



COUNCIL ON HIGHER EDUCATION
INTERIM HIGHER EDUCATION QUALITY COMMITTEE

AN EVALUATION OF SERTEC AND THE QUALITY PROMOTION UNIT



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**A Report Commissioned by the Interim Higher Education
Quality Committee of the Council on Higher Education**

June 2000

This report is dedicated to the memory of Prem Singh, who died in July 2000. His contribution to the unfolding of quality assurance in South African higher education will be sorely missed.

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Foreword

The Council on Higher Education (CHE) is a statutory body established by the Higher Education Act, 1997 to advise the Minister of Education on all matters pertaining to higher education. The CHE also has responsibility for establishing a quality assurance system for higher education through a Higher Education Quality Committee (HEQC). The CHE set up the interim HEQC in June 1999 to investigate how best to establish a national quality assurance system for the country. The interim HEQC believed strongly that in order to identify best practices for the new HEQC, it should examine past and current quality assurance practices in South Africa as well as acquire some international comparative perspectives in this regard. It was agreed that an evaluation panel consisting of local and international participants would assess the quality assurance activities of the Certification Council for Technician Education (SERTEC) and of the former Quality Promotion Unit (QPU) of the South African Universities Vice-Chancellors Association (SAUVCA). The terms of reference for this evaluation were discussed with and agreed on by the Boards of SERTEC and the QPU. A special sub-committee was established by the interim HEQC to oversee this task. This sub-committee appointed a team under the chairpersonship of Dr J Reddy to undertake the evaluation. Funding was made available from the Ford Foundation.

The report in its draft version was presented to and discussed by the interim HEQC, the Technikon Quality Assurance Committee and the SAUVCA Quality Assurance Working Group. We believe that it constitutes a rich resource for the construction of a new quality assurance system for South African higher education. The report will be used to inform the preparation of the founding document for the HEQC.

Jenny Glennie

Convenor: Sub-Committee
overseeing the Evaluation

Mala Singh

Convenor: Interim HEQC

Preface

Dr M Singh
Convenor: Interim HEQC

Ms Jenny Glennie
Convenor: Sub-Committee One
Interim HEQC

It gives us much pleasure to submit the Report of the Evaluation of SERTEC and Quality Promotion Unit (QPU). The preparation of the Report has been a stimulating as well as a learning experience for the Task Team.

We wish to acknowledge and thank the many people who provided relevant and important documentation and agreed to be interviewed and to the many institutions who received us warmly and co-operatively during our site visits. To you as chair of the Sub-Committee charged with the responsibility of overseeing the report and to the very helpful staff of SAIDE we wish to express our gratitude for facilitating the work of the Task Team.

We sincerely trust that the Report has fulfilled the terms of reference and will make a modest contribution to setting up the national quality assurance system for the country.

Jairam Reddy
Chair of the Task Team

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June 2000

Glossary of Acronyms

AAU	Academic Audit Unit (New Zealand)
CHE	Council on Higher Education
CTM	Committee for Tutorial Matters
CTP	Committee of Technikon Principals
CUP	Committee of University Principals
EQA	External Quality Assurance
EQM	External Quality Monitoring
ETQA	Education and Training Quality Assurer
GATE	Global Alliance for Transnational Education
HAI	Historically Advantaged Institution
HDI	Historically Disadvantaged Institution
HE	Higher Education
HEI	Higher Education Institution
HEQC	Higher Education Quality Committee
INQAAHE	International Network of Quality Assurance Agencies in Higher Education
NCHE	National Commission on Higher Education
NQF	National Qualifications Framework
NSB	National Standards Body
OECD	Organization for Economic Co-operation and Development
QA	Quality Assurance
QAA	Quality Assurance Agency
QPG	Quality Promotion Group
QPU	Quality Promotion Unit
SAIDE	South African Institute for Distance Education
SAQA	South African Qualifications Authority
SAUVCA	South African Universities Vice-Chancellors Association

SERTEC Certification Council for Technikon Education (Sertifiseringsraad vir Technikononderwys)

SETA Sector Education and Training Authority

SGB Standards Generating Body

SWOT Strengths, Weaknesses, Opportunities, Threats

TLQPR Teaching and Learning Quality Process Review

UGC University Grants Committee

1. Introduction

According to higher education policy and legislation, the Council on Higher Education is responsible for quality assurance in the higher education sector. For this purpose, the CHE is required to establish the Higher Education Quality Committee (HEQC). The functions of the HEQC as outlined in the Higher Education Act include the promotion of quality in higher education, the auditing of quality assurance mechanisms of higher education institutions, and the accrediting of programmes of higher education. In addition, the Act specifies that the CHE and the HEQC must comply with the stipulations of the South African Qualifications Authority (SAQA) Act which makes provision for Education and Training Quality Assurance bodies.

The current arrangements for external quality assurance of South African higher education are as follows:

- Since 1988, the Certification Council for Technikon Education (SERTEC) as a statutory body for the technikon sector has been engaged in programme accreditation and recently in the auditing of certain institutional aspects as well.
- The Quality Promotion Unit (QPU) of the South African Universities Vice-Chancellors Association (SAUVCA), established in 1996, was engaged in institutional audits of universities until January 1999 when its activities were terminated.
- Professional associations are involved in programme accreditation at both universities and technikons for those professional programmes where such associations exist. In the case of the technikons, this is done in co-operation with SERTEC.

A Task Team was appointed by the Sub-Committee of the interim HEQC to carry out an independent investigation of the work of these two bodies. The purpose of the evaluation was to:

- determine the best practices of both SERTEC and the QPU in quality assurance and its promotion for possible inclusion into the structure of the new HEQC
- identify areas of weakness in the practices of the two bodies and to recommend strategies to overcome these weaknesses in setting up the HEQC
- highlight issues pertinent to quality assurance and its promotion in the higher education sector which the work of the two bodies has identified
- identify elements from the current quality assurance processes in accordance with the overall purpose of quality assurance as being developed by the interim HEQC.

The Task Team has undertaken this investigation with the full knowledge that the South African higher education sector is in a state of transition, with many of the reforms proposed in the White Paper and Higher Education Act yet to be implemented. In particular, the determination of the shape and size of the sector and the introduction of new funding mechanisms will be crucial for the development of a meaningful quality assurance system.

2. Methodology

According to the terms of reference of the Task Team, it had to carry out an independent evaluation of the work of SERTEC and the QPU as external quality assurance agencies of technikons and universities respectively. The work of the Task Team thus qualifies as a meta-evaluation, i.e. the evaluation of evaluation or evaluators (see Appendix 2). The purpose of the meta-evaluation was to provide the commissioning body (in this case the Council on Higher Education through the interim HEQC) with feedback on how effective the evaluations and the evaluators (SERTEC and QPU) have been. To this end the Task Team grappled with questions such as these:

- Did the outcomes of the activities of SERTEC and the QPU provide the necessary assurances and information to the government and the public?
- Is there evidence of an improvement of quality in the technikons and universities?
- If yes, can any of that be attributed to the actions of SERTEC and the QPU?

Meta-evaluations are usually preceded and informed by self-evaluations of the agency concerned. In this case, the Task Team took cognisance of the fact that SERTEC had engaged in a self-evaluation and, at two occasions, was evaluated by external experts, whereas neither self-evaluation nor external evaluation had been performed in the case of the QPU.

For the purpose of this meta-evaluation the Task Team engaged in an investigation by means of systematic data collection. The following methods of data collection were utilised:

- Literature survey. Relevant local and international literature on quality, external and internal quality assurance, meta-evaluations, etc. was reviewed.
- Analysis of relevant policy documents and other documentation, particularly documents written by and on the QPU and SERTEC.
- Site visits. Technikons and agricultural colleges, as well as universities, which had been audited by the QPU, were selected for site visits. Considerations for selecting institutions included: proximity of a university, technikon and agricultural college to one another in the interest of time and cost-effectiveness; equal representation of institutions in terms of medium of instruction (English and Afrikaans); mode of delivery (contact tuition versus distance learning); and whether they were historically advantaged or disadvantaged. The visits were undertaken by teams of two members of the Task Team who interviewed a wide range of officials and role-players (see Appendix 4). Interviews were transcribed and transcriptions disseminated to all Task Team members.
- Interviews. Both group and individual interviews were conducted, either personally or telephonically, with as many of the important role-players in the two agencies as time and availability allowed. All the interviews followed the same basic structure with regard to the questions asked and issues addressed. Interviews were transcribed and transcriptions disseminated to all Task Team members.

Following the data collection, Task Team members set about analysing and interpreting data. For this purpose tasks were delegated to individual team members or to small teams of two members. During meetings of the Task Team, these written reports were analysed, critiqued and interpreted in relation to the Task Team's assignment and terms of reference and taking into account the perspectives of all Task Team members. During an intensive three-day workshop of the Task Team, provisional conclusions and recommendations - based on all the information that was collected - were formulated. Information was measured against three criteria, namely:

- the goals and objectives of the two agencies
- international practices
- the policy goals of the HEQC.

This process provided the Task Team with the evidence presented in this report. The members of the Task Team who engaged in this meta-evaluation did not regard themselves as representing any constituency, for example, a particular institution or a particular category of institutions. The Task Team members conducted the investigation and came to certain conclusions in their capacity as higher education researchers, and are presenting their research findings as such. While realising and acknowledging that scientific research, like any human activity, is an inherently subjective and imperfect process, the Task Team trusts that this report and their findings will be criticised only on the basis of shortcomings in the research methodology, the interpretation of information and the presentation of evidence, and that their bona fides with regard to an absence of bias will be accepted.

3. Criteria for the Evaluation of the Strengths and Weaknesses of the QPU and SERTEC

In framing this evaluation, the Task Team considered three areas as sources of criteria against which to assess the operations of the QPU and SERTEC. These were (a) the goals and objectives of these particular bodies, (b) international (best) practices, and (c) the broader policy goals of the HEQC. The goals and objectives of the QPU and SERTEC are outlined in the respective sections of the report devoted to them.

From a consideration of recent literature on international trends and best practices in external quality monitoring, the fifteen criteria set out below were derived.

While there exists a wide diversity of models of external quality assurance (see for instance Harvey and Knight, 1996 and Kells, 1992), and it is not particularly helpful or accurate to speak of international "best practice" in the singular (Brennan, 1999), it does appear that there is some consensus in the literature consulted with respect to what the main debates with respect to EQA (external quality assurance) are, and what lessons have been derived from experience in a variety of countries with a longer history of EQA than South Africa.

While the power relationship between governments and institutions differs across higher education systems, Harvey and Knight speak of a "convergence towards a dominant model of delegated accountability" in higher education (1996: 86) which has necessitated an emphasis on quality as a vehicle for delivering policy requirements within available resources. They argue that despite the diversity in models of evaluation and the status of the various EQA agencies, most methodologies incorporate a combination of three basic elements:

- A self-evaluation or self-assessment.
- Peer evaluation, normally in the shape of an institutional visit.
- Statistical or performance indicators.

They perceive an emerging emphasis on the self-critical academic community, rather than direct external inspection of provision. They perceive further a shift to qualitative assessments based on peer reviews, as in Wales and Tennessee, as well as a shift to greater openness and explicitness about quality and standards in higher education.

This trend is related to one of the major and enduring debates in EQA, which concerns the tension between accountability and improvement orientations. While some see these functions as somewhat antithetical, in that concentration on the one can be damaging to the other (Harvey, 1997), others would regard these as opposite ends on a continuum of purposes for EQA, with the main question being where on that continuum the emphasis should be placed. Woodhouse notes that there is an uneasy balance between improvement and accountability as aspects of external quality review, and that the dual requirement is being addressed differently in different countries. One solution is the existence of two bodies, one for accountability and one for improvement purposes.

Vroeijenstijn, writing at the beginning of the Dutch experience of EQA (1995), argued for the possibility of combining both functions in a single system. In later work, however, he bemoans the fact that in the Netherlands, in a system that set out to be improvement-oriented, the accountability imperative has become weightier, rendering the system less acceptable to the institutions concerned (1997). Indeed, at the risk of generalising and overstating the case, it is apparent that the trend in many systems of EQA has been a tilt towards greater accountability.

Maassen, however, notes a contrary trend in Europe towards greater self-regulation, of which he approves, and Harvey and Knight have noted a "shift from quantitative indicators to qualitative evaluations, in part reflecting a growing awareness of the need for EQM (external quality monitoring) to place a higher priority on improvement" (1997: 88). The consensus among many writers in the field (including Harvey, Kells, Massaro) is that quality in institutions is best brought about or maintained where the improvement paradigm is uppermost, and

where the system is "owned", either literally or *de facto*, by the institutions themselves. As Massaro writes, "My preference would be for rigorous self-regulation, and I would argue for a system which is owned and controlled by the institutions, with public reporting and transparency... If quality assurance or audit is to be administered by a national agency of government, the agency should be light-handed in its approach, relying on institutions to develop good systems...The agency should establish the processes and supervise their introduction, but then gradually remove itself to a watching and fiduciary brief" (1997: 27).

Accountability concerns appear to tend towards a concentration on the regulation of outputs, and on aspects which can more easily be measured, than on an improvement in teaching and learning at an institution. Harvey and Knight argue that relatively seldom in EQA are teaching and learning processes central, and that EQA seldom really gets to the heart of the "core business" of higher education institutions, whether this be teaching and learning, or research or both. We extrapolate from the literature consulted that, ideally, EQA should - if its purpose is to bring about improvement in quality within institutions - focus on enabling the development of internal self-evaluation systems within the institutions and encourage a focus on their core activities, rather than concentrate on measures of system output. Nevertheless, this is a question of choice, and QA systems may well be set up primarily for other purposes, with EQA agencies or bodies, either university owned and funded or government funded, established to fulfil such purposes.

- *The first criterion, then, is to assess to what extent an external quality agency is fulfilling its purpose, wherever it is situated on the accountability/improvement continuum. This is consistent with the Task Team's brief to assess the effectiveness of the QPU and SERTEC against their own goals and objectives.*
- *Second, if that purpose tends closer to the improvement end of the continuum, then it would be important to establish to what extent the agency/-ies have succeeded in stimulating institutional development with respect to core areas of functioning such as teaching and learning.*

A further debate is whether EQA should be focused primarily at the institutional or programme level. While many are agreed that programme level assessment is closer to academic life and therefore likely to be more effective, Brennan (1999) argues that the institution-wide audits or assessments have a larger impact in terms of shifting institutional culture, within which programmes can be developed and improved. Woodhouse notes that there appears to be a move towards combining both levels of focus in an EQA system (Woodhouse, 1996). Of course, not every agency or EQA body is operative at both levels. A criterion in the evaluation of EQA bodies in this instance would be:

- *Is the level at which the EQA body/-ies are operating appropriate in the larger context of the EQA system?*

There is a wide diversity of types of EQA bodies internationally. They all operate in somewhat different ways, some carrying out audits, others assessments, and others performing an accreditation function. An EQA system can, however, only be successful if the agencies responsible for its operation take an appropriate approach for that particular higher education system. Based on an OECD study of 48 institutions and EQA agencies from 23 countries, Massaro lists a number of general lessons learnt which are applicable in most systems of higher education. Among these are that:

- assessments are more acceptable and more likely to lead to improvements when they are conducted by peers, including international peers
- systems should focus on continuous improvement, with an enabling rather than an auditing function. Where the process is seen to be one of assisting in the development of quality it is more likely to have long-term results than inspectorial ones
- a mix of approaches is most likely to produce effective measurements of an institution's quality

- the measurement of quality at the system level is more feasible with binary systems of clear mission differentiation between institutions, because judgements can be made against agreed missions and comparisons between like institutions (US, Canada)
- the system must be funded adequately, involving a long-term commitment.

In the OECD study, a trend was discernible towards measuring the efforts being made to ensure and enhance quality rather than focusing on quality itself (Massaro, 1997: 10). In other words, the trend was towards a greater emphasis on the self-

evaluation phase and a peer review phase which validates the self-evaluation, and not on the assessment of quality per se. This is particularly the case in Europe, where the impetus for quality assurance has been to gain further institutional autonomy in a context of centralised government authority over higher education. It is also evident in the Anglo-Saxon world, for example in the UK, in which the Quality Assurance Agency (QAA) is (allegedly) attempting to deal with universities with "a lighter touch" - that is, not so much in inspectorial mode as in validation mode. A fourth criterion suggests itself here, that is:

- *The extent to which the policies and procedures of the EQA agency/-ies are moving towards the development of, and greater reliance on, institutional self-evaluation procedures, and adapting their operations accordingly.*

A related concern in the relevant literature is that whatever EQA approach is adopted, its procedures and systems should not be inimical to the culture of the institutions with which it interacts (Harman, 1998). As Massaro writes, "While the concept of quality assurance seems almost everywhere to have been introduced by the need for government to make universities more accountable for the public funds they consume, the tendency in many places has been to turn to industry concepts of quality management for answers as to how one measures quality in universities" (1997: 10). Yet concepts borrowed from other contexts may not translate readily into higher education. In the OECD study, it was found that in mature or better-functioning systems, traditional measures of quality assurance, which were self-directed, essentially voluntary and unco-ordinated, had been built upon, formalised and generalised across institutions (1997: 13). This leads to a fifth criterion:

- *The extent to which the processes and procedures of the EQA agency/-ies are consonant with the culture of the institutions with which they interact, and build on existing institutional quality assurance mechanisms.*

A further trend discernible in the literature is towards the increasing internationalisation of QA. With increasing globalisation and the necessity for education to be transportable and comparable across national boundaries, has come a need to develop benchmarking processes. While there are a number of projects in this area (e.g. Global Alliance for Transnational Education (GATE)), these are as yet not widespread, and in their infancy. Nevertheless, given this trend, it may be expected of successful EQA agencies that this development has been taken into account in their future planning. The criterion in this instance is framed quite broadly as:

- *The extent to which the EQA agency/-ies have taken internationalisation and other developing trends into account in their planning processes.*

The above criteria apply at the general level of the approach taken by an EQA. However, whatever approach is taken, the success of an EQA agency depends very much on the way in which it performs its functions.

- *A seventh criterion, therefore, is the extent to which the EQA body functions efficiently and effectively on an operational level in carrying out its mandate.*

This criterion can be broken down into a number of indicators of effectiveness. Referring to a collaborative professional agency owned by the institutions themselves, a category into which the former QPU would fall, Kells (1992) lists a number of such indicators which are essential for its successful functioning:

- A consensual mandate from all the universities (HE institutions).
- First-rate professional staff with credentials and status sufficient to command respect in government and in the faculties of universities (or other HE institutions).
- Participation by the leaders of the institutions in the policy setting processes of the agency.
- Sufficient resources to operate in a highly thorough and professional manner.
- Thorough and sufficient training efforts and materials.
- Continuity of effort through cycles of regulation.
- Well-designed procedures that result in increasingly effective self-assessment processes; the highest possible level of external reviews and advice to the institutions, and second opinions for some processes, balance and consistency in action, and firm and effective pressure for improvement in the programmes and services of the institutions.
- Effective self-regulation of the agency effort.

