Understanding Quality Assurance in the Asia-Pacific Region: Indicators of Quality

Dr. Antony Stella, Audit Director
Australian Universities Quality Agency (AUQA)
123 Level 10 Lonsdale Street
Melbourne, Victoria 3000, Australia
a.stella@auqa.edu.au

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Content

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Abbreviations

APQN   - Asia Pacific Quality Network
AUQA   - Australian Universities Quality Agency
GDETA   - General Department of Education Testing and Accreditation (Vietnam)
HKCAA*   - Hong Kong Council for Academic Accreditation
JABEE   - Japan Accreditation Board for Engineering Education
JUAA   - Japan Universities Accreditation Association
HEI   - Higher Education Institution
HEQC   - Higher Education Quality Committee (South Africa)
INQAAHE - International Network for Quality Assurance Agencies in Higher Education
MQA   - Malaysian Qualifications Authority
NAAC   - National Assessment and Accreditation Council (India)
NAARF   - The National Accreditation Agency of the Russian Federation
NCEA   - National Council for Education Accreditation (Mongolia)
NEAS   - National ELT Accreditation Scheme (Australia)
NIAD-UE - National Institution for Academic Degrees and University Evaluation (Japan)
NZQA   - New Zealand Qualifications Authority
NZUAAU - New Zealand Universities Academic Audit Unit
ONESQA   - Office for National Education Standards and Quality Assessment (Thailand)
PAASCU   - Philippine Accrediting Association of Schools, Colleges and Universities
QA   - Quality Assurance
QAA   - Quality Assurance and Accreditation Council (Sri Lanka)
QAC-UGC - Quality Assurance Council,   UGC (Hong Kong)
SEEI   - Shanghai Educational Evaluation Institute (China)
SQA   - Samoa Qualifications Authority

* When the survey was undertaken and when the agency filled up the survey questionnaire, it was known as HKCAA. It became HKCAAVQ since 1 October 2007.

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Executive Summary

The quality assurance agencies differ greatly in the definition of quality they adopt and the methodologies they put in place for quality assurance. The difference in what they consider as "quality" for their purposes stems from the national context and the mandate given to them. From the specific notion of quality it adopts, the quality assurance agency develops its procedures for making `quality assurance decisions'. A critical element in this process is the use of an evaluative framework against which the agency can make decisions. This project makes an attempt to understand the various practices of the QA agencies in using certain elements of evaluation to make QA decisions, in particular related to the notion of 'indicators of quality'.

By 2010 APQN would like to see that all its full members will recognise each others' judgements. This requires a shared understanding of quality, quality assurance and related practices. Towards exploring this aspect, this project was undertaken in three phases. In Phase I of the project, discussions were initiated among the APQN membership, to refine the objectives and methodology of the project. In Phase II of the project a discussion note on relevant QA terminologies was developed. In Phase III of the project, a survey questionnaire was developed and survey questionnaires were sent to the full members and intermediate members and the data thus collected was analysed. This report presents the outcome of all these three phases in the following sections.

Diversities among APQN Membership

The QA processes and practices of the APQN membership have many variations mainly to serve the unique national contexts. The establishment, ownership, legal basis, governance, funding and the level of independence of the QA agency vary among the membership. Correspondingly, the scope and objectives of the agency and the characteristics of its QA model differ. Overall, variations are seen in aspects such as:

- o Scope of QA
- o Unit of Quality Assurance: Institution Vs Program
- o Nature of the QA Process: Mandatory vs Voluntary
- o Aspects considered for QA
- o Role of Institutions in various stages of the process
- o Role of Agency Staff in the QA decision-making

- o Disclosure of QA Outcomes
- o Implications of QA Outcome
- o Post-QA Follow-up

With so much diversity in the QA model, the terminologies and definitions used by the APQN membership and the emphasis given to certain aspects of those definitions vary significantly. For the purpose of the survey, a discussion note was prepared to lead to a coherent definition and terminology.

QA terminology
The following definitions were agreed upon after a series of consultations:

Statistic	– Statistical data or data collected in a systematic way
Indicator	– Data or statistic that indicates or signals something
Performance Indicator	– Data that signals some aspect of performance
Indicator of Quality	– Data that signals some aspect of quality
Criteria	– Aspects or elements against which a judgement is made
Standards	– Specification of aspects or elements or principles to which others should conform or by which the quality of others is judged
Benchmark	- A point of reference to make comparisons

With these definitions in the background, the project analysed how the various terms are used by the quality assurance agencies of the region and what the next steps could be for strengthening regional cooperation.

Survey and the Analysis
A questionnaire was sent to the full and intermediate members of APQN. The response rate of 75% among full members and 50% among intermediate members is satisfactory. Based on the responses received trends that emerge from the responses have been identified in this report. It should be noted that for ease of reading, in cases where there is only one respondent from a country, the name of the agency and the country have been used interchangeably.

Emphases re quality and quality assurance
Overall, there are varying emphases on defining quality. Variations range from 'fitness for purpose' to 'conformance to standards'. In the 'fitness for purpose' approach, quality assurance generally refers to the process to evaluate how well an institution or its programs achieve the stated objectives. In the accountability approach, QA is more about compliance or conformance to certain externally pre-defined expectations. In spite of

these variations and consequent difference in the quality assurance processes, 'fitness for purpose' and or 'quality improvement' have key place (s) in the QA regime.

Indicators of Quality in use
QA agencies use indicators of quality, variously named, and use them as a combination of quantitative and qualitative indicators. Most agencies emphasize the qualitative nature of most of the indicators they use.

Some descriptions of indicators
Indicators of quality used by the agencies are in the public domain and involving the higher education sector appropriately in agreeing on indicators of quality could be observed. Statements of good practices and codes of practices seem to be the predominant way of using indicators.

Using the IQ for QA decisions
Overall, the indicators are both quantitative and qualitative and mostly used as guidelines with flexibility. The survey also reveals that most respondents use the indicators for guiding reviewers, for guiding HEIs towards improvement and for quality assurance decision making. One of the agencies stated that use of indicators helps to ensure fairness and transparency of the evaluation.

Implications for non-adherence to IQs
All APQN members indicated that non-adherence to the indicators has consequences that vary from 'recommendations and advice' for further action to funding sanctions or denial of approval to offer a program.

The IQ Framework (IQF)
The APQN members were sent a framework on Indicators of Quality that had ten major indicators and sub indicators. In general, the IQF has been found to be relevant and due to variation in emphases the QA agencies prioritise them differently.

Next steps and co-operation in the region
There are many positive responses and expression of willingness to cooperate further on refining a common IQF for the APQN region. Suggestions for next stages include: spelling out micro indicators; developing statements of good practice; fixing quantitative norms; defining different levels of quality; inter-agency benchmarking projects; common terminology for the APQN region; more research on indicators of quality, and project among agencies that agree to a set of common indicators.

However, this approach is not free from challenges and even the respondents who are in support of further cooperation express cautions.

Challenges

Most QA agencies have developed their process as collaborative peer review process. The need for IQF to be sensitive to these characteristics has been noted by many respondents. Difference in the national contexts, development stage of the HE sector and the QA systems, and the difference in cultural and socio-political situations have been noted by many as significant challenges.

The concern that "Indicators of Quality" in whatever forms, might become tools for comparing quality/quality assurance without taking into account the purposes and contexts of different quality assurance system within the different places of the region, emerged strongly in some responses. Another respondent suggested that there is a need to consider what is common from an international perspective – not just regional.

While many challenges identified by the respondents are about external factors, there is a very significant internal factor identified by one of the respondents; it is about the prioritisation of the agencies themselves. Not many agencies have thought beyond their national borders and collaboration and cooperation with counterparts across borders, beyond information sharing, has not been a priority to QA agencies.

Overall there is concern that the indicators used should reflect the specific regime of the quality assurance bodies in different countries which will have their own policy considerations and focus in terms of educational and manpower development. The set of common indicators may then become very generic and general, not serving the intended purpose. The challenge is to balance the diversities and meaningful cooperation.

Moving Forward…

The following action points deserve attention:

1. Establish a common understanding of what is meant by each of the ten indicators (this requires a common understanding in basic QA terminology in the region)
2. Develop guidelines to interpret the IQF that will have regard to the diversities of the APQN membership
3. Initiate pilot projects among agencies that have conveyed willingness to cooperate on trying a common IQF
4. Promote inter-agency benchmark studies on core aspects of quality, what indicates quality and how they feed into the QA decision making.

5. Initiate pilot projects to map how the core aspects of IQF map in the QA decision making of agencies. This has the potential to contribute to the discussion on mutual recognition among reliable QA agencies.

6. Promote comparative studies on selected aspects of the IQF

While many of the external factors that challenge progress towards a common understanding of quality and indicators of quality, there is one internal factor on which a network like APQN can make a significant impact; that relates to the significance QA agencies attach to collaboration with each other beyond information sharing. This is an area that needs discussion at the network.

The APQN Board may consider whether the above mentioned action points require further support and guidance at the regional level, may be through a special interest group that will continue to advice on these initiatives, or whether these actions can be left to the initiation and enthusiasm of the member agencies.

