

Subject	Operating an External Quality Agency
Segment	Structures and Management
Topic	1.2 Broad Functions of the QA Agency

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1. Introduction



This topic provides an introduction to important features of QA agencies and the intention is to give you a general foundation on which other topics and modules will build. You will learn about the roles and purposes of QA agencies and the main functions they carry out including the conduct of external quality assurance reviews in three phases. The topic also outlines the range and scope of activities conducted by the agency and the necessity to establish quality review methodologies in consultation with stakeholders. You will learn about some of the main strategies for implementation of reviews and the critical process of making determinations on the basis of reports provided to the agency by review panels it has established. You will also learn about the importance of building capacity with a capable core staff who will work along with its expert external reviewers.

Objectives: Broad Functions of the QA Agency

Upon completion of this topic, you should be able to

- discuss the roles and purposes of QA agencies, how these vary from situation to situation and evolve over time with changes in the context of operation
- describe the main functions and activities of a QA agency
- explain the activities conducted by agencies and methodologies for conduct of quality reviews
- outline the variety of ways in which final decisions on the outcome of a review are made with reference to reports provided by expert reviewers
- explain the importance of building capacity by QA agencies

2. Role and Purposes

Let us review some broad purposes of EQA identified by Brennan and Shah (2000), European Standards and Guidelines (2005, 2007) and Woodhouse and Stella (2008).

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Purpose of EQA – Various Recommendations

Brennan and Shah (2000)

A review of 12 quality agencies identified 10 statements of purpose for EQA:

- to ensure accountability in the use of public funds;
- to improve the quality of higher education provision;
- to inform funding decisions;
- to inform students and employers;
- to stimulate competitiveness within and between institutions;
- to undertake a quality check on new (sometimes private) institutions;
- to assign institutional status;
- to support the transfer of authority between the state and institutions;
- to encourage student mobility;
- to make international comparisons.

European Standards and Guidelines (2005, 2007)

This document identifies four broad purposes of EQA including:

- safeguarding of national academic standards for higher education;
- accreditation of programs and/or institutions;
- user protection;
- public provision of independently verified information (quantitative and qualitative) about programs or institutions;
- improvement and enhancement of quality.

Woodhouse and Stella (2008)

An analysis of the goals and objectives of a large number of QA bodies determined that EQA can have one or more roles depending on the national context; i.e.,

1. Assist higher education institutions (HEIs) in the development of internal quality management systems (institutional development or capacity building)
2. Assist institutional efforts to improve quality (quality improvement)
3. Evaluate the fulfillment of objectives or standards by institutional systems, and the effectiveness of such systems (audit)
4. Measure institutional quality and/or standards according to an internal or external yardstick (assessment)
5. Provide an explicit comparison between one or more institutions, either within the same country or internationally (benchmarking)
6. Provide a ranking of the institutions according to criteria relating to performance (ranking)
7. Determine the ability of an institution to offer specified programs, or its eligibility for a given benefit (a gatekeeper role, an accreditation function)
8. Define and certify qualifications (qualifications authority)
9. Establish and maintain a framework of qualifications (framework)
10. Assess and document learning, including experiential learning; to enable credit accumulation and transfer (credit accumulation and transfer)
11. Steer the institution in particular directions, in terms of strategy, planning, or methods (steering or transformation; relates to fitness of purpose)
12. Provide a report on the institution as a basis for (government) funding
13. Provide a report on the institution concerning the use of funds and other resources (i.e., act as a buffer or honest broker; accountability)
14. Monitor the financial viability of the institution (viability)
15. Check institutional compliance with legal and other requirements (compliance)

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16. Provide independent information about the institution for various constituencies (prospective students, employers, industry, etc.) (information)
17. Report on the quality and standing of the entire HE sector (sector report).
18. Collate the outcomes of the activities of other QA agencies (coordination)

Accountability or Improvement?