For a statutory body such as SERTEC, these indicators would hold, except perhaps for the first which is not applicable. A "constructive relationship with" the HE institutions with which the agency works might be more appropriate in this case. Some of these indicators, which provide a useful checklist in examining the functioning of an EQA body, are expanded upon as separate criteria below.

3.1 Criteria Related to Particular Aspects of the Functioning of an EQA Agency

As noted earlier, many EQA processes are based on an institutional self-evaluation, followed by a visit by an external review panel and a reporting phase. Both the QPU and SERTEC, in some of its operations, conform to this broad basic model.

Kells argues that it is absolutely necessary for an EQA agency and the institutions to agree on the fundamental basis of judgement to be used internally and externally in the assessment process. Unless there is a workable agreement, the system will falter through inconsistency and will therefore lack credibility (p 83). An agency should be operating within a very clear evaluation framework and purpose which should be evident to all involved. The agency should be working with a clear understanding of quality and purpose which should be both carefully articulated and agreed to consensually:

- *The fundamental understanding of quality and the basis of judgement used by the EQA should be derived consensually and made explicit to all concerned.*

As a related criterion:

- *The purposes of EQA and the means by which it is carried out must be functionally aligned - the procedures selected should be appropriate to the purpose of the agency.*

If, for instance, the main purpose is to improve quality at an institution, then an assessment methodology may not be appropriate. If, on the other hand, the primary purpose is accreditation, then over-reliance on self-evaluation may not be appropriate.

3.2 Self-Evaluation

For a self-evaluation process to be effective, it should, according to Vroeijenstijn (1997), be as clear and honest as possible. There is agreement that self-evaluation reports from institutions

are more effective where they are relatively brief, and where they focus more heavily on analysis than on description. In an effective institutional self-evaluation process, the following questions should be able to be answered, "why are we doing what we are doing? Are we doing the right things? Are we doing the right things in the right way? Are we achieving our goals?". Honest answers to these questions require a high degree of trust between the institution and the EQA body, if the assessment or audit is based on a self-evaluation. An EQA could, therefore, by implication be judged on:

- *The extent to which its processes and procedures, and its relationship with the institutions, foster the development of honest and analytical institutional or programme self-evaluations.*

Vroeijenstijn (1997) remarks that one of the major weaknesses of many EQA systems is that there is generally too little follow-up on the audits or assessments undertaken. This is largely because institutions do not have sufficiently well-developed internal quality assurance mechanisms; it is also because EQA agencies themselves do not necessarily have adequate means, not only of following up whether their recommendations have been implemented, but of discerning whether any quality improvement has taken place. Two criteria (11th and 12th) for evaluating the success of EQA agencies thus, would be:

- *The extent to which the agency/-ies has been successful in stimulating the development of an internal QA system in the institutions themselves to monitor improvement in quality.*
- *The extent to which the EQA body/-ies has a follow-up mechanism to monitor the implementation of its recommendations, and the extent to which its audit or assessment processes build on past interactions with a particular institution.*

A related criterion - mentioned by Kells - which is essential for the successful functioning of an EQA agency is that the agency should have the power to police the activities of institutions choosing not to take self-regulatory efforts seriously. Confidence in the system centres on there being such a sanction. Without true and effective peer pressure, self-regulation falters and governments feel the need to step in (1992: 75). This is the ultimate test of an effective QA system based on self-evaluation. The criterion here, therefore, is:

- *The extent to which the EQA body has the power of sanction in respect of institutions which choose not to implement its recommendations.*

3.3 External Panel Visits

Conditions which external visiting committees organised by EQAs would need to fulfil are, according to Vroeijenstijn (1997), that:

- an external review committee should perform its role as consultant properly, next to its role as accountant
- an external committee needs to enjoy the confidence of those being assessed/audited. Without that, the committee cannot fulfil its role as consultant
- a committee should formulate its frame of reference very clearly. Those being assessed should know the criteria for assessment and know the background against which the recommendations are made
- the committees should make clear recommendations and also address the recommendations to the right persons
- reports from external committees should contain a balanced analysis of the quality of the programme, institution or institutional mechanisms, depending on their purpose, and should be organised around the guidelines or standards of the reviewing agency. (In other words, they should be written in accordance with agreed frameworks and not use norms, standards or criteria, or cover areas, which were not agreed upon, and they should be relatively consistently applied across institutions for the sake of credibility).

The success of peer review depends greatly on training and experience, and the professionalism of those involved (Kells, 1992: 104). Visiting teams should:

- adhere to an evaluative framework
- display effective interviewing skills
- be able to give positive as well as negative feedback
- display political tact and the ability to manage a complicated visit.

Agency members (councils and staff) as well as visiting teams, and institutional leaders who lead the institution in undergoing a self-evaluation, all need to act in a professional and effective manner. Therefore, the provision of effective and continuing training of agency staff, peer visiting teams and institutional leaders involved in self-evaluation is vitally important to the success of the system of EQA. This leads to a further important criterion:

- *The extent to which the EQA agency/-ies provide effective and ongoing training in a professional manner for the key players in the system of EQA, as well as the extent to which their functioning is monitored.*

Finally, agencies must be self-critical, and it is important that there is some provision made for the meta-evaluation of the agency/-ies. While few systems have a meta-level process built in (the Dutch Ministerial Inspectorate is an example of one), a 15th criterion for a successful agency/-ies would be:

- *Whether impact studies or self-evaluation mechanisms form part of the functioning or the plans of the EQA agency.*

While the above 15 criteria are set out in very general terms, the Task Team also considered a number of criteria emanating from the specific policy environment of South African higher education. In evaluating the work of the QPU and SERTEC, the Task Team was asked to consider which of their best practices could be further developed in the work of the HEQC. One such criterion is:

- *Whether the operations or any practices of the QPU and SERTEC are consonant with the goals and purposes that have been legislated for the HEQC.*

In similar vein, it is important to establish:

- *Whether the operations of QPU and SERTEC are appropriate for the future higher education system - that is, a single integrated, but differentiated system as outlined in the Higher Education Act and the White Paper.*

Given the realities of higher education in South Africa, the strengths and weaknesses of the QPU and SERTEC should also be assessed against:

- The extent to which their methodology is feasible in the context of South Africa, where resources for higher education are limited and the academic community is relatively small.
- The extent to which their methodology is feasible in a context of profound transformation, with increasing demands and pressures on academics.

Finally, it is important to consider:

- *The extent to which the operations of the QPU and SERTEC lend themselves to optimum consolidation in a changing higher education policy environment where many different bodies claim some authority for conducting quality assurance processes.*

4. SERTEC

4.1 History, Context and Operation

4.1.1 Rationale, Principles and Assumptions

The rationale for the establishment of SERTEC has to be considered against the backdrop of the evolution of technikons from senior technical colleges to colleges for advanced technical education (1968), and eventually to technikons (1979) as institutions for advanced vocational learning.

At the time of SERTEC's establishment, although acknowledged as higher education institutions, technikons were still subject to a central control of national examinations and certification by the Department of Education, and therefore did not enjoy the autonomy which universities took for granted.

The discrepancy in autonomy between technikons and universities was a primary driving force in prompting the Committee of Technikon Principals (CTP) to establish and accept an external quality assurance body. They saw the mechanism as having the potential to buttress their quest for autonomy. A precedent for this kind of external quality assurance body already existed in the Council for National Academic Awards for Polytechnics in the UK.

The Department of Education was receptive to the idea, since exposure to practice in the USA had sensitised it to the role that regional and specialised accreditation agencies could fulfil in assuring quality in higher education. SERTEC was thus established largely in response to technikons' quest for improved status and autonomy.

The promulgation of the Certification Council for Technikon Education Act, 1986 (Act 88 of 1986), established SERTEC as an autonomous statutory body in terms of section 2 of the Act. In terms of section 3 of the Act, the purpose of the council was to ensure that corresponding technikon certificates issued by the council would represent the same standard of education and examination. Its terms of reference were thus to ensure equal standards and to certify on that basis. This function was, however, never executed in these terms, due mainly to the influence of the SERTEC council, as will be elaborated below.

Since its inception, SERTEC was required to manipulate examination results to ensure consistency in outcomes among the technikons and to award certificates to successful candidates. The council resisted the imposed role of manipulating examination results, largely because of the absence of statistical techniques devised for this purpose. Moreover, it regarded the central manipulation of examination results as having a potentially deleterious effect on the improvement of quality in the technikon sector, as well as eroding the autonomy of technikons.

The first council of SERTEC was appointed only in 1988, and the office of SERTEC began to be established with the appointment of the executive director in April 1989. The first council decided at its meeting in July 1988 that the monitoring of the quality of education in the technikons would be the main focus of its activities. It would do so through peer evaluation committees in line with common practice throughout the world.

In the light of this, a review of the roles and responsibility of SERTEC culminated in amended legislation (the Certification Council for Technikon Education Amendment Act, 185 of 1993). This gave SERTEC its new role as an accreditation body, while retaining the certification function.

While the legislation gave SERTEC significant powers to hold technikons accountable for quality at their institutions, SERTEC's approach was strategically a "soft touch" one that reflected due sensitivity to the emerging autonomy of technikons, as well as to the need to secure the co-operation of the technikon movement, rather than provoke its resistance. As a

result, all of the requirements for the monitoring of quality at technikons were drafted in co-operation and consultation with the Committee of Technikon Principals. These were documented in a manual for the evaluation of standards at technikons (SERTEC 1996).

Subsequent revisions of the manual based on emerging experience were also undertaken after due consultation with the CTP and its sub-committees, such as the Committee for Tutorial Matters (CTM).

In spite of its wide powers, SERTEC used its power to close down a programme only once where it was very expensive and behind in infrastructure. In another case, a technikon put the requisite resources into place within a year and got full accreditation the following year. Conditional accreditation or no accreditation at all appears to have a galvanising effect on institutions to respond to quality assurance imperatives.

There are a few cases where technikons themselves have decided to close programmes or spend resources on getting full accreditation in response to SERTEC evaluations.

4.1.2 The Role and Impact of the SERTEC Council

The council, in terms of Act 88 of 1986, comprises a chairperson, executive director, four technikon principals nominated by the CTP, and seven other members appointed by the minister on the grounds of their expertise. The CTP representatives on the council played a decisive role in shaping the functions of SERTEC.

As alluded to above, soon after the establishment of SERTEC, the council initiated a systematic process of redefining the function of SERTEC. Scrutiny of SERTEC manuals reveals that the council almost immediately established an interpretation of the Act which focused on minimum standards, as opposed to equal standards for academic programmes.

The council continued to work towards establishing SERTEC as an accreditation body, culminating in the Certification Council for Technikon Education Amendment Act (Act 185 of 1993), which extended the functions of SERTEC to that of an accreditation body for both technikons and agricultural colleges. The evolution of the SERTEC manuals and the issues addressed in them reflect the development process in technikons.

The initial extensive focus of SERTEC on regulations and conditions for examinations set by the council, duly followed by issues such as requirements concerning resources centres, staff qualifications, course content, research and institutional aims, goals and objectives, mirrors the concerns of the council.

The introduction of degrees in technikons in 1995 initiated the next round of requirements which focused on the degree-worthiness of technikon qualifications. Plainly SERTEC was a useful lever to legitimate technikons' representations to be allowed to award degrees. The latest round of changes came as a consequence of that. The evolution of SERTEC's methodology from certification to accreditation to ultimately self-evaluation (1996) was influenced by and responded to the developing autonomy of technikons.

The picture which emerges is one of continual redefining of the specific nature of SERTEC evaluation, with a strong focus on compliance in the period 1988 to 1996. The subsequent introduction of the notion of accreditation based on self-evaluation indicates a change in perception of the council about the state of development technikons in general had reached.

It cannot be argued that all technikons were at the same point on the continuum from total regulation and compliance to deregulation and self-evaluation. While internal quality assurance measures at technikons did not keep pace consistently across the sector, the SERTEC process evolved from a bias towards compliance to self-evaluation within a period of ten years. During this same period, technikons' status changed from that of colleges to degree-awarding institutions.

In view of how the SERTEC council interpreted its terms of reference, plainly its role in shaping its mandate and modifying it cannot be understated. Its interpretation also shifted strategically and flexibly so that "minimum standards" were not fixed or limited to an immutable set of categories. It responded to a multitude of factors which included the changing dynamics within the technikon sector itself, emerging best practices elsewhere in the world, and the lessons gleaned from its own practices.

4.1.3 Methodology and Structures Implemented

In terms of Act 88 of 1986, the council may establish committees to perform such functions as it sees fit. The council consequently established evaluation committees, chaired by programme experts from other technikons, with council members and officers co-ordinating, and constituted and convened on an ad hoc basis, to evaluate standards at technikons.

Committees typically consist of a member of the SERTEC council, academic peers from other technikons, employer/industry representatives, students, and representatives from professional bodies. All the committees are co-ordinated by the accompanying executive director or director of SERTEC. The committees vary according to the technikon and programme context.

At academic programme level, the methodology thus comprised evaluation by external evaluation panels. It was performed within a framework of norms and standards prescribed by the council. The scope of evaluation covered academic programmes and other operational units such as resource centres, research, examinations and co-operative education. The last of these has become increasingly important in view of the unique character of technikons vis-à-vis their relationships with industry, and the opportunities provided to students for experiential learning as an integral part of their education at technikons. Stakeholder views, including those of students, are solicited.

The SERTEC manual explicated the methodology by providing guidelines. It also contained a framework of norms and standards determined by the council against which the programmes would be evaluated. It includes a procedure for the evaluation process, and questionnaires to guide the technikon and the evaluation committees in their respective exercises.

The approach was initially one of examining the descriptive reports submitted prior to evaluation visits, focusing on compliance with requirements set by the council. After 1994, when the concept of self-evaluation was first introduced, the methodology was altered to accommodate self-evaluation, but still within a prescribed framework. In this regard the manual perhaps contradicted its own purpose by stating, "A self-evaluation report must contain descriptions under the following headings..." (SERTEC 1-05 (01/95)). In this way, self-evaluation was since inception conceptualised as description rather than reflective, critical self-appraisal.

Evaluation is organised in four-year cycles, with the SERTEC council following up on whether recommended improvements were implemented.

4.1.4 Funding

The CTP's request for a quality assurance body included the proviso that the quality assurance body should not initiate a new bureaucracy, and had to function cost-

effectively. Since its inception, SERTEC was subsidised by the state. However, through a levy payable for every certificate issued, it had gradually decreased its dependence on the state so that when the state subsidy was terminated in 1993, it could continue its activities largely unaffected by this development.

4.2 Critical Perspectives

4.2.1 The Dual Goals of Quality Assurance: Improvement and Accountability

SERTEC's approach and its stated view is that it does not see the improvement and accountability goals as necessarily in conflict. From the inquiry undertaken, it is apparent that ownership by technikons over the SERTEC process has developed quite steadily if not evenly. The institutional disposition towards SERTEC is to a large extent contingent upon the degree to which internal quality assurance mechanisms are prevalent at institutions. Where there are adequately evolved quality assurance mechanisms within an institution, it is ostensibly comfortable with the role of SERTEC and does not have many problems with regard to the balance between improvement and accountability. Consequently it does not feel that the SERTEC process is punitive, intrusive or overly prescriptive.

On the other hand, technikons which are struggling to establish internal quality assurance mechanisms, or which have inadequate resources, and which as a consequence are less likely to get favourable reports, are more inclined to be highly critical of the entire SERTEC endeavour - as was the consistent finding of the Task Team.

A common view among technikons is that over-prescription in terms of the accountability mandate of SERTEC has the likely effect of stifling critical self-reflection, and possibly even intrudes upon the autonomy of institutions. Rather than having the desired effect of promoting improvements, where such a perception develops, there is a strong likelihood that the institution may become defensive or antagonistic to the accountability imperative, to the detriment of the improvement endeavour.

There is general acceptance of an external quality assurance body as a necessity for both the improvement as well as accountability imperatives across many of the institutions which were part of the inquiry. Any antagonism is mitigated by the recognition that accreditation flowing from such evaluation is essential in order to ensure that qualifications are comparable nationally, as well as internationally, and to allow for necessary articulation between institutions.

A general view regarding the accountability imperative is that institutional evaluations will help inform funding agencies on whether public resources are being optimally utilised. This is consonant with developments internationally with the pressure for greater accountability as to how public resources are spent. A cautionary note which was added, however, is that there is a need to avoid the perception that audits are opportunities to "police" institutions.

4.2.2 Definitions of Quality Assurance

A striking feature of most interviews was that while interviewees generally declared awareness of the aims and purposes of SERTEC, it is clear that they did not fully understand the driving imperatives behind the SERTEC approach in terms of the fitness for purpose and accountability orientation of the SERTEC exercise. This may be due to weaknesses in internal communication at institutions.

This was particularly striking at one institution, in the light of one of the deans having been involved in five evaluation panels at other institutions.

There does, however, appear to be an awareness of the improvement goals of SERTEC. Despite the existence of SERTEC for twelve years, it also became apparent that the understanding of quality assurance as opposed to certification and accreditation at most of the institutions is a relatively new concept. Most are working on developing policies, procedures and processes to give expression to the quality assurance goal. There is no consistency in the level of preparedness among institutions.

The fledgling quality assurance enterprises at most of the institutions visited are exacerbated by insufficient communication across and between institutions on the issues of quality. The absence of any discourse on quality improvement and quality assurance until the very recent efforts under the auspices of the CTP has also contributed to the low levels of development at most institutions.

A trend at the majority of institutions is that it is left largely to the individual managers concerned to what extent they give expression to quality assurance issues. Those who are familiar with the approach of SERTEC vis-à-vis accountability and fitness for purpose place a high value on the accreditation role of SERTEC. They have used this as a marketing tool and means of assuring customers, both students and industry, of the quality of education offered at their institutions.

Institutions which have recognised the value of quality assurance and the driving imperative of new policy (especially in the light of the establishment of the HEQC) have read the signposts towards the new quality assurance dispensation and have begun to respond by setting up quality promotion and quality assurance units.

In addition to these enabling conditions, top management at these institutions employ a variety of strategies to manage quality, either through line management or through dedicated committee structures, or a mixture of both.

Funding consistently poses a difficulty. Some institutions are dependent upon soft funding in order to develop their quality assurance capacities. This does not augur well for quality assurance being institutionalised as a continuous improvement project. It is likely that the issue of resourcing will continue to dog efforts to institutionalise quality assurance as a mainstream feature of institutional management, planning and development.

4.2.3 Preparation for the Institutional Evaluation

Preparation for evaluation at institutions which undertake the exercise with any degree of rigour, and where the task has not been delegated to a small committee or an individual or two, helps them take stock of their activities and programme offerings in ways which are not done routinely. As such, the preparation for the institutional evaluation has spin-offs for the development of capacity in quality assurance, and the development of procedures, processes and practices which respond better to the externally driven pressures of an impending SERTEC evaluation. Unfortunately, there is no consistency in rigour from institution to institution.