It may be noted that the action points given above are not mutually exclusive. They overlap but with some difference in emphasis.

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1. Background to the Project

The quality assurance agencies differ greatly in the definition of quality they adopt and the methodologies they put in place for quality assurance. The difference in what they consider as "quality" for their purposes stems from the national context and the mandate given to them.

From the specific notion of quality it adopts, the quality assurance agency develops its procedures for making `quality assurance decisions'. A critical element in this process is the use of an evaluative framework against which the agency can make decisions.

Quality assurance process may examine many academic and administrative aspects of the entity (institution or program) being reviewed and collect data on those aspects. However, the information that is gathered does not speak for itself; an evaluative judgement must be made, and the evidence that is gathered must be interpreted in the light of some prior questions. This use of evidence, judged against an evaluative framework, leads to decisions that have important consequences.

Agencies do it in many ways – some develop standards and criteria; others agree on a set of parameters and indicators; and some others define benchmarks. In these developments, the terms `criteria', `standards', `parameters', `performance indicators', `indicators of quality' and `benchmarks' are used often in a variety of ways. Some of these terms are used interchangeably in some contexts; sometimes the same term is used to mean different things by different agencies.

This project makes an attempt to understand the various practices of the QA agencies in using certain elements of evaluation to make QA decisions, in particular related to the notion of 'indicators of quality'.

1.1 Relevance of the project

While it is understandable that the agencies have different approaches to quality assurance to suit the national context, to enhance regional cooperation and understanding among quality assurance agencies, it may be more useful to follow a consistent way of using the QA terms. Especially with reference to 'indicators of quality', a regional alignment in terminologies and practices would help in developing comparative data

about quality and quality assurance of the higher education sector of the different countries in the region. The role that the comparative data on quality could play in regional development is significant. For example, agreeing on a set of indicators of quality in higher education could pave the way for policy formulation for regional cooperation in higher education as well as result in system wide improvements. A significant issue in regional cooperation is facilitating academic mobility and mutual recognition of the decisions by quality assurance agencies. APQN is well positioned to make progress in this direction and this project is relevant to APQN in strengthening cooperation among the QA agencies of the region.

1.2. Objectives of the project

By 2010 APQN would like to see that all its full members will recognise each others' judgements. This requires a shared understanding of quality and quality assurance. Towards the enhancement of this understanding, this project had the following specific objectives:

(a) To understand the various terms used by the quality assurance agencies of the region to indicate quality

(b) To understand how QA agencies of the region use those elements to make QA decisions

(c) To explore the possibilities of developing a common understanding and a common framework related to indicators of quality

(d) To explore cooperation among QA agencies of the region based on that framework of indicators of quality

(e) To identify the challenges to using such a framework for mutual recognition among APQN membership

1.3. Methodology

This project was undertaken in three phases. In Phase I of the project, discussions were initiated among the APQN membership, to refine the objectives and methodology of the project. The project intended to identify the patterns of usage or objectives served by the indicators of quality among the APQN membership with a view to strengthening cooperation and facilitating mutual understanding among the membership. A structured questionnaire was developed to collect data and it was discussed in the APQN meeting held in New Zealand in April 2005. Discussions revealed that the basic understanding of the terms used in relation to quality vary greatly among the APQN membership. Although the variations were expected features of the APQN membership, the discussions brought to light the difficulties some members would have in providing relevant information. It was felt that before collecting data on the pattern of use of Indicators of Quality, it is essential to facilitate a common understanding of the terms for

which a background note about the various terms was required. In response to that need, Phase II of the project focused on developing a discussion note.

In Phase II of the project a discussion note on relevant QA terminologies was developed. The discussion note looked at the differences and similarities among the APQN membership with respect to one of the key issues – what indicates quality in the context of the different quality assurance agencies or what are considered as indicators of quality. The terms that are at times used interchangeably with indicators of quality were included in the discussion note and it was discussed in the APQN conference held at Shanghai in March 2006.

In Phase III of the project, a survey questionnaire was developed and discussed in the APQN annual conference at Kula Lumpur (February 2007). Fine-tuning was done based on the feedback received in the Kula Lumpur workshop. Survey questionnaires were sent only to the full members and intermediate members and the data thus collected was analysed.

This report presents the outcome of all these three phases in the following sections.

2. Phase I: Diversities among APQN Membership

The QA processes and practices of the APQN membership have many variations mainly to serve the unique national contexts. The establishment, ownership, legal basis, governance, funding and the level of independence of the QA agency vary among the membership. Correspondingly, the scope and objectives of the agency and the characteristics of its QA model differ.

The size of the higher education system to be covered by the QA agency varies from a few thousand programs to only a few institutions. For example, NZUAAU (8 institutions) and UGC of Hong Kong have very small systems to oversee. In contrast, NAAC has around 17000 HEIs under its purview and BAN-PT has thousands of programs to review. While some agencies review both public and private HEIs some have been established to review only specific categories such as only non-local programs, private universities, public funded institutions etc.

The unit of assessment varies significantly. In general countries have both institutional- and program-related QA mechanisms in place, but, these responsibilities are sometimes shared by multiple agencies and at times the same agency may do both. For example, the Malaysian Qualifications Authority proposes to do both. NAAFR of Russia, and Mongolia are a few other examples where a single QA agency does both institutional and program review. In Japan, while JABEE looks at only Engineering programs, JUAA follows the whole of institution approach.

APQN members have different objectives and functions as their priority. For some, the predominant objective is accountability; for others, it is quality enhancement and providing public information on quality of the institutions and programs; for some others the predominant aim is helping in self-improvement of institutions. In most cases, the objective of quality assurance is a combination of all of the above, but the emphasis on each varies in different countries, depending on the characteristics of the higher education system and the degree of accountability required by various authorities.

The role of the HEIs in the QA process and the way they are consulted during the major QA stages vary a lot. A similar situation can be seen regarding the involvement of the agency staff as well. In some agencies, staff of the agency plays a significant role in the QA decision making by becoming a full member of the review panel. In AUQA, the writing of the audit report is the responsibility of the AUQA staff person who is a full member of the audit team. The NZUAAU of New

Zealand also follows the same pattern. There are systems where even if the QA staff joins the team as a coordinator, the policy of the QA system may be such that the staff does not take an active role in drafting the report.

The QA agencies report the QA outcome in different ways. BAN-PT declares a formal accreditation decision along with a grade on a four-point scale, grade A to grade D. Grade A indicates that the course of study conforms to international standards, grade B indicates that the course is of good quality, grade C indicates that the course fulfils minimal requirements and grade D means not accredited. NAAC gives a grade and a full report while AUQA gives an audit report without any grade.

When there is a report, there are agencies that make only the summary of the report public. MQA of Malaysia proposes to follow this strategy. NZQA of New Zealand, NAAFR, and ONESQA of Thailand make the summary of the report public. Some agencies make the report available to key stakeholders like the government or the funding agencies. Others make the summary alone available to the public. Quality assurance agencies that believe in full public disclosure place the full report on their web sites. Feedback and comments from users and readers may also be encouraged. 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' is increasingly being recognised. AUQA, NIAD-UE, JUAA, and NZUAAU make the full report public.

In some systems where the accountability concern dominates, the quality assurance outcome may be linked to direct funding, as in the case of UGC of Hong Kong. In Philippines, quality assurance outcome is linked to levels of autonomy. BAN-PT, MQA, and NZQA also link the outcome to levels of autonomy, among other implications. For example, NZQA will allow for longer audit cycles and more autonomy for good QA outcomes. There are systems where quality assurance outcome provides prestige only.

BAN-PT, NIAD-UE, and NAAFR do not have any specific follow-up mechanisms. The responsibility and formal role of the quality assurance agency ends with the review. The institutions are responsible for the planning and implementation of follow-up measures. Depending on the nature of the recommendations, ministries of education or other stakeholders may react on the review.

Quality assurance agencies have built-in follow-up procedures with varying levels of rigour. Some require binding actions to be taken by the HEIs and in other cases it

may be a "soft touch" based on the professional commitment that can be expected of the HEIs. In Thailand, Office of Higher Education Committee and Minister of Education monitor the action taken on the report of ONESQA including the time frame. NZQA requires institutions to provide an Action Plan and if this is not carried out satisfactorily within the timeframe, legislation allows for compliance action. NZUAAU requires the Panel Chair and the Director of NZUAAU to visit the HEI, 3 months after publication of the report. During that visit, a timetable for a follow-up report is decided. If monitoring is needed, PAASCU asks for a progress report after 2-3 years and arranges an interim visit.

Overall, variations are seen in aspects such as:
- o Scope of QA
- o Unit of Quality Assurance: Institution Vs Program
- o Nature of the QA Process: Mandatory vs Voluntary
- o Aspects considered for QA
- o Role of Institutions in various stages of the process
- o Role of Agency Staff in the QA decision-making
- o Disclosure of QA Outcomes
- o Implications of QA Outcome
- o Post-QA Follow-up

For more details of these differences and similarities, readers are directed to the report written by the author commissioned by UNESCO which is given in the reference. The surveys conducted in the APEC economies and the Brisbane Communiqué signatories (in progress) are also useful references.