As earlier discussions indicate, the emphasis placed by EQA on these purposes will vary and change as the national context changes. Consider the current debate around whether QA should be primarily about accountability or improvement. For some EQA mechanisms the predominant objective is quality control; for others, it is public assurance of compliance with certain quality criteria or the accountability of institutions. In yet other cases, institutional self-improvement is the primary goal. In most cases, the objective of QA is a combination of all of the above with national variations in emphasis. This variation depends on the characteristics of the HE system and the degree of accountability required by various authorities. In other words, accountability concerns and improvement plans may co-exist in any QA system, so it is not a question of a stark choice between accountability or improvement.

Accountability vs. Autonomy

Some argue that accountability means less autonomy; the counter-argument is that accountability is the other side of institutional autonomy – in a sense the price that HEIs pay for autonomy (Frazer, 1997). To maintain institutional autonomy and keep government at arm's length, institutions must demonstrate a capacity for effective self-governance and the ability to meet accountability requirements with less direct intervention by government. QA agencies can provide a way to show government why and how institutions of good quality can be given more autonomy. In doing this, the agency assumes the role of a 'buffer body', i.e., an intermediary body that can represent the institutions to the government and vice-versa. Buffer bodies have been common as funding and policy bodies, while their role as quality bodies has become more significant in recent years. The agency can also help institutions to:

- reflect on accountability-improvement developments;
- assess the credibility of evidence presented to validate institutional Accountability-improvement efforts;
- evaluate institutional progress toward the fulfillment of such requirements;
- make professional and legitimate decisions about those evaluations which can have consequences.

3. Evolution of Purpose with Changing National Contexts

For any given purposes, the overall function of QA agencies involves facilitating, mediating, evaluating and taking an active role in EQA for specific higher education activities. In doing this, EQA causes changes in the HE sector and itself changes as the national context evolves.

Brennan and Shah (2000) point out that the degree of emphasis on EQA accountability/control functions (rather than simply improvement/change functions) not only differs between countries but changes with time. For example, in the mid-twentieth century, the growth of institutional diversity and a lack of consistency in higher education standards brought about the establishment of accrediting agencies

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in the U.S. The role of those accrediting agencies was to check whether or not a HEI or a study program met predetermined threshold standards. Over time, the accrediting agencies saw a broader role for accreditation, notably their role in helping institutions to improve standards. Today, accrediting agencies in the U.S. are pursuing new initiatives underpinned by the continuous improvement agenda. To cite another example, the Australian Universities Quality Agency (AUQA), established in 2001, took on a new set of objectives in 2007 that gives an explicit place to assisting in quality enhancement and advising on QA.

Experience from all over the world indicates that changing the QA agency purpose to accommodate changing needs in the national context is inevitable. The Guidelines of Good Practice developed by INQAAHE recommend that the QA agency "has a system of continuous QA of its own activities that emphasizes flexibility in response to the changing nature of higher education, the effectiveness of its operations, and its contribution towards the achievement of its objectives." <http://www.inqaahe.org>

4. Determining the Range, Scope and General Orientation

It is necessary for agencies to carefully consider the context and legal frameworks to determine the scope of their activities. The agency must choose approaches that will maximise the outcome of its efforts. Some of the options may be already determined by decisions taken at a different (and frequently higher) level. For example, deciding that the QA agency will cover only public or private providers may be beyond its control but on the other hand, the way in which these options are implemented is the agency's responsibility.

Another aspect that is to a great extent outside the control of the agency is its general orientation and whether, for example, it leans towards quality control or quality improvement. The decision on that aspect is determined by the purpose for which the QA agency was established but to operationalise the quality assurance framework beyond the basic choices for the quality assurance, the QA agency itself must drive many more specific choices.

Aspects to be considered include

- the degree of importance to be given to the distance and/or transnational education offerings of the HEIs;
- emphasis on teaching vs. research vs. community service activities;
- consideration of commercialisation initiatives.

When the QA agency is established, issues such as these require detailed discussion. This is where consultation with stakeholders and other inputs are normally required. Once the key decisions are made, it is possible to start working on their operationalisation. It should, however, be mentioned that agencies have to continuously assess their procedures. The life of an agency is not static and needs to evolve with changes in the higher education sector.

