

Setting up and developing the quality assurance agency





External quality assurance: options for higher education managers

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International Institute for Educational Planning (UNESCO)
7-9 rue Eugène-Delacroix
75116 Paris
Tel.: +33 1 45 03 77 00 Fax: +33 1 40 72 83 66
E-mail: info@iiep.unesco.org
Web site: www.iiep.unesco.org

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Module 3

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List of abbreviations

AAAHE	Albanian Accreditation Agency for Higher Education
AAC	Austrian Accreditation Council
AACCUP	Accrediting Agency of Chartered Colleges and Universities of the Philippines
AAU	Academic Audit Unit (New Zealand)
ACCR	Accreditation Commission of the Czech Republic
ACQUIN	Accreditation, Certification and Quality Assurance Institute
ACSR	Accreditation Commission of the Slovak Republic
APENS	Association of Professional Engineers of Nova Scotia
AQAS	Agency for Quality Assurance and Accreditation of Study Programs
AQIP	Academic Quality Improvement Programme
ACSCU-AA	Association of Christian Schools, Colleges and Universities – Accrediting Agency
AUQA	Australian Universities Quality Agency
BAN-PT	National Accreditation Board for Higher Education (Indonesia)
CEEN	Central and Eastern European Network for Quality Assurance in Higher Education
CHE	Council of Higher Education (South Africa)
CHEA	Council on Higher Education Accreditation
CNA	National Council for Accreditation (Colombia)
COU	Council of Ontario Universities
CPUO	Committee of Presidents of the Universities of Ontario
CQAHE	Centre for Quality Assessment in Higher Education (Lithuania)
DETC	Distance Education and Training Council (USA)
DEC	Distance Education Council (India)
ENQA	European Association for Quality Assurance in Higher Education
EQA	External Quality Assurance
EQAR	European Quality Assurance Register
ESG	European Standards and Guidelines for Quality Assurance
EUA	European University Association
EURASHE	European Association of Institutions in Higher Education
EVA	Danish Evaluation Institute
FAAP	Federation of Accrediting Agencies in the Philippines
FIBAA	Foundation for International Business Administration Accreditation
FH	Fachhochschul Council
FHR	Fachhochschulerrat (Austrian Polytechnic Council)
HAC	Hungarian Accreditation Committee
HEA	Higher Education Act
HEI	Higher Education Institution
HEQC	Higher Education Quality Committee (South Africa)

HEQEA	Higher Education Quality Evaluation Agency of the Republic of Macedonia
HEQEC	Higher Education Quality Evaluation Centre (Latvia)
HKCCA	Hong Kong Corporate Counsel Association
ICFES	<i>Instituto Colombiano Para el Fomento de la Educación Superior</i>
INQAAHE	International Network for Quality Assurance Agencies in Higher Education
NAAC	National Assessment and Accreditation Council (India)
NAC	National Accreditation Council
NCAAA	National Council for Academic Assessment and Accreditation (Romania)
NEAA	National Evaluation and Accreditation Agency (Bulgaria)
NIAD-UE	National Institution for Academic Degrees and University Evaluation (Japan)
NZUAAU	New Zealand Universities Academic Audit Unit
OAQ	<i>Organ für Akkreditierung und Qualitätssicherung der Schweizerischen Hochschulen</i> (Center of Accreditation and Quality Assurance of the Swiss Universities)
OCGS	Ontario Council on Graduate Studies
PACU-COA	Philippine Association of Colleges and Universities – Commission on Accreditation
PAASCU	Philippine Accrediting Association of Schools, Colleges and Universities
PASUC	Philippine Association of State Universities and Colleges
QA	Quality Assurance
QAA	Quality Assurance Agency (UK)
UAC	University Accreditation Commission (Poland)
UCJ	University Council of Jamaica
UGC	University Grants Committee (Hong Kong)

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Presentation of the module

Welcome to Module 3 “Setting up and developing the quality assurance agency” of our distance course on External Quality Assurance.