With so much diversity in the QA model, the terminologies and definitions used by the APQN membership and the emphasis given to certain aspects of those definitions vary significantly. This variation emerged as a major issue to be addressed in the initial discussions. It was realised that the APQN membership need to agree on a more meaningful coherent way of looking at the QA related terminologies. While that would be a long term objective, for the purpose of the survey, to collect data on Indicators of Quality, the recommendation was that a discussion note be prepared to lead to a coherent definition and terminology and then initiate data collection based on those common agreements. That was taken up in Phase II of the project.

3. Phase II: Developing the Discussion Note

For a better appreciation of the terminologies related to indicators of quality, the debate that surrounds the understanding of "quality" was first considered.

3.1. Different understandings of quality

Historically the concept of quality has evolved from the manufacturing sector where quality is about minimizing variance and ensuring that the manufactured products conform to clear specifications. The emphasis here is that customers expect the product to perform reliably and therefore, quality means `**zero defects'**.

While manufacturing companies focus on minimizing the defects in the products, service businesses have an emphasis on "zero defections" of customers. In the service view of quality, businesses have to pay attention to `consumer satisfaction' and thus product specifications are not just set by a manufacturer who tells the consumer what to expect; instead, consumers also may participate in setting specifications. Here, quality means `**consumer satisfaction'**.

In software and information products, the concept of quality usually incorporates both the conformance and service views of quality. On the one hand, there exists a minimal set of features that must always work. On the other hand, when customers have problems using a software package, they define quality according to the technical support they experience. The view of quality in software products has yet another dimension. Software users expect a continuous stream of novel features: the promise of upgrades, high performance and reliability, ease of installation, use and maintenance. Their perspective of quality consists of a **synthesis of conformance, adaptability, innovation and continuous improvement**. In many ways this is the perspective of quality in higher education – synthesis of a range of expectations of many stakeholders.

In reality, quality in higher education means different things to different stakeholders. For instance, while discussing quality of an institution of higher education, students may focus on the facilities provided and their perceived usefulness of education for future employment; teachers may pay attention to the teaching-learning process; the management may give importance to the institutional achievements; parents may consider the achievements of their children; and employers may consider the competence of the graduates of the institution. Each stakeholder would have a different approach to define quality. It is not possible, therefore, to talk about quality as a unitary concept. Any definition of quality must be defined in terms of the context in which it is used. In the case of higher education institutions we should bear in mind that an institution may be of

high quality in relation to one factor or in the perspective of one category of stakeholder but low quality in relation to another.

Considering these factors, Green (1994) has identified five different approaches to the viewing of quality in the field of higher education. According to her, quality may be viewed:
- in terms of the exceptional (highest standards),
- in terms of conformance to standards,
- as fitness for purpose,
- as effectiveness in achieving institutional goals, and
- as meeting customers' stated or implied needs

(i) Quality as Exceptional: This traditional concept of quality is associated with the notion of providing a product or service that is distinctive and special, and which confers status on the owner or user. In higher education, an institution that demonstrates exceptionally high standards is seen as a quality institution.

(ii) Quality as conformance to standards: This concept is associated with the quality control approach of the manufacturing industry. Here, the word `standard' is used to indicate pre-determined specifications or expectations. As long as an institution meets the pre-determined standards, it can be considered a quality institution fit for a particular status. This is the approach followed by most regulatory bodies for ensuring that the institutions or programs meet certain threshold levels. Conformance to standards may result in approval to start programs or recognition for a particular status or funding depending on the context.

(iii) Quality as Fitness for Purpose: This approach is based on the view that quality has no meaning except in relation to the purpose of the product or service. For example, one does not need a super computer to do basic multiplications. What may be considered as a quality system for basic computation would be different from what is required for scientific experiments.

(iv) Quality as effectiveness in achieving institutional goals: This is one version of fitness for purpose approach mentioned above where the purposes are determined by the institution. In this approach, a high quality institution is one that clearly states its mission (purpose) and is efficient in achieving them. This approach may raise issues such as the way the institution might set its goals (high or moderate or low) and how appropriate those goals could be.

(v) Quality as meeting customers' stated or implied needs: This is also a variation of fitness for purpose approach where the purpose is customer needs and satisfaction. The issue here would be whether customer satisfaction can be equated to what is good for the customer. Are `needs' same as `wants'? In higher education it would mean that what students want may not be the same as what is actually good for them. Instead of considering one category of customer, such as students, when a broader group is involved, such as government, students and parents, in determining `customer needs' and `customer satisfaction' this approach becomes more reliable.

There are also phrases such as `value for money', `value addition' and `transformative process' that are used to define quality in higher education. In the value for money point of view, something has quality when it meets the expectations of the consumers who pay for it; quality is the satisfaction of the consumers may it be students (who are direct consumers and invest their active time for learning) or parents (who pay for the educational services of their children) or the government (that sets national policies and invests public money for educational services). From the 'value addition' point of view, an institution that enables a student to enhance his/her knowledge, competence and employability is considered as successful in its 'value addition' efforts and therefore of quality. The transformative process pays attention to the way higher education could play a key role to develop a variety of desirable attributes in students apart from providing them with a body of academic knowledge.

In other words, it is important to note that there is no one right definition for quality. All the above concepts (and others) are valuable and there is significant variation in the definition adopted by the different QA agencies.

From the notion of quality, the quality assurance agencies identify areas that they consider as core to their quality assurance process and one can find a great commonality here.

3.2. Areas of Quality Assessment

It is true that variations among the quality assurance agencies can be seen in the methodology (accreditation or audit or assessment), the nature of the process (mandatory or voluntary), the unit of assessment (institution or program), the outcome of assessment (no grading or two-point scale or multi-point scale) and the policy on disclosure of the outcome (confidential or public). In spite of the variation, most quality assurance systems have certain common elements; they base their evaluation on well-defined transparent quality assurance framework and conduct the quality assurance exercise as a combination of self-study and peer review. The areas that are considered as core to quality, usually

spelt out in the quality assurance framework, have many commonalities. In fact, it is this commonality that might help quality assurance agencies to explore mutual recognition possibilities.

The areas that are considered by the quality assurance agencies that do institutional accreditation are also similar. In August 2002, the Asia-Pacific Regional Bureau of Education, Bangkok sponsored an Expert Meet on "*Indicators of Quality & Facilitating Academic Mobility Through Quality Assurance Agencies*" for the Asia-Pacific region. The meeting was well attended by quality assurance and higher education experts from eight countries. In the expert meeting there was a consensus that the following are key to quality: Integrity and mission; Governance and management; Human resources; Learning resources and infrastructure; Financial management; Student profile and support services; Curricular aspects; Teaching-learning and evaluation; Research, consultancy and extension; and Quality assurance.

The expert meet also identified the sub areas to be seen under the key areas and they are given in the Appendix. The above mentioned areas are only indicative of how a group of quality assurance agencies have identified key areas that have a bearing on the quality of institutions. One can notice that some of them are amenable to quantitative expressions and there are some that would be qualitative. While the outcome of the expert meet highlights the areas of assessment for institutional quality, the case of Philippines indicates that all the accrediting bodies that do program accreditation have common areas of assessment - Purposes and Objectives, Faculty, Instruction, Library, Laboratories, Physical plant and facilities, Student personnel services, Social orientation and community involvement, Organisation & research administration.

The two examples also indicate that the areas of assessment overlap for institutional and program accreditation. However, there would be difference in terms of focus and scope. While the curricular aspects under institutional accreditation may be more about the overall policies and practices of the institution, the program accreditation would look into the quality of the curriculum of the program under review more closely. The institutional accreditation might also look at the quality of one or more programs to seek evidence for the evaluations; but the purpose is not to pass judgement about the quality of the curriculum of a particular program but to draw inferences about the overall curricular aspects of the institution.

Based on the notion of quality and what is considered as core for the specific quality assurance process, the quality assurance agencies develop their procedures and evaluative

framework for quality assurance and in this process they use a variety of terms interchangeably. An attempt was made to define some of those terms.

3.3. Defining basic terms
<u>(i) Statistics and indicators</u>

The word statistic is at times used interchangeably with statistical data. While `Statistics' is a branch of mathematics that deals with systematic collection, organization, and analysis of data, statistical data relates to facts and items treated statistically or collected, and organized systematically. Simple forms of statistics have been used since the beginning of civilization, when pictorial representations or other symbols were used to record numbers of people and animals. From those simple beginnings today statistics has grown in significance to become a reliable means of systematic data collection on various aspects of economic, political and sociological importance and serves as a tool to correlate and analyse such data. Very often quality assurance agencies use the term statistics to denote statistical data.

The quality assurance agencies collect and anlayse data on many aspects of the institutional functioning or program delivery. Data collected systematically – primary and derived – with or without any value addition are called statistic. They are the building blocks of all the value added specific terms we come across latter such as performance indicators. For example, details like student enrolment, academic calendar, fee structure etc collected from an institution or a system are statistic. When they are interpreted and used to indicate something they become indicators. Statistics by themselves (may or) may not indicate any signal or judgement.