An example of the impact of the broad decision on the focus of the QAA is the transnational activities of HEIs which may or may not be included within the scope of the agency's remit. A development that overlaps with transnational activities, but needs to be mentioned here, are the distance educational services offered by the HEIs, both in the home country and abroad. Some QA agencies limit their review to domestic campus-based programs. Most, however, have developed guidelines to consider distance programs as one of the institutional initiatives for consideration in quality assurance reviews.

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5. Overview of the Phases of EQA

We will now look at how the EQA phases are defined in different systems. EQA processes in higher education generally fall into three 'stages' or 'phases' that may be divided into more specific parts. Click the tabs below to view more about the three stages of EQA.

Three Stages of EQA

First stage: Information & Self-Assessment

Institutions or programs must provide information relevant to pre-determined, published criteria. In most cases, this is accompanied by a 'self-assessment' or 'self-study' that provides interpretation and analysis. This stage involves a coordination of effort between the institution and agency.

Second stage: Audit of Self-Assessment, Site Visit, Team Report

This stage begins with a review of the self-assessment by the evaluation team – well before the visit. The actual site visit should enable the team of peers to investigate any problem areas, and in the end, to validate the self-assessment. This results in a team report and/or recommendations to the QA agency about the quality of the institution or program and possible improvements.

Third stage: Formal Decision and Recommendations

The agency makes the final decision, taking into account the peer team's recommendations. The outcome, or action, is valid for a stated period of time. The basis for a final decision may include the review team's review of the self-assessment, the visit report, the team recommendation or other pertinent information, such as actual improvement plans that might warrant a follow-up visit. The extent of public disclosure of QA decisions varies among countries and agencies, while the nature and potential effect of a QA outcome flows from the purpose of the EQA process.

EQA processes

Some EQA agencies split these three stages into four or five steps but the three-stage model is generally accepted in the QA community. The rationale for more stages is to place emphasis on certain aspects of the EQA process. Thus some models may add elements such as 'Follow-up' on the report and recommendations.

The EQA model of the European Union, for example, was based on a review undertaken by van Vught and Westerheijden in 1993, using the three generic elements. The later Standards and Guidelines for [QA in the European Higher Education Area](#) (ESG, 2005, 2007) continued to emphasize these elements but added the 'follow-up procedure'. Standard 3.7 for the EQA criteria and processes used by the agencies states that the EQA processes will normally be expected to include:

- a self-assessment or equivalent procedure by the subject of the EQA process;
- an external assessment by a group of experts, including, as appropriate, (a) student member(s), and site visits as decided by the agency;
- publication of a report, including any decisions, recommendations or other formal outcomes;

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- a follow-up procedure to review actions taken by the subject of the EQA process in the light of any recommendations contained in the report.

Eaton looks at the bigger picture of EQA and shows the cyclical ongoing nature of the process as another key step. Click the link below to learn about the five key steps in U.S. accreditation.



[An Overview of US Accreditation](#)

An Overview of US Accreditation

An Overview of US Accreditation

Eaton lists the following five key steps in U.S. accreditation:

- **Self-study:** Institutions and programs prepare a written summary of performance based on accrediting organisation standards.
- **Peer review:** Accreditation review is conducted primarily by faculty and administrative peers in the profession. These colleagues review the self-study and serve on visiting teams that review institutions and programs after the self-study is completed. Peers comprise the majority of members of the accrediting commissions or boards that make judgments on accreditation status.
- **Site visit:** Accrediting organisations normally send a visiting team to review an institution or program. The self-study provides the foundation for the team visit. Teams, in addition to the peers described above, may include public members (non-academics who have an interest in higher education). All team members are volunteers and are generally not compensated.
- **Action (judgment) by the accrediting organisation:** Accrediting organisations have commissions that determine accreditation for new institutions and programs, reaffirm accreditation for previously-recognised institutions and programs, and deny accreditation to institutions and programs that fail to meet published standards.
- **Ongoing external review:** Institutions and programs continue to be reviewed over time in cycles that range from every few years to ten years. They normally prepare a self-study and undergo a site visit each time. Some agencies have provisions for interim or progress reports.