Those institutions which have well-established policies and procedures and highly devolved accountability and managerial responsibility are generally found to be well organised in terms of the quality assurance endeavour. The impact and outcomes of the process are reasonably well documented and visible. Consequently, such institutions are often eager to subject their quality assurance processes to scrutiny, and invite this kind of outside intervention. On the other hand, institutions which are weak in these areas, and which consequently are more likely to attract a negative evaluation, are least eager to subject their processes to external scrutiny.

Because much is at stake in terms of the SERTEC process, and because a negative outcome will seriously influence the standing of the institution as well as possibly its ability to continue with a programme, institutions invariably put their best foot forward and represent things in the most positive way possible.

Some panels' chairs have been quite explicit in their evaluations and in calling some self-evaluation reports and presentation of materials "window dressing". Several staff interviewed have attested to the potential for "window dressing" in the exercise.

Criticisms on the part of institutions regarding the preparation for institutional evaluations have revolved around the guidelines which are provided by SERTEC. Several have characterised these as "vague and unclear". Others have characterised them as a "mechanistic process" with no clear indicators. The vagueness of the process allows the institution leeway. On the other hand, it does not give it sufficient direction for the institution to respond adequately.

A further concern with this kind of process is that the guidelines are generic, and areas of focus as well as the questions assume that all institutions are equal. They do not appear to recognise the highly differentiated higher education institutions that we have.

Institutions have consistently recorded problems in the interpretation and implementation of the procedures outlined by SERTEC. There is no common understanding and interpretation of the SERTEC guidelines within and between institutions, as well as between the internal and external evaluation teams. This is exacerbated by the relative absence of any clear briefing or training of teams on the interpretation of these guidelines.

Crucial concepts and terms which are used in the manual and which are open to different kinds of interpretations need to be assimilated and consistently used. However, again, the absence of any training programme militates against this.

Whatever training or preparation there is happens on an ad hoc basis where institutions request this, and where personnel from SERTEC are available to do it.

The format and wording of the SERTEC Annexure S1 have been found to be repetitive at times, and the questions are frequently unclear. As a preparation guideline, it has frustrated several programme heads and internal administrators of the system due to the variety of interpretations possible for several questions.

Some institutions have indicated that staff have been "petrified" by the process. Plainly there is a need for better internal information spread and illumination of the complexity of the process to demystify it, and to alleviate anxiety and tension. Such a process will enable staff to understand the potential outcomes of the EQA process and thereby optimise its impact on the institution. Where this has been raised as a problem, the suggestion was for a pre-audit programme at the institution, as well as capacity development, in order to optimise the impact of the audit process.

Several institutions have "full-blown" rehearsals where the areas of focus, as well as issues which the panel will engage with, are anticipated and responses are worked out in advance. The effectiveness with which institutions do this may have the effect of concealing shortcomings. However, this is not always successful. Astute panels have been known to see beyond the window dressing through rigorous appraisal of evidence.

4.2.4 The External Quality Assurance Process

The overwhelming criticism of the SERTEC process revolved around the external quality assurance exercise and the visits of the panels to the institutions.

To begin with, it was strongly indicated that the absence of performance indicators or acceptable minimum standards, appropriate elaboration of these, and the vagueness surrounding them left them open to a wide range of interpretation. For instance, if it is not specified what "good staff/student" ratios or "adequate resources" for the library are, then the evaluation becomes highly subjective and generalised in nature, and ceases to be a useful feedback to the institution of the extent to which it is meeting minimum standards.

An aggravating factor is that it makes findings highly contestable, given the wide range of interpretations possible. Where institutions might be antagonistic to the quality assurance endeavour, it opens up a spectrum of possibilities for them to attack the EQA process on quite reasonable grounds, and thereby undermine the credibility of the exercise altogether.

It is also clear that there is a heavy reliance upon often repetitive production of vast amounts of information/data on which the evaluations are based. However, a strong indication has been that the information mobilised is frequently not appraised sufficiently or in sufficient depth. Some of the information mobilised is largely irrelevant to the audit exercise, or not used at all.

It was also suggested that the methodology needs to be holistic. It is claimed that programme reviews on their own are not enough. There is a need to look at the functioning of the entire institution, including its structures. These are part of the value chain in an institution which creates the quality outcome. A focus merely on programmes may detract from attending to serious problems, lapses, or inadequacies in other sectors that do not come under the critical gaze of the quality assurance exercise.

It was generally felt either that two days are too short for an adequate evaluation exercise, or that the two days are not used optimally. Teams on occasion come in cold with no pre-circulated documentation, and most team chairpersons begin to compile their reports by the end of the first day, because of the pressure to present them on the second day. Plainly, this detracts from the rigour of the process. It was a consistent criticism at all of the institutions visited. Members were skeptical regarding the outcome when their perception was that the evidence mobilised, which often lacked self-criticism, was not sufficiently appraised, or where there was not sufficient rigour in the approach of the panel.

Panels are often not aware of the complexity of their roles. Sometimes it was apparent that the chairpersons even did not clearly understand the validation role of the panels. Sufficient cognisance is not taken of the self-evaluation reports. Traces of bias and subjectivity emerge as a result. This is particularly bad where a panel or team sees its role as that of inspection and there is an orientation towards a "policing" role rather than a validation one.

There was general and widespread criticism of the lack of training of panels and their members, as well as a lack of sufficient orientation of the chairpersons. This, in the estimation of many, resulted in subjective standards, and undermined the entire quality assurance project because of different norms for different institutions.

It was also found that some panels are amenable to the influence of the strongest personality on the team. This again makes proper orientation and training of members essential.

Some institutions were of the view that there is an over-emphasis on the site visits themselves and that these lead to crude judgements. There is not a proper in-depth appraisal of the institution. Self-reflection is lost in the process and the quality of reports which are generated through the process are not sufficient to give the institution constructive feedback on where it might put its energies for further development.

It was also proposed that panels need to be far more representative. Members of HDIs in particular felt that members of panels from HAs often do not understand the context of HDIs and the legacy of apartheid. There is apparent insensitivity to the particular context of these institutions (HDIs). Therefore, the proposal was for more balanced representation in panels as well.

Some overzealous team leaders "tore apart portfolio documents". This characterises behaviour which is problematic and intimidating, although it is not very widespread. It is a further indication of the degree of inconsistency in the leadership of panels, as well as the composition of panels. The involvement of industry is seen as crucial, as is as that of students. However, the lack of orientation of employer representatives leads to dominance of the panels by technician personnel.

4.2.5 The Self-Evaluation Report

The generation of the self-evaluation report entails considerable effort on the part of the institution and, where this is done well, it entails the mobilisation of a vast number of people across the institution in order to produce a quality report. On the other hand, where merely a compliance approach is used, a small team or an individual, in some instances, is given the task of writing the self-evaluation report. The latter was found to be the more prevalent practice. This detracts from the opportunity for deep self-reflection and development that the process offers.

There is a pressure on the institutions to represent themselves in the best possible light. Therefore shortcomings are concealed and attempts are made to present documentation and craft the report in such a way as to influence the panel to reach the best possible conclusions. This is understandable in the light of the large stakes as far as accreditation or non-accreditation are concerned.

A panel which lacks rigour or individual members of panels who do not have the critical skills necessary may be misled and make invalid judgements at an institution. Highly honed skills of discernment are required to be able to look at self-evaluation reports and to determine whether these are "window dressing" or not, and not to make crude and empty judgements. It is also incumbent upon the panels to look at the evidence which has been mobilised, as well as to seek other evidence which is not presented, to make sure that the representations given in the self-evaluation report are upheld.

The process that most of the institutions have identified is the need for dedicated personnel who promote quality assurance as an ongoing effort and who help mobilise the process when an external audit is imminent. A criticism of the self-evaluation reports, from within SERTEC itself, as well as by members of the institutions, is that they often are woolly and lack critical and informative substance.

It was also found that the guidelines of SERTEC are either not studied or not followed. It was striking to the Task Team that at most of the institutions visited a tenuous knowledge of the SERTEC manual and the guidelines existed. This is even more significant given the fact that many of the people interviewed had already participated in panels and some on several occasions, yet were not able to speak convincingly about the methodology or the guidelines employed by SERTEC. This may point to a need for far greater conscientisation and training of the people who participate in these processes.

4.2.6 Audit Panel Reports

It is acknowledged at most institutions that the audit panel report is a good management tool in view of its identification of problems and problem areas at institutions. As such it provides an opportunity for management to focus their efforts as well as their resources to resolve these problems.

However, it did become plain that the quality of the audit report is heavily dependent upon the openness and degree of critical reflection of the report, as well as the self-evaluation exercise. Where distorted representations are given in the self-evaluation report or where a poor panel effort has resulted in a poor quality audit panel report, then the potential for incisive and constructive feedback to the institution is reduced.

A number of institutions complained that the audit panel reports lack depth and insight into academic issues. Some regarded the audit as limited in view of its focus on providing summative product information rather than qualitative process judgements. Plainly, this view is informed by a different vision of the quality assurance process which may not be consonant with the intentions of the external quality assurance.

It was acknowledged that a very valuable part of the audit panel reports was that they were presented in open sessions. Although painful, they had considerable value in that they provided an opportunity for members of an institution to hear their peers' views about their

programmes or about their institutions. This often had a powerful impact, and is a galvanising factor in getting institutions to respond holistically to problems which have been identified.

Where the audit panel report had been challenged or when its credibility had been undermined either because of a tenuous appraisal of evidence or because it consisted of vague statements or generalisations, its value was significantly diminished. Several institutions complained that the audit panel reports were generally narrow, noncommittal, and vague, and did not make clear and sound recommendations. Where these complaints materialised, a proposal was made for a meta-evaluation of the audit process at each institutional evaluation so that the process is constantly refined - i.e. to introduce quality assurance of the quality assurance process.

There was also a strongly expressed need for follow-up visits to institutions to test implementation of recommendations and to establish what implementation there had been - in order to render the process far more effective than it currently is.

Where an institution is far advanced in its quality assurance endeavour, the feeling existed that the efforts of the institution had matured beyond the level of self-evaluations, and beyond the SERTEC process and philosophy. Provision therefore had to be made in the quality assurance process for institutions which are less advanced and those which are more advanced. It was proposed that there should be different regimes of appraisal for institutions at different levels of development in quality assurance. The approach and methodology should therefore be flexible and adaptable.

4.2.7 The Impact of the Quality Assurance Process on Quality Improvement

It is patently clear that preparation for an evaluation creates an awareness in institutions of issues relating to quality assurance, as well as standards. This is a significant and positive spin-off from a quality assurance process.

There is a jealous defence of institutional autonomy. This was a point raised by almost all of the institutions which were visited. Where the quality assurance processes are evolving and working rigorously, they are having a positive impact upon institutions. At others, where there is less rigorous attention to quality issues, there is more of a culture of compliance: meeting minimum requirements, just in order to satisfy the SERTEC process. This suggests that there is not sufficient conviction on the part of the institution, or sufficient resources allocated at the institution to support the quality assurance enterprise. Special attempts will have to be made on how to eradicate the compliance culture. There is always a potential for any system, no matter how sophisticated, to breed merely a compliance response, when there is not adequate ownership on the part of institutions, or where processes have become discredited.

There is clear evidence that the quality assurance processes of SERTEC have helped foster critical self-reflection among technikons. Many have revised their quality assurance documentation and processes to align them with SERTEC requirements. The mobilisation of evidence forces an institution to give critical attention to the kinds of records that it keeps, as well as to satisfy itself that adequate justification exists for its claims and its self perceptions regarding its quality assurance processes.

The use of peer group evaluation contributes towards inter-institutional communication and exchange of ideas. Visiting other institutions has helped members of panels appropriate best practices from other technikons, as well as to refract their own practices through those of other technikons. The process has also highlighted a host of deficiencies and shortcomings at the institutions visited. There is evidence, albeit uneven, of an impact on the institutions in terms of corrective action taken.

SERTEC has also been found to have been genuine and responsive in terms of the criticisms which have been raised by institutions. They concede that SERTEC has matured and evolved

over the years to a significantly more sophisticated organisation in terms of its approaches and philosophy.

However, from SERTEC's own observations, it is clear that a number of technikons do not have internal quality assurance mechanisms in place, nor do they have plans or strategies in order to develop the necessary quality assurance culture and practice. Often the committees have been found to have been set up at random and on an ad hoc basis prior to visits. This means that the approach at several institutions is erratic and not conducive to a culture of quality, nor does it provide for adequate depth and critical reflection on quality issues.

The culture of internal self-evaluation is still new and it will take some time to permeate institutions. However, it is plain that several institutions are giving serious and dedicated attention to developing policies and procedures and putting in place regimes of internal quality assurance. Many are buttressing this with setting up dedicated quality improvement and promotion units. Those which are well advanced along this road are able to develop and refine their self-evaluation processes to the extent that it has a very positive impact on the outcomes. Some of the impetus of this can be attributed to the new policy environment and, in particular, the statutory powers of the CHE and HEQC for quality assurance.

The implementation of changes recommended by SERTEC are limited in some instances by resource constraints. Many departments which have been evaluated are able to use the SERTEC evaluation as a leverage to garner better and more resources for themselves.

4.2.8 The SERTEC Methodology

The absence of national standards for comparison raises questions at many institutions about whether the process is consistent and defensible. This is exacerbated by the fact that the actual evaluation lasts one and a half days, and the feeling is that justice cannot be done in this process, therefore rendering it an exercise somewhat lacking in depth.

There were quite consistent complaints about duplication in the questionnaires, which guide the self-evaluation process and which are part of the SERTEC manual, although this has been offset by an acknowledgment of most recent developments and responsiveness by SERTEC to criticisms and the refinement of the questionnaires. All questionnaires have been developed in close co-operation with the CTP.

It has been the experience at several institutions that panels were not well prepared. Several members do not read the manual or the portfolio reports, nor give adequate attention to the evidence which is mobilised by the institutions. On the other hand, the evidence provided by the institutions is taken at its face value and sufficient validation and triangulation are not always done in order to ameliorate the effects of "window dressing".

There is general acknowledgement of the transparency and the change of the methodology, as well as a solid involvement of the CTM in the change, and in SERTEC's response to its recommendations.

5. The Quality Promotion Unit

5.1 History, Context and Operation

In the last two decades, higher education institutions and agencies in a number of both developed and developing countries have established quality assurance systems, chiefly in response to growing demands for the demonstration of accountability. Similarly, in the early 1990s, discussions began in the Committee of University Principals (CUP) on establishing a quality assurance system for South African universities.

While the main rationale for introducing a quality assurance system for universities in South Africa undoubtedly was for institutions to demonstrate their accountability (Green Paper on Higher Education 1996: 32), the purpose of such a system was also to bring about improvement in the sector as a whole (White Paper on Higher Education 1997: 21). This is evident from the decision, resulting from the CUP discussions, to lay the foundation for a "future well-balanced quality assurance system for higher education which can only be achieved working from the start with the principles of improvement and accountability in mind" (QPU Audit Manual, 1997: 1).

At a seminar organised by the Education Committee of the CUP in April 1993, the general requirements for a quality assurance system for South African universities were agreed upon. It was proposed that a Quality Promotion Unit (QPU) be set up, and that it operate under the guidance of a properly constituted Management Board. The QPU was established at the January 1995 meeting of the CUP.

In terms of the proposed QPU methodology, the appropriateness and effectiveness of institutions' systems and procedures for assuring quality were to be externally audited by a panel of peers. The emphasis was to be on quality systems rather than quality per se, with the starting point of audit being the institutions' own mission statements and sets of goals and objectives.

Given the considerable differences between institutions, and their varying levels of past resourcing, no attempts were to be made to rank them according to a set of generic criteria. The external peer audit process was to follow a comprehensive institutional self-evaluation. The decision to concentrate on institutional audit in the first round, rather than on programme assessment, was taken largely on resource grounds: the costs of covering hundreds of diverse programmes in the initial years of the QPU were considered prohibitive (Brink, 1996: 57). The assessment of the quality of educational programmes was to be a later development for the QPU.

Initially the policy of the QPU was to keep final audit reports confidential, as this was important in ensuring university participation in a voluntary system. In practice, however, the policy shifted towards reports becoming public documents, with the QPU Board reserving the right to report separately to the institution's vice-chancellor on issues of particular sensitivity.

Much of what was proposed is in accordance with international trends. As in most quality assurance systems, there was to be no direct link to funding. The CUP, and later its successor, the South African Vice-Chancellors Association (SAUVCA), was of the view that ownership of the quality assurance system should rest with the universities rather than with the government or an independent body in order to gain acceptance by the universities and credibility with the stakeholders.

5.2 The Quality Promotion Unit: 1995-1999

The following Terms of Reference were worked out for the QPU:

- It would consider and review mechanisms and procedures used in individual institutions for monitoring and improving the quality of education offered.

- The reviews would focus on the appropriateness of quality improving mechanisms and procedures, as well as on their effectiveness as applied in practice.
- The QPU would work towards the diffusion of good practice in quality improvement throughout the university system.

These terms of reference were carried out by audit teams comprising university peers and relevant experts external to the university sector. The composition of panels was intended to reflect a wide range of experience, insights and skills. Institutions prepared a self-evaluation portfolio for the scrutiny of the panel.

Thereafter, the panels undertook three-day site visits in order to verify any claims made, and to follow up on any issues of concern. Provision was made for the incorporation of institutional comments and explanations arising from the panels' interim reports. The reports were to emphasise quality improvement, and identify and disseminate good practice.

5.3 The Organisational Structure of the QPU

The QPU consisted of the following units:

- A directorate of permanent staff responsible for the day-to-day management and operation of the Unit. While the staffing was intended to comprise a director, an administrative officer and a secretary, in practice only a director and a half-day secretary were employed.
- A Management Board of no fewer than nine members, reporting to the CUP. Not all were to be from the higher education sector (see below).
- A pool of 30 to 40 experts, nominated by institutions and drawn from university staff and from other relevant stakeholders, to serve on the various audit panels.
- A Quality Promotion Group (QPG) made up of at least one representative per university. This was a discussion forum to share emerging experience and to participate in policy-making at the level of contributing to discussions on aspects of the evolving process.

The Management Board of the QPU included a vice-chancellor nominated by the CUP as chairperson and five other members from the universities elected by the vice-chancellors; a second group of three persons, not from the universities but knowledgeable and experienced in the area of quality assurance; and a member nominated by the South African Qualifications Authority (SAQA).

The Management Board met four times a year. Its functions were to direct the work of the QPU, appoint the Chairs and other members of the audit panels, set up guidelines for the work of the latter, and generally see to the effective alignment of the QPU with the National Qualifications Framework (NQF). A further function of the Management Board was to appoint the staff of the QPU Directorate in consultation with the CUP. The Director of the QPU reported to the QPU Board in line terms, but to the Chief Executive Officer of the CUP on daily matters.