Indicators are signposts which indicate something. In the context of quality assurance they can give a signal about an aspect of quality. Indicators can signal on many aspects of the institution or programme. While an indicator is a statistic not all statistics are indicators. Indicators are value-added statistics (signal) about something that is being measured and there is a reference point, against which to interpret the indicator. In other words indicators differ from statistics in that they are signals of aspects under review.

Some quality assurance agencies make a distinction between Input Indicators, Process Indicators and Output Indicators. They thus use the assumption that the education process has resemblance with a production process that transforms inputs with processes into outputs and outcomes. Input indicators relate to the resources and factors employed to produce an institution's outputs (financial resources, physical facilities, student and staff profiles). Process indicators relate to the ways in which resources and factors are combined and used in order to produce an institution's output (management of teaching,

research and services). Output indicators describe the outputs produced by institutions (products of teaching, research and services). To these may be added Throughput Indicators and Outcome Indicators. Outcome Indicators are the effects of outputs (employment rates).

Indicators can be both qualitative and quantitative. There are quality assurance agencies that do not provide explicit norms and quantitative indicators on the count that once made explicit the norms might become counter productive to 'institutional diversity' and promote compliance culture. Agencies that do not want to be very prescriptive do not give specific quantitative targets for institutions to comply with. But they may provide detailed guidelines on issues such as demonstrating adequacy and efficiency. For example, an agency may not insist that for every ten students there should be a teacher. It might not insist that the post graduate programs should be handled only by the doctoral degree holders. But it might say in general language that it should have adequate, qualified and competent faculty to run the program under review.

Performance indicators and indicators of quality are two specific usages of indicators, depending on what they indicate. Performance indicators are one category of indicators that provide signals about the performance aspects. When the indicators signal an aspect of quality, they can be called indicators of quality.

(ii) Performance indicators and Indicators of Quality
The indicators used for evaluating the performance of an institution, or for adjudging the effectiveness of a program, are often referred to as 'performance indicators'. The idea of performance evaluation in higher education has been borrowed from economics where the success of a system or institution is related to its productivity in terms of effectiveness and efficiency. As a result, in discussions on performance indicators one may often come across Effectiveness Indicators and Efficiency Indicators. Effectiveness indicators deal with the extent to which an activity fulfils its intended purpose or function such as completion rates, graduate employment rates and student satisfaction. Efficiency indicators deal with the extent to which an activity achieves its goal whilst minimising resource usage such as staff-student ratios, unit costs and space utilization.

The basic purpose of a performance indicator obviously is to evaluate the performance of a system, institution or organisational structure. It may be used for various purposes: monitoring, decision support, comparing, evaluating, and improving. For instance, the funding agency may use the PIs for funding decisions. An institution may like to use performance indicators for comparing. The quality assurance agency with the `improvement' agenda may like to draw the attention of the institution or the government

to areas that need further improvement. Depending on the use to which it would be put into, the quality assurance agencies may have a combination of approaches. Performance indicators help to identify problems, but they are not able to establish causal relationships.

A slight variation in focus – emphasis on quality related aspects – differentiates indicators of quality from performance indicators. Following the publication of the Jarratt Report, in 1985, by the Committee of Vice Chancellors and Principals, UK, considerable interest has been generated, the world over, on the use of indicators in evaluating different aspects of higher education. A very large number of such indicators have been identified, most of them related to the performance of institutions, and as many as 264 have been listed by Bottrill and Borden in 1994 (many more might have been added by now).

Performance of institutions or quality of program delivery may be influenced by a variety of factors and assessing the institution or program considering all those factors is not an easy task.

(iii) Standards
This is also a term that came from the industry. Standards are sets of characteristics or quantities that describe features of a product, process, service, interface or material. `Standards New Zealand' defines standards as specifications which define materials, methods, processes or practices. In industry, standards provide a basis for determining consistent and acceptable minimum levels of quality, performance, safety and reliability. For example, the format of the credit cards that enable them to be used anywhere in the world is defined by international standards.

In higher education and quality assurance `standard' denotes a principle (or measure) to which others conform (or should conform) by which the quality (or fitness) of others is judged. It also has other meanings such as `the degree of excellence required for a particular purpose', and `a thing recognized as a model for imitation'.

Standards can be expressed in many ways – quantitatively and qualitatively. In quality assurance, to make a judgement whether standards are met, some agreed level has to be determined or set. This agreed level may be quantitative (e.g. student-teacher ratio) or qualitative (e.g. adequate competent qualified faculty). From the examples given with in brackets it is clear that issues perceived to be quantitative can have a qualitative basis and most qualitative aspects can be given a quantitative expression. We talk about student-teacher ratio based on the assumption that a particular ratio is necessary for good teaching-learning. Similarly, competent qualified faculty can be expressed in terms of

academic qualification, years of experience, publications record, student evaluation of faculty etc. Consequently, some agencies develop standards based on good practices that are required in quality institutions or programs; there are also agencies that spell out detailed specifications to be fulfilled and they rely more on quantitative specifications such as student intake, number of faculty, library requirement etc.

The standards prescribed in quantitative terms may be mostly about 'inputs" required in the institution to offer a quality program. There are agencies that have shifted their focus to "outcomes". In most program accreditation in professional areas of studies, standards relate to good institutional procedures and practices with a practice focussed perspective. These agencies have interpreted quality in terms of how effectively new entrants to the profession have been prepared for their responsibilities. In recent years this has resulted in many professional bodies paying attention to competency-based standards to understanding quality. The agencies that adopt this understanding of quality generally require institutions and programs to demonstrate the 'output' of the program rather than the 'input' -- i.e. on developing competence among students to become competent professionals rather than on the number of hours of tutorial or the hours of hands-on experience provided.

There are also contexts where standard means the `basic' without any value-addition features or `average quality' or minimum requirements. Quality assurance might ensure only the minimum level requirement for a particular status and standards in such contexts are meant for compliance purposes and the outcome might have implications for approvals and sanctions. Within the context of diversification and privatization, most developing countries are confronted with manifold low level providers and for dealing with this low quality providers, minimum standards are now frequently the priority.

It should be remembered that quality assurance deals with institutions and programs of varying levels of quality and the quality concerns of the countries vary greatly. Within the same country many mechanisms may co-exist to address different quality concerns. In general, the quality assurance agencies that look into minimum standards and the ones that go beyond the minimum requirements in the same system compliment each other's work since mechanisms are required for ensuring threshold level of quality as well as to enhance quality among the institutions that have crossed the threshold level.

(iv) Criteria
Criterion is an aspect or element that a thing is judged by. The INQAAHE glossary defines criteria as below:
`Criteria are the specifications or elements against which a judgement is made'.

The difference between criteria and standards needs a mention here. While the criteria indicate the elements or aspects, the standards set the level. AUQA glossary indicates that `One function of standards is to measure the criteria by which quality may be judged.'

In practice, the terms criteria and standards are used interchangeably by quality assurance agencies. But, the National Assessment and Accreditation Council (NAAC) of India differentiates between criteria and criterion statements which may be worth considering. In NAAC's framework, criteria are the broad aspects on which the quality of the institution is assessed and NAAC has identified seven criteria (Curricular Aspects; Teaching-learning and evaluation; Research, consultancy and Extension; Infrastructure and learning resources; Student support services; Organisation and management and Healthy practices). The criterion statements are similar to the standard statements used by the regional accrediting agencies of the USA. The criterion statements set the level or standards to be achieved under the broad aspects/criteria.

The criteria spelt out by the NAAC are in terms of aspects whereas the criteria spelt out by the Higher Education Quality Committee of South Africa are in the form of statements. Both expressions (the criteria of HEQC and the criterion statements of NAAC) are similar to the standard statements of the regional accrediting agencies of the USA. For example, one of the criterion statements of NAAC is 'The institution has an efficient mechanism to recruit qualified and adequate faculty'. A criterion of HEQC is stated as below: 'Staff capacity in relation to program needs is regularly reviewed.' These are similar to the standard statement of the Middle States Council on Higher Education and an example is: 'The institution's instructional, research, and service programs are devised, developed, monitored and supported by qualified professionals.' Although the agencies vary in the use of terms, they all mean aspects – with or without the levels or specifications - to be considered to assess quality.

(v) Benchmarks
Benchmark is a point of reference to make comparisons. Benchmark in olden days was a surveyor's mark cut in a wall, pillar, buildings, etc, used as a reference point in measuring altitudes. Today the term is used in all activities that involve comparisons. INQAAHE glossary gives the following definition: "A benchmark is a point of reference against which something may be measured'.

Benchmarking is, in the simplest definition, the process of identifying benchmarks; it is about learning by making comparisons. For centuries comparisons have been made in many informal ways and today benchmarking has come to mean a formal process of

comparison as a way of generating ideas for improvement; preferably improvements of a major nature. American Society for Quality defines benchmarking as an improvement process in which an organisation is able to measure its performance against that of best in class organisations, determine how those organisations achieved their performance levels and use the information to improve its own performance. INQAAHE Glossary defines benchmarking as "a process that enables comparison of inputs, processes or outputs between institutions (or parts of institutions) or within a single institution over time".