Source: www.chea.org/pdf/OverviewAccred_rev0706.pdf

The generic QA model has been criticised as cumbersome, so there is a desire by some to find alternative models for EQA. These alternatives may reduce the emphasis on any one phase, either self-study (which could be simply based on statistics) or peer review (which might be conducted at a distance), or the elimination of one of the stages.

6. Management and Implementation of Processes

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

- Liaison with HEIs on the quality assurance process and management of the data received from HEIs;

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- Selection and training of external reviewers;
- Constitution of the review team;
- Conducting the visit, and
- Reception of the review team's recommendations.

The following are the roles and responsibilities pertaining to administration, coordination and decision-making functions.

Administration	Coordination	Decision-making
<p>Functions:</p> <ul style="list-style-type: none"> • Notifying the institutions of what is involved in EQA and its policies and procedures • Developing the roster of peers who will be involved in the EQA process • Publishing the final QA outcome 	<p>Functions:</p> <ul style="list-style-type: none"> • Organising activities for development of the EQA framework • Liaising with stakeholders • Management of the major QA phases • Training peers to perform the tasks of evaluation • Guiding institutional preparation for EQA processes 	<p>Functions:</p> <ul style="list-style-type: none"> • Participating in review visits to institutions • Taking a role in the review, such as report-writing • Having a role in making final QA decisions

The functions of QA agencies are generally carried out with a small and highly skilled core staff augmented by external reviewers for assessment activities. Let us discuss these functions in detail.

a. Liaison with HEIs on the quality assurance process

Keeping the HEIs informed of agency policies and related developments in EQA requires a lot of interaction with institutions.. The tasks include orienting HEIs towards the quality assurance process and facilitating their preparations to ensure they carry out a good self-assessment exercise leading to a useful self study document. The interaction also involves managing the data received from the HEIs.

A strong day-to-day emphasis on the policies and procedures of the QA agency and the implications of certain institutional options must underpin the work of the agency staff and the HEIs. This emphasis is facilitated by manuals and handbooks for use by the staff, reviewers and the HEIs. Regular internal staff meetings to share experience and briefings, compiling Frequently Asked Questions and Answers, and interactions with HEIs contribute to this function. A suite of reference documents in an agency would typically include:

- Developing a Procedures Manual;
- Preparing a guide for use by the HEI for self-assessment;

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- Identifying the essential background information to be provided for reviews (including perhaps pro-formas, templates or other instruments); and
- Running staff development workshops for the staff in HEIs.

The information below describes the arrangements and responsibilities of the staff from the Danish Evaluation Institute (EVA), external assessors and the HEI. It shows the way one QA agency ensures good communication and interaction in the EQA process.



[The Danish Evaluation Institute \(EVA\)](#)

The Danish Evaluation Institute (EVA)

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

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

EVA establishes an evaluation group for each evaluation that is composed of people possessing special academic expertise in the area that is evaluated. Members of the project team do not become members of the evaluation group. The evaluation group is responsible for the academic content of the evaluation and for the recommendations of the report. Usually EVA recruits a member from one of the other Nordic Countries to obtain an international perspective of the evaluation.

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

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

Program evaluation results in a single combined report while institutional evaluations result in separate reports for each institution. In the report, the evaluation group

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presents its conclusions and proposals for quality improvement of the educational program. The report also contains a description of the aim and process of the evaluation and analysis of the documentation. Prior to publication, the report is given to the institution to comment on the report and correct any factual errors.

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

Source: Danish Evaluation Institute website.

b. Selection and training of external reviewers

To implement the quality assurance processes effectively, the QA agency needs to recruit reviewers and must be clear about what it expects from them. It must, therefore, select experts who will be recognized as peers by the institution or program to be reviewed. The reviewers need also to have a disposition to fit in well in the roles expected of them.