5.4 The QPU's Definitions of Quality

Given the complexity of the notion of quality, the QPU's approach was shaped by the following considerations:

- The need to take cognisance of the local and national context in which an institution functions.
- The voluntarism of the process which necessitated a broad and flexible approach to suit the particular circumstances of each institution.
- An acknowledgement of the existence of different interpretations of the concept of quality.

- A desire to achieve openness and flexibility while retaining clarity.

Each institution was able to decide which approach to quality it adopted in its self-evaluation processes, but the concepts "fitness for purpose" and "fitness of purpose" were considered to be the core of any institution's notion of its own quality. In addition, the concept of quality as transformation was advocated as an important aspect of an understanding of quality in the South African context.

5.5 Self-Evaluation

The QPU subscribed to a fairly conventional process involved in institutional audit which comprises five sequential steps:

- A process of self-evaluation undertaken by the institution.
- A self-evaluation portfolio prepared by the institution, based on guidelines in the QPU audit manual.
- A site visit by a panel of external auditors conducting an audit based on the self-evaluation portfolio.
- An audit report written by the external audit panel containing comments on the ways in which the institution assures its educational quality, as well as recommendations for improvement.
- A final report, which once approved by the Management Board, becomes a public document.

Institutions were advised to undertake self-evaluation on a regular basis, while external audits were planned on a three-year cycle. The institutions were advised to have a clear location of responsibility for carrying out quality improvement on a continuous basis. In this exercise, the university's mission statement, strengths and weaknesses, opportunities and threats, teaching and learning environment, research and service activities, and related issues would be subject to critical self-analysis. Effective leadership, commitment and involvement of the management at all levels and involvement of all staff were considered to be critical to the preparation of an adequate self-evaluation report.

In their self-evaluation, institutions were advised to concentrate on answering the fundamental question of how they assured themselves of the quality of their education, and how such systems could be improved, and to avoid largely descriptive and voluminous reports without self-reflection and analysis.

In addition to information assembled from within the institution, that obtained from students, graduates, employers, external examiners, and professional bodies were seen as valuable sources of supplementary information for the self-evaluation portfolio.

5.6 Audit Panel and Audit Report

The Audit Panel comprised academics and high-level administrators drawn from universities, and relevant experts from outside the university system. In most cases, the audit panel consisted of five members, of whom one was the chair; three were members with university experience, one from outside the university system and one from a foreign country. It was intended that the panel chair should have a complete grasp of quality assurance issues and should lead the panel at the audit visit. The institution had the right to object with valid reasons - such as likely prejudice - against the inclusion of specific panel members.

Panel members participated in an induction workshop where they underwent training in the auditing process, using the audit portfolio of the institution that they were to visit. The duration of the audit visit was two to three days. The audit visit comprised an examination of the institution's documentation, a discussion with officials responsible for the self-evaluation portfolio, interviews with a wide range of university officials, academics, and students, and site visits to facilities.

The original intention was that the audit reports would be drafted at the final meeting of the panels, and that the writing of the reports would be their responsibility. The Manual of the QPU is somewhat ambiguous as to who should write the final reports, but it appears that one or more persons could assist the Director of the QPU in writing the reports.

In the event, the final report writing was undertaken by the Director alone. On completion, the reports were sent to each panel member for comments, observations and corrections, and then to the institution concerned for the correction of any factual errors and for the inclusion of its own comments.

5.7 The Quality Promotion Unit: Critical Perspectives

5.7.1 Definitions of Quality

The QPU Audit Manual states that: "A notion of quality rather than a definition of quality should be used" (1997:5). It then succinctly describes seven concepts of quality: ISO 9000, value for money, quest for zero defect, exceptionally high standards, fitness for purpose, fitness of purpose, and the concept of quality as transformation. It proceeds to advise that while using an open, flexible approach with clarity, the notion of quality should be built from these various concepts, emphasising the importance of the transformative notion in the South African context. In the final analysis, "each institution will have to decide which approach to the concept of 'quality' it adopts in its self-evaluation processes. The concepts 'fitness for purpose' and 'fitness of purpose' should moreover form the core of any institution's notion of its own quality" (1997:8).

An important omission in the above discussion in the QPU Manual is a clear distinction made between quality and standards. Standards can be described as a statement in general or specific terms of the knowledge, understanding, skills and attitudes to be demonstrated by successful graduates. Standards are the development of a domain of expertise; for example, in medical training it is assessed in terms of minimum requirements set by the Health Professions Council.

Quality, on the other hand, is a much broader concept, and includes standards as well as the processes of teaching and learning, the activities of departments and institutions, and congruence between the goals of the programmes and the competence of the graduates. It should assess, among other things, quality of analytical and critical skills, lateral thinking, innovation and communication. In addition, employers have a special set of requirements for graduates: cutting-edge methodology, knowledge, willingness to learn and adapt, intellectual ability, ability to work in teams in a modern organisation, and interpersonal skills, among others.

The intention to leave the notion of quality flexible was apparently motivated by a laudable desire not to be unfair or punitive to institutions that perceived themselves to be at a disadvantage. However, the QPU perhaps did not provide sufficient guidance on what definition of quality would be used in the audits, leaving the notion of quality so completely open to interpretation that it tended to become somewhat vacuous.

Both the site visits and the audits have revealed that many of the institutions that have been audited have either no knowledge of, or only a cursory understanding of, the broader notion of quality as opposed to a common-sense understanding of standards. Nor have they coherently formulated a definition or a notion of quality acceptable to the institution. In the absence of such an understanding, it is difficult to assess an institution's activities or, for that matter, the institution's ability to produce a reflective and critical self-evaluation portfolio document. Clearly, institutions as a whole desperately need education and understanding of these aspects that are crucial for an acceptable quality assurance exercise.

5.7.2 Choice of Panel, their Training and Preparation

The emergence of quality assurance mechanisms and processes is relatively new in South Africa. Although the discourse on these fundamental aspects has been in vogue for at least a decade, the QPU exercise was the first practical experience for the members of audit panels in the university sector.

The QPU office compiled a list of potential auditors from nominations by QPU Board members, QPG members and vice-chancellors.

The composition of the panels was as described in the section above. A further factor that needed to be taken into account in convening the panels was the need to reflect the demography of South Africa.

Chairpersons of the Audit Panel had either to be QPU Board Members or a member of the Executive of a university. This requirement did not always make it easy to obtain panel chairs, in spite of the fact that only a small number of audits were in fact undertaken. Our findings suggest that there were a number of concerns at institutional level about the audit panels of the QPU. Among the criticisms were that the composition of panels was not always balanced in terms either of gender or of members who had a sufficient understanding of the context of historically disadvantaged institutions. In some instances, panel members were considered to lack expertise and to display insensitivity in their dealings with the institution. Some panels were argued to be poorly chaired and to lack direction and focus. Not all panels were open to all of these criticisms.

Given the criticisms above, it appears that insufficient scrutiny was exercised in determining the competence or otherwise of the panel members and in selecting balanced panels. While this is not easy to achieve in a situation in which there is little available experience of quality auditing, the fragmented nature of the current higher education system makes it mandatory that great sensitivity be exercised in the choice of panel members and particularly the chair of the panel.

Clearly, a careful choice has to be made of audit panel members in terms of academic and administrative expertise, lay public representation, foreign representation, gender, and balancing advantaged and disadvantaged institutions. The relatively small academic community puts the country at a disadvantage. Moreover, despite considerable discussion and enthusiasm within SAUVCA, the response from the universities was apparently disappointing when nominations for the panel of 30 auditors were called for - despite two requests to the vice-chancellors and the Quality Promotion Group. At least eight institutions, including some of the larger advantaged, well-endowed institutions, failed to submit any names (QPU Board minutes, 2 February, 1997). Such lack of co-operation and dissonance between promise and practice does not augur well for a future quality assurance system. Such a system would also need to devise well-considered strategies when recruiting auditors from the public sector. Equally, however, those who had been nominated and trained could well have been invited to participate more often.

The Quality Audit Manual states that "Panel members must all participate in an induction workshop where they undergo training in the auditing process using the auditing portfolio of the institution" (1997: 20). Despite the training programme starting off well with an intensive two-day workshop facilitated by an international expert, the training of audit panelists appeared to diminish in both length (usually lasting for the better part of half a day) and quality. The training workshops were designed to build the panels into coherent teams and to familiarise them with (a) the principles of quality assurance, (b) the particular principles of the QPU's institutional audits, and (c) the contents of the university's audit portfolio document. Further, they were to prepare the audit strategy.

However well intentioned the training was, interviews with audit panel members indicated that the practical training provided was less than adequate. The Task Team would argue that the

failure to place sufficient emphasis on the importance of training of the panel members prior to the audit might be regarded as a significant shortcoming in the QPU's operations. The importance of good training assumes greater significance when account is taken of the complexities of our higher education system and our lack of prior expertise. The credibility of panels is fundamental to the success of such a quality assurance process.

5.7.3 The Process of Self-Evaluation

The Quality Audit Manual of the QPU describes self-evaluation as the "cornerstone" of Quality Assurance in Higher Education. It outlines some of the features of the process, such as its cyclical nature, the importance of vision and mission statements, SWOT analysis, performance indicators, and so forth. It then provides useful guidelines for self-evaluation. They are, however, dispersed in a number of sections. This results in some repetition, a lack of coherence, and the potential for confusion. On page 30, section 1.4, the Manual states that "It is not a prerequisite for the first cycle of audits that an institution must develop a self-evaluation system and write a self-evaluation report before undergoing a Quality Promotion Unit Audit". This is perhaps difficult to reconcile with a methodology that relies for its criteria and understanding of quality on institutions' own portfolios and articulations of mission and goals, and their systems for assuring that they are achieved.

Moreover, the guidelines fail to mention or place sufficient emphasis on some of the other central features of an acceptable self-evaluation report. These include the avoidance of voluminous descriptive reports, the importance of being reflective, analytical and critical in order to detect weaknesses, the specification of remedial steps required to overcome such weaknesses, and the centrality of a focus on teaching and learning in any self-evaluation exercise.

The principal deficiency in most of the self-evaluation portfolios produced by universities was the lack of a clear understanding of the notion of quality, the tendency to be descriptive rather than reflective and analytical, and the lack of identification of appropriate remedial steps to overcome deficiencies. A further feature in some cases was the attempt to carry out a public marketing exercise of the institution's achievements, rather than focusing on the problems faced by the institutions in achieving quality across a number of areas, whether these arise from human or material resource constraints. Given that institutions lacked experience in preparing portfolios, they would have done well to receive further training in audit preparation, and to receive clearer, more concise guidelines about the process.

5.7.4 Observations on Institutional Responses

Although the audit panels encountered a general awareness of and commitment to quality assurance processes at most institutions, there was often no clear definition or grasp of the notion of quality demonstrated. Mission statements were generally well articulated, but there was a lack of corresponding goals and objectives with strategies to achieve them. In most instances this indicated a lack of staff and resources dedicated to the process, and insufficient assumption of responsibility for quality issues throughout the institution. This deficiency becomes understandable in the general climate of instability which most institutions are experiencing - the necessity of coping with the many transformation changes in the White Paper and the Higher Education Act, the resource constraints, falling enrolments, mismanagement in some cases, and restructuring demands. Yet the development of quality assurance processes has been discussed in the CUP (and latterly in SAUVCA) since the early 1990s. The question arises as to why vice-chancellors who were at the vanguard of these discussions did not take adequate measures to develop quality assurance processes within their institutions.

Audit panels generally reported that student development, staff development, staff appraisal, and performance indicators were poorly developed at institutions. As these processes lie at the heart of the learning and teaching enterprise, their importance to the institution and for the audit panel's report becomes obvious. This again raises the importance of creating strategies to deal with improving general awareness about quality assurance among all the sectors of

the institution. Investing in quality assurance could create opportunities and strategies for institutions to identify problem areas and find ways to address them.

5.7.5 Observations and Comments on the Audit Reports

As noted above, the QPU audit manual is somewhat unclear as to who should finally write the report. On the one hand, it states that it was the responsibility of the audit panel; on the other hand, it may assign from its ranks one or more persons to assist with the drafting of the report in collaboration with the Director of the QPU. Yet the Director of the QPU in his Report of the QPU for 1998 states: "It is not required of Audit Panel members to assist with the writing of the reports as such; the responsibilities end with providing the necessary inputs in terms of observations and recommendations".

In practice, it was the Director of the QPU who wrote the reports from the records he kept of what transpired in the various interviews. The draft reports were then sent to the members of the Panel for comment, following which the draft report was finalised. The university in question had an opportunity to comment on the draft report before it was submitted to the QPU Board for approval. The comments of the university were included as an appendix to the final audit report.

Our Task Team encountered much criticism of the administration, style, accuracy, and content of the audit reports. Among the criticisms were that the audit reports were too brief and superficial and did not do justice to the extensive preparation of the self-evaluation portfolio; often no more than a paragraph of comment was devoted to extensive sections of the portfolio document. Some interviewees considered that the findings of the panels were not always accurately reflected in the reports, and that in some instances judgements were made on the basis of anecdotal evidence alone. The reports were criticised for not noting sufficiently the strengths of the institution's quality assurance procedures, and for commenting beyond their terms of reference on quality per se, as opposed to quality assurance systems.

A further critique was that the language and style in which the reports were written appeared to be somewhat problematic. The manual states that in the reports, "the salient findings, observations and related comments of the Audit Panel are marked in bold text; the suggestions and recommendations made by the Panel are italicised and elements of good practice identified by the Panel are in small capitals". This style of recording the observations and interweaving them with suggestions, recommendations and good practice made it very difficult to follow each of these three important sets of observations.

Finally, a concern about the written reports was the lack of coherence between the observations of the panel which were recorded in the body of the report and the conclusions as they related to strengths, weaknesses, and good practice. As an example, in one instance where in the body of the report it was noted that there was no peer review of teaching in the institution concerned, that teaching capability was not used as a criterion for promotion, that there was little evidence of academic support for disadvantaged students, that there were doubts about the functioning of the external examiner system, and that a claim was made that 15-year-old teaching materials were still in use in the university, the conclusion was nonetheless reached that "on the whole teaching and learning appeared to be improving" in the institution.

Further, in this instance the panel observed more than twenty areas of shortcomings, in some instances of a serious nature, in this institution. Yet the final conclusion, in the written report, is that the university gives "the strong impression of an institution on the move. It strives commendably to be a quality institution". It also appeared that not all of the important qualifications submitted by panel members to the first draft report were attended to in the final draft for the QPU Board approval.

Particularly damaging for the QPU was the fact that extracts from this particular report appeared in the press in various contexts, and were quoted by senior officials of the institution

when the report had not been approved by the Board. This was one of five reports not approved by the QPU Board or by SAUVCA at the time of closure of the QPU.

In most cases, there was a considerable delay in the production and therefore approval of reports - up to six months in some cases. The Director of the QPU explained in his 1998 report that the minimum time required for him to complete the report was three weeks; obtaining feedback from the panel members occupied an additional four weeks; this was followed by a period of time required by institutions to add comments to the report; then followed approval by the QPU Board and, finally, printing and dissemination. Even if these time periods were accurate, it still did not explain the six-month delay in some cases. The delays had a considerable impact on the seriousness with which the process was taken in the universities - some argued that the momentum for the development of internal quality assurance systems within their institutions was severely hampered by this.

Another important problem was brought to the attention of the Task Team. In at least two instances, when vice-chancellors noted unfavourable reports or sections of reports, they insisted on changes so that the institutions were shown in a more favourable light. Evidence indicated that this was complied with, despite there being space in the report for the comments of the vice-chancellor. As explanation, the Director of the QPU stated in his 1998 report that "since the QPU audit system had been set up voluntarily by the universities... it could be expected that universities might not always accept severe criticism lightly".

In summary, audit reports had the following deficiencies:

- Inaccuracy - There often was a lack of correlation between observations of the panel and the conclusions.
- Poor style - There was a failure to disaggregate different parts of the report in order to make for clarity and coherence.
- Delay in approval of the reports and making them available to the institutions in good time.
- Changes to the reports at the insistence of some vice-chancellors.

5.7.6 Institutions in Crisis or Undergoing Fundamental Transformation

Institutions are attempting to implement widespread transformative changes arising from the recent White Paper and the Higher Education Act, and also to comply with SAQA requirements. Among these changes are integration within a single co-ordinated system, a programme-based approach in academic planning, and formulating three-year rolling plans and quality assurance mechanisms. Concurrently, some or most of the institutions have had to deal with a host of other problems - unpaid fees and rising financial debt, falling enrolments, lack of leadership, and mismanagement.

During the site visit to one of the institutions, allegations were made that the audit panel had become embroiled in the tensions and conflicts arising from the deep restructuring process that was under way, instead of focusing on auditing quality assurance procedures. It was charged that the panel failed to understand the context sufficiently to take into account the environment at the institution, which was fluid and explosive at the time.

In such circumstances, even if the panels were scrupulously fair in their findings and recommendations, it would be difficult for them to escape allegations of bias from one constituency or another. The important lesson from these experiences is that despite the cyclical nature of audit panel visits, the timing of such visits has to be carefully assessed. The external quality assurance agency should make absolutely sure that the institution is in a reasonably stable and functioning mode, that the self-evaluation and other documents are available, that the institution as a whole has been involved in the preparatory exercise, and that it is well prepared to receive the audit panel. Persistence in visiting institutions in times of

crisis, turmoil or any unsettling episode would result in an unacceptable and incomplete audit of dubious quality. The resources expended on such an exercise would be unwarranted. On the other hand, where institutions in crisis ask for assistance in developing their quality assurance procedures, this should be complied with.

5.7.7 Events Leading to the Closure of the QPU

By the end of 1998 - some 18 months after the start of the QPU auditing process and the conclusion of eight institutional audits - concerns were being expressed about the efficacy and future of the QPU. This was in part triggered by the responses to two particular audits. In one case, the vice-chancellor quoted selectively from the audit in order to portray the institution in a favourable light. The QPU Board did not raise any objection to this use of the audit despite the fact that it was still in draft format. In a more controversial set of circumstances, another institution came under attack in the press and in a certain journal article for its alleged mismanagement, corruption and nepotism. The Council of the university responded in the press to these allegations and, in defence of the university, quoted from the audit report which had also not been officially approved by the QPU Board. The apparent mismatch between the press allegations and the (selectively quoted) findings of the QPU audit raised serious concerns for the credibility of the QPU process.

The concerns arising from the situation above, and about aspects of the implementation of the QPU audit process, as well as the imminent establishment of a new statutory body, the HEQC, with responsibility for quality assurance in higher education, were all factors contributing to the closure of the QPU.

The interim HEQC, which was established in the latter part of 1998, began a process of assessing the QPU and SERTEC (which has statutory responsibilities for quality assurance in the technikon sector) in order to ascertain how best to deal with these bodies. The initial meetings between QPU and SERTEC representatives and the interim HEQC did not enhance the reputation of the QPU auditing process. It was resolved that there should be an external evaluation of both the QPU and SERTEC.