There are many ways of benchmarking that serve different purposes. Considering the options available in the types of benchmarks and the methodologies is essential to understand this variety. One of the classifications given in the publication `Benchmarking in Higher Education: An International Review (1998)' of Commonwealth Higher Education Management Service (www.chems.org) is as below:

Internal benchmarks for comparisons of different units within a single system without necessarily having an external standards against which to compare the results

External competitive benchmarks for comparison of performance in key areas based on information from institutions which are seen as competitors

External collaborative benchmarks for comparisons with a larger group of institutions who are not immediate competitors

External trans-industry (best-in-class) benchmarks that look across multiple industries in search of new and innovative practices, no matter what their source

K R McKinnon et.al (2000) in 'Benchmarking: A manual for Australian Universities' discusses two kinds of benchmarks—*criterion reference and quantitative*. The criterion reference approach simply defines the attributes of good practice in a functional area. The benchmark could be simply a checklist of essential attributes constituting good practice. Quantitative benchmarks, on the other hand, inevitably distinguish normative and competitive levels of achievement. These distinguish where practice is quantifiably different in some institutions.

There are many more types one can come across in the literature on benchmarks. For developing these benchmarks, the methodologies that can be adopted are also many. For example, the `*Ideal type standards (or gold standards)'* is an approach whereby a model is created based on idealised best practice and then used as the basis to assess institutions on the extent to which they fit that model. On the other hand *Vertical benchmarking* is an approach which seeks to quantify the costs, workloads, productivity and performance of a defined functional area. Consequently, depending on the approach, benchmarks can be in many forms - qualitative (example, successful practices) or quantitative (example, ratios). They can be expressed as Practices or Statements or Specification of outcomes all

of which may overlap. In particular, benchmarks can be either Practices or Metrics where metrics are the quantified effect of implementing the practices.

Considering the above factors, the following definitions were agreed upon by the participants of the discussions:

Statistic	– Statistical data or data collected in a systematic way
Indicator	– Data or statistic that indicates or signals something
Performance Indicator	– Data that signals some aspect of performance
Indicator of Quality	– Data that signals some aspect of quality
Criteria	– Aspects or elements against which a judgement is made
Standards	– Specification of aspects or elements or principles to which others should conform or by which the quality of others is judged
Benchmark	- A point of reference to make comparisons

With these definitions in the background, the project analysed how the various terms are used by the quality assurance agencies of the region and what the next steps could be for strengthening regional cooperation.

4. Phase III: Survey and the Analysis

The discussion note developed in Phase II was discussed in the APQN annual conference at Shanghai in 2006 and fine tuning was done based on the feedback received in the workshop on the topic. The survey questionnaire was developed and discussed at the APQN conference at Kula Lumpur (February 2007). The survey questionnaire can be found at Appendix 1.

Survey questionnaires were sent only to the full members and intermediate members. This was done intentionally since many members in the associate membership category as well as the observers come from backgrounds that might not directly contribute to the objectives of the project at this stage. The project primarily aims to understand the way QA agencies use indicators of quality for QA decisions. Therefore, it was decided that for the first level preliminary analysis the survey may focus on full and intermediate members. If the project proceeds to the next levels, at that stage, screening the associate members for the value they can add to the survey might be considered.

Out of the twenty full members who were sent the survey questionnaire the following fourteen responded.

1. Australia   Australian Universities Quality Agency (AUQA)
2. Australia   National ELT Accreditation Scheme Ltd (NEAS)
3. China   Shanghai Educational Evaluation Institute (SEEI)
4. Hong Kong   Hong Kong Council for Academic Accreditation (HKCAA)
5. Hong Kong   University Grants Committee (UGC)
6. India   National Assessment and Accreditation Council (NAAC)
7. Japan   National Institution for Academic Degrees and University Evaluation (NIAD-UE)
8. Japan   Japan Accreditation Board for Engineering Education (JABEE)
9. Japan   Japan Universities Accreditation Association (JUAA)
10. Malaysia   Malaysian Qualifications Authority (MQA)
11. New Zealand New Zealand Universities Academic Audit Unit (NZUAAU)
12. New Zealand New Zealand Qualifications Authority (NZQA)
13. Philippines   Philippine Accrediting Association of Schools, Colleges and Universities (PAASCU)
14. Russia   The National Accreditation Agency of the Russian Federation (NAARF)
15. Thailand   Office for National Education Standards and Quality Assessment (ONESQA)

The response rate of 75% is good.

Out of the eight intermediate members who were sent the survey questionnaire the following four responded.

1. Mongolia   National Council for Education Accreditation of Mongolia (NCEA)
2. Samoa   Samoa Qualifications Authority (SQA)
3. Sri Lanka   Quality Assurance and Accreditation Council (QAA) of Sri Lanka
4. Vietnam   General Department of Education Testing and Accreditation (GDETA)

The response rate of 50% is satisfactory but not as good as the response from the full members.

Based on the responses received so far the analysis has been done. Trends that emerge from the responses have been identified in this report. It should be noted that ease of reading, in cases where there is only one respondent from a country, the name of the agency and the country have been used interchangeably.

4.1. Emphases re quality and quality assurance

Most respondents (AUQA, HKCAA, NZUAAU, Hong Kong UGC, India, Vietnam) see quality as 'Fitness for Purpose'. This focus is reflected in the questions asked by the agencies such as "What are goals and objectives (purposes) of the entity being reviewed? What systems and activities support the achievement of its goals and objectives? How well does it achieve its objectives? How does it know that the objectives are being achieved well? How does it seek feedback, analyse results and improve its performance further?"

Even the QA bodies that do not wish to endorse a single definition of quality for their QA processes (because of various stakeholder perspectives and the context in which it is used) give a major place to 'fitness for purpose'. For example, in the case of PAASCU, of the various definitions (in terms of the exceptional; in terms of conformance to standards higher than the minimum standards set by the government; fitness for purpose; effectiveness in achieving institutional goals.), the agency has included 'fitness for purpose' in its attention.

In some evolving systems (SEEI) and systems that have an emphasis on accountability (NAARF) although there is more emphasis on conformance to standards, 'quality as fitness for purpose' is also recognised. The standards and their levels expected by the SEEI and NAARF may differ greatly but the two agencies have a similar focus on

accountability and certain threshold levels. In contrast to this, PAASCU considers quality to mean as meeting standards higher than those mandated by government.

Systems that are clearly oriented to ensuring certain threshold levels such as qualifications authorities (NZQA) have the 'conformance to standards' approach. The QA processes of NZQA include, among other things, initial registration (or establishment), course approval, and accreditation. There are gazetted criteria for course approval and accreditation (gazetted by NZQA in 2002) that are applied to approve courses and accredit education providers to deliver the courses. Each element of these criteria is made up of a number of requirements that must be met to be fully compliant.

QAA of Sri Lanka views quality as effectiveness in achieving institutional aims and intended learning outcomes. QAC-UGC of Hong Kong has an emphasis on student learning experience. NEAS considers quality as meeting industry set standards. There is also a strong emphasis on continuous improvement and quality enhancement in these definitions.

Overall, there are varying emphases on defining quality. Variations range from 'fitness for purpose' to 'conformance to standards'. In the 'fitness for purpose' approach, quality assurance generally refers to the process to evaluate how well an institution or its programs achieve the stated objectives. In the accountability approach, QA is more about compliance or conformance to certain externally pre-defined expectations. In spite of these variations and consequent difference in the quality assurance processes, 'fitness for purpose' and or 'quality improvement' have key place (s) in the QA regime of the region.

4.2. Indicators of Quality in use

In some form or the other, indicators of quality are used in quality assurance procedures by almost all respondents - JABEE, JUAA, HKCAA, NEAS, NIAD-UE, NZQA, NZUAAU, PAASCU, India, Malaysia, Mongolia, Russia, Sri Lanka, Thailand, and Vietnam. SQA and UGC do not rely much on indicators due to the difference in the nature of their QA processes.

The respondents agreed that indicators can be both qualitative and quantitative statements that apply to aspects of quality. They agreed that indicators are data or statistic, and qualitative and or quantitative, that indicate or signal some aspect of quality.

NZUAAU considers them as quantitative and qualitative measures which indicate progress towards stated goals and objectives. In New Zealand, the move towards a more quantified approach could be seen. NZQA uses gazetted criteria and quality assurance standards in its quality assurance processes. These are a set of broad requirements rather than quantifiable indicators. New Zealand is moving on to a new outcome-focused quality assurance and monitoring system in 2010. The system is being developed and will be piloted in 2008. Under the new system, quantifiable performance monitoring indicators will be used by Tertiary Education Commission (the tertiary funding agency in NZ) and also by NZQA to inform their decisions. These indicators are also being designed.