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.



Outcomes

Upon 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

1. What are the implications of the different institutional affiliations for the functioning of a quality assurance agency?
2. Is there a relationship between the priority functions to be performed by the quality assurance agency in my country and its organizational set-up?
3. What resources and competencies are required to perform those functions? Are they available in my country?
4. What type of management and organizational structure would be effective in my country?
5. What linkages exist between institutional affiliation and mechanisms for accountability?

Module 3

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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 (QA) agencies 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 QA agencies 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 QA agencies 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.

Funders of quality assurance systems 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. The quality assurance agencies, however, 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 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, QA agencies 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 quality assurance agencies, 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 QA agency 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 QA agency. 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.



Affiliation of 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 (QA) agency. Most of these factors were discussed in the earlier modules. Two more aspects need to be mentioned here: affiliation of the QA agency; and the size of the system to be covered.

The QA agency 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 QA agencies:

- 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 QA agency has implications for autonomy in its functioning. Although most QA agencies – 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. The New Zealand Universities Academic Audit Unit (NZUAAU) and some of the accrediting agencies of Japan are parallel examples in the Asia-Pacific. In this case, the issue is the level of independence the agency can claim with regard to the HEIs themselves.

Affiliation of the QA agency 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 QA agency 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 and the Philippines. 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 QA agency. 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.

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

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 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.

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 programmes. 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 programmes, and periodic appraisal, on a recurring basis, by discipline, of all existing graduate programmes 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 website.

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 1970s, 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 1977. FAAP serves as co-ordinating body of the three 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 (AACCUP). AACCUP 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 PAASCU, 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.

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 (see example of APENS under *Box 2*). 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 4,500 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 Activities 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 QA agency:

- 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 QA agency 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 QA agency 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 QA agency 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 QA agency. 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 QA agencies 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.

Below *Box 3* demonstrates that the notion of independence has however many facets and relates to aspects as diverse as self-governance, objectivity, institutional autonomy, personal independence and integrity, budgetary independence.

Box 3. Reflection on independence in CEEN countries

All CEEN agencies believe in their full "independence". However, a number of agencies draft a picture where the individual agency finds itself in tension between governmental authority (ministry) and (individual) higher education institutions.

But what is actually meant by independence? Whom should one not depend on? The answers provided indicate that a conceptual clarity concerning the relation of dependence (definition and identification of dependencies) and independence does not really exist. Independence may have various aspects in the sense of self-governance, objectivity, institutional autonomy, personal independence and integrity, budgetary independence, etc. The respective ENQA criteria serve as reference points,

since they provide an attempt to define an operationalization of “independence” in this context.

The following two examples of financial independence demonstrate that the situations vary from country to country: (a) “The FH Council is a publicly-financed agency and does not receive any money from higher education institutions or any other body”. (b) “The Ministry of Education and Science does not finance the activities of the centre. Higher education institutions under accreditation pay for the procedures”

Independence of agencies is guaranteed by Law on Higher Education, by statutes and by regulations. However, it needs careful attention. Accordingly, the Hungarian HAC “has created a Code of Ethics (available at www.mab.hu/english/doc/ethics.doc) to preclude a potential conflict of interest between its members and the issues decided upon. The Code also calls for members’ independence, impartiality, neutrality and transparency”. The Macedonian Evaluation Agency explains that “the bodies are independent, but sometimes there is influence, a kind of pressure by the ministry, but until now it has had no impact on the decisions made by the bodies”.

Independence concerns all steps of the evaluation and accreditation procedure. According to the CEEN members, independence is guaranteed by organizational structures and by rules and procedures for the appointment of peers and council’s members and for decision-making.

Source: Hofmann, 2006.

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.



Activity 1.

