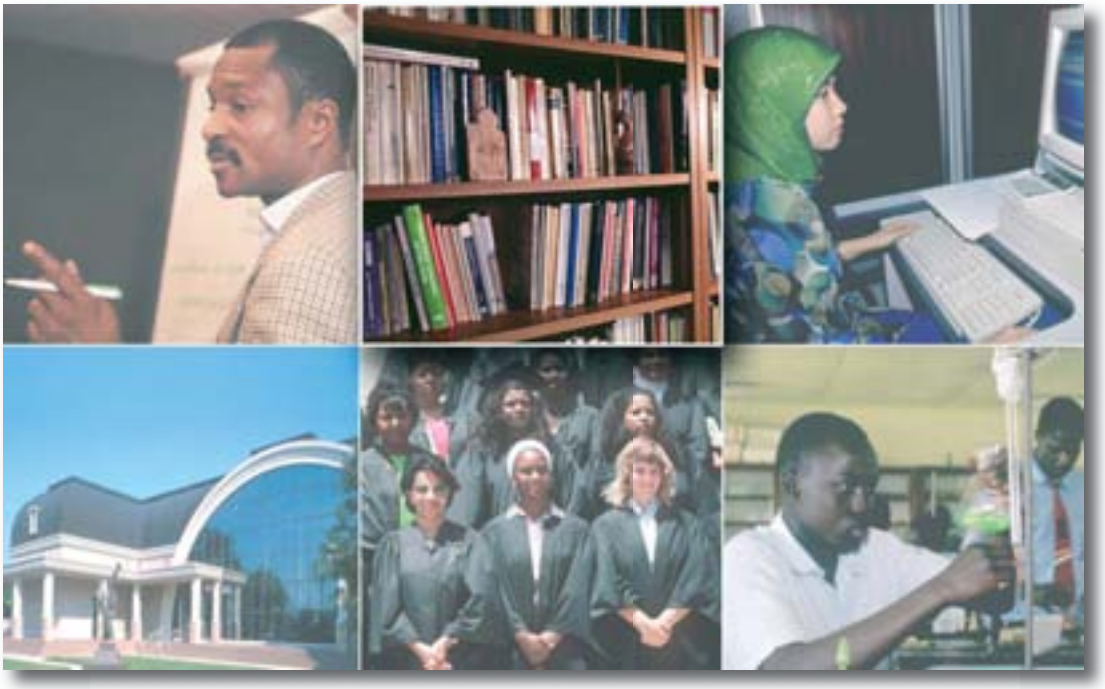
External quality assurance:
options for higher education managers

Module

Making basic choices for external quality assurance systems



United Nations
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for Educational Planning

External quality assurance: options for higher education managers

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Module 1

MAKING BASIC CHOICES FOR EXTERNAL QUALITY ASSURANCE SYSTEMS

Objectives of the module 4

Questions for reflection 4

Introduction 5

The role of EQA in quality assurance systems 6

1. Trends in higher education systems 6
2. Alternative policy instruments for regulating academic quality 11
3. Role of EQA in the overall quality assurance system 13
4. Quality: a complex and multi-dimensional concept 15
5. Definitions: quality assurance, quality control, quality assessment/evaluation, quality audit and accreditation 16
6. Users and purposes of accreditation systems 20

Major organizational and methodological choices in EQA systems 22

1. Overall purposes of EQA 22
2. General approaches to EQA 24
3. Scope of EQA systems 33
4. Conclusions 39

Lessons learnt 40

References and further reading 42

List of abbreviations

AACSB	Association to Advance Collegiate Schools of Business (US)
ACSCU-AA	Association of Christian Schools, Colleges and Universities Accrediting Agency (US)
CEPES	European Centre for Higher Education (Romania)
CESU	National Council for Higher Education (Colombia)
CHEA	Council for Higher Education Accreditation (US)
CNA	National Council for Accreditation (Colombia)
CNE	National Higher Education Evaluation Committee (France)
CONEAU	National Evaluation and Accreditation Council (Argentina)
ENQA	European Network for Quality Assurance
EQA	External quality assurance
FAAP	Federation of Accrediting Agencies in the Philippines
GATS	General Agreement on Trade in Services
HEI	Higher education institution
MERCOSUR	Common Market of South America
MOE	Ministry of education
NAAC	National Assessment and Accreditation Council (India)
NAC	National Accreditation Committee (Hungary)
NCA	North Central Association (USA)
NQAAA	National Quality Assurance and Accreditation Agency (Egypt)
NWA	Northwest Association (USA)
PAASCU	Philippine Accrediting Association of Schools, Colleges and Universities
PACU-COA	Philippine Association of Colleges and Universities – Commission on Accreditation and the Association of Christian Schools, Colleges and Universities
RIACES	Iberoamerican Network for Quality and Accreditation of Higher Education
TNAC	Temporary National Accreditation Committee (Hungary)
UGC	University Grants Commission
WASC	Western Association of Schools and Colleges (USA)
WTO	World Trade Organization

List of boxes

Illustrations from the quality assurance practices of the following countries:

Box 1 Regional integration processes and quality assurance 9

Box 2 The international value of US accreditation – CHEA database reveals range of non-US universities with US accreditation 10

Box 4 Compulsory accreditation in Hungary 25

Box 5 Standard-based approach used by the regional accreditation agencies in the USA 26

Box 6 *Livre des références* of France's *Comité national d'évaluation* 28

Box 7 Accreditation of high quality in Colombia 29

Box 8 Quality audit established in Norway 31

Box 9 Policy commitment to quality control of private providers in South Africa 34

Box 10 Flexibility in the US accrediting system 35

Box 11 Request for compulsory accreditation of state-approved programmes in Argentina 38

List of tables

Table 1 Alternative policy instruments for regulating academic quality by locus of influence 13

Table 2 Matrix of quality assurance functions in a higher education system 14

Table 3 Uses of accreditation systems for different stakeholders 21

Table 4 Classification of basic options used in EQA systems 32

Objectives of the module

This module will:

- present international trends driving countries to establish systems of external quality assurance (EQA);
- explain how EQA mechanisms fit in overall quality assurance systems;
- problematize the notion of 'quality' and define basic concepts related to EQA;
- discuss overall purposes of EQA systems; and
- relate those overall purposes to basic organizational and methodological options.

On completion of this module, you are expected to be able to:

- understand contextual factors and policy rationales for setting up EQA systems;
- define different concepts related to EQA such as assessment, audit and accreditation;
- understand the role that EQA plays in the quality assurance function performed by governments; and
- identify major organizational choices in setting up an EQA mechanism.

Questions for reflection

What are the prevailing structures for quality assurance in the higher education system of my country?

What functions of quality assurance at the national level are currently weak and need to be developed?

What role does or could an EQA mechanism play in this respect?

What organizational options within an EQA system would be most appropriate in my country?

Module 1

MAKING BASIC CHOICES FOR EXTERNAL QUALITY ASSURANCE SYSTEMS

Introduction

Policy-making and management of higher education have traditionally been concerned with maintaining and enhancing academic standards and processes. To do so, they use different instruments according to the administrative set-up of each system. Higher education systems located in centralized countries emphasize bureaucratic input steering, while decentralized countries leave much of the authority to higher education institutions (HEIs) to establish their own quality assurance system. External quality assurance (EQA) mechanisms can address the shortcomings of traditional mechanisms for quality assurance found in both administrative realities. Indeed, national authorities are often far away and not able to judge fairly the quality of academic programmes and institutions. At the same time, it is difficult to compare standards when academic institutions are both providers and judges of their own services. In addition, globalization is widely affecting higher education and creating new challenges for its regulation and steering. While the provision of higher education is becoming ever more diversified, globalization also creates the need for more standardization so that qualifications can be more easily assessed. This is why there is demand for EQA in many administrative cultures and traditions.

This module is the introductory module to a series of five on EQA systems. Chapter 1 places EQA within the broader system of quality assurance at the national level. EQA adds a new function to quality assurance, which is understood here as a national function to be performed by higher education authorities. Chapter 1 also defines some basic concepts with the aim of developing a common understanding and enhancing conceptual clarity. Chapter 2 then presents the now commonly-accepted three-stage model of EQA as well as a number of basic choices that must be made when designing an EQA system. These basic choices depend very much on the overall purpose of the EQA system, which itself is a function of the added role it plays in the overall national quality assurance system.

The role of EQA in quality assurance systems

1. Trends in higher education systems

Higher education systems worldwide are heavily affected by a number of common and frequently interrelated trends. These trends require ongoing change and adaptation both at the national and institutional levels.

Growing social demand and expansion of systems

Social demand for higher education has been growing over the past decades, in particular in developing countries. Systems are therefore expanding, while the financial capacity to respond to this demand is often inadequate. Across the world, enrolments increased from 69.4 million in 1998/1999 to 120.4 million in 2002/2003. If we exclude North America and Western Europe, enrolment in the rest of the world more than doubled, with an increase from 41.1 million to 88.2 million in just four years. China alone increased its share from 6.4 million in 1998/1999 to 15.2 million in 2002/2003 (UNESCO, 2006, Table 9A).[1] In order to enrol greater numbers of students, systems have become more diversified. Thus, a non-university, post-secondary sector has developed and increasingly courses are taught through distance education. As a result, national authorities have found it more difficult and more complex to assure quality through traditional mechanisms.

Privatization of higher education

Many countries that in the past were committed to public-only systems of education now no longer have the financial capacity to respond to demand for it. They have therefore adopted legislation that allows for the development of a private higher education sector. This has led to tremendous growth in the private provision of higher education over the last decade, particularly in developing countries. Public higher education institutions (HEIs) have also undergone major privatization processes through growing reliance on cost-sharing arrangements and income generation measures. In many countries, privatization processes have made the provision of higher education more unequal in terms of quality.

Higher education increasingly perceived as a private good

There is increasing recognition of the private component of higher education. This is particularly true for professional degrees, which undeniably lead to greater benefits for the individual. In particular, higher education for working adults

1. According to the Statistical bulletin of national education development in 2004 prepared by the State Statistics Bureau of China (2004), the total enrolment of various HEIs exceeded 20 million in 2004. This made China top the list in higher education enrolment.

(lifelong learning) has been targeted by both public and private HEIs as both a national and international market. Consequently, specific segments of higher education (professional higher education for adults) are considered in many countries as a market good. Certain governments actively encourage their public HEIs to become active players in this field. With the blossoming provision of professional higher education, much of it being organized by private providers, the traditional quality assurance role of governments is also being questioned as well as the methods governments use for carrying out this role.

Deregulation and governments' demand for value for money

In many countries, governments have been reorganized according to the New Public Management model. This has led them to redefine their roles as public authorities. One of the emerging trends under this model is greater reliance on deregulation and decentralization of power from government, or government agencies, to institutions. In many countries, deregulation is part of a broader reform of public organizations. Where this is the case, the predominant tools are the decentralization of decision-making incentives for units and individual staff, negotiation of objectives and targets, output control and a funding system based on measures of output. These tools relate to notions such as self-regulation and autonomy. Within this context, governments tend to stress the need for enhanced mechanisms that can provide quality control at a distance, with a focus on accountability.

Where higher education is steered 'indirectly', authorities limit their role to setting guidelines and providing resources and incentives. At the same time, institutions and the state negotiate more detailed objectives in terms of activities and outputs. Demand for accountability and trust is thus raised on political agendas, along with HEIs being given greater freedom to make their own decisions. However, politicians, government, parliament and citizens need to be assured that HEIs offer an adequate provision of services to society.

More than ever, governments expect institutions to guarantee and demonstrate 'value for money' and be accountable to their customers and the public at large. Consequently, institutions in many countries worldwide have been urged to provide information on their results as well as on their expenditure.

A shift to the market and consumer demand for market transparency

New forms of government steering are frequently linked to a greater reliance on market mechanisms. Some countries have a strong tradition in this area, while others have adopted them more recently. In highly diversified and market-oriented systems, such as in the United States of America (USA), the provision of information to consumers and the public at large through accreditation is a longstanding practice. Requests by students and parents for information on institutions' performance have also become apparent in other regions that tend to be increasingly steered by market forces. Even in highly centralized higher education systems, there is a shift towards greater institutional autonomy. However, in these cases EQA schemes must adjust to the culture and usually emphasize the control of inputs rather than results.

Globalization

Higher education systems are also increasingly affected by globalization. Recent advances in regional integration processes and trade agreements, as well as information and communication technology (ICT), have led to growing potential for the international movement of goods, capital and persons. This has had a significant effect on the structure, content and delivery of higher education system worldwide. Indeed, trade agreements have led to an unprecedented level of mobility in certain professions. The globalization of some professions and increased professional mobility create stronger pressure on countries and institutions to obtain qualifications recognized by the international labour market. Furthermore, there is growing concern with the comparability of educational standards.

GATS and borderless markets for higher education

A direct manifestation of globalization in higher education is the continuous growth of 'transnational higher education'. This includes study programmes, sets of courses of study or educational services (including distance education) in which learners come from a country different from that in which the awarding institution is based. Transnational education is often conducted with a commercial aim and referred to as 'international trade in educational services'. It should be underlined that both transnational education and its commercial application are not an entirely new phenomenon. However, the speed of its evolution is quite recent and expected to grow. Indeed, the World Trade Organization (WTO) is considering including 'educational services' within the framework of the General Agreement on Trade in Services (GATS). This has raised awareness of the fact that higher education has become a global market good for which there are currently no regulatory forces at the international level. Particular issues related to transnational higher education will be dealt with in *Module 5.*

International market for quality assurance services

The movement towards the globalization of educational services also includes quality assurance and accreditation services. Indeed, many of the private accreditation agencies operating at the national level, in particular those in professional areas of study such as management or engineering, offer their services to organizations located in other countries. For this reason, there have been attempts to build new organizations (for instance the Global Alliance for Transnational Education) that offer their services at an international level. Some of the US-based regional and professional accreditation agencies have accredited programmes in as many as 40 different countries. However, international providers of quality assurance services frequently impose their own values and standards, which are not always in line with national perspectives. This puts additional pressure on national governments to establish their own structures, which can be more easily geared to the preservation of national values and interests.

HEIs worldwide are thus faced with a new set of trends at both the national and international levels, which affect their higher education systems directly. *Box 1* presents the Bologna Process in the European region and the MERCOSUR (Common Market of South America) initiative on accreditation. Both examples

illustrate how regional integration processes based on international trade agreements affect educational developments and provide an impetus for the development of quality assurance systems at the regional level. *Box 2* provides information on the international role of US accreditation agencies.

Box 1. Regional integration processes and quality assurance

Example A: The Bologna Process

The European Bologna Process was established in 1999 and currently has 45 member states among the European countries. The idea behind the Bologna Process is that by improving education, especially higher education and life-long learning, the economic development of the area will improve as well.

The Bologna Process is not a legal entity, but has more to do with virtual power and even by acting. It has therefore gained strong influence on the development of higher education in the European countries. In total, the Bologna Process has six goals. One of these is quality assurance. This goal aims at facilitating the mobility of students and scientific staff and at improving the competitivity of the European higher education sector.

A remarkable step in quality assurance within the Bologna Process took place in 2003, when the member states of the Bologna Process invited the European Network for Quality Assurance in Higher Education (ENQA) to develop a set of standards, procedures and guidelines on quality assurance. It was also invited to explore ways of ensuring an adequate peer review system for quality assurance or accreditation agencies. With the help of other agencies, ENQUA has finished this work. At the moment, similar standards and guidelines have been accepted by the Bologna Ministerial Conference (the decisive committee), but the European register for quality assurance agencies has not yet been set up.

For detailed information about the Bologna Process, please see www.dfes.gov.uk/bologna/

Source: Hendriks, 2005.

Example B: Accreditation in the MERCOSUR

MERCOSUR, the Common Market of the South, has Argentina, Brazil, Paraguay and Uruguay as full members. Bolivia, Chile and most recently Colombia, Ecuador, Peru and Venezuela have become associate members. These countries were invited to develop a scheme for making degrees comparable among them, without interfering with national sovereignty or institutional autonomy. Interestingly, when work began, only three of these countries had quality assurance schemes in place.

The work focused on the design of a common experimental accreditation mechanism. Professional experts from the six countries were brought together in three Consultative Committees, one for each of the chosen degree programmes (agronomy, engineering and medicine). These committees developed common standards to be applied throughout the region. They also determined the conditions of operation to enable each institution to achieve the desired outcomes.

After agreeing on common standards, a common definition of quality was reached. This definition consists of two elements: external and internal consistency. External consistency means the adjustment of the work of each programme to the definitions agreed on by the corresponding disciplinary and professional reference group. Internal consistency is the ability of the programme to respond to the principles and priorities that emerge from the HEI's mission or stated purposes.

The next stage was to determine common quality assurance procedures. These must be followed by the national quality assurance agencies. They include bringing in external evaluators from countries within the region, other than the country where the programme is based. These evaluators must go through a special Mercosur training stage, and use the manuals and materials provided. As a result, each country is able to trust the decisions made by the national QA agencies in the other countries. In this way, they can provide recognition of the accredited degrees.

The MERCOSUR Accreditation Scheme is still at the experimental stage, having finished the accreditation of the agronomy programme and continuing with the other two programmes. The process was made possible by many factors, i.e. national governments' support, equal participation from all countries, and the stability and continuity of the work. It has created a trust among the participating countries and agencies which in turn helps the long term integration of the countries in the region.

At the same time, the Latin American countries and Spain have created the Iberoamerican Network for Quality and Accreditation of Higher Education (RIACES). This network was created in order to provide needed support to other countries just beginning to develop quality assurance programmes.

Source: Lemaître, 2005.

Box 2. The international value of US accreditation – CHEA database reveals range of non-US universities with US accreditation

The US Council for Higher Education Accreditation (CHEA), the co-ordinating body for higher education accreditation in the United States, has released an updated database of all institutions/programmes accredited by its members. As previously reported by the Observatory, as universities increasingly seek international reputation, there is a trend of resort to non-national accreditation or other recognition. The most obvious examples are non-US business schools that have obtained accreditation from the US Association to Advance Collegiate Schools of Business (AACSB), and business schools from a range of countries that have sought accreditation under the EQUIS scheme in Europe or from the Association of MBAs in the UK. The CHEA database reveals examples of US accreditation obtained by higher education institutions in 31 countries/territories outside of the United States – including Australia, Canada, Germany, New Zealand, Singapore and the United Kingdom.

Source: Observatory on Higher Education web site.

Activity 1

List national and international trends in your country that create pressure to establish a system for external quality assurance.

Are a regional trade agreement or other international agreements part of those trends?

Has your government recently introduced changes in the steering of higher education, such as more autonomy for higher education institutions in exchange for greater accountability and quality assurance?

2. Alternative policy instruments for regulating academic quality

The above trends have led to an ever-growing concern with the issue of 'quality' of higher education and subsequently 'how to assure it'. Quality assurance of higher education by state authorities, collective HEI bodies or HEIs themselves is by no means a new practice or request. Nor is the concern for quality. Traditionally, most systems of higher education control academic activities through various mechanisms. The nature and extent of these mechanisms vary widely according to the different higher education systems.

Systems of higher education that are strongly influenced by state control and intervention (such as continental European higher education systems as opposed to institutions in the United Kingdom) have traditionally operated through controlling what goes in to the system ('inputs'). This can be done, for example, by enforcing yearly 'item-line' budgets, giving academic staff civil servant status and setting minimum qualifications, and running state-regulated admission systems. Educational processes have been controlled in the same way. Thus, the curriculum of new study programmes may require approval, with the state setting standards for their work load and minimum contents, as well as the types of examinations to be conducted.

At the institutional level, evaluations of the academic performance of individual scholars – in particular their research performance – has generally been

conducted by heads of departments or departmental committees, or by disciplinary committees at the national level. Performance has been measured taking into account the number and quality of publications. This type of staff appraisal has been conducted in relation to decisions on either promotion or recruitment. The assessment of research outcomes within the community of scholars, most often informally by peer assessment, has become a rather well-established practice in higher education systems.

The newly emerging concern and pressure for EQA, requested in particular by governments and international funding agencies, bring with them three types of innovation:

- first, they refer to areas of academic life in which governments or funding agencies interfered only marginally in the past. In particular, a special interest in the quality of teaching/learning has emerged in countries where governments either create mechanisms to investigate the teaching or learning conditions or encourage institutions to set up their own mechanisms for assuring that established standards are met;
- second, national authorities or institutions request assessment to be conducted on a regular basis (and no longer on an irregular basis for certain types of decisions); and
- third, the current movement of quality assurance is concerned more with outcomes (in particular student learning and graduation) than with inputs and throughputs. In some Latin American countries, such as Brazil,[2] Colombia and Mexico, public mechanisms have been created to test the knowledge and competencies of university graduates in selected study areas. This measure has been introduced to create more transparency as to the real performance of the many public and private higher education institutions.

Governments have a broad range of policy approaches for influencing academic standards. Clark (1983) sets out three co-ordinating powers in higher education: the academic oligarchy; the state; and the market. These encompass, broadly speaking, three different types of instruments that can be used for quality assurance, depending on which power is the strongest:

- direct monitoring by the state of the quality of institutions and programmes;
- providing incentives to professional organizations for their self-regulation; and
- relying on market mechanisms for improvements to academic quality.

2. The Brazilian mechanism for assessing the knowledge of graduates in a number of study programmes, the National Course Examination (ENC-Provão) was established in 1996 and abolished in 2003.

Table 1. Alternative policy instruments for regulating academic quality by locus of influence

Focus	Professional self-regulation	State (direct) regulation	Market regulation
Research	Professional peer judgment	Research assessment	Competitive allocation of research funds by the State
Teaching/learning	Professional disciplines/organizations Professional certification/licensing External examination systems Voluntary accreditation	Assessment 'regulation' Academic audits Subject assessment State certification/licensure State conducted accreditation Performance indicators National examinations	Student-based funding and tuition fees Information provision

Source: Dill, 2003.

As can be seen in *Table 1*, the set of instruments chosen for the regulation of academic quality depends on the relative forces played in a higher education system by the state, the academic oligarchy and the professions, and the market. They are usually chosen by a government authority, so that they are in harmony with a prevailing philosophy for the steering of higher education. The change from one type of instrument to the other is often indicative of a system intending to strengthen one force, usually to the detriment of the other.

3. Role of EQA in the overall quality assurance system

Quality assurance systems consist of a variety of mechanisms that build on each other. As a result, they evolve as a system. A change in any one of the functions naturally has repercussions on the others.

Quality assurance systems relate to institutions and programmes (both undergraduate and graduate). They address different functions that can include:

- assessments related to the initial opening of programmes and institutions (commonly called 'licensing' and leading to the status of a publicly-recognized entity);
- supervision of the current functioning (commonly relating to minimum standards, also including the supervision of administration and finance);

- accreditation (frequently of advanced levels of quality);
- professional certification of graduates in chosen professional fields; and
- the provision of information on the recognition and accreditation status of both institutions and programmes.

These functions are not necessarily present in all systems. However, if they are not, the quality assurance function will not be completely fulfilled.

Different entities (government or non-government) may be responsible for these different functions. The main actors are typically the Ministry of Education (with the main responsibility for quality assurance), bodies with delegated authority such as an inspectorate (less frequent in higher education than in other levels of education), more recently parastatal or private entities such as quality assurance agencies, and finally professional bodies, when a system requires professional certification. The issue of institutional affiliation will be discussed in more detail in *Module 3.*

As shown in *Table 2*, the quality assurance continuum can often be presented in a matrix with the following distribution of responsibilities:

Table 2. Matrix of quality assurance functions in a higher education system

Unit of assessment/function	Institutions	Programmes (undergraduate)	Programmes (graduate)	Students
Opening- Initial assessment (licensing)	MOE Specialized public agency	MOE or licensed HEI	MOE or licensed HEI	Admission test
Supervision	Inspectorate	HEI	HEI	HEI
Accreditation	Buffer organization or QA agency	Buffer or agency Professional organization	Buffer or agency Professional organization	Outcome Assessment among graduates
Professional certification		Professional organizations	Professional organizations Peer review	Professional organizations
Public information	MOE and/or agency	MOE and/or agency	MOE and/or agency	

Source: World Bank, 2003.

Activity 2

Prepare a matrix of existing quality assurance mechanisms in your country using the types of regulation discussed above. What conclusions can you draw from this matrix?

Prepare a matrix of quality assurance functions for your higher education system and state what national body is responsible for them. Does any quality assurance function remain unfilled?

What are the strengths and weaknesses of the existing system of quality assurance in your country?

4. Quality: a complex and multi-dimensional concept

As a part of the quality debate in higher education, the concept of quality is highly disputed. Moreover, it is often used by stakeholders in order to legitimize their specific vision or interests. There are two reasons for the difficulties that the notion of quality encounters with regard to higher education:

1. There is no consensus on the exact objectives of higher education. The following objectives can be distinguished, among others:
    - higher education as the production of qualified manpower;
    - higher education as training for a research career;
    - higher education as the efficient management of teaching provision; and
    - higher education as a matter of extending life chances.

2. Higher education, like any education, is a multi-dimensional and complex process based on the interrelationship of both teachers and learners. It is difficult to grasp the interaction of inputs and throughputs, and what exactly determines the outputs.

3. As higher education becomes more inclusive and the student population more heterogeneous, demands on HEIs and on the provision of courses grow increasingly more diverse. What might seem an adequate definition of quality

for one type of course or institution may therefore be quite inadequate for others. Green (1994) singles out five approaches in considering quality:

- quality as exceptional (highest standards);
- quality as conforming to standards;
- quality as fitness for purpose;
- quality as effectiveness in achieving institutional goals; and
- quality as meeting customers' stated or implied needs.

These approaches to quality will be further discussed in *Module 4*. Indeed, they are fundamental to the way in which 'quality' will be put into practice by the quality assurance agency.

Who defines quality and in what interest?

The meaning given to quality is not only a matter of its underlying conception. It is also very much a matter of who defines it and in what interest. Is it the academics themselves, students, government and its agencies, professional bodies or employers? Academics will define quality in higher education by emphasizing the quality of research work done by a colleague or an institution. Undergraduate students will focus on the quality of the teaching, their learning experience and the environment. Meanwhile, professional bodies tend to focus on professional standards and skills related to the professions that students are trained for. This means that any methodology for EQA must balance the different interests of stakeholders so that consensus on the meaning of educational quality can be achieved.

One of the main tasks of a quality assurance agency (QAA) is precisely to determine the main approach it will take to the definition of quality. It must consider the stakeholders it will consult, the way in which it will take into account international standards and definitions, and how it will legitimize and make this definition acceptable throughout the system.

5. Definitions: quality assurance, quality control, quality assessment/evaluation, quality audit and accreditation

The way in which the term 'quality' is defined and put into practice has obvious effects on attempts to manage or assure it. However, it is also important to understand the different terms used in the discussion and practice of EQA. These terms are frequently used very loosely. It is therefore important to consider the following terms commonly used in quality assurance language:

- quality assurance (internal and external);
- quality assessment/evaluation;
- quality audit; and
- accreditation.

There is no general consensus on the exact meaning of each of these. Some of them are generic for the whole field, such as quality assurance (internal and external) and quality assessment, while others relate to more specific approaches (quality audit and accreditation). They also relate also to the responsibility of different actors in the system and to different areas of attention.[3]

Quality assurance (QA) is a generic term used as shorthand for all forms of external quality monitoring, evaluation or review. It may be defined as a process of establishing stakeholder confidence that provision (input, process and outcomes) fulfils expectations or measures up to minimum requirements.

At the institutional level, QA is generally defined as the part of the overall management function that determines and implements the quality policy (intentions and directions of the organization). Procedures might be imposed on institutions by the government or funding agencies (e.g. for purposes of accountability and conformity). The institutional or departmental management might also set them up internally. They may be part of a traditional process (i.e. of institutional accreditation or programme validation/review) or relate to new practices such as the use of student ratings of the teaching staff. They may be geared towards: 1) research activities; 2) courses; 3) academic staff; or 4) support functions (e.g. administrative audit). These procedures may also analyze these functions in an aggregated manner, in either departments or in an entire institution.

Internal quality assurance refers to each institution's or programme's policies and mechanisms for ensuring that it is fulfilling its own purposes as well as the standards that apply to higher education in general or to the profession or discipline in particular.

External quality assurance (EQA) refers to the actions of an external body, which may be a QAA or another body different from the institution, which assesses its operation or that of its programmes in order to determine whether it is meeting the standards that have been agreed on.

Quality assurance and accreditation: a glossary of basic terms and definitions (Vlãsceanu, Grünberg, and Pârlea, 2004), published by UNESCO/CEPES, defines quality assurance as follows:

> "**Quality assurance** relates to a continuous process of evaluating (assessing, monitoring, guaranteeing, maintaining, and improving) the quality of a higher education system, institutions or programmes. As a regulatory mechanism, quality assurance focuses on both accountability and improvement, providing information and judgment (not ranking) through an agreed and consistent process and well-established criteria. Many systems make a distinction between internal quality assurance (i.e. intra-institutional practices in view of monitoring and improving the quality of higher education) and external quality assurance (i.e. inter- or supra-institutional schemes of assuring the quality of higher education institutions and programmes). Quality assurance activities depend on the existence of the necessary institutional mechanisms preferably sustained by a solid quality culture.

3. It is interesting to note that the INQAAHE has been working on a glossary, which can be consulted at http://www.qualityresearchinternational.com/glossary/

The scope of quality assurance is determined by the shape and the size of the higher education system. Quality assurance varies from accreditation, in the sense that the former is only a prerequisite for the latter. Quality assurance is often considered as a part of the quality management of higher education, while sometimes the two terms are used synonymously."

A related, equally broad concept, is quality assessment. Often, this is a synonym of 'evaluation' or 'review'. Many countries have started by establishing quality assessment mechanisms that do not produce any type of grading or ranking of institutions, but rather a set of recommendations on how to improve the quality of a given institution or programme.

"**Quality assessment** (often called also quality review or evaluation) indicates the actual process of external evaluation (reviewing, measuring, judging) of the quality of higher education institutions and programmes. It consists of those techniques, mechanisms and activities that are carried out by an external body in order to evaluate the quality of the higher education processes, practices, programmes and services. Some aspects are important when defining and operating with the concept of quality assessment: 1) the context (national, institutional); 2) the methods (self-assessment, assessment by peer review, site visits); 3) the levels (system, institution, department, individual); 4) the mechanisms (rewards, policies, structures, cultures); 5) certain quality values attached to quality assessment, such as academic values (focusing upon the subject filed), managerial values (focusing on staff and their teaching skills and classroom practice), employment values (emphasizing graduate output characteristics and e-learning outcomes)." (Vlãsceanu, Grünberg, and Pârlea, 2004).

A rather particular approach to quality assurance is quality audit. This does not assess quality or performance as such, but rather the quality of existing quality assurance mechanisms. It can be used to evaluate the strengths and weaknesses of the quality assurance mechanisms adopted by an institution. This can help to monitor and improve the activities and services of a subject, a programme or the whole institution.

"**Quality audit** is the process of quality assessment by which an external body ensures that: 1) the institution or programme quality assurance procedures; or 2) that the overall (internal and external) quality assurance procedures of the system are adequate and are actually being carried out. Quality audit looks to the system for achieving good quality and not at the quality itself. A quality audit can be realized only by persons (i.e. quality auditors) who are not directly involved in the areas being audited. Quality audits can be undertaken to meet internal goals (internal audit) or external goals (external audit). The result of the audit must be documented through an audit report."

(Vlãsceanu, Grünberg, and Pârlea, 2004)

Accreditation is the most widely used method of EQA and has recently been introduced in many higher education systems. It can represent either a transformation of other existing methods of EQA, or an entirely new method. Based on assessment and evaluation, it makes an explicit judgment as to whether a programme or institution meets particular quality standards. These standards may be either a set of minimum standards, standards of high quality or excellence, or the institution's own purposes. Accreditation therefore always involves some kind of benchmarking and a set of existing quality criteria. It is thus the only method within the quality assurance spectrum that makes an explicit judgment about the degree to which an institution or programme actually meets pre-determined standards.

Accreditation against minimum (also called 'threshold') standards provides assurance of acceptable programmes or institutions. When it is also linked to the authorization to operate, it is usually called *licensing*. Some systems also apply high quality standards. This makes it possible to differentiate between those programmes or institutions that meet threshold standards (and are thus acceptable) and those that are excellent. Some systems also accredit institutions or programmes solely against their own purposes. However, these are becoming rare, unless they can also show that their purposes meet the basic standards for the profession or for higher education in general.

> "**Accreditation** is the process by which a government or private body evaluates the quality of a higher education institution as a whole or a specific educational programme in order to formally recognize it as having met certain predetermined minimal criteria or standards. The result of this process is usually the awarding of a status (a yes/no decision), of recognition, and sometimes of a license to operate within a time-limited validity. The process can imply initial and periodic self-study and evaluation by external peers. The accreditation process generally involves three steps with specific activities: 1) a self-evaluation process conducted by the faculty, the administrators, and the staff of the institution or academic programme, resulting in a report that takes as its reference the set of standards and criteria of the accrediting body; 2) a study visit conducted by a team of peers selected by the accrediting organization, which reviews the evidence, visits the premises, and interviews the academic and administrative staff, resulting in an assessment report, including a recommendation to the commission of the accrediting body; 3) examination by the commission of the evidence and recommendation on the basis of the given set of criteria concerning quality and resulting in a final judgment and the communication of the formal decision to the institution and other constituencies, if appropriate."
>
> (Vlăsceanu, Grünberg, and Pârlea, 2004)

This discussion on some key concepts shows the difficulties in defining and categorizing processes and procedures. It is particularly difficult when international experiences are being considered. This is because existing country realities show a variety of practices that use concepts in a necessarily untidy manner. There is therefore no point in attempting to be conceptually pure. However, there is a definite need to establish a common language for pedagogical reasons.[4]

Activity 3

Consult the INQAAHE glossary on basic terms in quality assurance under http://www.qualityresearchinternational.com/glossary/. Review the discussion of the concept of accreditation. How do the definitions in the INQAAHE glossary compare with the UNESCO/CEPES definitions?

6. Users and purposes of accreditation systems

EQA and accreditation provide information on the quality of programmes and institutions. This information may be used by a variety of stakeholders, including:

- government;
- students;
- employers;
- funding organizations; and
- institutions of higher education.

Lenn distinguishes the following uses of EQA systems applying in particular to accreditation systems (see *Table 3*; Peace Lenn, 2004):

4. A more complete discussion of concepts, including an analysis of conceptual variations, can be found in a glossary prepared under an INQAAHE project on the following web site: www.qualityresearchinternational.com/glossary/

Table 3. Uses of accreditation systems for different stakeholders

Users	Uses
Government	To define higher education country-wide To assure quality higher education for citizenry To assure quality labour force To determine which institutions and programmes receive public funding To accept into civil service only those graduated from accredited institutions To generally use quality assurance as a means of consumer protection
Students	To assist in selecting an institution for study To ensure transfer between accredited institutions To ensure admission at the graduate level a different institution from undergraduate degree To assist in employment, particularly in civil service and in the professions
Employers	To assure qualified employees
Funding organizations	To determine eligible institutions for funding
Higher education institutions	To improve institutional information and data To enhance institutional planning To determine membership in certain organizations To facilitate transfer schemes To assure a qualified student body

Source: Peace Lenn, 2004.

Activity 4

Who are/would be the main recipients of information related to EQA in your country?

Should information on the recognition or accreditation and/or QA of institutions and programmes be made publicly available in your country? If so, by whom and how?

Major organizational and methodological choices in EQA systems

The definitions of EQA concepts may give the impression that the methodology and organizational options in EQA are homogeneous. Although the purposes of EQA may seem similar, many important differences become evident when we compare methodological options. This shows us that while some basic elements in the process are common, EQA systems vary both in their underlying objectives and approaches.

It is agreed that EQA should ideally be based on internal self-assessment by the professionals located in the basic unit level (department, faculty or institution) responsible for decisions concerning education or research. Self-assessment is commonly guided or helped by a list of areas of attention to be addressed. This provides a framework conducting the process. However, self-assessment needs external validation of both the procedures and criteria used. A team of external experts that examines the self-study report and visits the unit is best placed to give such validation. This team will then prepare a report on the basis of which EQA decisions are taken. The basic structure for accreditation processes therefore comprises the following three elements:

- self-assessment;
- peer review; and
- decision-making and public reporting.

These commonly accepted process elements will be discussed fully in *Module 2*.

1. Overall purposes of EQA

EQA in higher education refers to a wide range of purposes and related methodological frameworks. Some of these reflect government interest and demand, while others address the internal needs of institutions more directly. As a result, the purposes of EQA are tightly linked to the use that will be made of information outcomes.

EQA systems have three main broad purposes:

- quality control;
- accountability/guidance; and
- improvement purposes.

Quality control relates to the traditional role of governments in ensuring that higher education provision is in line with minimum requirements of quality. Where higher education systems are mostly public, this function used to be less prominent as it was assumed that sufficient input steering would produce acceptable levels of quality. This is now brought into question. In addition, ongoing privatization and growth in the numbers of private national and international providers have enhanced the need for national governments to check quality, if only to protect

national consumers and ensure that higher education provision relates to national development objectives.

Second, although EQA is mainly geared towards **accountability**, it is often also commissioned by public authorities as part of their higher education policy agenda. It is frequently linked to concerns over 'value for money' and creation of transparency and public assurance. To make higher education accountable and have it conform to standards set, the public must be kept informed and judgments made about institutions' fitness for purpose, soundness or public satisfaction with them. EQA is often conducted mainly to enforce accountability in order to reassure external stakeholders about levels of 'quality', acceptable or high standards, and the 'international comparability' of both public and private providers (Harvey, 2001).

EQA models can also be used by government to make HEIs **conform** more to general policy and reform initiatives. They can do so through the quality model and by setting criteria and standards to be measured. Indeed, quality assurance standards provide detailed information on how institutions will be judged. Together with legal frameworks and funding methodologies, accreditation thus becomes a strong instrument for steering academia. In particular, reporting systems between institutions and government authorities can be highly enriched through regular provision of data and reports.

Third, EQA may also be geared explicitly towards **improving** existing practices. To achieve this, it must rely largely on the individual or collective involvement of academic staff. EQA will naturally lead to improvement, partially through the compliance objective, and partially through the setting of high or good practice standards that provide targets towards which institutions and their departments will strive. But the main reason why EQA brings about improvement is the formal and systematic self assessment procedures it helps establish within HEIs. Indeed, 'transformative' quality improvement happens more easily when academics start self-assessment by reflecting on their own teaching reality. Otherwise, an EQA system may simply produce a 'compliance culture'.

Ensuring minimum quality standards is important in higher education systems that have become highly diversified and heterogeneous, or where public trust in HEIs is eroding. In these cases, it is essential to provide a basic assurance that HEIs operating within the system comply with minimum or threshold standards. Threshold standards are normally linked to some degree of sanctions. This means that institutions or programmes that do not meet these standards are forced out of the system, their degrees are not officially recognized, or some similar measure is applied.

Accountability or compliance with standards, including the institution's own purposes, is used when public information about the quality of a given institution or programme is important. In some cases, this is also linked to sanctions or incentives. At the very least, however, the information provided enables market forces to act. This helps stakeholders make decisions on the basis of quality.[5]

5. It must be recognized that not all stakeholders consider quality their main concern. There are other important criteria for decision-making. At the very least, quality assurance empowers those willing to make quality their main consideration.

Quality assurance focusing on improvement is normally possible only in more mature systems, where threshold standards have already been met and institutions have developed a basic understanding of self-regulation. This does not mean that the other approaches cannot promote quality. However, making quality improvement the main concern imposes certain requirements on HEIs and on the EQA scheme.

There has been lengthy discussion on whether control, accountability and improvement objectives are compatible or mutually exclusive. While it is certainly true that EQA systems address them all in one way or another, the particular shape an EQA system takes is usually more geared to one than to the others.

2. General approaches to EQA

Compulsory vs. voluntary EQA

One of the most important questions in setting up an EQA system is deciding whether it will be of a compulsory or voluntary nature. A compulsory system requires all institutions or programmes that fall under EQA mechanisms to periodically undergo the QA process. Generally, however, a compulsory EQA system is not just concerned with checking that minimum standards are met. Compulsory systems are frequently set up because there is no licensing system or it is deficient. They may also apply to types of programmes where the State has a special responsibility, such as teacher training or programmes preparing for professions vital for national development and security, such as medicine, architecture and civil engineering.

Most EQA systems are, however, of a voluntary nature. This means that institutions and departments may apply to undergo EQA. Their motivation to do so may be the chance to acquire a special status through accreditation, which would give them an advantage in a competitive environment in finding students and funding. Or they may be motivated by access to specific funding (such as student funding or special incentive schemes). When EQA systems are voluntary, however, there is an expectation that the advantages related to EQA will create a movement through which all or, at least the majority, of institutions will be pulled into the system. Voluntary EQA systems are often more directly related to the improvement policy agenda. This is because institutions and departments can decide themselves whether they wish or not to join the process, depending on whether they wish to adhere to the proposed quality model. Voluntary EQA systems are also more easily acceptable to the higher education community

Box 4. Compulsory accreditation in Hungary

Hungary developed its procedure and organization of accreditation during the 1990s and has made it official through government bills that were modified on three different occasions: the Temporary National Accreditation Committee (TNAC) 1993-1994, the National Accreditation Committee (NAC) 1994-1996 and the Hungarian Accreditation Committee 1997. HAC is an organization for 'remote control' and is responsible for both content and quality, both of which are implemented by way of accreditation of programmes and institutions.

HAC is responsible for different functions. It performs institutional accreditation of universities and colleges every eight years (with special regulations for church- and privately-run institutions applying for State recognition), whereby, in addition to the management and infrastructure of the institution, all degree programmes are assessed (through self-evaluation, the peer visit, and subsequently the published report). The HAC is also in charge of assessing new degree programmes and doctoral schools, specialized postgraduate programmes, and 2-year post-secondary vocational programmes at HEIs. It licenses new universities, colleges and foreign higher education institutions. In addition to these functions that are directly related to quality management, it issues statements on national qualification requirements and on credit system regulations, and it evaluates drafts of international agreements on diploma recognition and equivalence. More recently, accreditation of trans-national higher education and evaluation of academia have been added to its portfolio of functions.

One of the particularities of the Hungarian accreditation system is that institutional accreditation is based on both programme assessment and on the fact that it is already offering a minimal number of programmes that have been accredited with the grade of either exceptional or strong.

In order to fulfil these above-mentioned functions, HAC issues recommendations (or decisions) at three different levels. The first of these levels consists of disciplinary programme committees, the second (medium) concerns college, institutional and interdisciplinary committees and the third level is the plenum of HAC. Final decisions are considered to be corporate actions that concern programmes, faculties and institutions. Thus HAC recommends that the Ministry of Education pronounce a decision for accreditation for undergraduate programmes and different faculties and institutions. It is the responsibility of HAC, however, to advise accreditation of postgraduate programmes.

The objectives of the Hungarian accreditation system were initially geared to the principle assurance of minimum quality standards, in particular at the programme level where disciplinary committees have established minimum requirements for the accreditation of programmes. Consequently, accreditation is compulsory in Hungary. Institutional accreditation possesses, however, a component that aims in particular the improvement of quality. Faculties and institutions are to prepare a self-study report, which is followed up by a visiting team that examines the whole institution, as well as the self-evaluation studies conducted at other specific levels. There is apparent tension due to performing both objectives simultaneously, and critics of the system believe that the quality improvement function should have precedence. The current intention is to help institutions develop and assess their own quality management procedures as part of the accreditation process.

Source: Kozma, 2003.

Fitness for purpose vs. standard-based approach

The related dichotomy between the objectives of EQA systems and their fundamental nature (whether compulsory or voluntary) is also directly related to the approach used to assess quality. This can either be the 'fitness-for-purpose' or the 'standard-based' approach. The 'fitness-for–purpose' approach begins by analyzing the stated purpose of an HEI or programme (mission statement). It may also consider whether this purpose is acceptable in higher education or not (fitness of purpose). This approach has been heavily supported. Indeed, institutions and programmes cannot all be judged against the same standards, since they may serve specific types of clients and service groups in a diversified system of higher education. For instance, a traditional university located in a major city and that places strong emphasis on the excellence of its research may not be judged against the same set of standards as a teaching-only institution that emphasizes recruitment of non-traditional student groups. It has, however, also been argued that certain standards (in particular minimum norms) must be required of all HEIs. This way of thinking is becoming increasingly established, in particular within the context of a growing desire for international comparability. More and more systems of quality assurance are therefore moving towards a standard-based approach to accreditation. The 'fitness for purpose' approach is usually understood as the more appropriate approach for quality improvement, whereas the standard-based approach is more easily associated with accountability and conformity.

When the aim of EQA is to judge whether an institution or a programme can be accredited or not, it is necessary to use a standard-based approach. This is the case of the regional accreditation agencies in the USA.

Box 5. Standard-based approach used by the regional accreditation agencies in the USA

Accrediting agencies have a long history of requiring institutions to provide evidence about what they do. When USA accrediting agencies got underway early in the twentieth century, they required very specific information on the college's structure and programmes. Standards were limited in number, generally relied on available information, and were usually quantitative. During the 1920s, for example, typical requirements asked for information on the number and capacity of classroom buildings, the number of volumes in the library, the number and credentials of academic staff, and the size of the annual budget. The purpose, generally speaking, was to ensure that academic institutions had adequate organizational resources or sources of stability that could support a quality education. Notably, the focus was on the institution, and not on students nor on learning and instruction.

This approach was criticized on several grounds. First, it was said to give too much attention to fragmented information that, while 'countable', was not necessarily meaningful. Second, it did not allow for differences in institutional mission and type. Third, these measures gave too much emphasis to 'inputs' or 'resources' rather than to what use was made of them. Adding to these arguments, undoubtedly, was the fact that, as experience accumulated with accreditation, and with lists of accredited institutions offering programmes of good quality and

deserving to be accredited, even if they failed to meet certain prescriptive requirements, the requirements themselves were increasingly seen as not meaningful.

By the 1930s, with the North Central Association taking the lead, the idea of a single set of standards was dropped. The NCA instead decided to focus on the 'total pattern' of an institution's activity and to take into account the purposes that the institution itself had chosen. A small, religiously affiliated college may have very different purposes than one of the Mid-West's large state universities, it was recognized, and should be judged according to its own purposes.

To implement this new approach, the NCA revised its approach to accreditation review. Evidence gathered about an institution was to be assessed in terms of overall pattern the evidence presented, instead of the previous emphasis on meeting each specific standard. Standards were from then on known as 'criteria' to reflect their change in purpose. Under this 'holistic' approach, an institution could be deficient in one area but have offsetting strengths in other areas.

This attention to a university's overall pattern of activity was adopted by the NCA and used throughout the 1930s and 1940s (NCA, 1997, p.4). Other regional accrediting agencies took similar actions during this period. Notably, although they took steps to offer greater flexibility in how their standards were interpreted, they did not change their wording from 'standards' to 'criteria'. Numerical information continued to be used but it was given less importance. Qualitative judgement became more important. Still, the focus was on the institution, its organizational strengths, and distinctive educational offerings and mission.

In retrospect, it can be said that this 'holistic' emphasis may have slowed but did not stop a gradual process of increased detail in accrediting requirements. The wording changed, the guidance became more flexible, but the number of standards grew. Most accrediting agencies today work with quite detailed standards, intended to reflect both the general responsibilities that all institutions or programmes should meet, and the criteria by which to judge whether those standards are met. The Northwest Association (NWA), for example, currently has nine standards, with a total of 45 subparts (Northwest Association, 1999).

Source: El-Khawas, 2001: 60-62

The French system of evaluation has been based for almost 20 years on a rather open system of quality assessment. The aim of this system is to assess the particular strengths and weaknesses of an HEI, in order to provide information to improve the internal processes at a given institution. More recently, a set of standards for evaluators and the internal management of HEIs was adopted (see *Box 6*).

Box 6. *Livre des références* of France's *Comité national d'évaluation*

At the same time, we saw that the work of the CNE had to become more professional to establish its reputation. We sought to strengthen our methodology and explain it more clearly in the international arena. The most successful achievement in this field came in 2003 with the publication of the *Livre des références* (Book of standards), which is now the framework for internal evaluation. The reasoning of this document is based on demonstration, leaving the university to choose which lessons it should draw. It addresses three areas: educational policy, research policy and the extent to which the university's management serves its objectives. The book is divided into ten reference frameworks, each of which defines a major area of university life on which the expectations of users and partners are based; 63 references constituting an implementation system; and a non-exhaustive list of 302 criteria, each of which formalizes a mechanism that contributes to achievement of the objective. The *Livre des références* has not only been used in all CNE evaluations since its publications, but has also proved to be an effective communication tool.

Source: Levasseur, 2005.

Module 4 will further discuss and deepen the 'fitness-for-purpose' and standard-based approaches to EQA, which are fundamental system choices.

Minimum standards vs. high level (or good practice) standards in accreditation

EQA systems may use either **minimum** or **high level (or good practice)** standards. They more commonly use minimum standards. When they do so, they tend to be conceptually close to a licensing scheme for institutions or programmes and thus act as a periodic licensing mechanism. Such minimum standards frequently address input factors relating to students, staff, buildings, facilities and finances. They also include process elements such as governance and management systems, as well as the basic research activities perceived to be necessary for higher education to be meaningful. Overall, an EQA system based on minimum standards aims to enforce conformity with standards as well as accountability.

EQA based on high standards assumes that either the minimum standards are already checked through a different mechanism or that quality in the system is relatively even. This is the case, for instance, in Western Europe, where the state has long assumed the major responsibility for funding a largely public system. Assurance of high or good practice standards is also predominant in countries where universities traditionally have a high level of autonomy and where compliance with minimum standards, particularly at the programme level, seems contrary to the local understanding of autonomy. EQA based on high level or good practice standards seems to be the mechanism for quality improvement as it provides a set of references towards which institutions should strive. Again, it is easier to implement as it is frequently of a voluntary nature and may be driven by the better-quality institutions. The problem with this mechanism is that it is not very effective in weeding out unacceptable levels of quality. It is thus not an effective mechanism to deal with uneven and sometimes unacceptable programmes offered by a multitude of (commercial) providers.

Box 7 presents the Colombian approach to accreditation which is a standard based system but whose aim is not to provide assurance of minimum quality standards, but which certifies high quality standards and is thus organized on a voluntary basis.

Box 7. Accreditation of high quality in Colombia

Higher education in Columbia is complex and heterogeneous. It consists of a multi-layer system of universities, colleges, technological institutions as well as intermediate technical-professional institutions. Social demand for higher education from an increasing number of secondary school leavers has grown tremendously over the past two decades. However, due to funding constraints public provision could only satisfy part of this demand, which has led to a proliferation of multiple private programmes and institutions that offer higher education with different levels of both quality and relevance.

As part of a reform of the higher education system in Colombia proposed in 1992 (Law 30), the system of accreditation of Colombian higher education institutions was created under the auspices of the National Council for Accreditation (CNA), which had been precisely perpetrated by this Law. CNA functions under the National Council for Higher Education (CESU), which is the main body for policy-making in Colombian higher education. CNA consists of a group of highly respected Colombian academics and of a secretariat that is in charge of co-ordinating ongoing accreditation processes.

CNA is in change of voluntary accreditation for high levels of quality. "*Accreditation of high quality*" is both a voluntary and temporary process and its methodology stresses quality enhancement rather than quality control. In consequence, "*Accreditation of high quality*" adopted a system whereby ideal characteristics of quality are compared to reality, thus creating strong incentives for quality improvement.

The methodology for the *Accreditation of high quality* of academic programmes and institutions is founded on a process consisting of basically four stages. Once an institution has requested accreditation of its programmes, the first phase concerned with checking the eligibility of criteria may begin. Following this stage, the academic undergraduate programme of the institution undergoing accreditation conducts a self-evaluation based on a pre-established methodology and set of criteria and quality characteristics. An external peer visit of the institution then follows, which leads to the preparation of a report on which the institutional management may comment. The concluding report of the peers is submitted to CNA that thus proceeds to the final evaluation or synthesis and issues a recommendation to the Ministry of Education to accredit the programme for a given duration ranging from three to ten years.

CNA has prepared a model for the *Accreditation of high quality*, which is based on the following seven factors:

- institutional project;
- students and teachers;
- academic processes;
- institutional well-being;

- organization, administration and management;
- graduate students and impact on the environment;
- physical and financial resources.

The factors are described and organized into a total number of 66 characteristics. Each characteristic includes indicators that allow measuring the degree of compliance with an ideal value. According to the object for accreditation (university or non-university institution), certain characteristics are more important than others and some are considered as crucial. This leaves institutions and peers with a checklist of items to be interpreted with regard to a particular department or specific institutional circumstances. Institutional accreditation assessment is based on similar factors and characteristics but the focus is more on the institutional and organizational processes.

Source: Revelo Revelo; Augusto Hernandez, 2003: 9-11.

Accreditation/assessment vs. quality audit

EQA systems may focus on the quality of activities and services provided by an institution or department through an *accreditation* and *assessment* system. Or, they may focus on the quality of the quality assurance system (through quality *audit)*. Quality audit is conceptually different from assessment or accreditation, in that it judges the extent to which an institution (or one of its sub-units) has a monitoring system in place that clearly conveys its strengths and weaknesses. This means that quality audit focuses on an institution's internal reporting mechanisms, on data collection mechanisms on 'teaching performance', and on whether an institution collects systematic data on student, graduate and employer satisfaction. It also means that an institution has mechanisms in place to deal with low quality and continuously enhances good quality. Since it focuses on processes, quality audit is thus very much in line with the 'improvement' objective of EQA. However, it does not lead to the certification of or compliance with a particular level of expected quality. Nor does it lead to comparability of quality levels, which is the case of quality assessment when it is standard-based.

Most quality assurance agencies operate a series of mechanisms for quality assurance. These frequently include 'institutional audit' and programme assessment, which may or not be sanctioned by an accreditation decision.

Box 8. Quality audit established in Norway

In order to comply with a national concern with quality identified in several national and international reports, Norway created in 2002 a new agency for accreditation, called NOKUT. It was decided to adopt an audit approach through which it would be assessed how the institutions handle their responsibility for educational quality.

After conducting a pilot study, the following recommendations were made for the development of the audit approach:

1. *Quantitative documentation at the institutional level* in the form of key figures in the categories: access, resource input and results. The report listed data requirements under each category, and expressed the question of common reporting and data formats across institutions.

2. *Institutional guidelines for its quality work*. The following elements should at least be included in these guidelines:

- Quality plan and governance including objectives, standard procedures, responsibilities and administrative resources, leadership and governance, priority areas and action plan;
- Registers and reports (as mentioned in point 1);
- Evaluations done within the institution (both self-evaluations and external evaluations);
- The publishing of an institutional yearly report on quality work.

  The yearly report on educational quality. This report is to replace the need for a yearly self-evaluation. The report should anyhow be part of the internal quality system (see point 2).

3. External audit evaluation. This is the actual audit exercise. The report stresses the importance of looking beyond the system, and into the actual functioning and effects it may have. The report proposes a mandate for the external audit evaluation team (NNR. August 2002).

It was expected that the audit approach have the following strengths in the system:

- The audit system takes into proper account the existence of large, autonomous and professionally run institutions of higher education, being able to conduct internal systems of quality assurance. The institutions will themselves have the required insight to make systems suited for them.
- Even if they are able to conduct such systems, there may be opposition within the institution in doing so. The audit system may in those cases put pressure on the institution in developing good internal systems of quality assurance.
- Within general guidelines and standards, it gives the institutions freedom to develop their own internal systems and mechanisms. There will be few specific instructions and templates and no procedure manuals governing what the institutions must or should do in the way of monitoring and evaluating their programmes. Rather, the standards will be predominantly such as can be deduced from one simple question: what does it mean to have a reliable system of quality assurance? This open approach, it is hoped, will cater for flexibility, creativity, pluralism and a sense of institutional ownership inside a common framework.