Various equivalent terms are used to denote 'indicators of quality'. HKCAA uses the term "area" in its accreditation guidelines which essentially means an aspect or element that something is judged by. Russia follows the CIPP (context-input-process-product) model and uses input indicators, process indicators and outcomes. JABEE has review items built in the "Criteria for Accrediting Japanese Engineering Education Programs" and reviewers rate the items in accordance with a rating scheme. Vietnam and NEAS follow a set of 'standards' at the macro level and criteria related to those standards. NAAC has seven 'criteria' and under each criterion there are criterion statements and key aspects and they are used as indicators of quality. 'Aspects' (Sri Lanka), standards and criteria (Malaysia, Samoa), criteria (NIAD-UE), standards, benchmarks (Mongolia), focus areas (QAC-UGC), gazetted criteria (for course approval and accreditation by NZQA), and quality assurance standards (for quality audit of NZQA) are a few more examples.

The survey indicated that the APQN members had many different ways of disseminating to their clientele 'what indicates quality' and what how they are used by the agency fro QA decisions. For the assessment of an institution, HKCAA requires evidence to substantiate that the provider meets the standards in the following areas: Organisational Management, Quality Assurance System, Program Development, Staffing, Financial and Physical Resources. For the assessment of a program, the provider needs to submit evidence for meeting the standards pertaining to the following: Program Development, Program Content and Structure, Admission Requirements and Student Selection, Teaching and Learning, Assessment, Staffing and Staff Development, Financial and Physical Resources, Student Support Services, Student Records and Information Management.

The gazetted criteria of NZQA are: Course title, aims, learning outcomes and coherence; Delivery and learning methods; Assessment; Acceptability of the course; Regulations;

Resources; Evaluation and review. Quality Assurance Standards are: Definite goals and objectives for education and training; Systems to achieve goals and objectives -including management; personnel; physical and learning resources; learner information, entry and support; development, delivery and review of programs; assessment and moderation; notification and reporting in learner achievement; and research; Achievement of goals and objectives by showing internal management systems (including audit processes) in place are effective, applying performance indicators and collecting feedback from stakeholders.

QAA of Sri Lanka uses 08 components or aspects for each institutional and program review. Institutional aspects are: University goals and corporate planning, Financial resources and management, Research, Quality management and administration, Quality assurance, Learning resources and student support, External degree programs and University/Industry/Community/Other extension activities. Program aspects are: Curriculum design, content and review, Teaching, learning and assessment methods, Quality of students, including student progress and achievement, The extent of student feedback qualitative and quantitative, Postgraduate studies, Peer observation, Skills development and Academic guidance and counselling.

NAAC uses seven criteria (Curricular Aspects; Teaching-Learning and Evaluation; Research, Consultancy and Extension; Infrastructure and Learning Resources; Student Support and Progression; Governance and Leadership; Innovative practices) and key aspects have been spelt out under each criterion with specific weights attached to each.

In summary, QA agencies use indicators of quality, variously named, and use them as a combination of quantitative and qualitative indicators. Most agencies emphasize the qualitative nature of most of the indicators they use.

4.3. Some descriptions of indicators

'Standards and criteria' and 'Statements of good practice' are the often used ways to indicate quality. Most quality assurance agencies (JABEE, JUAA, HKCAA, NEAS, NZQA, NIAD-UE, PAASCU, India, Malaysia, Mongolia, Russia, Samoa, Vietnam) indicate that 'Standards and criteria used for quality assurance' are the indicators of quality they use. In addition to this, NAAC also uses 'Statements of good practices'. SEEI also has 'Statements of good practices' while QAA has subject benchmark statements in addition to codes of practice which are like statement of good practices.

Russia and PAASCU have quantitative norms. HKCAA and PAASCU have descriptors of different levels of quality. Thailand uses all the different combinations of indicators – quantitative, qualitative, descriptors and statements of good practices.

All the respondents make the indicators public. At PAASCU, the indicators are indicated in the Evaluation Instrument used by the institutions in their self-study. The developments at New Zealand suggest that indicators of all sorts will be required by the Tertiary Education Commission, and it is expected that the reporting against those indicators must be owned by the tertiary providers. NZQA states that the standards and criteria are published on the NZQA website, and are publicized at NZQA quality assurance conferences. At Vietnam, the standards and criteria were approved by the minister of education and training, and then were sent to universities.

Overall, 'what indicates quality' in the QA processes is public knowledge. None of the respondents use indicators only by reviewers or agency for quality assurance decisions that are not made known to the HEIs.

In Australia, China, Hong Kong, India, Japan, Mongolia, Philippines, Samoa, and Vietnam, the indicators are used for guiding peers/reviewers, for guiding HEIs towards quality improvement, and for quality assurance decision-making. In New Zealand, NZUAAU would/does use data, and notes trends in data, with respect to guiding HEIs towards quality improvement, and quality assurance decision-making while the Tertiary Education Commission, (not the quality assurance agencies such as NZUAAU), will use data in arriving at funding decisions. NZQA and Russia use indicators for guiding HEIs towards quality improvement and for quality assurance decision-making. QAA uses them for guiding peers/reviewers and for guiding HEIs towards quality improvement. Vietnam emphasises the use of indicators in guiding the self review itself and NEAS considers them as platforms for continuous improvement.

Most respondents indicate that the indicators were developed by the agency in consultation with the HEIs. Some take extensive feedback from stakeholders. For example, China consults the stakeholders, including the government officials, the researchers of the field and persons from the HEIs; and following the adaptation with the suggestions, and makes the pilot evaluation; at last, get the final version through the feedback from the pilot evaluation. Russia, Mongolia and JABEE indicate that the criteria were developed by the agency but institutional feedback is considered. In the case of Vietnam, foreign expert drafted the indicators which were then revised by the Division of Accreditation, and then discussed with universities' representatives several times. NEAS follows indicators given by the government, and developed by the agency staff but then

the feedback from the sector is considered. In Thailand, a committee of scholars who are experts and experienced in education (national and international) developed the indicators.

In general, indicators of quality used by the agencies are in the public domain and involving the higher education sector appropriately in agreeing on indicators of quality could be observed. Statements of good practices and codes of practices seem to be the predominant way of using indicators. The survey also reveals that most respondents use the indicators for guiding reviewers, for guiding HEIs towards improvement and for quality assurance decision making. JUAA states that its use of indicators helps the agency to ensure fairness and transparency of the evaluation.

4.4. Using the IQ for QA decisions

In most QA procedures, 'fitness for purpose' principle drives the use of indicators. In such cases, the indicators are qualitative in nature and assessors have flexibility in using these indicators as guidelines with flexibility. HKCAA, NEAS, NZQA, China, India, Russia, Samoa and Vietnam adhere to this approach.

The extent of flexibility varies in some cases. For example, QAA indicates that it gives 75% flexibility to reviewers while Mongolia claims 60% flexibility. The rationale behind these percentages and how the agencies ensure the percentages have not been explained. But it is reasonable to assume that it is an indication of the agency's role in moderating flexibility exercised by the peers.

Flexibility varies depending on the nature of the indicator. Some agencies have a combination of qualitative and quantitative indicators. For example, in the case of PAASCU, quantitative indicators have to be complied with by the institution because these are based on the minimum requirements from the government. Meeting threshold standards are mandatory for granting accreditation to institutions. A school that does not meet the threshold standards cannot be granted accreditation. JABEE has certain quantitative part such as "Quantitative Curriculum Requirements" on required credit units and contact hours. Programs should demonstrate to meet the criterion. Peers do not have flexibility in judging performance against quantitative indicators that are indicative of minimum expectations.

In Vietnam, 6 out of 53 criteria applied by GDETA are quantitative. The peers have the flexibility to use them as guidelines probably due to the nature of those indicators which set levels much above the minimum expectations.

When assessment is against what law requires, the approach seems to be more rigid. For example, NIAD-UE states that judgement is strict when review is about checking in accordance with a law or any other regulation by the government. Otherwise, reviews evaluate the effect of appropriate activities of education and research, and they are guided by quantitative rules.

The indicators are mostly used as guidelines with flexibility. Flexibility is less in the case of quantitative indicators that set minimum standards. Peers have less flexibility while checking against what law requires.

4.5. Implications for non-adherence to IQs

In the accreditation model, loosing the accreditation status (PAASCU, China, Russia, Sri Lanka, Vietnam, India, Samoa, Mongolia, NEAS) seems to be the major consequence that has other second order but very powerful consequences such as loss of grant, loss of reputation, difficulty in attracting good staff and students. In Samoa it results in withdrawal of permission to operate as a HEI. NEAS and Mongolia stipulate tighter controls and less turn around period of time to rectify / clarify the concerns that emerge from the reviews.

HKCAA gives a "conditional approval" decision if the provider by and large is deemed ready to offer the program but there are certain critical gaps to be closed through the fulfilment of certain mandatory "pre-conditions" before the start of the program (in the case of program validations). The panel may also impose mandatory 'requirement' but which can be fulfilled after course commencement. Where the panel considers that the inadequacies identified are so fundamental that the provider is basically not ready for the accreditation status it has applied for, or the panel is not convinced that the provider can address essential issues of concern within a reasonable timeframe, a "non-approval" decision is made.