1. Browse the web site ww.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 for its establishment 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 QA agencies 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 may include responsibilities such as liaising with the institutions; developing the register of experts; and publishing the final quality assurance outcome. These functions are carried out by all QA agencies. 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 QA agency 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 QA agency 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, QA agencies 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 should be 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 QA agency 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. Also, many quality assurance agencies are governed by legal frameworks which determine to a large extent the scope of their activities. The Agency 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 QA agency 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 QA agency was established. To operationalize the quality assurance framework beyond the basic choices for the quality assurance system (see *Module 1*), however, the QA agency 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 QA agencies 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 in the country and abroad. Some QA agencies 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 QA agency is established, issues such as these require some level of discussion. This is where consultancy or other inputs are normally required 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 QA agency. It should, however, be mentioned that agencies have to continuously assess their procedures. The life of an agency is not static and needs to evolve with changes in the higher education sector.

2. Preparation of methodology

Although the QA agencies 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 approach (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 QA agency.

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 that only the scope of the assessment in broad areas such as organizational leadership, learning resources and financial management. 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's¹ guidelines indicate as good practice the enhancement of transparency. Thus, they state that the 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 QA agency 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 or an approach of transparency and dialogue.

It is not enough for the QA agency 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

1 The International Network of Quality Assurance Agencies as a network of QA agencies has prepared guidelines of good practice for quality assurance agencies, available at: www.inqaahe.org/Upload/Upload/INQAAHE_documents/INQAAHE_-_Guidelines_of_Good_Practice.pdf

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; they may however also lead to a dilution in the clarity of the assessment framework. 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, systems geared primarily towards quality control are normally associated with little participation, while improvement-oriented schemes will necessarily mean much broader participation. Systems aimed at public assurance, meanwhile, will fall somewhere in-between.

Procedures

The QA agency 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 QA agency;
- what kind of information must be provided;
- what kind of commitments HEIs make when entering quality assurance processes;
- what kind of commitments QA agencies 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
4. conducting the visit; and
5. 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 QA agency.

Liaising with HEIs and other stakeholders 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 QA agency and the implications of certain institutional options, so that they are clear to agency staff. QA agencies 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 QA agency 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 4, below, describes the tight interaction between the staff from the Danish Evaluation Institute (EVA) and the external assessors.

Box 4. 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 the 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 self-evaluation. 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 website.

Selection and training of external reviewers

To implement the quality assurance processes effectively, the QA agency 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 5* 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 5. Roles and responsibilities of external reviewers (UK)

The responsibilities of reviewers include:

- read and analyze self-evaluations prepared by institutions and any other documentation sent in advance of reviews;
- participate in briefing meetings;
- participate in visits to institutions in order to gather, share, test and verify evidence;
- make judgments on institutions' management of academic standards and quality;
- contribute to and comment on compilation of the review report;
- attend 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 website.

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 QA agency 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 described in the report prepared after 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 QA agency 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 QA agency 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 *Section 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. Three issues need attention here:

- balancing the team;
- involving students in the EQA process, and
- eliminating 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 depending on the complexity and scope of the review). Each individual's perception of quality might be influenced by many factors beyond the control of the QA agency. 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 more balance, as different points of view will be presented. To maximize the outcome of collective assessment, QA agencies 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 clearer. 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).

Involving students in the EQA process

The involvement of students has been one of the iareas where QA agencies tend to agree or disagree. While students are without any doubt one of the main beneficiairies of higher education services, they are also exposed on a daily basis to the quality of services they receive. As a consequence, they are important informants for reviewers. It is thus now widely acknowledged that students should be involved in QA processes, but the modalities are requently a matter of debate. In CEEN countries, student involvement in external review teams is not a frequent practice as of now.

Box 6. Student involvement in the EQA process (CEEN countries)

The Ministers of Education gathered in Berlin committed themselves to support further development and enhancement of quality assurance at institutional, national and European level. In their agreements, they also earmarked a couple of guiding principles, some of them setting clear objectives for further progress of the Bologna Process. Among others, the ministers agreed that the participation of students should be systematically introduced in the evaluation of programmes and/or institutions (Berlin communiqué, 2003).