In these circumstances, the QPU Board held a workshop on 22 January 1999 at which, in addition to members of the Board, an external consultant and a representative from the interim HEQC were present. The external consultant pointed out a number of instances in which views expressed in reports were not consistent with the panels' observations, leading to unwarranted conclusions. He further pointed out the lack of preparedness and understanding of quality assurance at the institutional level as well as the need for training for members of the audit panel. The recommendation was to temporarily suspend the audits, to review the existing situation, and to take the necessary remedial measures before proceeding with further audits.

At the conclusion of this workshop, the QPU Board made the following recommendations and observations to SAUVCA:

- The QPU undergo a thorough self-evaluation process as soon as possible.
- The evaluation feed into the independent evaluation proposed by the CHE.
- A workshop involving the QPU, SERTEC and the CHE be convened.
- The external evaluation of the QPU as proposed by the CHE be carried out as part of this process.

The Board also found that the QPU auditing process had proved beneficial to the strategic management of quality in the institutions which had been audited and should be continued in 1999, contingent on the outcome of the evaluation process.

At a SAUVCA meeting held on 29 January 1999, the Chair, the vice-chancellors and the QPU Board met in camera. It was decided that SAUVCA should initiate the process of discussing the future of the QPU with the staff concerned. Although there was no explicit statement on

the closure of the QPU, the implication was clear. There is no record of this in camera debate which outlines the reasons for the closure of the QPU. The only reason given is that there should be no duplication of structures, given the statutory responsibility of the HEQC of the CHE for quality assurance. It is a matter of concern that the meeting was held in camera, thus excluding many of the senior executives who from their experience could have made a useful contribution to the discussion of the future of the QPU.

At the SAUVCA Exco Meeting of 2 February 1999, SAUVCA noted with concern the unfinished business of the QPU, particularly the consideration of the five reports not yet adopted. It further agreed that all activities of the QPU should be wound up, and noted that discussions with staff affected by the changes would commence as soon as possible.

At a meeting held on 13 February 1999, the QPU Board expressed regret at the probable demise of the QPU. It was noted that SAUVCA had neither expressed an opinion on the value (or otherwise) of the work of the QPU over the previous three years, nor adequately taken account the favourable views of the majority of institutions which had been audited. It considered the QPU to have been successful in promoting a culture and practice of quality assurance in universities. The concern was expressed that there was no guarantee that the HEQC would be able to deal with formative quality assurance at all, given extensive proof from comparative literature that externally driven quality assurance systems like the proposed HEQC tend to focus more on accountability, and not on improvement.

The Board then raised a series of questions for SAUVCA to consider. They centred on its future role in the development of the quality assurance process and on the fate of the expertise and experience that resulted from the QPU exercise. To the best of our knowledge, SAUVCA has not formally responded to these issues.

5.7.8 Reasons for the Closure of the QPU

In the section on critical perspectives, the Task Team concentrated largely on perceived shortcomings in the implementation of the QPU methodology. However, an opinion expressed by almost all relevant interviewees (bar one university group) was that it was regrettable that the QPU had been closed, as the momentum towards the development of internal self-evaluation systems had been checked. Furthermore, many felt that the present vacuum in the area of quality assurance for universities was detrimental to institutional development in that it was allowing the space for a variety of bodies to claim some authority in the area. Indeed, an opinion expressed by an international expert in the field was that with the closure of the QPU, an opportunity for universities to develop and control their own quality assurance system in the sector had been lost. The concern was that the pendulum would now swing away from internal self-regulation to external accountability.

The reasons for the closure of the QPU are crucial to an understanding of what should be avoided by the HEQC in the future. The reasons are complex and varied; indeed, the closure of the QPU could be described as over-determined - having many contributing factors, with no obvious determining one. Nevertheless, it has become clear in our discussions that a variety of factors can be discerned.

In the first instance, there was little widespread clarity on the purpose and functions of the QPU. One respondent referred to some of the events leading to the closure of the QPU as "an accident of history", with the largely positive report on the quality procedures of a university appearing at the same time as a newspaper article which severely criticised that same institution. Behind the concern expressed in a number of quarters about the discrepancies between the report and the article at the time lay many misunderstandings of the purpose of the QPU, and public (and institutional) expectations of its process. While the QPU expressly set out to assess quality procedures only, there was a clear expectation among the public, and many institutional leaders (including that of the institution concerned) that a report from the QPU signified a judgement on the institution's quality *per se*.

Secondly, among the concerns was a view that quality was ill-defined and too relative (some of the interviewees external to the institutions thought that defined standards were needed; others that more sanctions were necessary), and that the whole approach was too developmental and lacking in firm judgement. It was believed by certain strategically placed role-players that a more summative approach was needed, and that this was more likely to be forthcoming from the new HEQC. On the other hand, most universities expressed satisfaction with the overall formative approach of the QPU.

Thirdly, our findings above suggest that there was criticism from many quarters relating to both capacity and competence in the QPU, insufficient training of audit panels, and inadequacy in the writing of audit reports, which all led to a lack of credibility on the part of the QPU.

Fourthly, an opinion that was expressed by almost all interviewees was that one of the main reasons for the ultimate failure of the QPU to carry out its work satisfactorily was a lack of resources. Indeed, one of the reasons for the closure of the QPU appears to have been that the universities, through SAUVCA, voted not to apportion more funds to the QPU towards the end of its existence. This is linked to a credibility issue, and was also probably a question of timing; yet it is also evident that the QPU, from the beginning, was seriously under-funded.

Fifthly, the QPU operated in a context of widespread system transformation. The CUP itself underwent transformation to SAUVCA and a change of leadership; the establishment of the HEQC was imminent, and an integrated higher education system was envisaged in which the role of sectoral bodies would be questioned. Having no statutory authority, the QPU was vulnerable in such a context.

6. Findings and Recommendations

6.1 Strengths and Weaknesses of SERTEC and QPU

6.1.1 Introduction

In this section, we summarise the main strengths and weaknesses of SERTEC and QPU. We do so under three broad headings: conceptual issues - issues concerning overall strategies and methods of the two bodies; operational issues - how strategies were implemented and methods applied in practice; and outcomes issues - what appear to have been the main outcomes of the work of the two bodies, both for the higher education community and the wider society. In considering their strengths and weaknesses, we recognise and would wish to emphasise the very different histories and contexts of the work of SERTEC and QPU.

The important achievements of SERTEC have already been noted in earlier sections of this report, as have the useful contributions of the QPU during its short life. In considering their respective strengths and weaknesses together in a single section, there is a sense in which we do neither body justice by taking insufficient account of the very different problems which they faced. It is important, however, to bring the two sets of experiences together in order that the lessons learned from them can contribute to the establishment of a successful unified system of quality assurance over the next few years. However, because the differences between them are so large, we commence this section with a short reminder of the separate histories of the two organisations.

SERTEC was established as a statutory body in 1986, initially as a certification council. It issued certificates to candidates from technikons on the basis of compliance with norms and standards prescribed by the Council. However, in 1993 an amendment to the SERTEC statutes turned it into an accreditation body for programmes offered by technikons and agricultural colleges. SERTEC set norms and standards for examinations, established regulations for such matters as laboratories, examinations, staff qualifications, experiential training, programme evaluation, and credit transfer. SERTEC conducted accreditations of programmes utilising a two-stage method of self-evaluation and external peer review. The latter placed considerable emphasis upon contributions from industry and the professions. In 1996, further changes were made, with more importance being given to institutional self-evaluation and the promotion of a conception of quality as "fitness for purpose". The hallmarks of the SERTEC approach were certification, accreditation of programmes, minimum standards, accountability, and stakeholder involvement. SERTEC has existed for over twelve years.

The QPU was set up in 1996 by the then Committee of University Principals. It was a body owned by the universities who had established it in response to a mixture of local pressures and international trends. It engaged in a process of institutional audits which emphasised the formative and developmental aspects of quality assurance. Its focus was on quality management systems rather than quality per se, and it saw quality in relation to the objectives of the institutions and their own definitions of quality. Like SERTEC, it employed a two-stage process of self-evaluation and external peer review; but unlike SERTEC, its focus was firmly at the institutional rather than the programme level. The QPU existed for fewer than four years.

6.1.2 Conceptual Issues

Without necessarily seeing a conflict between the concepts of accountability and improvement, it seems undeniable to us that SERTEC placed most of its emphasis upon accountability while the QPU emphasised improvement.

SERTEC had statutory responsibilities which it appears to have discharged well. In so doing, it enhanced the status of the technikons, increased their autonomy, enabled them to award degrees, and provided greater opportunity for student mobility between individual technikons.

SERTEC has been successful in gaining legitimacy and ownership for its work within the technikon sector. The principle of programme accreditation has been accepted within the sector and found to be valuable. With an independent Council and with regulations and procedures which provided transparency and a strong professional/employer input, SERTEC ensured accountability for the quality and standards of work in the technikons.

The QPU evolved through a consultative process which helped it to achieve acceptance and ownership by the universities. Its constitutional position and its adopted methodology - informed by contemporary international experiences and with a coherent theoretical underpinning - were not seen to be in conflict with principles of university autonomy. Its broad and flexible approach, its emphasis upon quality improvement and upon universities' own responsibilities and mechanisms for achieving quality won it general support across the university sector. Indeed, among the institutions which were to the fore in seeking audit by the QPU were several universities perceived at the time to be "weak". Their willingness to undergo external scrutiny in circumstances of some difficulty is a tribute to the confidence and trust which the QPU established with the university sector within a short time. With limited human and financial resources, the focus on improvement and on institutional quality management systems was understandable and sensible.

The methods adopted by SERTEC, while possibly appropriate to the needs and circumstances of the technikons at the time, appear to us to have been overly mechanistic and unlikely to encourage the development of strong and confident institutional quality management systems.

The SERTEC notion of self-evaluation was in fact a descriptive concept involving the collection of vast amounts of information. Little or no critical evaluation was required from the institutions nor provided by them. This was, however, required in the self-evaluation reports from 1999. The somewhat cumbersome SERTEC manual encouraged this mechanistic approach to quality issues. By focusing at programme level, the SERTEC approach did not encourage a holistic institutional conception of quality improvement. Improvements to the quality of education there undoubtedly were, but these were more in the nature of spin-offs from the accreditation process rather than its principal intention. When institution-wide evaluation procedures were introduced in 1991, their selective focus - while undoubtedly of potential value in its own right - did not fit a wider notion of comprehensive institutional audit. As a result of these characteristics of the SERTEC system, the primary response from the institutions seems to have been one of compliance. This is not intended to imply that the SERTEC processes lacked value or effectiveness. But they represented an approach to quality which ultimately saw it as being achieved by the enforcement of externally set rules and regulations.

The approach taken by the QPU which focused on quality management systems rather than quality as such, while perhaps understandable in view of university sensitivities about their own autonomy and responsibilities, seems to have been a source of misunderstanding and confusion for many involved in the process. This feature, combined with the absence of any scrutiny at programme level, was also a source of criticism from those - inside and outside higher education - who were looking for a quality system which would achieve greater penetration of institutions, focus directly on core processes of teaching and learning and the achievements of students, and provide summative judgements of what it found in these areas. In practice, and perhaps inevitably, the focus on quality management was not always maintained, and matters of quality per se were sometimes raised during audits. This served to increase confusion over what exactly was being intended. A more specific, though important, problem of the QPC operation was the QPU Board which was several times inquorate, resulting in a failure to complete business and to make crucial decisions. At the time of its closure, the Board had yet to approve five reports of institutional audits.

6.1.3 Implementation Issues

Both SERTEC and the QPU had minimum resources with which to discharge their responsibilities. We believe that the issue of resources was a crucial factor behind the less

than optimum functioning of the QPU and its eventual closure. In the case of SERTEC, lack of resources caused major difficulties in achieving the effective execution of its core tasks and prevented SERTEC from taking on additional functions and providing additional support to institutions, both of which were undoubtedly needed.

SERTEC ran a lean and efficient office which provided good administrative support for its operations. In particular, it efficiently organised teams of panel members to make its many site visits. The panels comprised representatives of industry, potential employers of students, professional bodies, students, and academic staff from the technikons. They did not generally contain academic staff from universities. Panels consistently sought the views of students during site visits.

The operation of visits, however, was the source of some criticism from within the technikons. Members of panels often appeared inadequately prepared and at times displayed insensitivity. The competence of some panel chairs was also questioned. The use of staff from other technikons in the role of chair raised questions of neutrality and a suspicion that lines of major criticism were not pursued for fear of "reprisals" on the "return" visit. Reports were prepared during the second day of the visit and presented to the institutions. While immediate feed-back was appreciated within the institutions, this arrangement scarcely gave the panel members time to produce a considered, analytic report, and reduced the time available for discussion with the staff and students of the technikon. Reports tended to be perfunctory, did not deal adequately with the issues, and would focus on resource and infrastructure issues rather than central educational issues of teaching and learning - although curricula, staff qualifications and experience, and standards of examinations were scrutinised. Institutional representatives on panels had the potential to cause a dilution of negative findings, and this undoubtedly happened on some occasions. In addition, the role of Council members on visits was far from clear; were they present as observers, as facilitators or as normal panel members?

Chairs and members of panels did not receive training for their various tasks. This lack of training when combined with the minimal preparation and support provided for the site visits has severely limited the usefulness of programme accreditation. It might well have been the best that could be done with the available resources, but the weaknesses of the process raise questions about the validity of the accreditation outcomes for accountability purposes, as well as the usefulness of the accreditation processes for improvement.

The QPU audits had the benefit of a good manual containing clear and explicit guidelines. The three-day visits provided adequate time for discussions with a broad range of stakeholders and the opportunity to pursue audit trails of quality management procedures in operation. The composition of panels appears to have been generally appropriate, although there is some criticism of gender imbalance and lack of representatives from historically disadvantaged institutions. The self-evaluation process appears to have been regarded as a mainly useful exercise, although the resultant reports are of varying quality.

Problems included the occasional late arrival of documents and consequent lack of preparation time. Most panel members received no or inadequate training for their tasks. There was considerable criticism of reports. These were not well written, contained many inconsistencies and were generally not produced until a long time after the visit. It was not clear who was meant to have final responsibility for the writing of reports. As has already been mentioned, the usefulness of audit visits was limited by confusion about purposes and by the poor quality of self-evaluation reports produced by some institutions. In retrospect, it was perhaps unrealistic to expect institutions to prepare adequately for the audit exercise without external support or assistance.

6.1.4 Outcomes Issues

The SERTEC evaluation and accreditation process has had a number of important and positive outcomes. First, it enhanced the public credibility of technikon programmes, especially in the minds of government and industry. Secondly, it helped develop an

awareness of quality issues within the technikons. Thirdly, it enhanced the status of agricultural colleges. Fourthly, it led to infrastructure improvements in some institutions. Fifthly, it contributed a degree of capacity building for the evaluation/accreditation process, both within individual institutions and nationally from the experiences gained by the 9000 or so panel members.

The QPU exercise has also had some beneficial outcomes. It has given South Africa some useful experience of quality assurance at the institutional level. It has helped create a largely positive response to quality issues in universities. It signalled within institutions the importance of good management information systems. It has introduced external quality assurance to the universities without provoking the antagonisms and anxieties seen in the responses of universities in other countries. It achieved these things without imposing an overly bureaucratic approach to quality matters.

Both SERTEC and the QPU achieved useful outcomes. However, neither body did much to disseminate good practice across its respective sector. To its credit, SERTEC had undertaken self-evaluation and an external meta-evaluation. However, the former was a largely descriptive exercise, while the recommendations of the latter do not appear to have been acted upon. Over the twelve years of its existence, there is little evidence that SERTEC has developed a critical discourse about quality and quality assurance within its sector. We found little evidence to suggest that the QPU had done much to enhance public confidence in the universities, and its sudden closure can only have served to reinforce this.

In terms of its own goals and objectives, SERTEC appears to have been largely effective. Although the QPU hardly existed long enough to have achieved its goals, it too had made a useful start. In terms of international practice in quality assurance, both bodies followed recent trends at the level of overall policies and methods. The QPU in particular was able to benefit from the considerable international debate on higher education quality matters during the nineties. However, in terms of implementation, both bodies fell down badly in important aspects of their work, and it is in these respects that greater attention to international experiences might be shown in the future. In terms of the broad policy goals of the HEQC: while there are important lessons from the experiences of SERTEC and the QPU, neither provides an adequate template for either the conceptualisation or the operation of the new organisation.

6.2 Main Lessons Learnt

6.2.1 The experiences gained by large numbers of people from the work of SERTEC and the QPU will provide many insights and lessons for years to come. It will be important for the HEQC to bear them in mind at all times. Below we list a small number of lessons which we believe are important and timely at this early stage of the HEQC's development.

6.2.2 There are six principal lessons as follows:

- Avoid trying to operate the HEQC "on the cheap" with insufficient staff, facilities or funds. Match aims to activities and activities to funds. And if the funds cannot be provided, reconsider the aims and activities. (We envisage that the state will need to provide the core funds and that these will be supplemented by institutional and donor funding.)
- Do not try to do everything at once. In relation to the balance between accountability and improvement, we suggest a three-phase approach where the first phase is a starting up phase while system size and shape matters are sorted out. For the HEQC, this could also be an experimental and promotional phase when new methods are piloted and dialogue with stakeholders takes place. The second phase would be a phase of improvement with particular emphasis upon capacity building in institutions through training, pilot studies, research and development, and cultural change. During this stage, the HEQC would need to be finalising its methodology, developing guidelines and explaining its purposes and expectations to institutions. The final stage would be the full operational stage which will be able to achieve both

accountability and improvement goals - provided that rigorous procedures and competence in their implementation have been built up in the previous two stages.

- Attempt to do only those things for which you have the necessary resources and expertise.
- Remember that the HEQC could lose legitimacy through a lack of competence within its panels or in its own administration.
- The HEQC will need to be realistic about the resources - including time and competencies needed - available within institutions if they are to be successful in introducing effective quality management systems. The HEQC will have a major responsibility to develop the capacity in institutions to carry out necessary processes such as self-evaluation and to ensure appropriate follow-up and decision-making at all institutional levels.
- Temper an awareness of theoretical ideals in quality assurance with realism about what can be achieved in present circumstances. For example, while self-evaluation holds out the promise of effective improvement-orientated quality assurance in time, recognise that institutions have not yet gained the expertise to do it properly.