In the case of AUQA and NZUAAU, the implications at present are that the inadequacies will be made public through audit reports, and universities will be responsible for addressing performance which indicators suggest may be substandard. That might make the other stakeholders such as the governments to impact on tighter controls and funding levels.

Regarding registration (Private Training Establishments only), course approval and accreditation, an application may be declined by NZQA if it is considered the applicant hasn't and is not likely to meet the criteria or standards. Regarding quality auditing, depending on the seriousness of the requirements not met, the auditor may:

- accept the action plan and check its implementation at the next audit; or
- request evidence of implementation of the action plan over an agreed time period after the audit is closed. This could involve an on-site visit to verify the evidence. This is treated as an audit with a specific focus.

If the action plan is not carried out satisfactorily within the agreed timeframe, legislation allows for compliance action to be taken.

JABEE accredits programs for five years. However, when a program is found to have minor problems, a reduced term of validity may be granted with the intention to encouraging rectification. When a program is found to have deficiency to satisfy a criterion, the program is not accredited.

In Thailand, with respect to aspects where non-adherence to the indicator is noted by the assessment team, the institution has to agree on an improvement plan with time frame and the QA agency will do the follow-up.

Malaysia revokes the approval to offer higher education program if it does not meet the expectations of the standards and criteria. Institutions are expected to make improvements within specific timeframes.

All APQN members indicated that non-adherence to the indicators has consequences that vary from 'recommendations and advice' for further action to funding sanctions or denial of approval to offer a program.

4.6. The IQ Framework (IQF)

The IQ framework sent to the respondents had ten major sections and under each major section there were sub indicators. The IQF may be found at Appendix 2.

Many respondents have noted that the indicators included in the IQF are similar to the ones that they already use. Most respondents find all aspects listed in the IQF relevant (PAASCU, China, Malaysia, NZUAAU, NZQA, Sri Lanka, Vietnam, AUQA, NEAS, HKCAA, Thailand). China expressed the view that all the ten aspects are necessary for the comprehensive evaluation of HEIs, especially for the research-oriented HEIs.

In New Zealand, discussions on indicators of quality are in progress. The New Zealand government has set down its strategic priorities for tertiary education, and the Tertiary Education Commission is bound to assess the performance of tertiary providers in terms of the government priorities. NZQA considers Curricular aspects, Governance and

management, Teaching-learning and evaluation, Student profile and support services (student achievement), Integrity and mission, and Quality assurance as key aspects.

The agencies that have the 'fitness for purpose' approach indicate that depending on the purpose and stage of development of the entity being reviewed, appropriate focus is given to specific indicators.

QA bodies that have a specific focus have indicated that although the framework is in general relevant to them, there are areas that need emphasis in their processes. For example, QAC-UGC of Hong Kong audits relate to the quality of the student learning experience, including the teaching and learning aspects of research degree programs. From the student experience point of view, its audits also cover the management of resource allocation in regard to assuring a quality student learning experience.

From the English Language Teaching perspective, NEAS considers all the ten aspects in some form but at the core are: Student profile and support services, Curricular aspects, Teaching-learning and evaluation, and Human resources.

India indicated that most of the aspects of the IQF are relevant aspects but opined that wording such as 'Recruitment procedures' does not qualify to be an indicator. But a few other respondents state that indicators do not necessarily require an adjective and they can be neutral. For example, 'recruitment procedures' if done well will indicate quality practices and if not done well will indicate an area for improvement.

PAASCU considers Integrity and mission, Human resources, Teaching-Learning and evaluation, and Research, consultancy and extension as the most important areas among the 10 areas mentioned in the IQF and gives more weight to those aspects.

HKCAA's accreditation service is mainly used by non-government funded institutions which have a focus on teaching instead of in research. Consequently, the focus on the capability of the HEI to excel in research is of relatively less importance. NEAS finds 'Financial Management' relevant but it is limited in its monitoring of such.

Russia points out that indicators under Mission and Governance are mainly the prerogative of the State, and are mostly taken for granted while assessing the state educational system which constitutes 83% of the HEIs. However, those indicators are taken into account while assessing private educational sector. Similarly, Samoa indicated that sub-aspects such as Autonomy of governance may not be relevant to its processes.

In general, the IQF has been found to be relevant and due to variation in emphases the QA agencies prioritise them differently.

4.7. Next steps and co-operation in the region

The survey questionnaire gave four options to the respondents for 'next steps' to be taken: For each aspect spell out micro indicators to be covered; For each aspect develop statements of good practice; For each micro indicator fix quantitative norms; For each aspect define different levels of quality.

Majority of the respondents support that, for each aspect of the IQ framework, developing statements of good practice will be helpful (PAASCU, JUAA, China, NZAAU, NZQA, JABEE, Samoa, Malaysia, NEAS). NEAS brings to attention that for its QA context, the good practices need to be reflective of what is happening in the world of language teaching and QA.

In addition to statements of good practice, some respondents have opted for a few more options as well. For example, JABEE and JUAA indicate that, for each aspect of the IQF, defining different levels of quality is essential.

One of the respondents indicated that while the other suggestions tend to have a micro management, and could well take away the ownership of further refinement to indicators, the 'good practices' give the ownership to HEIs. The statements of good practice must NOT be worded as if they are 'prescriptions' of good practice or mandatory. They should be designed and presented in a way that makes it clear they are provided to assist countries/institutions work out for themselves what is best suited to their own contexts. Good practice statements would provide a benchmark, but must not be perceived to be the final word, nor used as if there are no other alternatives.

Russia supports spelling out micro indicators and fixing quantitative norms. Vietnam, Malaysia, JUAA and NEAS support spelling out micro indicators to be covered under each aspect. Sri Lanka, India and Mongolia support all the four directions: spell out micro indicators, develop statements of good practice, fix quantitative norms, define different levels of quality.

Some have argued that given the various contexts where the member agencies of APQN operate, it would not be appropriate to develop micro indicators and define levels of quality in quantitative terms. In addition, the development of such indicators or levels would be difficult since quality may be influenced by a variety of factors.

HKCAA, PAASCU, China, Sri Lanka, Vietnam, Samoa, NEAS, Mongolia, Malaysia, and Russia are positive about developing a set of Indicators of Quality common to the Asia-Pacific region.

NEAS cautions that there is movement towards a more global approach in the area of language teaching as opposed to regional. India and Japan opine that it is difficult, while also acknowledging that such an attempt will be a good contribution. India recommends further inter-agency benchmarking. Mongolia recommends that an International Team be formed to conduct a comprehensive research on indicators of quality and on the basis of this research develop common indicators, pilot and introduce them to QA procedures at regional level.

Malaysia suggests that developing a common understanding about the various terms would help avoid confusion and ease understanding of guidelines by practitioners among agencies. It will help set a regional or international framework. It has plans to involve international reviewers in its reviews in future.

AUQA, PAASCU, China and Malaysia are willing to work with agencies that are interested in moving this project forward. APQN's plan that by 2010 accrediting agencies recognize each others' judgments is appreciated and the response urges that APQN should start moving towards that goal. SEEI is willing to consider further cooperation with agencies that agree to the same set of indicators of quality. It sees cooperation in terms of information exchange for the cross-border HEIs, staff secondment and so on. NZQA is also happy to cooperate with agencies that agree to the same set of indicators of quality. The potential form of cooperation could range from simply information/good practice sharing up to working towards developing a common framework to align with other regimes like Lisbon convention and Bologna process. Vietnam is willing to consider and suggest a pilot. Mongolia is also positive about cooperation. HKCAA would consider cooperation when more details about the nature of such cooperation is available. Russia is willing to share the information concerning indicators of quality used in its QA procedures.

There are many positive responses and expression of willingness to cooperate further on refining a common IQF for the APQN region. Suggestions for next stages include: spelling out micro indicators; developing statements of good practice; fixing quantitative norms; defining different levels of quality; inter-agency benchmarking projects; common terminology for the APQN region; more research on indicators of quality, and project among agencies that agree to a set of common indicators.

However, this approach is not free from challenges and even the respondents who are in support of further cooperation express cautions.

4.8. Challenges

Most QA agencies have developed their process as a collaborative peer review process to suit the national context. The need for IQF to be sensitive to these characteristics has been noted by many respondents. The concern that "Indicators of Quality" in whatever forms, might become tools for comparing quality/quality assurance without taking into account the purposes and contexts of different quality assurance systems within different national contexts, emerged strongly in some responses. Another respondent suggested that there is a need to consider what is common from an international perspective – not just regional.

While a couple of the respondents do not see any major roadblock to cooperate further on IQ many others have expressed caution. The positive respondents affirm that IQs will be a great help to countries that are just beginning to put their own accrediting systems in place – e.g. Vietnam, Cambodia, Laos, etc. They do not have to reinvent the wheel. They can adopt or adapt the IQ framework to suit their needs and local contexts. However, the cautions and possible difficulties expressed by the other respondents are around diversity and contextual considerations such as:
- Difference in the education systems
- The needs of the communities of interest in each country
- The strategic priorities of governments and primary funders of education
- Vested interests of key players in quality
- The extent of diversity in the quality assurance systems in the region
- Individual country's flexibility and capability to change their system, if required to adopt the regional "indicators of quality" framework.
- Various factors that control certain indicators (e.g. government policy on student enrolment)
- Different developmental stages of the agencies involved
- Languages and culture
- Big gap among levels of socio-economic development of countries
- Varying perspectives on Indicators and measurements around them
- Huge cultural and socio-political diversity
- Risk of indicators becoming rigidly set without contextual consideration

While many challenges identified by the respondents are about external factors, there is a very significant internal factor identified by one of the respondents; it is about the

prioritisation of the agencies themselves. Not many agencies have thought beyond their national borders and collaboration and cooperation with counterparts across borders, beyond information sharing, has not been a priority to QA agencies.