All agencies involve – or will soon do so – students in the evaluation and/or accreditation processes. However, as can be seen from the following, the form of participation of students in the activities of various CEEN agencies is obviously quite diverse:

- Seven agencies state that students are involved in the assessment procedures as interview partners on the side of the higher education institutions (1,2,5,6,7,10,12) Four of these agencies see the students exclusively in this role.
- Six agencies stress the role of student participation in the internal quality assurance procedures of the higher education institutions themselves (3,6,10,11,13,15). They especially highlight the involvement of students in the self-evaluation exercise.

- Three agencies involve students in the accreditation council, i.e. in the decision making (7, 9, 10a/10b). In the council of the Hungarian HAC, students have been represented since 1993, though without voting right.
- ACQUIN systematically includes students as members of the review team and provides student participation on almost every level of the assessment procedure (7). The Hungarian HAC states that students would participate as members of the review team from 2004 (8); the Russian NAC plans the involvement of students as members of the review teams and as interview partners from 2005 (14).

	SELF-EVALUATION in the higher education institution	EXTERNAL EVALUATION (peer review)		DECISION- MAKING accreditation council
		representative of the higher education institution / interview partner	peers/ experts	
(1) AAAHE (Albania)		■		
(2) AAC (Austria)		■		
(3) FHR (Austria)	■	■		
(5) NEAA (Bulgaria)	■	■		
(6) ACCR (Czech Republic)	■	■		
(7) ACQUIN (Germany)		■	■	■
(8) HAC (Hungary)			■	■ no voting
(9) HEQEC (Latvia)				■
(10) CQAHE (Lithuania)	■	■		■
(11) HEQEA (Rep. of Macedonia)	■			
(12) UAC (Poland)		■		
(13) NCAAA (Romania)	■			
(14) NAC (Russian Federation)	■	■*	■*	
(15) ACSR (Slovak Republic)	■	■		

■ = student involvement * = from 2005

Source: Hofmann, 2006.

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. See below *Box 7* on policies of conflict of interest in countries as diverse as Australia and India.

Box 7. 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 website.

India

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

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

Source: The National Assessment and Accreditation Council website

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. 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 QA agencies 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 QA agencies 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 QA agency may consult either the panel or 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. Another purpose is to triangulate the information received in the self-study report. 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 QA agencies is given in *Box 8*. In this case, the visit lasts 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 two and five days (see below *Box 8* as an example for Inidan NAAC).

Box 8. 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

Source: The National Assessment and Accreditation Council website

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 8*, 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 QA agencies 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 (NZUAAU) gives universities an opportunity to comment on the facts and emphasis of the report. Emerging QA 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 QA agency.

As *Module 2* showed, once the outcome of the site visit is finalized, QA agencies 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 QA agencies depending on their affiliation and clientele. Irrespective of affiliation and clientele, good practice requires that the QA agency 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, but practices vary with regard to cultural context.

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. QA agencies 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 European Association for Quality Assurance in Higher Education (ENQA) 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 QA agency should provide for an objective appeals mechanism.

Appeals mechanism

Most of the well established QA agencies 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 QA agencies 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 QA agency 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 QA agency itself may have a procedure to set up an appeals committee. Moreover, there are instances where the appeals committee may be independent of the QA agency. In both cases, however, the appeals committee is expected to work independently and judge the appeal fairly. Appeal procedures are often vested in the legal framework ruling the agency. The purpose of the appeals vary. Some look at the process only while others focus on the outcome

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 QA agency 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 (see below examples in *Box 9* from Switzerland and CEEN countries).

Box 9. The Appeals Committee (Switzerland and CEEN countries)

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.

Elements of an appeal system and arrangements for appeal in CEEN countries

All agencies provide certain elements of an appeal system. The respective procedure will always depend on the grounds for appeal. These grounds for appeal may in turn cover all components of evaluation, as the Romanian NCAA stresses (13). In most cases, the appeal to a court of justice will be the ultimate solution. In a number of cases, the appeal shall be presented to the respective Ministry of Education. Regarding the adequacy of the appeal arrangements, the collaboration in the CEE network may provide a good ground for exchange of experiences and practices.