6.3. Implications for the Work of the HEQC

6.3.1 The implications for the work of the HEQC are considered under a number of headings. These are derived from the terms of reference set for the meta-evaluation, from issues which emerged in the course of our work, and from broader international experience where this seemed relevant to particular problems facing the HEQC. The headings are as follows:

- The audit of institutions
- The accreditation and evaluation of programmes
- Arrangements for follow-up
- Quality improvement
- Peer review
- What institutions will need to do
- Private institutions
- Institutions in crisis
- How to acknowledge diversity while achieving consistency
- Size and structure of the HEQC
- Role of HEQC officers and competencies required
- Time-scales

6.3.2 The HEQC as a learning organisation will have three principal mechanisms through which to assure the quality of higher education. These will be (a) its principles and regulations - i.e. its requirements of institutions (including possible sanctions), (b) peer review support for its various activities - i.e. drawing on the academic and professional expertise of the country, and (c) its own professional staff - with key responsibilities for policy implementation and communications. The use made of these three mechanisms will depend partly on the resources available to the HEQC, but should also reflect the diversity of the higher education system and the different needs of institutions. We give some tentative indication of how these various mechanisms might be used in the following paragraphs. But it will be for the HEQC to determine which combinations will produce the most cost-effective achievement of its goals and objectives.

The Audit of Institutions

6.3.3 Institutional audit will be one of the HEQC's principal responsibilities. As the quality of education experienced by students will be primarily determined by the quality management procedures, the culture, the resources and the competencies of the staff of the higher education institutions themselves, audit will be an important tool to ensure that institutional

responsibilities are effectively discharged. As indicated above, we believe that the early re-introduction of a form of institutional audit should be among the HEQC's priorities.

6.3.4 Institutional audit can have a number of purposes; for example, fact finding regarding the current institutional arrangements for quality management; checking whether quality management systems meet certain pre-set requirements; and promoting new approaches to quality management and supporting institutions in their implementation. Audit can also be combined with an element of institutional evaluation, for example in relation to resources or decision-making mechanisms. Whatever the purposes, it is vital that they be fully understood by all involved in the process and that the detailed methodology of audit is shaped to reflect those purposes. Initially, and in the absence of HEQC guidelines or codes of practice on institutional quality management systems, we would recommend a largely fact-finding/promotional approach to audit. This might start with those universities which had not undertaken a QPU audit. When this initial cycle has been completed (i.e. all universities audited), a second cycle of audits could be commenced to cover all higher education institutions. The second cycle of audits might include an element of checking conformance to pre-set HEQC requirements.

6.3.5 Whatever approach is adopted for institutional audit, we believe that it will be important to rectify the failings of the QPU methodology. Thus, at a minimum, the purposes of audit must be clearer and communicated effectively to all involved, the audit procedures should be improved, the standards required for the preparation of audit reports should be raised significantly, and arrangements for the follow-up of audits should be introduced.

6.3.6 To be done well, institutional audits require good preparation by the institution and by the HEQC. This implies an important role for the professional staff of the HEQC. A very rough estimate would be that one officer (supported by 0.5 secretary) could organise ten audits per year (including pre-meetings with the institutions, preparation of briefing documents, and writing of audit reports). We would recommend the continuation of a peer review approach to audit, with the question of who constitute "peers" for this kind of process being given careful attention. HEQC guidelines/regulations for the audit of institutions should be introduced as soon as possible. The QPU manual will provide a helpful starting point, and there are many international handbooks and manuals which contain useful ideas.

The Evaluation and Accreditation of Programmes

6.3.7 This is a second principal responsibility of the HEQC. Whereas we think it important that the HEQC carries out institutional audits itself, we believe that it would be possible to devolve the process of programme evaluation and accreditation to other properly approved bodies. (Another possibility worthy of consideration would be for the HEQC to retain direct responsibility for accreditation decisions, but to take those decisions in the light of evaluations undertaken by other bodies.)

6.3.8 Programme evaluations might be carried out by (a) the HEQC, (b) individual higher education institutions, (c) consortia of institutions, or (d) professional bodies. It would be for the HEQC to determine which was the appropriate evaluation body for any particular programme. For individual higher education institutions, scrutiny of arrangements for programme evaluation could be one of the foci of institutional audits. For other evaluation bodies, other arrangements would need to be made to satisfy the HEQC that rigorous and appropriate procedures were being applied to the evaluation process.

6.3.9 Whoever carries out particular evaluations, they should be undertaken for all higher education programmes, irrespective of the institution providing them. Their reports should be scrutinised by the HEQC and subsequently published. On rare occasions, the HEQC may wish to take some form of action itself as a result of a particular evaluation. The HEQC will need to set clear requirements for programme evaluation and accreditation. We would suggest that, at a minimum, these should include (a) an element of externality to the programme team and the providing institution, (b) effective arrangements for student inputs to the process, (c) that it be part of a wider institutional/organisational quality management

system, and (d) that it have clear arrangements for the follow-up of recommendations contained in reports. As with the current SERTEC system, a combination of self-evaluation and external peer review should be used, but real efforts should be made to make both processes much more critical and analytic than the current rather mechanistic SERTEC arrangements. Again, there are now several good international handbooks/guides to programme evaluation which could be adapted for HEQC use.

6.3.10 We have noted the important benefits to the technikon sector of the SERTEC programme evaluations. Although we are critical of the SERTEC methodology in several important respects, it may be that some or all of the technikons will wish to continue with a modified form of the SERTEC arrangements. This might indeed be valuable to the maintenance of public recognition and confidence in the technikon sector. On the other hand, we believe that many of the technikons have developed to a level of maturity where they might reasonably wish to take greater responsibility for their own quality management. These are matters for individual technikons. Whatever arrangements are eventually made, they will need to be consistent with the HEQC guidelines and requirements for programme evaluation.

6.3.11 If the model for programme evaluation set out above were to be adopted, the HEQC's role could be largely limited to the establishment of guidelines and regulations for evaluation and to offer scrutiny of reports. This latter function would be important, both to signal any immediate concerns and also to ensure that the knowledge base from programme evaluation was fed into the institutional audit process. It remains likely, however, that the HEQC will need to carry out some programme evaluations directly, either because it has reasons for concern about a particular programme or because it has not yet had an opportunity to satisfy itself that the institution or other evaluating body has effective evaluation procedures in place. Our estimate is that programme evaluation visits need last no longer than one or two days, providing they are properly prepared and organised. A reasonable staffing estimate would be for one HEQC officer supported by 0.5 secretary to be able to organise 20 programme evaluations each year. This would include liaison with the institutions, preparing briefing documents and writing reports.

Arrangements for Follow-up

6.3.12 This was a serious deficiency of both SERTEC and QPU quality assurance arrangements. Reports of both institutional audits and programme evaluations should contain clear recommendations for improvements or other measures to safeguard quality. They should indicate who is responsible for considering the recommendations and by when. In most cases, responsibility for follow-up will rest with the higher education institution itself. Its procedures for doing this will be scrutinised by the HEQC during the institutional audit process. There will be occasions when these general arrangements may not be sufficient. Where an evaluation panel (institutional or programme) has serious concerns, it might specify the need for a progress report from the institution to be sent to the HEQC by a specific date. More generally, there would be considerable value in HEQC officers making periodic visits to institutions, when follow-up actions arising from evaluation activity would be one of the matters discussed. Such visits might be annual or mid-term between institutional audits.

Quality Improvement

6.3.13 From the institutional perspective, this will be the most important function of the new quality assurance arrangements. Its achievement will be vital to retaining institutional support at all levels and to preventing attitudes of cynical compliance from taking hold. The HEQC must ensure that its procedures maximise the potential for making improvements to quality. Much will depend on the content of its guidelines for institutional audit and programme evaluations. Providing that compliance to guidelines requires people to do sensible and useful things, there is no necessary conflict between compliance and improvement. But, in general, processes which require reflection and judgement are more likely to produce improvements than processes which only require the assemblage of descriptive information. Similarly, audit and evaluation visits which are conducted in an open and informed way by suitable people who have been properly briefed and, where appropriate, trained for the exercise are more

likely to lead to change and improvement than exercises which are marked by misunderstandings and acrimony. In other words, quality improvement will be achieved if the HEQC carries out its core activities well.

6.3.14 Nevertheless, there are other things which the HEQC can do in order to maximise its positive impact upon the quality of higher education. First, it can learn from its experiences and from the experiences of the sector and feed the results back into higher education through publications, conferences and workshops, databases and so on. Many national quality bodies publish "subject overview" reports based on the results of evaluations, and these can provide valuable reference points for future developments in individual institutions. Quality bodies also publish reports on all sorts of aspects of quality management, from assessment of students to credit transfer and international recognition of qualifications. Secondly, the HEQC can support learning across higher education by sponsoring forums and networks where quality issues can be discussed and experiences shared. Thirdly, the HEQC might commission research and development work on matters of higher education quality, to feed into the development of its own policies and procedures, and also to support institutions in their own quality improvement work. Fourthly, the HEQC - principally through its officers - should be prepared to provide advice and training to institutions in the development and implementation of their quality management procedures. Finally, although knowledge and training are important to achieving high quality education, incentives are also necessary. While it is not proposed that the results of evaluations and audits should be linked to funding, consideration should be given to finding some way of giving public recognition to institutions and their staff who have made particular achievements in the quality of their work, taking into account their present circumstances and historical legacy.

Peer Review

6.3.15 Some form of peer review is central to most of the quality assurance systems which have been established internationally over the last few years. However, there are considerable differences in interpretation as to who constitute "peers" for various evaluation purposes. Given that peer review will be used by the HEQC in its institutional audit procedures and will be required by the HEQC for programme evaluations, the HEQC will need to give early consideration to the standards it wishes to apply to this mechanism of quality assurance. These are likely to include the following:

- Explicit criteria for selection. So, for example, the sort of subject expertise for programme evaluations, the balance of panel memberships, and inclusion of students or employers would need to be decided upon. For institutional audit, decisions would also need to be made on the role of expertise outside higher education, and familiarity with the type of institution to be audited.
- The selection process. The question arises of who is empowered to select. There is a need to avoid conflicts of interest and the danger of compromising integrity/objectivity of the evaluation or audit process.
- Briefing and preparation. It must be ensured that panel members are clear about their role and responsibilities and that they receive relevant documentation well in advance of visits.
- Panel chairs. These need careful selection, both in terms of necessary skills and in terms of "informed neutrality" regarding the institution/programme under consideration. Need for special briefing and, more generally, training will be desirable.
- Building up experience. Experience helps create competence, so it is better to use a relatively small group of people regularly than a large group only occasionally. There is a need, though, to refresh regularly with "new blood".
- A register. For programme evaluation, consider the eventual creation of a national register of experienced people whom institutions and other evaluation bodies might call on for expertise in evaluation. (SERTEC could probably provide an initial list of names for such a register.)

6.3.16 We noted the weaknesses of the evaluation visits conducted by SERTEC and QPU. We believe that attention to the above matters will help the HEQC to achieve high standards

in the performance of its core activities. HEQC officers will play an important role in ensuring that appropriate guidelines exist and are followed.

What Institutions Will Need to Do

6.3.17 The response of higher education institutions to the new quality assurance arrangements will be vital to ensuring their success. The HEQC should make clear its requirements and expectations of them. It should also encourage awareness of the following important considerations:

- A recognition that quality assurance will take time, but that there will be important pay-backs in terms of quality improvement and public recognition and support for higher education.
- The need to assign clear responsibilities for quality matters at all appropriate levels within the institution (not just the creation of a quality unit).
- The need to encourage and give recognition to staff who participate in HEQC work and in institutional quality assurance.
- The importance of ensuring proper briefing about the purposes and expectations surrounding quality assurance activities.
- The provision of training in self-evaluation.
- The need to ensure that follow-up actions arising from evaluations are taken. (Failure to do so will eventually produce cynicism about the whole process.)
- The provision of cross-institutional information systems to support quality assurance processes, plus guidance and training in the analysis and interpretation of information.

Private Institutions

6.3.18 We believe that private providers of higher education should be expected to meet the same requirements and standards as the rest of the system. However, the nature of many of these providers (small, possibly inexperienced) may require special measures to ensure the protection of the public. This has the potential for imposing a high workload on the HEQC, at least in the short term. In addressing the issue of private providers of higher education, we suggest that consideration be given to the following points:

- Programmes at private institutions should be expected to meet the same standards as, and requirements made of, public institutions. It is very unlikely that the HEQC would feel it appropriate to devolve responsibilities for programme evaluation and accreditation to such (private) institutions. Providers would need to seek evaluation/accreditation from other approved evaluation bodies (e.g. consortia of institutions, individual universities or technikons; note that many UK universities provide accreditation/validation services to small higher education providers, including private colleges).
- Initial recognition or approval of an institution could be through the provision of documentation (e.g. dealing with resources, governance, staff numbers and qualifications) and a meeting with HEQC officers. It would be followed in due course by a normal institutional audit visit. (For small institutions - whether private or public - such visits could probably be completed in a single day.)
- The existence of a well-publicised complaints procedure which would enable students and members of the public to raise concerns directly with the HEQC could help to maintain public confidence. (It might be difficult to deal with individual complaints if they were received in any numbers, but at the very least it would be possible to log them and take up the general issues with the institution during audit. And a large number of complaints concerning a particular institution could trigger immediate action.)
- The HEQC should provide a public information system so that people can acquire accurate information about the standing of particular programmes and institutions.

Institutions in Crisis

6.3.19 The interim HEQC asked us to consider the question of providing external quality assurance to institutions "in crisis". Of course, any answers have to take account of the nature of the crisis. We do not believe it is possible to give a standard response on this issue. A number of options would be available to the HEQC. Where a crisis had prevented an institution from providing the necessary documentation in good time prior to an already arranged audit or evaluation visit, we do not believe the visit should go ahead. It would serve no useful purpose if it could not be conducted properly. On the other hand, if the necessary preparations had been made, the continuation of the visit could be valuable in determining whether the crisis was impacting upon the quality of education being provided by the institution. The visiting panel might be able to give support to the institution in dealing with its problems. In addition, the HEQC should be sufficiently flexible to make special arrangements to deal with institutions in crisis. These might include special visits to institutions by senior officers and/or board members of the HEQC, special meetings attended by institutional representatives at the HEQC offices, and shortened audit visits with a special focus appropriate to the nature of the problems faced by the institution. Having investigated the matter by these or other means, the HEQC would need to refer matters - if regarded as sufficiently serious - to the Department of Education, which has powers to send in an assessor or administrator to the institution.

How to Acknowledge Diversity While Achieving Consistency

6.3.20 All of the matters considered above can contribute to achieving consistency, while recognising the diversity of the higher education system. Consistency and fairness come from recognising rather than ignoring differences. The drafting of guidelines on quality assurance should be subject to wide consultation so as to avoid unnecessary prescriptiveness or biases towards particular types of institution or programme. Audit and programme evaluation panels should be selected to ensure understanding and sympathy with the objectives and circumstances of the institution. Reports should be written in such a way that the context and background of the evaluation are clear to all readers. At the same time, the HEQC should be clear about the minimum standards which it wishes to maintain and will need to ensure that its processes and guidelines are sufficient to ensure their adherence. Through its dissemination activities, the HEQC can make an important contribution to achieving a better public understanding of the diversity of higher education and to ensuring that appropriate recognition is given to good quality work wherever it is found.

Size and Structure of the HEQC

6.3.21 We have placed great emphasis in earlier sections of this report on the importance of providing adequate resources for quality assurance. In terms of the total higher education budget, the resources needed are insignificant but, if properly used, they can have a major effect across the whole of higher education. If they are not provided, many of the activities attempted by the HEQC will have limited value or credibility. The resources provided for SERTEC and QPU give us some concern in this respect.

6.3.22 A key consideration will be whether, as recommended above, the HEQC is able to devolve responsibilities for most programme evaluations to other bodies. Assuming that this is done, we agree with the initial estimates of the CHE that eight to ten professional staff would constitute a minimum establishment for the HEQC. To these should be added support staff to arrange meetings and visits, manage databases, provide secretarial support, and so on. An estimate would be that fifteen people in all would be required. However, were the HEQC to make a serious attempt to disseminate good practice and support quality activities in institutions, an establishment of between 20 and 25 would probably be required. But clearly everything depends on the volume of activities. We have earlier estimated workloads of ten institutional audits or twenty programme evaluations per year per "team" of professional officer and 0.5 secretary. To this should be added staffing resources for policy development,

communications, liaison with institutions and professional bodies, dissemination activity, dealing with the special needs of "problem" institutions, servicing of committees, general management and administrative support.

6.3.23 Regarding structures, it would be desirable to align officer structures to committee structures in terms of the main functions of the HEQC. Thus, there could be separate committees dealing with institutions; programme accreditation; policy and regulations; and information and development. The membership of these committees should be representative of the diversity to be found in higher education. Cutting across this structure, individual officers could be assigned to groups of institutions, have oversight of a group of programmes areas (including liaison with professional bodies), and have responsibility for particular types of provision (e.g. private providers, distance education). As far as the Board is concerned, this should be broadly representative of relevant stakeholders. Care should be taken to ensure that it does not appear to be aligned to any particular interest group. (In some countries, heads of institutions are barred from membership of such boards because of potential conflict of interest.) In looking at the membership of the boards and committees overall, it would be desirable to consider the balance between different categories and levels of people working in higher education, including students. "Ownership" by the higher education community is not the same thing as ownership by the heads of institutions.

The Role of HEQC Officers and the Competencies Required

6.3.24 The role of officers can largely be inferred from previous sections. They will have key roles to play in ensuring that the policies of the HEQC are carried out, that visits and related activities are conducted with rigour and integrity, and that the policies and procedures of the HEQC are communicated to institutions and other stakeholder groups. It follows that officers will need to command credibility and respect across the higher education community. Among the many competencies required will be the ability to communicate effectively with senior academics and managers in higher education and the possession of good writing skills. It would be desirable if most of the HEQC's officers had academic or administrative backgrounds in higher education. Consideration might be given to offering short-term secondments to people working in higher education institutions.

6.3.25 We have already indicated our view that a three-stage process might be considered for the initial setting up of the HEQC: a starting-up phase, a phase concentrating on improvement, and a full operational phase (see section 6.2.2 (b)). It is difficult to give estimates as to the length of time necessary for each phase but we consider it unlikely that the first two phases could be completed in fewer than three years.

6.3.26 Full operational effectiveness, however, will take longer. Only with wide experience of the processes involved will the benefits of quality assurance come to be seen. In particular, it will take time for institutions to develop the necessary culture - of attitudes and relationships - which will be required before reliance can be placed on internal processes of self-evaluation and the related quality management mechanisms needed to ensure quality improvement. Over a period of five to ten years, important achievements should begin to be seen. It will then be important to evolve procedures to take account of the greater awareness and competencies available in institutions and the higher education community as a whole.

HEQC as a Learning Organisation

In much the same way as we have advocated the dissemination of information and exchange of experience across higher education as a whole, it will be important for the HEQC to review its own activities critically by sharing information among its officers and the many other people who will be associated with its work. On a regular basis, it should seek feedback about its activities from all parties involved in them. This is particularly useful in respect of site visits, the most important public manifestation of the HEQC. Through a newsletter, its web-site and occasional conferences, it should seek dialogue with its various stakeholders, and test out its perceptions and conclusions about its strengths and weaknesses and its ideas for

improvements to its own policies and procedures. Periodic meta-evaluation involving self-evaluations and external review should also be undertaken.