- The audit system can be more economical, which in turn may leave more resources for other types of evaluations.
- With national audit focusing on the institution's quality system and the documentation it produces, it can be more economical and more development-oriented. In principle, audits will make use of the same corpus of evaluation data as the institution itself does, while also "checking" these data and the institution's own assessment against other information obtained through site visit interviews and from other sources. Audits will be concerned with individual courses mainly in so far as the evaluation data show indications of failing quality, when they may trigger a closer inspection at subject/programme level.
- Preserving a certain space for the established tradition of development-oriented evaluations has been an important factor. An "open" audit system may be looked upon as development-oriented in itself – in addition to providing accountability. Being more economical than a system of cyclic evaluations at programme level, it may also leave more resources for other type of evaluations.

Source: Levy, 2005.

Following the management principle that 'structure follows purpose', it is possible to relate major choices to be made for an EQA system to its overall purpose. A combination of both basic purposes is admissible. However, it is generally understood that any system will be predominantly geared to one or the other purpose. A relationship between the three major purposes of EQA and the basic system options discussed above is presented in *Table 4*.

Table 4. Classification of basic options used in EQA systems

Purpose	Quality control	Accountability/public assurance	Improvement/guidance
Preferred mechanism	Licensing	Accreditation/assessment	Quality audit
Framework for QA	Standard-based approach	Fitness for purpose + fitness of purpose	Fitness for purpose
Procedures	Mostly external assessment	Both external and internal assessment	Mostly self-assessment
Nature	Compulsory	Compulsory or voluntary	Voluntary

Activity 5

What should be or is the most important purpose of EQA in your country? What do you think should be the preferred mechanism(s), framework for quality assurance and nature of the system?

3. Scope of EQA systems

A third set of basic options in EQA relates to its *scope*. It may deal with the entire higher education system or with some segments only (university and/or non-university sector), public and/or private higher education institutions, etc.

Public institutions and/or private higher education sector

It is first necessary to decide whether EQA will deal with both public and private institutions. In many cases, this is both a legal and a political choice. In many systems, public institutions are financed mostly by the state and may therefore be of more even quality than private providers. Moreover, public institutions, particularly universities, are often a powerful pressure group that may oppose the establishment of an EQA mechanism relating to their own sphere. As a result, EQA systems have been set up in some countries specifically for the private sector of HEIs. In others, governments and citizens expect their public institutions to show that they make good use of public resources, and therefore are the primary targets for EQA. Finally, some countries expect both public and private HEIs to contribute to national policy objectives (i.e. human resource development, social cohesion, and scientific and cultural development). Their quality assurance system must therefore check whether institutions are contributing appropriately to these objectives is necessary.

In addition, in a forward-looking perspective, countries may wish to open up access of foreign providers to the country's higher education market. Given current negotiations within the GATS, there may be a future decision on giving private providers 'non-preferential treatment' in comparison with public institutions. This would then mean that the basic requirements for the functioning of both public and private providers, with the exception of providing public funding, would be similar. This would also apply to EQA procedures and standards.

Box 9. Policy commitment to quality control of private providers in South Africa

The Constitution of the Republic of South Africa of 1996, as well as a draft of other legislative instruments have enshrined the rights and freedoms of South African citizens in a number of areas. Various new statutory bodies have been established to give effect to those rights. The growth in private provision, including the entry of trans-national providers, must be seen as part of the gradual process of expanding the rights and opportunities of citizens.

The Bill of Rights in Chapter 2 of the Constitution specifies the following right in respect of private provision in the area of education:

29 (3) Everyone has the right to establish and maintain, at their own expense, independent educational institutions provided that they –

- do not discriminate on the basis of race;
- are registered with the state;
- maintain standards that are not inferior to standards at comparable public educational institutions."(Republic of South Africa, 1996)

As is evident from the above, the basis for the constitutionally protected existence of private provision has been clearly specified but so too is the basis for regulation, quality assurance and the maintenance of standards. The Constitution recognizes the right of private education providers to co-exist (even to compete) with public education institutions but on conditions requiring regulatory oversight to ensure that transformation objectives regarding equity are achieved and that standards are not unduly compromised. For the citizens of the country and others who live within its borders, freedom of choice with respect to higher education opportunities is enlarged, but again with a measure of protection against poor education, enshrined in the requirement for equivalent standards at comparable public institutions. The latter requirement lays the basis for the development of a common quality assurance system within which comparability between public and private higher education could be credibly established.

Source: Naidoo and Singh, 2005.

University and/or non-university sector institutions

An EQA mechanism may relate to the university and/or non-university sector of higher education. Most commonly, EQA covers the university sector, as in the past this was the segment of higher education with the highest degree of academic autonomy, in particular regarding the development of study programmes. Since non-university tertiary institutions, such as polytechnics, institutes or community colleges were established more recently, they were frequently put under the direct supervision of a government authority. This authority is generally responsible for creating and supervising new study programmes.

In some countries, however, EQA mechanisms address institutions in both the university and non-university sectors. In this case, however, the question arises as to whether the same methodology and set of criteria can apply to both types of institutions. Many universities claim a more academic dimension; their teaching should thus have a sound theoretical foundation and be research informed. This is not necessarily the case in other tertiary level institutions, which are often of an applied nature and should offer employment-oriented training that conveys

practical competences. Some of the regional accreditation agencies in the US have a specific commission that accredits universities and another that makes judgments about community colleges (see *Box 10*).

Box 10. Flexibility in the US accrediting system

Regional accrediting agencies have tried to maintain a single set of standards and rules while also acknowledging important differences in institutional type and mission. This tension has not been entirely settled, even today. At issue is whether expectations and requirements can be uniform across differing types of institutions, and whether all institutions need to provide comparable forms of evidence. This is pertinent especially to regional accreditation, where the entire institution is being evaluated. Even when it is acknowledged that there are important differences among institutions, difficult issues remain: what distinctions, and how many, are to be accommodated and how distinctive can expectations be?

Responses have taken different forms. Some accrediting agencies have created separate subunits for different types of institutions. For example, the Western Association of Schools and Colleges (WASC) has one accrediting commission to review community and junior colleges and another commission to review colleges and universities offering a baccalaureate or higher degree. The two separate commissions establish their own standards and monitor policies for each type of institution. They are similar in many respects but different in others.

Accrediting procedures make other adjustments to respect differences in institutional mission, allowing each institution to be judged in terms of its own chosen mission. A school of music, in this view, would be judged on different grounds than a school of engineering. Under this approach, the accrediting agency still examines whether a clear and coherently-stated mission exists, whether there is evidence that this mission is being accomplished, and whether the institution has the resources necessary to be able to accomplish this mission in the near future. This approach, which had strong advocates during the 1970s, is still found in the practices of regional accrediting agencies.

Some intrinsic aspects of accreditation's evaluation procedures lend flexibility. For example, the present accreditation practice continues to look at both the strengths and weaknesses of the institution. This approach gives flexibility because, even as evidence is assembled, there is room for applying discretionary judgment in the weighting of the evidence. Where certain areas are weak, the tradition of organizing evidence and reports that balance strengths and weaknesses serves to soften the impact of negative information as long as there are offsetting factors.

Another approach makes small adjustments for institutional differences. Under this approach, the accrediting agency applies a single set of standards and criteria but, where possible in the accrediting review process, small adjustments are made to reflect institutional differences. For example, the accrediting review team may be composed of educators from similar institutions. A team sent to evaluate a small, relatively new college would not be made up of educators from the largest, most prestigious university, but in turn would expect that its visiting team were made up of persons from similar institutional backgrounds. So, too, judgments about each institution are made in light of what can be expected for its size and relative resources.

Source: El-Khawas, 2001: 49-51.

Institutions and/or programmatic EQA

Another basic question that all EQA systems must address is the *unit of analysis* – that is, whether EQA should be institutional or programmatic.

Institutional EQA is naturally far broader than programmatic EQA. According to Peace Lenn (2004), it focuses most frequently on the following areas of analysis:

- mission;
- governance;
- effective management;
- academic programmes;
- teaching staff;
- learning resources;
- students and related services;
- physical facilities; and
- financial resources.

Institutional EQA investigates whether the mission and objectives of an HEI are appropriate. It also considers whether its resources and processes are suitable to achieve them (under the fitness-for-purpose approach) or whether certain standards are attained. Institutional EQA looks at the institution as a system of which academic programmes are a part. It therefore needs to be relatively generic and to only take into account in a relatively small way the differences in objectives and performance among the different institutional sub-units. Institutional EQA may be the preferred option in a system in which quality varies widely between institutions and when institutional management is rather weak. It may therefore be a strong way of strengthening the management capacity of an HEI.

Programmatic EQA focuses on individual study programmes, many of which prepare students for a specific profession. Each study programme may have its own policy on student recruitment, standards and curricula, and in addition be subject to requirements arising from national qualification frameworks. It therefore makes sense to quality assure individual programmes. In particular, programmatic EQA may assess whether an educational programme is related to the professional expectations for entry into a specific profession. Over and above this, institutions may offer programmes of different quality in different disciplines that cannot be recognized by institutional EQA. Programmatic EQA is therefore a strong tool to address issues of deficient quality at the departmental level, where improvement decisions must be taken.

However, programmatic EQA must also address many of the dimensions that relate to the broader institutional environment. This can include management of the institution, department and facilities with a direct impact (constraint or enabling) on the quality of the study programme. Programmatic EQA must therefore also have an institutional dimension.

Most countries focus on programmes. This provides useful information for stakeholders, who must normally make decisions based on the perceived quality of a degree. Moreover, it is generally easier to bring it into an HEI, since it encompasses fewer people and actions are circumscribed to a specific programme. Furthermore, improvement measures are usually less expensive and

thus more easily carried out. At the same time, some countries with a long experience in institutional accreditation (such as the US) argue that many of the issues related to programme quality actually operate at the institutional level. Besides, it is much easier to cover a relatively reduced number of institutions than to assess a larger number of programmes.

Both types of EQA are thus very linked. Institutional EQA cannot be conducted without looking at programmes, but programmatic EQA must look into the broader institutional environment. Countries usually start off with a focus on either the institution or its programmes. However, they eventually understand that both are complementary and nurture each other. Many systems that in the past focused clearly on one specific aspect have decided to incorporate the other. Some countries conduct both and attempt to link them up in a single process. Some EQA systems, such as the US accreditation system, have both aspects performed by different actors. However, attempts are made to co-ordinate the two so that they can enlighten each other.

All programmes or some types of programmes only (for instance, state-approved only)

When EQA is programmatic, it may (or may not) be an option to focus on certain types of programmes. This could include, for example, teacher education programmes or other programmes that prepare for professions perceived to be of vital interest for a country. In Argentina, for instance, the national accreditation agency CONEAU accredits programmes in need of state approval. This is because although the capacity to create and manage study programmes lay traditionally with institutions, over time the state came to believe that there was a need for tighter regulation of those study programmes leading to professions.

Box 11. Request for compulsory accreditation of state-approved programmes in Argentina

In addition, the LHE sets that state-regulated courses have to be accredited by CONEAU in order to be offered; put differently, if an institution wishes to offer a State-regulated course, it has to apply to CONEAU so that this agency assesses the course to be given. Like in the case of institutional accreditation, CONEAU's assessment report is binding. Only courses with a favourable authorization decision are entitled to issue official and qualifying degrees. The non state-regulated courses need not have CONEAU's accreditation; it suffices with the fact that they are authorized by the Ministry and fulfill the minimum requirements regarding the time load set by the aforementioned agreements for each case.

Somehow, the compulsory character of state-regulated courses' accreditation works retroactively since the courses included in this measure, which were already underway by then, also have to be submitted to CONEAU for assessment and accreditation. If it does not meet the standards and it obtains an unfavourable report from CONEAU, the Ministry is empowered to disqualify the course under consideration and unacknowledge their degrees.

The accreditation processes for state-regulated courses performed by CONEAU are carried out following technical-academic standards set by the Ministry of Culture and Education and previous consultation with the University Council, and they mainly aim at supplying an academic quality assessment, which should complement an institutional one. Even though the assessment's goals are mainly academic, CONEAU's decisions regarding the appraisal of courses are binding on the Ministry of Education so that official recognition is granted to the new course.

The process of undergraduate course accreditation comprises two steps: firstly, the execution of a self-assessment on the part of the applying course of studies, and secondly, the appraisal by a peers committee.

According to each academic unit's features, the self-assessment can take between one and four months. At its conclusion, a self-assessment report is issued, which has to provide systematized and comparable information, as well as a detailed appraisal of the conditions under which the courses are unfolding and their results. This document may also include an improvements plan, which in the future allows compliance with the minimum standards set.

Afterwards, the peers committee analyzes this self-assessment report together with other relevant information, pays a visit to the course's seat, and comes up with a final decision. In it stands the committee's evaluative opinion and the recommendation for temporary accreditation or for rejection of the application.

Both the self-assessment and the peers committee appraisal stages are carried out following certain methodological instruments, designed for each purpose. The Self-Assessment Guide was designed to organize and co-ordinate the academic unit's self-assessment task. The Peers Guide outlines a logical appraisal sequence, laid out in sections and cores, which enables the assessment of the course's current state, to link from the outlook of undergraduate education its features to one another and to the practices that the academic community has adopted, and to check standard compliance.

Source: Villanueva, 2006.

Activity 6

What would you consider the desirable scope of a quality assurance system in your country? In particular, should it cover both the public and private provision of higher education under the same unified system? If so, for what reasons?

4. Conclusions

Within the overall similarity of EQA systems, the discussions above have shown that they can be set up in many ways. Options cannot be discussed without taking into account the particular national policy context of a higher education system, and in particular its tradition and culture. It has been argued, for instance, that EQA systems tend to fill existing gaps in the broader quality assurance system and that they focus on functions not yet occupied by another agency. This explains many of the differences found in a comparative analysis of EQA systems. Academic traditions and culture are another source of divergence. Detailed procedures must be seen as legitimate within a given system. Moreover, what is legitimate varies from one context to the other. In particular, variations in the understanding of what constitutes 'institutional autonomy' lead to differing options as to how a good quality assurance system should operate.

Another major conclusion is that the overall purpose of an EQA system should be identified clearly. This will then determine the specific approach to be taken to EQA, in particular whether EQA should focus on assessment, accreditation or audit; should be compulsory or voluntary; should use standards or the 'fitness-for–purpose' approach; and what specific scope it should take. However, over time EQA agencies also commonly become multifunctional systems and embrace new roles such as licensing, institutional audits and programme accreditation.

Within the context of globalization, international trade agreements and increased mobility of professionals and students, national higher education systems are diversifying to include distance education and private higher education. There is therefore an increasing need for standardization to enhance the readability of credentials. This has led to a growing number of EQA systems evolving towards or starting to embrace an accreditation function. This is why accreditation has become, to date, the most popular form of EQA.

Lessons learnt

Lesson 1: New contextual factors such as diversification and globalization of higher education system make quality assurance an increasingly important function for public authorities

The expansion of higher education systems and ongoing diversification and privatization processes require the use of new steering instruments. One of these is quality assurance. The development of quality assurance systems is one of the major trends in higher education policy and is reinforced through regional quality assurance agencies networks. Such networks help agencies to exchange experiences and develop 'codes of practices'.

Lesson 2: EQA systems must fit in with the pre-existing quality assurance mechanism

New quality assurance systems generally complement already-existing quality assurance devices. A diagnosis of the strengths and weaknesses of pre-existing mechanisms for quality assurance should precede the development of an EQA system, which should fill existing gaps and address any shortcomings. Often, new EQA systems correspond to particular weaknesses in the overall quality assurance system. They may also be set up as a new instrument for the regulation of a country's HEIs.

Lesson 3: It is necessary to identify the basic underlying purpose of a new quality assurance system and ensure that there is consistency between this purpose and the methodology to be developed

The structure of EQA must correspond to an overall philosophy (accountability or conformity versus quality improvement and development of the system). When quality improvement is the aim, a voluntary mechanism is a better option than a compulsory tool. Only when HEIs are motivated and committed to change can the EQA system operate as a development tool for higher education. Strong academic commitment is needed for EQA to become an instrument for quality enhancement. However, it may also be necessary to establish a system of quality assurance oriented towards control of minimum standards when it is known that there are many low quality providers in the system.

Lesson 4: EQA systems can focus on quality assessment, quality audit or accreditation, or use a combination of these

In accordance with the basic underlying purpose of the EQA system, a decision must be taken as to whether quality assurance will be organized as quality assessment, quality audit or accreditation. Quality audit focusing on the internal quality assurance system is certainly the most development-oriented approach. It is therefore the most appropriate for systems whose institutions and programmes are of relatively even quality and have matured. Quality assessment is also an improvement-oriented, developmental approach, since it commonly assesses the strengths and weaknesses of an HEI or programme in a non-threatening manner.

Accreditation that imposes a cut-off point for what is acceptable and what it not is more appropriate for quality control purposes. However, it may force HEIs into a compliance culture.

Lesson 5: Developing an EQA system requires creating a model for desirable quality

Quality in higher education is a complex and multi-dimensional concept. Every EQA system needs to develop a quality model that will then be operationalized through the setting of standards and clear guidelines for assessment. Indeed, these are crucial for a well-operating and transparent EQA system. Increasingly, EQA systems are moving towards a 'standard-based' model. Standards once related to input concerns. However, they are also starting to embrace process and output/outcome standards. Assessing outputs and outcomes such as student learning is extremely relevant, but not easy from a methodological point of view.

Lesson 6: An increasing number of quality assurance systems use both quantitative and qualitative standards

A quality model is usually operationalized through a body of quantitative and qualitative standards. For both the self-assessment and peer review phases, these standards are generally communicated to institutions and assessors through operational handbooks. In some cases the handbooks are quite detailed; in others, institutions are more free to conduct their self-assessment. Standard-based models also vary in how much scope they leave to human judgment as to the degree to which standards are attained. More scope for human judgment is usually left to both institutions and experts in more mature EQA systems that no longer need to build their credibility and reputation of objective judgment.

Lesson 7: Institutional or programmatic EQA are interlinked

The division between programme and institutional EQA exists in all systems. Some systems focus on programme EQA, while others concentrate on institutional quality assurance. Yet others use a combination of both. A minimum number of accredited study programmes is a precondition for institutional accreditation. EQA systems tend to start with either of the two, but frequently decide to add the other one.

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Web resources

International Network for Quality Assurance Agencies in Higher Education (INQAAHE) web site: www.inqaahe.org/

INQAAHE glossary: www.qualityresearchinternational.com/glossary/

Observatory on Higher Education web site: www.obhe.ac.uk

Observatory on Higher Education web site news and reports page: www.obhe.ac.uk/cgi-bin/news/article.pl?id=377

The modules on External quality assurance: options for higher education managers

Quality assurance has become a topical issue on the higher education policy agenda. More and more countries are questioning their existing structures and are introducing new mechanisms and structures for external quality assurance. They seek to ensure minimum educational standards across diversified higher education systems and to provide a lever for continuous quality improvement.

The present material was developed by UNESCO's International Institute for Educational Planning (IIEP). It targets decision-makers and managers in government departments such as ministries of education, buffer organizations of higher education and quality assurance agencies whose task it is to design or develop the national framework for quality assurance. These modules should provide support for their decisions on external quality assurance systems, while discussing options that have been tried out successfully in a variety of countries.

The modules are based on the outcomes of two IIEP case study research projects, one on "methodological and organizational options in accreditation systems" and another on "regulation and quality assurance of cross-border providers of higher education".

Accessible to all, the modules are designed to be used in various learning situations, from independent study to face-to-face training. They can be accessed on the IIEP web site www.unesco.org/iiep, and will be revised as needed. Users are encouraged to send their comments and suggestions.

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Module 2

Conducting the process of external quality assurance

United Nations
Educational, Scientific and
Cultural Organization

International Institute
for Educational Planning

External quality assurance: options for higher education managers

These modules were prepared by IIEP staff and consultants to be used in training workshops or by individuals as self-study materials. IIEP is also using this material for its distance education courses.

The set of modules is available at www.unesco.org/iiep

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- Quantitative research methods in educational planning
- Reforming school supervision
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Module 2

CONDUCTING THE PROCESS OF EXTERNAL QUALITY ASSURANCE

Objectives of the module **4**

Questions for reflection **4**

Introduction **5**

Common core elements **6**

1. Preparing a self-assessment report 7
2. External review 8
3. Decision-making and reporting the outcome 9

The options **12**

1. Establishing initial conditions 12
2. Defining criteria for quality assurance 17
3. Self-assessment 18
4. External review 23
5. Decision-making and reporting by the agency 34
6. Implications of outcome 43
7. Follow-up 45

Lessons learnt **49**

References and further reading **52**

List of abbreviations

AAU	Academic Audit Unit (New Zealand)
AB	Accreditation Board (India)
AICS	Association of Independent Colleges and Schools (USA)
AICTE	All India Council for Technical Education
AUQA	Australian Universities Quality Agency
BAN-PT	*Badan Akreditasi Nasional - Perguruan Tinggi* (National Accreditation Board for Higher Education, Indonesia)
CEEC	College Education Evaluation Commission (Quebec, Canada)
CHE	Council of Higher Education (South Africa)
CNA	National Council of Accreditation (Columbia)
ENQA	European Association for Quality Assurance in Higher Education
HAC	Hungarian Accreditation Committee
HE	Higher education
HEFCE	Higher Education Funding Council of England
HEI	Higher education institution
HEQC	Higher Education Quality Committee (South Africa)
ICAR	Indian Council for Agricultural Research
IIEP	International Institute for Educational Planning
INQAAHE	International Network for Quality Assurance Agencies in Higher Education
NAAC	National Assessment and Accreditation Council (India)
NBA	National Board of Accreditation (India)
NCEA	National Council for Educational Awards (Ireland)
NWCCU	North West Commission for Colleges and Universities (USA)
OCGS	Ontario Council for Graduate Studies (Canada)
QA	Quality Assurance
QAA	Quality Assurance Agency
RAE	Research Assessment Exercise (UK)
UK	United Kingdom
USA	United States of America
VC	Visiting Committee

List of boxes

Illustrations from the quality assurance practices of the following countries:

Box 1 Adoption of the three-stage model of EQA in India 10

Box 2 Establishing initial conditions (USA) 13

Box 3 Guiding HEIs to prepare for the self-assessment process (New Zealand and India) 20

Box 4 Selection of reviewers (HEQC, South Africa) 25

Box 5 Constituting the review team (Ireland, and Philippines)..... 28

Box 6 Conducting the review – site visit (Hungary, Philippines)..... 31

Box 7 Reporting strategy (Australia)..... 32

Box 8 Reporting the quality assurance outcome (UK) 36

Box 9 Decision-making by the quality assurance agency (USA) 41

Box 10 Funding links to quality assurance outcomes (Hungary, and UK) 45

Box 11 Follow-up not included in the quality assurance procedure (Norway)... 46

Box 12 Follow-up built in the quality assurance procedure (Australia)..... 47

Objectives of the module

This module will:

- describe the main elements of the various quality assurance practices followed in different countries;
- explain the commonalities and different options available in each practice;
- illustrate with case studies the factors that influence the specific organizational options of different countries; and
- highlight the implications of various options, presenting examples from the experiences of different countries.

On completion of this module you are expected to be able to do the following:

- appreciate the various options in organizing the quality assurance process;
- understand the considerations and contextual factors that influence the options chosen by different countries;
- analyze the implications of the various options; and
- make a realistic assessment of the system that would be effective in your national context for the chosen objective.

Questions for reflection

Why is there so much diversity in conducting the EQA process?

If the practices serve the common purpose of 'quality assurance', what are the common elements that connect them, despite variations?

What happens after the quality assurance process? What are the implications of the quality assurance outcomes?

What options have or should be implemented in my country to comply with the specificities of my national context?

How do/should they differ in their approaches to other options outlined in this module? For what reasons?

Module 2

Introduction

Module 1 presented the major approaches to quality assurance. Building on these discussions, this module will present the various options available to a quality assurance agency (QAA). In a complex and diverse world with linguistic, political, economic and cultural diversities, higher education systems and policies in different countries are diverse. Consequently, quality assurance practices are diverse and in many different combinations, in order to serve different purposes.

More specifically, based on the national contexts and other considerations, quality assurance agencies have varying policies for dealing with aspects such as establishing initial conditions; defining criteria for quality, self-assessment and external review; training for quality assurance; decision-making; and reporting by the agency. Through case illustrations, this module will present the different ways in which quality assurance agencies deal with these aspects.

While practices differ, there is agreement on the essentials. This ensures the soundness of the quality assurance framework. Most quality assurance exercises emphasize two facets. These are self-assessment, based on a set of predetermined criteria, and an external review carried out by a team of experts. While this is desirable, it is not always possible, often because the higher education system contains too many units to be quality assured. Moreover, a combination of self-assessment and external peer review is a somewhat lengthy and costly process. However, it should always be an objective in view, at least for the mid- or long-term. This scenario, marked by different types of practices together with common core elements, has encouraged experimentation in many controversial issues in quality assurance. The debate that surrounds some of these issues and the reasons for the choices made by some agencies will be discussed in this module.

Obviously, the various options have different implications. This module will highlight some significant outcomes and their consequences. The full case studies listed in the section 'References and further reading' will be very useful to appreciate these discussions as well as to consider the discussions in your national context.

In summary, analyzing the various options and lessons learnt is essential if we are to appreciate the quality assurance developments that have taken place.

Common core elements

Quality assurance agencies use the term 'quality assurance' to denote different practices. Each of these practices serves different purposes and exercises the responsibility of quality assurance in many ways. *Module 1* presented some of the definitions and approaches. The definitions of the various approaches are not sharp. In practice, quality assurance agencies follow a combination of the basic approaches. This is due to various factors, but is mainly to suit the national contexts in which agencies operate and the purpose they wish to serve.

While the approach to quality assurance varies to serve different national contexts, there is agreement on the essentials. Whatever their basic options, most quality assurance systems have certain common features:

- they base assessment on predetermined and transparent criteria;
- they use a combination of self-assessment and external review. The extent to which self-assessment serves to evaluate may vary. Many of the specialized or professional accreditors just ask for information, without requiring analysis or evaluative judgments on the part of the programmes being assessed;
- they emphasize public disclosure of the outcome (although the extent of public disclosure varies from disclosure of only the final outcome to disclosure of the full assessment report); and
- they ensure validity of the assessment outcome for a specific period of time.

Around these common features, the quality assurance agencies follow a three-stage process. The first stage consists of the institution (or programme) providing the relevant information related to pre-determined, well-publicized criteria. In most cases, this is also accompanied by a self-assessment that provides a critical analysis of the information. The second stage is a site visit of an external review team for validation of the self-assessment or institutional report that results in the report/recommendation to the quality assurance agency about the quality of the institution/programme. The third stage is the final decision by the agency on the review team's recommendations and disclosure of the outcome that is valid for a certain period of time. The final decision may be based on the external review team's recommendation and a review of the self-assessment, or on a combination of either or both as well as other relevant information that the quality assurance agency has on the institution or programme. An attempt is made in the following pages to describe the basic elements of these stages.

1. Preparing a self-assessment report

A number of terms are often used to refer to more or less similar elements, such as 'self-study', 'self-evaluation', 'self-analysis' and 'self-assessment'. The term 'self-assessment' is used in the following discussions. Self-assessment is the central element in most EQA procedures. All quality assurance agencies emphasize and recognize the value of having the people undergoing the exercise undertake an analytical and self-critical process. But many quality assurance agencies also recognize that it is not always possible or realistic to expect HEIs to carry them out.

There are many reasons for this:

- In the absence of a 'culture of evaluation', self-assessment is usually uncritical. While it may be useful to ask for an evaluative self-assessment report, agencies and external reviewers know that it is of very limited value in some systems;
- When the stakes are high (e.g. when quality assurance procedures may lead to sanctions, or approval is essential for the continuing operation of the programme or the institution), it is unrealistic to expect institutions to carry out a truly critical analysis; and
- When agencies operate internationally, they tend to prefer the provision of data, and to take care of the evaluation themselves.

A set of standards and criteria determined by the quality assurance agency forms the basis for the self-assessment. The agencies generally have national consultations and ensure wide participation of the stakeholders in developing the standards and criteria. There may be variations. Some agencies, for example, may apply only the predetermined criteria to all institutions and programmes (the standards-based approach). Others may conduct the review against an institution's own goals and objectives (the 'fitness-for-purpose' approach), while the rest take an in-between stand. But the basis of quality assurance, in terms of the place given to an institution's own goals and the standards set by the quality assurance agency, are made clear to the stakeholders prior to applying the quality assurance procedures. The institution (or programme) undergoing the process is asked to do a self-assessment and report on how it meets the standards set or criteria identified by the quality assurance agency.

Different situations could probably be seen as stages in the development of a self-assessment capability:

- The first level is the provision of basic data and information regarding each of the standards or criteria;
- The second level is the analysis and evaluation; and
- The third level, which is what should be achieved, is to report on the level of the standards or criteria actually being met.

The capacity to prepare an evaluative self-assessment report (third level) is the desirable stage in the development of quality assurance capacity among institutions. However, it puts many institutions in a very difficult position. This is

because being able to do a good self-assessment is difficult and takes time. Capacity for it needs to be developed.

Under self-assessment, academics and administrators within the department/institution discuss the strengths and weaknesses in their units and identify causes for possible weaknesses based on a catalogue of either open questions or indicators to be collected. They usually decide for themselves on strategies to be used, aiming at quality improvement. This has the advantage of directly involving competent professionals who will be in charge of implementing reform action. In the long term, it helps set up a culture concerned with quality. It may also strengthen community spirit, which is often lacking in academia. While this is certainly desirable, and EQA systems should try to develop self assessment capabilities within HEIs, it must be recognized that it is not always possible for HEIs to carry out meaningful self-assessments. There are many reasons for this, ranging from the absence of adequate conditions (such as information systems, participation mechanisms, or a significant number of full-time staff members) to the lack of a culture of evaluation. This may reduce self-study to an uncritical description of some of the required issues. It is also not always realistic to expect a critical self-study when stakes are high (for instance, when the existence of an institution depends on the quality assurance outcomes, or sanctions may be incurred).

But the underlying assumption in insisting on self-assessment is that an institution that really understands itself — its strengths and weaknesses, its potentials and limitations — is likely to be more successful in carrying out its educational mission than one without such self-awareness. Self-assessment is thus seen as the backbone of the quality assurance process. It is through the self-assessment report that the external review team tries to understand and tentatively evaluate the institution or programme prior to the site visit.

2. External review

External review is the other critical element that has become an internationally accepted component of quality assurance. An expert taking part in the quality assurance process is generally described as an ‘external reviewer’. External reviewers share the language, categories, rationale and codes of the discipline or profession of the programme (or institution) being assessed, and are therefore peers to the people they are visiting. At the same time, they are external to the programme or the institution and therefore provide an outsider’s perspective that enriches their own. Many agencies use the terms ‘external peers’, ‘peer review’ and ‘peer assessment’ in this sense. In the discussions that follow, the term ‘external reviewers’ will be used. In the information given in the boxes, the terms used are those of the quality assurance agency concerned. You will come across many usages, such as auditors, assessors, peers and the like.

When the institution submits its self-assessment report, a team of external reviewers constituted by the quality assurance agency analyzes it and validates its claims, generally by visiting the institution. The visit by the review team gives the institution an opportunity to discuss and find ways of consolidating and improving the academic environment. Although the effectiveness of peer review in quality

assurance is still under debate in some countries, no better alternative has emerged in any of the quality assurance agencies.

The external review is expected to provide an outsider view and also, frequently, a validation of the conclusions drawn from the self-study. It uses professional judgment (national or international subject matter, experts or professionals, etc.). The review collects information by means of site visits and personal interviewing of internal and sometimes external stakeholders of the HEI. It is thus able to take account of the conditions under which certain results could be attained and to provide an external view.

3. Decision-making and reporting the outcome

Based on the report of the institution or programme and the recommendations of the review team, the agency takes the final decision. It may also make a recommendation for a decision that might be taken by a public authority (Ministry of Education). In all quality assurance mechanisms, there is an element of public disclosure of the outcome. However, the extent of such disclosure varies. It may go from disclosure of only the final outcome, as in the case of a typical accreditation, to disclosure of the full assessment report, as in the case of a typical audit. In general, in systems where the report is the only outcome, it is made public. In systems where there is a formal decision on accreditation status and a report, the extent of public disclosure varies. The outcome is generally valid for five to 10 years.

Decision-making may either simply require answering yes or no, or it may include supplementary elements such as 'based on certain conditions'. Frequently, accreditation also involves a supplementary grading system that is an add-on to a simple yes or no decision. It is common practice to then publish the decision, with or without the expert report prepared by the peer team.

When HEIs do not agree with the final decision of the quality assurance agency, there can be an appeal or grievance. *Module 3* will discuss the appeal mechanism in detail.

There is now wide consensus on three-stage model as a basic choice in EQA within the quality assurance community. However, it is a cumbersome and costly approach. When quality assurance focuses on higher education programmes in relatively big systems, it becomes increasingly important to look for alternative, lighter and less costly models of EQA. Such alternative models may reduce the emphasis on any one of the phases, such as by basing self-study on the provision of statistics, or by conducting peer review at a distance. Or, they could simply drop one of the stages. Creative thinking in this respect will be important if EQA systems are expected to cover all higher education programmes in systems of a certain size.

Box 1.. Adoption of the three-stage model of EQA in India

In India, the explicit focus on external quality assurance in higher education is of recent origin. In the eighties, it was felt that the unprecedented expansion of higher education in India during the last fifty years had rendered the built-in regulatory mechanisms inadequate. There were criticisms that the country had permitted the mushrooming of institutions of higher education with fancy programmes and substandard facilities and consequent dilution of standards. To address the issues of deterioration in quality, the National Policy on Education (1986) advocated the establishment of an independent national accreditation body. Consequently, the University Grants Commission (UGC) established the National Assessment and Accreditation Council (NAAC) as an autonomous body in September 1994.

Although the quality assurance experience of India seems to be just ten years old, it should be seen against the backdrop of the quality controls that the Indian higher education system had for the past 150 years. With regulatory and recognition mechanisms already in place, the objective of national accreditation is to lead institutions of higher education towards maximizing their potential for quality education, contrary to the minimum standards ensured by the regulatory mechanisms. This makes the Indian system of accreditation unique in many ways.

The limited resources available for improvement in quality of higher education and the size and complexity of the higher education system in India are other factors contributing to India's unique scenario of accreditation. With the third largest system of higher education in the world – 322 university level institutions and more than 16,000 colleges catering for 9 million direct and full-time students – developing a national quality assurance mechanism and making the process operational have been formidable tasks.

Since its inception in September 1994, the NAAC spent the first three to four years evolving its policies, principles and instruments. An analysis of the current practices of accrediting agencies of various countries reveals that most quality assurance systems have certain common elements – self evaluation and peer review – and NAAC adopted these core elements. To address the contextual considerations, the NAAC took a clear line in addressing aspects such as: its role in assessment (NAAC does not take a direct role in assessment), the nature of the assessment process (it is a voluntary process), the focus of assessment (improvement is the focus, contrary to accountability concerns observed in many countries), the linking of the assessment outcome to funding (not linked to basic funding), the unit of assessment (the institution is the unit of assessment), the policy on disclosure of the assessment report (a full assessment report and the institutional grade are made public), and the period of validity (five years). The way the NAAC firmed up its rationale and stand on these issues would be very useful to emerging quality assurance agencies. With this assessment model, a lot more emerged at the practical level when the assessment efforts proceeded.

Source: Stella, 2005.

Activity 1

Discuss the advantages and shortcomings of the three-stage model of quality assurance. Is it applied or would it be applicable to quality assurance of institutions and/or programmes of higher education in your country? For what reasons?

The options

Within the broad framework of the three generic stages discussed above, the quality assurance agencies choose among various options to serve different purposes. The most notable variations are found in the following process elements:

1. establishing initial conditions;
2. defining criteria;
3. self-assessment;
4. external review;
5. decision-making and reporting by the agency;
6. implications of the outcome; and
7. follow-up.

The various options under these aspects are discussed in the following pages.

1. Establishing initial conditions

Most quality assurance agencies clearly define their area of operation. For example, a quality assurance agency that operates in the higher education sector would consider only programmes that lead to the award of a degree or institutions that are legally recognized as degree-granting institutions. It would not consider programmes offered at the secondary education level. The delineation may not be very clear in the case of post-secondary non-degree programmes, such as diplomas and certificates, and the providers of such offerings. For example, there are quality assurance agencies that consider post-secondary diplomas, as in the case of the professional council for teacher education in India.

In addition to the condition defining the area of operation, a quality assurance agency has two options in considering institutions or programmes for quality assurance. It can consider any institution/programme that falls under its responsibility (or 'purview'), without a set of prerequisites. Or it might consider only those institutions or programmes that fulfil certain eligibility or initial conditions. This is closely related to another option: whether to make quality assurance a compulsory/mandatory or a voluntary option. Both are linked, and it is possible to think of them in the following way:

	Mandatory systems	Voluntary systems
All institutions/programmes	Very rare. Too expensive.	Mostly linked to improvement.
A specific set of institutions or programmes	Mostly linked to quality control of specific sets of institutions or programmes.	Mostly linked to eligibility for access to certain resources.

When systems operate on a voluntary basis, the two main options are the following:

- Option 1: Quality assurance is open to all institutions or programmes under its purview and the QAA sets no initial conditions.
- Option 2: Only those who satisfy certain eligibility criteria are considered for quality assurance.

The eligibility criteria need not be seen as a rigorous screening mechanism imposed by the quality assurance agencies to keep away some institutions. Normally, however, they are intended to ensure that only those institutions or programmes that have a fair chance of fulfilling the quality assurance requirements volunteer for it. They therefore save both institutions and programmes the frustration and expense of going through a process that is too demanding for them. In the USA, where HEIs own the regional accreditation agencies, the requirements of eligibility represent an additional set of standards that all member institutions have agreed to meet. The eligibility criteria may vary between the number of years an institution has existed, to evidence that it fulfils a set of standards. The Northwest Commission on Colleges and Universities of the USA (NWCCU), for instance, accredits institutions based on nine standards and related policies. It has also defined 20 essential Eligibility Requirements that must be met when evaluating an institution's application. These should not be confused with the standards for accreditation. Each Eligibility Requirement is an expected level of performance or pre-condition that relates to one of the standards and/or policy.

Box 2. Establishing initial conditions (USA)

Eligibility requirements for candidates for accreditation and accredited higher education institutions

The Northwest Commission on Colleges and Universities accepts applications from institutions that:

- are concerned predominantly with higher education;
- have characteristics commonly associated with higher education; and
- meet the Eligibility Requirements.

Each Eligibility Requirement is an expected level of performance or pre-condition.

1. AUTHORITY: The institution is authorized to operate and award degrees as a higher education institution, by the appropriate governmental organization, agency, or controlling board as required by the jurisdiction or state in which it operates.

2. MISSION AND GOALS: The institution's mission is clearly defined and adopted by its governing board(s) consistent with its legal authorization, and is appropriate to a degree-granting institution of higher education. The institution's purpose is to serve the educational interests of its students and its principal programs lead to formal degrees. It devotes all, or substantially all, of its gross income to support its educational mission and goals.

3. INSTITUTIONAL INTEGRITY: The institution is governed and administered with respect for the individual in a non-discriminatory manner while responding to the educational needs and legitimate claims of the constituencies it serves, as determined by its chartered purposes and accredited status.

4. GOVERNING BOARD: The institution has a functioning governing board responsible for the quality and integrity of the institution and for each unit within a multiple-unit institution to ensure that the institution's mission is being achieved. The governing board has at least five voting members, a majority of whom have no contractual, employment, or personal financial interest in the institution.

5. CHIEF EXECUTIVE OFFICER: The institution employs a chief executive officer who is appointed by the governing board and whose full-time responsibility is to the institution. In the instance of multiple-unit institutions, the governing board may delegate to its chief executive officer the authority to appoint the executive officer of an operationally separate institution. Neither the chief executive officer nor an executive officer may serve as the chair of the institution's governing board.

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(The other eligibility criteria relate to the following areas:

ADMINISTRATION,

FACULTY,

EDUCATIONAL PROGRAM,

GENERAL EDUCATION AND RELATED INSTRUCTION,

LIBRARY AND LEARNING RESOURCES,

ACADEMIC FREEDOM,

STUDENT ACHIEVEMENT,

ADMISSIONS,

PUBLIC INFORMATION,

FINANCIAL RESOURCES,

FINANCIAL ACCOUNTABILITY,

INSTITUTIONAL EFFECTIVENESS,

OPERATIONAL STATUS,

DISCLOSURE and

RELATIONSHIP WITH THE ACCREDITATION COMMISSION.

Source: Northwest Commission on Colleges and Universities web site.

How the initial conditions are established is also closely related to the nature of the process – whether it is mandatory or voluntary.

- Option 1: Mandatory Process

In some systems, quality assurance is mandatory and the quality assurance agency covers all institutions or programmes under its purview without applying any eligibility criteria.[1] This option is exercised mostly in systems in which the quality assurance outcome leads to direct decision-making. This could include, for example, decisions on access to certain substantial funds, recognition to function as an HEI, or approval to offer a programme.

Quality assurance can have different objectives. For some, the predominant objective is quality control. For others, it is public assurance of compliance with certain quality criteria or the accountability of institutions. For others, the main aim is helping institutions to self-improve. In most cases, the objective of quality assurance is a combination of all of the above. However, the emphasis on each varies in different countries, depending on the characteristics of the higher education system and the degree of accountability required by various authorities. In general, when quality assurance is meant as a quality control mechanism and thus refers to minimum standards, it is made mandatory, at least for the set of institutions or programmes that need quality control.

For example, in the UK, the Higher Education Funding Council of England (HEFCE) has the mandate to ensure that the teaching programmes it funds are of quality. The HEFCE contracts with the Quality Assurance Agency (QAA) of the UK to assess the teaching programmes of HEIs. Quality assessment therefore becomes compulsory for all programmes to get funding from the government. In Canada's Province of Ontario, universities can offer a graduate programme only if the Ontario Council for Graduate Studies (OCGS) gives clearance based on its appraisal or assessment. Although the OCGS calls its process 'voluntary', the link between the outcome of the process and the potential sanction gives the process a mandatory flavour. Indeed, all members of the OCGS have agreed to undergo the appraisal for initiating any graduate programme.

- Option 2: Voluntary Process

There are systems in which other mandatory mechanisms[2] ensure the threshold level of functioning of institutions. Consequently, quality assurance remains truly voluntary.

In most cases, the quality assurance agencies that go beyond regulatory purposes and aim primarily at HEI self-improvement have a voluntary approach to quality assurance. The self-improvement agenda takes the 'fitness-for-purpose' approach, where quality is equal to the extent to which objectives and goals are met. The implication of this is that the institutions are evaluated against their own goals and objectives, and not necessarily against objectives defined by external parties such as government. This ensures that quality assurance is carried out as an

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1. This does not mean that mandatory processes apply to all institutions or programmes within a system, but only to those that fall under the purview of a quality assurance agency. They may be private institutions only, or public ones only, or specific 'social interest' programmes such as medicine or teacher training.

2. These are usually other forms of quality assurance, which may coexist within a given system.

improvement process and that HEIs do not feel threatened. However, the incentives for a good quality assurance outcome and the indirect benefits to HEIs due to stakeholders using quality assurance outcomes for their decision-making might put pressure on the HEIs to undergo the quality assurance exercise. This can add a quasi-mandatory flavour to it. For example, a good quality assurance outcome would result in more prestige, better social recognition, good students and competent teachers.

The system of accreditation in the USA is an example of how influential the voluntary mechanism can be if it is implemented well. In the USA, the federal and state governments rely heavily on accreditation to allocate student aid funds. Many other federal funds, as well as billions of dollars in state funds, are allocated based on the accreditation status. State certification of professionals is heavily dependent on whether or not students have completed accredited programmes. All this happens in spite of accreditation being 'non-governmental voluntary self-regulation'.

In countries where HEIs are generally of both 'good' and relatively even quality, there is an emphasis on the quality improvement function having precedence. However, there are many systems where quality improvement itself is linked to a demand for accountability, even when quality assurance is voluntary.

Systems may also have a mixed approach. Thus, there may be mandatory quality assurance for certain programmes or institutions, and voluntary quality assurance for others. This is usually the case when both accountability and quality improvement are important. The main difference in these cases is the absence of sanctions applied to those institutions or programmes that voluntarily apply for accreditation.

Colombia is a good example of a system with both mandatory and voluntary mechanisms, for different purposes. As part of the reforms of the higher education system in Colombia, the system of accreditation of Colombian higher education institutions and programmes was created under the auspices of the National Council of Accreditation (CNA). The CNA performs two main functions in the area of quality assurance. First, it carries out quality assurance of a compulsory nature through a mechanism called 'previous accreditation'. In this mechanism, minimum standards in chosen study areas of particular social relevance are checked. Second, it undertakes a voluntary accreditation process of both undergraduate programmes and HEIs called 'Accreditation of Excellence'. This acknowledges high levels of quality through a standards-based approach. For more details, you may like to read the case study published by IIEP on Colombia's accreditation system (Revelo Revelo and Augusto Hernandéz, 2003).

In voluntary systems, HEIs themselves might be able to determine whether they have the potential for achieving accreditation. The published criteria therefore become implicit eligibility requirements. An institution that wishes to volunteer for assessment might send an application to the quality assurance agency with details of eligibility. After checking its eligibility to undergo assessment, preparation for assessment begins when the QAA accepts the letter of intent.

2. Defining criteria for quality assurance

The next significant stage for quality assurance is the definition of quality criteria. This is an essential step, and can be approached in several ways:

- establishment of a set of basic quantitative indicators. Some agencies use a set of quantitative indicators or standards/benchmarks that HEIs must meet. These generally correspond to systems that want to ensure compliance with a basic set of requirements in a relatively simple approach. These indicators or benchmarks are normally determined by the government. They serve as a baseline for operation or for the allocation of funds. The use of these indicators seems to provide an objective and relatively inexpensive way to measure compliance with threshold standards. However, they also tend to emphasize compliance with a formal requirement, without insisting on attention being paid to the more substantive elements involved in these indicators. A more developed and sophisticated way of doing this is to identify certain benchmarks, which then serve as standards for the system;
- the more common approach lies in a combination of standards and qualitative criteria. These may be developed by the agency but normally involve some degree of consultation with relevant stakeholders. They provide assurance that the standards of the discipline, the profession or institutional model are met. However, care should be taken not to unduly homogenize the programmes or institutions;
- the other approach is to develop standards that apply to an institution's or a programme's purposes. Quality criteria in this sense may refer mainly to 'fitness-for-purpose'. In many systems, however, there is an explicit statement about 'fitness of purpose'. This involves certain conditions that institutional purposes must fulfil if they are to be accepted as the standard for quality; and
- finally, some agencies review institutions or programmes against their own goals and objectives (the 'fitness for purpose' approach) alone. This approach lets HEIs develop according to their priorities and principles. However, it may prove insufficient to ensure quality across a wide diversity of institutions or programmes. This approach might be useful where 'fitness for purpose' and 'minimum threshold level of quality' are well-developed or ensured by other mechanisms that coexist in the system. Indeed, they would thus allow the quality assurance agency to focus on how well the HEIs or programmes achieve their stated purposes.

Quality assurance agencies must decide which of these types of criteria is most appropriate for the level of development of their higher education system. Applying a scheme with a strong external component to already-strong institutions will antagonize them and make them resistant to all quality assurance efforts. At the same time, applying a 'fitness-for-purpose' scheme to a set of very diverse and new institutions will not provide any orientation regarding quality. Moreover, it will probably not make any contribution towards enhanced quality within the system. On the other hand, agencies can, and usually do, combine these approaches in the way that is most suitable to the characteristics of the institutions in their higher education system. It is essential that the basis of quality assurance, in terms of the place given to an institution's own goals and the standards set by the quality

assurance agency, be made clear to the stakeholders prior to applying the quality assurance procedures. In some cases, the agency requires the institution to provide information on each standard or criterion. The agency then carries out its own assessment. But it is highly desirable that institutions themselves do a self-assessment on the basis of the required information, and report on how they meet the standards set or criteria identified by the quality assurance agencies.

In this same area, there is a second field for options. This refers to the stakeholders that the system is willing to involve in the definition of quality criteria. Here, it is recommended that one be as inclusive as the system will accept, since increased involvement will also increase the legitimacy and acceptance of the criteria or standards. Participation from academics, representatives of professional or disciplinary associations, employers or other external stakeholders may provide a significant contribution. However, it may also introduce corporate restraints that are only very loosely linked to quality.

3. Self-assessment

The agency must then determine the role it will assign to the self-assessment process. As was been mentioned above, the objective of most quality assurance systems is to help HEIs to conduct analytical, critical self-assessments. Unfortunately, this is not always possible. The quality assurance agency must be realistic and take into account actual conditions within the system.

- When higher education systems have become diversified and new providers have entered the field, it is usually necessary to establish quality assurance mechanisms that are closely linked to quality control. These mechanisms might make accurate, honest self-assessment reports quite unrealistic, since the stakes for HEIs are usually very high. Therefore, clearly identifying and acknowledging the weaknesses might be perceived as dangerous by HEIs. The self-assessment report would therefore probably be biased or, at least, subject to a strong cosmetic treatment. A thorough quality assurance agency will take this into account. It will therefore not expect HEIs to do more than to provide a good set of information on the fields related to the quality criteria the agency has decided to use.
- When HEIs have developed beyond this stage, it is possible to increase expectations regarding their self-assessment abilities. Still, it is usually very useful to provide accurate and clear orientation about the basic information needed to sustain quality judgments, and to define the criteria to be applied.
- In highly developed HE systems, where the 'fitness-for-purpose' model is used, HEIs will be able to carry out self-critical and analytical self-assessments. They will also be able to develop useful and effective improvement plans.

The point in making these distinctions is that quality assurance agencies should, with realistic expectations, work with a clear goal in mind. This should be to help HEIs become responsible for the quality of their work and the educational offerings

they provide to society. In emerging higher education systems, HEIs may need a lot of guidance from the quality assurance agency to prepare a meaningful self-assessment report.

In the initial phase of introducing EQA in a system, preparing the self-assessment report may pose a significant new challenge to HEIs (even to the 'good' ones). Over a period of time, HEIs might have developed reporting systems for other purposes. These may be totally different from what the self-assessment process requires. If HEIs are not helped to develop their capacity for conducting the self-assessment process, it might result in incomplete reporting. Usually the quality assurance agencies give guidelines to facilitate the HEIs in this process. There are considerable differences in the level of detail of the guidelines.

- Option 1: Providing brief guidelines

Some quality assurance agencies provide only brief guidelines as to how the self-assessment process could be conducted and how the self-assessment report could be organized. This happens mostly in systems where the tradition of quality assurance – internal or external – is well established and where the 'institutional goals and objectives' are the starting points. This is, for example, the case of some institutional audits. This provides a lot of flexibility to HEIs to present themselves in ways appropriate to their mission and goals, within the broad framework given by the quality assurance agency.

- Option 2: Providing a specific framework

When HEIs must adhere to more specific criteria, most quality assurance agencies will provide detailed guidelines and manuals. These might include a list of questions to be answered and tables to be presented with data in a particular way. Such specific frameworks can be more or less centred on quantitative data. In this approach, one added bonus for institutions is that it helps them to develop information systems. These may be used not only for supporting self-assessment, but also for management and institutional decision-making.

Most quality assurance agencies give guidelines about what is expected of a self-assessment report, to help HEIs appreciate the spirit of introspection. The fact that the self-assessment report is not to be a mere compilation of data on the achievements and functioning of the institution is emphasized by all quality assurance agencies. They also insist that the report must be analytical, evaluative and, hopefully, self-critical.

The guidelines on institutional preparations – brief or detailed – promote the participatory approach to ensure wide involvement of the campus community in preparing the report. You will find it useful to download the guidelines given by quality assurance agencies from their web sites and try a comparison. This will help you to choose the strategy to prepare the HEIs of your system for self-assessment. The guidelines given by two agencies are listed below. One provides only broad guidelines. The other specifically lists the type of information to be provided in the report. Based on this, the institution is expected to reflect further.

Box 3. Guiding HEIs to prepare for the self-assessment process (New Zealand and India)

Brief guidelines to HEIs: New Zealand

So as to provide the institutional context to the audit, the main document contains:

- a one-page history and current profile of the institution,
- an overview of the management and organisational structure, including an organisation chart (or equivalent),
- a brief overview of the institution's quality assurance arrangements and systems, embracing the scope of the audit, and set in the context of the institution's charter, profile/objectives and special characteristics.

Institutions are encouraged to use bullet points, diagrams and flowcharts as much as possible to reduce the size and enhance the legibility.

The main document may include appendices to the text which include data and factual information not available in other materials (such as annual reports), cross-referenced to, and within, the main document. The information might include items such as entry qualifications, non-completion rates, degree results, graduate employment data, 'stakeholder' satisfaction data, performance indicators and measures employed that relate to the scope of the audit. Appendices might indicate how this information is used in quality control and assurance processes within the institution, giving examples where possible. They can also include examples of the effectiveness in the operation of quality assurance systems and instances of particularly good practice. (www.aau.ac.nz)

9. Furnish the following details (in figures):

Books in the department library:
Journals/periodicals subscribed by the department:
Computers in the department:
Research projects completed during the last three years and their total outlay:
Ongoing research projects
Teachers who have attended national/international seminars during the last two years:
Teachers who have been resource persons at workshops/seminars during the last two years:

10. Details of the last two batches of students:

	Batch 1			Batch 2		
	UG	PG	Total	UG	PG	Total
Admitted to the programme						
Drop-outs						
Appeared for the final year exam						
Passed in the final exam						
Passed in first class						
University ranks, if any						

Guidelines on the self-analysis given in the manual:

…

Based on the data collected under the Format for Self-Study *(part-I)*, the institution should give an appraisal based on its own perception. The self-evaluation will form the substantial basis of the assessment to be made by NAAC's external assessors. It need not exceed about 10 pages and …

The section on the criterion-wise analysis (of the self-analysis) should contain the institution's perception of its own performance on the basis of the various criteria for assessment identified by the NAAC. The institution may also provide information on its notable achievements/ distinguishing features under each criterion. The data collected on the basis of each of the criteria should be so analyzed as to make it clear how expectations indicated under each criterion are matched by fulfillment. It may discuss any challenges that were identified in the functioning of the institution.

Source: National Assessment and Accreditation Council web site.

Quality assurance agencies also differ in the data they require from HEIs. Both qualitative and quantitative types of information may be required. The main emphasis in the self-assessment process is on qualitative analysis. Institutions may be asked to provide a number of quantitative data such as enrolment, drop out, average time of study and staff numbers. These data will be used mainly as evidence to validate the institutional claims made in the self-assessment report. But when the quality assurance is linked to approval or recognition outcomes, the emphasis may include both quantitative data and qualitative analysis of those data in order to ensure that the HEIs or programmes fulfil minimum requirements.

Some quality assurance agencies require the self-assessment report to be made public. They emphasize that the self-assessment reports should provide the stakeholders of higher education with valuable information on the institutions. Indeed, the institutions can learn from each other's procedures. Those countries that keep the self-assessment reports confidential argue that the institutions will be less willing to present self-critical and analytical reports if these are made public. The choice seems to depend on the national context, the purpose of quality assurance, the existence of a tradition of openness in the procedures, and competition among the institutions.

The two options given above – providing HEIs with brief guidelines and providing detailed guidelines and specific formats - are predominant. However, there are also other options in which the QAA helps the institution to organize the self-study process in the fashion that best suits its stage of development.

Activity 2

Browse the web sites of the following two quality assurance agencies and identify areas of flexibility (options) they give to the institutions for the self-study process:

- Middle States Commission on Higher Education, USA (www.msche.org)
- North Central Association of Colleges and Schools (NCA-HLC)

(www.northcentralassociation.org/)

The Higher Learning Commission, USA (www.ncahigherlearningcommission.org)

Linking up self-study with internal quality assurance systems and emphasizing the participatory process by involving the various constituents of the institution, are found in many approaches. Whatever approach is selected, broad areas are expected to be covered in the self-assessment process. *Module 4* will discuss those areas.