Source: Hofmann, 2006.

5. Capacity building

Assuring quality is a rigorous task for the QA agency. 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 QA agency 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 QA agency;
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 QA agency. 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, and it is then more difficult to ensure 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 QA agency 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. QA agencies 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 QA agencies, 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 (see *Box 10*).

Box 10. Capacity building among HEIs (about AQIP)

The Academic Quality Improvement Programme 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 website. 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 website.

Capacity building is an important function of the QA agency 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 QA agencies 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 QA agencies 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.

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 reports. 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 QA agencies or participating in other forms of exchange 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 QA agencies. This is particularly true as discussions on mutual recognition between QA agencies are increasingly being emphasized. Some QA agencies encourage their staff to get involved in research, publication and consultancies that contribute to their professional development. The participation in meetings organized by the regional networks of QA agencies (see discussions in Module 1) do also offer welcome opportunities for the capacity development of the professional staff of QA agencies.



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 QA agency. 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. Legislation ruling the QA agency may prescribe the functioning of governing bodies.

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 many agencies established by governments, the representative of the government either sits on or chairs the governing body. Some QA agencies consider it important to have students, the public and/or end users represented in the governing body.

Some QA agencies 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 QA agencies 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. 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 NZUAAU (New Zealand) in Asia and the Pacific. Examples from CEEN countries are provided below in *Box 11*.

Box 11. Governance structure of QA agencies in CEEN countries

The members of the accreditation councils are being appointed in a defined procedure:

- The majority of accreditation councils is appointed by the government, the Prime Minister, the Ministry of Education, and/or the parliament (1, 2, 3, 5, 8, 9, 10, 13, 14, 15). Herewith, these agencies have a strong governmental legitimacy.
- Some of the accreditation councils are appointed by stakeholders – primarily by the higher education institutions themselves, but also by professional bodies and chambers (7, 8, 12).
- In one case, the members of the accreditation council will be appointed by both the government as well as the higher education institutions (11).

Even though this categorization may indicate a clear polarization – on the one hand governmental, i.e. state-near, appointment, and from the other more autonomous, i.e. deregulated and self-governed appointment (from the universities' perspective) – the line drawn between the two categories seems rather blurred. Thus, the appointments by government are based on the higher education institutions' (partially exclusive) right to nominate candidates for the accreditation councils.

The very great majority of members in the respective accreditation councils work on a part-time basis. The size of the accreditation councils varies from 8 to 44 members.

The members of the accreditation councils are appointed for a 1-to-6-year term. Some agencies have specific provisions for the terms of appointment, for example, as regards reappointment. The advantage of a six-year term appointment is that the members of the accreditation council have the opportunity to gain in-depth experience and expertise. In order to safeguard continuity of the accreditation council, three of the agencies have established a rotational appointment procedure: "One third of the council members is changed every 2 years" (10a, 10b, 13, 15) in order to safeguard an "institutional memory" (10a).

	NUMBER OF MEMBERS	FULL-TIME	PART-TIME	TERM (IN YEARS)	APPOINTED/ NOMINATED BY
(1) AAAHE (Albania)	9		■	not regulated	government
(2) AAC (Austria)	8			5	federal government, 4 are nominated by Austrian University Chancellors' Committee
(3) FHR (Austria)	16		■	3 (one re-appointment possible)	federal minister for education, science and culture
(5) NEAA (Bulgaria)	11	1	10	6 (50 % renewable after 3 years)	prime minister
(6) ACCR (Czech Republic)	21		■	4-6	
(7) ACQUIN (Germany)	12		■	2	general assembly; i.e. higher education institutions, professional organisations etc.