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

Some agencies require reviewers to simply report on their impressions of the institution (or program) with reference to the assessment framework. In other cases, the agency staff may take a leading role in compiling the review team's observations. The reviewers may also be required to help the QA agency to reach the quality assurance decision. Another variation between agencies is where some review teams share the highlights of their assessment with the HEIs at the completion of the site-visit for example while others do not disclose anything to the institution until the written report has been compiled. In summary, the understanding of the requirements should be clear to all those involved in the process with expectations translated into written policies and made available to everyone. Once the selection of reviewers has been made appropriate training and, later on, retraining strategies are necessary.

c. Constituting the review team

Depending on their role and the nature of the agency, some QA agencies identify a pool of reviewers from which it can draw over time for specific QA exercises, including visits to institutions. Others choose reviewers from among stakeholder groups that are approached for a specific EQA task at program or institution level. In choosing reviewers to form a team for a particular task, two issues need attention:

- Balancing the team; and
- Eliminating any potential conflict of interest.

Click the following tabs to view the issues to consider in choosing reviewers.

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Balancing the team

It is not possible for a single reviewer to be acquainted with all the aspects of the functioning of an HEI or program although experience shows it is possible for a team of one or two people to do an acceptable review where complexity and scope are limited. Each individual's perception of quality is influenced by many factors beyond the control of the QA agency, so training programs will have little impact on deeply held views. Keeping this in mind, the agency should ensure that the make-up of a team can produce a good collective assessment. A careful combination of team skills will make assessment more balanced as different points of view will be presented.

Eliminating any potential conflict of interest

Reviewers are expected to be experts known for their integrity. When a panel of reviewers is being recruited either directly for a specific task, or from the QA agency's pool, the agency must find out whether these potential reviewers have any conflict of interest with the institution or program to be assessed. 'Conflicts of interests' are private interests and circumstances that may compete with an individual's official actions or duties. Any factor that might affect the reviewer's ability to objectively judge the HEI or program being reviewed, or that might reasonably seem to have the potential to do so, can be construed as a conflict of interest.

The agency should be clear about its policies on conflict of interest. In some agencies, this requires certification that the reviewer has no involvement with the proposed institution or program. This involvement, past or present, could be direct or indirect through any close relatives as either an employee or member of any official body, as a consultant or graduate. Sound policies on conflict of interest are essential to upholding the credibility of the process.

d. Conducting the visit

Once the review team has been drawn together, the agency generally involves both both of the review panel and the HEI in planning the site visit. The major purpose of the site visit is to look for evidence to arrive at a collective judgment on the quality of the institution (or program) based on the agency's review framework. To facilitate the gathering of evidence, the visit schedule usually incorporates three types of activities:

- Interactions with various constituents of the institution;
- Visiting some or all of the important facilities of the unit; and
- Checking documents.

During the site visit, in addition to the meetings with the executive body and the management teams of the institution (or program), the reviewers interact with groups of academics, support staff and students. In many cases, there are also discussions with alumni, employers and the public. Interactions help the reviewers to get a feel of the institution's academic environment and to find information on the issues that need to be clarified.

Another purpose of the site visit is to triangulate the information received in the self-study report. The reviewers may ask for relevant documents to verify the claims made by institutions in the self-assessment report. Sometimes, the reviewers may work in sub-groups. The goal is to assist the chairperson/leader of the team to lead

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the team to a collective judgment. The visit schedule must provide adequate time for reflection by the reviewers, to discuss the evidence they have identified and issues to be considered further.

The agency supports the team in different ways which are dictated in part by whether the agency staff will join in the visit. Some of the working papers that need to be prepared include:

- Developing a schedule for the discussions and interviews
- Providing guidelines, including questions, for the various sessions;
- Providing data sheets for recording the evidence;
- Developing templates or formats for writing the reports;
- Being available to the team for consultation; and
- Ensuring good communication between the visiting team and the agency.

