.
- Recommendations** – Areas requiring specific attention and action by an institution.
- Concerns** – Areas of substantial weakness/concern as to jeopardise the accreditation of an institution that require specific attention and action by the institution *as a matter of urgency*.

Commendations:

1. The updated physiology laboratories enhance the learning and training opportunities for the students.
2. Continued integration of the basic science service teaching within the programme, particularly in anatomy and physiology, is considered exemplary and provides an excellent foundation for the subsequent chiropractic training of the students.
3. The two-year supervised clinical training, together with satellite clinics, outreach activities

and community events, provides outstanding opportunities for students to experience a wide variety of patients and clinical conditions and broaden their clinical skills.

4. There are robust programme management and quality assurance procedures in place at the Department, Faculty and University levels.
5. The enthusiasm of the student body for the programme and the chiropractic profession is a credit to the teaching staff and the University.
6. Student support services within the University are of a high quality. The additional services provided by the Academic Development Ambit within the Faculty of Health Sciences are considered exemplary.
7. Student support services within the University are of a high quality. The additional services provided by the Academic Development Ambit within the Faculty of Health Sciences are considered exemplary.

Recommendations:

1. While there is good communication within and between the different levels of the Department, Faculty and University, there remains more limited communication between students and the various levels of the University. It is recommended that student representatives be included in committees at all levels where relevant education aspects occur.
2. The existing needs of academic staff need to be definitively addressed in a consistent and sustainable manner, to overcome the existing overload and the multitasking nature of the existing staff: full-time academic staff matches the full extent of the educational and academic needs of the Chiropractic program is highly recommended.
3. The faculty needs to present a clear and demonstrable alignment between assessment, content, methods of teaching and learning and learning outcomes, to overcome the existing concerns regarding the “semesterisation” of the new curriculum
4. There is continued evidence that graduation is delayed for several students due the demands of the final dissertation. Mechanisms should be in place to ensure that all students can complete the programme within the normal six-year registration period, except in exceptional circumstances.
5. This recommendation is carried over from the 2017 reaccreditation visit, The uneven distribution of workload amongst the academic staff may inhibit career development and the future growth of a vibrant research culture in the Department. A robust appraisal and promotion scheme operated within the University would assist in addressing these inequalities. Additionally, the workload levels impact the ability of the staff to supervise students.
6. The number of qualified chiropractic staff employed within the clinic for the delivery of the programme should be increased to enhance clinical training and aid in the supervision of clinical students and reduce potential waiting time for student clinician consultation and patients waiting for treatment.
7. The chiropractic practical lecture room needs to be refurbished and updated to match the

high-quality facilities in other parts of the Department. Consideration needs to be given to the establishment of an additional practical room together with a second well equipped laboratory facility in which students can undertake their research projects.

8. There is a continues to be an urgent need for the participation of patients as stakeholders within the clinical aspects of the programme.

Concerns:

There were none.

5.3 Acknowledgements

The Team wishes to extend its thanks to the university, Faculty and Department for the hospitality and courtesy afforded to it during the on-site visit.

Appendix 1 – Timetable of visit 27-29 September 2022

Monday 26 September 2022	Meeting with	Personnel	Team members	Standards	Invited/Attending persons
Evening	Preparatory meeting		All		
Tuesday 27 September 2022	Meeting with	Personnel	Team members	Standards	Invited/Attending persons
08.30-09.00	Welcome & Private meeting of team				
09.00-9:45	Course management team	Senior managers	All	1. Aims and Objectives 1.1, 1.2, 1.3, 1.4 9. Governance and Administration 9.1, 9.2, 9.3	
9:45-10:30	Programme Management and Delivery	Unit leaders All chiropractic module leaders	All	2 Educational Programme 2.1,2.8,2.9,3.1,. 2.4.3,4.4,5,2,6. 4 ,6.5, 8.1, 8.2, 8.3, 8.4, 10	
10:30-11:00	Break				
11:00-11:30	Basic sciences and	Lecturers from	All	2 Educational	

	social sciences	anatomy, physiology, chemistry, physics, biology, psychology		Programme (sciences) 2.2,2.3,2.4	
11:30-12:15	Clinic Faculty (chiropractic)	6 – 8 Clinic Supervisors FT/Senior Teaching faculty to cover all areas of clinical science teaching.	All	2 Education Programme (clinic) 2.5, 2.6, 2.7, 2.10 6 Educational Resources (clinic) 6.2, 6.5	
12:15-13:00	Clinic Faculty (chiropractic)	6 – 8 Clinic Supervisors PT/Junior Teaching faculty to cover all areas of clinical science teaching.	All	2 Education Programme (clinic) 2.5, 2.6, 2.7, 2.10 6 Educational Resources (clinic) 6.2, 6.5	
13:00-14:00	Lunch				
14:00-15:00	Assessment and Learning	Assessment officer and staff responsible for collating assessments	All	3. Assessment of Students 3.1, 3.2, 8.3	
15:00-15.45	Staff Recruitment and Development	HR representatives HR manager, relevant personal	All	5 Academic and Clinical Faculty 6.5 Administrative and technical staff	
15:45-16:30	Marketing/ Learning Resources / Library/IT	Head of Learning Services, IT manager, marketing	All	6 Educational Resources 6.1, 6.2, 6.3, 6.4	
16:30-17:00	Break				
17:00-17:30	Closing Meeting	N/A	All		

Wednesday 28 September 2022	Meeting with	Personnel	Team members	Standards	
08.30-09.00	Prep meeting of team				
9:00-10:00	Student support and representation	Admissions officer Student Support Services, student representation	All	4 Students 4.1, 4.2, 4.3, 4.4	

10:00-11:00	Meeting with Students	Junior Students	All	2 Educational Programme 3 Assessment of Students 4 Students 6 Educational Resources	
11:00-11:30	Break				
11:30-12:30	Meeting with Students	Senior/Clinical student	All	2 Educational Programme 3 Assessment of Students 4 Students 6 Educational Resources	
12:30- 13.30	Lunch				
13:30-14:30	Research and teaching	Staff responsible for managing research	All	7 Relationship between teaching and research 2.2,2.6, 7	
14:30-15:30	Quality Assurance Monitoring and Evaluation	Quality Assurance Programme Leaders	All	8 Programme Evaluation 8.1, 8.2, 8.3, 8.4	
15:30-16:30	Links to profession and patient involvement	Staff linked to profession Profession stakeholders Patient Stakeholders	All	2.10 Linkage with profession, Chiropractic Practice and the Health Care System 2.10, 1.2, 8.4, 9.4	
16:30-17:00	Closing Meeting	N/A	All		
Thursday 29 September 2022	Meeting with	Personnel	Team members	Standards	
9:00-11:00	Tour of Clinical and Educational facilities	N/A	All		
11:00-11:30	Break		All		
11:30-12:30	Tour of Research facilities	N/A	All		
12:30- 13.30	Lunch				
13:30-16:30	Team Meets to finalize Report	N/A	All		
16:30-17:00	Verbal feedback to institution	Senior Managers and Key personnel	All		

		as appropriate			
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