(8) HAC (Hungary)	30		■	3 (once renewable)	rectors' conferences, professional organisations, chambers, academy of science
(9a) Latvia Higher Education Council	12	Chair	■	4	different national organisations, incl. students approved by parliament
(9b) Latvia Accreditation Commission	10		■	4	different national organisations, incl. students; approved by ministry
(10a) Lithuania Experts Council	9-15		■	individual appointment up to 4 years; one reappointment	nominated by the centre and approved by the minister
(10b) Lithuania Council for Assessment	9-15		■	individual appointment up to 6 years; possible reappointment after 3 years	nominated by the centre and approved by the minister
(11) HEQEA (Rep. of Macedonia)	15		■	4 once renewable	4 nominated by government, 9 by interuniversity conference, 2 by academy of science
(12) UAC (Poland)	19		■	3	general assembly, i.e. universities
(13) NCAAA (Romania)	19-21		■	1/3 renewed every 4 years	parliament
(14) NAC (Russian Federation)	47		■	1/3 renewed every 3 years	minister
(15) ACSR (Slovak Republic)	21		■	6(every 2 years 1/3 renewed)	government; nomination by higher education institutions and stakeholders

Source: Hofmann, 2006.

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 QA agency 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. Below Box 12 outlines the responsibilities of the AUQA governing body.

Box 12. Responsibilities of the governing body: Australian Universities Quality Agency (AUQA)

<ul style="list-style-type: none"> • 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. <p>Summary responsibilities of the Board</p> <ul style="list-style-type: none"> • 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. <p>Fuller expression of functions of the Board</p> <p>The functions of the Board are to:</p> <ul style="list-style-type: none"> • 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; <p style="text-align: right;"><i>Source: Australian Universities Quality Agency web site, AUQA policies page.</i></p>

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 QA agencies 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 QA agencies 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 QA agency is a government initiative set up to serve government functions, 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 QA agencies 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 410 institutions as members in 2006 and implements 27 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. The involvement of international peers or specific surveys to be conducted as part of the external assessment may be supplementary elements that condition the overall cost of the QA 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 QA agencies, 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. Below *Box 13* discuss the staff resources needed for QA agencies in the USA and Colombia.

Box 13. Resources needed for the QA agency: 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.

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.

Along with institutional affiliation and funding, the QA agency 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 QA agency 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 typically valid for a specific period of time. QA agencies 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 QA agency; 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 particularly important for accreditation as public agencies such as recognition bodies make direct reference to this information. 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 provide sensitive and strategic information to be used for evaluation only because they know it will not be published. It is here that the QA agencies 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 QA agency 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 QA agency.

Some amount of monitoring and follow-up requiring information handling – with varying levels of compulsion – is done by QA agencies. 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 QA agency. 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. QA agencies must plan documentation and information management systems well. It is thus important that the EQA agencies have mechanisms for handling the supporting document provided by institutions such as appendices to self-study reports. 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. QA agencies 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 certain characteristics. 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 making sure that certain quality standards are met, such as accreditation systems, 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 of the HEIs with its quality assurance procedures. 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 QA agency. 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 should be professional in their approach to quality assurance. Indeed, the QA agency 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.

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 QA agencies in the right direction. Having a sound appeals mechanism in place is another step the QA agencies 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 QA agency 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 QA agency 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 QA agency 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 QA agency brings an element of accountability

Many built-in checks may 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 QA agencies 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 QA agency.

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 be requested to 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 (see below *Box 14*).

Box 14. 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 website.

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 criteria for full membership elaborated by the European Association for Quality Assurance in Higher Education (ENQA) is an example. As presented in *Box 15*, these eight criteria are closely connected to the European Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) which will be further developed in *Box 15*. The full set of criteria listed below are available at the ENQA web site.

Box 15. Criteria for full membership (ENQA)

Full Membership of ENQA is open to quality assurance agencies in the field of higher education from EHEA member states that have been operating and conducting actual evaluation activities for at least two years.