Most agencies develop detailed handbooks for use as reference by the visiting team during the site visit. These help clarify interpretation of policies and procedures, among other things.

As mentioned above, in many agencies there is a practice of sharing key findings of the review with the senior management of the HEI at the end of the site visit. Generally this is based on an oral presentation in a meeting (often known as the 'exit meeting'). This sharing of findings is a challenging task that requires careful planning on the part of the team.

e. Receiving the recommendations of the review team

Following the site visit, the observations, report or recommendations of the review team are submitted to the agency for further processing. Most QA agencies send the draft report or review team recommendations to the institution. The HEI can then check factual accuracy as they normally have a say in correcting any mistakes or misunderstandings that may become apparent in the written report. Some agencies give universities an opportunity to comment also on the emphases of the report.

In addition, it is commonplace after the event, to give an opportunity to the HEIs to provide feedback about the review team and the conduct of the review generally. However, in systems where there is not a strong culture of quality assurance and external assessment, the HEIs may not have an opportunity to give their feedback about the external review team. After the site visit stage, the review team's findings and recommendations are considered, so that a final decision can be made.

7. Decision-making and Reporting on Outcomes

Various types of decisions can be made as an outcome of the quality assurance process. To choose an appropriate model for reporting the outcome of quality assurance, the QA agency must consider various factors. These include:

- The purpose for which the quality assurance outcome might be used;
- The size of the system; and
- The level of variability in education quality among institutions.

Once the outcome of the site visit is finalised by the team, and as appropriate with institutional input, the agency may be required to place the outcome before its governing body for further processing or approval. In some situations the review team recommendations are considered by the governing body of the agency alongside the HEI self-study report so the decision is not based solely on the review team's findings. In some agencies, the review teams make a series of observations only and these are then considered by another body as a basis for decision-making.

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The composition of the decision-making body varies from agency to agency depending on affiliation and clientele. But, irrespective of affiliation and clientele, good practice requires that the QA agency be independent, to the extent that it has autonomous responsibility for its operations and the judgments made in its reports cannot be influenced by third parties. The agency must ensure that its decision-making is independent, impartial, rigorous, thorough, fair and consistent. It is also responsible for ensuring that its decisions are consistent even where the judgments are formed by different groups, panels, teams or committees. These requirements are stipulated as basic principles in the INQAAHE Guidelines of Good Practice as well as in the European Association for Quality Assurance in Higher Education (ENQA) Standards and Guidelines for Quality Assurance in the European Higher Education Area.

Reading: Autonomy of QA Agencies

Review the following documents for more information on the principles of autonomy and independence for QA agencies:

- [INQAAHE Guidelines of Good Practice](#)
- [Standards and Guidelines for Quality Assurance in the European Higher Education Area](#)

Practices vary in disseminating the report of QA processes. Some agencies maintain that the reports are written for the HEIs themselves and as such remain confidential. The claim here is that the public needs only to know of the HEI status, such as whether they are 'accredited' or 'not accredited'. The argument against full disclosure of the reports is that both HEIs and external reviewers may be much more cautious in describing the actual weaknesses of a program or institution if they know that the report will be published. Those who support this point of view argue that, at least at the introductory stage, of introduction of external quality assurance processes to a country, region or profession, it may be better to have honest and complete reports than reports 'edited' or made bland for public release. Of course, this does not mean that the outcomes, or a brief summary of the reasons for the outcome, should not be published, but practices vary with regard to cultural context.

Another practice in disseminating reports is operated by a number of agencies which make their reports available to key stakeholders. This includes government or other funding agencies with a summary only made available for the public. However, the well-accepted trend is for maturing systems to move towards public disclosure of more information on the quality assurance outcome. QA agencies that operate full public disclosure often upload the full report to their web sites. Feedback and comments from users and readers are also encouraged. For example, the Standards and Guidelines for Quality Assurance in the European Higher Education Area developed by European Network of Quality Assurance (ENQA) recognise the need to provide "opportunities for readers and users of the reports (both within the relevant institution and outside it) to comment on their usefulness" (ENQA, 2005).