4. External review

Once the self-assessment reports are received from the HEIs or programmes, the next step is to organize the external review, including the choice of reviewers; the instructions they receive; and the training they need.

The role of external reviewers

As with the self-assessment report, it is important that the quality assurance agency decide on the role it expects external review to play.

- In quality assurance systems emphasizing quality control, external reviews are mainly an evaluative exercise. Reviewers are expected to analyze the data provided by the institution, as well as other relevant information. Their visit will necessarily involve an actual assessment of the situation of the institution and a judgment on the way in which the institution meets the agency's requirements. They will probably be appointed by the agency, after some consultation with the institution.
- In quality assurance systems emphasizing accountability or public assurance, the reviewers will have a relatively accurate report from the institution to base their work on. Therefore, their responsibility will be not only to validate the self-assessment report. They will also have to take their own decisions on the fulfilment of the agency's criteria or requirements.
- In quality assurance systems where improvement is the main concern, reviewers will probably focus more strongly on the validation of the self-assessment report and on the evaluation of the improvement plan presented by the institution or programme.

These considerations are essential when determining how to define who the external reviewers will be, how to select them, what kind of guidelines to provide for them, and how to train them.

Constituting the review team

The strength of EQA lies in identifying the competencies needed for the assessment responsibilities and in involving the right kind of experts with these competencies in the review teams. The quality assurance agencies identify experts who can act as external peers. The terms 'external reviewers' or 'external peers' have already been discussed in an earlier section of this module. It is important to note that they are peers in so far as they belong to the same discipline, or profession. They therefore share the same conceptual framework, the same language and categories of those visited. However, they are not necessarily peers in terms of the level of development of the programme or the institution.

In Australia and New Zealand, the quality assurance agencies have significantly extended the interpretation of 'peer'. The AUQA's *Audit manual,* (June 2006) explains the reasons for this as follows:

> "The term 'peer' means "a person or group with similar knowledge, skills, experience and status in the relevant context" (Woodhouse, 1994). In academia, it often means simply 'another academic', and more generally it often denotes someone in the same professional

field. However, this can engender public suspicion of peer review, and a feeling that peer review does not result in independent objective judgments, but that the reviewers are more inclined to conceal their colleagues' defects.

To avoid both this effect and the suspicion of this effect, AUQA has extended the interpretation of 'peer' and, in addition to people from within Australian universities, audit panels always include people from outside Australian academia who have knowledge of or expertise in some aspects of what is being reviewed, but who have applied it in a different context and/or with different underlying assumptions."

During the assessment visit, the reviewers interact with the various constituents of the institution, hold discussions, ask for relevant documents and make deductions. All this requires interpersonal abilities such as holding face-to-face interactions effectively, maintaining interpersonal relationships, and being objective and open-minded in taking decisions. Sometimes they may have to lead a sub-group, or work independently and assist the chairperson of the team. This can be done in a professional manner only if the reviewers have the ability to work in as well as to lead a small team. This also calls for the ability to work in tight time schedules and under strict deadlines, the ability to write clearly and effectively, and the ability to record evidence systematically. Care should also be taken to select only those experts who are known for their knowledge of a varied range of realities in higher education. Reviewers can be chosen to bring different types of expertise to a review team. This could include knowledge of management and finance, broad disciplinary knowledge, or knowledge of a specific aspect important to a programme or an HEI. Finally, they need to be known for their integrity in their judgment. It is not enough for the institution to have confidence in the expertise of the reviewers. Above all, it should be able to trust the reviewers.

To identify people with these abilities, QAAs usually rely heavily on nominations and informal ways of identifying the reviewers. They then provide them with orientation or training programmes. The following practices are observed among the agencies:

1. Reviewers are selected by nominations from HEIs. Some quality assurance agencies have developed guidelines for nominations. Within that framework, the HEIs can make nominations.
2. Reviewers are identified informally. After the first review, only those with good evaluations are asked to join new teams.
3. A formal roster or register is maintained of identified reviewers.
4. Applications are called for from those who might fit into the profile developed by the agency. Reviewers are selected after screening.
5. Potential reviewers are called for rigorous training programmes. Only those who clear the training programme with good evaluations are inducted into the review teams.
6. Review teams are constituted first. Each team is then provided with rigorous training, as in the case of Denmark.

Box 4. Selection of reviewers (HEQC, South Africa)

SPECIFIC REQUIREMENTS that must be met for an expert to be considered a candidate for joining the auditor preparation programme

1. Is willing and able to form independent and informed judgments:

   On the effectiveness of institutional quality assurance arrangements and related matters at higher education institutions.

   In areas that require specialist expertise that the person may have. These areas must be defined and mutually agreed on by the person and the HEQC.

2. Has a HE degree or post-graduate qualification. (For academic peers this should be at the level of a master's degree or higher, as specified below.)
3. The person is familiar with the basic principles and policies informing the HEQC's approach to audit, and is willing to work within that framework.
4. The person is able to assimilate and analyse large amounts of information.
5. The person has the breadth of perspective, knowledge and experience to make reliable evidence-based judgments in relation to the quality of QA arrangements at HE institutions.

The person is able to hold discussions at a high level about strategic and operational approaches in the context of higher education.

ADDITIONAL REQUIREMENTS TO BE MET BY EXPERTS WHO ARE ACADEMIC PEERS

1. They must be full-time staff members engaged in teaching, research and/ or academic administration..
2. Teaching and research experience and /or experience of academic administration of at least five years at higher education level.
3. A minimum of a master's degree or a higher qualification.
4. Knowledge and experience of some aspects of curriculum development.
5. Publications in recognised national and/ or international journals or books.
6. Have personal credibility with senior managers and head of institutions / HE providers OR with their peers in their disciplinary or administrative fields.
7. It is highly recommended that the persons

   Have more than five years experience of teaching, research and / or administration at a HEI.

   Have prior involvement with HEQC/ CHE (Council of Higher Education) or related processes.

   Have been external examiners at HE levels.

   Have knowledge and experience of specific fields and systems: e.g., academic planning, students' services, etc.

Source: Council on Higher Education web site.

While selecting external reviewers, the quality assurance agency must consider many points. These could include, for example, the provision being reviewed and the focus of the review. Depending on these considerations, the agency may need generalists, specialists or a mix of both.

- Option 1: Reviewers as specialists

In the strict sense of the term they are academic professionals from within the academic field being evaluated. This narrow definition of 'academic peers' or 'specialists' is most often used in disciplinary evaluations. It may also be used if programme evaluations focus primarily on the academic content of the programme.

- Option 2: Reviewers as generalists

Quality assurance agencies that undertake quality assurance of the institution as a whole look for reviewers who understand and appreciate the institutional context. They involve experts who, although accomplished in a special field or discipline, can serve as 'generalists'. These reviewers are called generalists in the sense that they may not be used as subject specialists. However, they may be specialists in other aspects of higher education or organizational operations, such as finance and management.

Most quality assurance agencies involve only those who can be considered as 'peers' - either subject specialists or generalists in the sense discussed above. Depending on the nature of the process, suggestions to involve other stakeholders like the government, funding agencies, students, employers and the public can emerge during academic interactions. Some quality assurance agencies involve a student or faculty from the institution or programme to be quality assured or a member of the local community as an observer. Programme accreditation of professional areas of studies may involve students or practitioners of the profession and institutional accreditation may involve external stakeholders such as employers. Thus, the purpose of quality assurance determines the definition of what a 'peer' is, and accordingly how the reviewers are chosen.

The qualifications and talents of the people who constitute the review teams are critical to the credibility of the whole process. Nonetheless, the professionalism with which the process is planned and implemented by the quality assurance agency is of equal importance to the success of the peer team. Even the most highly qualified team can be thwarted in its work if the agency is not clear in its expectations of the team. To address these concerns, many quality assurance agencies have established various safeguards and protocols for the selection of the right experts and for training them. Some of these involve very elaborate and rigorous training programmes. Others consist of simple briefings before the review begins. More on the training and briefing will be discussed in *Module 3*. While some agencies pay nominal fees for the reviewers when they join the review teams, others will provide no remuneration for the services as reviewers. However, the experience of participating in review teams is seen as professionally enriching and as a commitment to the national higher education system.

The quality assurance agency must constitute the team from the pool of experts, balancing many considerations. The composition and size of the peer team might

depend on the nature of the unit to be quality assured, its size, clientele or funding, etc. There is no magic number for the size of the team. However, it should be big enough to have reviewers who can bring the necessary background to understand the provision being reviewed and be able to spend adequate time on assessing it. It should be noted that it is not possible for a single reviewer to be acquainted with all aspects of the functioning of an HEI or offering of a programme. Keeping this in mind, the agency should ensure a team composition that will result in a good collective team assessment. The aggregate of team skills would bring more fairness to assessment as a result of agreement between multiple points of view.

To maximize the outcome of collective team assessment, quality assurance agencies may like to consider three important aspects: i) academic and administrative expertise of relevance to the assessment visit; ii) competencies of the reviewers such as report-writing and leading interactions; and iii) personal traits that are essential to enhance teamwork such as the ability to work in groups and willingness to listen to others. The agency will need subject specialists for subject-based or programme-based assessments. However, for institutional assessment, it needs reviewers who understand the broader areas of institutional functioning. Other than these considerations, there are two options for constituting the review team.

- Option 1: In-country reviewers

Most quality assurance agencies choose reviewers from within the country. This helps the team to understand the local context. However, it is not always a feasible option. This can be because the size of the higher education system is too small (and therefore links between eligible external reviewers and local academics are too strong); because there are no trained academics who can credibly act as external reviewers; or because, for different reasons, local academics will not be credible enough for HEIs. In these situations, it may be necessary to consider integrating international members in the external review team.

- Option 2: International members in the review team

With many regional initiatives for co-operation among quality assurance agencies coming to the forefront, involvement of international reviewers is seen as a healthy practice to ensure the international comparability and acceptance of the assessment procedures. International presence also brings a new perspective to a country's quality assurance processes and improves its professionalism.

We will discuss this aspect further in *Module 3*.

Once the choice of reviewers is made, quality assurance agencies must check whether the reviewers have any conflict of interest with the institution to be assessed. They may be experts known for their integrity. However, to ensure and assure objectivity, some quality assurance agencies require them to certify that they have no involvement with the proposed institution, directly or indirectly through any close relatives, in the past or at present, as either an employee or a member of any official body as a consultant or a graduate. Here again, there are two options:

- Option 1: HEIs are consulted about the review team

Consultation may take place at different levels. There are agencies where the pool or registry of reviewers consists of nominations from the HEIs themselves. In such cases, the quality assurance agency must necessarily choose reviewers from this pool of nominations. In some systems, the quality assurance agency checks with the HEI to be assessed for any objection it might have regarding any of the reviewers selected. When objections are reasonable, the quality assurance agency may make changes to the team composition. However, it would reserve the right to make final decisions about the team composition. Consulting the institutions in constituting the team is considered good practice, in order to uphold the spirit of quality assurance as an exercise in partnership with mutual trust.

- Option 2: HEIs have no say in the constitution of the review team

In some cases, especially when the focus of quality assurance is quality control, the agency decides who the external reviewers will be, without consulting with the institution. This may be necessary, particularly when quality assurance mechanisms are being introduced and when the assessment of institutions or programmes is mainly intended to ensure compliance with threshold standards. However, it is highly recommended that institutions be consulted. Indeed, the recommendations of external reviewers may play an important role in the improvement of the institution or programme. If the institution or programme does not trust the reviewers, or considers them not to be reliable, for whatever reason, their opinions will be dismissed. An important part of their contribution will therefore be lost.

Box 5. Constituting the review team

Ireland

The National Council for Educational Awards (NCEA), Ireland is a government agency responsible for non-university educational awards and course approval. It was established in 1972 and was given statutory powers and responsibilities by the National Council for Educational Awards Act, 1979. The current NCEA system of external quality assessment has five main elements: Institutional Reviews; Full course Evaluations; Programmatic Reviews; External Examiners; and National Quality Reviews.

For Institutional Reviews, the NCEA has a set of guidelines to determine the composition of the institutional Review Group. This group usually consists of:

1. A Chairman;
2. The head of peer institution;
3. Two senior academics, one of whom should, where possible, be from outside of Ireland;
4. Two from outside the educational sector;
5. one from the industry/services sector; one from the professions;
6. The Director of the NCEA, or a nominee

An NCEA professional staff member with responsibility for drafting the report also accompanies the group. The personnel to be selected are agreed with the institution. The institution may also propose names of suitable assessors.

Source: Hämäläinen *et al.*, 2001.

Philippines

The accrediting association selects members of the team from the pool of trained accreditors. An accreditor must have undergone a two to three-day training course to acquire full knowledge of the processes of accreditation. Prospective accreditors are generally drawn from the core of faculty and officials of higher education institutions. Recognised officials in higher education generally head the team of accreditors of, usually five members, each member being assigned a particular aspect of the self-study report.

Source: Arcelo, 2003.

After ensuring that the review team has no conflict of interest with the HEI or programme to be assessed, the quality assurance agency normally consults the HEI to fix the dates for the site visit.

Conducting the review (site visit)

The quality assurance agency must clearly define its expectations regarding the role of the external reviewers. As mentioned above, they can approach their work from different perspectives. It is the responsibility of the quality assurance agency to set the appropriate guidelines and inform both the institutions and programmes of the conditions for the external review.

This includes spelling out the responsibilities of both the quality assurance agency and the institution; the obligations of the reviewers regarding their work (such as adherence to the agency's criteria, and strict commitment to the confidentiality of all that they learn in the process); the activities they will carry out, and the reports they must make to the agency and the institution. QAAs normally prepare detailed guidelines for the external reviewers. These also help to ensure consistency in the work carried out by different teams.

The reviewers are most often involved in the quality assurance process from the point when the self-assessment reports are submitted to the quality assurance agency. In most cases, the reviewers are responsible for the preparation of the site visit, in the sense that they decide who they want to meet and what themes to discuss with the different stakeholders and committees at the institution.

The team visits the institution on mutually convenient days for validation of the self-assessment report and to carry out the responsibilities assigned by the quality assurance agency. The duration of the visit may depend on the size of the unit to be assessed and the level of assessment. Within a generic schedule, the schedule is modified to suit individual institutions. During the site visit, keeping in mind the assessment framework of the quality assurance agency, the review team

undertakes three major activities. These include visiting (most or selected) units of the institution, interacting with various constituencies of the institution, and checking documentary evidence. The visit to units and interactions enhance the team's knowledge of the institution.

In planning the site visit there are two major options:

- Option 1: The review team or the chair of the team is involved in planning the visit.

Some quality assurance agencies require the chair of the team to have pre-visit discussions with the institution to be visited. To discuss the schedule of the visit and agree on what would be appropriate to understand the institution or the programme in its right context, the chair may make a preliminary visit to the institution. The co-ordinating officer from the quality assurance agency may or may not accompany the chair.

- Option 2: The quality assurance agency makes all the arrangements for the visit.

In most quality assurance agencies, the direct communication between the review team and the institution starts only when the visit begins. Until then all communications of the institution are with the quality assurance agency. Any communication to the review team is made through the quality assurance agency or with a copy marked to the agency. It is the staff of the quality assurance agency who plan the schedule in consultation with the institution and the chair of the review team.

As always, there is a third option, in which the organization of the visit is carried out by the quality assurance agency, but under the instructions of the review team. Once the reviewers have read the self-assessment report, they communicate to the agency about the people they want to meet with, the sites they want to visit and the evidence they want to verify.

Box 6. Conducting the review (site visit)

Hungary

The Visiting Committee (VC) chairman makes recommendations for the composition of the committee and the Plenum of the Hungarian Accreditation Committee (HAC) approves these recommendations. The chairman and members of the VC then receive their letters of commission, which are signed by the chairman of HAC. The VC is usually comprised of three to five experts per faculty; these experts are distinguished and highly qualified persons, who are familiar with the academic field of the faculty.

The chairman of the VC pays an instructional 'pre-visit' to the institution. At this meeting the head of the institution and the chairman of the VC agree on the date and schedule of the three-day visit. This visit comprises the following: meetings with the heads of institutions and faculties; visits to departments, libraries and laboratories; assisting in lectures and seminars; meeting students. The VC then prepares the visit.

Members receive the accreditation guidelines, annexes and the first volume of the application for accreditation prepared by the institution (this copy is sent to HAC). They usually have one week to examine these documents. The chairman of the VC then assembles the members in order to prepare the visit and discuss the distribution of tasks (graduate level programme evaluation, faculty and institutional level tasks).

The three-day visit is carried out according to a previously accepted schedule and distribution of tasks. The VC chairman may organize a final meeting among all members of the VC to discuss their opinions. The chairman of the VC prepares a report on the visit.

Source: Kozma, 2003: 76-77.

Philippines

The accreditors' task commences with a meeting with both officials and members of the institutional self-study team to discuss the objectives of their visit, their activities, the role of each member and the expectation from the counterpart of the self-study team.

After the meeting, each accreditor may visit any part of the campus of the higher education institution, without prior notice, to conduct inquiries (library, accounting, laboratory, guidance and counseling office, etc.). The accreditor may also proceed to unannounced interviews of students, faculty, officials and other personnel in the institution or observe ongoing classes. Accreditors may also select some students at random to answer certain questions with respect to the philosophy, mission and/or vision of the institution and other aspects of accreditation.

On the third day of the visit, the accreditors will conduct an executive session with the officials and members of the institutional self-study team to discuss their major findings across all areas covered by the self-study report. During this session, there may be some clarification as to some aspects of the findings.

Upon completion of the institutional visit, the accrediting team submits a report to the officials and board of trustees of the association. The board will deliberate on the report and take appropriate action.

Source: Arcelo, 2003: 76-77.

After the visit or towards the end of the visit, the reviewers are responsible for the writing of the assessment report, sometimes with support from the quality assurance agency.

Reporting strategy for the review team

Often one member of the review team is made responsible for the drafting of the report in close co-operation with the other members of the team. Sometimes a representative of the quality assurance agency functions as secretary or convenor of the team and takes up the responsibility of preparing the report. There are therefore two major options:

- Option 1: The quality assurance agency has a direct role in drafting the report.

The quality assurance agency staff member who joins the review team as convenor, co-ordinator or member-secretary is responsible for the team's report, in close consultation with the members of the review team.

The quality assurance agency chooses this option according to its policy. In particular, it considers the size of the national systems of higher education, the size of the quality assurance agency, the amount of quality assurance work to be done and, consequently, whether it is possible to send a staff member to each of the review teams. For example, in the Australian Universities Quality Agency (AUQA), the report writing of the audit is the responsibility of the AUQA staff member who joins the audit team. This is possible since the AUQA must cover only 51 entities over a period of five years. The Academic Audit Unit (AAU) of New Zealand also follows the same pattern. In Canada, the College Education Evaluation Commission (CEEC) takes an active role in its assessment exercises. There, the teams are headed by one of the commissioners of the commission.

Box 7. Reporting strategy

Role of agency staff in report writing (Australia)

During the Audit Visit, particular responsibilities of the AUQA staff member include:

- Assisting the Chair in keeping to (or amending, as necessary) the planned programme;
- Liaising with the auditee's nominated contact person throughout the Visit (including seeking further information or requesting additional meetings, as necessary);
- Assisting the Chair to ensure that all panel members fully understand the agreed agenda for each session;
- Supervising the work of the Audit Secretary who is employed by the AUQA to record a transcript of the interviews and discussions;
- Recording succinct summaries and notes of issues for clarification, re-consideration and reporting;

- In conjunction with the Chair, leading private panel meetings to ensure that they are an opportunity for panel members to discuss emerging issues;
- In conjunction with the Chair, guiding panel members towards decisions or conclusions which are appropriate and carefully considered;
- Advising as necessary on appropriate actions and conclusions for the panel to take or reach;
- Ensuring that administrative and logistical arrangements for the Visit proceed smoothly.

Following the Audit Visit, the AUQA staff member has responsibility for producing the Audit Report, in consultation with other panel members, the auditee and the AUQA Board, as appropriate. After the publication of the report, the staff member oversees the process of gaining feedback from other panel members and the auditee; is involved in the selection of items to be invited for consideration for the AUQA Good Practice Database; and reports on the audit to the AUQA Board. The AUQA staff member is also subsequently involved in considering the auditee's Action Plan and Progress Report.

Source: Australian Universities Quality Agency web site.

- Option 2: The quality assurance agency does not take a direct role

The review team chair or one of its members is responsible for preparing the report. In this case, a staff member of the agency may not join the team at all in any capacity. Even if an agency staff member joins the team as a co-ordinator, the policy of the agency may be such that the staff member does not take an active role in drafting the report. This is the option followed by the National Assessment and Accreditation Council (NAAC) in India. With 16,000 HEIs to be covered under institutional accreditation, where the accreditation outcome is valid for 5 years, the agency obviously cannot possibly take a direct role in report writing. The Chair of the review team has overall responsibility for doing so. Moreover, there is a heavy reliance on all the team members sharing this responsibility.

This is the option followed in some of the regional accrediting agencies of the USA. While the Higher Learning Commission of the North Central Association of Colleges and Schools does not send its staff to join the review team, the Accrediting Council for Independent Colleges and Schools (ACICS) of the USA sends a staff to join the team. However, the staff do not have a role in the assessment decisions. The ACICS describes the role of the agency staff as below:

> "During the visit, the primary role of the staff is to interpret the ACICS Accreditation Criteria. Staff will provide team members with guidance in understanding and applying the Criteria and may assist team members with gathering information as time provides. Staff is not to be assigned sole responsibility for the writing of any section of the team report with the exception of the publications section. Staff also will ensure that all areas of the institution's operation are properly reviewed by the team members." (ACICS, 2006)

This option also makes it very clear both to the HEIs and the external reviewers that responsibility for evaluation rests with the external review team and not with the staff of the agency. In most cases, staff members are experts on procedural

aspects. However, they do not fulfil the requirements to act as peers. Even if in some cases agency staff may provide secretarial, clerical or procedural support to a team, the team remains responsible for the report's contents.

Generally, the peer team shares the highlights of the assessment orally with the institution, in a concluding meeting of the site visit (called 'exit meeting'). This may be followed by a detailed report or summary of conclusions from the quality assurance agency seeking institutional feedback. Some agencies restrict reviewers to a reporting role. Based on the analysis of the self-assessment report and during the site visit, the reviewers observe and assess in structured formats. They provide evidence of what they saw during the visit, but do not make judgments or recommendations. Instead, the agency has its own mechanism to assess the reviewers' observations and reach a decision. This might help in reducing inter-team variance, since the agency will be able to weigh the evidence presented for a number of similar institutions or programmes. It might be criticized as playing a very direct intrusive role in the process where peer assessment is central.

5. Decision-making and reporting by the agency

When the quality assurance process focuses only on the assessment of an institution or programme, without any decision regarding compliance with standards or criteria, the report from the external review team may be the last stage. In some cases, the quality assurance agency may wish to provide its own report. On the other hand, when quality assurance involves a decision about the degree to which an institution or programme meets predefined standards or criteria, it is necessary for the quality assurance agency or its deliberative body to make a decision.

Reporting by the quality assurance agency

The agency's quality assurance outcome is a crucial element in the eventual impact of the quality assurance processes. The major options found among quality assurance agencies in reporting the quality assurance outcomes are as below:

- Option 1: Declaration of a formal status only

When the purpose of quality assurance is to certify whether an institution (or programme) qualifies for a certain status such as recognition as an institution of higher learning, or approval of its degree-granting programmes or eligibility for public funding, the outcome may be a simple yes/no or accredited/not accredited. This is the outcome of most licensing and accreditation models.

When to opt for the 'two-point scale outcome'

When quality assurance is expected to check a threshold level of quality or when the quality assurance outcome is used for simple decisions, the two-point or 'binary' scale would serve the purpose. This scale (accredited/not accredited) is generally found in systems in which quality assurance serves the purpose of regulation, approval or recognition. It states whether the institution or programme

meets basic conditions, but is unable to recognize different levels of quality among those that do.

To the public, this would mean an assurance of external evaluation of the institution or programme. It would also mean that the institution or programme conforms to general expectations in higher education or a professional field. Moreover, it reduces the need for government intervention in the operation of the institution and provides students with an assurance that its educational activities have been found to be acceptable and therefore meet their needs. In higher education systems with credit-based courses, this outcome would help credit transfer between institutions when appropriate. If that is all quality assurance is expected to achieve, the binary scale is a good option. That is how accreditation typically began in professional areas of studies. To be licensed to practice in some professions, one must complete an accredited programme. These are simple decisions where attainment of or potential to maintain a certain level of quality becomes the deciding factor.

This might not often be the case. Indeed, QAAs may come across many different expectations to be fulfilled. In these cases, the other options would deserve consideration.

- Option 2: Outcome on a multi-point scale

If the quality assurance exercise asks: "How good are your outputs?", the typical outcome of such an exercise would be a multi-point grade, i.e. a grade composed of the collection of points obtained on multiple criteria. This could be numerical, literal or descriptive. In the UK, the Research Assessment Exercise (RAE) of the Higher Education Funding Council (HEFCE) falls under this category. HEFCE is now in the fourth round of RAE. For the RAE 2008, the Council is providing the following details to HEIs about the proposed outcome. The outcome can be described by five levels defined in the *Box 8*. The method has been undergoing revisions. However, assessment – indicating the levels of quality – is central to the methodology.

The Institutional Review by the UK's QAA also comes closer to this approach. Reports of the Institutional Review contain a statement of the degree of confidence that the Agency considers may reasonably be placed in the continuing effectiveness of the institution's quality assurance arrangements. In the Academic Review, the QAA follows a similar strategy. However, it insists that judgments are not to be seen as 'graded'. All three examples are given in the box below.

Box 8. Reporting the quality assurance outcome (UK)

Research Assessment Exercise (RAE)

Definitions of quality levels:

Four star	Quality that is world-leading in terms of originality, significance and rigour.
Three star	Quality that is internationally excellent in terms of originality, significance and rigour but which nonetheless falls short of the highest standards of excellence.
Two star	Quality that is recognized internationally in terms of originality, significance and rigour.
One star	Quality that is recognized nationally in terms of originality, significance and rigour.
Unclassified	Quality that falls below the standard of nationally recognized work. Or work which does not meet the published definition of research for the purposes of this assessment.

Academic review

Judgments are made on the academic standards in each subject under scrutiny. Where a group of subjects is aggregated so as to be reviewed together, a separate judgment is made on each to enable strengths and weaknesses in individual subjects to be identified. These judgments focus on whether intended learning outcomes are appropriate and whether the outcomes achieved are consistent with the intentions. The judgments are not graded; either the intended outcomes are appropriate and are achieved, or they are not. Reviewers will make their judgment accordingly, that there can be confidence, or not, in the standards of the provision. If standards are being achieved, but reviewers have concerns about the ability of the institution to maintain them into the future, a judgment of 'limited confidence' may be made. If a failure to achieve standards has occurred in programmes at one level only, and there is confidence in standards at other levels, the failing level will be identified separately.

Where an expression of 'limited confidence' in academic standards is made, academic reviewers must identify areas where improvement is needed. The subject provider may then be asked to prepare an improvement strategy, implementation of which is monitored by the Agency. If a judgment is made that standards are not being achieved, there will be a further, formal review by the Agency within one calendar year. If standards continue not to be achieved, funding is potentially at risk.

Institutional review

A statement that confidence cannot be placed in institutional arrangements for the management of quality and standards should be a rare occurrence. Such a statement would be likely to result from a number of matters requiring 'essential' action, the combined effect of which is to render ineffective the quality assurance arrangements as a whole.

A statement that limited confidence can be placed in institutional arrangements for the management of quality and standards will normally be made if there is one, or a small number of matters requiring 'essential' action, and it is clear that the failings could readily be put right. Such a statement might also result if there were no 'essential' action points, but a large number of matters where action is 'advisable'. The judgment will depend on the nature and weight of the 'advisable' action points.

In all other cases a statement will be made that overall confidence can be placed in institutional quality assurance systems. The term 'overall confidence' does not necessarily mean that there are no matters where improvement could be made; but minor weaknesses only should not place an institution in a lower category. The narrative of the report will discuss strengths and weaknesses, and will also identify exemplary features of the arrangements.

Source: Quality Assurance Agency web site.

When to opt for the 'multi-point scale outcome'

This would be suitable if the quality assurance agency wishes to focus on outcomes and levels of attainment. For example, if the quality assurance outcome is to be used by the government or funding body to decide on funding levels, the two-point scale outcome may not be enough. In such cases, the agency might opt for assessment where the levels of quality are expressed on a multi-point scale. Large systems with a lot of variation in quality might opt for the multi-point outcome.

A different way of looking at a 'multi-point scale' is to use a binary decision (accredited/not accredited), but specify different durations for the accredited status. This may be a good way of dealing with diverse institutions. If they are perceived to be reliable and able to ensure the quality of their work, accreditation may last for a longer period of time (5-10 years). If, on the other hand, they need closer supervision, they may be accredited for as little as two years.

- Option 3: Accreditation as a multi-level process

In addition to qualifying the outcome of the accreditation process with a numerical or letter grade, some systems also consider this outcome to be a process which HEIs must undergo. After a first accreditation, the institution or programme may obtain a certain status. This will be enhanced when the unit of analysis is re-accredited. This is the case, for instance, in the US and in the Philippines. Different accreditation levels correspond to shorter or longer durations of the accreditation status as well as different types of privileges. Such a system is put in place in countries with highly divergent levels of quality. However, they also provide an extra incentive for institutions to strive for higher levels of quality.

- Option 4: Report only

If the quality assurance exercise is clearly focused on how an institution monitors its academic standards and assures and enhances the quality of its offerings, it might result in a report, as in the case of a typical audit. The objectives of the institution or programme are taken as the starting point for the audit. The audit

report explains how successful the institution is in trying to meet its stated objectives by putting appropriate processes in place.

When to opt for the 'report only'

When the focus of quality assurance is the processes of the institution or programme that ensure the quality of its provisions, the quality assurance agency might opt for the audit approach that results in a report. Due to the emphasis on the institution or programme's internal processes, this method might be more useful for mature systems with well-established internal processes. Systems that intend to strengthen their internal processes for quality may also benefit from this.

- Option 5: Combination of the above

Choosing an option for the reporting strategy is not as simple and straightforward as it may seem from the presentation above. It is a much more complex process that calls for attention to many factors. But each of the options given above is based on many different considerations. Moreover, the distinction between these options is not very sharp. An agency may use a combination of them, often taking the binary scale of accredited/not accredited as the base and adding one or more dimensions to the outcome.

For example, the outcome of the quality assurance procedure of the *Badan Akreditasi Nasional - Perguruan Tinggi* (BAN-PT) in Indonesia is a combination of options 1 and 2. The BAN-PT makes a formal accreditation decision along with a grade on a four-point scale – grade A to grade D. Grade A indicates that the course of study conforms to international standards; grade B indicates that the course is of good quality; grade C indicates that the course fulfils minimal requirements; and grade D means that it is not accredited. In India, the Accreditation Board (AB) of the Indian Council of Agriculture Research (ICAR) gives the accreditation outcome on a three-point scale - accreditation, provisional accreditation, or no accreditation.

When to opt for a 'combination of options'

One of the main reasons for variation in the combinations is probably the difference in the national educational systems. These variations may be in terms of the structure, policies, developmental stage and other players in higher education. This can lead to a difference in the focus or objective of the quality assurance mechanism. The combination also depends on international developments.

For example, the National Assessment and Accreditation Council (NAAC) in India opted for a nine-point scale and a report for its quality assurance outcome. It also makes a decision regarding accreditation status, due to the size of the higher education system. With more than 16,000 HEIs that vary greatly in quality, the quality assurance outcome required more classifications. In the same country, other quality assurance bodies follow different combinations of quality assurance processes, for different reasons. The National Board of Accreditation (NBA) of the All India Council for Technical Education (AICTE) accredits engineering and related programmes of study. Initially, it awarded grades to accredited programmes on a three-point scale – A, B and C. It has revised the grading pattern since January 2003 to a two-point system, i.e. Accredited and Not Accredited. This was done so

that it would fall in line with other accrediting bodies at the international level, especially the signatories of the Washington Accord that ensures the mobility of engineers across borders. It also attaches periods of validity to its accreditation outcome that vary between three and five years. This adds an element of assessment about the levels of quality.

The accrediting agencies of the Philippines claim that "Due to the variations of quality, it was decided to offer accreditation at four different levels, each entailing specific benefits both in terms of administrative autonomy and access to incentive funds. The higher the level of accreditation, the more the autonomy granted to the institution" (Arcelo, 2003).

The reporting strategy is thus influenced by a combination of the national context, the overall objective of quality assurance, and international developments.

The above discussions lead to the following observations:

1. Accreditation on a two-point scale – accredited/not-accredited – is useful for simple decision-making. It is used as one of the eligibility criteria or as a pre-requisite for being given a certain status.
2. For large systems with wide variation in quality, expressing the outcome on a multi-point scale or as a multi-level process labels (i.e. expressing different levels of accreditation attained) may be useful. It is also useful in instances where the quality assurance outcome is used for different levels of sanctions such as implementing a funding formula or providing differential incentives based on quality.
3. A report alone may be useful when quality assurance looks into the processes that assure quality. It may also be useful for more mature systems with well-established internal processes. Systems that intend to strengthen their internal processes for quality may also benefit from this.
4. An appropriate combination of the options discussed above must be selected depending on the national context and the purposes which quality assurance must serve within that context.

Activity 3

Which combination of report and grading system would be appropriate to your context?

The report of the quality assurance exercise summarizes the conclusions and recommendations based on self-assessment and the site visit. But there are considerable national variations as to how the conclusions and recommendations are formulated. Some reports present only the results of the analysis, i.e. the judgment of the experts in the form of conclusions or recommendations. In other reports, the expert judgments are presented in the relevant analytical context, together with the reason why a specific recommendation is offered. Supporting documents are also made available.

On a national basis, the choices concerning the form of the reports may reflect traditional attitudes concerning the need for documentation of summary judgments. The scope and level of the target groups of the reports are also significant. The report that will reach and impress potential students, employers or other stakeholders in higher education must necessarily be different to the report targeted only at the academic community.

Decision-making by the agency

The report or recommendation by the review team is an important input to the quality assurance decisions of the agency. While some agencies consider only the review team's report, others consider relevant information such as the self-assessment report by the institution. If one raises the questions 'What inputs are taken into consideration regarding decisions on quality assurance?' and 'Who makes the final decision?', there are at least three options for each issue.

- Option 1: External review team's recommendation only

The assumption here is that the team has analyzed all relevant information. Their recommendation is therefore sufficient as a basis for decision-making.

- Option 2: External review team's report and self-assessment report of the institution or programme

The assumption here is that while the external review report is an important input, the report prepared by the institution is also important enough to be considered on its own by the quality assurance agency or its board.

- Option 3: External review team's report, self-assessment report and other relevant information

The quality assurance agency may consider other relevant information such as general data on the institution or the programme. It may also consider data regarding other institutions or programmes that may help put the decision in perspective.

- Option 4: External review team's report, self-assessment report, other relevant information and institutional response

This is a variation of option 3, in which the institution's response is given specific consideration in the decision-making process. Here, institutional response is more

than just feedback about the site visit and the review team. Before the decision is made, the institution may be asked to respond on certain aspects that would feed into the final decision. The case of the North West Commission on Colleges and Universities (NWCCU) is given below.

Box 9. Decision-making by the quality assurance agency (USA)

In arriving at a decision on candidacy, the Commission:

- reviews the self-study and other institutional documents;
- reviews the report of the evaluation committee;
- reviews the institution's written response to the evaluation committee report, if submitted;
- discusses with the chair of the evaluation committee the report and confidential recommendation regarding candidacy; and
- meets with the institution's chief executive officer and invites him or her to make a statement on behalf of the institution.

Source: Northwest Commission on Colleges and Universities web site.

Who takes the final quality assurance decision? This depends on the role the reviewers are expected to play in the quality assurance process – whether the reviewers can only advise the agency or whether they can also make judgments about quality.

- Option 1: Review team makes recommendations and the agency approves

Most agencies rely heavily on peer assessment. Some of them rely on it to the extent that the review team's recommendations become the only consideration for the agency's decision. By the end of the site visit, the review team may be expected to share orally all or a part of its assessment about the institution (or programme). It may also be expected to submit a written report of its recommendations to the agency. In the normal course of the events, if there are no complaints about the objectivity of the team or the conduct of the team visit (and unless the agency has great misgivings), the recommendations of the review team are approved by the agency and declared as the final outcome. There may be mechanisms for appeal and further review. However, the review team's assessment is the basis for the agency's decision-making. If the quality assurance agency follows this model, it is essential that the reviewers be competent enough to take appropriate decisions. This becomes all the more crucial in large systems of higher education. It is also essential in quality assurance models in which agency staff do not join the site visit.

- Option 2: Review team recommends and the agency decides

This is a slight variation of option 1. Although the agency relies heavily on peer assessment, it considers a few other factors to ensure that the review has been carried out according to the agency's guidelines. For example, the agency may look

into the review report, the self-assessment report and the feedback from the institution about the conduct of the visit. After satisfying itself that the review has adhered to the quality assurance framework, the agency makes a final decision.

- Option 3: Review team makes observations only

Some agencies require reviewers only to advise the agency. Or, they may be requested to report to the agency their impressions of the institution (or programme) with reference to the assessment framework. The governing body or a body appointed for this purpose considers the observations as one of the inputs in order to decide on the outcome. *Box 9* describes the inputs that the agency might consider appropriate to include. For example, in many accrediting bodies in the USA, the institution routinely appears before the accrediting commission to argue its case.

- Option 4: Board of the agency makes a recommendation based on the review report, but public authority makes a decision. This is the case of HAC in Hungary.

Once decisions are made, the next issue at hand is to announce the decisions. Public disclosure vs. confidentiality of the decisions, and how much or what part of the evaluation is a public document, are contentious issues in many countries. There are valid arguments in favour of either strategy. However, the well-accepted trend is for systems to move towards public disclosure of more information to the relevant stakeholders.

The arguments against public disclosure of quality assurance reports are that the reports are first and foremost directed towards the institutions. Many institutions fear that a critical report might have a negative impact on areas such as student enrolment or external grants for teaching and research. However, one positive argument for public reporting is that the reports contain valuable information on the quality of higher education. This information is potentially highly relevant for the general public. Another positive argument is that public reporting might actually further commit the institutions to improving on weaknesses in order to avoid negative consequences of the reviews.

The following options regarding public disclosure of the quality assurance outcome may be noted:

- Option 1: No public disclosure other than the accreditation or assessment decision.

Only the final outcome, in terms of the accreditation decision or the assessment result on a multi-point scale, may be made public. If there is a report, it may be for the institution only.

- Option 2: Limited public disclosure

Only relevant parts of the report or the executive summary are for public disclosure. Parts of the report may be made available to relevant stakeholders, such as the government.

- Option 3: Full public disclosure

All details are publicly disclosed, including the report.

It should be noted that publishing the outcomes of the quality assurance process and making more information available to the public are seen as good practices of the quality assurance agencies. Nevertheless, it is important to balance the level of public disclosure with the effectiveness of the process, taking into account national and local conditions.

As quality assurance agencies come together and strengthen their co-operation, they agree to adhere to good practices. The International Network of Quality Assurance Agencies in Higher Education (INQAAHE) and the European Association for Quality Assurance in higher education (ENQA) apply a public disclosure policy to many of its members. The INQAAHE does not include publication of the reports in its guidelines. However, it expects quality assurance agencies to report openly on institutional review decisions and make the outcomes of the evaluation public in an appropriate way. The content of the public report may differ depending on the cultural context. It will also depend on the requirements set for accountability. Moreover, developments may push quality assurance agencies to publish reports. For example, in Ireland the institutional review report has not been a public document to date. Where necessary, relevant parts of the report were sent to organizations with a role in implementing the recommendations. This practice will soon be changed, since the guidelines developed by the ENQA for the member countries of the European Union emphasize report publication.

6. Implications of outcome

The outcome of quality assurance may be used by stakeholders for various purposes. Depending on the ownership, clientele and leaning towards accountability or improvement, the quality assurance outcome has different implications. For example, in Hungary, the Hungarian Accreditation Committee (HAC) does the following:

- approves the operation of both degree and doctoral programmes and decides whether HEIs can run doctoral training programmes in given academic and/or artistic fields;
- regularly evaluates the level of quality in education and academic activities in individual institutions (institutional accreditation) – at least once every eight years;
- give its opinion on degree programmes and establishes the institutions' habilitation [authorization to teach] and doctoral regulations;
- informs the Minister of Education of its opinion on the creation/accreditation of new institutions and faculties, on the basis of their teaching/research capacity; and
- gives its opinion on the operation of foreign HEIs in Hungary.

Various implications such as permission to offer programmes and creation of new faculties are obviously based on the HAC's recommendation. Of the various implications, the linking of the quality assurance outcome to funding has been an

area of considerable debate. Some argue that a direct funding link is necessary if quality assurance is to have significant impact on the quality of education. Others argue that the quality assurance outcome should be linked to indirect benefits and incentives.

- Option 1: Quality assurance outcome is linked to direct funding

In systems where the accountability concern dominates, the quality assurance outcome may be linked to funding. This is the case of BAN-PT of Indonesia. Some argue that any link to funding works well only if the funding is substantial. There may also be fears that a substantial funding link would only promote a compliance culture and improvement in areas that would fetch more funding. It may therefore not ensure that quality would improve. In many developing countries, the argument against the direct link to funding is that it may not do justice to increasing access to higher education, institutional diversity and traditional goals. If a positive outcome is necessary to get funding, quality assurance may end up being a very discriminatory process, making it impossible for poor institutions to get any funding to overcome their shortcomings and actually improve. Many who do not support linking substantial funding with the quality assurance outcome do recognize that if a small percentage of funding is linked to the quality assurance outcome, it will have a high indicative value but few negative consequences. This leads to the next option.

- Option 2: Quality assurance outcome is linked to incentives

Rewarding excellence and linking a positive quality assurance outcome to funding for at least specific schemes has been accepted as a useful factor to motivate institutions. The Mongolian government's decision to give student scholarships only to accredited institutions is a good example. In the US, where accreditation is voluntary, millions of dollars of federal funding and student aid funds are linked to accreditation. This makes accreditation a quasi-compulsory process.

- Option 3: Quality assurance outcome is linked to levels of autonomy

The example of the Philippines was discussed above (see pages 26, 28 and 36).

- Option 4: Quality assurance outcome provides prestige only

This is true of many voluntary systems, such as those in France and India.

In countries where the quality assurance outcome is not linked to direct funding, institutions may not experience funding sanctions or rewards immediately. However, the recommendations of the quality assurance agency might feed into shaping the funding polices and improvement plans of the government. The influence need not be linear, in the sense that it need not result in good HEIs getting more funding and low quality ones getting less. If the cause of low quality is traced to an improvement plan that deserves the support of the government, it might even result in the government allocating more for improvement purposes.

Box 10. Funding links to quality assurance outcomes

Hungary

"Accreditation decisions are directly related to funding. Only those study programmes that have been accredited and recommended for final ministerial approval by the Higher Education Research Council receive state funding. Since accreditation is the requirement for granting diplomas/degrees, programmes without accreditation may not be advertised on the self-funding 'market' of students, employers and parents."

Source: Kozma, 2003: 64.

The UK

We (Higher Education Funding Council of England) are the single largest provider to HEIs of public funds for research. … Our funding of research in 2004-05 is 1,081 million pounds and is allocated under two main headings:

Quality-related research (QR) funding – with reference to both the quality and volume of research activity (1,061.4 million)

Capability funding (17.5 million)….

The quality of research is assessed in the research Assessment Exercise (RAE). The last RAE was conducted in 2001 and has informed funding decisions from 2002-03. In the last RAE, each institution was awarded a rating on a scale of 1 to 5* (five star), for the quality of its research in each unit of assessment in which it was active. Ratings 1, 2, 3b and 3a attract no funding, while a rating of 5* attracts over three times as much funding as a rating of 4 for the same volume of research activity. As a result, our funding of research is highly selective.

Source: HEFCE, 2004.

7. Follow-up

After the disclosure of the quality assurance outcome, it is expected that the institution will take whatever actions are necessary in relation to the recommendations or issues noted in the review. Funding links, incentives and sanctions may be a motivating factor for many HEIs to act on the review outcomes. However, in well-developed systems it is the professional commitment of the HEIs that leads to actions and improvement. It is worth considering three options for the follow-up strategy.

- Option 1: Follow-up procedures are not included in the evaluation process

The responsibility and formal role of the evaluation agency end with the publication of the evaluation report. The institutions are responsible for planning and implementing follow-up measures. Depending on the nature of the recommendations, the ministries of education or other stakeholders may react to the evaluations.

Box 11. Follow-up not included in the quality assurance procedure (Norway)

The mandates for the external committees will demand that the final reports give the institutions advice on what measures may be introduced in order to maintain qualities, improve weakness and meet challenges.

It is however not the one of the operative tasks of the MNC to see to it that the institutions act on the insights and the advice that come out of the evaluations. The responsibility still rests with the Ministry and with the institutions themselves. But the NNC will ask to be informed about follow-up measures and their results.

Judging from what happened after the evaluation of the university of Tromso, the Ministry will ask the institutions to draft action plans within half a year after the external report is presented to them and to discuss it with the Ministry.

Source: Hämäläinen *et al*., 2001.

- Option 2: Follow-up is part of the quality assurance procedure

Quality assurance agencies may have built-in follow-up procedures with varying levels of rigour. Some may require binding action to be taken by the HEIs. In other cases, it may be a 'soft touch' based on the professional commitment that can be expected of the HEIs.

In the UK, the Institutional Review report of QAA identifies both good practice and matters where the Agency believes that improvement action should be taken. Action points are categorized as 'essential', 'advisable' or 'desirable'. In the case of any action point rated as 'essential', the Agency will normally seek from the institution an account of action taken to address the matter 12 months after the report's publication.

In Sweden, the University Chancellor and project manager of the national evaluation agency visit the institution together one year after the finalization of the audit. There, they discuss with management the follow-up initiatives that have been taken. In the Netherlands, the Inspectorate of the Ministry of Education is responsible for a meta-evaluation of the quality of the evaluation procedures. The Inspectorate may advise the Ministry to reduce or stop funding accordingly if an institution fails to provide sufficient follow-up. In Denmark, a ministerial order provides the guidelines for follow-up and the responsibilities of institutions, government and the advisory system. In Australia, the HEIs audited by AUQA are required to make public a 'progress report' 18 months approximately after the audit.

Box 12. Follow-up built in the quality assurance procedure (Australia)

Approximately 18 months after of the publication of the audit report, AUQA writes to auditees to request a Progress Report to AUQA against the recommendations and affirmations. The Progress Report must be made publicly available on the auditee's own web site. AUQA will not attempt to 'audit' the report, but will focus on whether it clearly shows what the auditee has done in response to the recommendations and affirmations. If AUQA is not satisfied that the response is clear in this respect, it will request the auditee to improve the public response as necessary. When the Progress Report has been mounted on the auditee's web site, the auditee will inform AUQA of the URL and AUQA will provide a link to the Progress Report from the AUQA web site.

Process:

- The auditee's Progress Report is received by AUQA
- If possible, the Report is considered by the AUQA staff member on the original panel, and by the panel chair
- AUQA does not attempt to 'audit' the Report, but focuses on whether it clearly shows what the auditee has done in response to the recommendations
- AUQA applies the test: 'Could an informed person, reading the recommendation or affirmation and the response, understand what had been done and whether it addressed the issue?'
- If AUQA is not satisfied that the response is clear in this respect, the Executive Director writes to the CEO of the auditee advising that the Report is unsatisfactory, the reasons, a date for rectification, and a willingness to discuss the issues.
- If the Progress Report is not rectified, the AUQA Executive Director reports to the AUQA Board, the Chair of the AUQA Board will write to the CEO of the auditee (with a copy to the relevant minister) and a consultation process will be set up, using a consultation group.
- The consultation group is two members from the auditee (selected by the auditee), one AUQA staff member, and one AUQA auditor (selected by AUQA)
- Result of the consultation are reported to AUQA Board for final determination
- The determination may be a mutually agreed course of action, that is then publicized with the Progress Report on the web site
- The determination may be a lack of agreement and therefore a report to the minister, possibly recommending a sanction.
- Satisfactory Progress Reports are posted on the auditee's web site, with a link from the AUQA web site.

Source: AUQA, 2006.

- Option 3: This is the same as option 1, with a twist

Follow-up is the responsibility of the institution. However, as accreditation decisions have a limited duration, follow-up is a strong consideration at the re-accreditation stage. This option links the quality assurance cycles in various ways. The agency may choose to check on earlier recommendations and base its re-accreditation decisions on how the institution or programme has acted on those recommendations. More specifically, it may decide to concentrate on weaknesses identified in the earlier quality assurance cycle and how the institution or programme has fixed those weaknesses.

Activity 5

Browse the web sites of a few quality assurance agencies and find out the re-accreditation procedures, if available. Check whether there is a link between action taken on first review and the subsequent review. The web site of the NAAC (www.naac-india.com) may be of interest to you. It shows how NAAC has linked 'action taken on the assessment report' and the re-accreditation strategy.

As more and more formal evaluation systems are established, the issue of appropriate and efficient follow-up procedures is becoming more critical. It could be argued that follow-up should be added to the essential methodological principles to be taken into account when establishing evaluation procedures.

Lessons learnt

Lesson 1: Diversities in quality assurance practices are due to differences in the national contexts

Higher education systems and policies in different countries, as well as the development stage that they have reached, are diverse. Consequently, quality assurance practices are also diverse. They may be in many different combinations to serve different purposes. More specifically, based on the national contexts and other considerations, quality assurance agencies have varying policies for dealing with certain aspects. These may include, among others: establishing initial conditions; defining criteria; guiding self-assessment; conducting external assessment; providing training for quality assurance; decision–making; and reporting on the quality assurance outcome and follow-up. A choice must be made according to the national context and the purposes the quality assurance mechanism is expected to achieve.

Lesson 2: The various practices of quality assurance have some common elements – self-study and peer review being the predominant commonalities

While practices differ, there is agreement on the essentials. This ensures the soundness of the quality assurance framework. Most quality assurance exercises require the institution (or programme) to provide the relevant information against pre-determined, well-publicized criteria. In most cases, this is also accompanied by a self-study. This is expected to provide a critical analysis of the information. While this is desirable, it is not always possible. However, it should always be an objective in view, at least for the mid or long-term. The information thus provided by the institution or programme is reviewed by an external team of experts. The quality assurance agencies use the recommendation or evaluation of the external review team in a variety of ways to make quality assurance decisions. Obviously, the various options have different implications. Analyzing the various options and the purposes they serve is essential in order to choose a model that is appropriate to a specific context.

Lesson 3: Selection and training of external peers must be conducted with care, given their important role in applying the quality model

Peer teams must be put together to represent a wide range of expertise. This is particularly important when accreditation is conducted at the institutional level. More and more countries involve professionals in peer teams. It is also good practice to establish a database of experts, especially in large higher education systems. Such a database should include those who took part in a peer team visit and proved to be adequate assessors. It is also good practice to provide peers with an external site-visit manual in order to conduct the visits and data collection in a transparent way. The level of professional autonomy that peers enjoy in their judgment varies from one system to the other. In some systems, peers tend to be rather free in their qualitative judgment. In others, experts must use a predefined quantitative grid.

Lesson 4: Reporting systems vary from a two-point scale to a detailed report with a multi-point grade

Choosing an option for reporting the quality assurance outcome is a complex process that calls for attention to many factors. The major options vary from declaring only the formal status ('accredited' or 'not accredited') to multi-point or multi-process outcomes. When quality assurance is expected to check a threshold level of quality, the binary scale outcome serves the purpose. It is generally found in systems where quality assurance is used for regulation, approval or recognition. It states whether the institution or programme meets basic conditions, but is unable to recognize different levels of quality among those that do. Large systems with a lot of variation in quality might opt for a multi-point outcome. A different way of looking at a 'multi-point scale' is to use a binary decision (accredited/not accredited), but to specify different durations for the accredited status.

The outcome can also lead to a multi-level process. After a first accreditation, the institution or programme may obtain a certain status, which will be enhanced when the unit of analysis is re-accredited. Such a system is put in place in countries with highly divergent levels of quality. It also provides a supplementary incentive for institutions to strive for higher levels of quality. Yet another option is to give only a report. If the quality assurance exercise is clearly focused on the processes by which an institution monitors its own academic standards and acts to assure and enhance the quality of its offerings, it might result in a report only, as in the case of a typical audit.

Each of the options is based on one of many different considerations that affect the choice. It should be noted that the distinctions between these options are not very sharp. An agency may have a combination of them, often taking the binary scale of accredited/not accredited as the base and adding one or more dimensions to the outcome. An appropriate combination of the above three options must be selected depending on the national context and the purposes of quality assurance within that context.

Lesson 5: Quality assurance outcomes are handled in a number of ways and the implications vary from country to country

The report or recommendation by the peer team is an important input to the quality assurance decisions of the agency. Depending on the role peers are expected to play in the quality assurance process - whether they can only advise the agency or can also make judgments about quality – there are various implications for the peer team report. Some quality assurance agencies only check whether the peer team visit was conducted fairly and accept the peer team's report as the final decision. In other cases, the governing body, a public authority such as the Ministry of Education or a body appointed for this purpose considers the observations and other relevant inputs to decide on the outcome.

When the quality assurance outcome is decided, making all or the relevant part of it available to the public is seen as a good practice of quality assurance agencies. Nevertheless, it is important to balance the level of public disclosure with the effectiveness of the process, taking into account national and local conditions.

Of the various implications to the quality assurance outcome, the link to funding has been an area of considerable debate. Some argue that a direct funding link is necessary if quality assurance is to have a significant impact on the quality of education. Others argue that the quality assurance outcome should be linked only to indirect benefits and incentives.

Quality assurance agencies vary in their approach to the follow-up after quality assurance. In many cases, the responsibility and formal role of the evaluation agency end with the publication of the evaluation report. The institutions are responsible for planning and implementing follow-up measures. Depending on the nature of the recommendations, the ministries of education or other stakeholders may react to the evaluations. In the case of some QAAs, rigorous follow-up is part of the quality assurance procedure. There are also agencies where follow-up is the responsibility of the institution. However, as accreditation decisions have a limited duration, follow-up is a strong consideration at the re-accreditation stage. The agency may choose to check on earlier recommendations and base its re-accreditation decision on how the institution or programme has acted on those recommendations. More specifically, it may decide to concentrate on weaknesses identified in the earlier quality assurance cycle and how the institution or programme has fixed those weaknesses.

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Web resources

Australian Universities Quality Agency (AUQA) web site: www.auqa.edu.au

Council on Higher Education (CHE) web site, South Africa: www.che.ac.za

Council on Higher Education Accreditation (CHEA) web site, USA: www.chea.org

European Association for Quality Assurance in Higher Education web site: www.enqa.org

Higher Education Funding Council of England (HEFCE) web site, UK: www.hefce.ac.uk

Hong Kong Council for Academic Accreditation (HKCAA) web site: www.hkcaa.edu.hk

International Network for Quality Assurance Agencies in Higher Education (INQAAHE) web site: www.inqaahe.nl

Lembaga Akreditasi Negara (LAN) web site, Malaysia: www.lan.gov.my

Middle States Commission on Higher Education web site, USA: www.msche.org

National Assessment and Accreditation Council (NAAC) web site, India: www.naac-india.com

National Council for Higher Education Accreditation (NCHEA) web site, Mongolia: www.accmon.mn

New Zealand Universities Academic Audit Unit (AAU) web site: www.aau.ac.nz,

North Central Association of Colleges and Schools (NCA-HLC) web site, USA:

www.northcentralassociation.org

North Central Association of Colleges and Schools (NCA-HLC), Higher Learning Commission web site, USA: www.ncahigherlearningcommission.org

Northwest Commission on Colleges and Universities (NWCCU) web site: www.nwccu.org

Quality Assurance Agency (QAA) web site, UK: www.qaa.ac.uk

The modules on External quality assurance: options for higher education managers

Quality assurance has become a topical issue on the higher education policy agenda. More and more countries are questioning their existing structures and are introducing new mechanisms and structures for external quality assurance. They seek to ensure minimum educational standards across diversified higher education systems and to provide a lever for continuous quality improvement.