Before being accepted as a Full Member, an applicant agency must satisfy the Board that it meets eight criteria, listed below. The applicant agency will thereby also meet the European Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) as adopted by the European Ministers in charge of higher education in Bergen in 2005. The Board may modify the details of the procedures at its discretion.

Each criterion is followed by guidelines (in italics) which provide additional information about good practice and in some cases explain in more detail the meaning and importance of the criteria. Although the guidelines are not part of the criteria themselves, the criteria should be considered in conjunction with them.

ENQA Criterion 1– Activities (ESG 3.1, 3.3)

ENQA Criterion 2 – Official status (ESG 3.2)

ENQA Criterion 3 – Resources (ESG 3.4)

ENQA Criterion 4 – Mission statement (ESG 3.5)

ENQA Criterion 5 – Independence (ESG 3.6)

ENQA Criterion 6 – External quality assurance criteria and processes used by the members (ESG 3.7)

ENQA Criterion 7 – Accountability procedures (ESG 3.8)

ENQA criterion 8 – Miscellaneous

Source: European Association for Quality Assurance in Higher Education website.

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 QA agencies support this. European QA agencies 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.

Option 5: Register of agencies to ensure accountability

The QA agencies of the European region have agreed to accept the strategy leading towards a 'Register of external QA agencies operating in Europe'. Box 16 illustrates this register which allows identifying credible quality assurance agencies operating in Europe and complies with the European Standards and Guidelines for Quality Assurance (ESG).

Box 16. The European Quality Assurance Register (EQAR)

European Quality Assurance Register (EQAR) has been founded by the European Association for Quality Assurance in Higher Education (ENQA), the European Student's Union (ESU), the European University Association (EUA) and European Association of Institutions in Higher Education (EURASHE) to increase the transparency of quality assurance in higher education across Europe.

EQAR publishes and manages a register of quality assurance agencies that substantially comply with the European Standards and Guidelines for Quality Assurance (ESG) to provide the public with clear and reliable information on quality assurance agencies operating in Europe.

In 2003, the ministers responsible for Higher Education in the Bologna signatory states asked ENQA to develop, in cooperation with ESU, EUA and EURASHE, "an agreed set of standards, procedures and guidelines" (Berlin Communiqué). Following this mandate, the E4 Group developed the ESG during the two years to come as a common European set of principles and reference points for quality assurance of higher education. In 2005, the ESG were adopted by the Bologna Process ministerial summit in Bergen (Norway).

The standards and guidelines are designed to be applicable to all higher education institutions and quality assurance agencies in Europe, irrespective of their structure, function and size, and the national system in which they are located. They are organized in three parts, covering the different levels of quality assurance:

Part 1: Internal quality assurance within higher education institutions

Part 2: External quality assurance of higher education

Part 3: External quality assurance agencies

Parts 2 and 3 are those with direct relevance to quality assurance agencies and thus serve as criteria for inclusion on the register.

Source: European Quality Assurance Register for Higher Education website.

Considering these options and the national context will help in making choices for the establishment, management, organization and control of the QA agency.



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, 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), Canada: www.apens.ns.ca

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

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

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

Danish Evaluation Institute (EVA): www.eva.dk

European Association for Quality Assurance in Higher Education (ENQA): www.enqa.net

Hungarian Accreditation Committee (HAC) Code of Ethics available at: www.mab.hu/english/doc/ethics.doc

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

National Assessment and Accreditation Council (NAAC), India: www.naacindia.org

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

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

Ontario Council for Graduate Studies (OCGS), Canada: <http://ocgs.cou.on.ca>

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



The modules on External quality assurance: options for higher education managers in CIS and South-East European countries

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.iiep.unesco.org, and will be revised as needed. Users are encouraged to send their comments and suggestions.

About the authors and contributors

The materials were prepared jointly by Michaela Martin and Antony Stella. Michaela Martin is Programme Specialist at the IIEP and in charge of the IIEP training and research programme on external quality assurance. Antony Stella is currently Director of Audit at the Australian Quality Assurance Agency.