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Appendix 1

Proposed Evaluation of SERTEC and the Quality Promotion Unit (QPU) for the Council on Higher Education (CHE)

Rationale

The Council on Higher Education (CHE) is charged with establishing the Higher Education Quality Committee (HEQC). The HEQC's responsibilities will encompass quality promotion and assurance in general, and programme accreditation and the auditing of institutions in particular. The CHE's Quality Committee wishes to underpin its recommendations regarding the establishment of the HEQC with an in-depth understanding of the strengths and weaknesses of SERTEC and the QPU. The CHE's Quality Committee has therefore requested an independent evaluation of the work of these bodies. Amongst other tasks, it has established an interim HEQC in order to carry this out.

Overall Purpose

The purpose of the Evaluation is to:

- determine the best practices of both SERTEC and the QPU in arranging quality assurance and promotion for possible inclusion into the work of the HEQC
- identify areas of weakness in the practices of the two bodies and to recommend strategies to overcome these weaknesses in constructing the HEQC
- highlight issues pertinent to quality assurance and promotion in the higher education sector which the work of the two bodies has identified
- identify elements missing from the current quality assurance processes when compared to the overall purpose of quality assurance as being developed by the interim HEQC.

Proposed Terms of Reference

The Evaluation should:

- describe the rationale, principles and assumptions underpinning the establishment and workings of SERTEC and the QPU
- identify clearly the goals of each of the bodies and how these have evolved
- explore the appropriateness of all of the above for the future, particularly in relation to the Higher Education Act and White Paper, the challenges facing the Higher Education Sector, and the potential operation of the HEQC
- determine, insofar as is possible, the extent to which the goals of each of the bodies have been achieved, and identify examples of the impact the bodies have had on particular institutions or programmes
- suggest ways in which SERTEC and the QPU might have achieved greater impact
- describe the governance and operations of each of the bodies, including financing arrangements, and identify strengths and weaknesses. It understands that the QPU has been closed but believes that valuable lessons can be learnt from the experience of the QPU
- make recommendations to the CHE, on the basis of the above analysis, about the rationale, principles, assumptions, goals and operations of a future HEQC.

In preparation for the Evaluation, both SERTEC and the QPU will be requested to prepare self-evaluation which covers as many as possible of the above terms of reference. The

Evaluation should make full use of existing documentation on, and evaluations of, SERTEC and the QPU, and should not unnecessarily repeat work already done.

Particular Issues

The following issues should be covered in the course of the Evaluation:

- The definitions of quality employed by each of the bodies.
- How the dual goals of helping to develop institutions and making institutions accountable to the society have been balanced.
- How, and whether, to conduct quality assurance in institutions in serious crisis.
- The capacity required to conduct quality assurance and promotion and, in particular, the possibility of conducting local peer reviews in a country which has a relatively small academic community.
- Strategies to ensure that the self-evaluation reports compiled are reflective rather than simply descriptive.
- Mechanisms for preparing thoroughly the institution and programme audit/accreditation teams.
- Mechanisms for ensuring that recommendations are heeded.
- Strategies to ensure consistency among the different exercises and to corroborate findings.
- Mechanisms for working with the Professional Bodies and the identification of the different roles.
- Ways in which the future HEQC can itself become a "Learning Organisation".

Process

It is proposed that:

- the evaluation be conducted by a team of four or five suitably qualified persons of whom at least one will be recruited internationally
- the Team be appointed by the CHE Quality Committee after consultation with the SERTEC Council and the QPU Board
- the evaluation be overseen by Sub-Committee One of the interim HEQC
- the Team be requested to draw up a detailed work plan designed to fulfil the purpose and terms of reference of the Evaluation within the budget available. Such a work plan will be presented to Sub-Committee One of the HEQC for amendment and approval. The Sub-Committee will then decide how often and at what points it should meet. It is expected that no more than four meetings will be necessary.

Timing

It is proposed that the Evaluation be completed by the end of February 2000.

Funding

The Ford Foundation has agreed to fund the Evaluation.

Essential Tasks of the Evaluation Team

- To collect and peruse all founding documentation on and reports of SERTEC and the QPU.
- To consider carefully any evaluations conducted on either SERTEC or the QPU and to interview as many as possible of those who conducted such evaluations.
- To gather the views of the various stakeholders - including the teams, the institutions and SERTEC/QPU, who have been involved in the Institutional Audits and the Programme Accreditation Processes - regarding what was learnt through both the process itself and the final report.

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Appendix 2

Meta-Evaluation: Evaluating the Evaluators

Defining Meta-Evaluation

From higher education quality assurance literature it is clear that different notions of meta-evaluation exist. Rancano and Benvenuti (1999) from the Universidade Veiga de Almeida in Brazil, for example, regard the re-evaluation or reflection in the institutional quality assurance cycle as meta-evaluation. In the Netherlands, meta-evaluation is done by the Inspectorate of Higher Education, and it can be compared to a form of monitoring or follow-up procedures of quality assurance in higher education (Scheele 1999). In this case the follow-up by the Inspectorate on the measures taken concerning the recommendations made during the external quality assessment is one of the elements of the meta-evaluation.

Usually, however, meta-evaluation refers to evaluating evaluation and evaluators, and includes re-examining the design, process and effects of the evaluation. The purpose of meta-evaluation normally is providing either the primary evaluators or the person/body who commissioned the meta-evaluation with feedback on how effective the evaluation and the evaluators have been and how well they have been doing their job.

Whatever the purpose of the meta-evaluation, certain questions must be answered. These could range from questions on procedural details such as the focus of institutional self-reviews or the number of members of a peer review panel, to more fundamental questions such as:

- Are the outcomes of the activities of the QA agency providing the desired assurances and information to the government and the public?
- Is there evidence of an improvement of quality in the institutions? Are they taking initiatives on quality? Are they developing a quality culture? Are shortcomings being addressed?
- Can any of these be attributed to the actions of the external QA agency? (Woodhouse 1998: 1)

Any QA agency ultimately has to be answerable to its constituents, and should be able to provide satisfactory answers to the question: What did you do towards achieving academic quality (Woodhouse 1998)? An answer to this question must be furnished by the meta-evaluation.

Harvey (1999) distinguishes three types of meta-evaluation:

- Opinionated or "theoretical" analyses that tend to "predict" the likely effects of the introduction of, or change in, evaluation systems.
- Analyses that are based on often limited available evidence, much of it anecdotal.
- Analyses that are based on systematic data collection.

The last type of evaluation tends to be of three sorts:

- Self-evaluation.
- External evaluations initiated by the agency or parent body - sometimes using consultants as advisors.
- Independent evaluations initiated and undertaken by an individual, research centre or organisation.

Systematic analyses tend to serve a range of purposes:

- Feasibility studies or evaluations of pilots.

- Modifications to an existing process.
- Evaluations of effectiveness or ability to deliver the "underlying rationale".
- Fundamental review of impact on the sector.

Based on examples from the literature, it seems as if feasibility and modification studies tend to rely heavily on agency self-evaluation or agency-initiated review. Effectiveness and impact research is more likely to be done by independent researchers. Also, feasibility and modification studies tend to precede impact and effectiveness studies (Harvey 1999).

Features of Meta-Evaluation

Whereas writings on quality and quality assurance in higher education have been proliferating the past few years, relatively little has been written on meta-evaluation. Harvey cites a mere 23 studies in this regard, dating from 1993 to 1999, of which almost half were presented at the Fifth Biennial Conference of the International Network of Quality Assurance Agencies in Higher Education in Chile in May 1999. Nevertheless, an overview of a selection of these studies reveals the following common features of meta-evaluations:

Reasons for Performing or Commissioning Meta-Evaluations

Meta-evaluation and a follow-up by the government or a governmental agency is one of the elements that support accountability in quality assurance systems.

Changes in the context in which the EQA agency and/or the higher education institutions operate seem to be one of the major reasons for performing or commissioning meta-evaluations. The rapid and profound changes occurring in higher education and accreditation across the world (amongst others new kinds of providers and new delivery modes), leading to growing public demands for accountability and heightened criticism from government groups, brought about pressure on accrediting bodies to increase their attention to issues of institutional integrity and quality assurance in the accreditation process. Examples of such contextual changes include government actions such as deregulation of tuition fees, the demise of buffer bodies, and changes in programme funding approval processes.

New quality assurance and/or accreditation procedures also necessitate meta-evaluations. In 1995 in Hong Kong, for example, the University Grants Committee (UGC), that plays a vital role in assuring the quality of higher education provision in the higher education institutions under its aegis, embarked on a programme of teaching and learning quality process reviews (TLQPRs). In 1998 the UGC decided to initiate an external evaluation of the TLQPR process. In Belgium, in the absence of a permanent external quality assurance agency, an "Audit Commission" was appointed by the government to investigate the quality assurance arrangements ("kwaliteitszorg") of the Flemish universities (Audit-commissie Kwaliteitszorg 1998).

A further reason for meta-evaluations relates to the evaluation of the performance of the EQA agency after a certain period of time, during times of crisis or when a new governance and/or management structure is set in place.

After its first four years of operation, the New Zealand Academic Audit Unit, for example, underwent a thorough review by an independent group (the Review Panel) with an analogous composition to the AAU's own audit panels. Another example is the Danish Centre for Quality Assurance and Evaluation of Higher Education that was established in 1992 with the mandate to evaluate all higher education programmes at university as well as non-university level. The Centre was set up for an initial period of five years on the condition that the Centre itself would be subject to an evaluation at the end of this period in order to decide if it should obtain the status of a permanent body. The Danish Ministry of Education took it upon itself to initiate and organise the evaluation.

In the Netherlands the meta-evaluation of the national systems of quality assurance is the responsibility of the Inspectorate of Higher Education. The purpose of this meta-evaluation is to provide a governmental check that institutions themselves have a trustworthy system of quality assurance. This includes sufficient checks on possible "window-dressing". Furthermore, the meta-evaluations try to provide a guarantee that the institutions take the outcomes of the assessment seriously and decide about follow-up measures to be taken. The meta-evaluation is therefore carried out on the reports of the visiting committees and on the institutional responses to the results of visitations.

Focal Issues of Meta-Evaluations

Meta-evaluations usually concentrate on the lessons learned, and discuss methodological considerations for the future.

Reviewers (in most cases consisting of a committee, panel or team) make an assessment of and give advice on:

- The external quality assurance (EQA) agency's mission, aims, purposes and terms of reference. Have these aims and purposes changed or shifted over time? If so, why?
- The role and structure of the EQA agency, including membership of the governing board.
- The appropriateness of the agency's structures and organisation for accomplishing its purposes.
- Critical success factors influencing the operations of the EQA. Have the aims of the EQA, for example, been clearly communicated to the HEIs? Have all the HEIs interpreted the EQA procedures in the same way?
- The integrity of the agency's processes used in seeking to accomplish its purposes.
- The operation and efficiency of the appraisal process. This could include, for example, the scope of audits and the emphasis on self-evaluation, the audit manual, audit visits, composition and membership of audit panels, audit reports, audit follow-up, etc.
- The credibility and value-added nature of the appraisal process. Has this process resulted in any substantial improvement in quality in HEIs, such as creating a quality culture, establishing quality assurance management systems, changes in teaching/research policy and practice, etc.?
- The adequacy of the agency's resources for accomplishing its purposes.
- The areas in which the EQA continues to be effective and those in need of improvement.
- Important directions for the EQA to take in the immediate and long-range future.
- Any outcomes that may be considered as unintended in regard to the stated aims of the EQA and its procedures.

Not all meta-evaluations will necessarily cover all of the above aspects. Focal issues will depend on the context and needs of the commissioning body, the higher education system and the agency concerned.

Methodology Used in Meta-Evaluations

In some cases the starting point for the meta-evaluation is a self-evaluation by the EQA agency concerned. The main focus of the self-evaluation usually is on the methodological experiences gathered. Another important part of the self-evaluation is an in-depth analysis of the strengths and weaknesses of the applied method. It might also be necessary to include a presentation of the political context of the agency, as this may have a decisive impact on the way in which the evaluations are conducted. A self-evaluation can be organised according to the following principles:

- To prepare a status report of the performance of the agency according to all the elements of its mandate. To provide a thorough, self-critical and reflective analysis of the various elements of the evaluation method.
- To identify strengths and weaknesses as well as suggestions as to how any shortcomings should be amended.

Following on the self-evaluation, or as a first step in a meta-evaluation, a review panel or expert team is appointed. The appointment of this panel is preceded by the drawing up of terms of reference which is done by the commissioning body, whether this is a government department, a buffer body or the EQA agency itself. Terms of reference are decided upon after broad consultation with stakeholder bodies.

A review panel usually consists of a small number of persons who are appointed on the basis of their particular expertise in evaluation generally and higher education particularly. The criteria for the appointment of the external panel as a rule include that an international dimension should be represented.

The actual review takes place in several stages:

- Analysis and verification of information.
- Preparation of review report.
- Publication of review report.

Review panels are involved in a number of activities that may include the following:

- Comparative study.
- Documentary review: the review panel examines relevant documentation that could include briefs submitted by HEIs on their perception of the appraisal process, as well as other relevant documentation.
- Personal and/or telephone interviews with key stakeholders (either individually or in groups) (heads of universities, deans, chairs and members of the audit panels, government officials, etc.).
- Observation of the EQA agency and/or audit panel(s) in session.
- Site visits and meetings or discussions with key individuals or groups: the objective of the site visits is to evaluate the reliability and suitability of the methods applied by the agency by meeting and discussing this with key personnel including heads of institutions, selected faculty and other staff and students. Four questions are of particular importance:
 - a. What does the agency do well?
 - b. What does the agency not do well?
 - c. What can the agency do better?
 - d. What should the agency do in the future?

In some cases review panels develop survey instruments that are distributed to member institutions. Surveys are designed to obtain the following information:

- Institutional demographics (including the costs of preparing for the EQA exercise, both in terms of self-evaluation preceding EQA and the visit of peer review panels).
- Satisfaction with current EQA processes and activities of the agency.
- Comparison of the costs and benefits of EQA at the member institutions.
- Usefulness of the components of the EQA process.
- Appropriateness of the agency's standards.

- Effectiveness of the EQA process in facilitating changes in different institutional areas.
- Level of agreement about the benefits of EQA.

Another form of survey is an impact study that investigates the impact and effects of the series of evaluations and specifically whether the evaluations had been subject to follow-up, what changes had been made on the basis of the evaluation reports and if the evaluation process and reports constituted a relevant basis for follow-up. An impact study could also contain an appraisal of the evaluation method used by the agency. The methodology employed in impact studies could include group interviews, and/or individual interviews with stakeholders. Questionnaires and case studies can also be used.

In some instances the review process includes a hearing procedure. This involves the reports prepared in the evaluation process being made public and sent to the

relevant stakeholders for comments. The evaluation process may conclude in a conference with stakeholder representatives, the Ministry of Education, the expert review panel and the agency.

Outcomes of Meta-Evaluations

Outcomes of meta-evaluations can result in changes to the external quality assurance system or procedures of the agency, or in changes to the agency itself, i.e. its structure.

Meta-evaluations seem to highlight the fact that gradually the very mission of higher education is changing. One main contribution of EQA systems is an increased awareness of the importance of a strategic institutional management which in its turn has brought to the fore the need for an effective institutional infrastructure - this has led to institutions making quality monitoring an important aspect of institutional management.

On the whole the outcomes of meta-evaluations seem to be positive for EQA agencies. All of the case studies of meta-evaluations that were reviewed reported as one of the findings that progress had been made as a result of the operations of the EQA agencies. Examples of positive effects of external quality assurance include that it has been a major stimulus for the introduction of effective internal quality systems, and that it has contributed to the development of a climate of trust and mutual respect between the agency and the HEIs. Other examples of positive results include promising signs that HEIs are highly committed to the audit process, and are going beyond compliance. In other cases review panels concluded that the agency had fulfilled the objectives outlined in its mandate in a thorough and systematic way, and that it had been successful in setting up evaluation procedures which combined the two objectives of control and improvement. The large majority of stakeholders found that the evaluations carried out by the agency were valuable, and that they had been carried out professionally and according to appropriate methods.

Two areas of concern were highlighted in one case, which could probably be generalised to some extent. Firstly, the awareness of and interaction with the EQA agency has not penetrated deeply to grassroots level in the HEIs, i.e. to the average academic or student. Secondly, there was some concern about monitoring the institutional responses to audit report recommendations, as the agency had no sanctions to reinforce its recommendations.

Structural changes and adjustments to the operations of EQA agencies that were effected as a result of meta-evaluations include the following:

- Established a governing board and introduced a new election process for selecting board members.
- Adopted policies to make provision for a larger representation of the public interest in decision-making bodies and processes.
- Increased transparency by opening meetings of the governing board for the public.

- Decision-making structure to be more responsive to the increasing speed of institutional change by means of greater flexibility in decision-making processes.
- Adopted a multi-faceted programme through which it will gather evaluations and comments about changes and operations of the agency from a broad range of constituents.

Examples of recommendations on processes and procedures of EQA emanating from meta-evaluations are:

- The review process should be modified to more effectively address institutional differences.
- The communication process should be greatly expanded to increase the level of understanding about accreditation.
- Internal processes should be reviewed to ensure timeliness of response, value-added components, elimination of duplication, and service orientation to effectively address change and meet institutional needs.

Some alternatives to current EQA practices were also developed. Examples include shifting the focus to quality assurance for the improvement of teaching and learning by:

- encouraging the improvement of teaching, stimulating learner-centred instruction and fostering greater access to higher education
- being process-oriented, and focused on institutional systems that assure quality
- being fact-based, demanding successful institutional processes that produce evidence of demonstrable results
- becoming customised to reflect institutional needs and priorities rather than being prescriptive or intrusive.

Such practices are designed to develop both within the agency and within each of the member institutions the capacity to learn from doing, learn from partnering and learn from listening. As true learning organisations, the agency and its member institutions intend, by working together, to shift the accreditation process from measuring the quality of institutions against a single set of benchmarks agreed to by the members, to the external evaluation of internal processes that focus on the continual improvement of teaching and learning, on identifying weaknesses and on the effectiveness of internal actions to address those weaknesses. Both the EQA and HEIs then become involved in "double loop" learning that will lead to continuous quality improvement.

It should be kept in mind that meta-evaluations often have the intrinsic or extrinsic motive of legitimating the agency or evaluators being evaluated. There might therefore be hidden or explicit political reasons for commissioning or requesting a meta-evaluation. A loss of trust in an EQA agency from the higher education sector itself, a loss of trust from society and the government in the higher education sector, difficulties in persuading institutions to act on the recommendations of the EQA agency, structural or implementation problems in the agency, major changes effected to the EQA system, or the agency's survival being in the balance may provide the impetus for a meta-evaluation to take place. Many of these reasons are therefore not really focused on evaluating the agency, but on giving or increasing its legitimacy among a variety of stakeholders. The largely positive conclusions of meta-evaluations should be seen in this light.