The present material was developed by UNESCO's International Institute for Educational Planning (IIEP). It targets decision-makers and managers in government departments such as ministries of education, buffer organizations of higher education and quality assurance agencies whose task it is to design or develop the national framework for quality assurance. These modules should provide support for their decisions on external quality assurance systems, while discussing options that have been tried out successfully in a variety of countries.

The modules are based on the outcomes of two IIEP case study research projects, one on "methodological and organizational options in accreditation systems" and another on "regulation and quality assurance of cross-border providers of higher education".

Accessible to all, the modules are designed to be used in various learning situations, from independent study to face-to-face training. They can be accessed on the IIEP web site www.unesco.org/iiep, and will be revised as needed. Users are encouraged to send their comments and suggestions.

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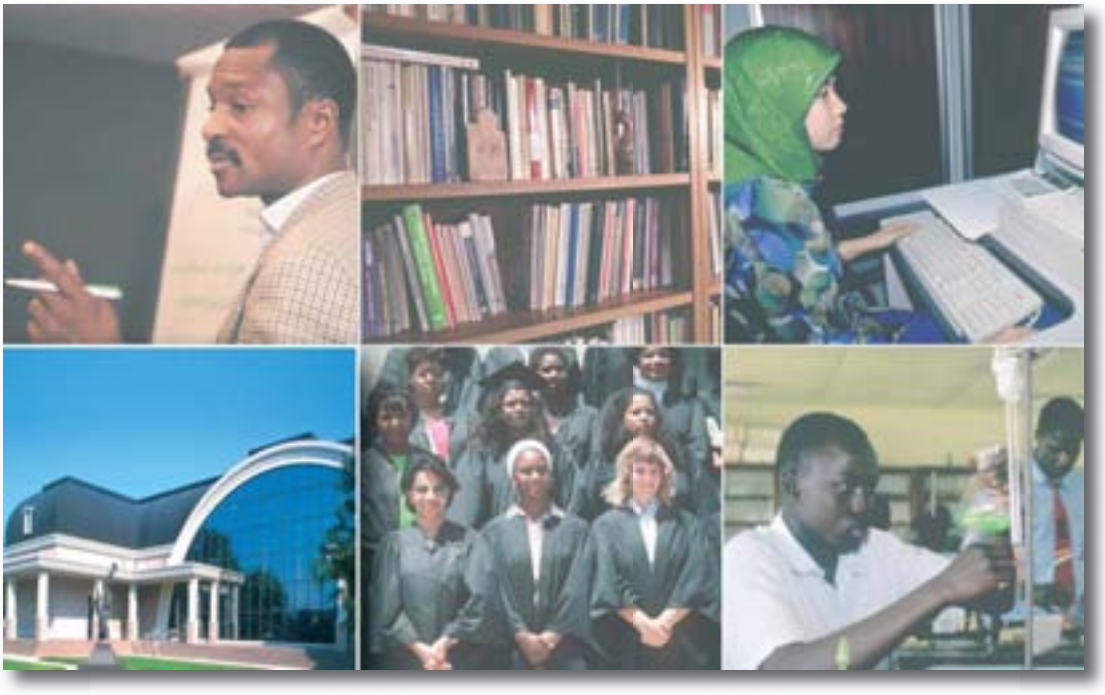
External quality assurance:
options for higher education managers

Module 3

Setting up and developing the quality assurance agency



United Nations
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External quality assurance: options for higher education managers

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Module 3

SETTING UP AND DEVELOPING THE QUALITY ASSURANCE AGENCY

Objectives of the module 4

Questions for reflection 4

Introduction 5

Establishing the quality assurance agency 7

1. Affiliation of the quality assurance agency 7
2. Size of the higher education system 12

Functions to be performed 14

1. Determining the range, scope and general orientation of the quality assurance scheme to be applied 15
2. Preparation of methodology 16
3. Management of processes 17
4. Decision-making and reporting on the outcome 26
5. Capacity building 29

Structure of the agency 32

1. Governance and organizational structure 32
2. Necessary resources 36
3. Information system 39

Credibility and accountability of the agency 41

1. Credibility of the quality assurance process 41
2. Accountability measures 42

Lessons learnt 47

References and further reading 49

List of abbreviations

AAC	Austrian Accreditation Council
AACCUP	Accrediting Agency of Chartered Colleges and Universities of the Philippines
AAU	New Zealand Universities Academic Audit Unit
ACQUIN	Accreditation, Certification and Quality Assurance Institute
APENS	Association of Professional Engineers of Nova Scotia
AQAS	Agency for Quality Assurance and Accreditation of Study Programs
AQIP	Academic Quality Improvement Program
AUQA	Australian Universities Quality Agency
BAN-PT	*Badan Akreditasi Nasional - Perguruan Tinggi* (National Accreditation Board for Higher Education, Indonesia)
CHE	Council of Higher Education (South Africa)
CNA	National Council for Accreditation (Colombia)
COU	Council of Ontario Universities
COU	Council of Ontario Universities
CPUO	Committee of Presidents of the Universities of Ontario
DETC	Distance Education and Training Council (USA)
DEC	Distance Education Council (India)
ENQA	European Association for Quality Assurance in Higher Education
FIBAA	Foundation for International Business Administration Accreditation
HAC	Hungarian Accreditation Committee
HEA	Higher Education Act
HEI	Higher Education Institution
HEQC	Higher Education Quality Committee (South Africa)
HKCAA	Hong Kong Council for Academic Accreditation
IAUP	International Association of University Presidents
ICFES	*Instituto Colombiano Para el Fomento de la Educación Superior*
INQAAHE	International Network for Quality Assurance Agencies in Higher Education
NAAC	National Assessment and Accreditation Council (India)
NIAD-UE	National Institution for Academic Degrees and University Evaluation (Japan)
OCGS	Ontario Council on Graduate Studies
PAASCU	Philippine Accrediting Association of Schools, Colleges and Universities
QAA	Quality Assurance Agency
UGC	University Grants Committee (Hong Kong)

List of boxes

Box 1 Affiliation of the quality assurance agencies (Hungary, Canada, the Philippines and Egypt) 8

Box 2 Association of Professional Engineers of Nova Scotia (APENS) 11

Box 3 The Danish Evaluation Institute (EVA) 18

Box 4 Roles and responsibilities of external reviewers (UK) 20

Box 5 Policy on conflict of interest (Australia, India) 22

Box 6 Visit schedule (India) 24

Box 7 The Appeals Committee (South Africa, Switzerland) 28

Box 8 Capacity building among HEIs (about AQIP) 30

Box 9 Governance structure of QAAs (Ireland, Chile) 33

Box 10 Responsibilities of the governing body: Australian Universities Quality Agency (AUQA) 35

Box 11 Resources needed for the QAA: USA and Colombia 38

Box 12 Accountability of accreditors: Council for Higher Education Accreditation (CHEA) 44

Box 13 Guidelines of good practice (INQAAHE) 44

Box 14 Standards and guidelines for quality assurance in the European higher education area (ENQA) 45

Objectives of the module

This module will:

- describe the options in institutional affiliation for establishing a quality assurance structure;
- explain the basic functions of a quality assurance agency and how such an agency may support the quality assurance process;
- discuss the resources and competencies needed for the above functions;
- highlight the options related to management and organizational structuring; and
- analyze the various mechanisms that ensure accountability of the quality assurance agency.

On completion of this module, you are expected to be able to do the following:

- appreciate the options related to the institutional affiliation of a quality assurance agency;
- understand the generic functions to be performed by a quality assurance agency;
- identify the resources and competencies required to establish and run a quality assurance agency in your national context;
- make a realistic projection of the management and organizational structure that would be effective in your national context; and
- analyze the direct and indirect accountability measures that operate in quality assurance.

Questions for reflection

What are the implications of the different institutional affiliations for the functioning of a quality assurance agency?

Is there a relationship between the priority functions to be performed by the quality assurance agency in my country and its organizational set-up?

What resources and competencies are required to perform those functions? Are they available in my country?

What type of management and organizational structure would be effective in my country?

What linkages exist between institutional affiliation and mechanisms for accountability?

Module 3

SETTING UP AND DEVELOPING THE QUALITY ASSURANCE AGENCY

Introduction

This module highlights existing options in establishing, managing, organizing and controlling a quality assurance agency and the major functions it has to perform. These options have been derived from a large variety of country experiences.

Quality assurance agencies (QAAs) may be established by the government, by HEIs or by private groups. With the exception of a few agencies owned by the HEIs themselves or established with the major support of the HEIs, most of the recent QAAs have been developed as governmental initiatives. These agencies clearly serve government functions. In some countries, professional accreditation has developed as a mechanism independent of the government and HEIs. The independent nature of the quality assurance agency with respect to quality assurance decisions is seen as desirable. This is true irrespective of the affiliation of the QAAs and even in the case of government initiatives. Careful consideration of the national context in terms of size of the system to be covered, scope of the quality assurance and level of its involvement is necessary.

Quality assurance agencies shoulder the responsibility for defining the scope of quality assurance; preparing the methodology, usually in consultation with academia and the various stakeholders; and performing the quality assurance functions involving the external reviewers. They also prepare various guidelines and handbooks to facilitate all those involved in the process and offer workshops for the HEIs and training for reviewers. They carry out these functions with a small and competent core staff, relying on external reviewers generally drawn from the academic community. Depending on factors such as the size of the higher education system to be covered by the quality assurance agency and the level of involvement in the quality assurance process, the agency requires adequate human and financial resources to support its functions.

Various safeguards and protocols are followed to establish the objectivity and reliability of the quality assurance process and its outcome. These assure the credibility of the agency to stakeholders. In general, QAAs are accountable to one or more major stakeholders of higher education. These include governments, HEIs, the academic community and the public at large. Depending on the institutional affiliation, built-in mechanisms make the quality assurance agency accountable to its governing body. There are also various other voluntary measures, such as joining quality networks and doing a meta-evaluation, that ensure the accountability of the agency.

The different approaches followed in establishing QAAs, the functions they perform, the support structure they need to perform these functions and the way in which they ensure the credibility of the process and its outcome will be discussed with examples and case studies in this module.

Modules 1 and *2* have given a broad background about the quality assurance scenario and the options available to the QAA to implement a quality assurance process. *Module 3* will pay specific attention to the actual establishment and functioning of the support structure (agency) and the various steps in its operation as a QAA. These issues are discussed in four sections. The first section looks at establishing the agency; the second considers the basic functions to be performed and the resources needed to perform them once it is established; the third section examines the management and organizational structure that supports the functions; and the final section deals with the accountability of the agency.

Establishing the quality assurance agency

It is necessary to carefully consider the context in which the quality assurance agency operates. This includes the developmental stage of the higher education system to be covered, its size, the scope of quality assurance, the objectives it will serve and the level of involvement of the quality assurance agency (QAA). Most of these factors were discussed in the earlier modules. Two more aspects need to be mentioned here: affiliation of the QAA; and the size of the system to be covered.

1. Affiliation of the quality assurance agency

The QAA may be established in different ways, with or without the support of the government or HEIs. There are four major options for the affiliation of QAAs:

- governmental;
- quasi-governmental (or parastatal) or autonomous public agency;
- owned by the HEIs ; or
- owned by private groups.

To some extent, the affiliation of the QAA has implications for autonomy in its functioning. Although most QAAs – including those established and funded by their governments - claim some level of autonomy from government, non-governmental bodies can obviously claim the greatest independence in decision-making. In other cases, government officials such as a representative from the Ministry of Education either sit on or chair the national bodies. This is the case of the Accreditation Committee of Cambodia (ACC). When owned by the HEIs, quality assurance depends on the voluntary acceptance of the procedures by the member institutions. Moreover, the HEIs shape the nature and the framework of the quality assurance process. This 'bottom-up' approach is found in the USA, where accreditation agencies are non-governmental membership agencies of HEIs. In this case, the issue is the level of independence the agency can claim with regard to the HEIs themselves.

Affiliation of the QAA can be a highly debated issue in relation to the purpose of quality assurance. Political and ideological concerns sometimes make it difficult to see the actual issues involved. For some groups, government affiliation is seen as an external and bureaucratic approach in which quality is evaluated strictly on the basis of predefined external standards, with a focus on control. Ownership by the HEIs, on the other hand, is seen as an internal, non-bureaucratic approach, with a focus on quality improvement rather than on control. However, there is no simple and direct relationship between ownership of the QAA and the balance between quality improvement and control. Many government-owned systems emphasize quality improvement. Some institution-owned agencies tend to act as gatekeepers, preventing the entrance of newcomers to the higher education market. The objective and focus tend to be independent of ownership.

Government support for the quality assurance effort without affecting the autonomy and its functioning is certainly an option to be considered. In countries where the system of higher education itself is undergoing reforms, quality assurance initiatives with much autonomy are being developed as a part of the government's reform strategy. In more mature systems, the HEIs may take a leading role by providing external reviewers or by taking part in different stages of the process. They may therefore be in a position to shape the important developments of the quality assurance system. In the USA, institutional accreditation has evolved as a process shaped by the HEIs themselves. In most other systems, however, the initiative has been taken by the government. In any case, government support in using the quality assurance outcome for vital decision-making, such as funding incentives, strengthens the quality assurance process.

To illustrate options in institutional affiliation, *Box 1* presents the cases of Hungary, Canada, the Philippines and Egypt. In Hungary, the government's role in the establishment and the minister's role in the functioning of the agency are very explicit. In contrast, in Ontario, Canada, the Council of Ontario Universities (COU) has established a QAA. The Philippines have chosen a system in which HEIs are members of private accreditation agencies, organized along the lines of the segmented higher education system. Finally, the accreditation agency in Egypt has been set up as a parastatal agency that is completely independent of government.

Box 1. Affiliation of the quality assurance agencies (Hungary, Canada, the Philippines and Egypt)

Governmental (Hungary)

Authorized by Para. (7), Section 80 of Act N. 80/1993 on Higher Education (HEA), the Government orders the following:

The legal status of the Hungarian Accreditation Committee (HAC)

1. § (1) The Hungarian Accreditation Committee (hereinafter: HAC) is an independent body created by the government for the tasks identified in § 81 of the HEA.

(2) Pursuant to Para. (7), § 80 of the HEA, the Minister of Culture and Education (hereinafter: the Minister) shall exercise the legal supervisory rights over the HAC. In his powers of legal supervision, the Minister shall examine whether the HAC composition, organization, operation and decision-making mechanisms comply with the laws and regulations as well as with HAC's own rules of organization and operation; ….

The HAC's Secretariat

31. § (1) The Government creates a Secretariat to take care of the administrative work of HAC. The Minister supervises the secretariat that is a body with full authority, and is funded from the central budget.

(2) The head of the Secretariat is both appointed and relieved from duty by the Minister in open public competition for the position. The Minister, in agreement with the HAC President, also issues the mandate. The relief from duty of the head of the Secretariat is subject to the approval of the HAC as a joint body.

Source: Kozma, 2003: 124, 142.

Owned by HEIs (Ontario province, Canada)

Council of Ontario Universities (COU)

Originally known as the Committee of Presidents of the Universities of Ontario (CPUO), the organization was formed in 1962 in response to a need for institutional participation in educational reform and expansion. The executive head of each of Ontario's provincially assisted universities comprised the committee. The committee was later enlarged to include two representatives from each member and associate institution: the executive head (university president, principal or rector) and an academic colleague appointed by each university's senior academic governing body. In 1971, the committee changed its name to the Council of Ontario Universities.

The Ontario Council on Graduate Studies (OCGS) was established by COU to carry out quality assurance functions in graduate programs. The Ontario Council on Graduate Studies consists of the Deans of Graduate Studies (or equivalent officer) of each of the provincially-assisted universities in Ontario. OCGS does standard appraisal of proposed new graduate programs, and periodic appraisal, on a recurring basis, by discipline, of all existing graduate programs in Ontario, through its Appraisal Committee which consists of senior members of the professoriate of the member Ontario universities, elected by OCGS.

Source: Ontario Council for Graduate Studies web site.

Private accreditation agencies with membership affiliation in the Philippines

Higher education in the Philippines is both highly diversified and pluralistic, where Catholic private institutions coexist with private and non-sectarian establishments of Protestant affiliation, as well as with institutions in the public sector. This segmentation is a legacy of the colonial history of the Philippines where structures for higher education were established consecutively under Spanish, American and Filipino rule.

The accreditation movement in the Philippines began in 1951, through the initiative of a group of educators from private higher education institutions who were convinced of the importance to enhance quality in higher education through a system of standards, continuous monitoring of implementation, and self assessment done on a voluntary basis. The system of higher education in the Philippines adopted accreditation as a means of achieving high-level quality on a voluntary basis. It was also envisioned that through accreditation, appropriate guidance could be provided to parents and college-bound students. The accrediting association likewise heightened co-operation among higher education institutions. From the 1950s to 70s, three accrediting bodies were formed: the Philippine Accrediting Association of Schools, Colleges and Universities (PAASCU); the Philippine Association of Colleges and Universities - Commission on Accreditation (PACU-COA); and the Association of Christian Schools, Colleges and Universities - Accrediting Agency (ACSCU-AA). Each of the associations has its own accrediting instruments and standards.

In striving towards common standards and instruments, the Federation of Accrediting Agencies in the Philippines (FAAP) – an umbrella organization of accrediting agencies –was established in 1976. FAAP serves as co-ordinating body

of the 3 accrediting associations. With the formation of the accrediting agency for state colleges and universities, a fourth accrediting body was formed – the Accrediting Association of Chartered Colleges and Universities of the Philippines (AACUP). AACUP is mainly for members of the Philippine Association of State Universities and Colleges (PASUC), and PAASCU is mainly for Catholic schools (PACU-COA for non-sectarian groups, and ACSCU-AA for the Protestant sector.) The system of accrediting bodies is not restrictive, however: some institutions, members of PAACSU, are from the non-sectarian or Protestant groups, and/or from the state sector, whereas certain sectarian schools are accredited by the PACU-COA.

Source: Arcelo, 2003: 15-16.

Independent accreditation agency in Egypt

A part of a World Bank funded project for the enhancement of Egyptian higher education, a National Quality Assurance and Accreditation Agency project (NQAAA) started in the year 2000 in Egypt. Its objective has been to look into establishing a national system through which the quality of the higher education system can improve. British consultants from the UK helped the NQAAA in the development of the system that leads primarily to institutional accreditation and eventually to programme accreditation. The agency emphasizes its full autonomy and total independence from the government and/or other concerned entities to affect the decisions made by the agency. For this reason a law will be established by NQAAA that not even the President of Egypt can change it without referring to the People's Assembly. The independence of the NQAAA is from the service providers, namely the ministry of higher education and the higher education institutions.

Source: Said, 2005.

There are also organizations established and managed by groups external to the HEIs and governments that perform quality assurance functions. This is how accreditation of programmes in professional areas of studies evolved. Known as 'specialized accreditation', this type of accreditation was developed following certain professions' concerns about the quality and relevance of educational programmes that were preparing its practitioners and the quality of the practitioners. Specialty councils or professional bodies carry out this type of quality assurance through licensing or registration procedures. The focus of assessment of these agencies is the quality of graduates, who are the future practitioners of a profession. The procedures are developed and monitored by current practitioners of standing. Protecting public interest and safeguarding the standards of professional practice are central to these agencies' mandate. Their quality assurance decisions have implications for practitioners at the national and international levels.

Box 2. Association of Professional Engineers of Nova Scotia (APENS)

APENS is the licensing and regulatory body for the more than 4500 Professional Engineers and Engineers-in-Training practicing in Nova Scotia or on Nova Scotia Projects.

APENS Mission

- To serve and protect the public interest.
- To advance and promote the value and proficiency of the Engineering Profession.
- To support the members in their professional practice.

To practice as an engineer in Nova Scotia or to offer professional engineering services to the public in Nova Scotia, licensing by this body is a requirement. It also has implications for national and international mobility of engineering professionals. It is a member of the national body - Canadian Council of Professional Engineers (CCPE). CCPE in turn is a signatory to the Washington Accord that regulates the mutual recognition of professional qualifications in engineering among its signatories.

Source: Association of Professional Engineers of Nova Scotia web site.

Some professions, like medicine, are very protected and have highly regulated practices. Consequently, most countries have some amount of well-regulated quality assurance practices for professional areas of studies. In some countries, a degree in the discipline qualifies graduates to practice as professionals in that field. In such cases, those programme offerings are mostly regulated by professional bodies. By reading the references given at the end of this module and by completing the learning Activitys in this part of the module, you will be able to get more information about professional accreditation. This module therefore does not intend to go into those details. The discussions that follow touch on professional accreditation whenever necessary. However, the focus is on general quality assurance systems.

There are therefore four types of affiliation for establishing a QAA:

- Option 1: It can be established as a governmental (or quasi-governmental) agency, perhaps as a unit in the ministry (Cambodia and Hungary).
- Option 2: It can be a private body fully independent of the government in its establishment and functioning. HEIs establishing a QAA are a typical example (the Philippines and the USA).
- Option 3: It may be a quasi-governmental buffer body or established under a local buffer organization. The government may have a role in its initiation to serve government functions, but it may be governed independent of the government (Egypt).

- Option 4: It can be a body established without the government or HEIs having played any role in its establishment or functioning. Professional accreditation is a typical example (Professional Councils).

The rationale behind the different options needs a mention here. If the QAA is expected to play a central role in the country's higher education system, such as by recognizing institutions as HEIs, and conferring the power to award degrees and offer programmes, most probably the initiative to establish such a QAA would come from the government. When it is expected that other countries, governments or states will recognize and accept the quality assurance decisions, the government will have a much greater say in the establishment, organization and operation of the QAA. This does not mean that it must be a government agency. It may be a public organization, independent of the government, but part of the public system. However, there are QAAs that are not a part of the public system but are recognized nationally and internationally. The accreditation system of the USA is an example. It should be noted that although the accrediting agencies of the USA are not part of the public system, they enjoy the support of the government. Indeed, many government decisions and funds are dependent on the accreditation of the institutions.

When the main purpose of quality assurance is academic, HEIs must play a central role. When the purpose is to ensure that professionals are trained according to the norms of the guild, professional associations come to the fore.

The important thing to note is that in all cases there is a need to ensure independence from the interests inherent in these groups. What usually emerges is a system of checks and balances. Thus, governments authorize or supervise private agencies (the Department of Education in the USA does this for the regional accrediting agencies, for instance); academics and representatives of professional associations act as external reviewers for public agencies; and conflicts of interest are taken care of, etc.

2. Size of the higher education system

The size of the system to be covered may vary from thousands of HEIs to only a few. When the QAA must cover a large number of HEIs or programmes, the policies and practices of quality assurance are shaped accordingly. This includes, for example: the role of the agency in quality assurance decisions; the participation of agency staff in site visits; the unit of assessment (institution or programme); the follow-up to the quality assurance outcome; the selection of reviewers and constitution of the review team; and the importance given to training reviewers. In large systems, it is not possible for agency staff to participate in all site visits. Consequently, there is heavy reliance on external reviewers. Important responsibilities such as writing the report on the site visit and making recommendations based on it are delegated to external reviewers. The agency therefore chooses reviewers competent enough to work on behalf of the agency, but provide minimum direct guidance. Identifying competent external reviewers may not be a big challenge in big systems. However, training them to adhere to the agency's quality assurance framework and putting in place appropriate safeguards to minimize inter-team variances may become very challenging to the QAA.

Big higher education systems will tend to choose quality assurance at the institutional level. Small systems, on the other hand, may more easily focus on quality assurance at the programme level. In fact, the category of institutions or programmes covered by the QAA (or at least given priority attention) might to some extent be influenced by the size of the system. The same is true of the scope and focus of the follow-up the QAA might wish to consider and the role it would play in the 'post-assessment' scenario. One might argue that a larger system can afford more agency staff. This is the approach taken by regulatory bodies of large systems that have the mandate to cover all the entities within their purview.

The resource requirements for running the agency and implementing the quality assurance strategy is again influenced by the size of the system. Putting in place a new structure may not be cost effective in very small systems. Finding the human resources to put together a QAA may also be difficult. In such instances, existing structures must be re-organized and focus be placed on the HEIs' internal quality management structures. Regional quality assurance services through regional networks of QAAs and transnational and international quality assurance activities are considered options in some systems.

Putting together teams of external reviewers in small higher education systems is difficult. This is due to the small size of the pool of reputed academics and the often strong linkages among them. Conflict of interest policies may be defined accordingly. For example, in a big system, the NAAC of India can be selective in choosing the reviewers. Reviewers from the state where an institution is located are not considered for the review team of that particular institution. Obviously, this does not work in the case of New Zealand. The issue of size (in particular, smallness) is therefore a constraint in many higher education systems. It has an impact on the basic choices of quality assurance, the process and the way in which the agency is set up. While establishing the QAA, these factors need to be considered carefully in order to make the right choices.

Activity 1.

1. Browse the web site www.washingtonaccord.org/wash_accord_appl_provisional.html and www.washingtonaccord.org/wash_accord_principles.html and try to see the relationship between the signatories of the Washington Accord.

2. Identify the professional bodies that operate in your country in the area of professional certification and quality assurance. Try to determine how they were established.

3. If your country needs a new EQA agency, what type of affiliation will you suggest establishing and with what rationale? Justify your answer.

Functions to be performed

Three overlapping functions are found in quality assurance processes. These include administration, co-ordination and decision-making. All QAAs have administrative functions in implementing quality assurance procedures. There are co-ordinating tasks that are closely related to the administrative tasks. Some of these may directly shape the decision-making functions. There are large differences in the role agency staff have in the co-ordination functions and in decision-making on the quality of provisions. These are directly linked to the process options discussed in *Module 2*.

Administrative functions: These include responsibilities such as notifying the institutions; developing the roster of experts; and publishing the final quality assurance outcome. These functions are carried out by all QAAs. They do not require many additional staff or many staff of high academic standing able to cope with challenging situations. With a small core group of competent professional staff, these responsibilities can be organized well and discharged effectively.

Co-ordination functions: These include organizing activities for the development of the quality assurance framework, taking responsibility for monitoring the major phases of quality assurance, training experts to perform the process, and helping institutions to prepare for self-study. Some of these functions are central to upholding the credibility of the QAA and can be quite challenging. Accordingly, the agency needs staff with appropriate competencies to shoulder these responsibilities. Developing the quality assurance framework may be a major responsibility in the initial stages. However, with fine-tuning to be done as the process is developed, the other functions such as training of experts and orienting the HEIs must be implemented continuously. Depending on how big the higher education system and the quality assurance responsibility are, the QAA must make a realistic assessment of its involvement in these functions. The size of the system and level of involvement have implications for resource requirements and the staff profile of the agency. This will be discussed later. To ensure consistency in the quality assurance framework, QAAs have an important role in these functions, although the level of involvement varies. While some agencies would have a direct and full role in these functions, others enter into partnerships or agreements to run the training programmes for experts and orientations to the HEIs.

Decision-making functions: These include participating in assessment visits, taking a role in assessment activities such as report-writing, and having a role in making decisions. The pros and cons with regard to agency staff taking part in the co-ordination functions also hold here. In addition, the agency's policy dictates its role in the decision-making process. Self-assessment and external review are the backbone of good quality assurance practices. Even if the agency takes a direct role in decision-making, enough safeguards are therefore put in place to ensure that the assessment outcome is not compromised. While the administrative and co-ordination functions are normally the responsibility of professional or technical staff, decision-making is the responsibility of a deliberative council, or at least of a different group of people. There are a few quality assurance systems where the

staff carry out all three functions. In general, however, good practice dictates that different bodies (with different qualifications and backgrounds) hold these responsibilities. We will discuss this more in a later part of this module.

Considering these functions and the options available, the basic functions a QAA must perform can be listed as below:

1. determining the range, scope and general orientation of the quality assurance scheme to be applied;
2. preparing methodology and related handbooks and guidelines for the quality assurance process;
3. managing the processes;
4. reporting and disseminating the outcome of the processes; and
5. capacity building for quality assurance in the higher education system.

1. Determining the range, scope and general orientation of the quality assurance scheme to be applied

Module 2 highlighted the rationale for the different options in conducting the quality assurance process. It is essential that the agency consider those options in the light of the context in which it has to operate. It should then choose options that would maximize the outcome of its efforts. Some of the options may be already determined by decisions taken at a different (and frequently higher) level. Even in that case, the way in which these options are implemented and their implications are the agency's responsibility. For example, deciding that the QAA will cover only the public or private providers may be beyond its control. Again, whether the general orientation leans towards quality control or quality improvement is also determined by the purpose for which the QAA was established. To operationalize the quality assurance framework beyond the basic choices for the quality assurance system (see *Module 1*), however, the QAA must make many specific decisions.

These may include considerations such as the importance to be given to the distance and/or transnational education offerings of the HEIs; teaching vs. research vs. community service activities; and commercialization initiatives. Many QAAs take into account the transnational activities of their HEIs, and quality assurance of those offerings will be discussed in *Module 5*. A notable development that overlaps with transnational activities, but needs to be mentioned here, are the distance educational services offered by the HEIs, both on-shore and off-shore. Some QAAs limit their review to domestic campus-based programmes. Most, however, have developed guidelines to consider distance programmes as one of the institutional initiatives.

When the QAA is established, issues such as these require some level of discussion. This is where consultancy or other inputs are normally welcome from other stakeholders. Once these decisions are made, it is possible to start working on their operationalization. Determining the range and scope of the operation is very critical to the success of the QAA.

2. Preparation of methodology

Although the QAAs follow different approaches in the way they dispense their administrative, co-ordination and decision-making functions, all of them play an important role in the broader assessment scenario that ensures that the assessment process is consistent. Developing the quality assurance framework (including standards and criteria, if any), preparing the implementation plan and disseminating information dissemination require the agency's special attention. This is particularly true in the initial phase of establishing a QAA.

Standards or criteria for quality assurance

An important part of developing the methodology is agreeing on the basis for quality assurance decisions, such as standards and criteria. This will be discussed in *Module 3*. When the institution is the focus of quality assurance, the standards or criteria are about how well the institution is fulfilling its responsibility as an educational institution. There may be some variations depending on the model of quality assurance. If the programme is the unit of quality assurance, the educational delivery and quality of the particular programme become the focus.

Some agencies in well-developed higher education systems have decided to emphasize the audit and the 'fitness-for-purpose' approaches. They may indicate only the scope of the assessment in broad areas such as organizational leadership, learning resources and financial management. However, most QAAs provide detailed descriptions. For example, the standard statements of the QAA of Mauritius, developed after a careful study of the practices of many QAAs, provide micro-level details. Contrary to this approach, but suitable for its audit approach, AUQA indicates the scope of institutional audits. QAAs may differ in the level of detail they provide to the HEIs. However, they must make the basis for the quality assurance exercise – the criteria and standards – clear to the HEIs. The INQAAHE's guidelines indicate as good practice the enhancement of transparency. Thus, they state that "[t]he EQA Agency has clear documentation concerning the self-evaluation and the external evaluation and the documentation concerning the self-evaluation indicates to the institutes of higher education the purposes, procedures and expectations of content in connection with the self-evaluation process".

To agree on the standards or criteria, a multi-pronged strategy at various levels may be needed. It is essential to strike a balance between internationally-accepted elements of quality assurance and national expectations. It may be necessary to apply various approaches. These could include, for example, workshops on development of instruments; awareness programmes to reach out to the academic community for information dissemination; debates on critical issues; publication programmes for guidelines, manuals and handbooks for various stakeholders; training of assessment experts; and discussions with administrators and policy-makers to bring their perspectives into quality assurance. In general, the standards or criteria are established by the QAA on its own, with some consultation with stakeholders. While this may be appropriate, or even necessary in the initial stages of establishing quality assurance schemes, it is advisable to work towards a much more participative approach as soon as possible.

It is not enough for the QAA to develop a good methodology. It should also be acceptable to the higher education system and suitable to the national context. To a large extent, acceptance of the methodology can be gained by ensuring participation of the key stakeholders in discussions concerning its development. A combination of in-depth, small group expert discussions and broad national consultations can ensure that no single stakeholder group dominates the process of developing the methodology. Trail reviews also help to build involvement among stakeholders. Furthermore, transparency and clarity in approach, through to broad consultations, can go a long way in instilling confidence among academics.

While consultation with academics is desirable, in some systems it may not be a realistic approach. Where national capacity to contribute to quality assurance developments are limited, quality assurance will have to be established on the basis of a decision made by authorities, be they governmental, institutional or professional. Only in the later stages will actual participation be possible and worthwhile. This does not mean that stakeholders' opinions should not be sought. However, it may be necessary to restrict those opinions to very specific aspects of the establishment of quality assurance schemes. Again, it depends on the purpose. Thus, quality control systems are normally associated with little participation, while improvement-oriented schemes will necessarily mean much broader participation. Public assurance, meanwhile, will fall somewhere in-between.

Procedures

The QAA must decide on many aspects of the quality assurance framework and disseminate it to stakeholders, in particular the HEIs. It is useful to prepare guidelines and possibly manuals covering the following aspects:

- how to apply for review by the QAA;
- what kind of information must be provided;
- what kind of commitments HEIs make when entering quality assurance processes;
- what kind of commitments QAAs make towards the institutions;
- what is expected from HEIs regarding their self-assessment process;
- how external review is going to be carried out;
- how decisions are going to be made; and
- what the implications of the decisions are.

3. Management of processes

The success of the methodology depends on how well it is implemented. It is crucial that the following functions be carried out in a professional manner:

1. liaison with HEIs on the quality assurance process and management of the data received from HEIs;
2. selection and training of external reviewers;
3. constitution of the review team and conduct of the visit; and
4. reception of the review team's recommendations.

These aspects and the various options available were discussed to some extent in *Module 2*. In the following pages, we will look at operational details such as: developing manuals; roles; safeguards; and guidelines that would support discharging these responsibilities effectively by the QAA.

Liaising with HEIs on the quality assurance process and managing the data received from HEIs

Keeping the HEIs informed of the policies and related developments, orienting HEIs towards the quality assurance process, facilitating their preparations, ensuring that they fulfil the requirements for a good self-assessment exercise, and managing the data received from them are functions that require a lot of interactions with HEIs. Serious attention must be paid to the various policies and procedures of the QAA and the implications of certain institutional options, so that they are clear to agency staff. QAAs ensure this by developing manuals and handbooks for the reference of the staff, reviewers and the HEIs. Regular internal staff meetings to share experience and briefings, compiling Frequently Asked Questions and Answers, and interactions with HEIs contribute to this function. The QAA may consider activities such as:

- developing a clear Norms and Procedures Manual;
- developing a Handbook for Self-Assessment;
- identifying clearly the essential background information (which may include developing forms or other instruments); and
- running workshops for the staff in HEIs.

Box 3, below, describes the tight interaction between the staff from the Danish Evaluation Institute (EVA) and the external assessors.

Box 3. The Danish Evaluation Institute (EVA)

The Danish Evaluation Institute (EVA) establishes a project team for each evaluation. The project team is typically composed of one or two evaluation officers, one evaluation assistant (a student) and a representative from each of the three units specialized in, respectively, methodology, communication and administration. All team members are employed by EVA. One of the evaluation officers leads the project and is responsible for the communication between the institutions to be evaluated, the project team and the evaluation group. The project team is responsible for the practical work of the evaluation including the responsibility for writing the final report.

The project team makes a preliminary study to get an overview and ensure that the evaluation covers relevant areas of focus. The preliminary study specifically leads to the establishment of an evaluation group, appointment of the institutions to be evaluated and, finally, to the formulation of the terms of reference. The terms of reference are then approved by the EVA board.

EVA establishes an evaluation group for each evaluation that is composed of people possessing special academic expertise in the area that is evaluated. Members of the project team do not become members of the evaluation group.

The evaluation group is responsible for the academic content of the evaluation and for the recommendations of the report. Usually EVA recruits a member from one of the other Nordic Countries to obtain an international perspective of the evaluation.

One or more supplementary surveys are included in the evaluation. Consultancy agencies and market research institutes typically carry out the surveys for EVA. The supplementary surveys together with the self-evaluation reports (along the guidelines provided by the project team) and the site visits form the basis for the recommendations of the evaluation report. The findings of the surveys are available as separate appendices in Danish after the report has been published.

The evaluation group and the project team usually visit all institutions to be evaluated. During the visit, the evaluation group has the opportunity to talk to staff, students and management team. The purpose of the visit is to obtain further documentation for the report. Prior to the visit, the project team prepares a checklist of topics to cover for the evaluation group based on the self evaluation reports. The project team prepares minutes after each visit. The minutes of the visits are for EVA's own use only.

Programme evaluation results in a single combined report while institutional evaluations result in separate reports for each institution. In the report, the evaluation group presents its conclusions and proposals for quality improvement of the educational programme. The report also contains a description of the aim and process of the evaluation and analysis of the documentation. Prior to publication, the report is given to the institution to comment on the report and correct any factual errors.

The institutions are responsible for following up on the evaluation. According to the act issued by the Danish Ministry of Education, all evaluated institutions must prepare a follow-up plan. The plan takes into consideration the recommendations of the evaluation report, but it may also include initiatives that the institutions choose to launch on the basis of the selfevaluation. Public announcement of the follow-up plan must be made not later than six months after the report has been published and it must be made electronically from the institution's home page.

Source: Danish Evaluation Institute web site.

Selection and training of external reviewers

To implement the quality assurance processes effectively, the QAA must be clear about what it expects from the reviewers. It must therefore select experts who will fit well into the role expected of them. *Box 3* describes the responsibilities expected of the reviewers of the QAA in the UK and the knowledge and skills required to carry out those responsibilities successfully. Reviewers are selected according to these expectations.

Box 4. Roles and responsibilities of external reviewers (UK)

The responsibilities of reviewers include:

- reading and analyzing self-evaluations prepared by institutions and any other documentation sent in advance of reviews;
- participating in briefing meetings;
- participating in visits to institutions in order to gather, share, test and verify evidence;
- making judgments on institutions' management of academic standards and quality;
- contributing to and commenting on compilation of the review report;
- attending reviewers' briefing and training meetings.

Selection is undertaken by the Agency with the intention of ensuring that reviewers:

- are knowledgeable about HE institutions;
- have wide experience of academic management and quality assurance;
- can readily assimilate a large amount of disparate information;
- can analyze and make reliable judgments about complex arrangements;
- can hold discussions at a high level about strategic and operational approaches;
- have personal credibility with senior managers and heads of HE institutions.

Source: Quality Assurance Agency web site.

The expectations are not just about the ability of reviewers to visit an institution or programme site and make recommendations. They are far more complex. The QAA should be very clear about the extent of evaluation and judgment required of the reviewers. It should also explain how the agency proposes to involve them in further decision-making. This is because most agencies have at least one more level of processing the outcome of the site visits. Moreover, there is a wide variation in the way this is done.

Some agencies rely heavily on peer assessment or the outcome of the review team's site visit. They only check whether the site visit was carried out objectively and whether there was adverse feedback from the institutions or programmes assessed or from the agency staff who co-ordinated the visit (the type of feedback that is required or acceptable is another issue that must be made clear). If these are found to be appropriate, the recommendations of the review team become the quality assurance outcome. In such a case, the QAA should pay more attention to putting the right type of team together. This will give the reviewers the capacity to make appropriate recommendations to the agency. It will also ensure that their assessments do not become issues of contention later on. This becomes all the more crucial in large systems of higher education and in quality assurance models where the agency staff do not participate in the site visit.

Some agencies require reviewers to only advise them or report to them their impressions of the institution (or programme) with reference to the assessment framework. The agency staff may take a leading role in compiling the review team's observations. It may also help the QAA to reach the quality assurance decision. Some review teams share the highlights of their assessment with the HEIs. Others do not disclose anything to them. Each option has implications for the job description of the review team. The understanding of these prescriptions and descriptions should be clear to all those involved in the process. It is essential that these expectations be translated into written policies and made available to everyone. Once the selection is made according to the role expectations and responsibilities of the reviewers, appropriate training and retraining strategies are necessary. These will be discussed under *4*.

Constituting the review team

Considering factors such as the role expectations and nature of the quality assurance unit, the agency may tentatively identify a larger panel of reviewers. These reviewers could be further considered to participate in the team that will visit the institution. Two issues need attention here:

- balancing the team; and
- eliminating any conflict of interest.

Balancing the team

It should be noted that it is not possible for a single reviewer to be acquainted with all the aspects of the functioning of an HEI or programme (although it is possible for a team of only one or two people to do a reasonable review). Each individual's perception of quality might be influenced by many factors beyond the control of the QAA. It is not possible for the agency to undo all the personal perceptions in a training programme. This is true however rigorous the training is. Keeping this in mind, the agency should ensure that the make-up of the team will result in a good collective assessment. The combination of team skills will make assessment fairer, as different points of view will be presented. To maximize the outcome of collective assessment, QAAs may like to consider three important aspects. These are: i) the academic and administrative expertise of relevance to the assessment visit; ii) competencies of the reviewers such as report writing and leading interactions; and iii) personal traits essential to enhancing teamwork, such as the ability to work in groups and willingness to listen to others. Different options in balancing the composition of expertise among external reviewers (such as specialists vs generalists, or in-country reviewers vs. international experts) were discussed in *Module 2*.

Training workshops for external reviewers are extremely useful for making the expectations of the agency more clear. They can also show future reviewers how to do the work they are expected to carry out. At the same time, they are also very useful opportunities for looking over the prospective reviewers and identifying those that would be best in specific circumstances (or those who would be inadequate in **any** circumstance).

Eliminating conflict of interest

For the larger panel of reviewers identified against the aspects discussed above, the agency must find out whether these reviewers have any conflict of interest with the institution or programme to be assessed. 'Conflicts of interests' are private interests and circumstances that may compete with one's official actions or duties. Any factor that might affect the reviewer's ability to objectively judge the unit being reviewed, or that might reasonably seem to have the potential to do so, can be construed as a conflict of interest. The reviewers are expected to be experts known for their integrity. However, to ensure and assure objectivity, the agency should be clear about its policies on conflict of interest. In some agencies, this requires certification that the reviewer has no involvement with the proposed institution. This involvement, past or present, could be direct or indirect through any close relatives as either an employee or member of any official body, as a consultant or graduate. Sound policies on conflict of interest are essential to upholding the credibility of the process.

Box 5. Policy on conflict of interest (Australia, India)

Australia

As an audit panel is being selected, prospective auditors and the auditee are asked if they know of any matters that could pose a conflict of interest in the prospective auditor being appointed to the audit panel for that institution or agency. If the prospective auditor responds in the affirmative, AUQA may remove her/him from consideration, or, having considered the reasons, decide that in fact no conflict exists. If the auditee responds in the affirmative, or wishes on other grounds for a person not to be selected as an auditor, the reasons must be given. The final decision whether to appoint a particular person to any given audit panel rests with AUQA.

If the existence of a conflict of interest emerges (or, more rarely, is created) during the audit process for any auditee, the auditor should tell the Panel Chair and/or the AUQA staff member on the panel. These two will decide on the appropriate action to be taken (in consultation with the Executive Director of AUQA).

Source: Australian Universities Quality Agency web site.

Certificate to be signed by the reviewers and the HEIs on conflict of interest in India

No conflict of interest statement by the peers

This is to certify that, I have 'no conflict of interest' with the proposed institution as detailed under:

I have no involvement with the proposed institution, directly or indirectly through my close relatives, in the past or at present, as either an employee or a member of any official bodies, or a consultant or even a graduate.

I do not belong to the same state in which the institution is located.

I have no affiliation with an institution competing directly with the proposed institution.

Name & Signature of the Peer

No Conflict of Interest Statement By the Institution

This is to certify that, the Peer team members have no involvement with our institution, directly or indirectly through their close relatives, in the past or at present, as either an employee or a member of any official body, or a consultant or even a graduate.

Further, none of the members of the proposed team will be appointed at least for a year for any important assignment in the institution.

Name & Signature of the
Head of the Institution

The AUQA spells out three types of conflicts: personal, professional or ideological. There may be some overlap between these. Personal conflicts could include animosity, close friendship or kinship between the reviewer and the CEO or another senior manager of the institution. It could also include the reviewer being excessively biased for or against the institution to be assessed due to some previous event. This is why graduates of the institution are not normally taken into the team for that institution. Professional conflicts can occur if a reviewer has been a failed applicant for a position in the institution, is a current applicant or prospect for a position in the institution, is a senior adviser, examiner or consultant to the institution, or is with an institution that is competing strongly with an institution being assessed. An example of an ideological conflict would be a reviewer's lack of sympathy to the style, type or ethos of an institution. Many QAAs have more or less similar understandings about conflicts and try to eliminate even the appearance of conflict.

Activity 2

Browse the web sites of quality assurance agencies in order to identify existing policies on 'conflict of interest'.

If the QAAs have forms to be signed by the reviewers and the HEIs declaring that there is 'no conflict of interest' on their web sites, download and compare them.

Conducting the visit

Once the review team has been put together, the QAA may consult the HEI to plan the site visit. The major purpose of the site visit is to look for evidence to arrive at a collective judgment on the quality of the institution (or programme) based on the agency's evaluation framework. To facilitate 'gathering of evidence', the visit schedule usually incorporates three types of activities:

- interactions with various constituents of the institution;
- visiting some or all of the important facilities of the unit; and
- checking the documents.

During the site visit, in addition to the meetings with the executive body and the management teams of the institution (or programme), the reviewers interact with groups of teachers, staff and students. In many cases, there are also discussions with alumni, employers and the public. Interactions help the reviewers to get a feel of the institution's academic environment and seek information on the issues that need to be clarified. The reviewers may ask for relevant documents to verify the claims made by institutions in the self-assessment report. Sometimes, the reviewers may work in sub-groups. In this way, they may assist the chairperson/leader of the team to arrive at a collective judgment. The visit schedule must provide adequate time for reflection by the reviewers, to discuss the evidence they have identified and issues to be considered further.

A typical visit schedule of one of the QAAs is given in *Box 5*. In this case, the visit lasts for nearly three days. The number of days may vary depending on the size of the unit to be visited, the depth of assessment to be done, and the approach to the visit. If the institution is big or the visit schedule requires reviewers to visit all the departments of the institution and their facilities, the visit may need more days. In general, it will take between three and five days.

Box 6. Visit schedule (India)

Day 0: Arrival of the team members and Peer team discussion I

1700-1900 hrs: Peer team discussion I at the place of stay
(private meeting for the peer team only)
Agenda for the discussion
Compare notes on the individual tentative evaluation
Identify issues that need further probing
Share the responsibility of collecting further evidence
Share the responsibility of report writing

Day 1: Visit to the Institution
Session 1: 0900 – 1000 hrs: Meeting with the Head of the institution & members of the steering committee that prepared the self-study report

Session 2: 1000 - 1100 hrs: Meeting with the Governing body

Session 3: 1100 - 1230 hrs: Visit to the library and computer center and interaction with the staff there

(1230 – 1400 hrs: Working lunch with the members of the governing body and steering committee)

Session 4: 1400 – 1530 hrs: Visit to a few departments and interaction with the faculty there (The team goes in sub-groups)

Session 5: 1530 – 1600 hrs: Verification of documents

Session 6:1600 – 1700 hrs: Interaction with Parents & Alumni (and Tea)

1900 – 2100 hrs: Peer Team Discussion – II: At the place of stay
(private meeting for the peer team only)
Agenda for the session:
Discuss the evidence collected so far
Identify the issues to be checked further
Agree on the provisional evaluation of the team
Discuss the tentative highlights of the report

Day 2:
Session 7: 0900 – 1300 hrs: Visit to the college office and remaining departments and facilities

(1300- 1400 hrs: Working lunch with heads of the departments)

Session 8: 1400 – 1500 hrs: Interaction with a group of students

Session 9: 1500 – 1600 hrs: Checking the documentary evidence

Session 10: 1600 – 1700 hrs: Seeking further clarification and sharing the issues of concern with the Head of the Institution

1900 - 2100 hrs: Team Discussion – III: At the place of stay
(private meeting for the peer team only)
Agenda for the session:
Agree on the scores
Agree on the draft report

Day 3: Final Day of the visit
Session 11: 9000 - 1000 hrs: Sharing the draft report with the Head of the institution

Session 12: 1000 – 1100 hrs: Receiving feedback from the Head of the institution (This session may be unusual for many quality assurance systems. Normally the team prepares an exit report, without seeking feedback from the institution. Feedback comes later, once the institution has received a written report and has the time to read it carefully.)

Session 13: 1100 – 1200 hrs: Finalizing the report in the light of the feedback

Session 14: 1200 – 1230 hrs: Exit meeting

Depending on whether the agency staff will join in the visit, the agency must support it in different ways. Some of the aspects that may need attention include:

providing guidelines for the various sessions; developing specific agenda for the discussions and interviews; providing data sheets for recording the evidence; developing templates or formats for writing the reports; being available to the team for consultation; and ensuring good communication between the visiting team and the agency. Most agencies develop detailed handbooks that can be referred to by the visiting team during the site visit. These can help clarify interpretation of policies and procedures, among other things.

In the visit schedule in *Box 5*, the agency helps the team with the agenda for each session. The schedule also indicates that the review team shares the written report with the head of the institution for feedback. This implies that each session might be highly specific. Sessions must therefore be structured and supported by many safeguards. In most cases, the highlights of assessment are at least shared orally with the institution in a meeting (exit meeting), towards the end of the visit. This is a challenging task that requires a well-defined and well-thought out site visit.

Receiving the recommendations of the review team

The observations, report or recommendations of the review team are then submitted to the agency for further processing. Most QAAs send the draft report or review team recommendations to the institution. It can then respond and check factual accuracy. Normally, the HEIs have a say in correcting any mistakes or misunderstandings that may become apparent in the written report. The New Zealand Universities Academic Audit Unit (AAU) gives universities an opportunity to comment on the facts and emphasis of the report. Emerging EQA practices give a role to HEIs in providing feedback about the review team and its evaluation. However, in systems where there is not a strong culture of quality assurance and external assessment, the HEIs may not have an opportunity to give their feedback about the external review team. There are also systems in which the review team's recommendations are not shared with the institution.

After this stage, the review team's recommendations are considered so that a final quality assurance decision can be made.

4. Decision-making and reporting on the outcome

In *Module* 2, we discussed the various types of decisions that can be made as an outcome of the quality assurance process. To choose an appropriate model for reporting the outcome of quality assurance, the agency must consider various factors. These could include the purpose for which the quality assurance outcome might be used; the size of the system; and variability in education quality among institutions, among others. Within the approved model of reporting the quality assurance outcome, the reviewers give their recommendations or observations, or report to the QAA.

As *Module 2* showed, once the outcome of the site visit is finalized, QAAs may place the outcome before the governing body for further processing or approval. Or, the review team recommendations and self-assessment report may be considered by the governing body of the agency. In some agencies, the review teams only make observations. These are then considered by another body for decision-making.

Who the members of the decision-making body are varies among QAAs depending on their affiliation and clientele. Irrespective of affiliation and clientele, good practice requires that the QAA be independent, to the extent that it has autonomous responsibility for its operations and that the judgments made in its reports cannot be influenced by third parties. The agency must ensure that its decision-making is independent, impartial, rigorous, thorough, fair and consistent. The agency is responsible for ensuring that its decisions are consistent. This is true even if the judgments are formed by different groups, panels, teams or committees.

Module 2 also discussed the options related to 'public disclosure or confidentiality of the report'. Some agencies maintain that the reports are for the HEIs. They claim that the public needs only knowledge of their status, such as whether they are 'accredited' or 'not accredited'. The argument against full disclosure of the reports is that both HEIs and external reviewers may be much more cautious in describing the actual weaknesses of a programme or institution if they know that the report will be published. Those who support this point of view argue that at least at the introductory stage of quality assurance processes, it may be better to have honest and complete reports than 'edited' ones. Of course, this does not mean that the outcomes, or a brief summary of the reasons for the outcome, should not be published.

Some agencies make the report available to key stakeholders like the government or funding agencies. Others make only the summary available to the public. However, the well-accepted trend is for systems to move towards public disclosure of more information to stakeholders on the quality assurance outcome. QAAs that believe in full public disclosure even upload the full report to their web sites. Feedback and comments from users and readers are also encouraged. The Standards and Guidelines for Quality Assurance in the European Higher Education Area developed by the ENQA (European Association for Quality Assurance in Higher Education) recognize the need to provide "opportunities for readers and users of the reports (both within the relevant institution and outside it) to comment on their usefulness" (ENQA, 2005).

When the HEIs do not agree with the outcome of quality assurance, the QAA should provide for an objective appeals mechanism.

Appeals mechanism

Most of the well established QAAs have a clear appeals mechanism. It is particularly important for agencies that can formally accredit or take away accreditation of HEIs and programmes to have a well-defined appeals procedure. In fact, the appeals procedure helps the QAAs to pay careful attention to their declared principles and ensures that their processes are managed professionally. It also keeps a check on the way peer assessment is facilitated, so that the evaluation framework is applied consistently. This will minimize variations between teams.

The *Standards and guidelines* document developed by ENQA for the European Higher Education Area recommends that the agency have an appeals system that "provides for those under evaluation an opportunity to express opinions and contest conclusions and decisions resulting from the evaluation outcomes". When the QAA makes its decisions known to the HEI, and if an unsuccessful candidate wants to appeal after being notified by the agency about the outcome, notice is

given of the intention to appeal within a certain number days. Following this, the HEI submits the application (some agencies charge a fee for this). This application sets out the grounds for the appeal against the quality assurance outcome. There are wide variations in the composition of the agency/committee that deals with the appeals and the powers of the committee. The QAA itself may have a procedure to set up an appeals committee. Moreover, there are instances where the appeals committee may be independent of the QAA. This is true of Norway, where the appeals board is administered by the Ministry. In both cases, however, the appeals committee is expected to work independently and judge the appeal fairly.

The power vested with the appeals committee and the action that can be taken after its decision vary among agencies. The committee may make a final decision on the appeal, or give its recommendations and impressions to the QAA for consideration. Some agencies are able to appeal to a court of law. Depending on the context in which it operates, the agency must develop an appropriate appeals mechanism right from the beginning and make it known to all those involved in the process.

Box 7. The Appeals Committee (South Africa, Switzerland)

HEQC of South Africa

A separate HEQC Appeals Committee will consider the appeal (The Appeals Committee consists of the Chief Executive Officer of the CHE, the CHE representative on the HEQC and co-opted specialists when necessary). The HEQC will not contract a new set of evaluators or conduct site visits, but will pay close attention to the processes and procedures followed in the first evaluation. The Appeals Committee will consider the following documents:

- Original application.
- Report from the evaluators.
- Letter of appeal.

The recommendation of the Appeals Committee will be referred to the HEQC Accreditation Committee for Private Providers for a final recommendation, which will be considered by the full HEQC. The applicant will be informed of the result of the appeal within two months of submitting full grounds for the appeal.

Source: Council on Higher Education (South Africa) web site.

Organ for accreditation and quality assurance for Swiss higher education institutions (OAQ)

Accreditation decisions may be appealed to an independent arbitration board composed of three members. The Federal Department of Justice and Police and the Conference of Cantonal Departments of Justice shall each appoint one member who together shall appoint the third member. The term of office shall be four years and may be renewed once. Decisions by the arbitration board may be appealed to the Federal Court by way of an administrative appeal.

Source: Vroeijenstijn, 2003.

5. Capacity building

Assuring quality is a rigorous task for the QAA. Undergoing the process is a resource intensive exercise for HEIs. To benefit as much as possible from such an exercise, it is essential that the required capacities be developed in the system. Capacity building must be done at three levels: among reviewers; HEIs; and the agency staff.

Capacity building among reviewers: There are at least three reasons for the QAA to consider capacity building among reviewers seriously:

1. to facilitate the reviewers in discharging their responsibilities in a fair and thorough manner that supports the quality assurance function of the QAA;
2. to orient the reviewers to the quality assurance framework so that they are able to act on behalf of the agency, adhering to the guidelines given by the agency; and
3. to reduce inter-team variance, which is a major challenge in ensuring the credibility of the quality assurance process and its outcome.