Appeals

For circumstances where the HEIs do not agree with the outcome of quality assurance, the QA agency should provide for an objective appeals mechanism. Most of the well established agencies have a clearly defined appeals mechanism. This is particularly important for agencies that can formally accredit or take away accreditation of HEIs or programs.

One of the benefits of an appeals procedure is that it requires an agency to pay careful attention to its declared principles and to ensure that the processes are managed professionally. It also keeps a check on the way assessment of the

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institution or program is facilitated, so that the review framework is applied consistently and minimises variations between teams.

The Standards and guidelines document developed by ENQA for the European Higher Education Area recommends that an agency should have an appeals system that "provides for those under evaluation an opportunity to express opinions and contest conclusions and decisions resulting from the evaluation outcomes". When the QA agency makes its decisions known to the HEI, and the institution wants to appeal, notice has to be given of this intention to appeal within a certain number of days or weeks. Following this, the HEI needs to submit the appeal application. This application sets out the grounds for the appeal against the quality assurance outcome. Some agencies charge a fee for dealing with appeals.

There are wide variations in the composition and powers of the agency/committee that deals with appeals. The QA agency itself may have a procedure to set up an appeals committee but there are instances where the appeals committee is independent of the agency that made the decision in the first place. In both cases, however, the appeals committee is expected to work independently and judge the appeal fairly. Appeal procedures are often vested in the legal framework ruling the agency. The purpose of the appeals varies with most considering the process only while others consider appeals against the outcome of the review.

Following consideration of the appeal, the committee may be empowered to make a final decision on the appeal, or may be required to forward its recommendations and impressions to the QA agency for consideration. In some situations, HEIs are able to appeal to a court of law.

8. Capacity Building

EQA is a resource intensive activity that requires high levels of expertise for the task so it is essential to build the capacity of those engaged in quality assurance. Capacity building is generally carried out at three levels: among reviewers; HEIs; and the QA agency staff.

Capacity building among reviewers

There are at least three reasons for the QA agency to undertake capacity building among reviewers:

- To facilitate the reviewers in discharging their responsibilities in a fair and thorough manner;
- To orient the reviewers to the quality assurance framework used by the QA agency so that they are able to act on behalf of the agency, adhering to the guidelines given by the agency; and
- To reduce inter-team variance to ensure the credibility of the quality assurance process and its outcome.

Orienting the reviewers to the agency's quality assurance framework and reducing inter-team variations are substantial tasks. It is the responsibility of the agency to ensure that each review is carried out according to some basic methodological rules and that the review team adheres to the framework of the agency. Some countries have established a roster (or list) of trained personnel potentially available to work in review teams. These experts receive intensive training in their responsibilities and the successful ones are inducted into the roster. In some countries, however, review teams are appointed on an 'ad hoc' basis for the situation of an individual institution undergoing review and are briefed about the quality assurance process after being appointed to the teams.

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Capacity building of HEIs

While capacity building in this instance can prepare a HEI for a review site-visit it also includes:

- Guiding the HEIs to conduct a meaningful self-study;
- Strategies for acting on the recommendations of the assessment report;
- Initiating follow-up to monitor progress;
- Sustaining a quality culture; and
- Pursuing a quality enhancement objective.

On-going interaction between the agency and the HEIs through seminars and various academic forums, contribute to quality enhancement in a general sense but in addition, some agencies run specific projects to help HEIs to improve their quality. The Academic Quality Improvement Program (AQIP) of the North Central Association of Colleges and Schools (USA) is one such effort. Instead of carrying out the routine self-study, HEIs can opt to participate in this innovative project and learn of the many ways they can improve their institution. The description of strategies used in Oman follows:



[Oman Academic Accreditation Agency \(OAAA\) Responsibility for Quality Enhancement](#)

Oman Academic Accreditation Agency (OAAA) Responsibility for Quality Enhancement

Unlike many other EQAAs (External Quality Assurance Agencies), the OAC plays a major role in raising the capability of the sector through explicit quality enhancement activities. This aspect of its mission was added in response to an assessment of the sector which showed clearly that the HEIs would not be able to meet the quality assurance requirements without assistance. Two major strategies include development and provision of a [National Quality Training Program](#) and instigation and support of the [Oman Quality Network](#).