Relevant Procedures/Criteria for Meta-Evaluations

A number of criteria for meta-evaluations can be deduced from an overview of the case studies. These include:

- There should be an early statement by the commissioning body or "owner" of the evaluation agency to the agency itself, HEIs and stakeholders that an evaluation is planned and preferably when this will happen.
- It is not considered good practice to be one's own external evaluator. Accordingly the "owner" must keep a good arm's length to the evaluation process or make sure that the evaluation does not cover conditions and processes for which the owner had a responsibility.
- The essential externality of the process depends on the impartiality and integrity of the experts appointed to the panel, but the experts must also be credible as professionals in the field of evaluation and higher education.
- Documentation must be of the highest order and apart from the analytical and self-critical self-evaluation report (if available) documentation should include surveys of institutional and stakeholder attitudes towards the work of the external evaluation agency.
- The external evaluation of an agency should not replace systematic procedures for feedback from those involved in the evaluations of HE.
- The external evaluation of an agency should be set up with clear terms of reference including an outline of the procedures for the necessary follow-up.
- The effects and learning process deriving from an external meta-evaluation can be significantly increased if initiation, process and follow up are more closely brought together.

Follow-up of the meta-evaluation should be done at regular intervals, to also monitor the "double loop" learning of the agency. The benefits of meta-evaluation for the quality assurance and improvement of the structures and processes of EQA agencies are manifest. Not only will this contribute to better EQA systems, but meta-evaluation will also play an important role in establishing and confirming the credibility of EQA across a broad spectrum of stakeholders.

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Appendix 3

Policy and Legislative Framework Underpinning Quality Assurance

1. The NCHE Proposals on a Quality Assurance System for

Higher Education

The National Commission on Higher Education (1996) locates the development of a quality assurance system within the NQF as part of the process of creating a single qualifications network for higher education qualifications under the umbrella of SAQA.

The Commission notes the SAQA Act's provision for the establishment of bodies responsible for monitoring and auditing quality. These include the Higher Education Quality Committee (HEQC) as the umbrella body for co-ordinating quality assurance. The main focus of HEQC activities should be on institutional auditing aimed at improving quality at the institutional level, and on programme accreditation aimed at granting and maintaining accreditation of programmes that have met the minimum acceptable standards. The HEQC itself should function as a committee of the Higher Education Council (now known as the Council on Higher Education (CHE)), which is given the authority for the accreditation of higher education programmes as part of its quality promotion function. The provision for National Standards Bodies (NSB) responsible for determining the minimum acceptable standards for programme accreditation is also noted.

The Commission proposed that to ensure the legitimacy and acceptance of the quality assurance system, the following principles should underpin it:

- The criteria and procedures should be formulated in consultation with higher education institutions.
- The purpose should be formative, focusing on improvement/development with opportunities to address shortcomings rather than punitive sanctions.
- The procedures should have a mix of self-evaluations and external independent assessment (NCHE, p 109). Further the quality assurance system should include three functions: institutional auditing, programme accreditation and quality promotion.

The Commission made the following specific proposals on a quality assurance system for higher education:

- a. That a Higher Education Quality Committee be established as a committee of the Higher Education Council, and that this Committee be recognised by SAQA as the umbrella co-ordinating body for quality assurance in higher education.
- b. That the HEQC should be responsible for institutional auditing and programme accreditation, managed by a board made up of individuals drawn from inside and outside the higher education system.
- c. That the HEQC should encourage and monitor quality promotion activities within higher education (NCHE, p 112).

2. The White Paper Proposals on a Quality Assurance System for Higher Education

While the White Paper notes that the primary responsibility for quality assurance rests with higher education institutions, it nevertheless sees a need for an umbrella national authority responsible for quality promotion and assurance throughout the system. To this end, it proposes a provision in the Higher Education Act for the establishment of a Higher Education Quality Committee as a permanent Committee of the Council on Higher Education (CHE).

The function of the HEQC will include programme accreditation, institutional auditing and quality promotion. The following principles will underpin the operations of the HEQC:

- Consultation with higher education institutions in formulating criteria and procedures.
- A formative notion of quality assurance focusing on improvement and development rather than punitive sanctions.
- A mix of institutional self-evaluation and external independent assessment (White Paper, p 22).

The HEQC will be registered with SAQA and operate within the SAQA framework and procedures.

The White Paper also proposes the establishment of the Council on Higher Education which will be responsible for quality assurance and promotion in higher education through the HEQC. In its quality promotion role, the CHE will advise the Minister on "the promotion of the quality of the system and quality improvement among individual providers and programmes, including the principles and procedures that should govern their accreditation in terms of the SAQA Act" (White Paper, p 33).

3. The Higher Education Act Proposal on a Quality Assurance

System for Higher Education

The Higher Education Act makes proposals on quality assurance as part of its recommendations on the CHE and its functions. As part of its advisory functions to the Minister, the CHE must give advice on quality promotion and quality assurance. The CHE, through the HEQC, is also tasked with:

- a. promoting quality assurance in higher education
- b. auditing the quality assurance mechanisms of higher education institutions
- c. accrediting programmes of higher education.

To be able to perform its quality assurance and quality promotion functions, the CHE must first establish a HEQC which must comply with SAQA policies and criteria in the performance of its functions.

4.1 Inputs on Quality Assurance from the Certification Council for Technikon Education Act No. 88 of 1986

The SERTEC Act indicates that SERTEC was established to perform the following functions:

- a. To accredit examining bodies in respect of instructional programmes which in its opinion comply with the norms and standards of education as prescribed by the Council.
- b. It may also withdraw the accreditation of programmes that do not comply with the set norms and standards.
- c. To issue technikon or agricultural college certificates to candidates who comply with prescribed norms and standards.
- d. The council may also cancel certificates issued to candidates who did not warrant such certification.

4.2 Inputs on Quality Assurance from the SERTEC Amendment Act No. 88 of 1993

This document sets out in fine detail amendments to the SERTEC regulations governing the conduct of examinations, norms and standards to be complied with by candidates in examinations, and requirements for passing examinations. It also sets out rules on equipping and resourcing laboratories, studios, practical rooms and resource centres, requirements on

staff qualifications, rules governing the supervision of research in higher degrees, and on how to evaluate experiential training. There are also rules on how to conduct evaluations of the standard of instruction and examination of each programme or operational unit, and, finally, rules governing admission to degree programmes and the transfer of credits.

Together, the SERTEC Act of 1986 and its Amendment of 1993 map out and demarcate the broad sphere of SERTEC activities in the course of quality promotion in technikons and colleges. While the SERTEC Act sets out in broad terms the goals and functions of SERTEC, the Amendment Act details the procedures to be followed and the infrastructure required for SERTEC to achieve its goals. Implicit in all of this is the belief that the quality of education in technikons and colleges will be realised when specific rules and procedures governing the conduct of academic activities are prescribed, and all institutions are obliged to observe them. Given the practical reality within which technikons and colleges operated at the inception of the SERTEC quality promotion activities, the SERTEC approach may be defensible. But one wonders whether the detailed prescription required may not be seen to be strait-jacketing by institutions with a long history of academic freedom and autonomy such as universities. Interviews with some technikon and college staff tend to support this thinking.

5.1 The South African Qualifications Authority Act (1995): Proposals on a Quality Assurance System

The SAQA Act sets out the requirements and procedures for registering qualifications on the NQF, and rules on the composition, registration and functions of National Standard Bodies (NSBs). Some of the functions of NSBs with a direct bearing on quality assurance are as follows. NSBs shall:

- a. recognise and/or establish Standards Generating Bodies within the framework of sub-fields, or withdraw such recognition or establishment
- b. ensure that the work of Standards Generating Bodies meets the requirements for the registration of standards and qualifications as determined by the Authority
- c. recommend the registration of standards on the NQF and the registration of qualifications to the Authority
- d. liaise with Education and Training Quality Assurance bodies regarding the procedures for recommending new standards and qualifications
- e. define requirements and mechanisms for moderation to be applied across ETQA bodies (SAQA Act p 16).

The Act also sets out rules governing the composition and registration of Standards Generating Bodies whose functions are to generate standards and qualifications in accordance with SAQA requirements, update and review standards, recommend standards and qualifications to NSBs, and recommend criteria for the registration of assessors and moderating bodies. There are also rules of procedure and rules governing the financing of the work of National Standards Bodies and Standards Generating Bodies, as well as rules on conducting the meetings of NSBs.

5.2 Proposals on Quality Assurance from the 1998 Regulations (in terms of the SAQA Act, 1995)

The Regulations provide the enabling and regulatory framework for implementing quality assurance systems and processes required by the NQF. The Regulations first set out the rules governing accreditation of Education and Training Quality Assurance Bodies (ETQAs) for the purpose of monitoring and auditing achievements in terms of standards. Where no ETQAs are accredited, SAQA will perform these functions and responsibilities. Any organisation can apply to SAQA for accreditation as an ETQA if, among other conditions, it has a quality management system which includes quality management policies and procedures, and review mechanisms which ensure that the policies and procedures are applied and remain effective. Such organisations should have stakeholder representation at decision-making level.

The Regulations also outline the functions of ETQAs, including rules governing the accreditation of providers of education and training. They also set out rules governing the appointment and functions of moderating bodies which are responsible for ensuring that the assessments of outcomes are done fairly, and are valid and reliable. They also indicate that Professional Bodies and examining bodies may apply for accreditation as ETQAs.

5.3 Proposals on Quality Assurance from SAQA: Criteria and Guidelines for ETQAs

The Criteria and Guidelines were developed to assist SAQA in implementing its quality assurance and accreditation functions while the NQF was being developed. They were developed to assist training bodies and provider bodies wishing to apply for accreditation. This document sets out the criteria and guidelines for ETQAs as they evaluate and accredit providers. Another section outlines SAQA's quality assurance function of continual improvement of education and training standards and qualifications.

The Criteria and Guidelines highlight the relationship between the NQF functions of standards setting and quality assurance by indicating that the quality process begins with standards setting and the registration of standards and qualifications on the NQF. ETQAs, working through registered assessors and accredited providers, are responsible for assuring the quality of learning achievements within the specified context of registered standards. The process of accrediting ETQAs, their functions and modus operandi are described in full detail in the document. However, the following functions need to be highlighted. An ETQA shall:

- a. accredit constituent providers for specific standards or qualifications registered on the NQF
- b. promote quality amongst constituent providers
- c. monitor provision by constituent providers
- d. evaluate assessment and facilitation of moderation amongst constituent providers
- e. register constituent assessors for specified standards
- f. take responsibility for the certification of constituent learners.

Providers are accountable to ETQA for the management, development and delivery of learning programmes for which they are accredited, as well as for ensuring the quality of learning experiences as required by registered standards and qualifications.

There are also moderating bodies which are responsible for ensuring that assessments of registered outcomes are fair, valid and reliable across the NQF.

The critical elements in this quality assurance process are "the assessment, moderation and accreditation criteria developed for each standard and qualification," and the concomitant linking of standards setting and quality assurance in one quality system, while at the same time maintaining their autonomy and independence.

On the specific role of ETQAs in quality promotion, each ETQA will be required to give evidence of the policies and procedures they have for ensuring that they are able to provide support and development assistance to their providers and learners; and also to demonstrate continuing self-evaluation and developmental assessment approaches to improving the quality of learning provisions and review of learning provisions. All ETQAs must have in place a quality management system which includes policies, procedure and mechanisms for the management of assessment.

The Criteria and Guidelines document also spells out in detail how the relationship between ETQAs and learning providers will be operationalised. By separating the functions of quality assurance, evaluation, and monitoring from the functions of learning provision, the SAQA Act and its enabling Regulations and Criteria have ensured that the principle of separating "referee" and "player" is upheld.

6. Proposals from the CHE Quality Task Team Report

The CHE Task Team was established in October 1998 to advise the CHE on how to establish the HEQC. The Task Team recommends that the CHE should establish an interim HEQC composed of CHE members and participants from universities, technikons, colleges, the Department of Education, labour, SAQA and professional boards. In June 1999, the interim HEQC established three subcommittees to undertake some investigative, evaluative, regulatory and consultative tasks aimed at providing an indication of the strengths, gaps and problems inherent in the current quality assurance arrangements.

The Task Team proposes greater systematic and institutional attention to quality issues in order for higher education to address the whole host of quality issues peculiar to the South African context of higher education. The Task Team further advises that the following principles and premises must inform a quality system for higher education:

- "A clear indication of what elements are to be considered in determining quality.
- Quality requirements must be appropriate to contextual needs.
- The quality system must be nationally coherent and transcend the current binary divide.
- Appropriate alignment between internal and external quality assurance.
- The quality system must be underpinned by a formative developmental philosophy for strengthening of Higher Education.
- A sense of ownership by stakeholders.
- The eventual aim of quality assurance in South Africa would be to move towards a model of self-regulation by higher education institutions and validation by the HEQC and peers... Self-regulation will require institutions to develop greater self-evaluation capacity...
- HEQC to be seen as an objective independent body responsible to the CHE but acting on behalf of the higher education community." (Task Team Report, p 2)

The Task Team further proposes a quality assurance system where the HEQC functions as the national quality assurance body with policy and operational responsibilities on quality assurance. The HEQC would take over the responsibilities of the QPU and SERTEC.

The Task Team also makes recommendations on the operational structure of the HEQC, its functions and how it would be financed. Finally, it identifies the following issues as needing urgent attention and research:

- "The balance between accountability and development in the South African context.
- Quality in private higher education.
- Cost-effective programme evaluation.
- Alignment of internal and external QA.
- Interaction with professional boards.
- Relationship between QA outcomes and public funding." (Task Team Report, pp 4-5)

7. Proposals from the Skills Development Act of 1998

A relatively recent input to this quality assurance debate which is not discussed above is the Skills Development Act of 1998 which recommends the setting up of Sector Education and Training Authorities (SETAs) for each national economic sector. Each SETA is charged with developing a skills plan for its sector. It must also implement the plan by establishing learnerships and workplace skills plans, and by monitoring education and training in the sector. These learnerships can lead to qualifications which are registered by SAQA. Further, the skills programme developed by SETAs, when completed, will constitute a credit towards a qualification registered in terms of the NQF.

Summary and Critical Analysis of Emerging Issues

In the sections above we highlighted the policy and legislative framework that underpins quality assurance initiatives and activities in higher education. First, we noted the recommendations of the NCHE which suggest the broad parameters or committee structures necessary to oversee quality assurance in higher education. For these recommendations to be institutionalised as part of the higher education system, they needed to be legislated into law by parliament. The White Paper and the Higher Education Act played this role. This process, then, explains the common suggestions and recommendations on the establishment of the CHE and the HEQC and the overall role of SAQA in quality assurance which form the core of the first three Acts.

The second group of Acts, Regulations and Criteria focus directly on how quality will be regulated in individual institutions, on who will be responsible for what, etc. In this context, the role of SAQA, ETQAs, SETAs, moderating bodies and providers, the enabling Regulations governing accrediting bodies, and the criteria or standards used in assuring quality were highlighted.

Specific inputs on quality assurance from SERTEC and from the CHE quality Task Team were also discussed.

Emerging Issues

The legislative and other enabling frameworks discussed above have attracted the attention of both practitioners and researchers who have commented on both their practicability and limitations. We now highlight some of this argument.

- On the positive side, commentators have indicated that the NQF's definition and understanding of quality as something that can be reached through broad participation is, on its own, good and should be applauded. This understanding of quality has led to the broad representation and participation in quality processes and structures that is evident in the SAQA quality promoting bodies. For example, SAQA regulations allow for a very broad range of providers of education and training, as long as such providers meet the stated criteria and standards. The same applies to monitoring, moderating and examining which can be performed by professional bodies and SETAs, among others.

Some of the problems with this broad participation are the following:

- a. There cannot be a common understanding of quality by all participants, and since there are no mechanisms for reaching such consensus, the products coming out of these processes can never be the same. This situation is further compounded when international standards must also be applied.
- b. There is room for confusion when a multiplicity of bodies function in quality assurance, especially when there is no-one to co-ordinate their activities. In such a situation, the clients, who could be subjected to different quality requirements from each ETQA, and the system at large will be the losers.

In defence, it can be said that quality does not appear after a single event, but after a series of interlinked activities and events that form part of a cybernetic cycle. With proper co-ordination these seemingly discrete activities can be enriching.

- Some have indicated that the integrity of the NQF is established by allowing for separate but interlinking processes of standards setting and quality auditing of learning provisions. On the other hand, critics have pointed at the multiplicity of bodies that are charged with the same function. In some instances this interlinking may border on the absurd, for instance, when the CHE, which is the supreme council in higher education, must be accredited by SAQA as a quality assurer.

- There is also the perception that SAQA is everything to everybody. It participates in the setting and moderation of standards. The basic question then is: Can and should SAQA perform both roles? This situation needs to be investigated and, where possible, these roles should be separated.
- Finally, there is need for any quality assurance body to grapple with the

unresolved tension between quality improvement, accountability and promotion or development. The NCHE, White Paper and the Higher Education Act seem to agree that the HEQC should play all three roles of promoting, auditing and accrediting programmes. Current thinking indicates that a quality assurance system should not do all of them. Which one or combination, then, should be the main focus of a new quality system in South Africa?

The new HEQC, as the quality assurance body, must grapple with all the issues raised in this discussion. And its main goal must be to streamline not only its own activities, but also those of the many actors and role players in the quality assurance area. There are still some grey areas in this process, for instance, the absence of a common definition and interpretation of quality assurance. These must be resolved, perhaps as part of this process if no other group is tasked with that function.

Appendix 4

Contributors to the Task Team Investigation

The Task Team gratefully acknowledges the valuable contributions made by the many individuals interviewed personally or telephonically in the course of the investigation. These included officers at a variety of levels such as executive directors, chief directors, directors, vice-chancellors and deputy vice-chancellors, deans, heads of department, and lecturers, as well as students. The Task Team wishes to express their appreciation for the frankness of the interviewees in assisting them with the task of analysing the Quality Promotion Unit and SERTEC, and particularly those agricultural colleges, technikons and universities who made site visits possible.

Contributions were made by individuals from the following organisations:

- Border Technikon
- Cedara Agricultural College
- Director of the Quality Promotion Unit (QPU)
- Fort Cox Agricultural College
- Members of The Certification Council for Technikon Education (SERTEC) Council
- Members of the Committee of Technikon Principals
- Members of the QPU Board
- Rhodes University
- Technikon Natal
- Technikon Northern Gauteng
- Technikon SA
- The chief directors of Higher Education Development Support and Higher Education Planning and Management of the Department of Education
- The chief executive officer of the South African Universities Vice-Chancellors Association
- The executive director and director of SERTEC
- The executive officer of the South African Qualifications Authority (SAQA)
- University of Pretoria