In the earlier part of this module, we considered the roles and responsibilities of the reviewers. The visit schedule also highlights the various activities to be conducted during the visit. All this requires the ability to hold face-to-face interactions effectively, maintain interpersonal relationships, and be objective and open-minded in making decisions. This can be done in a professional manner only if the reviewers have an appropriate orientation to their role.

Orienting the reviewers to the agency's quality assurance framework and reducing inter-team variations are substantial tasks. It is the responsibility of the agency to ensure that each evaluation is carried out according to some basic methodological rules and that the review team adheres to the framework of the QAA. The presence of agency staff in the site visit can guarantee this to a large extent. However, it is not always possible for an agency to directly participate in site visits. Agencies that are not directly involved in the site visit leave much responsibility to the experts, ensuring consistency in approach. In those models, inter-team variations might emerge as a major challenge. It is therefore necessary to provide appropriate training and orientation to reviewers, as well as to draw on experienced reviewers to lead teams.

Some countries have established a roster (or list) of trained personnel to work in review teams. Selected experts receive intensive training in their responsibilities and the successful ones are inducted into the roster. In some countries, however, review teams are appointed on an 'ad hoc' basis from institution to institution. They are well briefed about the quality assurance process after being appointed to the teams. The orientations and training strategies vary from briefing notes to the review team members after the team is constituted, to rigorous residential training programmes even before the reviewers are inducted into assessment teams.

The QAA must also develop strategies for retraining. As it finetunes its procedures, makes changes, develops new processes and identifies areas that need further attention, the reviewers need to be informed of those developments. QAAs ensure this through annual meetings of reviewers and bulletins or e-forums dedicated to connecting those involved in the quality assurance process.

Capacity building of HEIs: This is not only about preparing them for the assessment visit. Capacity building also includes guiding the HEIs to conduct a meaningful self-study, act on the recommendations of the assessment report, initiate the follow-up, sustain the quality culture and pursue the quality enhancement objective. To some extent, the follow-up strategies of the QAAs, and continuous interaction between the agency and the HEIs through seminars and various academic forums, contribute to this. Some agencies run specific projects to help HEIs to improve their quality. The Academic Quality Improvement Program (AQIP) of the North Central Association of Colleges and Schools (USA) is one such effort. Instead of the routine self-study, HEIs can opt to participate in this innovative project.

Box 8. Capacity building among HEIs (about AQIP)

The Academic Quality Improvement Program supports continuous performance improvement in higher education. AQIP provides an alternative process for colleges and universities to maintain their regional accreditation. The Higher Learning Commission launched AQIP in 1999 with a grant from the Pew Charitable Trusts. Currently 127 organizations demonstrate they meet the Higher Learning Commission's accreditation standards through challenging activities that naturally fit with their work to improve their key systems enabling higher performance. By sharing both their process improvements and performance results, organizations participating in AQIP provide the Higher Learning Commission with the evidence to make public quality assurance judgments and nudge themselves to excel in the distinctive higher education mission each has identified. To accomplish these goals, AQIP continuously works to deploy and improve an innovative array of cost-effective, high-tech processes. Details about Action Projects, Strategy Forums, Systems Portfolios and Appraisals, Checkup Visits, and Reaffirmation of Accreditation are available on the this web site. AQIP also provides avenues for individuals to expand their understanding of quality and systematic improvement by participating as peer reviewers in its processes and other services.

Source: Academic Quality Improvement Programme web site

Capacity building is an important function of the QAA in higher education systems with a wide variation in the quality of HEIs. The same is true of systems where EQA is an emerging concept. In such a situation, the agency must develop strategies and implement activities that will strengthen the capacity of the HEIs to contribute to and benefit from EQA. It is also important to sustain the quality initiatives that come out of the quality assurance exercise.

Initiatives found among QAAs that contribute to capacity development of HEIs can include, among others: developing databases on best practices found among HEIs; supporting projects that enhance certain aspects of quality education; running

projects and doing research to improve quality in areas of need; involving a cross-section of institutional members in consultations and discussions on quality enhancement; and supporting networking among HEIs. The publication programme of QAAs can have a significant impact, through publication of guidelines, handbooks and resource materials for the use of HEIs. Training quality managers, steering committee co-ordinators and reviewers and involving them in quality assurance exercises builds an academic community aware of quality-related issues. Those who have gone through training will in turn contribute to capacity building in their own HEIs. You may benefit from browsing the websites of AUQA and HEQC to find out about the quality enhancement activities carried out by these agencies towards capacity building in HEIs.

Capacity building of agency staff: Agency staff members have an important role in upholding the professionalism of the procedures. In some agencies, they have a leading role in shaping the processes, practices and quality assurance outcomes. They need professional development programmes to cope with changes in the quality assurance scenario. Agencies take care of this by sending their staff to academic events on quality assurance. Visiting other QAAs to observe their practices and hosting professional visits of staff from other agencies contribute to the sharing of experiences and expertise. Staff exchange, study visits and participation in network events that bring many agencies together to discuss issues of common interest are becoming common among QAAs. This is particularly true as discussions on mutual recognition between QAAs are increasingly being emphasized. Some QAAs encourage their staff to get involved in research, publication and consultancies that contribute to their professional development.

Activity 3

Browse the web sites of the quality assurance agencies. Find a set of positive features that must be considered by the appeals committee. How would such a mechanism work in your national context?

Browse the Internet to read about the Good Practice Database of AUQA and the activities of the Directorate of Quality Enhancement of HEQC. What lessons can you draw for a quality enhancement strategy to be implemented in your system?

Structure of the agency

1. Governance and organizational structure

Governance and the organizational structure may vary according to the way in which the quality assurance agency was established and its affiliation. In general, a higher level executive or governing body – at the policy-making level – steers the policies and objectives of the QAA. A staff structure at another level is then responsible for translating the policies into action. Members of the governing body may be appointed, nominated or elected according to the rules of the organization.

Governing bodies usually have representation from a cross-section of the various higher education stakeholder groups. Clear guidelines indicate how members representing various sectors such as HEIs, government, employer groups and the public are to be appointed. These members may cede membership if they later lose their position in the sector, such as a university president who completes her or his tenure. In some agencies, however, board members do not represent their sectors. This is true even if balance in representation is sought during the appointment process. For example, South Africa's HEQC is governed by a board of 13 members. These members are appointed by the Council of Higher Education (CHE) in their own right and not as representatives of sectors or organizations. Members of the National Assessment and Accreditation Council (NAAC) of India, however, are nominated as educationists in their individual capacity. Most, however, are nominated to the governing body to represent sectors such as central universities, state universities, 'deemed-to-be-universities' and autonomous colleges. Such members can serve in the governing body only as long as they represent that sector.

The composition of the governing body is generally indicative of the relative power that the different stakeholders wish to maintain in the agency. In agencies established by governments, the representative of the government either sits on or chairs the governing body. Some QAAs consider it important to have students, the public and/or end users represented in the governing body.

Some QAAs have international experts in the governing body to bring in new and global perspectives. In the Asia-Pacific, Hong Kong's HKCAA and UGC, New Zealand's AAU and Japan's NIAD-UE all have international members on their boards. Over a quarter of the HKCAA Board membership is international.

The composition also depends on other factors. These could be, for example, the importance given to regional co-operation and the political will to support it, among others. International presence in the governing bodies of QAAs in Europe has been accelerated by the move towards the European Higher Education Area. In AAC, half of the members of the council are Austrians. The other half are experts from other European countries. International presence in review teams is more common than before and the governing bodies of QAAs tend to have a favourable attitude towards it. This is due to the growing importance of regional dialogue among the QAAs and the internationalization of HEIs. In Europe, foreign experts are appointed to the accreditation committee/council. This is the case of the AAC (Austria),

Akkreditierungsrat (Germany), AQAS (Ireland), ACQUIN (Germany) and Foundation for International Business Administration Accreditation (FIBAA). It is also the case of the AUQA (Australia) and AAU (New Zealand) in Asia and the Pacific.

Box 9. Governance structure of QAAs (Ireland, Chile)

Higher Education and Training Awards Council (HETAC), Ireland

The appointment of the members of the council is set out in legislation. There are 15 members of the Council. The Chairman and the Chief Executive Officer are members of the Council. Other members are representative members appointed by the Minister for Education and Science (2), the Minister for Enterprise Trade and Employment (1), and the Recognized Institutions (3). With the agreement of the Minister for Education and Science one person is appointed as representative of learners and another person as representative of the employees of Recognized Institutions. Other members are nominated by the Irish Business and Employers Confederation (1) and the Irish Congress of Trade Unions (1). The Council once established may then nominate two additional members who have a special knowledge and experience related to the functions of the Council, one of which shall have international experience. The members of the Council operate on a part-time voluntary basis. The only full-time member of the Council is the Chief Executive Officer. The term of appointment is five years.

Source: Vroeijenstijn, 2003.

National Commission for Accreditation, Chile

In 1998 the Ministry of Education established a National Commission for Accreditation (CNAP), charged with designing an accreditation process and carrying it out. The commission has fourteen members, appointed by the Minister of Education, and a technical staff in charge of coordinating and managing accreditation procedures. This commission had as one of its main duties to design a permanent system for quality assurance, on the basis of their experience.

The Commission prepared a proposal, which was then turned into a law project. Congress has already approved the proposed structure for the QA agency, along the following lines:

- The President of the country appoints the chair of the commission.
- There are seven members, appointed by the main types of higher education institutions (public and private universities, professional institutes, technical training centres).
- Two members are appointed by the national science and technology commission.
- The Head of the HE Department of the Ministry of Education.
- These members together decide on the appointment of two other persons, one representing employers, and one representing professional associations.
- Two students, appointed by student organizations following specific guidelines set in the law.

- The commission appoints a Secretary General, who heads the technical staff and has voice but no voting rights.

All members of the commission act in a personal capacity, for a fixed period of four years, regardless of any changes in their institutional affiliation or current position.

This governing body makes all policy decisions, and all accrediting decisions, which include institutional accreditation, the approval, registration and supervision of QA agencies for programme accreditation and the accreditation of doctoral programmes.

Source: Lemaître, 2005.

The governing body may assume a variety of administrative, oversight and decision-making functions. This body has overall responsibility for the policies and functioning of the QAA and for the decisions taken. As a result, it may devolve authority to the head or director of the agency, but the decisions will still be its responsibility. The governing body usually appoints the head or director of the agency. Adhering to the rules and regulations that govern the agency, this head or director can decide on day-to-day administration and report to the governing body for information. Substantive changes or decision-making requires the approval of the governing body.

Quality assurance decisions and monitoring the credibility of the process, which are the main responsibilities of the agency, come under the purview (or responsibility) of the governing body. The governing body ensures that the quality assurance process results in thorough, informed and independent judgments. It may pay attention to the performance of the agency and guide its development. From time to time, members of the governing body may serve as members of a subcommittee or 'ad hoc' working group. They may also: attend events related to quality assurance matters on behalf of the agency; speak to groups or conferences about the work of the agency; advise agency staff thanks to their specialist knowledge or experience; or work with staff on areas of importance such as papers and monographs on cross-border education.

Box 10. Responsibilities of the governing body: Australian Universities Quality Agency (AUQA)

- The aim of the Board of AUQA is to implement the Objects of the company.
- The Board sets the context for AUQA's QA activities, within which the activities are carried out by audit panels, guided by the staff.
- In respect of audits, the Board is responsible for policies, procedures, people, and publishing.
- The Board of AUQA acts with due diligence in relation to its task of corporate governance.

Summary responsibilities of the Board

- The Board determines policies consistent with the constitution.
- The Board appoints auditors to the Register.
- The Board Chair and the Executive Director set up audit panels from the Register, with the Chair acting on behalf of the Board.
- In setting up an audit panel, the Board delegates to that panel the responsibility and authority for carrying out an audit according to the policies and procedures.
- The Board approves the release of an audit report if it is substantial in content, convincing (in terms of the evidence presented), responsibly expressed, and consistent in tone and scope with AUQA's responsibilities.

Fuller expression of functions of the Board

The functions of the Board are to:

- take responsibility for the performance of the organization, with respect to meeting the Objects of the company;
- plan the strategic direction for AUQA, having in mind the national and international context, and within the Objects defined by the constitution;
- determine the policies of AUQA, within the parameters set by the constitution;
- monitor the implementation of the policies by the Executive Director and other staff;
- confirm that the operating procedures of AUQA are carried out;
- appoint auditors to the Register;
- approve the release of audit reports;
- approve the budget of AUQA;
- appoint the Executive Director of AUQA;
- accept responsibility for the financial performance and reports of AUQA;
- submit to the Members an annual report of AUQA, including the audited accounts;
- advise the members on the constitution of AUQA;

Source: Australian Universities Quality Agency web site, AUQA policies page.

The organizational structure that translates policies and responsibilities into various activities may be more or less complex depending on its activities. As discussed earlier, the structure may require all staff members to do everything. Or there may be sections and staff for specific tasks, such as liaising with HEIs, training reviewers or developing material.

Some QAAs have an internal division of responsibilities based on functions such as general administration, training reviewers, orienting HEIs, external relations, conducting assessment visits, documentation, information system and web-related activities. The specializations may be related to major functions of the quality assurance process. They may also be a mix of both quality assurance process and the general major activities of the agency. A staff or section can be created to handle them.

There are also QAAs in which divisions can be created who look after HEIs located in specific regions or who look at specific types of institutions, rather than the functional specializations. For example, all responsibilities related to institution *X* (say, National University of Mexico), a group of institutions of a certain region (say, all universities and community colleges in Illinois), or a type of institution (say, all teacher education colleges of the country) may be given to a specific staff or unit. If the agency has more than one type of assessment, division of responsibility may also be based on the type of assessment (say, programme assessment to be handled by *X* and institutional assessment to be handled by *Y*). Often a combination of these approaches may be found. The agency must find out which type of division of responsibilities and support structure will work well in its context.

2. Necessary resources

QAAs carry out their functions with a small and competent core staff. Generally, they rely on external reviewers for assessment activities. Financial resources to run the agency are an important consideration. There are three main components of expenditure in any given quality assurance system:

- expenses related to the administration of the processes (this includes all expenses related to the running of the agency, including salaries for the staff, facilities, development of materials, and so on);
- expenses related to self-assessment exercise within HEIs. This is normally an institutional expense, but also covers all training activities; and
- expenses related to the external review. These may include fees for the external reviewers (although not all systems pay their reviewers), travel and living expenses, and other related items.

When the QAA is a government initiative set up to serve government functions, significant funding generally comes from the government itself. In a quasi-governmental structure, where the agency has a close relationship with the government but is administered by an independent governing structure, initial funding may come from the government. The actual quality assurance activity is mostly paid for by the HEI concerned. In some countries, publicly-funded HEIs are supported by the government to meet accreditation costs. There are also QAAs that receive expenses linked to the accreditation process directly from the government and therefore do not charge the HEIs. If the agency is owned by the HEIs themselves, funding for the accrediting body and process might come from the

institutions themselves. Quality assurance bodies free from government initiatives and HEIs, such as the many international quality assurance bodies that function as NGOs and professional accreditation bodies, depend on the fees they charge for the assessment services.

Considering these different cases, and the expenditures involved in running an agency, there are different funding schemes. These can involve either one or a combination of the following:

- government funding. In government-initiated systems, government provides at least the initial funding. It normally pays at least part of the expenses related to the running of the agency;
- fees from HEIs. In many systems, institutions pay for the services received. This payment normally covers all expenses related to the external review, plus the cost of training activities; and
- income received by the agency for services rendered to institutions or organizations other than those applying for accreditation. These other sources of income may be conferences, workshops, consultancies, etc.

An agency's size, budget, volume of activity and coverage differ greatly. It may vary from having two full-time staff in charge of quality assuring eight universities, to 20 full-time staff covering 16,000 HEIs. For example, in the Philippines each accrediting agency has a secretariat headed by an executive director. The secretariat of PAASCU has the largest staff. PAASCU services the largest number of educational institutions. It had 289 institutions as members in 1997 and implements 12 academic accreditation programmes. On the other hand, AACCUP has only 48 institutions as members and the least number of academic accreditation programmes. Accordingly, its secretariat has fewer staff. Funding, too, varies greatly. It can go from between a few thousand US dollars to more than a million per annum. This does not necessarily depend on the size of the agency. It can also depend on the salary structure and volume of activities, which itself depends on the agency's level of involvement in the quality assurance process.

In addition to the size of the agency, the competencies of its staff must match the role they are expected to play in the quality assurance process. In some QAAs, staff members play an active role in assessment. This can be by writing reports and/or participating in training programmes for reviewers and orientation to HEIs as experts. Such agencies require competent and experienced staff regarded as peers by the academic community, at least at the senior staff level. If the agency accredits programmes, it might wish to choose staff with those specializations. In the case of agency staff carrying out only administrative support functions, the profile of competencies should vary accordingly.

Box 11. Resources needed for the QAA: USA and Colombia

USA

Regional accrediting agencies typically have a limited number of staff perhaps 12 to 20 in all, and an annual operating budget of $2 million to $3 million, mainly covering salaries, office expenses and the holding of two or three meetings each year. Professional staff have varied backgrounds but generally have doctoral-level education, have worked at academic institutions, have good organizational skills, and are circumspect and professional in demeanour. With programme accrediting, staff often possess degrees and training specific to the professional area of interest, for example, in engineering or nursing.

Source: El-Khawas, 2001: 14.

Colombia

The Council has its own headquarters and budget, appropriated on a yearly basis by the National Department of Planning and the Ministry of Finance. This budget is part of the Nation's Budgetary Law, and is allocated as resources required for the "implementation of the National Accreditation System". In compliance with CNA decisions, the Council's budget is executed through ICFES. Currently, resources are assigned to the operating expenses of the Council, as well as to any other expenses involved in the visit for assessment of original conditions, which is made to an institution that applies for voluntary accreditation of its academic programmes. Moreover, the budget covers costs involved in seminars and workshops attended by Higher Education Institutions that deal with matters related to accreditation and evaluation, expenses resultant to information technology, dissemination of publications issued by CNA, and partial funding of self-evaluation projects towards accreditation, submitted by higher education institutions to CNA.

Source: Revelo Revelo and Augusto Hernandez, 2003: 33.

Along with institutional affiliation and funding, the QAA inherits certain expectations and terms of reference for its functioning from its providers or authorities. Consequently, the agency must determine its financial and human resource requirements according to the range and number of activities it is expected to take up.

The QAA must estimate the human resource requirement in terms of internal staff and external reviewers. Training external reviewers can also be resource intensive. In the initial phase, establishing an agency requires resources for national consultations and development of the methodology with broad consensus. On the other hand, activities such as orientation to HEIs and training programmes for reviewers need continuous attention. Once the methods have been consolidated, assessment activities and training programmes become resource intensive. Most agencies charge HEIs for the assessment activities.

3. Information system

The quality assurance outcome is valid for a specific period of time. QAAs maintain records related to the quality assurance outcome. These can include self-assessment reports that form the basis for quality assurance decisions; the review team's recommendations; institutional responses, if any; decisions of the QAA; appeals, if any; and their outcomes during this period. The agency must keep the information provided by HEIs, information considered by reviewers, evidence for quality assurance decisions and data on the process during the period for which its decisions are valid. It must be well organized. This is especially important when quality assurance decisions can be challenged and if the quality assurance outcome might have serious implications. This type of data handling is about supporting the assessment functions. Another type of information system is also of concern to some agencies: the public information system for quality assurance outcomes.

Some agencies go beyond supporting the assessment functions and extend it to making as much data as possible available to the public and to the other national databases. This is to ensure that the information provided by HEIs is reliable, that the information considered by reviewers is appropriate, that the data based on which judgments are made are valid, and that meaningful use is made of the data collection. Critical data in the institutional reports may feed into other national databases. Or, some institutional data may be derived from other national databases for further consideration or for cross-validation of data provided by the HEIs. However, it should be noted that the HEIs will want to give a significant amount of information for assessment purposes only. In many cases, they will provide sensitive and strategic information to be used for evaluation only because they know it will not be published. It is here that the QAAs should be clear about the type of information they will make available to the public and the type of data they will need to support the assessment functions.

There are good reasons for separating information handling to support assessment functions and information handling towards public disclosure. One is that while provision of accurate, valid and reliable information to public information systems may be one of the requirements for accreditation, it should never be confused with the information required to make decisions about an institution's quality. This is true even if at least part of the two sets of information overlap. In this sense, all higher education systems should determine which data must feed into their public information systems. It is the HEI's responsibility to provide them.

The QAA must inform and respond to the public in accordance with the legislation or context relating to its establishment. This includes making its policies, procedures and criteria public. Providing reliable information on the quality assurance outcome to stakeholders might also be within the purview of the agency. In such instances, the agency must take care of information management. Generally, agencies maintain directories and handbooks that provide the details. Some agencies have services to respond to queries from stakeholders. Websites are maintained with sections dedicated to information dissemination and queries from the public. All these contribute to the public face of the QAA.

Some amount of monitoring and follow-up requiring information handling – with varying levels of compulsion – is done by QAAs. Monitoring may be in the form of

seeking progress reports, reports on action taken or reports on the substantive changes made during the validity period of the quality assurance outcome. For example, if the HEI makes major changes to its functioning that affect it in a major way, it may have to report them to the QAA. The agency may then consider the changes and decide whether the quality assurance outcome is still valid or not. Or, a major scandal might break out in a HEI that could affect the quality of its educational offerings. A third party may also bring to the notice of the agency that the HEI provided false information to get a favourable quality assurance outcome. These are just a few examples to show that the information and data that support the quality assurance outcome must be well managed, in a form that is available for easy reference. QAAs must plan documentation and information management systems well. This is an area that needs a dedicated staff or unit specialized in handling this effectively.

It is also a challenging task to maintain the database of reviewers with details of their background. These details should include: personal and professional information; training and retraining attended; number of visits undertaken; institutions or programmes assessed; and evaluation of their site visit performance, etc. The agency may need a lot of information in order to balance the composition of the review team. This is particularly true in large and diverse systems of higher education that depend on a big pool of external reviewers, The team should have reviewers from different locations, institutional backgrounds, subject specializations, genders and religions. Using some reviewers and institutions too often and not using some of the trained reviewers must be avoided. To support this task, a well organized and updated database of reviewers is necessary. Some agencies make these details public and give feedback through their websites or directories. This strategy helps avoid misrepresentation and false information. The external reviewers' performance must be monitored, and the results of this monitoring fed back into the database. Of course, not all this information may be made public. However, if an external reviewer proves untrustworthy or the agency decides that he or she should not be appointed again, it is advisable to register the information in some way. This will avoid their re-appointment at a later date because no mention was made of their failings.

As the agency refines its methods, revises its policies, develops new plans or fixes deadlines, that information should be communicated to the stakeholders effectively. QAAs usually handle this through both traditional ways and ICTs. List servers, websites, mailing lists, newsletters, advertisements in newspapers, announcements through mass media and face-to-face discussions in academic forums are commonly used.

Activity 4

Reflect on the type of governance and organizational structure that would be effective for your country's quality assurance agency.

Credibility and accountability of the agency

QAAs must demonstrate that the quality assurance process they implement achieves the desired objectives effectively. To this end, they are accountable to many stakeholders. They must prove to them that the process is credible and ensure the objectivity of the outcome.

1. Credibility of the quality assurance process

The credibility of the quality assurance process is a combination of many different factors. These factors can concern clarity in policies; the appropriateness of the quality assurance framework; the transparency of the procedures; the integrity of the people involved; and the desired impact on the system.

To ensure the credibility of the quality assurance process, the agency must ensure that its strategies have different elements. These could be broad involvement of HEIs in helping the norms and criteria to evolve; consensus building to ensure widespread support; careful development of the methods and instruments for assessment; transparency in all its policies and practices; rigorous implementation of procedures; and safeguards to enhance the professionalism of assessment. In systems that focus on quality control, the agency may have to choose a different set of options to eliminate low quality provisions. For example, the national scenario may not be conducive to holding consultations on criteria if the quality assurance outcome will be used to close down poor quality institutions. But with a good appeals system, the agency can ensure credibility through rigorously applied clear and transparent procedures. Lots of training and working with the institutions can contribute to a good level of advocacy for the agency. In such a situation, the agency may not be able to ensure consensus among the HEIs. However, it can listen to anyone who wants to comment on the quality assurance procedures and consider worthwhile comments.

A sound framework that is responsive to change but consistent in its approach is essential. Although fine-tuning is part of the process of a newly-established agency, too many changes made too often will result in the HEIs losing their faith in the QAA. The framework should also be sensitive to the local context as well as consistent with international developments in its core elements. This can be achieved only if the agency reflects well on its objectives and is clear on what it intends to do at least for the next five to seven years. Lack of clarity in the framework will result in the agency trying to achieve sometimes contradictory objectives through the same procedure.

Once the framework is well established, many of the credibility-related issues are about the people who implement the framework. Care should be taken to select only experts known for their integrity. It is not enough for the institution to have confidence in the expertise of the reviewers. More than anything, the institution should be able to trust the reviewers. They shoud be professional in their approach to quality assurance. Indeed, the QAA has a significant role in enhancing the professionalism of the reviewers.

The qualifications and talents of the people who make up the assessment teams are critical to the credibility of the whole process. Nonetheless, the professionalism with which the accreditation process is planned and implemented by the accreditation agency is of equal importance to the success of the review team. Even the most highly qualified team can be prevented from succeeding in its work if the accreditation agency is not clear in its expectations of the team.

Team composition is another area that needs attention. It is not possible for a single reviewer to be acquainted with all aspects of the functioning of an HEI or programme. Each individual's perception of quality is influenced by many factors beyond the control of the QAA. The agency can not undo all the perceptions in a training programme, however rigorous it may be. Keeping this in mind, the agency should ensure a team composition that will result in good collective team assessment. Bringing together different skills in a team will make assessment more balanced.

It is necessary to mention the need to reflect on the issue of conflict of interest. The reviewers are experts known for their integrity. However, most agencies require them to certify that they have no involvement with the proposed institution, directly or indirectly through any close relatives, in the past or at present, as either an employee or member of any official body as a consultant or a graduate. This is to ensure and assure objectivity. The conflicts of interest the agency staff are likely to come across should also be addressed appropriately. These measures strengthen the credibility of the QAA.

Taking the HEIs as equal partners in implementing quality assurance procedures will also help in establishing credibility. In some countries, institutions do not have any say in the make-up of the review team. Consulting the institutions in constituting the team is considered good practice. Indeed, it upholds the spirit of quality assurance as an exercise in partnership. Besides, it is quite useless to send in a team whose judgment will not be accepted by the institution. It only strengthens compliance, without promoting improvement. Collecting feedback from the HEIs and those involved in the quality assurance process, and using it for further improvement, also contributes to steering the QAAs in the right direction. Having a sound appeals mechanism in place is another step the QAAs should consider in order to ensure their credibility and accountability.

In other words, the credibility and acceptance of the quality assurance process can be greatly enhanced by establishing clarity in objectives and the framework for the evaluation; adhering to those frameworks; following appropriate safeguards to ensure objectivity; considering the HEIs as equal partners; and winning the confidence of stakeholders.

There are also mechanisms to ensure that the QAA explicitly demonstrates its accountability. Some examples of ways in which agencies demonstrate their accountability are discussed in the following pages.

2. Accountability measures

To some extent, the ownership of the QAA has implications for accountability to some extent. In the case of agencies established by governments, government officials such as a representative from the Ministry of Education either sit on or chair the governing body. In addition, the government may have various

mechanisms in place, such as requiring annual reports on the performance of the agency. When owned by the HEIs, the QAA becomes accountable to the HEIs. There are wide variations in the way in which accountability measures are implemented. Some of them are discussed below.

Option 1: Built-in checks in the functioning of the QAA brings an element of accountability

Many built-in checks ensure that stakeholders are involved in shaping and monitoring the quality assurance processes. Having the various stakeholders and in particular a cross-section of academia represented in the governing bodies is one way of ensuring that the agency remains accountable. Some agencies have representatives of the public. Others involve a representative of users of educational services in the governing board. There are QAAs whose procedures for receiving nominations of representatives of the public to the governing board are elaborate. In general, agencies submit their plans and annual reports to the governing bodies. These may even be made public to ensure transparency and enhance accountability. Making the reports public helps make agencies accountable. Having international presence in the governing bodies is another way to ensure that the policies and procedures are sound enough. However, these practices depend to a great extent on the affiliation of the QAA.

To cite a few examples, the BAN-PT of Indonesia, due its affiliation to the government, submits annual reports to the government and its activities are guided by the annual budget allotted to it by the government. The Ontario Council on Graduate Studies (OCGS) established by the Council of Ontario Universities (COU) has the mandate to report in writing to COU at least once a year on its activities of the past year.

Option 2: An umbrella organization may look into the accountability of the quality assurance agencies

QAAs may seek recognition from an umbrella body as an accountability measure. In the USA, the regional accrediting bodies established by the HEIs seek recognition either from the Council on Higher Education Accreditation (CHEA) or from the US Department of Education. Although seeking recognition by these bodies is voluntary, federal funds such as the student aid fund will flow only to institutions accredited by a recognized agency. Accrediting bodies that seek recognition by the CHEA must demonstrate that they meet CHEA standards. Accrediting organizations are expected to advance academic quality, demonstrate accountability, encourage improvement, employ appropriate procedures, continually reassess accreditation practices and have sufficient resources. Recognition is evaluated in a similar way to the accreditation exercise of the HEIs, with self-study and external review. In that process (of every six years), there are even sessions open to the public.

In Australia, the AUQA is responsible for conducting quality audits of state and territory government higher education accreditation authorities on a five-yearly cycle. The relevant department is responsible for action taken in response to audit reports. Audit by the AUQA serves as an accountability check for the accreditation authorities.

Box 12. Accountability of accreditors: Council for Higher Education Accreditation (CHEA)

CHEA carries forward a long tradition that recognition of accrediting organizations should be a key strategy to ensure quality, accountability, and improvement in higher education. Recognition by CHEA affirms that standards and processes of accrediting organizations are consistent with quality, improvement, and accountability expectations that CHEA has established. CHEA will recognize regional, specialized, national, and professional accrediting organizations.

CHEA recognition of accrediting organizations has three basic purposes:

- TO ADVANCE ACADEMIC QUALITY. ...
- TO DEMONSTRATE ACCOUNTABILITY. To confirm that accrediting organizations have standards that ensure accountability through consistent, clear, and coherent communication to the public and the higher education community about the results of educational efforts. Accountability also includes a commitment by the accrediting organization to involve the public in accreditation decision-making.
- TO ENCOURAGE PURPOSEFUL CHANGE AND NEEDED IMPROVEMENT. ....

Source: Council on Higher Education Accreditation web site.

Option 3: Voluntary co-ordination in regional networks and adherence to their standards and criteria

QAAs may voluntarily join together as networks and follow commonly agreed on principles or practices. Although accountability may not be the main drive for them to join networks, adherence to common standards and criteria does serve to demonstrate the agency's accountability. The good practices developed by the INQAAHE and the ENQA are examples. *Box 12* presents part of the good practices listed by the INQAAHE, with reference to accountability to the public. The full set of principles are available on the INQAAHE web site.

Box 13. Guidelines of good practice (INQAAHE)

In its work, the EQA Agency informs and responds to the public in accordance with the legislation or cultural context relating to the agency. This includes making public and explicit its documentation e.g. policies, procedures and criteria.

The agency also demonstrates public accountability by reporting openly on its review decisions and making the outcomes of the evaluation public in a way appropriate to the relevant country legislation and the type of review undertaken. The content of the public report may differ depending on the cultural context and will also depend on the requirements set for accountability.

Source: International Network for Quality Assurance Agencies in Higher Education web site.

Option 4: Periodic assessment of agencies as a way to demonstrate accountability

There is growing awareness of the benefits of meta-evaluation or 'evaluating the evaluation' to ensure accountability. The good practices of QAAs support this. European QAAs are expected to submit themselves to a cyclical review every five years. Some agencies conduct impact studies and mid-correction reviews that contribute to understanding the progress towards realization of objectives. Some agencies invite international experts to observe assessment visits, participate in training programmes and consultations, and give feedback. The HEQC of South Africa has an International Reference Group with three members who act as a sounding board for its development. The AUQA and CNE of Chile are in the process of undergoing external reviews.

Option 5: Register of agencies to ensure accountability

Although this option is yet to become functional, there are discussions about making it operational. The QAAs of the European region have agreed to accept the strategy leading towards a 'Register of external QAAs operating in Europe'. *Box 13* illustrates how this register is likely to take shape.

Box 14. Standards and guidelines for quality assurance in the European higher education area (ENQA)

ENQA committed itself before the Berlin Ministerial meeting of 2003 to develop in cooperation with the relevant stakeholders a European register of quality assurance agencies, covering public, private, and thematic agencies, operating or planning to operate in Europe.

The register would meet the interest of higher education institutions and governments in being able to identify professional and credible quality assurance agencies operating in Europe. The interest has firstly its basis in the complicated area of recognition of non-national degrees. Recognition procedures would be strengthened if it were transparent to what extent providers were themselves quality assured by recognized agencies. Secondly, it is increasingly possible for higher education institutions to seek quality assurance from agencies across national borders. Higher education institutions would of course be helped in this process by being able to identify professional agencies from a reliable register.

.....

A European Register Committee will decide on admissions to the European register. The committee will use agency compliance with the European standards for external quality assurance agencies as identified in the cyclical review as one criterion for placement in the register. Other criteria should be developed which will take account of the diversity of the higher education systems.

Source: European Association for Quality Assurance in Higher Education, 2005.

In 1999, when the IAUP and INQAAHE proposed a Quality Label similar to the quality register to identify credible external quality assurance agencies, there was opposition to the concept. Consequently, the INQAAHE dropped the idea of a quality label but developed a set of good practices that were discussed earlier.

Considering these options and the national context will help in making choices for the establishment, management, organization and control of the QAA.

Activity 5

1. What direct or indirect accountability measures operate in quality assurance in your country?

2. Reflect on the accountability measures that would work well for the quality assurance agency in your national context.

Lessons learnt

Lesson 1: The quality assurance agency must be independent both of government and of the higher education institutions

It has become good practice for the quality assurance agency to have a sufficient level of autonomy as regards both the state bureaucracy and the academic community. As a consequence, it always functions either as a private or as a semi-autonomous agency. This is necessary because the agency must develop trust within the academic community. It either works independently or operates as a buffer between the government and the higher education sphere. Once the role of the buffer organization is fully approved, the agency may try to become independent of state administration and gain a new role. In all cases, co-operation and communication between the government and the agency are nonetheless considered important.

Lesson 2: The quality assurance agency plays a crucial and often substantive role, but it should not intervene in the expert review process

The role played by the quality assurance agency is either solely administrative, or both administrative and substantive. The agency is usually involved in developing the methodology and procedures for quality assurance. It plans and organizes the quality assurance processes. It is often involved in selecting the team of reviewers and may take part in its training, or at least in its briefing. Sometimes, the agency sends one of their regular staff with the review team so as to make the processes more comparable. Agencies tend to start with an administrative role. Once they gain legitimacy in the system, they begin to play a more substantive role. In order to maintain transparency, however, it is very important to clearly distinguish the roles of the agency and the review team, this latter being responsible only for making a professional judgment.

Lesson 3: Developing trust is crucial in the initial stages of establishing the quality assurance system

Trust can be gained through transparency. It can be enhanced, for example, when the institution has a say in the composition of the external team and can oppose reviewers due to conflict of interest. The institution may also be able to make comments on the external report. Transparency can also be improved by actively disseminating information on quality assurance instruments and reports to the public. It is good practice to publish quality assurance reports on the Internet or in professional journals, as well as the criteria and guidelines for the assessment and grading.

Lesson 4: Establishing an EQA system needs expert knowledge and running it is resource intensive

Establishing and running an EQA system requires continuous commitment to release the necessary financial and human resources. Specialized expert knowledge will be required for developing and operationalizing the quality model and developing documentation for use at all stages of the quality assurance process. Quality assurance agencies must frequently assist the higher education sector in building up capacity for meaningful self-assessment. They must also help them to develop a team of assessors to act as experts. These processes take time and must be adequately resourced.

Lesson 5: Quality assurance must enhance quality in the long run

Quality assurance is not an end in itself. Moreover, the existence of a quality assurance mechanism does not necessarily and automatically imply that the higher education system is of adequate quality. A quality assurance agency must always be at the service of the quality of higher education, at either the individual institution, programme or system level. Therefore, it is only as good as the quality it promotes or assures.

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Web resources

Academic Quality Improvement Programme web site, USA: www.aqip.org and www.aqip.org/index.php?option=content&task=view&id=24&Itemid=39

Association of Professional Engineers of Nova Scotia (APENS) web site, Canada: www.apens.ns.ca

Australian Universities Quality Agency (AUQA) web site: www.auqa.edu.au

Australian Universities Quality Agency (AUQA) web site, AUQA policies page: www.auqa.edu.au/aboutauqa/policies/003/index.shtml

Badan Akreditasi Nasional Perguruan Tinggi (BAN) web site, Indonesia: www.ban-pt.net

Council on Higher Education (CHE) web site, South Africa: www.che.ac.za

Council on Higher Education Accreditation (CHEA) web site, USA: www.chea.org

Danish Evaluation Institute (EVA) web site: www.eva.dk

European Association for Quality Assurance in Higher Education (ENQA) web site: www.enqa.net

Hong Kong Council for Academic Accreditation (HKCAA) web site: www.hkcaa.edu.hk

International Network for Quality Assurance Agencies in Higher Education (INQAAHE) web site: www.inqaahe.org

Lembaga Akreditasi Negara (LAN) web site, Malaysia: www.lan.gov.my

National Assessment and Accreditation Council (NAAC) web site, India: www.naac-india.com

National Council for Higher Education Accreditation (NCHEA) web site, Mongolia: www.accmon.mn

New Zealand Universities Academic Audit Unit (AAU) web site: www.aau.ac.nz

Ontario Council for Graduate Studies (OCGS) web site, Canada: http://ocgs.cou.on.ca

Quality Assurance Agency (QAA) web site, UK: www.qaa.ac.uk

The modules on External quality assurance: options for higher education managers

Quality assurance has become a topical issue on the higher education policy agenda. More and more countries are questioning their existing structures and are introducing new mechanisms and structures for external quality assurance. They seek to ensure minimum educational standards across diversified higher education systems and to provide a lever for continuous quality improvement.

The present material was developed by UNESCO's International Institute for Educational Planning (IIEP). It targets decision-makers and managers in government departments such as ministries of education, buffer organizations of higher education and quality assurance agencies whose task it is to design or develop the national framework for quality assurance. These modules should provide support for their decisions on external quality assurance systems, while discussing options that have been tried out successfully in a variety of countries.

The modules are based on the outcomes of two IIEP case study research projects, one on "methodological and organizational options in accreditation systems" and another on "regulation and quality assurance of cross-border providers of higher education".

Accessible to all, the modules are designed to be used in various learning situations, from independent study to face-to-face training. They can be accessed on the IIEP web site www.unesco.org/iiep, and will be revised as needed. Users are encouraged to send their comments and suggestions.

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External quality assurance:
options for higher education managers

Module 4

Understanding and assessing quality

United Nations
Educational, Scientific and
Cultural Organization

International Institute
for Educational Planning

External quality assurance: options for higher education managers

These modules were prepared by IIEP staff and consultants to be used in training workshops or by individuals as self-study materials. IIEP is also using this material for its distance education courses.

The set of modules is available at www.unesco.org/iiep

Also available on IIEP's web site:

- Quantitative research methods in educational planning
- Reforming school supervision
- HIV/AIDS and education
- Using indicators in planning Education For All

Other sets will be available soon.

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Module 4

Objectives of the module **4**

Questions for reflection **4**

Introduction **5**

Understanding quality **7**

1. Different understandings of quality 7
2. Quality in higher education 8
3. Defining the basic terms 13

Approaches to quality assurance **21**

1. Standards-based vs. fitness-for-purpose 21
2. Minimum requirements vs. standards of high quality (or good practice) 26

Areas of quality assessment **29**

Quality assurance decision-making **33**

1. Different approaches to using standards 33
2. Reliance on quantitative assessment 35
3. Reliance on professional judgment 40
4. Flexibility to suit the context 41

Lessons learnt **46**

References and further reading **50**

List of abbreviations

AACCUP	Accrediting Agency of Chartered Colleges and Universities of the Philippines
AASC-AA	Association of Christian Schools and Colleges – Accrediting Agency
AICTE	All India Council for Technical Education
AQIP	Academic Quality Improvement Program
AUQA	Australian Universities Quality Agency
BAN-PT	*Badan Akreditasi Nasional - Perguruan Tinggi* (National Accreditation Board for Higher Education, Indonesia)
CA	Chartered Accountant
CHE	Council of Higher Education (South Africa)
CICA	Canadian Institute of Chartered Accountants
CNA	National Council for Accreditation (Colombia)
CNAP	*Comisión Nacional de Acreditación* (National Commission of Accreditation, Chile)
CSE	*Consejo Superior de Educación* (Chile)
FFP	Fitness for Purpose
FOP	Fitness of Purpose
FTE	Full-time Equivalent
HEFCE	Higher Education Funding Council of England
HEI	Higher education institution
HEQC	Higher Education Quality Committee (South Africa)
IIEP	International Institute for Educational Planning
INQAAHE	International Network for Quality Assurance Agencies in Higher Education
MSCHE	Middle States Council for Higher Education (USA)
NAAC	National Assessment and Accreditation Council (India)
NBA	National Board of Accreditation (India)
PAASCU	Philippine Accrediting Association of Schools, Colleges and Universities
PACU-COA	Philippine Association of Colleges and Universities – Commission on Accreditation
PI	Performance Indicator
QA	Quality Assurance
QAA	Quality Assurance Agency
QR	Quality Research
UK	United Kingdom
USA	United States of America

List of boxes

Box 1 Quality = Fitness-for-Purpose (FFP): the definition for all seasons 11

Box 2 Performance Indicators (PIs) proposed by the UK Jarratt Report (1985) 15

Box 3 Standards and criteria: USA, South Africa and India 17

Box 4 Types of benchmarks 19

Box 5 Standards: quantitative and qualitative standards for establishing a new institution to offer undergraduate programmes in engineering and related areas 22

Box 6 Balancing the different emphases of quality: the Higher Education Quality Committee of South Africa 24

Box 7 The Chilean QAA's stand 26

Box 8 Licensing of new private institutions in Chile 27

Box 9 Standards for quality assurance: programme accreditation by the four accrediting associations of Philippines 29

Box 10 Move towards competency-based standards of professional bodies (USA) 34

Box 11 The competency map: Canada 35

Box 12 Variables and indicators of a characteristic (Colombia) 36

Box 13 Research indicators 38

Box 14 Quantification to guide peer assessment: NBA (India) 39

Box 15 Indicative scope: AUQA 41

Box 16 Flexibility in self-assessment: USA 42

Box 17 Flexibility in the definition of standards 43

Box 18 Flexibility to suit the institutional context 44

Objectives of the module

This module will:

- describe the various ways of defining or understanding quality;
- define basic concepts used in the assessment of quality such as standards, criteria, indicators and benchmarks;
- explain the areas generally analyzed in quality assessment;
- discuss the various methods of quality assessment; and
- highlight the characteristics of the various understandings and methods of quality assessment.

On completion of this module, you are expected to be able to do the following:

- appreciate variation in the definition of quality;
- understand the common areas considered for assessing quality;
- identify the focus and methodologies of various approaches to quality assessment; and
- analyze the characteristics of the understanding and method that would be effective in your national context.

Questions for reflection

What should be the main emphasis in my country's definition of quality?

What are the five most important areas that the quality assurance agency in my country should look into and for what reasons?

Which understanding and method of quality assessment would be most suitable for my country?

Module 4

Introduction

Modules 1 and *2* gave the broad background of the quality assurance scenario and the options available to the quality assurance agency (QAA) to plan its mechanisms. *Module 3* paid specific attention to the actual establishment, functioning and role of the agency and the various steps it encounters in its operation. Following on from this, *Module 4* will discuss the various ways of understanding quality. It will also consider the methods of assessing it.

Quality assurance agencies (QAAs) differ greatly in the way in which they define quality and the methodologies they put in place to assess it. The difference starts from the meaning they give to quality and the assumptions that underlie their quality assurance policies. Consequently, the methodologies they adopt for assessing quality vary. Some agencies follow the 'fitness-for-purpose' definition of quality and look into the ways in which higher education institutions (HEIs) or programmes fulfil the objectives they aim to achieve. Attention is paid in this approach to the goals and objectives of HEIs or programmes, as well as institutional diversity. There are QAAs that emphasize pre-determined sets of standards for the HEIs or the programmes they quality assure. Compliance to norms becomes the focus here.

Again, in some instances, quality assurance aims to ensure only the minimum requirements for a particular status. Such approaches are generally meant for compliance purposes. The outcome has implications for approvals and sanctions. On the other hand, some QAAs set standards of high quality. In these cases, the frame of reference for assessment is 'excellence' and not just fulfilment of minimum requirements. Such standards usually co-exist with other mechanisms that ensure the minimum requirements.

Some QAAs set standards for quality by identifying the processes and practices required in quality systems. They then use these as benchmarks for relative judgment. Others identify indicators against which the performance of a system can be measured. In these approaches, the terms 'performance indicator' and 'indicator of quality' (like 'standards' and 'benchmarks') are used interchangeably. Indeed, the same term can be used by different bodies to refer to different measures. In general, well-developed systems with strong internal quality assurance mechanisms rely more on the indicators and benchmarks HEIs set for themselves than on externally set ones. In those systems, improvement towards higher levels of performance and peer assessment are central to the quality assurance framework. In emerging systems where there is a mix of accountability

and self-improvement concerns for HEIs, QAAs use both quantitative indicators and peer review carefully.

The unit of quality assurance can also vary. While some QAAs follow the institutional approach, others follow the programme approach (see *Module 1*). Although the unit of quality assurance might vary, it must necessarily cover aspects such as academic programmes, students, academic staff, internal quality control, infrastructure, research, outreach, organization and management. For example, the institutional accreditation of the National Assessment and Accreditation Council (NAAC) of India; the regional accreditors' standards in the United States of America (USA); and the programme accreditation of Indonesia's National Accreditation Board for Higher Education (BAN) all cover the above-mentioned areas. The difference lies in the level of detail the agencies look for, as well as in the focus and extent of reliance on quantitative indicators vs. peer assessment.

The need for quality assurance to use peer assessment or the judgment of higher education practitioners is well recognized. This is true even of approaches that rely more on indicators and quantitative norms. This module will discuss these issues, with examples and case studies.

Understanding quality

In *Module 1*, you were briefly introduced to some of the complexities in the debate on the quality of higher education. Indeed, QAAs differ greatly in the definition of quality they adopt and the methodologies they put in place for assessing quality. The difference starts with the mandate they are given. It ranges from the quality-related aspects they wish to consider within the given mandate and the assumptions that underlie their quality assurance practices.

1. Different understandings of quality

Many sectors have debated how to define quality. A commonly quoted remark in discussions about quality is: "Quality…you know what it is, yet you don't know what it is" (Pirsig, 1974). Another common quote is: "Some things are better than others; that is, they have more quality. But when you try to say what the quality is, apart from the things that have it, it all goes poof".

Chambers dictionary defines quality both as "grade of goodness" and as "excellence". This indicates the ambiguity in its meaning: namely, that it can mean both 'good' and 'how good'. Similarly, among other things, *Webster's* dictionary describes quality, as a "degree of excellence" and "superiority in kind". The *Oxford English Dictionary* (OED) gives similar definitions – the "degree of excellence of a thing", "general excellence" and "of high quality". 'Degree of excellence' implies that you can talk about something of good quality or poor in quality. The other definitions imply that 'quality' itself means excellence (as in 'quality product' or 'their work has quality'). Such ambiguity leads to many interpretations. It is therefore necessary to describe what is meant by the term in any particular context.

Historically, the concept of quality assurance evolved from the manufacturing sector (*OED*, 2006). In this sector, quality is about minimizing variability and ensuring that manufactured products conform to clear specifications. The essence of this concern is that customers could expect the product to perform reliably. Quality therefore means '**zero defects**'.

While manufacturing companies focus on controlling product variability, service businesses have a more comprehensive view of quality. They are concerned not only with minimizing defects, but also with managing emotions, expectations and experiences. Service businesses are now shifting the focus from 'zero defects' in products to 'zero defections' of customers. In the service view of quality, businesses must recognize that specifications are not just set by a manufacturer who tells the consumer what to expect. Instead, consumers may also participate in setting specifications. Here, quality means '**consumer satisfaction**'.

In software and information products, the concept of quality usually incorporates both the conformity and service views of quality. On the one hand, there are a basic set of features that must always work. On the other hand, when customers have problems using a software package, they define quality according to the technical support they experience. The idea of quality in software products has yet another dimension. Software users expect a continuous stream of novel features:

upgrades; high performance and reliability; and ease of installation, use and maintenance. Their perception of quality consists of a **synthesis of conformity, adaptability, innovation and continuous improvement**. In many ways, this is the way quality is perceived in higher education – as a synthesis of a range of expectations of many stakeholders.

2. Quality in higher education

Many stakeholders in higher education would find it difficult to define quality precisely. In reality, it is a relative concept that means different things to different people. For instance, while discussing the quality of an HEI, students may focus on the facilities provided and the perceived usefulness of education for future employment. Teachers, on the other hand, may pay attention to the teaching-learning process. Management may give importance to the institution's achievements. Parents may consider the achievements of their children. Finally, employers may consider the competence of the institution's graduates. Each stakeholder has a different approach to defining quality. It is not possible, therefore, to talk about quality as a single concept. Any definition of quality must be defined in terms of the context in which it is used. In the case of HEIs, we should bear in mind that an institution may be of high quality in relation to one factor or in the perspective of a category of stakeholders, but of low quality in relation to another.

Considering these factors, Harvey and Green (1993) and Green (1994) have identified many approaches to the viewing of quality. Green (1994) lists five different approaches to quality in the field of higher education. She considers that it can be viewed:

- in terms of the exceptional (highest standards);
- in terms of conformity to standards;
- as fitness for purpose;
- as effectiveness in achieving institutional goals; and
- as meeting customers' stated or implied needs.

Quality as exceptionality

This is the more traditional concept of quality. It is associated with the notion of providing a product or service that is distinctive and special, and which confers status on the owner or user. In higher education, an institution that demonstrates exceptionally high standards is seen as a quality institution.

This approach may be applicable for 'excellence awards' or to identify a very few high-level institutions. But it poses a practical problem for QAAs. A QAA may commend institutions that demonstrate exceptional standards. However, it is not possible for the agency to condemn all other institutions. That would not serve accountability or self-improvement purposes. Therefore, a 'quality as exceptionality' approach is not generally in vogue among QAAs. However, there may be areas in higher education where this approach is necessary. This could include, for example, evaluating doctoral programmes or cutting-edge research.

There may even be some institutions within a system which choose to be assessed against criteria of excellence (such as flagship universities). Thus, while it cannot be used across the higher education system, excellence cannot be dismissed as one of the ways in which quality is defined.

Quality as conformance to standards

This view has its origins in the quality control approach of the manufacturing industry. Here, the word 'standard' is used to indicate pre-determined specifications or expectations. As long as an institution meets the pre-determined standards, it can be considered a quality institution fit for a particular status.

This is the approach followed by most regulatory bodies for ensuring that institutions or programmes meet certain threshold levels. Conformity to standards may result in approval to start programmes or recognition for a particular status or funding depending on the context. Of course, the issue of standards becomes crucial here. Sometimes they are defined in a formal way. This could be, for example, the number of full-time professors, the percentage of them with final degrees, or the number of articles published per full-time equivalent (FTE) faculty member. While this makes assessment fairly easy, it may also make it irrelevant. Indeed, it is usually possible to comply with formal requirements without paying attention to the substantive issues they are meant to safeguard.

Quality as fitness for purpose

This approach is based on the view that quality has no meaning except in relation to the purpose of the product or service. Obviously one does not need a super computer to do basic multiplications. What may be considered a quality system for basic computation is different from what is required for scientific experiments. However, this approach begs the questions: 'Who will determine the purpose?' and 'What are appropriate purposes?'. The answers to these questions depend on the context in which quality is viewed. The purposes may be determined by the institution itself, by the government, or by a group of stakeholders.

Quality as effectiveness in achieving institutional goals

This is one version of the 'fitness-for–purpose' approach mentioned above, in which the purposes are determined by the institution. In this approach, a high quality institution is one that clearly states its mission (purpose) and is efficient in achieving it. This approach may raise issues such as the way in which the institution might set its goals (high, moderate or low), and how appropriate those goals could be.

Quality as meeting customers' stated or implied needs

This is also a variation of the fitness-for-purpose approach. This is where the purpose is customer needs and satisfaction. The issue here is whether customer satisfaction can be equated with what is good for the customer. Are 'needs' the same as `wants'? In higher education, this would mean that what students want may not be the same as what is actually good for them. It is more reliable to

consider different groups such as government, students and parents in determining 'customer needs' and 'customer satisfaction', rather than a single category of customers, such as students.

Phrases or notions such as 'value for money', 'added value' and 'transformative process' are also used to define quality in higher education. In the 'value for money' point of view, something has quality when it meets the expectations of consumers in relation to the amount they pay for it. Quality therefore corresponds to the satisfaction of consumers. These consumers may be students (who are direct consumers and invest their active time in learning), parents (who pay for the educational services of their children) or the government (that sets national policies and invests public money for educational services). From the 'added value' point of view, an institution that enables a student to enhance his/her knowledge, competence and employability is seen as successful in its efforts and therefore in generating quality. The transformative process considers how higher education plays a role in developing a variety of generic competences in students, apart from providing them with a body of academic knowledge.

While Harvey and Green (1993) and Green (1994) have explored and differentiated every possible definition of quality, there has been criticism that the ramifications of so many definitions of the term might be unhelpful. For example, the 'transformation', 'value added', and 'value for money' definitions of quality prompt criticism that they are all characteristics 'expected as outcomes' of processes. If one does not pay attention to 'what is expected', the definitions will coil back, rendering them meaningless. It is here that 'fitness for purpose' FFP is seen by some quality assurance experts as a meaningful way of defining quality. *Box 1* explains how quality viewed as FFP can embrace all the definitions described above.

Box 1. Quality = fitness-for-purpose (FFP): the definition for all seasons

We have a historic meaning of quality as exceptionality, and a gradual shift in usage to refer, sometimes but not always, to serviceability. In the early 1990s, there was much debate over the meaning of the word 'quality', particularly as it applies to higher education, and several lists of alternatives were produced. Some protagonists attempted to argue for a single meaning, while others preferred to use a group of meanings. The proposed definitions include transformation, value-added, value-for-money, and customer perception.

One commonly-proposed definition was that quality is 'fitness-for-purpose' (FFP). It can be argued that this is not just 'one definition among many' but rather that 'fitness-for-purpose' is a definition that includes (almost) all the others, and therefore provides an 'organizing principle' for approaches to the achievement and checking of quality. It is, furthermore, a principle that acknowledges the difficulties inherent in defining and achieving quality in complex systems and addresses these in an appropriate way. It explicitly separates from FFP the prior concept, namely 'fitness-for-purpose'.

If you set out to do something exceptional, then Q=FFP aligns quality with being exceptional; set out to transform students and Q=FFP becomes quality as transformation; set out to add value, and Q=FFP becomes quality as value-added. For a complex organization, the 'purpose' is likely to be a composite concept, set out in a range of statements, such as the mission, goals, objectives, specifications, and so on, but the concept of first identifying the purpose, then setting out to achieve it, is conceptually the same.

FFP embraces the different types of institution, with their different goals: the special-purpose university, the general university, the vocational college, the institute of technology. All can define their purpose(s) and achieve quality on the same definition but in their own terms. Within one institution, the multiplicity of purposes can be acknowledged, as the institution provides a context in which different people can move differently and achieve different personal goals.

Defining quality as FFP is a liberating idea because of its enormous flexibility. It does not restrict us to a prior notion of what quality should be, but encourages the identification of a whole range of purposes, and then a striving to achieve them. In a bicultural and multi-cultural society, in a society that must be conscious of its place in a wider world, this is a valuable concept.