Source: National Quality Training Program and Oman Quality Network website.

The example comes from a relatively new agency and shows how it is aiming to support an emerging higher education system. It demonstrates that capacity building is an important function of the QA agency in higher education systems particularly with a degree of variation in level of maturity of constituent HEIs. The same holds true for systems where EQA is an emerging concept. In such a situation, the agency must develop strategies and implement activities that will strengthen the capacity of the HEIs to contribute to and benefit from EQA. It is also important for the agency to support the HEI in sustaining the quality initiatives that come out of quality assurance exercises such as reviews. Initiatives that contribute to capacity development of HEIs can include:

- Developing databases on best practices found among HEIs;
- Supporting projects that enhance certain aspects of quality education;
- Running projects and doing research to improve quality in areas of need;

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- Involving a cross-section of institutional members in consultations and discussions on quality enhancement; and
- Supporting networking among HEIs.

The publication program of QA agencies can also have a significant impact through publication of resource materials as well as through its guidelines, handbooks developed for use by HEIs. Training of quality managers, steering committee coordinators and reviewers and involving them in quality assurance exercises builds an academic community aware of quality-related issues. Those who have gone through training will in turn contribute to capacity building in their own HEIs.

Capacity building of agency staff

Agency staff members have an important role in upholding the professionalism of the QA procedures. In some agencies, they also have a leading role in shaping the processes, practices and the format for quality assurance reports.

Professional development programs to cope with changes in the quality assurance scenario are essential. Agencies take care of this by sending their staff to academic events on quality assurance. Visiting other QA agencies or participating in other forms of exchanges to observe their practices and hosting professional visits of staff from other agencies contribute to the sharing of experiences and expertise. Staff exchange, study visits and participation in network events that bring many agencies together to discuss issues of common interest are becoming common among QA agencies. This is particularly true as discussions on mutual recognition between QA agencies are increasingly being emphasised. Some QA agencies encourage their staff to become involved in research, publication and consultancies that contribute to their professional development. The participation in meetings organised by the regional networks of QA agencies also offer opportunities for the capacity development of the professional staff of QA agencies.

9. Discussion

Discussion: Broad Functions of QA Agencies

Reflect an agency with which you are familiar and identify up to ten contextual factors that impact on how the agency operates (if you do not know an agency in detail, select another organisation with which you are familiar). How have the factors evolved and changed over time?

Given the major activities listed for a QA agency, which are a. the most important and b. most time consuming for the staff of the QA agency you are most familiar with) Why is that be the case?

Outline a plan for building the capacity of stakeholders to understand QA processes and participate in QA exercises. Indicate what methods to be used eg workshops, on-line activities etc with the advantages and disadvantages of each.

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10. Summary

This topic covered the following main points:

- The conceptual approach to QA will depend on the purposed to be achieved by the QA agency and this will evolve as the national context changes.
- The core functions of QA agencies include:
 - Facilitating the bedding down of external quality assurance processes in collaboration with institutions and HE stakeholders.
 - Conducting an external quality assurance process, legitimising the process with collective and transparent peer assessment
- The QA agency can also help institutions to:
 - Reflect on accountability-improvement developments;
 - Assess the credibility of evidence presented to validate institutional Accountability-improvement efforts;
 - Evaluate institutional progress toward the fulfillment of such requirements,
 - Make professional and legitimate decisions about those evaluations which can have consequences.
- There are several ways in which decisions on the outcome of a review may be made and, usually, this is the prerogative of the agency through its governing body.
- To ensure that they operate at the highest level of proficiency, QA agencies need to build capacity at three levels: among reviewers, HEIs and the agency staff.