In some cases, it is not easy to specify a precise 'purpose'. However, this does not undercut the definition of quality as fitness for purpose. Rather, it shows that the specification of purpose is essential before we can meaningfully investigate quality. In fact, some people choose to define quality as 'fitness-for-purpose', to emphasise that a trivial or useless purpose is not going to result in good quality. However, a good purpose, badly implemented, is equally unsatisfactory. Thus, ensuring fitness for purpose is essential to achieving quality.

One can say therefore that Q=FFP embraces all the other definitions.

Source: Woodhouse, 2006.

It is important to note that there is no one right definition for quality. All the concepts above (and others) are valuable. However, when a QAA chooses a particular definition, it must be clearly specified. When we discuss different approaches to quality assurance in the latter part of this module, we will see that no one perspective of quality may be good by itself. Indeed, agencies must synthesize different understandings to suit their purposes.

Activity 1:

1. Fill up the blanks:

Quality is.....; but.....

Quality may be .....; but .....

Quality can be .....; but.....

Quality ought to be .....; but.....

Quality is not necessarily.....; but.....

Quality is.....as well as.....

2. Read the references 5 (DAVID WOODHOUSE (2006)

Quality = Fitness for Purpose (FFP): Definition for all seasons, Paper presented in the APQN Conference on Cooperation in Quality Assurance, Shanghai, 1-4 March 2006) to be found on the Asian and Pacific Quality Network web site (http://www.apqn.org/events/past/details/32/presentations/) and 8 (GREEN D (1994) What is Quality in Higher Education, SRHE and Open University Press, Buckingham) listed in the bibliography to enhance your understanding of the `quality debate'.

3. Reflect on the scenario of your country and list three priority items that should be considered to define quality in your national context.

3. Defining the basic terms

QAAs develop their procedures for quality assurance from the notion of quality. To do so, they use a variety of terms, such as statistics, indicators, criteria, standards and benchmarks. Agencies use the terms 'indicators', 'performance indicators' and 'indicators of quality' rather loosely. The same is true of the terms 'criteria', 'standards' and 'benchmarks'. Often, the same term is used by different bodies to denote different understandings and measures. This module may be more useful to readers if we are consistent in using terms. In the following pages, an attempt is made to define the terms distinctly as well as in relation to one another. Most of the definitions are drawn from the background note prepared by the author for the APQN project on "Indicators of Quality".

Statistics and indicators

We know that 'statistics' is a branch of mathematics that deals with the systematic collection, organization and analysis of data. **Statistical data relates to facts and items treated statistically, or collected and organized systematically that can be analyzed**. Simple forms of statistics have been used since the beginning of civilization, when pictorial representations or other symbols were used to record numbers of people, animals and inanimate objects on skins, slabs, sticks of wood, or the walls of caves. Before 3000 BC, the Babylonians used small clay tablets to record tabulations of agricultural yields and of commodities bartered or sold. The Roman Empire was the first government to gather extensive data about the population, area, and wealth of the territories that it controlled. During the Middle Ages in Europe, some comprehensive censuses were taken. These are all examples of systematic collection and organization of data. From those simple beginnings, statistics has grown in significance to become a reliable means of systematically collecting data on various aspects of economic, political and sociological importance. Moreover, it serves as a tool to correlate and analyze such data. **Very often, the term statistics is used to denote statistical data. In this module, statistics means statistical data.**

QAAs collect data on many aspects of institutional functioning or programme delivery. Data collected systematically – primary and derived – are called 'statistics' with or without any value-addition. They are the building blocks of all the value-added specific terms we will come across later, such as performance indicators. For example, details like student enrolment, the academic calendar and fee structure are statistics. When they are interpreted and used to indicate something, they become indicators. Statistics by themselves are insufficient to make judgments. They must be analyzed within a specific context, or against a specific norm. This is what turns them into indicators.

Indicators can be either qualitative or quantitative. They can be measures of many aspects of quality of an institution or programme. While an indicator is a statistic, not all statistics are indicators. Indicators are value-added statistics about something that is being measured. Moreover, there is a reference point against which to interpret the indicator. In other words, indicators differ from statistics in that they are measures of aspects under review.

Some QAAs distinguish between Input Indicators, Process Indicators and Output Indicators. They thus assume that the education process resembles a production process that transforms inputs with processes into outputs and outcomes. Input

indicators relate to the resources and factors employed to produce an institution's outputs (financial resources, physical facilities, and student and staff profiles). Process indicators relate to the ways in which resources and factors are combined and used in order to produce an institution's output (management of teaching, research and services). Output indicators describe the outputs produced by institutions (products of teaching, research and services). To these may be added Throughput Indicators and Outcome Indicators. Outcome indicators are the effects of outputs (e.g. employment rates). Performance indicators provide measures of performance aspects.

Performance indicators (PIs)

The indicators used to evaluate an institution, or to judge the effectiveness of a programme, are often referred to as 'performance indicators'. The idea of performance evaluation in higher education has been borrowed from economics. In this sense, the success of a system or institution is related to its productivity in terms of effectiveness and efficiency. As a result, one may often come across Effectiveness Indicators and Efficiency Indicators in discussions on performance indicators. Effectiveness indicators deal with the extent to which an activity fulfils its intended purpose or function. This could include completion rates, graduate employment rates and student satisfaction, among others. Efficiency indicators deal with the extent to which an activity achieves its goal while minimizing resource usage. This could include, for example, staff-student ratios, unit costs, space utilization, or time to graduation.

The publication of the Jarratt Report (1985) by the Committee of Vice-Chancellors and Principals in the UK generated considerable interest across the world in the use of indicators in evaluating different aspects of higher education. A very large number of such indicators have been identified. Most of them are related to the performance of institutions. As many as 264 were listed by Bottrill and Borden in 1994 (by now, many more may have been added). *Box 2* lists the PIs listed in the Jarratt report and those currently used by the Higher Education Funding Council of England.

Box 2. Performance Indicators (PIs) proposed by the UK Jarratt Report (1985)

Internal Performance Indicators

- Market share of undergraduate applications (by subject)
- Graduation rates and classes of degrees
- Attraction of masters and doctoral students
- Success rate of higher degrees and time taken
- Attraction of research funds
- Teaching quality

External Performance Indicators

- Acceptability of graduates (postgraduates) in employment
- First destination of graduates (postgraduates)
- Reputation judged by external reviews
- Publications by staff and citations
- Patents, inventions, consultancies
- Membership, prizes, medals of learned societies
- Papers at conferences

Operational Performance Indicators

- Unit cost
- Staff-student ratio
- Class sizes
- Course options available
- Staff workloads
- Library stock availability
- Computing availability

Currently in use by the HEFCE

Published annually, the performance indicators (PIs) provide comparative data on the performance of higher education institutions in widening participation, student retention, learning and teaching output, research, and employment of graduates. They cover all publicly funded higher education institutions in the UK.

The performance indicators cover the following areas:

- access to higher education - how successful institutions are in recruiting students from under-represented areas and backgrounds
- the proportion of students who do not continue beyond the first year at an institution
- projected completion rates based on current movement of students between years of study
- the proportion of graduates who are employed or undertaking further study six months after graduation
- research output.

(For each of the above mentioned areas, performance indicators have been identified and for one of the areas the indicators are listed below)

- Under Research Output there are four indicators and they are:
- proportion of PhDs awarded per proportion of academic staff costs
- proportion of PhDs awarded per proportion of funding council QR funding allocation for research
- proportion of research grants and contracts obtained per proportion of academic staff costs
- proportion of research grants and contracts obtained per proportion of funding council QR funding allocation for research.

Source: Higher Education Funding Council of England web site.

The basic purpose of a PI is obviously to evaluate the performance of a system, institution or organizational structure. The indicator may be used for various purposes: to monitor, support decisions, compare, evaluate and improve. PIs help to identify problems. However, they are not able to establish causal relationships. For instance, the HEFCE uses the PIs for funding decisions. An institution may like to use PIs to compare its performance on certain aspects with a similar institution. A QAA with an 'improvement' agenda may like to draw the attention of the institution or the government to areas needing further improvement. Depending on the use to which PIs would be put, QAAs use a combination of approaches. Using performance indicators for quality assurance is complex. We will discuss this further in the latter part of this module.

Standards

This is also a term that came from industry. Standards are sets of characteristics or quantities that describe the features of a product, process, service, interface or material. 'Standards New Zealand' defines standards as specifications that define materials, methods, processes or practices. In industry, standards provide a basis for determining consistent and acceptable minimum levels of quality, performance, safety and reliability. For example, the format of credit cards that enables them to be used anywhere in the world is defined by international standards.

In higher education and quality assurance, 'standard' denotes a principle (or measure) to which one conforms (or should conform), and by which one's quality (or fitness) is judged. It also has other meanings, such as the 'degree of excellence required for a particular purpose', and 'a thing recognized as a model for imitation'. There are also contexts in which standard means 'basic', without any value-addition features, or 'average quality' or minimum requirements. Standards can be expressed in many ways – quantitatively and qualitatively. We will discuss this further below. In this module, standards refer to 'the specification of aspects, elements or principles to which one should conform or by which quality is judged'.

Criteria

A criterion is an aspect or element by which a thing is judged. The INQAAHE glossary http://www.qualityresearchinternational.com/glossary defines criteria as "the specifications or elements against which a judgment is made".

The difference between criteria and standards must be mentioned here. While the criteria indicate the elements or aspects, the standards set the level. The AUQA glossary indicates that a "function of standards is to measure the criteria by which quality may be judged".

In practice, the terms criteria and standards are used interchangeably by QAAs. The National Assessment and Accreditation Council (NAAC) of India differentiates between criteria and criterion statements. This may be worth considering. In the NAAC's framework, criteria are the broad aspects on which the quality of the institution is assessed. The Council has identified seven criteria. The criterion statements are similar to the standard statements used by the regional accrediting agencies of the USA. These statements set the level or standards to be achieved under the criteria.

Box 3 gives examples of different usages of the terms 'criteria' and 'standards'. You will notice that the criteria spelt out by the NAAC are related to aspects, while the criteria spelt out by the Higher Education Quality Committee of South Africa are in the form of statements. You will also notice that the standard statements of the regional accrediting agencies of the USA are similar to the criteria of the HEQC and the criterion statements of the NAAC.

Box 3. Standards and criteria: USA, South Africa and India

Characteristics of Excellence: MSCHE

(The MSCHE has developed 14 standards and standard 10 is on `Faculty'.)

Standard 10: Faculty

The institution's instructional, research, and service programmes are devised, developed, monitored and supported by qualified professionals.

Criteria for Institutional Audit: HEQC

Criterion 9

Recruitment, selection, development and support policies and procedures facilitate the availability of suitably qualified and experienced academic and support staff to deliver the programme. Staff capacity in relation to programme needs is regularly reviewed.

Criteria for assessment: NAAC

The NAAC has identified the following seven criteria to serve as the basis of for its assessment procedures: Curricular Aspects; Teaching-learning and Evaluation; Research, Consultancy and Extension; Infrastructure and Learning Resources; Student Support and Progression; Organisation and Management; and Healthy Practices.

Under Teaching-learning and Evaluation, it lists seven criterion statements and the following three are related to Faculty:

- The institution has an efficient mechanism to recruit qualified and adequate faculty.
- The institution has an open and participative mechanism for evaluation of teaching, research and work satisfaction of the faculty.
- The faculties have opportunity for continued academic progress and professional advancement.

Source: Web sites of Middle States Commission on Higher Education, Council on Higher Education and National Assessment and Accreditation Council.

Agencies vary in the use of the terms 'criteria' and 'standards'. However, they all mean aspects – with or without the levels or specifications – that should be considered in assessing quality.

Benchmarks

A benchmark is a point of reference to make comparisons. A benchmark was originally a surveyor's mark on a wall, pillar, or building used as a reference point in measuring altitudes. Today, the term is used in all activities that involve comparisons. The INQAAHE glossary gives the following definition: "A benchmark is a point of reference against which something may be measured.

In the simplest definition, benchmarking is the process of learning by making comparisons. For centuries, comparisons have been made in many informal ways. Today, benchmarking has come to mean a formal process of comparison as a way of generating ideas for improvement; preferably improvements of a major nature. The American Society for Quality defines benchmarking as an improvement process in which an organization is able to measure its performance against that of the best-in-class organizations, determine how those organizations achieved their performance levels and use the information to improve its own performance. The INQAAHE glossary defines benchmarking as "a process that enables comparison of inputs, processes or outputs between institutions (or parts of institutions) or within a single institution over time" There are many ways of benchmarking that serve different purposes. To understand the differences, the options available in the different types of benchmarking and methodologies should be considered. The Commonwealth Higher Education Management Service (1998) in its publication *Benchmarking in higher education: an international review*. London: CHEMS. Available at www.chems.org makes the following classification:

- ***internal benchmarks*** for comparing different units within a single system without necessarily having an external standard against which to compare the results;
- ***external competitive benchmarks*** for comparing performance in key areas based on information from institutions seen as competitors;
- ***external collaborative benchmarks*** for comparisons with a larger group of institutions who are not immediate competitors; and
- ***external transindustry (best in-class) benchmarks*** that look across multiple industries in search of new and innovative practices, no matter what their source.

Box 4 presents another classification.

Box 4. Types of benchmarks

Two kinds of benchmarks can be readily distinguished — **criterion reference** and **quantitative**.

The **criterion reference** approach simply defines the attributes of good practice in a functional area. A university wishing to benchmark its success in that area will assess whether it has achieved the criteria. In the financial area, for example, a university's liquidity ratio ought to be positive. If it meets that criterion the university is meeting the benchmark. The benchmark could be simply a checklist of essential attributes constituting good practice. A large number of universities may achieve good practice on this type of benchmark. But levels falling short of good practice, i.e. missing or sub-standard attributes may also be distinguishable, signalling the need for improvement.

Quantitative benchmarks, on the other hand, inevitably distinguish normative and competitive levels of achievement. These distinguish where practice is quantifiably different in some institutions. Often the differences will signal good practice; sometimes the differences, such as the proportion of postgraduate students within the total enrolment, will be as much matters of choice and policy as good practice. Both approaches to the formulation of benchmarks are important.

Source: McKinnon *et al.*, 2000.

There are many more types in the literature on benchmarking. There are also many methodologies that can be adopted to develop these benchmarks. For example, the 'ideal type standards' (or 'golden standards') approach creates a model based on idealized best practice. It is then used to assess institutions on the extent to which they fit that model. On the other hand, vertical benchmarking is an approach that seeks to quantify the costs, workloads, productivity and performance of a defined functional area. *Activity 2* will familiarize you with more developments regarding benchmarking.

The discussions above indicate that benchmarks can be in many forms. They can be quantitative (such as ratios) or qualitative (such as successful practices). They can be expressed as 'practices', 'statements' or 'specifications of outcomes', all of which may overlap. In particular, benchmarks can be either 'practices' or 'metrics'. Metrics are the expression of the quantified effects reached once practices have been implemented. For the purposes of this module, we will not go beyond these details.

Keeping in mind the above discussions, we will use the following definitions in this module:

Statistics – statistical data or data collected in a systematic way

Indicator – Data or statistic that indicates or signals something

Performance Indicator – Data that signals some aspect of performance

Criterion – Aspect or element against which a judgment is made

Standard – Specification of aspects or elements or principles to which one should conform or by which quality is judged

Benchmark - A point of reference to make comparisons

Activity 2

1..Browse the websites of HEQC (www.che.ac.za), QAA (www.qaa.ac.uk) , CICA (www.cica.ca) and NAAC (www.naac-india.com) and analyse how agencies use the terms “indicator”, “criterion” and “benchmark”.

2. Reflect on the different usages of the terms discussed above in your country. What similarities and differences do you observe?

Approaches to quality assurance

Based on the various understandings of quality and the context, QAAs adopt a particular definition of quality to develop their procedures. In the following pages, we will discuss two sets of different understandings of quality that may be adopted by QAAs.

1. Standards-based vs. fitness-for-purpose

As was discussed in *Module 1*, some QAAs build their understanding of quality taking the 'self-defined' goals and objectives of the institution or programme as the starting point. Other agencies determine quality with reference to a set of standards, specifications or expectations set externally. The agencies of the latter group define quality externally. They may not care what an institution means to do. Rather, they demand that at the very least it does A, B or C, which are set as external requirements. There are also differences in the levels set by the agencies to demonstrate quality – whether these are minimum requirements or high standards. We will see these variations in the following pages.

Standards-based understanding of quality

In the 'standards-based' understanding of quality, institutions must demonstrate their quality against a set of pre-determined standards. Adherence to standards developed externally by a reference group is seen as a threshold level of quality. Compliance to norms, accountability, adherence to rules and regulations and adopting codes of practice are predominant here. This is also the practice where the outcomes and competencies acquired are important, as in the case of licensing for professional practice.

It may be noted that standards are not necessarily quantitative. To judge whether standards are met, some level must be agreed on or set. This level may be quantitative (e.g. student-teacher ratio) or qualitative (adequate, competent and qualified faculty). From the examples given within brackets, it is clear that issues perceived to be quantitative can have a qualitative basis. Most qualitative aspects can be given a quantitative expression. We talk about the student-teacher ratio based on the assumption that a particular ratio is necessary for good teaching and learning. Similarly, competent and qualified faculty can be expressed in terms of academic qualification, years of experience, publications record, student evaluation of faculty, etc. However, quality assurance today has changed. While in the past quantitative criteria was enough to demonstrate that a standard had been met, more qualitative criteria is now incorporated and institutions are encouraged to maintain their individuality.

Standards may also be qualitative statements, such as in the case of the regional accreditation agencies of the USA. Some agencies develop standards based on good practices required in quality institutions or programmes. There are also agencies that spell out detailed specifications to be fulfilled. These rely more on quantitative specifications. The set of standards developed by the Commission on Institutions of Higher Education, New England Association of Schools and Colleges,

USA is an example of the former. The standards developed by the All India Council for Technical Education (AICTE) is an example of the latter.

AICTE has a set of standards that must be fulfilled for the establishment of new institutions wishing to offer undergraduate degrees in engineering and related areas. The standards set by AICTE are meant to check whether institutions have the potential and adequate facilities to offer quality programmes. For certain aspects, AICTE has spelt out quantitative standards. These include, for example, student intake, land area, carpet area, funds, faculty size and the library requirement. Details for one item – the built-up area - are given in *Box 5*:

Box 5. Standards: quantitative and qualitative standards for establishing a new institution to offer undergraduate programmes in engineering and related areas

Built-up area

Sl. No.	Class of New Institutions	Area Requirement (in sq. m)			
		Instructional Area (Carpet Area)	Administrative Area (Carpet Area)*	Circulation and other Area**	Total Built Up Area
1.	Engineering & Technology	1745	240	1015	3000
2.	Pharmacy / MBA / MCA	502	100	98	700
3.	Hotel Mgmt. & Catering Tech.	702	150	148	1000
4.	Architecture / Applied Arts & Crafts (Degree)	534	100	66	700

* Administrative area includes principal's room, strong room, reception, main office, maintenance office, faculty seating rooms, store, office equipment room, etc.

** Circulation and other areas include toilets, corridor, staircases, common area, etc.

Source: All India Council for Technical Education web site.

Standards for Accreditation; Commission on Institutions of Higher Education, New England Association of Schools and Colleges

Standard one: Mission and Purposes: The institution's mission and purposes are appropriate to higher education, consistent with its charter or other operating authority, and implemented in a manner that complies with the Standards of the Commission on Institutions of Higher Education. The institution's mission gives direction to its activities and provides a basis for the assessment and enhancement of the institution's effectiveness.

Standard two: Planning and Evaluation: The institution undertakes planning and evaluation appropriate to its needs to accomplish and improve the achievement of its mission and purposes. It identifies its planning and evaluation priorities and pursues them effectively.

Standard three: Organisation and Governance: The institution has a system of governance that facilitates the accomplishment of its mission and purposes and supports institutional effectiveness and integrity. Through its organizational design and governance structure, the institution creates and sustains an environment that encourages teaching, learning, service, scholarship, and where appropriate research and creative activity. It assures provision of support adequate for the appropriate functioning of each organizational component.

Standard four: The Academic Programme:...

Standard five: Faculty:...

Standard six: Students: ...

Standard seven: Library and Other Information Resources:...

Standard eight: Physical and Technological Resources:...

Standard nine: Financial Resources;...

Standard ten: Public Disclosure:...

Standard eleven: Integrity:...

Source: New England Association of Schools and Colleges web site.

In the case of the standards-based understanding, the examples above show that whether something is of quality depends on whether it conforms to externally-derived standards.

Contrary to this perspective, the 'fitness-for-purpose' understanding of quality begins with the institution's purposes.

Fitness-for-purpose (FFP) understanding of quality

In the 'fitness-for-purpose' approach to quality, an organization or object is 'fit for purpose' if:

1. there are procedures in place that are appropriate for the specified purpose(s); and
2. there is evidence that these procedures are in fact achieving the specified purpose(s).

In this sense, an institution that achieves the goals and objectives it has set for itself is considered a quality institution. The goals and objectives of the institution or programme become the lens through which the QAA analyzes the quality of the institution or programme.

Whether the purpose of the institution may be mandated from outside – by the government or by other stakeholders – is debatable. This is what would be called the 'fitness-of-purpose' approach. In this approach, a person determines which purposes are acceptable. These purposes are then measured against external

standards. But 'fitness-for-purpose' implies that we are talking about the purposes set out by the institution itself. Once the institution incorporates the mandate into its purposes, they all become 'self-defined' purposes of the institution. This is true even in cases where the mandate of the institution is given by external stakeholders. The institution is then measured against those purposes.

This is suitable in systems where other mechanisms ensure that pre-determined or threshold-level standards are met by the institutions or programmes. It is also effective in systems with good self-regulation mechanisms, where institutional diversity is promoted (as against conformity to standards) and where institutions of higher education are granted a high level of autonomy. The Australian Universities Quality Agency (AUQA) is specific about its 'fitness-for-purpose approach'. The AUQA does not impose an externally prescribed set of standards upon auditees. Instead it uses each organization's own objectives as its primary starting point for audit. This approach recognizes the auditee's autonomy in setting its objectives and in implementing processes to achieve them. The core task of AUQA audit panels is to consider the auditee's performance against these objectives.

Within the same country, different QAAs might have a different understanding of quality depending on their mandate. For example, professional bodies that look into the quality of professional areas of studies build their understanding of quality around the competence of the graduates to practice the profession. In the same country, the agency responsible for monitoring the establishment of new institutions would have different expectations. Very often, QAAs use a combination of these understandings as required by the context in which they have to operate. They then develop their quality assurance practices around this. The stand of the HEQC of South Africa is an example of this, as illustrated in *Box 6*.

Box 6. Balancing the different emphases of quality: the Higher Education Quality Committee of South Africa

In order to facilitate a co-ordinated approach for the QA system and the other two steering instruments of funding and planning, the HEQC uses the following definitions of quality:

- "Fitness for purpose in relation to specified mission within a national framework that encompasses differentiation and diversity.
- Value for money as judged in relation to the full range of higher education purposes set out in the White Paper. Judgments about the effectiveness and efficiency of provision will include but not be confined to labour market responsiveness and cost recovery.
- Transformation in the sense of developing the capabilities of individual learners for personal enrichment, as well as the requirements of social development and economic and employment growth" (HEQC, 2001: 14).

Source: Naidoo and Singh, 2005.

The 'fitness-for-purpose' vs. 'standards-based understanding' determines the broader approach followed by the QAA. For example, audit is more naturally based on 'fitness-for-purpose' and accreditation is 'standards-based'. The fitness-for-purpose approach has been criticized because it undermines the 'fitness of

purpose'. For instance, when evaluating performance against aims and objectives defined by the institution itself, the review team may find that the self-defined aims and objectives have been fully met. However, this tells us nothing about the academic worth of the aims and objectives. Indeed, these may have been pitched, deliberately, at a modest level. This has led to criticisms on 'set aims and objectives' and measuring standards against these.

However, one can argue that it is difficult to separate the two definitions. Practically, it is not possible to have an absolute 'fitness-for-purpose' understanding of quality. Some amount of what is 'acceptable and appropriate' to be considered as quality can be found in all understandings of quality. There are certain non-negotiable national development requirements within which HEIs must determine their mission. This takes care of the appropriateness of purposes, even if the QAA chooses 'fitness-for-purpose' as its focus.

For example, the University of Western Sydney defines quality in its Quality Assurance Framework as 'fitness for moral purpose'. This recognizes that purposes should be appropriate. Although the national quality agency of Australia, the AUQA, follows the fitness-for-purpose approach for its audit scheme, all Australian HEIs are subject to the provisions of a broad quality assurance system that consists of the following actors (in addition to the AUQA):

- the Federal Government, through the Department of Employment, Science & Training (DEST);
- the Ministerial Council of Employment, Education, Training & Youth Affairs (MCEETYA);
- the Australian Qualifications Framework (AQF);
- the National Protocols, devised by MCEETYA and enacted by each state and territory; and
- the Australian Vice Chancellor's Committee (AVCC).

In other words, appropriateness of purposes is well regulated by the other mechanisms in the higher education sector. This makes it possible for the AUQA to focus on fitness for purpose. Looking at this issue from another point of view, all HEIs function under certain regulations and guidelines. They get their approval to function by agreeing to follow certain rules and codes of practice. To the extent that the regulations and recommendations are accepted by institutions, they become part of the institution's policies (and implicitly, therefore, part of an institution's objectives). The AUQA may thus consider whether an institution has adopted or adapted such guidelines, and investigate the extent to which the institution's objectives are being met in this regard. The AUQA's *Audit manual* (www.auqa.edu.au) has more details on this.

The Chilean QA agency uses a definition of quality that combines both aspects and highlights the need for HEIs to take responsibility for their quality. *Box 7* explains the Chilean case.

Box 7. The Chilean QAA's stand

In this case, quality is defined as the combination of two main elements:

- External consistency, which means the way in which a programme or an institution adjusts its operation to the requirements set by its academic, disciplinary or professional reference group (the university community defines what is expected of a university, the architectural community defines what is expected of a program of architecture). It is important that these requirements are kept to the essential core of competencies or functions that must be fulfilled.
- Internal consistency, which means the way in which the institution or the programme adjust to the priorities and guidelines that follow from its mission statement and its definition of purpose. Thus, while all architects will have the same basic competencies, the architects of university A will be quite different from the architects of University B, because they will adhere to a different set of priorities.

In the case of programmes, this is translated into a graduating profile, which clearly states the expected learning outcomes of students, and the commitments the institution makes when enrolling them.

Source: CNAP, no date.

2. Minimum requirements vs. standards of high quality (or good practice)

Some quality assurance models ensure only that the minimum requirements are fulfilled for a particular status. Such models are generally meant for compliance purposes. The outcome has implications for approvals and sanctions. Within the context of diversification and privatization, most developing countries are confronted with many low level providers and have no system in place for dealing with them. Thus, minimum standards are now frequently the priority. The case of Chile in the 1990s, described in *Box 8*, is an example of a regulatory approach to ensuring quality.

Box 8. Licensing of new private institutions in Chile

The purpose: To make sure that all new institutional proposals comply with basic quality requirements, that they have the necessary resources to operate, and that during their initial years, there is a consistent advance towards the implementation of the initial proposal. At the end of the process, institutions are either certified as autonomous, or lose the public recognition that entitles them to grant valid degrees and must close down.

The agency: The Consejo Superior de Educacion (CSE), created by a constitutional law in 1990, has nine members from higher education institutions and other social organizations. It is chaired by the Minister of Education, and has joint funding: part of it comes from the national budget, and part from fees paid by the institutions that apply for licensing. It has technical staff, and operates mainly through the work of consultants and evaluators hired for specific purposes.

The procedure: The CSE reviews all proposals for new, private institutions. It evaluates each proposal and either approves it or points out the reservations it may have. In the latter case, the proposal goes back to the institution, which has two months to modify its proposal and re-submit it. The CSE takes a final decision on approval or rejection. If it rejects the proposal, the institution cannot be opened. If it is accepted, then it is legally recognized and may start operating under CSE supervision.

During the first six years of operation of an institution, it must submit a set of institutional data every year (including academic and financial information). Students may be tested by external examiners sent by the CSE, and at least twice, the institution is visited by a team of external assessors who analyse the development of the project and the degree to which it is fulfilling its goals. During this time, new programmes and degrees must also have the approval of the CSE. Every year, the CSE sends the institution an action letter pointing out the perceived strengths and weaknesses, and the actions the institution must take. At the end of the sixth year, assessment is global, and if the institution is considered to have developed adequately, the CSE certifies its autonomy. If not, supervision may be extended for a period up to five years, after which the institution is either certified as autonomous or closed down.

The CSE may also, during the period of supervision, close down an institution if it considers that the institution is not acting on its recommendations.

Source: Lemaître, 2005.

Complementing the above approach, within the same country other initiatives emphasizing 'improving institutions' do not follow this regulatory approach. Sometimes, the same agency may have two different approaches. One ensures minimum requirements, while the other pays attention to high standards.

Depending on the stage of development of the higher education system, QAAs may set standards of high quality. Moreover, the frame of reference for assessment may be 'excellence' and not just fulfilment of minimum requirements. The Middle States Commission on Higher Education, USA calls its standards for accreditation 'characteristics of excellence of higher education'.

This discussion may appear to present contradictory approaches to quality assurance. But it should be remembered that quality assurance deals with institutions and programmes of varying levels of quality. Moreover, the quality concerns of countries vary greatly. Within the same country, many mechanisms may co-exist to address different quality concerns. There should be co-ordination between these various quality assurance efforts. In general, those QAAs that look into minimum standards and those that go beyond the minimum requirements in the same system complement each other. Mechanisms are required to ensure a threshold level of quality as well as to enhance quality among institutions having crossed the threshold level.

Areas of quality assessment

Areas or aspects considered by QAAs have a lot in common. Indeed, while they may have different names, or follow different organizational structures, most quality assurance agencies look at the same things. Certainly, they may have different emphases. For example, four QAAs in the Philippines accredit programmes. *Box 9* highlights how similar they are in their scope of quality assurance. The areas considered by QAAs that accredit institutions are also similar.

Box 9. Standards for quality assurance – programme accreditation by the four accrediting associations of the Philippines

The (accreditation or quality assurance) agencies engage qualified faculty members and professionals to develop detailed criteria specific to each programme or course of study. The criteria may differ from one agency to another, as might their application, but the scope of the review based on the areas covered by the standards of each agency is almost identical.

S. No.	ACSC-AA	PAASCU	PACU-COA	AACCUP
1	Purposes and Objectives	Purposes and Objectives	Purposes and Objectives	Mission, goals and objectives
2	Faculty	Faculty	Faculty	Faculty
3	Instruction	Instruction	Instruction	Curriculum and programme studies
4	Library	Library	Library	Library
5	Laboratories	Laboratories	Laboratories	Physical facilities and laboratories
6	Physical plant and facilities	Physical plant and facilities	Physical plant and facilities	
7	Student personnel services	Student services	Student personnel services	Students
8	Social orientation and community involvement	Social orientation and community involvement	Social orientation and community involvement	Extension and community
9	Organisation & research administration	Administration	Organisation and administration	Administration

Source: Phelps, 2001, cited in Arcelo, 2003.

Certain areas are key to assessing quality. This is true in all agencies, regardless of differences in the country context in which they operate and the unit of quality assurance,

In August 2002, the UNESCO Asia-Pacific Regional Bureau of Education, Bangkok sponsored an experts meeting on 'Indicators of Quality & Facilitating Academic Mobility Through Quality Assurance Agencies' for the Asia-Pacific region. The meeting was well attended by quality assurance and higher education experts from eight countries. Participants at the meeting agreed that the following areas are key to quality:

1. integrity and mission;
2. governance and management;
3. human resources;
4. learning resources and infrastructure;
5. financial management;
6. student profile and support services;
7. curricular aspects;
8. teaching-learning and evaluation;
9. research, consultancy and extension; and
10. quality assurance.

Participants also identified the areas to be considered under the key areas. These were:

1. integrity and mission: honesty and transparency in policies and procedures; interaction with the community and stakeholders; a clearly formulated realistic mission; aims and objectives known to all constituents of the institution; equity and reservation for disadvantaged groups;
2. governance and management: autonomy of governance; organizational structure; delegation of powers; institutional effectiveness; strategic plan; documentation; modernization of administration;
3. human resources: recruitment procedures; adequacy, qualification and competence of staff; awards, honours, membership, prizes, medals of learned societies of staff; retention; staff development; recognition and reward; staff workloads; welfare schemes; grievance redressal;
4. learning resources and infrastructure: land and buildings; ownership; labs and lecture halls; library and information technology facilities; library spending per student; spending on computing facilities per student; health services, sports and physical education and halls of residence; campus maintenance; optimal usage; community use of institutional facilities; commercial use of institutional facilities;
5. financial management: funding sources; ownership of resources; sustainability of funding; resource mobilization; resource allocation; accountability; liquidity; budget for academic and developmental plans;

unit cost of education; strategic asset management; matching of receipts and expenditure.

6. student profile and support services: admission procedures; student profile – gender, age, social strata, geographical distribution, foreign students, enrolment by levels of study, age ratio, staff/student ratio, out-of-state enrolment, distribution of entry grade; drop out and success rate; progression to employment and further studies; student achievement; student satisfaction; personal and academic counselling; participation of staff in advising students; merit-based scholarships; other scholarships and fellowships; informal and formal mechanisms for student feedback; student representation; student complaints and academic appeals; student mobility; recreational activities for students; placement rate of graduates; employer satisfaction with graduates; graduate earning by field of study; alumni association and alumni profile;
7. curricular aspects: conformity to goals and objectives; relevance to social needs; integration of local context; initiation, review and redesign of programmes; programme options; feedback mechanism on programme quality; interaction with employers and academic peers; demand for various course combinations;
8. teaching-learning and evaluation: teaching innovations; use of new media and methods; co-curricular activities; skill and competence development; projects and other avenues of learning; linkage with institutions, industries and commerce for teaching; linkage for field training; monitoring student progress; continuous internal assessment; use of external examiners; examination schedule, holding of examinations, evaluation, declaration of results; remedial and enrichment programmes;
9. research, consultancy and extension: institutional support for research; staff active in research; research students by field of study; number of PhDs awarded per academic staff; number of research projects per academic staff; research projects sponsored by industry; public sector research funding; ratios of research expenditure and income; research assistantships and fellowships; staff supported by external research grants; existing research equipment; usefulness of research results for education; social merits of research; interdisciplinary research; student involvement in faculty research; research quality - citation of publications, impact factors, patents and licenses; benefits of consultancy to industry and the public; community-oriented activities; and
10. quality assurance: internal quality assurance; institutional research on quality management; co-ordination between the academic and administrative functions; outcomes of external quality assessments; academic ambience; educational reforms.

These areas indicate how a group of QAAs have identified key areas with a bearing on the quality of institutions. You will notice that some of them could be linked to quantitative expressions while some are qualitative. While the above example highlights the areas of assessment for institutional quality, the case of the

Philippines presented in *Box 11* highlights the point of view of programme quality. The two examples indicate that the areas of assessment overlap for institutional and programme accreditation. However, there are differences in terms of focus and scope. While the curricular aspects under institutional accreditation may be more concerned with the overall policies and practices of the institution, programme accreditation would look more closely into the quality of the curriculum of the programme under review. Institutional accreditation might also look at the quality of one or more programmes to seek evidence for the evaluations. However, the purpose is not to pass judgment about the quality of the curriculum of that programme. Rather, it aims to make inferences about the overall curricular aspects of the institution.

Activity 3

1. Browse the web sites of a few quality assurance agencies and identify common areas of assessment they consider. Do a similar analysis for programme-level quality assurance.

2. In the context of your country, which focus would be of immediate priority – 'minimum standards' or 'standards of high quality'? What would be useful in the long term?

3. If your country needs a quality assurance agency to look into 'minimum standards', what priority areas should be addressed?

4. If a quality assurance agency is established in your country with 'high standards' as its focus, what type of institutions or programmes in your country will benefit from it?

Quality assurance decision-making

QAAs must build up a framework for translating their notion of quality into 'quality assurance decisions'. Indeed, evaluative guidelines or a framework against which the agency can make decisions are a critical element in quality assurance. A quality assurance process may examine many academic and administrative aspects of the institution or programme being reviewed and collect data on those aspects. However, the information gathered does not speak for itself. An evaluative judgment must be made, and the evidence gathered must be interpreted in light of some prior questions. This may be done in a rather explicit fashion, where both quantitative and qualitative benchmarks are set for desirable achievements and the reviewer simply establishes the evidence. However, there are also systems in which the assessment is based on the professional judgment of the reviewer. This use of evidence, judged against a quality assurance framework, leads to decisions with important consequences. Agencies do this in many ways. Some develop standards. Others agree on a set of indicators, while yet others define benchmarks. While some agencies develop specific indicators, others develop broad standard statements against which quality is assessed by experts.

1. Different approaches to using standards

QAAs adopt different ways of developing and using standards. The standards prescribed by the AICTE (see *Box 5*) mostly relate to 'inputs' to the institution required to offer a quality programme. Some agencies have shifted their focus to 'outcomes'. In most programme accreditation in professional areas of studies, standards relate to good institutional procedures and practices. A practice-focused perspective is adopted in these cases. These agencies interpret quality in terms of how effectively new entrants to the profession have been prepared for their responsibilities. In recent years, this has resulted in many professional bodies paying attention to competency-based standards. These focus on the appropriate and effective application of knowledge, skills and attitudes. They emphasize the relationship between formal education and work outcomes. This means that they are concerned with the ability to apply relevant knowledge appropriately and effectively in the profession. The agencies that adopt this understanding of quality generally require institutions and programmes to demonstrate the 'output' of the programme rather than the 'input'. The focus is therefore on developing competence among students to become good professionals, rather than on the number of hours of tutorials or hands-on experience provided. The development of competency-based standards in the USA is described in *Box 10*.

Box 10. Move towards competency-based standards of professional bodies (USA)

The evolution of standards for programmes in architecture provides an illustration. As early as 1902, following the procedures established in law and medicine, practitioner groups had developed an examination system in Illinois for graduates of fourth-year programmes in architecture. By 1914, minimum standards for architecture programmes were established. In 1940, a national board was created in order to oversee accreditation of schools of architecture on a national basis. While numerous revisions of this basic approach occurred over the next several decades, a significant new approach was adopted in 1982. The board's new mandate was to apply "achievement-oriented performance criteria" in its evaluation of architecture programmes. Under this approach, each school "…is responsible for seeing that each graduate completes a liberal studies requirement and attains the necessary achievement for each of the ..major areas" of the programme. Criteria are grouped under four major headings: Fundamental knowledge; design; communication; and practice. Levels of accomplishment are stipulated for 54 different areas of practice.

Source: El-Khawas, 2001: 63-64.

Professional regulation bodies develop their methodologies based on competency-based standards in many ways. For example, the Canadian Institute of Chartered Accountants (CICA) has developed 'The CA Candidate's Competency Map' for its qualification (recognition or registration) process of Chartered Accountants (CAs). CICA together, with the CA institutes, represents approximately 68,000 CAs and 8,000 students in Canada and Bermuda. It has identified two types of competencies: pervasive qualities and skills (that all CAs are expected to bring to all tasks); and specific competencies. The specific competencies are grouped into six categories. The competencies listed by CICA for the category 'Taxation' (competencies related to taxation planning, compliance and reporting for various entities) are given in *Box 11*.

Box 11. The competency map: Canada

The specific competencies – taxation

1. Analyzes the entity's tax profile and identifies overall tax issues

    1.1 Seeks to improve the entity's tax profile
    1.2 Evaluates and advises management on applicable new tax legislation on an ongoing basis
    1.3 Identifies, analyzes, and advises on compliance and filing requirements
    1.4 Analyzes the range of professional expertise required to advise on potential tax issues

2. Prepares and files necessary returns in accordance with legal requirements

    2.1 Advises on tax compliance
    2.2 Meets filing requirements

3. Practices effective tax planning to maximize after-tax returns

    3.1. Identifies, analyzes, and advises on specific tax planning opportunities
    3.2 Analyzes tax consequences of transactions and business opportunities

4. Supports, defends, and negotiates tax positions

    4.1 Analyzes and responds to assessments
    4.2 Prepares information to support objections, appeals, and court litigation

Source: Canadian Institute of Chartered Accountants web site.

In addition to different ways of using standards, the decision-making process allows for varying levels of professional judgment. Most QAAs have some level of specifications and reliance on quantification. In some quality assurance frameworks, peers are more free to make judgments against a broad framework. In most other systems, peer judgment is guided by explicit considerations, such as quantitative specifications and indicators.

2. Reliance on quantitative assessment

QAAs may rely on quantification at various levels. Some of the ways are: requiring institutions to demonstrate that they fulfil certain quantitative norms; requiring peers to assess whether the norms are fulfilled; requiring peer assessment to be recorded on a quantitative scale; and requiring the final outcome to be expressed on a quantitative scale. This raises the question: 'Can quality be assessed against quantitative measures?'

Several points of view exist on this fundamental question. Indeed, quality assessment is necessary and inevitable for several human activities. However, the techniques employed may be quite subjective. For instance, we depend to a large extent on human sensory perceptions for assessing aspects such as beauty, music, tea, comfort levels in air-conditioning and perfumes. It is also well recognized that we do not have clear measures for measuring many things in life such as feelings, intellect and emotion. It is widely believed that quality, like beauty, is an elusive characteristic.

Earlier, we discussed quality as an idea that is complex and multi-dimensional. There is no doubt that there are many other things of significance. These include,

for example, development, growth, excellence, democracy and religion. We have learnt to deal with these. In this sense, there have been many efforts to assess quality. Some of these efforts rely more on quantitative methods, while others depend on qualitative ones.

Some agencies base their decisions mostly on quantitative data. Mexico's accreditation agency for engineering is a case in point. When there is an emphasis on consistency, compliance or agreement on expected levels of performance, QAAs tend to develop quantitative norms. They then use them as the frame of reference for quality assurance. The AICTE's standards (see *Box 5*) are an example. At the same time, some agencies seek to ensure minimum standards that are not expressed quantitatively. The set of eligibility criteria of the accreditation agencies of the USA is an example. On the other hand, some agencies rely on quantification to consider the excellence of institutions. For example, the National Council of Accreditation in Colombia (NCAC) has 'excellence' as its focus. It defines quality as the integration of 66 characteristics. For each characteristic, a series of qualitative and quantitative variables have been spelt out. *Box 12* below highlights how the variables and indicators for one of the characteristics have been spelt out.

Box 12. Variables and indicators of a characteristic (Colombia)

Characteristic 16: In compliance with institutional objectives and relevant programme specificities, faculty size is adequate and teachers have both the commitment and training the programme requires.

Description: It points to the fact that, to achieve the institution and programme objectives, the required number of teachers should be available, their level of qualification appropriate and their commitment to the institution and to the programme in question adequate. Likewise, efforts are made to find out whether the number of teachers attached to the programme and their training and commitment come close to the ideal situation sought after for the specific programme and institution. The above examines the quality of education in one of its core aspects.

Variables:

- Adequacy to programme requirements of faculty commitment and of their specific training and level of qualification.
- Academic quality of faculty attached to the programme

Indicators:

- Training (graduate, postgraduate, Master's, Doctoral), rating on the promotion ladder and commitment of teachers to institution and programme.
- Other educational experiences of the teachers relevant to their performance in the programme
- Period of time teachers have worked in the institution and programme, as well as any other academic and professional experiences of faculty involved
- Relationship between the number of students enrolled in a programme and the number of teachers involved. A comparison should be established with regard to full-time commitment.
- Assessment by outstanding members of academic communities of faculty committed to programme.
- Assessment of programme students with regard to both the quality and sufficiency of the number of students enrolled, and of the commitment of teachers involved in the programme.

Source: Revelo Revelo and Augusto Hernandez, 2003: 47-48.

In other words, quantification can be relied on irrespective of whether the agency seeks to ensure minimum standards or standards of high quality. QAAs that seek to ensure objectivity and reduce subjectivity of peer assessment, especially in systems where identifying competent peers might be challenging, opt to rely on quantitative measures. They claim that quantitative measures help to ensure that the quality assurance process is transparent. A predominant way of carrying out quantitative assessment is using performance indicators.

Use of performance indicators

Using PIs in quality assurance is still debated. However, it has gained acceptance in some accountability-related decision-making. In the UK, it came as a response to market forces demanding better products from universities. In Australia, PIs were developed so that education institutions could respond more positively to government priorities. In the Netherlands, PIs have been used to impose fiscal responsiveness and discipline. And in the USA, its use enabled institutions to obtain more autonomy from state legislatures (Gaither *et al.*, 1994).

Proponents of performance indicators argue that they help in the following ways:

1. PIs may be useful to check accountability concerns.
2. PIs help in comparing performances of similar institutions.
3. PIs can provide a range of information about performance to steer self-improvement and effective management strategies.
4. PIs can provide simple public information about the health of the institution in several areas of functioning.
5. PIs can shape policy formulations.

In other words, PIs are seen to help HEIs in planning and managing for self-improvement, in providing public information, and in making comparisons and setting benchmarks. It might help the government as a measure of accountability and for policy formulations. While many are willing to accept PIs for the purposes of self-improvement, they are afraid that it may be used to control institutions. Davis (1996) sums up the situation in this way: "Where performance indicators become most controversial is, where the emphasis shifts from their use as one of many inputs into effective decision-making to using them as a ranking device, to allocate esteem and funding differentially".

Those who do not support PIs in quality assurance point to the fact that institutions' performance or the quality of programme delivery may be influenced by a variety of factors. Moreover, assessing the institution or programme considering all those factors is not easy. *Box 13* gives the example of the variety of indicators for one aspect of an institution's functioning: research.

Box 13. Research indicators

Inputs are researchers, postgraduate students, resources (such as time, money through grants and fellowships, equipment, consumables and so on); throughputs include research projects, research training, candidacy applications and research supervision; and outputs are reports, commercial products, publications, theses, conference papers and presentations. To these, efficiency and effectiveness indicators may be applied. Effectiveness indicators include:

1 level of infrastructure, grants, external funding to support research
2 number of staff with research training
3 number of new appointments with research training
4 demand for postgraduate places
5 level of postgraduate student satisfaction, and earnings of post graduates
6 number of new technology transfer ventures

For these, short- and long-term targets and specific measures should be established. Standard research effectiveness indicators include:

- Annual research performance index points by range of programmes
- Annual research income compared with other similar programmes and aggregated to compare with like institutions
- Annual publications by individual, programme and institution compared with others.

Efficiency indicators usually provide information about costs or productivity levels, e.g.

1 Research expenditure per research index point
2 Research performance points per full-time equivalent (FTE) academic staff member
3 Research income per `n' (e.g. ten) FTE academic staff compared with other like institutions
4 Number of publications per `n' FTE academic staff compared with other like institutions.

Source: Liston, 1999.

Box 13 shows how performance and quality in one specific aspect can be affected by a number of indicators. It also indicates how assessing quality is a complex task that must be balanced with peer assessment.

Quantification to guide peer assessment

Reviewers may be required to follow certain guidelines related to quantitative measures within which the qualitative judgment must be made. For example, the accreditation methodology of the NBA (India) requires reviewers to express their judgment in terms of indicators, with the maximum score for each indicator being predetermined by the NBA (see *Box 14*). This is despite the NBA's methodology being oriented towards peer assessment.

Box 14. Quantification to guide peer assessment: NBA (India)

Each of the eight criteria has been broken down into parameters, and weightages have been assigned to these parameters by the NBA. The parameters and the weightages assigned to them, which are different for diploma, undergraduate (UG) degree and postgraduate (PG) degree programmes are given below:

PARAMETERS		MARKS		
		Diploma	Undergraduate	Postgraduate
I. ORGANISATION AND GOVERNANCE		(30)	(80)	(50)
A	Planning and Monitoring			
B	Recruitment Procedure & its Effectiveness			
C	Promotional Policies/Procedure			
D	Leadership			
E	Motivational Initiatives			
F	Transparency			
G	Decentralization and Delegation & participation of faculty			
H	Constitution of GC/GB			

Source: National Board of Accreditation web site.

Quantification in reporting the outcome

In the case of the NAAC, the scores given by the reviewers are used to calculate the institutional scores in percentage form. The institution's score determines its grade on a nine-point scale: Grade C denotes the score range 55-60; C+ denotes 60-65; C++ denotes 65-70; B is 70-75; B+ is 75-80; B++ is 80-85; A is 85-90; A+ is 90-95; and A++ is 95-100. Institutions that do not get the minimum 55 per cent are not accredited.

Some more recent systems follow this approach to establish credibility and ensure objectivity. This is especially true in the absence of a well-established corps of assessors or in big systems with a lot of inter-team variance. However, the

relationship between numbers and objectivity is questionable. Numbers only help when certain assumptions operate. That is, they operate when you can be sure that the difference between 50 per cent and 60 per cent is the same as the difference between 75 per cent and 85 per cent, for example. This is not usually the case in practice. Quantitative measures give a misleading sense of objectivity, hiding the real subjectivity involved in setting the scores.

Reliance on quantification has been debated by different stakeholders for various reasons. It may help an agency to ensure consistency in its approach and minimize inter-team variance among the review panels. It might also be very useful in emerging systems to assure transparency. However, it may encourage HEIs to report simple quantitative measures that benefit them instead of truthful qualitative assessments. Or, it may encourage them to chase the measures themselves, rather than what they represent. Fears have also been expressed regarding the relevance, accuracy and efficacy of many measures that have been, or are likely to be, employed by the QAAs. Reliance on quantification and quantitative indicators becomes most controversial when the emphasis shifts from their use as an input in decision-making, to their use as a ranking device. Much depends on how the reliance on quantifications is balanced with peer assessment.

3. Reliance on professional judgment

Some QAAs do not provide explicit norms and quantitative targets because they feel that once the norms are made explicit, they might become counter-productive to 'institutional diversity' and the 'fitness-for-purpose approach'. This does not mean that compliance to standards is not important. However, other mechanisms may ensure compliance. Once the threshold level is already ensured, the agency checks how well the HEIs are performing in their own way to achieve their goals and objectives. Considering diversity is important here and relying on quantitative assessment may not help. Professional judgment adhering to the quality assurance framework of the agency is central here.

Agencies that do not want to be very prescriptive do not require institutions to comply with specific quantitative targets. But they may provide detailed guidelines (or standards) on issues such as demonstrating adequacy and efficiency. For example, an agency may not insist that there be a teacher for every 10 students. Similarly, it might not insist that postgraduate programmes be handled only by doctoral degree holders. But it might say in general language that it should have adequate and competent faculty to run the programme under review.

For example, the AUQA gives only the indicative areas to be covered. It is the professional judgment of peers that is important (see *Box 15*).

Box 15. Indicative scope: AUQA

The AUQA pays particular attention to the academic activities carried out in the institution's name. Indicative scope of an institutional audit includes:

- organisational leadership and governance, planning;
- teaching and learning (all modes); processes for program approval and monitoring; comparability of academic standards in on-shore and off-shore programs;
- research activities and outputs, including commercialisation;
- community service activities;
- internationalisation, including contracts with overseas partners;
- support mechanisms for staff and students;
- communication with internal and external stakeholders;
- systematic internally-initiated reviews (e.g. of departments, themes), including the rigour and effectiveness of the review mechanisms employed; and
- administrative support and infrastructure.

Source: Australian Universities Quality Agency, no date.

Agencies that rely more on the professional judgment of a review team must be aware of the subjectivity that might creep into the quality assurance process. QAAs handle this concern by developing manuals and guidelines to guide peer assessment. As discussed in earlier modules, a rigorous training strategy is key to ensuring reliable peer assessment. An interesting strategy that helps enhance the objectivity of a peer review team's judgments is the requirement that they reach their conclusions by consensus, not by vote. Thus, objectivity is ensured through a measure of inter-subjectivity, as extreme views are dismissed. What prevails is what all the members of the team agree on. The composition of teams, and the way in which they cover different views and disciplinary approaches, are also important factors in making sound decisions.

As the discussions above have revealed, QAAs generally rely both on quantification and on peer assessment. To suit the context and their mandate, they must choose an appropriate stand. The options discussed above are not to be seen as clear-cut options. Rather, they are approaches that may be used in combination, because they bring different strengths and weaknesses to the fore.

4. Flexibility to suit the context

QAAs should also address the issue of flexibility in the appreciation of quality in both self-assessment and the review framework. The fitness-for-purpose approach is one way of introducing flexibility to take into account specific missions relating to local circumstances. Basically, the agency must ask itself whether it can use the same set of standards and criteria for different types of institutions and different types of programmes.

Flexible approaches to self-assessment

The QAA may initially develop a general framework for self-assessment of the institutions or programmes. As the methodology develops, however, it must

consider fine-tuning its approaches. One of the issues it might consider is awareness of 'institutional diversity'. It must also make self-assessment more relevant and useful to institutions. In any system of higher education, institutions have varying characteristics. For example, they may be research-intensive, teaching-oriented, young, old, specialized and/or multi-faculty. Whether the same set of guidelines, criteria and expectations for self-assessment are adequate is an issue in these systems. In general, agencies provide very limited flexibility in planning and organizing self-assessment. Some agencies provide different sets of guidelines and manuals to help different categories of institutions. In some cases, innovative approaches have been tried to introduce flexibility.

In the USA, where accreditation has a long history, there are many examples of flexible approaches to self-assessment. This is partly in response to the growing diversity of institutions. It also partly relates to complaints from institutions about the burden of repeated accreditation visits. Some regional accrediting agencies offer different options for conducting a self-study (self-assessment). For example, the Middle States Commission on Higher Education (MSCHE) has four major models for self-study: the comprehensive model; the comprehensive model with special focus; the selected topics model; and the alternate self-study model. The New England Association is also flexible in its approach to self-study. *Box 16* describes how two models of the MSCHE show flexibility in the self-assessment model and its usefulness to HEIs.

Box 16. Flexibility in self-assessment: USA

The Selected Topics Model: This model involves more concentrated attention to certain selected areas, units, or aspects of the institution (such as curricular review). Compared to the comprehensive model, the selected topics model is more narrowly focused but the selected topics should encompass the entire institution, to the extent possible, although giving less in-depth coverage to the comprehensive categories outside the selected topics.

The Alternate Self-study Model: This option is available only for accredited HEIs. Accredited institutions may propose to have their own accreditation reaffirmed through the alternate model they may discuss with the MSCHE. Except for institutions that are undergoing self-study for initial accreditation or those that are seeking to have their accreditation reaffirmed for the first time, any institution may request approval to use an alternate approach to self-study. Research universities often are best served by devising a self-study approach which addresses a specific theme that is institutional in nature but focused on a current issue. Another approach to the alternate model may be related to the specialized nature of the institution – such as colleges of art or music; seminaries; or other institutions that include specialized programs.

Source: El-Khawas, 2001.

Some regional accrediting agencies have introduced projects to lead to accreditation being continued. These may be seen as variations of flexibility in the approach to self-study. However, they would require more concerted effort and serious commitment to the project. The AQIP discussed in *Module 3* is an example of this. With the AQIP, an institution has the opportunity to demonstrate that it meets the Higher Learning Commission's accreditation standards and

expectations. It can do so through sequences of events which naturally align with ongoing activities that characterize organizations striving to improve their performance.

Flexibility in the definition of standards and the self-assessment exercise

Perhaps the most common and effective way of being flexible is the use of qualitative descriptions of standards. Many standards require institutions to provide evidence that they have *sufficient* resources for doing something. Or, they may require institutions to provide *adequate* facilities, develop a *significant* level of research, or use *appropriate* teaching methodologies. It is then the responsibility of the institution to show that what they have is sufficient, adequate, significant, and/or appropriate to carry out their work well. This helps institutions really think about what they are actually doing. In particular, it forces them to consider whether the resources they have, or the way in which they do their work, is really what they need.

Of course, in order for this approach to be effective, institutions must provide relevant quantitative and qualitative supporting information. This will enable them to demonstrate, to the satisfaction of the external review team and of the agency, that what they are doing is right (see *Box 17*).

Box 17. Flexibility in the definition of standards

The CNAP (Chile) uses qualitative standards to assess programmes. Programmes are expected to provide quantitative data and qualitative evidence (including opinions by faculty members, students, graduates and employers) about the fulfillment of given expectations, such as the following:

Human resources

The programme must prove that it is adequately staffed regarding its academic personnel —in terms of the number, dedication and qualifications— so as to perform the entire range of functions defined in its purposes. The unit must have clear and established criteria for selecting, hiring, providing further training and evaluating its academic and administrative staff.

This formulation is followed by more detailed specifications, including a description of what is meant by adequate qualifications.

Source: Lemaître, 2005.

What is adequate for a law programme, in terms of the number of faculty members or percentage hired on a full-time basis, may be totally inadequate for an architecture programme or a dentistry programme. On the other hand, what is sufficient for a teaching institution may be quite insufficient for a research institution.

Flexibility in the assessment framework

When institutions of different types fall under the purview of an agency, the quality debate often raises this question: 'How can the same set of standards apply to all institutions or programmes?' Some agencies rely on peer assessment to take note of institutional diversity. Some have successfully addressed this issue by developing differential frameworks. *Box 18* provides an example of the criteria for assessment having different weights depending on the type of institution.

Box 18. Flexibility to suit the institutional context: NAAC

India has a diverse and complex system of higher education where institutions differ in their governance, funding pattern, freedom they have to innovate in curriculum, locality, target group they serve, mission and vision and the like. While it is not possible to evolve a different framework for each type of institution, the major differences have been taken care of by considering three major classifications – University and university-level institutions, Autonomous colleges and Affiliated/Constituent colleges. The NAAC's methodology takes care of the differences among these categories at two levels – differential frame of reference, and differential criterion weightage. The differential framework is explained in the manual and for each category of institutions, the NAAC has developed a separate manual with guidelines.

Taking cognisance of the difference in the goal and functioning of the institutions, different criteria have been allotted differential weightages as shown below:

Criteria	University	Affiliated / Constituent college	Autonomous college
Curricular Aspects	15	10	15
Teaching-learning and Evaluation	25	40	30
Research, Consultancy and Extension	15	05	10
Infrastructure and Learning Resources	15	15	15
Student Progression and Support	10	10	10
Organisation and Management	10	10	10
Healthy Practices	10	10	10

As can be seen, the weightage differs among the different types of institutions for the first three criteria. In view of the limited freedom an affiliated college has in curriculum design, the weightage is only 10 whereas for teaching-learning which is fully under the control of institution, it is 40. Similarly, since many affiliated colleges are undergraduate colleges without a strong research component, as a means to initiate the research efforts, weightage 5 has been allotted for the Research, Consultancy and Extension dimension of affiliated colleges. However, for autonomous colleges, in view of the research orientation they are expected to promote under the autonomous status, the weightage for the same criterion has been raised to 10.

While the example cited above gives different weightages depending on the type of institution, the case of the NBA given in *Box 14* is an example of differential weightages to suit the type of programme irrespective of the type of institution. To cite another example, the NCA of Colombia uses weightages to take into account whether an institution is research intensive or not.

Source: Stella, 2002.

Role of peers in contextualizing the assessment

Each entity has a unique characteristic. Indeed, the agency cannot possibly cater to all the differences by developing differential frameworks. But agencies consider this an important issue to which the reviewers are sensitized or oriented. Training programmes and orientations usually discuss contextualizing the assessment. Furthermore, agencies facing the issue of 'institutional diversity' and 'contextualization' constitute review teams carefully. They do so by choosing reviewers who will bring relevant experience and expertise to the team. This helps the team to understand the context without compromising the quality assurance framework and agency's consistency of approach. If reviewers do not differentiate between 'understanding the context' and 'excuses for non-performance', the credibility of the agency and objectivity of the assessment will be damaged. QAAs must have appropriate training programmes and safeguards in place if they wish to introduce flexibility through peer assessment.

The discussions above considered the various approaches to quality assurance. Each method has its advantages and disadvantages, depending on where it is used, how it is implemented and for what purposes. It is essential to carefully analyze the various factors in order to make an appropriate choice. The discussions and case studies illustrated above may be useful to broaden the understanding of the various options available. But no one approach will offer a perfect solution to the problems of your country. Indeed, any strategy must be aware of the context. However, when the quality assurance strategy is being developed, the experiences of other countries are always useful. The discussions in this module should be viewed with this understanding.

Activity 4

1. Browse the Internet and look at the different approaches followed by quality assurance agencies to assess quality standards.

2. What type of combination of approaches would be suitable in your country?

3. Reflect on the flexibility that would be required for quality assuring institutions/programmes in your country.

4. Analyze the safeguards agencies establish when they rely more on professional judgment and reflect on the safeguards you need in your country.

Lessons learnt

Lesson 1: Understandings of quality depend on the context. Indeed, there is no one way of defining quality. However, depending on the purpose of quality assurance, the agency must establish a suitable definition for the term 'quality'.

Quality assurance agencies vary greatly in their understanding of quality. This is mostly due to the context in which they operate and their mandate. For an agency that regulates higher education providers and keeps watch on questionable providers, adherence to externally-set standards becomes 'quality'. In a well-regulated system with institutional autonomy, the quality assurance agency may have a different understanding of quality. As quality is a complex and relative concept that is different for different stakeholders, it is difficult to have a tight definition of it. The more one defines quality, the less space is left for innovation and creativity. This is not necessary in mature systems where institutional autonomy has the potential to enhance quality by bringing innovation and creativity. However, concerns about accountability cannot be underestimated. It is necessary to have fair and credible ways of measuring it. Thus, defining quality for quality assurance requires a broader understanding of the national context and the mandate of the QAA.

How quality will be understood in a specific context must also be explicitly stated. If it is not, implicit assumptions begin to operate. These can bring out a number of contradictory elements. This could jeopardize even the best-meaning efforts at self-assessment, external assessment or quality assurance.

Lesson 2: Defining basic terms such as indicators, standards and benchmarks in quality assurance discussions is necessary. This is the case even though quality assurance agencies use the terms interchangeably. Once the definitions are settled, it is also necessary to ensure consistent usage of the terms.

Quality assurance agencies develop their procedures for quality assurance starting from the notion of 'quality'. In this process, they use a variety of terms such as 'statistics', 'indicator', 'criterion', 'standard' and 'benchmark'. The agencies use these terms loosely. Indeed, 'indicators', 'performance indicators' and 'indicators of quality' are used interchangeably, as are 'criteria', 'standards' and 'benchmarks'. The same term is used by different bodies to denote different understandings and measures. However, the following definitions may be broadly acceptable in the quality assurance context:

Statistics – statistical data or data collected in a systematic way

Indicator – Data or statistic that indicates or signals something

Performance indicator – Data that signals some aspect of performance

Criteria – Aspects or elements against which a judgment is made

Standards – Specification of aspects or elements or principles to which one should conform or by which quality is judged.

Benchmark - A point of reference to make comparisons

Lesson 3: In some systems, whether something is of quality depends on its conformity to externally-derived standards. There are also systems where the goals and objectives of an institution are the starting point to understanding the quality of the institution. Some systems combine the two. This makes it necessary for a programme or institutions to conform to external standards. At the same time, they can do this on their own terms, invoking their own principles and priorities.

When compliance to norms, accountability, and adherence to rules and regulations become predominant, institutions must demonstrate their quality against a set of pre-determined standards. These standards may be quantitative or qualitative. In most programme accreditation policies in professional areas of study, standards relate to good institutional procedures and practices with a practical perspective. These agencies interpret quality in terms of how effectively new entrants to the profession are prepared for their responsibilities. In recent years, this has resulted in many professional bodies paying attention to competency-based standards to understand quality.

Contrary to this perspective, the 'fitness–for-purpose' understanding of quality starts from the institution's purposes. Adopting the fitness-for-purpose or standards-based approach will determine the broader approach followed by the quality assurance agency. For example, the audit is more naturally based on fitness-for-purpose. Accreditation, on the other hand, is standards-based. Fitness for purpose is suitable in systems where other mechanisms ensure that pre-determined or threshold-level standards are met by the institutions or programmes. It is also effective in systems with good self-regulation mechanisms, where institutional diversity is promoted (as against conformity to standards) and where institutions of higher education are granted a high level of autonomy.

There are also criticisms of the fitness-for-purpose approach. These are based on the assumption that it undermines the 'fitness of purpose'. However, one can argue that it is difficult to separate the two approaches (FFP and FOP). Practically speaking, it is not possible to have an absolute 'fitness-for-purpose' understanding of quality. Some amount of 'what is acceptable and appropriate' to be considered as quality can be found in all understandings of quality. There are certain non-negotiable national development requirements within which HEIs must determine their mission. This takes care of the appropriateness of purposes, even if the quality assurance agency chooses 'fitness for purpose'. Many agencies use a combination of the fitness-for-purpose and fitness-of-purpose approaches.

Lesson 4: Quality may mean reaching at least a threshold level in the case of some agencies. In others, it might require standards of high quality (or good practice). In most systems, different complementing mechanisms ensure both minimum requirements and high standards.

Some quality assurance agencies aim to ensure that only the minimum requirements are fulfilled for a particular status to be granted. Such approaches are generally meant for compliance purposes. The outcome has implications for approvals and sanctions. Within the context of diversification and privatization, most developing countries are confronted with many low-level providers. Yet there is no system for dealing with low-quality providers. In these cases, minimum standards are the priority. This approach has been called 'quality control'. Contrary to this approach, there may be other initiatives within the same country that

emphasize 'improving institutions'. These initiatives therefore may not follow the regulatory approach. In these cases, quality assurance agencies set standards that focus more on the fitness-for-purpose model and require institutions to develop a strong self–regulation ability. They therefore value the capacity of an institution to identify its strengths and weaknesses, and to develop realistic and verifiable improvement plans. A few agencies have also set standards of high quality, rather than just fulfillment of minimum requirements. In general, most systems have a complementary approach in which some mechanisms may focus on minimum requirements (monitored by regulatory bodies), while others ensure constant improvement.

Lesson 5: The areas of quality assessment are broadly the same in most quality assurance agencies. However, the focus, scope and depth of assessment of those aspects might vary.

The areas or aspects considered by quality assurance agencies have a lot in common. Indeed, there is agreement on the areas that are key to assessing quality. This is true even among agencies that differ in terms of the country context in which they operate and the unit of quality assurance. These key areas include aspects such as: academic programmes; students; academic staff; internal quality control; infrastructure; research; outreach environment; organization; and management. When an institution is being accredited, curricular aspects may be more concerned with the overall policies and practices of the institution. Accreditation of a programme, on the other hand, looks more closely into the quality of its curriculum. Similarly, institutional accreditation might also look at the quality of one or more programmes to seek evidence for the evaluations. However, the purpose is not to pass judgment on the quality of the curriculum of that programme. Rather, it aims to draw inferences about the overall curricular aspects of the institution. In other words, the areas of concern for quality assurance are the same for most purposes of quality assurance, but there are differences in terms of focus and scope.

Many systems are beginning to recognize that it is not enough to focus on inputs and processes. These are easier to measure and represent the bulk of the standards and criteria applied by most QA agencies. Yet there is also a need to focus on results and outcomes. This has led to new indicators being identified (progression, drop out and graduation rates, employment figures, graduate satisfaction, employer satisfaction). These new indicators are harder to measure but provide a much better view of the actual impact of a programme or institution on the society it serves.

Lesson 6: A critical element in quality assurance is the use of evaluative guidelines or frameworks against which the agency can make decisions. Agencies do this in many ways. Some develop standards and criteria. Others agree on a set of indicators, while yet others define benchmarks. Varying levels of reliance on quantification and professional judgment may be observed. Balancing quantification and peer assessment without compromising the objectivity of assessment is essential.

Well-developed systems with strong internal quality assurance mechanisms generally rely more on benchmarks they set for themselves. In those systems, moving towards higher levels of performance and peer assessment are central to

the quality assurance framework. In emerging systems, there may be a mix of accountability concerns for basic funding and self-improvement of HEIs. In these cases, quality assurance agencies use both quantitative indicators and peer review carefully. When there is an emphasis on consistency, or compliance or agreement on expected levels of performance, quality assurance agencies tend to specify minimum standards. They then use these as the frame of reference for quality assurance. This implies that institutions are required to provide specific quantitative data to support their judgments on how well they meet the agency's standards or criteria. On the other hand, some quality assurance agencies do not check compliance to standards. Nor do they provide explicit norms. This is because they believe that once the norms are made explicit they might become counterproductive to 'institutional diversity' and the 'fitness-for-purpose approach'. This does not mean that compliance to standards is not important. Rather, it indicates that there may be other mechanisms that ensure compliance. Once the threshold level is already ensured, the agency checks how well HEIs are performing in their own way to achieve their goals and objectives. Considering diversity is important here. Moreover, relying on quantitative assessment may not help. Not specifying standards does not mean that the quality assurance agency does not pay attention to them. Even those agencies that emphasize fitness for purpose give some indications as to what it means. They also provide information on how to tell whether an institution's actions actually fit its purpose.

Lesson 7: The quality assurance agency may initially develop a general framework for the self-assessment of institutions or programmes. However, as the methodology develops, it must consider fine-tuning its approaches. One of the issues it might consider is raising awareness of 'institutional diversity' and making self-assessment more relevant and useful to institutions.

Quality assurance agencies should also address the issue of flexibility in the appreciation of quality. This is necessary for both self-assessment and the review framework. The fitness-for-purpose approach is one way of introducing flexibility to take into account specific missions relating to local circumstances. Basically, it must consider whether it can use the same set of standards and criteria for different types of institutions and different types of programmes. In any higher education system, there are institutions with varying characteristics. Indeed, they may be research-intensive, teaching-oriented, young, old, specialized and/or multi-faculty. Whether the same set of guidelines, criteria and expectations for self-assessment are adequate is an issue in these systems. In general, agencies provide limited flexibility in planning and organizing self-assessment.

There are also examples where innovative approaches have introduced flexibility. This can be done through the flexible application of the same guidelines and criteria. In such cases, words such as 'adequate', 'appropriate' and 'sufficient' are used frequently. In addition, the institutions are asked to provide evidence that they fulfil these requirements. The reviewers then assess the validity and reliability of the institution's claims. The following steps are essential to ensure that the context is taken into account: train reviewers to take care of contextualization, but without compromising the objectivity of assessment; select appropriate reviewers who understand the contextual consideration without moving away from the quality assurance framework; and establish appropriate safeguards.

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Web resources

All India Council for Technical Education (AICTE) web site, India: www.aicte.ernet.in

Australian Universities Quality Agency (AUQA) web site: www.auqa.edu.au

Canadian Institute of Chartered Accountants (CICA) web site, Canada: www.cica.ca

Comisión Nacional de Acreditación web site, Chile: www.cnap.cl

Commonwealth Higher Education Management Service (CHEMS) web site: www.chems.org

Council on Higher Education (CHE) web site, South Africa: www.che.ac.za.

Council on Higher Education Accreditation (CHEA) web site, USA: www.chea.org

Higher Education Funding Council of England (HEFCE) web site, UK: www.hefce.ac.uk

International Network for Quality Assurance Agencies in Higher Education (INQAAHE) web site: www.inqaahe.nl

Middle States Commission on Higher Education, USA www.msche.org,

National Assessment and Accreditation Council (NAAC) web site, India: www.naac-india.com.

National Board of Accreditation web site, India: www.nba-aicte.ernet.in

New England Association of Schools and Colleges web site, USA: www.neasc.org

Quality Assurance Agency (QAA), UK: www.qaa.ac.uk

The modules on External quality assurance: options for higher education managers

Quality assurance has become a topical issue on the higher education policy agenda. More and more countries are questioning their existing structures and are introducing new mechanisms and structures for external quality assurance. They seek to ensure minimum educational standards across diversified higher education systems and to provide a lever for continuous quality improvement.

The present material was developed by UNESCO's International Institute for Educational Planning (IIEP). It targets decision-makers and managers in government departments such as ministries of education, buffer organizations of higher education and quality assurance agencies whose task it is to design or develop the national framework for quality assurance. These modules should provide support for their decisions on external quality assurance systems, while discussing options that have been tried out successfully in a variety of countries.

The modules are based on the outcomes of two IIEP case study research projects, one on "methodological and organizational options in accreditation systems" and another on "regulation and quality assurance of cross-border providers of higher education".

Accessible to all, the modules are designed to be used in various learning situations, from independent study to face-to-face training. They can be accessed on the IIEP web site www.unesco.org/iiep, and will be revised as needed. Users are encouraged to send their comments and suggestions.

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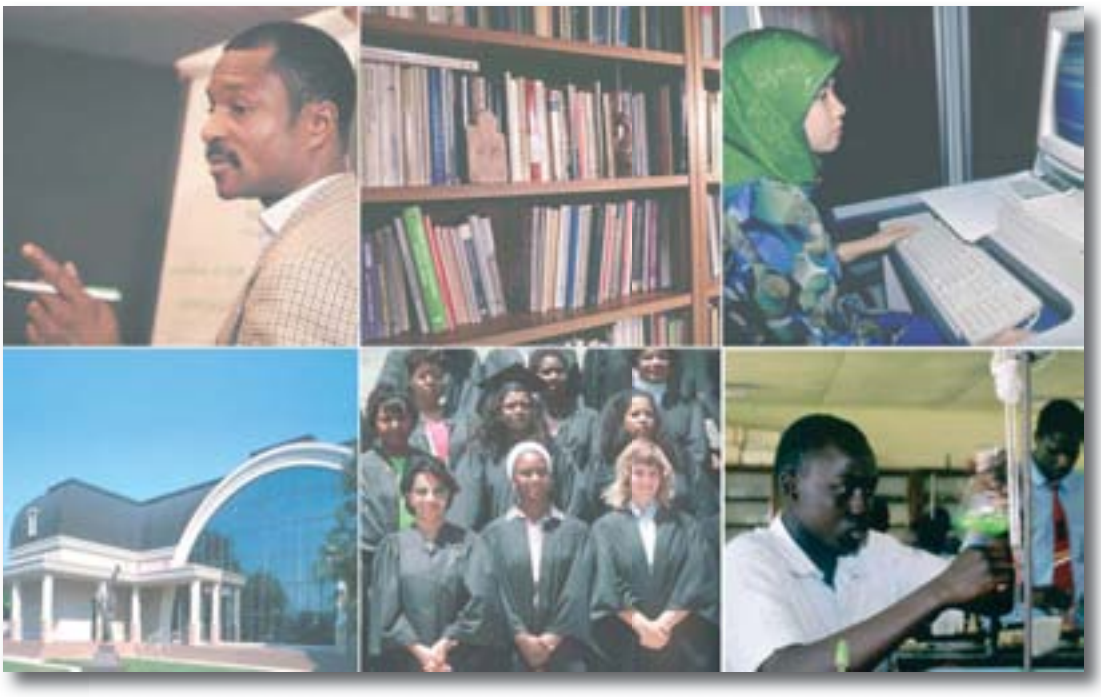
Module 5

Regulating and assuring the quality of cross-border providers of higher education



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External quality assurance: options for higher education managers

These modules were prepared by IIEP staff and consultants to be used in training workshops or by individuals as self-study materials. IIEP is also using this material for its distance education courses.

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Module 5

REGULATING AND ASSURING THE QUALITY OF CROSS-BORDER PROVIDERS OF HIGHER EDUCATION

Objectives of the module **4**

Questions for reflection **4**

Characterizing cross-border providers **5**

Introduction 5

1. What is cross-border or transnational higher education? 6
2. Who are the providers of cross-border higher education? 7
3. What challenges arise from cross-border commercial provision, in particular for developing countries? 12

Options in the regulation of cross-border higher education **18**

1. What are the basic approaches in the regulation of cross-border provision? 18
2. Regulatory regimes for branch campuses 20
3. Regulatory regimes for franchised courses and twinning/joint study arrangements 31

Options for external quality assurance regimes for cross-border higher education **39**

1. Institutional accreditation for TNHE provision 39
2. Programme accreditation for TNHE provision 42

Regulatory and quality assurance regimes and national policy objectives **48**

International frameworks for regulating and assuring the quality of transborder higher education **52**

Lessons learnt **54**

References and further reading **57**

List of abbreviations

CHE	Council on Higher Education (Kenya)
CHED	Commission for Higher Education Development (Philippines)
CONEAU	*Comisión Nacional de Evaluación y Acreditación Universitaria* (National Commission for University Assessment and Accreditation, Argentina)
DoE	Department of Education
EQA	External quality assurance
GATS	General Agreement on Trade in Services
HEI	Higher education institution
HEQC	Higher Education Quality Committee (South Africa)
HRD	Human Resources Development
ICT	Information and Communication Technology
LHE	Law on Higher Education
LIA	Letter of Interim Authorization
MQA	Malaysian Qualifications Agency
MQF	Malaysian Qualifications Framework
NAB	National Accreditation Board
PIM	Programme and institutional mobility
QAA	Quality Assurance Agency
QAD	Quality Assurance Division
SAQA	South African Qualifications Authority
TNHE	Transnational Higher Education
WTO	World Trade Organization

List of boxes

Box 1 Programme mobility in seven countries 10

Box 2 Cross-border virtual higher education programmes in seven countries 11

Box 3 Impact of TNHE providers on local higher education systems 14

Box 4 Summarized case study findings on quality, access and equity 15

Box 5 Requirements for registration in Kenya 21

Box 6 Licensing organized as a continuous process in Chile 23

Box 7 Requirements for licensing used by CONEAU in Argentina 24

Box 8 Special legislation to protect the use of the term 'university' in South Africa and the Philippines 27
Box 9 Legislation in Argentina with regard to for-profit university providers 28
Box 10 Limitations on equity stakes in the Philippines 28
Box 11 Rules and regulations for creating new study programmes in the Philippines 31
Box 12 Direct encouragement of franchise education in Oman 33
Box 13 No regulation in Kenya for chartered public universities 33
Box 14 Moderate regulatory approach to franchise education in Hong Kong 34
Box 15 Tight regulatory approach to franchise education in the Philippines and South Africa 35
Box 16 Tax regimes and foreign exchange regulations in Russia and the Philippines 36
Box 17 Empowering students to make informed choices about higher education providers, South Africa 37
Box 18 Institutional accreditation in Kenya 40
Box 19 Institutional auditing in South Africa 42
Box 20 Programme accreditation in South Africa 43
Box 21 Quality assurance of cross-border providers in Malaysia 44
Box 22 Providing information about the status of institutions and programmes to the public in Kenya and Chile 46
Box 23 Liberal regimes in Oman, Kenya and Russia 49
Box 24 Moderately liberal regimes for TNHE providers in Argentina and Chile .. 50
Box 25 Tight regulatory regimes in the Philippines and South Africa 50
Box 26 Conditions under which countries can benefit from TNHE 53

List of tables

Table 1 Typology of cross-border provider mobility 8
Table 2 Typology of cross-border programme mobility 9
Table 3 National regulatory frameworks for cross-border higher education .. 19

Objectives of the module

This module will:

- make you aware of the particular forms of cross-border higher education in developing countries and the challenges arising from them;
- introduce you to different approaches and instruments for regulating cross-border higher education;
- present you with approaches and instruments for the external quality assurance (EQA) of cross-border higher education; and
- acquaint you with different policy rationales and objectives, and their relationship with different types of regulatory and quality assurance regimes.

On completion of this module, you are expected to:

- appreciate various options in the regulatory regimes and quality assurance systems of cross-border providers;
- categorize different types of cross-border providers;
- relate these options to policy rationales and objectives; and
- evaluate the suitability of available options for regulation and quality assurance in your country context.

Questions for reflection

What particular challenges are posed by cross-border higher education in my country?

How can cross-border providers contribute to national development and the relevant objectives of higher education policy?

What regulatory and quality assurance regime for cross-border higher education exists in my country?

Is this regulatory and quality assurance regime in line with national policy objectives?

Module 5

REGULATING AND ASSURING THE QUALITY OF CROSS-BORDER PROVIDERS OF HIGHER EDUCATION

Characterizing cross-border providers

Introduction

Globalization processes are increasingly affecting higher education systems worldwide. In an ever-more open world, university students and staff, research and the curriculum benefit from exposure to different values, cultures, ideas and modes of thinking. Institutions gain extra tuition fees and increases in student numbers. National education systems balance the demands made on them by domestic and international students either by increasing the student body, or by 'outsourcing' part of their education needs.

Globalization of higher education occurs via international students on campus, student exchanges, collaboration with overseas partners, hiring of international staff, and teaching an international curriculum.

Demand for higher education in many countries has led to formerly unknown levels of growth. Some countries wish to use other countries' higher education infrastructure for their short-term education needs. The *Global student mobility report 2025* (2002) prepared by IDP Education Australia predicted that demand for international education would increase from 1.8 million international students in 2000 to 7.2 million in 2005.

It is expected that the numbers of students moving to other countries will not be sufficient to satisfy the growing demand for higher education in countries with a dense population. Currently, much experimentation is taking place. This experimentation concerns new types of providers and forms of collaboration within countries, but increasingly also across countries.

This module looks at the issue of regulation and quality assurance of cross-border providers of higher education, from the particular angle of the receiving country. Both the sending and receiving countries are responsible in this respect. However, the receiving country is unquestionably the entity that will have to ensure that cross-border provision corresponds to its own educational standards and goals for national development.

In *Chapter 1*, this module presents you with a categorization of cross-border providers and provision of higher education in terms of programme and

institutional mobility (PIM). *Chapter 2* exposes options and instruments for regulating cross-border providers of higher education through legislative action. *Chapter 3* focuses on EQA as another major instrument for the regulation of cross-border providers of higher education services. Since regulation and quality assurance cannot be developed independently from broader policy rationales, *Chapter 4* aims to establish a relationship between the two. Finally, *Chapter 5* looks at international frameworks for the cross-border provision for higher education as a tool to guide national policy-making.

1. What is cross-border or transnational higher education?

'Transnational education' is defined in a joint UNESCO/Council of Europe *Code of practice in the provision of transnational education* as the following:

> "All types of higher education study programmes, sets of courses of study, or educational services (including those of distance education) in which the learners are located in a country different from the one where the awarding institution is based. Such programmes may belong to the educational system of a state, different from the state in which it operates, or may operate independently of any national system."
>
> (UNESCO and Council of Europe, 2001)

Traditionally, higher education has been characterized by its international outreach and linkages. This is because science, research and communities of scholars naturally interact across borders. The current level of international students, programme and institutional mobility is, however, a new phenomenon. Moreover, most of these traditional international linkages used to exist primarily for academic and cultural purposes. Recently, much cross-border education has begun to be conducted with a commercial aim. A shift from 'aid to trade' has occurred where academic co-operation involves both a developed and a developing country (OECD, 2004*a*).

Indeed, the inclusion of 'educational services' in discussions within the framework of the General Agreement on Trade in Services (GATS) is underway in the World Trade Organization (WTO). This in itself places higher education as a potential commercial service. The GATS distinguishes four modes of international supply of educational services:

Mode 1: cross-border supply (distance education, virtual educational institutions, education software and corporate training through ICT delivery);

Mode 2: consumption abroad (students studying abroad);

Mode 3: commercial presence (i.e. local university or satellite campus, language training companies, private training companies) or programme or institutional mobility;

Mode 4: presence of natural persons (professors, teachers, researchers working abroad).

Commercial presence (Mode 3) is when the service, and not its consumer, crosses the border. In Mode 3, foreign investment leads to the establishment of a branch/satellite campus, foreign-owned corporate institution or franchise programmes (programme and institutional mobility). At present, Mode 3 poses the main challenges for regulation and quality assurance to receiving countries. This is because it throws up questions related to the recognition of credentials and institutions. Moreover, it sets challenges regarding quality and relevance for national development.

2. Who are the providers of cross-border higher education?

Trade in higher education covers the provision of educational programmes. However, there are also other related services such as educational testing and examination services, or multimedia education. These are offered by sometimes old and often new providers of higher education. Machado Dos Santos (2002) and Knight (2006) state that they include:

- publicly-traded companies[1];
- corporate universities whereby multinationals set up their own training arm or 'university' for their own employees or for others[2];
- private and for-profit providers operating at a cross-border level;
- media and publishing businesses; and
- educational services and brokers.

From both the publicly and privately funded sectors, the following providers can be distinguished:

- regional and international consortia;
- national virtual university initiatives; and
- national regular universities.

Table 1 lists institutional arrangements relating to mobility.

1. Such as Apollo (USA), Informatics (Singapore) and Aptech (India).
2. Such as Motorola and Toyota.

Table 1. Typology of cross-border provider mobility

Category	Description of form/type of mobility
Branch campus	Provider in country A establishes a satellite campus in Country B to deliver courses and programmes to students in Country B (may also include Country A students taking a semester/courses abroad). The qualification awarded is from provider in Country A.
Independent institution	Foreign provider A (a traditional university, a commercial company or alliance/network) establishes in Country B a stand alone HEI to offer courses/programmes and awards.
Acquisition/merger	Foreign provider A purchases a part of or 100% of local HEI in Country B.
Study centre/teaching site	Foreign Provider A establishes study centers in Country B to support students taking their courses/programmes. Study centres can be independent or in collaboration with local providers in Country B.
Affiliation/networks	Different types of 'public and private', 'traditional and new' providers from various countries collaborate through innovative types of partnerships to establish networks/institutions to deliver courses and programmes in local and foreign countries through distance or face-to-face modes.
Virtual University	Provider that delivers credit courses and degree programmes to students in different countries through distance education modes and that generally does not have face-to-face support services for students

Source: Knight, 2005.

Table 2 distinguishes six categories of cross-border provision in terms of programme mobility.

Table 2. Typology of cross-border programme mobility

Category	Description of form /types of mobility
Franchise	An arrangement whereby a provider in the source Country A authorizes a provider in another Country B to deliver their course/programme/service in Country B or other countries. The qualification is awarded by a provider in Country A. This is usually a for-profit commercial arrangement.
Twinning	A situation whereby a provider in source Country A collaborates with a provider located in Country B to develop an articulation system allowing students to take course credits in Country B and/or source Country A. Only one qualification is awarded by the provider in the source country. This may or may not be on a commercial basis.
Double/ Joint degree	An arrangement whereby providers in different countries collaborate to offer a programme for which a student receives a qualification from each provider or a joint award from the collaborating providers. Normally this is based on academic exchange.
Articulation	Various types of articulation arrangements between providers in different countries permit students to gain credit for courses/programmes offered/delivered by collaborating providers.
Validation	Validation arrangements between providers in different countries which allow Provider B in receiving country to award qualification of Provider A in source country.
Virtual/distance	Arrangements where providers deliver courses/programmes to students in different countries through distance and online modes. May include some face-to-face support for students through domestic study or support centres.

Source: Knight, 2005.

IIEP research, led by Michaela Martin (2006), on the identification, mapping, regulation and quality assurance of cross-border providers of higher education in seven countries (Argentina, Chile, Kenya, Oman, the Philippines, Russia and South Africa) drew conclusions on programme mobility. Set out in *Boxes 1* and *2*, these conclusions are applicable both to face-to-face and virtual provision of higher education.

Box 1. Programme mobility in seven countries

While branch campuses and corporate institutions are the most visible item of cross-border higher education, the quantitatively more predominant forms of TNHE are at the study programme level. Programmes of the cross-border commercial provision can be classified into:

- Franchise programmes (where the foreign university either sells a part or an entire curriculum, the associated training materials or an instructional design) and/or is in charge of one or several elements of the process of delivery, assessment or certification of either the entire programme or only part of it (in the case of a ladderized study programme).
- Joint study programmes or twinning arrangements: where either the programme delivery (credit transfer), assessment and certification are shared between the home and foreign university, but where students obtain a qualification from both higher education institutions.
- Validation arrangement: institutions in a foreign provider country establish a course offered in a local higher education institution as equivalent to their own and thus allow it to award their qualification (this latter modality was found only in Russia).

Twinning and joint study programmes cover very different realities in the case countries; only those countries such as Oman, which directly encourage their provision, have detailed information on such programmes. Chile mentions that many twinning programmes are organized under an "academic umbrella" of a licensed local university, but they are often not equivalent to those offered in the home country and are also frequently not recognized by the foreign country. In some cases, students are required to travel to the provider institution for a specific period of time. In Chile, most twinning programmes (32 out of 45) were of the Master's level, only seven were located at the diploma level, and the other ones were at the PhD level. Joint degree programmes, where two higher education institutions commit themselves to grant a double degree, were perceived by case study authors as more reliable arrangements from a qualitative point of view.

Programmes delivered are to be found predominantly in areas of professional specialization for the tertiary service sector such as: computer science, information technology, business administration studies, and law and accounting. Much of the TNHE provision concentrates on programmes in the non-university sector, thus offering professional higher education for middle-level managers at the diploma or certificate level. Another pole of concentration are MBAs or other professional graduate specialized courses.

Since TNHE programmes are fee-paying, they are market-driven and prepare in general for private sector employment. Several authors emphasized that the cross-border programme offer is not necessarily related to national manpower needs, as perceived by the public authorities. In Russia for instance, it was underlined that there has been an over-production of MBAs in relation to the real employment capacity of the emerging private sector. The problem lies in an excessive offer of MBA programs, most of which are of low quality. In South Africa, private providers were said to basically offer more of those programmes in low cost areas, which are already delivered by public institutions, and thus they do not offer anything complementary to the public system. In Oman, in 2003, only 19 per cent of

enrolments in the cross-border sector were in medicine, engineering and sciences, and the remainder in human and social sciences (with 21 per cent in computer sciences).

TNHE programmes frequently are offered as ladderized programmes and they thus offer the opportunities to pursue and obtain degrees in an institution abroad. Where local labour markets are constrained and where there are more lucrative employment opportunities in the home country of the foreign provider, TNHE may thus offer attractive employment opportunities abroad. Such programmes are very much in demand since they offer easier access to foreign labour markets. In South Africa, opportunities arising from the portability of degrees obtained from the branch campuses were said to be of particular importance for white South African students who may be particularly interested to emigrate to Australia, the UK or the Netherlands.

Case studies have mentioned only occasionally the financial agreements that rule the operation of franchise programmes. It is interesting to note that the example described under the Russian case study of an MBA programme jointly run by the Moscow-based Academy of National Economics and Kingston University foresees that 40 per cent of the income generated is reverted back to Kingston University Business School. In Oman, in one programme offered in affiliation with a British university by the College of Banking and Financial Studies, the British university perceives 70 per cent of the tuition fees and the local institution perceives 30 per cent. These few figures show that there are considerable financial interests for foreign higher education institutions.

Source: Martin, 2006.

Box 2. Cross-border virtual higher education programmes in seven countries

Cross-border virtual higher education (e-learning) is accessible and offered in all case countries, simply because access to Internet providers is increasing in all case study countries. However, the knowledge of the offer and its use is very scattered because the students can enroll into courses offered abroad without consent or without informing their national authorities. National authorities tend to have a more detailed picture of students studying with local universities offering programmes at a distance. National authorities receive information on cross-border virtual providers, when students seek for recognition or equivalence of qualifications obtained virtually. In this context, the case studies mentioned different mechanisms: decisions related to recognition are either the responsibility of the Ministry of Education, a national agency for quality assurance, or less frequently of a national university, such as in Chile. This is due to a tradition of strong academic autonomy where the national authorities have no say in the definition of academic programmes.

Source: Martin, 2006.

An analysis of linkages shows that strategic alliances are formed across the public/private divide of HEIs. However, there are also links between private firms

and public/private higher education institutions. Frequently, a cross-border firm or private/public university operates with local private providers, since they are the most easily accessible segment in national higher education systems.

Most cross-border commercial higher education can be found in countries with a considerable number of English-speaking students. This is because the majority of providers are from Australia, the UK and the USA. Moreover, the English language medium is often perceived to offer a comparative advantage both for the national and international labour market. Countries in East Asia and the Middle East are most affected by cross-border supply. However, countries in other regions are also recipients of cross-border higher education. In Latin America, Spain is also becoming also a provider. Indeed, Spanish universities frequently offer franchise courses together with Latin American universities. In addition, most commercial cross-border provision can be found in countries with a relatively large sector of private higher education and already high levels of tuition fees. This means that the cost of commercial cross-border higher education is often not much higher than traditional provision. Finally, demand in medium-income countries can be expected to make establishing cross-border commercial higher education easier.

Cross-border higher education, however, not only involves a one-directional stream of provision from northern to southern countries. Institutions in developing countries are themselves exporting higher education to neighbouring countries. This makes cross-border higher education indeed a multi-directional flow of services.

3. What challenges arise from cross-border commercial provision, in particular for developing countries?

Cross-border provision of higher education offers both opportunities and challenges for higher education systems, for their respective communities and for countries at large. In many developing countries the state cannot satisfy the social demand for education. In these circumstances, private provision may be a way to offer better access to higher education. In addition, foreign providers may bring innovative educational practices and opportunities to learn from each other. They may also offer a welcomed internationalization of curricula. They may provide new types of study programmes not yet available in the country, or complement the existing curriculum. Through direct collaboration between two HEIs, the possibility for transferring knowledge and innovative practices may be particularly high.

There are also many fears relating to cross-border higher education. These are loudly expressed by public national providers of higher education. A particular concern with cross-border provision is that it challenges quality standards and consumer rights in countries where administrative capacity is weak and where there are no functioning quality assurance systems. In particular, there may be problems associated with unrecognized, unregulated HEIs that are not subject to a national quality control system (by either the sending or the receiving country). Consumer protection is also an important national concern. This is particularly important in relation to so-called ‘diploma mills’ or ‘fly-by-night providers’ offering fraudulent services. Another problem is that cross-border provision is unstable. Its existence may be discontinued from one day to another when it is no longer profitable, leaving students unattended and without an opportunity to reach a final

qualification. Wrong information may also be provided on the study offer and credentials to be obtained.

Currently, the challenges are perceived to be particularly important in those developing countries in which social demand for higher education is high and expected to increase. In many developing countries, where populations are young and still growing, many more young people will request access to higher education in the years to come. Higher education systems today are often still fragile. Moreover, they suffer from a shortage of qualified academics, 'brain drain' and inadequate funding. The capacity of public administrations to steer and manage their higher education systems is also often rather weak. In addition, information systems are frequently underdeveloped both at the institutional and system levels.

In addition to the problem of assuring the quality of cross-border higher education, there are also possible negative effects on equity. Indeed, tuition fees might be prohibitive and access to cross-border education limited to privileged social classes. Cross-border provision may be concentrated in major urban areas. This exacerbates inequities created through uneven provision in the country. Finally, the state might be tempted to further cut down on costs related to higher education. It may assume that the market can bear a growing part of it.

Moreover, public institutions in many developing countries are frequently fee-paying. Western higher education may be perceived as providing a comparative advantage for labour market entry, both locally and internationally. At present, pressure is being applied on national authorities to accept foreign providers. This is due to relatively low participation rates, the intention to link up with the global knowledge economy and political pressure arising from increasing social demand for higher education. Branch campuses and franchised higher education in particular are often positively perceived. This is because they offer higher education within the country and thus lower the potential for brain drain. Indeed, the problem of brain drain is particularly acute when students reside for long periods of time in another country. All these reasons make developing countries particularly open to outside providers.

The IIEP case study research was concerned with assessing the impact of cross-border higher education provision on the local higher education system. This was done with the intention of shedding light on the frequently very heated discussions about their contribution to the national system. Governments often tend to welcome the cross-border provision of higher education because it offers new and often innovative opportunities for study. Moreover, it widens access while being less prone to brain drain. However, the public sector of HEIs tends to consider this new offer as a threat. *Box 4* outlines some findings from the impact on local higher education systems as well as on quality, access and equity in the seven countries studied.

Box 3. Impact of TNHE providers on local higher education systems

TNHE providers in all case studies function predominantly with the academic staff of the public universities. The Kenya study states for example that 70 per cent of their staff in Kenyan TNHE providers teach at the same time in local universities. Foreign professionals join institutions and programmes generally for short periods of time.

Cross-border providers do thus sometimes offer additional opportunities for the generation of personal income to university teachers. The Russian case study mentions that the average pay of 50 per cent of university teachers is less than 1,500 roubles (around US$50 per month). By the present standards, the authors assume that only the pay of 10 per cent of teachers can be considered as acceptable. As a consequence, 85.5 per cent of university teachers had a second employment in 2002 which included 43.7 per cent of teachers on a regular basis, 31.8 per cent from time to time, and 10 per cent rarely.

Some cross-border providers do offer opportunities for local staff development. The Philippine case study refers to the local staff that was trained by the TNHE provider to deliver courses, and the faculty qualifications that had been upgraded and updated. The Russian case mentions that academic staff from the local university engaged in a MBA programme with a British university have received training overseas. In the MBA programme, which illustrates the functioning of TNHE in Russia, there is a system of shadow teaching whereby a Russian expert follows the teaching sessions of the British colleague and thereby assimilates both methods and contents. It is somewhat difficult to judge whether these incidences are frequent or more of an exception.

Case study authors also commented on the question of whether TNHE provision does create competition for the local higher education system in terms of student attraction. The answer that was provided by several cases was that there is some marginal competition, however not with the local public system, because fees in the TNHE sector are relatively high and the public sector is generally the preferred option for students. Competition arises mainly between local and cross-border private providers because fees are of comparable levels. There may be exceptions in some parts of the system, for instance the post-graduate higher education provision where Argentinean universities charge relatively high fees, while undergraduate courses are generally free of charge.

Another question was asked to find out whether there were any institutional linkages between local and TNHE providers. Case study authors stated that there was very little organized interaction between the TNHE sectors and local public institutions beyond the movement of individuals. They simply co-exist without affecting each other's operation.

Source: Martin, 2006.

Box 4. Summarized case study findings on quality, access and equity

Quality

In South Africa, the Department of Education initiated the process of registration of private providers, including the cross-border ones in January 1999. Fourteen cross-border providers (11 universities and three colleges) from the UK, USA, Australia and the Netherlands applied for registration and only four were accepted according to established national quality standards. In 2003, the South African Council of Higher Education undertook the accreditation of all MBA programmes. This process brought to light that, of the four MBA programmes offered in the TNHE sector, only one could receive conditional accreditation and three saw their accreditation withdrawn. This was due to one of the following factors: lack of competent and adequate staff, heavy reliance on part-time staff from industry, dual certification by both the local partner and foreign institution in two cases, curricula not contextualized to reflect South African needs of management training, high supervisor-student ratios, lack of research track records, limited and under-resourced libraries, quality assurance dependent on the parent institution, and finally, external evaluation systems not implemented rigorously.

However, a report was also made of enhanced curricula and cross-fertilization of knowledge and teaching/training modes in much of the TNHE provision. The Philippines and Kenya mentioned that new technology and equipment had come along with those TNHE courses located in the ITC domain. Also, mention is made of many TNHE programmes offered in the English language in countries such as Russia, Oman, but also Chile and Argentina. Offering programmes in English provides graduates with a supplementary advantage, in particular when they attempt to access parts of the international labour market (multinationals) or work abroad.

Several case study authors mentioned that the TNHE providers were filling quantitative or qualitative gaps in the national offer in the area of professional higher education, mainly in the provision of training for the private service sector. This was perceived to lead to improved employability of graduates. In no country, however, was there information available, such as from tracer studies, that could have substantiated and quantified this impression. Oman also mentioned that the expectation to increase the offer in the sciences sector has not been fulfilled by the TNHE provision. It appears thus that the TNHE provision filled gaps in the national system of qualifications, but only where the profitability was high because the training provision could be reproduced at low cost, and because there were attractive labour market openings. This general principle rules out the proliferation of cutting-edge and research-informed programmes.

Access and equity

The case study research has shown that the TNHE provision offers new, however often small, increased opportunities for access. In Kenya for instance, existing institutions can meet only 30 per cent of the demand for higher education, not including adult learners. In Oman, the percentage of qualified secondary school leavers admitted in public higher education was only in 27.8 per cent in 2003.

It was said that since 1993, some 10,000 students have graduated from TNHE providers in Kenya. Oman also mentions that the expansion of the private sector, with the help of the cross-border provision of higher education, was the "relatively quick and cheap way" of achieving a rapid expansion in higher education. In 2002, 34,5 per cent of enrolments in Oman were in the private sector.

Access is widening to different extents in all cases, but all authors insisted on the fact that this was happening only in major urban centers (mostly the capital city), where there is a considerable pool of both academic staff and potential students. The Russian case study mentioned that the TNHE provision thus somewhat sharpened regional disparities in the provision of higher education across the country. This was also confirmed for Oman where most private colleges are located in the Muscat area.

Again on the equity front, the Kenyan, Chilean, Argentinean and Filipino case studies underline that the TNHE provision is accessible only to those who can pay for it. In these countries, TNHE providers attract students from the upper social strata of the population because of the high fees. Indeed, in Chile, Argentina and the Philippines, the TNHE providers offer the most costly segment of private training provision: Argentina, Chile, Philippines (with the exception of Kenya where they are comparable to the local private offer, but double the public sector). In South Africa only 24 per cent of enrolment in the four branch campuses is from black Africans, while whites constitute the majority with 54 per cent. This is widely due to the fee structure which is twice that of the local public providers and four times more expensive compared to local private providers.

In some countries, such as Kenya, there is legal provision made to private providers (including) to offer a certain number of scholarships, but frequently needy students do not even know about them and thus do not apply for them. Oman again forms an exception to the rule of TNHE provision only accessible to upper middle class students. Indeed, the Omani government offers scholarships to 80 per cent of the students who study in the private sector. This was the reason for the quick expansion of the private sector.

Source: Martin, 2006.

Activity 1

1. Using the above-mentioned typologies for institutional and programme mobility, prepare a list of cross-border providers operating in your country. What (official) sources of information are available to do so?

2. Prepare a list of challenges that arise from these cross-border providers in your country.

Options in the regulation of cross-border higher education

1. What are the basic approaches in the regulation of cross-border provision?

The first question that comes to mind when trying to address issues related to cross-border higher education is the need to determine its existing scope and the role it plays in any given country, at a specific moment in time.

For some countries, TNHE is an effective answer to unmet demands for higher education. This can be either in terms of enrolment or in terms of areas of knowledge that cannot be dealt with using national resources. It may also provide new pedagogical or curricular approaches that help modernize and update national higher education. It may also bring new technologies or approaches to teaching into the country.

For other countries, it is not such a great opportunity. TNHE may be coming into a country that already provides adequate coverage to those students who want to enter higher education. Or, it may be doing so in areas that are already well covered by national higher education. It may be bringing in 'more of the same', doing so in an expensive manner, charging high tuition fees or even providing a service that is lower in quality to national offerings.

There are different approaches to international trade in higher education. These approaches are frequently related to broader trade policies and the degree to which a liberal approach to trade is favoured in general in the country or not.

One extreme approach can be characterized as the '*laissez-faire* approach'. This involves no regulation, with countries simply ignoring the existence of TNHE providers. As a consequence, they do not recognize their qualifications in the area of public employment. This approach is often adopted by default. This could be because the cross-border provision is relatively small and there does not seem to be much demand for it. Or, it could be because it is politically difficult to define a national policy and a regulatory regime. Sometimes the *laissez-faire* approach may also be used when countries decide that TNHE is not necessarily bad. They therefore will not act against it. In these cases, recognition of degrees is not always an issue. This is mostly because TNHE providers offer degrees in non-regulated areas (where recognition is unnecessary). It is also the most likely strategy when countries do not have any regulatory schemes in place for national higher education. It may therefore be difficult to impose regulations on foreigners, even if the government wants to, which in many cases it does not.

A second type of option could be called the 'regulatory approach'. In this approach, countries accept the operation of international providers in the country, while at the same time trying to control it. They do this in order to guarantee a minimum level of quality, both in the interest of the students or in relation to broader national interests. These national interests could be a nation-building agenda or protecting

the local higher education system. The regulatory approach has, however, many sub-options. These range from liberal regimes to tightly-regulated regimes.

Verbik and Jokivirta distinguish between the following approaches (see *Table 3*):

- no regulations (*laissez-faire*);
- liberal;
- moderately liberal; and
- very restrictive regulations.

Countries also move from one category to the other. They do so in both directions: from liberal to restrictive and from restrictive to liberal. This can be due to the fact that a 'by default' approach has been corrected. Or there may be a change in policy (sometimes outside the education sector) that requires a new approach to cross-border higher education.

Table 3. National regulatory frameworks for cross-border higher education

Model	Regulation
No regulation	There are no special regulations or control of foreign providers, which are free to operate without seeking permission from the host country.
Liberal	Foreign providers must satisfy certain minimum conditions prior to commencing operations (e.g. official recognition in the home country).
Moderately liberal	The importing country is actively involved in licensing and (in some cases) accrediting transnational providers. This model requires that foreign institutions gain accreditation or other formal permission by the host country (e.g. Ministry of Education) prior to commencing operations. This category is diverse, ranging from compulsory registration to the formal assessment of academic criteria. Requirements are generally straightforward and non-burdensome.
Very restrictive	The government or another authoritative higher education body imposes strict requirements on foreign providers. Such institutions may be required to establish a physical presence in the country (i.e. franchised provision is not allowed), only institutions/programmes accredited by the host country's agency are authorized, and/or foreign providers must change their curricula to be in line with domestic provision, etc.).

Source: Verbik and Jokivirta, 2005.

These four approaches represent only broad lines of action. They are linked to and cover many options under these four different approaches. 'No regulation' is an option that strongly favours the development of TNHE in a country, possibly under the 'widening of access' rationale. This option does not require the establishment or development of new administrative structures charged with quality assessment and monitoring and/or the provision of information to the public. However, it is also a risky option. This is because public authorities will have no knowledge of a part of their higher education provision, or the way it affects and interacts with the public system. They thus lose control over what is often a considerable part of the higher education provision within the country. A regulatory approach that intervenes more has the potential to establish an information base on the provision of TNHE and to steer it in line with national policy objectives. In particular, a moderately liberal

regulatory regime allows TNHE providers to be brought in line with national quality requirements. This is particularly true when all national providers, both public and private, fall under the same quality assurance regime. In this case, healthy competition may be created between all providers and good practices exchanged. A tightly restrictive regulatory regime may restrain the development of TNHE providers, who may find it difficult to settle and develop with such a regulatory framework.

Specific legislation to deal with TNHE providers?

One of the basic questions a country must address in relation to the regulation of cross-border providers is whether the existing regime for private providers is sufficient to cover TNHE providers. It must consider whether there are special challenges arising from transnational providers that require a specific policy regime whose foundations will be stipulated in a specific legislation.

Despite the growing provision of TNHE, many countries have not yet developed specific legislation for cross-border providers. Or they have decided that it is either useless or unnecessary to do so. Regulations applying to local providers may be sufficient, if they are really effective. In this case, it is understood that TNHE providers must follow the regulatory regime for private higher education in the country. Some countries simply insert a reference to transnational providers in their legislation for private higher education. This reference indicates that TNHE providers must follow the same framework. It is, however, becoming increasingly common for countries to pass legislation dealing specifically with transnational providers. This legislation may target not-for-profit providers, for-profit providers and corporate universities, branch campuses and franchise education. The issues it should address will be discussed below.

2. Regulatory regimes for branch campuses

Regulatory regimes are well-developed for branch campuses. These are generally treated as local private providers. Some countries request TNHE providers to undergo a separate registration and licensing procedure applicable to private providers. Higher education providers set up with a profit-making objective must usually register with an authority in charge of trade and commerce (such as a Chamber of Commerce). In addition, branch campuses must often undergo some type of licensing procedure. In this procedure, the academic, managerial and financial capacity of a provider to offer an educational programme is assessed. Registration usually takes place with a national authority in charge of private enterprises. This is the case in Kenya, for example (see *Box 5*).

Box 5. Requirements for registration in Kenya

The requirements for the establishment of a private university as stipulated in the Universities Act Cap 210B are expounded in Part Three of the Universities (Establishment of Private Universities) (Standardization, Accreditation and Supervision) Rules of 1989. These are the same ones used for branch campuses of foreign universities. They include:

1. Making a written application to CHE in Form ACC/CHE3;
2. Presenting a written proposal setting out the proposed name, location, academic character, the aims and objects, the form of governance, proposed academic programmes, academic resources, and a timetable indicating the schedule of activities for the first three years;
3. Payment of application fees. This was revised from one-thousand (Ksh. 1,000.00) to fifty thousand (Ksh. 50,000.00) Kenya shillings (in 2002 through Legal Notice Number 160);
4. Payment of the requisite fees for all activities leading towards an award of a Charter. These include: evaluation of academic programmes, inspections, issuance of a Letter of Interim Authority, evaluation of a draft Charter and the awarding of a Charter. (The fees were revised in 2002 through Legal Notice Number 160).

Several bodies are involved in the process of registration which include the Ministry of Research, Technical Training and Technology (MOEST) (this Ministry was merged with the Ministry of Education to form the MOEST), and the Registrar of Companies register transnational commercial providers of non-university level higher education. It is worthy of noting that some public post-secondary institutions that are collaborating with transnational commercial providers such as the Kenya College of Communication Technology (KCCT) are registered as companies.

MOEST registers institutions of higher learning under Part IV of the Education Act Cap 211. This part deals with the registration of unaided schools. Section 14 gives one of the requirements for registration as making an application to the Minister in charge of education. Under Section 17, it is stated that, "the Minister may make regulations with respect to the registration of unaided schools…". This is rather vague, but the Handbook for Inspectors of Educational Institutions gives the basic requirements for starting a school (which are also basically the requirements for registration) as:

- having a registered manager;
- existence of appropriate physical facilities;
- having an appropriate number of qualified teaching staff;
- inspection report from school inspectors and a Public Health Officer;
- making an application to the Minister for Education.

Once the relevant government ministry has registered the institution, the institution is required to get an annual trading license from the city authority. The institution presents registration documents, and pays the fees to the licensing office to process the license. This means an institution cannot get a license before it has been registered.

The requirements for registration under the company's Act include:

- having a company name. (A search has to be conducted at a fee to ensure that the proposed name is not in use by any other company);
- making an application to the registrar of companies indicating the type of business to be transacted by the proposed company and providing names and identification of the directors of the proposed company;
- payment of the requisite application fees.

Source: Kaberia, 2006.

Licensing organized as an event or ongoing process

The licensing procedure may be organized as a single event or as a process. In some countries, the procedures require institutions to undergo two stages in order to be granted 'autonomous' status. The second stage intervenes five to six years after the first. The underlying rationale is that the capacity of an HEI to implement a project can only be assessed on the basis of results obtained. South Africa, for instance, has created a specific requirement for its registration procedure of TNHE providers. There is an ongoing annual monitoring process. TNHE providers must collect and submit annual data on staff/student numbers, qualifications, programmes offered and student attainment to the Department of National Education (DoE). This data allows the Department to closely monitor the evolution and performance of the TNHE provider. In Chile, institutions in Chile must present yearly reports with academic information on students and staff during the supervision period. At least three external review visits are made and students in the different programmes are examined.

Box 6. Licensing organized as a continuous process in Chile

Chilean law does not recognize branches of foreign institutions as such, but considers them always as new institutions, subject to the same regulations applicable to new national institutions. Therefore, if a foreign provider wants to start operating in Chile, it must submit to licensing procedures, and to the supervision of the Consejo Superior de Educación for a time period of no less than six and no more than eleven years.

Indeed, between 1980 and 1990, the number of institutions increased dramatically and regulation was left to the market, which, unable to deal with quality issues, failed to legitimize private higher education offerings. As a consequence, the same neo-liberal military government that de-regulated the system decided that a licensing system was unavoidable.

Thus, in March 1990, a constitutional law created a new, public agency called Consejo Superior de Educacion (CSE), with the responsibility of authorizing all new private universities and professional institutes, and supervising their operation in order to make sure that they fulfill the commitments made in their initial institutional proposal. The Consejo is chaired by the Minister of Education, and is integrated by eight academics appointed by different institutions.

This mechanism imposes strong requirements for all new higher education institutions:

- They must obtain initial authorization, including a statement that they have sufficient resources to develop their project.
- Once they have been authorized, they must submit to six years of supervision, which can be extended for a further five years.
- During supervision, the CSE must write an annual report, based on the assessment of all significant variables related to an institution's operation (teaching, management, finances, teaching and learning resources, infrastructure, etc.). In order to do this, the Consejo asks for self-assessment reports, visits the institution using external reviewers, looks at tests and examinations, and can even directly examine the students of a given programme.
- As a result, it writes a yearly 'action letter' which states the strengths and weaknesses it has identified and establishes any necessary actions.
- During this supervisory period, if the CSE considers the institution is not complying with its requests, or is not operating in accordance to standards of quality and its own mission statement, it can prevent the institution from enrolling new students or it can even withdraw its license.
- At the end of the supervisory period, the CSE must certify the institution's autonomy, or, if it considers its development unsatisfactory, it can withdraw its license and thus, close it down. Since 1990, the CSE has closed down 11 universities and 19 professional institutes, and granted autonomy to 33 institutions (24 of them universities).

The same process applies to new programmes these institutions wish to offer, and all changes in their initial project or new developments must be reported to the CSE.

During that time, the higher education institution asking for license must provide all the information that is requested, which relates to "all significant variables related to its development, that is: teaching, didactical, technical, pedagogical, or to their programmes of study, physical resources, infrastructure, as well as the economic and financial resources necessary for the granting of the academic and professional degrees it intends to offer" (LOCE, 1990, art. 39).

Source: Lemaître, 2006.

Licensing can be conducted on the basis of different criteria. Most often, these relate to the academic, administrative and financial viability of the institutional project submitted to the public authority in charge. The criteria used by Argentina's national agency are listed in *Box 7*.

Box 7. Requirements for licensing used by CONEAU in Argentina

Concretely in the case of private universities and, by extension, foreign ones, the CONEAU (National Commission for University Assessment and Accreditation) assesses the consistency of the institutional project and, in this respect, the possibility to operate as a university. It is an analysis in which each institution's raison d'être and its creation and development rationale are considered; but it is an ethical and responsible analysis as well, in which the data and development strategies submitted by the applying institution are handled confidentially. The assessment is in the hands of experts devoted to assessment topics and familiar with the specific topics to analyze, who, abiding by the current regulations and respecting each institution's background or project, assess whether the institution meets the academic requirements set in order to operate as an institution.

The basic aspects considered in the report issued by CONEAU are the following:

Moral, financial and economic responsibility of the members of the associations or foundations which promote the new university's creation

The following must be ensured: absence of breach of the current legislation, absence of disqualifications, and evidence of a sound financial and economic position to ensure the proper operation of the institution put forward. The applying institution's and their members' academic, educational and cultural track records are also considered. The latter must have experience in university research and teaching as well as in managing education or research institutions. In addition, the projects' transparency and insertion in the jurisdiction proposed must be ensured. This refers to the public image that the institution gives to the local community regarding the future institution and its relations with other local, state or private organizations, among others.

The viability of the institutional and academic project and the compliance with [Law on Higher Education] LHE's principles and regulations

It is necessary that the enterprise's nature, its direct addressees, the type and reach of the commitments made in the project, the fundamental guidelines for its evolution in the short, medium and long run, and its particular contribution to education and social development are clearly defined, which in turn must be completely compatible with the Law on Higher Education. The mission and the objectives of the projected institution should contain them. The physical development plan and that of human and financial economic resources, as well as the organizational and administrative ones must be consistent to ensure achievements. In turn, the institution's mission and objectives must ensure the compliance with the basic duties established in Article 28 of the LHE, and the general operation requirements established in Article 33. The project has to include the design of organically institutionalized bodies responsible for organizing and executing the university processes, ensuring academic freedom and the autonomy of the academic organs which constitute it.

The academic level of the teaching staff initially available and its track record in scientific research and university teaching

The academic staff must have training and experience in line with a university project, and a successful record track in teaching and research. Their number has to be big enough, and with the necessary dedication, specialization and academic level to ensure the start and operation of the institution. The institution has to ensure the effective participation of the proposed academic staff, together with the development of an appropriate plan, to meet the project's requirements throughout the first years of its operation. In turn, it must have procedures for assessing the teachers' performance, and use the results for their promotion and upgrading.

Quality and upgrading of the proposed curricula and research plans

The curricula have to respond to the current standards in the respective subjects or professions and be in line with the profile sought for graduates. The project has to detail the procedures for admission and the assessment of students' academic performance. The staff of teachers-researchers must have an academic level suitable for the proper development of the courses, programmes, teaching and research projects. The creation of centers, institutes or research groups, the research areas encouraged, and the launch and development of university extension activities and services have to be included in plans where the link with the teaching programmes is made clear. Their heads must have suitable qualifications for their tasks, and the projects must have real prospects of getting funding.

Economic means, equipment and infrastructure available to allow the performance of their teaching, research and university extension functions

The resources which the institution has, particularly the building infrastructure, equipment and libraries, have to be suitable for the commencement of the activities and their pursuance throughout the stipulated period. Otherwise, they must have incontestable means to have them at the institution's opening. Whatever the case, the project must have a detailed investments and maintenance plan as well as a sustainable financial plan to face such requirements.

International linkages and the feasibility to reach agreements with other world centers

Formal bonds with local and foreign universities and research centers are crucial for academic, scientific or financial assistance. The expected achievements and benefits of these exchanges are also important for the teaching programme and the intended research.

If the foreign institution has accreditation in its country of origin or other accreditations by international organizations, this is rather an extra item to be assessed, but it does not mean an exemption for the foreign institution from undergoing the accreditation processes established by the law. The main criteria with which CONEAU assesses foreign universities' institutional projects relate to the quality and consistency of the local office's project, the foreign applying university's features, and the real link that the local office has with the headquarters. If the foreign university has accreditations, there will be extra data to be added to the general assessment which it is being subject to, but in no case will they be decisive. The Argentinean state holds the power to carry out its own assessment and accreditation.

Source: Villanueva, 2006.

Protecting the use of the term 'university'

Many countries have created special legislation or regulations to protect the use of the term 'university'. While this does not specifically apply to TNHE, private providers tend to easily name their institutions 'university' or 'academy', because of the prestige that these terms convey. The range of disciplines and level at which programmes are offered are therefore often covered by the law. In South Africa, special legislation was enacted to protect the use of the name 'university'. This was because a high level of privatization led to many private HEIs using the label abusively. In the Philippines, a university must offer four-year study programmes, graduate level courses and some programmes having obtained an advanced level of accreditation (level 3 accreditation out of a maximum of four existing levels).

Box 8. Special legislation to protect the use of the term 'university' in South Africa and the Philippines

Establishment as a university in South Africa

In South Africa, the Department of education regulated in 1999 the naming of private institutions. No private institution was allowed to call itself a university or technikon despite the desire of many of them to use such designations. Increasingly, private higher education institutions were seeking to offer undergraduate degree programmes, as well as postgraduate programmes up to the level of the doctoral degree. The Council for Higher Education has been called upon in 2002 to make recommendations for the nomenclature of higher education institutions, which will be pronounced in 2005.

Source: Naidoo and Singh, 2006.

Establishing a 'university' in the Philippines

The application for Security Exchange Commission registration and license has to be endorsed by CHED. For an HEI wanting to register as "university", there are certain criteria that must be met, including: 1) offering of four-year course programmes in liberal arts, basic sciences/mathematics and social sciences, three professional courses and two graduate level courses leading to doctoral degrees; 2) Level III accreditation for at least four of its undergraduate programmes of which one is in arts, and one is in the sciences, and for two of its graduate programmes; 3) adequate budgetary allotment for research; 4) provisions for community/extension programmes along areas of expertise; 5) faculty/personnel requirements – at least 50 per cent of faculty must be full-time, at least 35 per cent of faculty must be Master's degree holders in their respective areas of specialization, at least 70 per cent of whom are on full-time basis, and at least 20 per cent must be doctoral degree holders in their respective areas of specialization, 50 per cent of whom must be on full-time basis; 6) adequate library facilities; and others.

Source: Tayag, 2006.

Special legislation for for-profit higher education?

Countries may also have general requirements in the area of for-profit higher education. In some countries, declared for-profit higher education may simply not be allowed by law. Again, this is a legal constraint imposed on all private providers. However, since many TNHE providers are established as profit-making, they are particularly affected.

This is the case in Argentina, where for-profit universities are not allowed to operate and to grant recognized degrees. They may, however, function as non-degree granting institutions, such as higher professional institutes. Or they may provide continuous professional education.

Box 9. Legislation in Argentina with regard to for-profit university providers

Chapter 5 of the Higher Education Law deals specifically with regulation for private universities: the articles in this section establish the terms and procedures for their creation and operation. The private university institutions have to be non-profit making and have to obtain a provisional permit from the National Executive Power with a previous favourable report from CONEAU (Articles 62 and 63). After the temporary authorization, and once the corresponding requirements are met, they obtain definitive recognition (Article 65). The Executive Power has the authority to keep on monitoring the operation of the above-mentioned institutions to make sure that they continue abiding by the stated aims and meeting the terms on which they are allowed to operate. The institutions operating without the corresponding authorization can neither use university denominations nor issue university degrees (Article 68).

Source: Villanueva, 2006.

Limitations on the equity stakes

Education is a socially sensitive area. In many countries, there is public understanding that there should be national control over educational providers. For this reason, some countries have introduced limits on the share of ownership (or 'equity stake') that a foreign provider may have in an educational venture. Usually, these limitations are set up so that the company is mostly owned by locals, who will therefore be able to control it.

Box 10. Limitations on equity stakes in the Philippines

All business establishments, for-profit or not-for-profit, are required to register with appropriate government entities. Corporations (stock and non-stock) and partnerships should register with the Securities and Exchange Commission, single proprietorships with the Bureau of Trade Regulation and Consumer Protection of the Department of Trade and Industry, and cooperatives with the Cooperative Development Authority.

The new Constitution of the Philippines (1987) provides that:

No alien and no firm, association, partnership, corporation or any other form of business organization, formed, organized and chartered, or which is not a Philippine national or more than forty percent (40%) of the outstanding capital of which is owned and controlled by aliens shall do business or engage in any economic activity in the Philippines. (Article 4)

Further, the Constitution stipulates that educational institutions, other than those established by religious groups and mission boards, shall be owned solely by citizens of the Philippines or corporations or associations; at least 60 per cent of the capital is owned by such citizens. The Congress may, however, require increased Filipino equity partnership in all education institutions (Article 14, Section 4). Hence, under a joint venture arrangement, the foreign education institution may own up to 40 per cent only of the capital stock, and in no instance

can a foreign national sit in the Board of Directors or have any participation in the management or administration of the school.

Agents, brokers, facilitators or third parties that act as intermediaries between awarding institutions and clients or recipients of TNE arrangements/services are not usually involved in the provision of educational services. Still, they have to be duly registered/licensed to operate.

With the passage of the Foreign Investment Act in 1991, foreign equity participation of up to 100 per cent is permitted in all areas except those designated by the Constitution or special laws (including education) as reserved to Filipino citizens in which case foreign equity participation cannot exceed 40 per cent. Education is in the Foreign Investment Negative List containing investment activities/areas where foreign equity participation is limited by mandate of the Constitution and specific laws, which in the case of education is limited to 40 per cent.

Source: Tayag, 2005.

Regulatory regimes for the use of the language of instruction

In certain countries, the language of instruction may be another socially sensitive area. This is because of the relationship between the use of language and the nation building agenda. The use of an instructional language different from the local language (such as English) brings with it particular educational gain (language capacity and cultural openness). However, there may be special groups (for instance minorities) with a better ability to benefit from it than others. This could exacerbate disparities. Malaysia is a country that has insisted for a long time upon the use of the national language (Malay) as the only language of instruction in the public sector. This is, however, more of an exception than a rule. Indeed, most countries welcome an educational provision in a language of international communication.

Specific requirements to contribute to specific policy objectives

In addition, specific national contexts and their histories may generate particular national sensitivities. These then lead to the establishment of explicit requirements. In South Africa for instance, where the apartheid regime created a highly segmented higher education system, the current regulatory regime for TNHE providers requests that both private and cross-border providers sign a declaration of non-discrimination in relation to students and staff. Moreover, they must declare their intention to advance the agenda of redress and equity.

How can regulatory frameworks for branch campuses be made more effective?

This account of regulatory instruments shows that procedures to obtain authorization to function as a new institution are relatively well developed for private providers of higher education. However, they are relatively cumbersome and quite time-consuming. TNHE providers will always choose the less-constraining

route for registration. They will prefer to register simply as companies and offer educational programmes without granting a nationally recognized qualification at the diploma or certificate level. This does not then prevent them from issuing qualifications of their home institutions. But since they mainly prepare students for work in the private sector or employment abroad, official recognition of qualifications is often not considered essential. In order to save the validity of national qualifications, regulatory instruments must specify that only authorized institutions can grant regulated degrees.

When TNHE providers wish to operate without undergoing the procedures leading to official recognition, they may also register with national agencies that do not require licensing. This may be the case in some countries' non-university sector, for instance. In order to avoid TNHE providers choosing the less-constraining route for registration, it would be important for licensing arrangements to exist for both the university and the non-university sectors. If there are several national agencies, they must co-ordinate themselves to ensure that no TNHE provider remains unattended when a branch campus or new institution is opened.

Regulatory regimes must make sure that maximum equity stakes or 'equity ceilings' cannot be easily avoided by creating umbrella firms. The same is true of international corporate universities that buy a majority equity share from an existing licensed private institution and then transform the programmes offered by the institution without having to undergo licensing. Regulatory regimes must therefore also include some type of ongoing supervision of the functioning of existing institutions and their programme offer.

It should also be underlined, however, that effective regulation should not apply only to transnational providers. It is important to have a regulatory scheme in place that applies to both national and foreign providers. Regulation is not just necessary because some institutions may be taken over by foreigners. It is necessary because the quality of all institutions – national and foreign, public and private – is important.

Activity 2

What regulatory regime is currently in place in your country with regard to institutional mobility (no regulation, liberal, moderately regulatory, or restrictive)? What is the rationale for this?

Has any specific legislation been passed to regulate cross-border institutions (possibly with regard to language policy or equity stakes, etc.)?

3. Regulatory regimes for franchised courses and twinning/joint study arrangements

In most higher education systems, franchised courses and joint study programmes are the most common type of commercial presence in cross-border provision. Here, regulatory frameworks relate to the general regimes for establishing new study programmes. They may also relate to specific regulations governing twinning and franchising arrangements.

General requirements linked to the opening of new study programmes

The general regulatory framework for new study programmes is quite different in different countries. In many countries, chartered universities do not need to undergo an approval process by the Ministry or a national buffer organization for newly-created study programmes. But increasingly, an official body (Ministry or a buffer organization) requests certain types of programmes to undergo an authorization process. In most English-speaking Western countries and some Latin American countries, charted or licensed universities can open new study programmes without any additional governmental authorization. However, government approval is needed for new programmes that are opened in the non-university sector. In most other regions, a ministerial or buffer body is involved in one way or another in the authorization related to a new study programme. However, rules vary significantly depending on the level and type of the new study programme.

Box 11 presents the general requirements for creating new study programmes for Filipino private HEIs.

Box 11. Rules and regulations for creating new study programmes in the Philippines

This government authorization requirement consists of two levels, namely: 1) the permit phase; and 2) the recognition phase (DECS 1992).

Permit phase follows the school's application to open and should be applied for no later than the beginning of the school year prior to the desired school year when the proposed course is to be operated. The permit provides the school with approval to operate a particular course or courses of study for a specified period. This is valid only for a specific programme issued on a school year basis and may be cancelled for cause. Students who are enrolled are, nonetheless, given the same rights and privileges as those enrolled in recognized programmes.

The recognition phase follows the permit phase application for which should be filed no later than the end of January of the school year prior to the year when the first batch of students enrolled in the programme are expected to graduate (third SY for 4-year programmes; fourth SY for 5-year programmes). The Certificate of Recognition shall be issued at the beginning of the last curriculum year of the course. The Certificate of Recognition has the following effects:

The Certificate of Recognition continues to be valid unless revoked for cause and after due process. Hence, once recognized, the programme may be offered by the institution unless a slippage is discovered through monitoring and evaluation.

Permit and recognition are granted to programmes that meet the minimum requirements and standards set by CHED in its policies, standards and guidelines for academic programmes. These PSGs prescribe the minimum content (curriculum), inputs and processes/methods required for each programme.

CHED has issued PSGs for more than 40 programmes. These were formulated (and updated) by 10 technical panels (TP) composed of experts and academicians in the disciplines plus representatives of the Professional Regulations Commission in the case of TPs in charge of programmes covered by licensure examinations.

Source: Tayag, 2006

Policy approaches linked to franchise education

In addition to these requirements of a general nature, countries have developed quite different approaches to franchise education. These approaches relate directly to the wider objectives of higher education policy. They embrace the general approaches to TNHE and thus include the following three broad options:

- direct encouragement;
- no regulation (or *laissez-faire*); and
- the regulatory approach.

Direct encouragement of franchise education

Direct encouragement may be obtained when governments put in place incentives for the development of franchise education. These incentives are generally financial in nature. This is the case of Oman. Social and economic demand for higher education in Oman have increased sharply, especially in the last 10 years. Indeed, development programmes implemented in the last 30 years have led to a sharp increase in the number of students who leave secondary education and apply for enrolment in higher education. However, the capacity of the higher education system has not developed to a level sufficient to meet this demand. In response to this challenge, the Omani Government has chosen to encourage the opening of private institutions (universities and colleges). To ensure the quality of the programmes delivered by these institutions, private HEIs must be affiliated with well-recognized foreign universities.

Box 12. Direct encouragement of franchise education in Oman

Oman pursues an approach which directly encourages franchised higher education in the private sector of higher education. Indeed, licensing requirements include, as a condition for the establishment and provision of private higher education, that these local universities and colleges have an "academic affiliation agreement" with "recognized and accredited higher education institutions" abroad. Indeed, Oman is looking for well-established overseas institutions to build alliances with local private higher education institutions, and thus to extend quickly the local provision of "quality" higher education. The Ministry of Higher Education of Oman has designed a standard academic affiliation agreement through which services and modes of cooperation between the local and foreign higher education institution are specified. The systems of teaching, programmes offered, methods of evaluation , and types of qualification are determined by the affiliated university. It is interesting to see that Oman makes it an explicit requirement that foreign institutions that enter into franchise agreement with the local institutions accept students from either branch campuses or franchise education into their home institutions.

Source: Martin, 2006.

No regulation on franchise education

The second option is 'no regulation'. This is frequently a by-default regime in countries where university status automatically confers the right to create new study programmes. In such a context, the university itself is responsible for quality assuring its own study programmes. This is the case in Kenya. Indeed, under the chartered university regime of this country, public universities do not need to seek approval for new programmes, including the franchise provision (see *Box 13*).

Box 13. No regulation in Kenya for chartered public universities

Collaboration between any public university and a transnational education provider is initiated through the signing of Memoranda of Understanding (MOU) between the concerned institutions. The Acts of Parliament that establish various public universities allow for collaboration between universities and other institutions or organizations for the purpose of fostering the objects of the universities. Under these circumstances, it is the duty of the collaborating local university, through its senate, to ensure that the educational services offered are of good quality and that the institution that they are collaborating with are accredited and/or recognized in their home countries.

Source: Kaberia, 2006.

Regulatory approach to franchise education

Countries that decide to take an active stance regarding franchise education choose the regulatory approach. Most of them establish regulatory mechanisms at two stages: when joint ventures between foreign and home institutions are set up;

and through an ongoing control system. This approach is effective when there are adequate regulations in place for local providers, since franchising operates through them.

When existing franchise education has led to a perception of it being of low quality, countries may simply decide to moderately or tightly regulate this type of TNHE provision. Hong Kong has adopted moderate regulation. TNHE providers must register with local authorities and information is made available on their course offerings. In both South Africa and the Philippines, a tight regulatory regime has been adopted. In these countries, TNHE providers fall under local quality assurance regimes (see *Boxes 14* and *15*).

Box 14. Moderate regulatory approach to franchise education in Hong Kong

The Hong Kong government regulates foreign provision via the Non-Local Higher and Professional Education (Regulation) Ordinance, introduced in 1997. The government provides the following rationale:

The objective of the legislation is to protect Hong Kong consumers by guarding against the marketing of substandard non-local courses conducted in Hong Kong. It will also enhance Hong Kong's reputation as a community which values reliable and internationally recognised academic and professional standards. The objective is to be achieved through a system of registration as well as control over advertisements, refund and use of premises.

The Ordinance is a model of regulatory transparency, and a useful listing of the components involved in the delivery of transnational education. Foreign providers are required to submit detailed information on various aspects of their course offerings. Courses are listed on the government website, and the detailed documentation is publicly accessible at the registry office in mid-town Hong Kong.

Operational details are required, including: course content (aims and objectives, structure and content, and any adaptation for Hong Kong); delivery methods; requirements of the student (admission standards including language proficiency, course assessment tasks and weightings, and details of who carries out the assessment); staff involved (qualifications and relevant experience); facilities and support offered in Hong Kong (classrooms, library, computer laboratories). The respective responsibilities of the foreign and local provider must be specified in relation to the following activities: Advertising & marketing; Admission; Registration; Receipt of students' fees; Recruitment of local tutors; Induction and supervision of local tutors; Student support; examination and assignment setting and marking; Gathering student feedback. A description of the quality assurance procedures must be provided. Providers must submit an annual report, detailing numbers enrolled or graduated, and any changes to the course.

The Ordinance serves as a registration system and source of information for prospective students. It does not guarantee quality. Like other consumer protection legislation, the Ordinance contains a caveat emptor warning: "Local consumers should pay attention that the registration or exemption of a non-local course does NOT on its own confer any particular standing to the course or recognition of its equivalence to a local degree".

Source: Government of Hong Kong SAR, 1997.

Box 15. Tight regulatory approach to franchise education in the Philippines and South Africa

The Philippines and South Africa take a regulatory approach to franchise education. In South Africa, franchise education has simply been prohibited, since 2002, if a foreign provider does not have local representation through a branch campus. Indeed, it had appeared that too many franchise programmes of low quality had appeared and that it was very difficult to make sure that consumers were rightly informed about the quality and status of accreditation of such programmes. Evidence has been provided recently in South Africa of MBA programmes which had been quality assured in their home countries, but could not receive accreditation in South Africa. The reason was that programmes had been assessed on paper only in the provider country without a site visit being undertaken to check on the actual conditions of implementing such a programme.

In the Philippines, a very specific framework of quality requirements for both partnering institutions are requested for both twinning and franchise programmes. CHED, the Philippines buffer organization for the regulation of higher education, makes it a requirement that only CHED-recognized higher education institutions (with programmes having permit and recognition) twin with a recognized and accredited foreign higher education institution. In addition, a foreign provider may offer extension classes only if the programme has been accredited in the home country or through a local HEI partner if he has received Level II accreditation from the local private accreditors. Also, institutions have to set up a Memorandum of Understanding (MoA) under a prepared format by the CHED.

Source: Martin, 2006.

Tax regimes and foreign exchange regulations

In addition to licensing and other regulatory requirements, countries may adopt specific regulatory regimes in the area of tax and exchange. Such regimes are usually part of more general economic policies related to foreign investment, foreign trade and legislation related to the taxation of foreign income.

Box 16. Tax regimes and foreign exchange regulations in Russia and the Philippines

The Philippines has put into place a rather favorable tax regime for educational providers, including cross-border operators. All income from non-profit educational institutions is exempt from income and property tax as well as from customs duties. For-profit institutions may also avail of exemptions from taxes and duties subject to certain limitations, but profits are subject to tax.

In Russia, cooperation agreements between local and foreign higher education institutions frequently face problems related to currency legislation, taxation law and foreign trade law. Direct payments from a Russian partner for services of a foreign university (teaching services, right to use a teaching content or method) with outflow of capital requires special permission from the Russian Central Bank – a long and complex task. Also, proof has to be provided that the service (including the granting of intellectual property) for which there is outflow of capital has been properly VAT taxed. Also, cooperation agreements between Russian and foreign universities need to be confirmed by attendant banks. When a bank transfer exceeds the sum of US$10,000, a special permission needs to be obtained from the Russian Ministry of Finance.

Source: Martin, 2006.

How can regulatory regimes for franchising higher education be made more effective?

Franchise and twinning arrangements often operate in rather loose regulatory frameworks. In addition, there are often many opportunities to get around these frameworks. In order to be effective, regulatory frameworks for franchise education must apply to all segments of the higher education system (both the university and non-university sectors). Often, TNHE providers collaborate with local HEIs that do not need authorization to open new programmes. When a large part of the higher education system is regulated, they may then sell training programmes under the non-degree-granting offer. However, in this case the qualification will not be recognized nationally, since the provider is simply registered as a commercial enterprise.

It is of crucial importance that national governments provide public information on the higher education programmes they recognize. Many governments publish such information. They may do so through the websites of their Ministries of Education or through buffer organizations in charge of recognition issues. They must also enable a potential student to find out whether an institution or study programme they are interested in is recognized by national authorities. Some countries even make a special effort to inform the public on the availability of such information. In particular, they conduct awareness programmes among students at upper secondary level on ways of finding information on what is publicly recognized and what is not.

Box 17. Empowering students to make informed choices about higher education providers, South Africa

In South Africa, as in many other developing countries, the liberalization of higher education has increased. Among the entrants to higher education, a diploma and especially overseas qualification are often seen as 'tickets' to transnational mobility to jobs and labor markets in the industrialized countries. Choosing a poor quality or even illegitimate institution and programme means not only a huge disappointment to the student, but it can also have devastating effects on family survival, as families usually pay the student fees with loans.

The recruitment of students is primarily done through advertisement in the South African mass media, especially in newspapers. These adverts often do not contain enough or proper information about the level of the institution or whether it is registered with the official offices, the Department of National Education (DoE) and the South African Qualifications Authority (SAQA). Institutions might also deliberately mislead students regarding the aforementioned information.

After various complaints from the prospective students and the public, the HEQC (Higher Education Quality Committee) undertook some research and launched an information campaign in January 2002. This was to inform the public and to provide prospective students with more information in order to protect themselves from unscrupulous and illegal providers; it was also hoped that people would learn to identify legal and illegal providers of education. The national information campaign was organized in the mass media (radio and printed media) and it targeted first-time higher education entrants. (To see the information campaign you can go to: http://www.che.ac.za/student_literacy/index.php) Also, during two months, the adverts of the institutions were scrutinized and analyzed, and what appeared was that misleading advertising had decreased during the campaign and those institutions who continued where ordered to stop.

After the information campaign, the students have been more aware of the difference between legal and illegal provider of higher education. But still, they and the general public misunderstand the concept of accreditation and quality assurance. This indicates that more work has to be done, especially in student education about quality literacy and the involvement of students in quality assurance at the institutional level.

Advertisements are still monitored by HEQC, and HEQC has as well developed good practice guides and protocols for advertising. Workshops have been conducted to help legal institutions improve their ethical practice in advertising and SAQA has also developed advertising protocols, particularly the use of the SAQA logo. At present, the HEQC is reviewing the current information campaign and plans to develop a new approach along the lines of a quality literacy and empowerment of the students.

Source: Naidoo, 2004.

Activity 3

What regulatory approach is used in your country for franchised higher education (direct encouragement; no regulation; or the regulatory approach)? What rationale do you think is behind this regime?

If there is a regulatory approach, what does it cover? Is it sufficient?

If there is no regulation, what is needed to cover the challenges arising from franchised higher education?

Options for external quality assurance regimes for cross-border higher education

As shown in *Modules 1-4*, EQA systems have quite diverse scopes and modes of functioning. Most of the currently-existing approaches to EQA were developed to deal with national concerns related to the diversification of institutions and programmes. In other words, they were set up to come to grips with mushrooming private higher education or with a proliferation of low-quality programmes. Since the cross-border higher education phenomenon is still relatively new and frequently marginal, only a small number of QAAs address it directly through specific regimes.

1. Institutional accreditation for TNHE provision

Many countries have set up quality assurance agencies responsible for institutional accreditation and auditing. As discussed in *Modules 1* and *2*, accreditation and auditing are frequently non-compulsory procedures established mainly to stimulate quality improvement rather than enforce minimum standards. Where institutional accreditation is compulsory, it often applies only to private universities. This is the case in Kenya. In this context, it will necessarily apply to all corporate universities (if they are degree-granting). It will therefore cover local branch campuses or other forms of institutional cross-border provision. Institutional accreditation as it is conducted in Kenya, for instance, is compulsory for private universities with interim authorization to function. However, the timeframe under which HEIs must comply with this requirement is not specified.

Box 18. Institutional accreditation in Kenya

The accreditation process of the CHE has the following steps:

1. Application for the establishment of a private university. The application is done through completion of form ACC/CHE 3. The completed form is returned together with the requisite application fees and a proposal detailing the historical background, mission, vision, proposed name, location, academic character, aims and objects, form of governance, academic programmes, resources, and the plan on how the proposed university will be established.
2. Evaluation of the proposal and the items contained in the proposal. This involves the evaluation of the documents, visits to the site of the proposed university and holding meetings between the Commission and the applicants or their representatives.
3. Grant of a Letter of Interim Authority (LIA). When the CHE is satisfied that the proposed university has made the necessary requisite arrangements to start launching university level education. The Commission, through its chairman, issues the institution with a LIA, which is a recognition by the government that the institution has the ability to offer university-level education. This is also an indication that the institution is working towards full accreditation.
4. Preparation of institutional legal documents. On issuance of a LIA, an institution starts mobilizing its resources in preparation for the awarding of a Charter. The institution also expands its academic programmes and physical infrastructure. During this period, the Commission guides the institution in preparation of the relevant legal documents: the Charter and the statutes. The institution holds the LIA until they meet the entire requirement for award of a Charter. There has been no specified period for this process as it mainly depends on the speed at which the institution mobilizes its resources. Although the Commission feels that they are partners in helping institutions with Letters of Interim Authority to graduate to full accreditation, some institutions may take a bit too long. The Commission plans to hold consultative meetings with the concerned institutions to come up with reasonable duration for operating with LIA.
5. Final inspection. When the proposed university feels that it has what it takes to become a fully-pledged university, it prepares its internal evaluation report. The Commission examines this report critically and if it is convinced that the institution appears to be ready, it arranges for a final inspection. If the inspection reveals that the institution is ready to be a fully-pledged university, the Commission recommends to the government that the institution be awarded a Charter. The Commission then prepares an accreditation report for the institution.
6. Award of Charter. A Charter is only awarded by the Head of State. During the ceremony for the awarding of a Charter, the institution is also issued with an accreditation report prepared by the Commission. The symbols of authority: the official logo, the mace, and the seal are then handed over during this occasion.

Source: Kaberia, 2005.

There is growing awareness that quality assurance should apply to both public and private institutions. Indeed, it should be assumed that both contribute to the national objectives of social, economic and cultural development. This means that quality standards and processes should be assessed in the same way in both sectors of the higher education system. This assumption guided the creation in South Africa of a system of institutional auditing. In addition, the South African approach explicitly states that TNHE institutions should be audited together with the quality assurance agency (QAA) of the exporting country.

Whether this institutional accreditation should be voluntary or compulsory is an important matter of debate. Voluntary accreditation is more frequent, at least at the institutional level. It obviously makes it easier to obtain acceptance from the higher education community. However, the expectation is that voluntary accreditation will in time become quasi-compulsory when the majority of institutions have obtained it. Moreover, voluntary accreditation may be linked to sufficiently attractive incentives or consequences for accredited institutions. But if an immediate problem of low quality provision needs to be solved, a compulsory scheme may be more effective in the short-term. This solution was preferred in South Africa, where low quality private providers mushroomed after a liberal regime was established in the post-Apartheid period.

Box 19. Institutional auditing in South Africa

The institutional audit system works on a 6-year cycle during which period all higher education institutions are to be audited at least once. The focus of the audit is on the effectiveness of internal quality management systems for the three core functions of teaching, research and community engagement. The audit follows a standard methodology where institutions prepare a self-evaluation portfolio in relation to the 19 criterion areas specified by the HEQC. A site visit by a panel of peers and experts is set up to validate the self-evaluation report by the institution. Close attention is paid to the evidence relating to quality issues. Based on the assessment of the review panel, the HEQC issues a report to the institution, consisting of commendations in areas of good practice and innovations, and recommendations in areas in need of improvement. A summary of the report is publicly available. The institution is required to submit an improvement plan in respect of the recommendations and a mid-cycle progress report on the implementation of the improvement plan. The audit does not produce a ranking of institutions, has no funding or other legal consequences, and is essentially about quality development and enhancement.

In the case of foreign institutions, subject to the institutional audit or other quality requirements of their home country, the HEQC makes arrangements with the quality assurance agency in the home country to conduct a joint audit visit (where possible). In such a case, South African auditors and senior members of the HEQC staff would form part of the audit panel set up by the quality assurance agency in the home country. The audit self-evaluation portfolio prepared by the foreign institution would have to address the criterion requirements of the HEQC in addition to any other requirements. This arrangement is intended to relieve the foreign institution in South Africa of the burden of two separate institutional audit visits. The HEQC has a memorandum of co-operation with the Australian Universities Quality Agency (AUQA) to address this issue in relation to Australian universities offering higher education programmes in South Africa. It is presently preparing a similar memorandum of co-operation with the Quality Assurance Agency in the United Kingdom in respect of United Kingdom universities operating in South Africa. The above agreements also cover broader areas of co-operation between the HEQC and its counterpart agencies in other countries in order to increase the sharing of good practices, undertake joint research and development projects, and exchange relevant information in ways that could contribute to the more effective international regulation of transnational provision. To date, no audits of any transnational providers have taken place and it remains to be seen how such co-operation agreements can be made as effective as possible.

Source: Naidoo, 2006.

2. Programme accreditation for TNHE provision

Accreditation of study programmes is also frequently voluntary. It does not necessarily cover both public and privately-provided programmes and the university and non-university sectors. This is why many franchise programmes often do not undergo any programme accreditation process. Again, South Africa is an exception to this general rule. Indeed, all programmes in this country must be accredited against the standards of the South African Qualification Authority.

Box 20. Programme accreditation in South Africa

In a context of higher education provision, that is of vastly uneven quality and where student awareness of quality issues is not uniformly high, the HEQC has prioritized the protection of students against poor quality programmes and maintaining the credibility of qualifications as non-negotiable. In its new programme accreditation framework, which came into operation in 2005, the HEQC uses a rigorous 2-step process that gives accreditation status only to those programmes that can meet the minimum standards as specified in its 18 accreditation criteria. Accreditation will be granted to a programme for a stipulated period of time after an HEQC evaluation indicates that it meets or exceeds such minimum thresholds of educational quality. The focus will be on new programmes which will go through a candidacy phase until full accreditation is finalized. Given the large volume of existing higher education programmes in the system and the limited resources and capacity available to re-accredit all of them, the HEQC plans to address existing programmes through a combination of national reviews and granting self-accreditation status to institutions, both of which are explained later.

South African higher education institutions which offer programmes outside the country are subject to the HEQC's programme accreditation requirements for all of their local as well as their cross-border academic programmes. In addition, the quality requirements of the importing country have to be complied with. The HEQC plans to cooperate with national quality assurance agencies in countries, where South African higher education institutions have an operational presence, and to share relevant quality-related information with them in order to ensure that South African institutions pay appropriate attention to quality issues when they go cross-border.

Foreign institutions which offer higher education programmes in South Africa, including those institutions which are subject to the accreditation requirements of other national, regional or international agencies, are subject to the HEQC's programme accreditation requirements. In addition, these institutions have to satisfy the registration requirements of the DOE and the qualification registration requirements of SAQA.

Source: Naidoo, 2006.

Malaysia has encouraged TNHE, including franchises. However, recent developments show EQA trends that are similar to those in South Africa. These include, for example, the establishment of a comprehensive system for all higher education providers. This system includes institutional audit and programme accreditation based on a common framework of standards in a national qualifications framework. This example shows that while policy objectives may diverge, quality assurance regimes of TNHE are increasingly converging.

Box 21. Quality assurance of cross-border providers in Malaysia

In Malaysia, the regulatory framework put in place in 1996 covered only private education. The public institutions remained largely unaffected by formal quality procedures until the Quality Assurance Division (QAD) was established by Ministerial order in the Ministry of Education in 2002. In enhancing public confidence in the standard of qualifications and delivery of programmes of public universities, QAD focussed on training workshops for developing institutional capacity for self evaluation, conducting external peer review and reporting the strengths, areas of concerns and opportunities for the purpose of building a quality culture for continuous quality enhancement. QAD combines institutional audit with programme accreditation at the faculty or school level, i.e. accreditation by disciplines or fields in nine areas essential to higher education. The discipline approach gave rise to another feature – the development of guidelines on standards for broad discipline areas which are used for programme accreditation. These standards, which are developed by national consensus of relevant stakeholders in the discipline comprising academia, industry, the professions, government and significant individuals lead to the development of the Malaysian Qualifications Framework (MQF).

The MQF underwent extensive multi-level and multi-sectoral consultation with local and foreign stakeholders and was approved for implementation in January 2005. Like other qualification frameworks, it is Malaysia's declaration about its qualifications in relation to its education system and their quality. It is the instrument for the development and classification of qualifications according to a set of criteria for levels of learning attained. The criteria include specification of learning outcomes and a common understanding of credits based on total student workload. Being the reference point for information about qualifications and quality assurance, the MQF is used for determining the national "equivalence" of foreign qualifications for the purpose of recognition. The MQF provides articulation principles for individual progression by accrediting prior learning and credit transfer from formal, informal and non formal learning in flexible learning pathways which recognizes self-directed lifelong learning and workplace training and experiences.

A significant event in Malaysian Higher Education was the establishment of the Ministry of Higher Education in March 2004. It gave the impetus for unifying the quality systems and to restructure NAB and QAD into a single entity called the Malaysian Qualifications Agency (MQA). Under the MQA concept, all processes related to the regulation of quality of higher education (approval, institutional audit and enhancement, accreditation and recognition) are being reviewed taking into consideration two factors: 1) the rapid changes in the cross-border environment mediated by communication technology to enhance on campus education as well as to 'distributed' learning; and 2) the need to provide transparency and safeguard national sovereignty under the GATS discipline. Only quality assured programmes will be registered in the MQF.

Source: Shahabudin, 2005.

How can accreditation schemes be made more effective?

Only a few higher education systems currently have a comprehensive approach to quality assurance, including quality assuring TNHE. In many countries, TNHE providers can easily avoid accreditation procedures. Moreover, these procedures may be cumbersome, time-consuming and costly. When there are compulsory institutional licensing and accreditation requirements, TNHE providers may attempt to access markets through franchising schemes. They may also buy into existing institutions or locate their TNHE programmes in parts of the system where accreditation is not compulsory.

It is therefore important that quality assurance regimes take into account the conditions in which higher education is offered in the country. They must also take care to address the quality issues that appear to be more important at the institutional and programme levels.

It should be emphasized that regulatory and quality assurance mechanisms are only frameworks for action. However, their enforcement is also important. Many countries have established such regulatory frameworks. But in practice a great number of unrecognized and unaccredited HEIs and programmes still exist. In vast countries, the enforcement of regulations and compulsory quality assurance requires considerable political will and decentralized administrative capacity to conduct quality assurance schemes.

Voluntary accreditation systems generally use a number of incentives. These can include prestige (all); some financial incentives, such as access to development funds; access to student grants or loans; and greater levels of autonomy. Such incentives must be strong enough to ensure that TNHE providers will agree to undergo accreditation. This is particularly true of financial incentives. Providing funding schemes for students studying in accredited HEIs may provide a strong incentive to all providers – both public and private – to request accreditation. This system is practiced in the USA.

Another strong incentive for HEIs to seek accreditation is for national authorities to provide information on the status of quality assurance of all HEIs. With regard to TNHE providers, the accreditation status of a TNHE in both the home and host countries should be made accessible. Moreover, those who make decisions about study programmes must be made aware of its availability.

Box 22. Providing information about the status of institutions and programmes to the public in Kenya and Chile

Kenya

The Commission for Higher Education publishes information on recognized and accredited universities in the local print media from time to time. The Commission has a brochure containing information on recognized universities, which is given to the public free of charge. The Commission has also put this information in its website for public consumption.

Since 2002, the Commission has been organizing an annual exhibition for the recognized and accredited universities. During these exhibitions, the public is informed of the accreditation status of local private university-level institutions.

The Commission is in the process of preparing a directory of post-secondary institutions in the country. This is viewed as the first step toward accreditation of post-secondary institutions or validation of some of the courses offered in these institutions. It is hoped that accreditation and/or validation would place an institution at a level where its graduates would be eligible for university admission or the institution could be allowed to offer some university-level programmes.

Source: Kaberia, 2006.

Chile

The Chilean Ministry of Education is currently working on the improvement of a public information system, intended to answer three different needs:

- information needed for policy decisions;
- information for institutional management and quality assurance;
- public information for all stakeholders.

The third aspect is the one that is most relevant in this context, and the efforts have been addressed mainly at working with higher education institutions to determine the basic data they are willing to share, and to establish institutional information systems organized on a common basis.

At the same time, the Ministry is working with external consultants on an employment observatory, in order to determine the level of employment for different types of professional and technical graduates, their income level and the relationship between years of study, type of degree, employment rate and income level. This information is published and complements that which is provided by each higher education institution.

Work has also been carried out in order to eliminate misleading publicity and false claims by institutions, but this is still at an initial stage, except in the case of institutions or programmes taking part in the accreditation processes described above.

It is expected that the publication of relevant information will have not only a regulatory impact on the system (providing incentives for institutions to improve those areas where indicators are published), but also a pedagogical effect by making stakeholders more attentive to certain variables and less dependent on publicity and advertising.

Source: Lemaître, 2006.

Activity 4

1. Does your country have a specific regime for the EQA of cross-border higher education both at the institutional and programme levels?

If not, is it covered by the general quality assurance regime?

2. Is there any public source of information from which students can find out whether a cross-border provision (programme or institution) is recognized, licensed and/or quality assured by national authorities?

Regulatory and quality assurance regimes and national policy objectives

Transnational higher education is a multi-faceted reality that throws up many policy challenges for developing countries. Countries are affected by cross-border higher education to different extents. This can depend on local socio-economic conditions, and the development and functioning of the local higher education system. Major conditions are:

- the overall development and economic policy of countries;
- existing initiatives of regional integration and trade agreements;
- local purchasing power, local tuition fees and existing student support systems;
- the development of the local higher education system; and, in particular
- the extent to which higher education systems are able to satisfy social demand both from a quantitative and qualitative point of view.

These local factors lead to different policy rationales related to the internationalization of higher education. Larsen *et al.* (2004) have outlined four major policy rationales that can underlie internationalization policies in higher education. They include:

- mutual understanding (encompassing political, cultural, academic and development aid goals);
- skilled migration (aiming at attracting foreign students in particular scientific fields that are strategic for national development);
- revenue generation; and
- local capacity building.

From the point of view of the receiving countries (which are frequently developing or emerging), local capacity building is certainly an important policy rationale. This is because higher education systems are frequently not able to satisfy social demand. There may also be qualitative gaps in the training provision. Other policy rationales include:

- better opportunities for the mobility of students and professionals;
- increased coverage and response to unmet enrolment demand; and
- improvement in curricular and pedagogical strategies.

In addition to overall policy rationales, countries must make a number of basic choices. They should address questions such as:

- whether the government can act as a regulator and/or as a (major) provider of higher education;

- whether TNHE will be invited or tolerated and then be part or not of the officially recognized higher education provision;
- whether programme and institution mobility (PIM) will be the preferred option in TNHE over student mobility; and finally
- what regulatory and quality assurance regimes best suit the national context and policy objectives.

Regulatory and quality assurance regimes are therefore policy instruments that must be consistent with broader policy objectives. For example, they may aim to widen access, fill qualitative gaps in the higher education provision, or protect a still-fragile local higher education system from what is perceived as unfair competition. However, it should be recognized that regulatory and quality assurance regimes are only one type of policy instrument. Others include scholarship, visa and emigration policies (OECD, 2004*a*).

An analysis of the relationship between broader policy objectives and regulatory responses is presented below.

Box 23. Liberal regimes in Oman, Kenya and Russia

The regulatory regime developed in Oman for TNHE shows clearly that the overall policy rationale guiding the regulatory regime is capacity building through the expansion of the higher education provision aimed at the widening of access to higher education. This objective is pursued through the development of a local private higher education sector which is expected to enter into academic affiliation agreements with transnational providers. Widening access for a rapidly growing, very young population of which only a third can currently be accommodated in the public institutions provides a strong rationale for an encouraging regulatory regime. This also easily explains the generous support of the Omani Government to the local private sector.

Kenya and Russia face similar situations of insufficient local capacity to respond to the social demand for higher education. In Kenya, the non-university sector is under-developed, while the labour market requires middle-level manpower in the service sector, in particular in the IT area and accountancy. The booming demand for higher education puts Russia in a similar situation of insufficient capacity to respond to social demand, while in addition, qualitative gaps need to be addressed in the training provision. Both countries use liberal or moderately regulated regimes for their transnational providers which leave ample space for them to develop and operate in the local higher education system.

Source: Martin, 2006.

Box 24. Moderately liberal regimes for TNHE providers in Argentina and Chile

Argentina and Chile regulate the TNHE providers through their existing regimes for private providers. In both countries, local capacity is developed enough to respond to social demand, but there are certainly qualitative needs for the development of the local private sector. Chile has by now some tradition in the development and regulation of its private higher education sector and the TNHE provision is simply understood as being part of the private provision that can be regulated the same way. There is also a strong claim for autonomy from the universities which seems to be seen as contradictory with ongoing tight control systems at the programme level. Both, the yet moderate presence and the power of the existing local providers, seem to maintain at present a relatively moderate regime of regulation. They are the same for national and foreign providers, at least at the degree level.

Source: Martin, 2006.

Box 25. Tight regulatory regimes in the Philippines and South Africa

Both the Philippines and South Africa have tight regulatory regimes in place for TNHE providers. In both countries, local provision of higher education is sufficient; however, there are perceived qualitative needs in several areas. The Philippines clearly refer to unsatisfied needs in the local labour market at the same time as there is graduate unemployment. These needs are located in graduate education in many areas, but also in engineering and sciences at the under-graduate level. There are also unfilled needs in IT-related areas, health-related and business-related areas, such as: accountancy, entrepreneurship, and continuing professional education. The current provision from the TNHE sector in the Philippines, as by the way in the other countries, provides training for middle-level manpower and it is thus not of a cutting-edge type. The present rather constraining regulatory regime in the Philippines in place thus does not seem to be particularly geared towards the attraction of those TNHE providers that could fulfill the gap. In order to fill these qualitative gaps, private providers would need to commit considerable investment. It is thus doubtful, whether bureaucratic regulation can be the answer.

The situation in South Africa is rather different. While there are also qualitative gaps of the same nature, the country has moved from a very liberal to a strongly regulated regime for TNHE providers. This was seen to be necessary since it was perceived that many low quality providers had entered the South African system and that they were not really contributing to local capacity building. The present regulatory regime was set up under the rationale that all South African providers, both public and private (including the TNHE sector), should contribute equally to the same national development objectives and all be quality assured against the same system of national standards. Franchise education was frequently perceived as poor quality and difficult to regulate since there is no physical presence of the TNHE provider. This has now led to a very low presence of TNHE providers which, in 2005, have not registered more than 0.2 per cent of all South African students.

Source: Martin, 2006.

In conclusion, no single and universal model can be used for the regulation and quality assurance of TNHE. It is also difficult to identify clear trends in the development of regulatory and quality assurance regimes. Currently, liberal or moderate regulation are more frequently chosen than tight regulation. This may be 'by default', or a conscious choice. In addition, many countries are or intend to become both importing and exporting countries. Uncertainty as to whether national providers will be able to compete in regional and international markets makes choosing the appropriate regulatory framework to be put in place more difficult. Moreover, ongoing negotiations within the GATS may push countries to adopt 'wait and see' strategies.

The current situation in terms of regulation can certainly be characterized as one of many 'social experiments'. This module intends to shed some light on the rationales, content and impact of this ongoing experimentation. The aim is to help countries make better informed choices – now or later – in building their regulatory policies for transnational providers.

Activity 5

Is your current regulatory and quality assurance regime of cross-border providers in line with national policy objectives? Or is it a regime 'by default'?

What regime would you recommend to bring it in line with the objectives of your higher education policy (access, quality, equity, relevance, cost)? For what reasons?

International frameworks for regulating and assuring the quality of transborder higher education

This module has emphasized only the importing country in terms of policy and the regulatory response. However, exporting countries also have a stake in cross-border higher education. They may have policy objectives over and above the income generation objective. These may include attracting skilled labour, and enhancing their image and international standing in other countries through the cultural outreach and links provided by TNHE. This is why many exporting countries consider that they are responsible for ensuring the quality of the higher education provision their institutions are exporting. For this reason, they insist that their TNHE be regulated and quality assured in the same way as the national provision of higher education.

Cross-border higher education is therefore an international responsibility. Indeed, international organizations, including the Council of Europe, the International Association of University Presidents and more recently UNESCO together with the OECD have taken action to develop guidelines for TNHE provision.

The UNESCO/OECD *Guidelines for quality provision in cross-border higher education* aim to support and encourage international co-operation and understanding of the importance of quality provision in cross-border higher education. They also seek to protect students and other stakeholders from disreputable providers, and to encourage the development of quality cross-border higher education that meets human, social, economic and cultural needs. In assuring quality and relevance in cross-border higher education, one of their major features is enhancing responsibility for partnerships, sharing, dialogue and mutual trust and respect between sending and receiving countries.

The internationalization and trade of higher education can benefit both sending and receiving countries. However, certain conditions must be fulfilled in order for the receiving country to reap all the potential benefits (OECD, 2004*a)*. Hugonnier (IIEP, 2005) has identified eight main conditions. These are presented in *Box 26*.

Box 26. Conditions under which countries can benefit from TNHE

- The foreign provision meets the needs (economic, social and cultural needs) of the importing country (relevance condition).
- Learners are protected from low-quality provision and qualifications (quality condition).
- Qualifications are internationally valid and portable (usefulness condition).
- The risk for the stability and continuity of the education system of the receiving country is limited (sovereignty condition).
- International co-operation among national quality assurance and accreditation agencies is increased (co-operation condition).
- There exists strong quality assurance and accreditation systems or their development is to be supported (capacity building condition).
- The brain drain risk is minimized (brain drain condition).
- The education gap between the least developed countries and the other developing countries is mitigated thanks to appropriate development aid in education (education gap condition).

Source: Hugonnier, 2005.

Unless all these conditions are met, questions can be raised about the benefits for importing countries of undertaking more internationalization of their higher education by further expanding the import of higher education services as well as foreign direct investment in this area. This is particularly true for developing countries.

The text of the guidelines is available at the following site:

http://www.unesco.org/education/amq/guidelines/

Activity 6

What can you, as a policy-maker or manager in the area of quality assurance, learn from the UNESCO/OECD guidelines on cross-border higher education?

Lessons learnt

Lesson 1: Responsibility for quality assuring cross-border higher education is with the receiving country (possibly in co-ordination with the sending country)

Many countries function with moderately restrictive regimes for regulating cross-border providers. Foreign providers must simply satisfy minimum conditions prior to starting operations, such as official recognition in their home country. However, such a regime may not be sufficient to ensure that the foreign provision is in line with national quality requirements. It is therefore a basic principle that the main responsibility for any provision of higher education is with the receiving country. Quality assurance of the cross-border provision of higher education may be conducted in collaboration with the sending country. It can therefore take into account information generated from the quality assurance system of the sending country (to avoid duplication of efforts in quality assurance). However, national quality requirements need to be enforced.

Lesson 2: Need for a complete and up-to-date information and monitoring system on TNHE provision

Most countries do not have a centralized system of data collection and monitoring of TNHE providers. In order to obtain a picture of the situation, they have to pull together information from different sources to get an approximate picture of the provision. Moreover, this latter is constantly changing. Information can be located through print and media advertisements or educational private directories. In most case study countries, no centralized information is available on joint study programmes or the distance education delivery. While it is difficult to plan for the TNHE segment, it needs to be monitored with the following questions in mind:

- Who are the providers?
- What is their impact on the national system?
- How are they evolving?

Lesson 3: Need for stronger consumer protection mechanisms through public information on the status of TNHE providers

Students need access to information on recognition and accreditation (both from the home and receiving countries) so that they can make informed choices. They must also be informed of the potential existence of fraudulent providers and of how they can find out about the status of a cross-border provider. In South Africa this is done at the upper secondary school level. Finally, it is important to regulate advertising to ensure that no wrong information is presented.

Lesson 4: Need for better collaboration between government agencies in charge of different stages of regulation and quality assurance

Often, regulation and quality assurance mechanisms are in place. However, they are weak because they are fragmented and there is no collaboration between government departments. In many cases, procedures for obtaining registration and licensing are not articulated because government entities lack co-ordination systems. Also, cross-border providers may manage to bypass local regulatory frameworks. This may be because responsibilities are not clear enough between government agencies working for the technical and professional sector and those working for higher education. There are also grey areas, such as 'ladderized' degree programmes and short duration programmes.

Lesson 5: Need for regulatory policies with wider scope and a long-term view (the higher education system is often reluctant to address the challenge) depending on long-term policy objectives (quality and equity)

Many countries do not have a regulatory framework geared towards the cross-border provision of higher education. They simply use the one they established for the private higher education sector. Where such a framework exists, regulatory regimes and quality assurance policies are often determined somewhat randomly to deal with specific problems. In particular, they do not reflect a clear-cut view of what the cross-border provision can bring to the system. It seems that higher education systems are somewhat reluctant to address the policy challenges posed by TNHE provision. It is therefore necessary to develop regulatory policies with a wider scope. In particular, quality and equity issues should be addressed. Policy also needs to take a long-term view and be developed in line with other national objectives for the development of higher education. Countries should determine fields in which TNHE providers are needed to serve human resource development needs. They should then identify appropriate TNHE providers and work out how they could deliver the needed TNHE in the country.

Lesson 6: Need for strong incentive systems related to voluntary accreditation at the programme level (for local quality control of franchised higher education)

Licensing procedures in many countries are relatively well-developed and an effective filter for low quality provisions. However, other quality assurance mechanisms frequently either do not cover the whole higher education provision, or are voluntary in nature. This means that there is much scope for TNHE providers to by-pass national quality assurance mechanisms, in particular at the programme level. In many cases, franchised programmes are frequently not quality assured at all. This is because franchised higher education is located in already-licensed institutions and accreditation is voluntary. When quality assurance systems are voluntary, it is necessary to link them up with strong incentive systems to encourage TNHE providers to request accreditation.

Lesson 7: Need to put public and private providers on the same footing

In the past, many quality assurance systems targeted the rapidly-growing private provision of higher education. Indeed, this provision was identified as problematic in quality terms. More recently, countries have acknowledged that there are also quality problems to be addressed in the public sector. Moreover, the boundaries between what is public and what is private have become somewhat blurred. Both public and private institutions should contribute to fulfilling the same policy objectives. For this reason, quality assurance mechanisms are increasingly covering both the public and the private provision of higher education.

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The modules on External quality assurance: options for higher education managers

Quality assurance has become a topical issue on the higher education policy agenda. More and more countries are questioning their existing structures and are introducing new mechanisms and structures for external quality assurance. They seek to ensure minimum educational standards across diversified higher education systems and to provide a lever for continuous quality improvement.

The present material was developed by UNESCO's International Institute for Educational Planning (IIEP). It targets decision-makers and managers in government departments such as ministries of education, buffer organizations of higher education and quality assurance agencies whose task it is to design or develop the national framework for quality assurance. These modules should provide support for their decisions on external quality assurance systems, while discussing options that have been tried out successfully in a variety of countries.

The modules are based on the outcomes of two IIEP case study research projects, one on "methodological and organizational options in accreditation systems" and another on "regulation and quality assurance of cross-border providers of higher education".

Accessible to all, the modules are designed to be used in various learning situations, from independent study to face-to-face training. They can be accessed on the IIEP web site www.unesco.org/iiep, and will be revised as needed. Users are encouraged to send their comments and suggestions.

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