While emphasizing the need for the IQF to take cognizance of the diversities and national contexts, the respondents are also aware of the ambiguities associated with a very general framework.

There is consensus that the indicators used should reflect the specific regime of the quality assurance bodies in different countries which will have their own policy considerations and focus in terms of educational and manpower development. There is also concern that the set of common indicators may then become very generic and general, not serving the intended purpose. The challenge is to balance the diversities and meaningful cooperation.

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5. Moving Forward…

The broad definitions given in the discussion note have been found to be helpful by many respondents. The general IQF has been found to be acceptable. The fact that the outcomes of this survey might help identify the extent of similarity of quality assurance systems and indicators applied by APQN member countries has been acknowledged in many responses.

There have also been expressions of interest for further cooperation, cautions to be noted and challenges to be addressed. Some respondents have given suggestions for refining the wordings and clustering of IQs.

Considering these factors, the following action points deserve attention:

7. Establish a common understanding of what is meant by each of the ten indicators (this requires a common understanding in basic QA terminology in the region)
8. Develop guidelines to interpret the IQF that will have regard to the diversities of the APQN membership
9. Initiate pilot projects among agencies that have conveyed willingness to cooperate on trying a common IQF
10. Promote inter-agency benchmark studies on core aspects of quality, what indicates quality and how they feed into the QA decision making.
11. Initiate pilot projects to map how the core aspects of IQF map in the QA decision making of agencies. This has the potential to contribute to the discussion on mutual recognition among reliable QA agencies.
12. Promote comparative studies on selected aspects of the IQF

While many of the external factors that challenge progress towards a common understanding of quality and indicators of quality, there is one internal factor on which a network like APQN can make a significant impact; that relates to the significance QA agencies attach to collaboration with each other beyond information sharing. This is an area that needs discussion at the network.

The APQN Board may consider whether the above mentioned action points require further support and guidance at the regional level, may be through a special interest group that will continue to advice on these initiatives, or whether these actions can be left to the initiation and enthusiasm of the member agencies.

It may be noted that the action points given above are not mutually exclusive. They overlap but with some difference in emphasis.

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Questionnaire on Indicators of Quality

[Various terms related to quality assurance are used in different ways by the APQN members. Sometimes the same term is used to mean different things by different entities. To help better understand the responses, the background paper (Appendix 2) explains the meaning of the terms used in this questionnaire. Some definitions that will help you to fill up the questionnaire are:

Statistic   *– Statistical data or data collected in a systematic way*
Indicator   *– Data or statistic that indicates or signals something*
Performance Indicator – Data that signals some aspect of performance
Indicator of Quality   *– Data that signals some aspect of quality*
Criteria   *– Aspects or elements against which a judgement is made*
Standards   *– Specification of aspects or elements or principles to which others should conform or by which the quality of others is judged*
Benchmark   *- A point of reference to make comparisons]*

Kindly answer as many questions as possible and return it before 5 September 2007.

1. In the academic interactions you have with your higher education institutions (HEIs) what is the definition of quality and quality assurance you adopt?

2. Do you use indicators of quality in your quality assurance procedures? If yes,
    a. How do you define the term and what are the indicators that you use?

    b. Which of the following would best describe the indicators you use?
        i. Standards and criteria used for quality assurance
        ii. Descriptors of different levels of quality
        iii. Statements of good practices
        iv. Quantitative norms
        v. Others (please specify)

    c. Have you made the indicators public to the HEIs or programs you assess?

    d. For what purpose do you use the indicators?
        i. For guiding peers/reviewers
        ii. For guiding HEIs towards quality improvement
        iii. For quality assurance decision-making
        iv. Others (please specify)

    e. Who developed the indicators?
        i. Given by the government
        ii. Developed by the agency staff
        iii. Identified in consultation with the HEIs

   iv. Others (please specify)

  f. If the indicators used are quantitative, do peers have the flexibility to use them only as guidelines? How much of peer assessment is guided by the indicators?

  g. Do you use indicators that are used only by reviewers or your agency for quality assurance decisions that are not made known to the HEIs? If yes, what are the reasons for not making the indicators known to HEIs?

3. If you do not use the term "indicators of quality" in quality assurance discussions, are there synonymous terms you use? What are they?

4. What are the implications for your clientele for not fulfilling the minimum expectations indicated by the Indicators of Quality or similar terms?

5. From the list of appended framework for indicators of quality, what are the ones that you would consider as the core aspects that indicate quality in your country's higher education context?

6. From the list of appended framework for indicators of quality, what are the ones, in your opinion, are not relevant to your context? For what reasons?

7. In relation to this project on 'Indicators of Quality', once the core aspects that indicate quality are identified by the member agencies of APQN, how would you like the project to proceed to the next stage?
  a. For each aspect spell out micro indicators to be covered
  b. For each aspect develop statements of good practice
  c. For each micro indicator fix quantitative norms
  d. For each aspect define different levels of quality
  e. Any other comment you would like to add.

8. Do you think it is possible to identify a set of 'indicators of quality' common to the Asia-Pacific region? If yes, would you be willing to consider further cooperation with agencies that agree to the same set of indicators of quality? What kind of cooperation do you envisage?

9. In your opinion, what are the difficulties in agreeing on a set of common Indicators of Quality for the Asia Pacific region?

10. (a) Any other comments on developing a common understanding about the various terms used by quality assurance agencies such as criteria, standards and benchmarks.

  (b) Make changes to the IQ framework in terms of wordings, additions, deletions, changing the order, wordings etc.

Framework for Indicators of Quality

Indicators to assess the quality of HEIs (Identified in the UNESCO supported Expert Meet of August 2002)

1. Integrity and mission
    - Honesty and transparency in policies and procedures
    - Interaction with the community and stakeholders
    - Clarity in mission
    - Understanding of aims and objectives by all constituents of the institution
    - Equity and reservation for the disadvantaged groups

2. Governance and management
    - Autonomy of governance
    - Clarity in organisational structure
    - Delegation of powers
    - Institutional effectiveness
    - Comprehensive Strategic plan
    - Effective Documentation
    - Modernization of administration

3. Human resources
    - Transparent recruitment procedures
    - Adequacy, qualification and competence of staff
    - Awards, honours, membership, prizes, medals of learned societies of staff
    - Effective retention strategies
    - Support for staff development
    - Recognition and reward
    - Appropriate staff workloads
    - Welfare schemes
    - Transparent grievance redressal

4. Learning resources and infrastructure
    - Ownership of land and buildings
    - Availability, access and sustainability of
    - Labs and lecture halls
    - Library and information technology facilities

Resources spent on the library and computing facilities matching demands

Adequate health services, sports and physical education and halls of residence

Effective campus maintenance

Optimum utilisation

Community use of institutional facilities

Commercial use of institutional facilities

5. Financial management

Transparency, and integrity in the following:

Funding sources

Ownership of resources

Sustainability of funding

Resource mobilisation

Resource allocation

Accountability

Liquidity

Budget for academic and developmental plans

Unit cost of education

Strategic asset management

Matching of receipts and expenditure

6. Student profile and support services

Transparent admission procedures

Student profile – gender, age, social strata, geographical distribution, foreign students, enrolment by levels of study, age ratio, staff/student ratio, out-of-state enrolment, distribution of entry grade

Drop out and success rate

Progression to employment and further studies

Student achievement

Student satisfaction

Provision for personal and academic counseling

Participation of staff in advising students

Availability of merit-based scholarships

Other scholarships and fellowships

Provision for informal and formal mechanisms for student feedback

Student representation in academic decision-making

Provision for student complaints and academic appeals

Support to student mobility

Recreational activities for students

Placement rate of graduates

Employer satisfaction with graduates

Graduate earning

Alumni association and alumni profile

7. Curricular aspects

Conformity to the goals and objectives

Relevance to societal needs

Integration of local context

Initiation, review and redesign of programs

Range of program options

Feedback mechanism on program quality

Interaction with employers and academic peers

Demand for various course combinations

8. Teaching-learning and evaluation

Teaching innovations

Use of new media and methods

Range of co-curricular activities

Skill and competence development

Projects and other avenues of learning

Linkage with institutions, industries and commerce for teaching

Linkage for field training

Monitoring student progress

Continuous internal assessment

Use of external examiners

Timeliness of examination schedule, holding of examinations, evaluation, declaration of results

Remedial and enrichment programs

9. Research, consultancy and extension

Institutional support for research

Staff active in research

Research students by field of study

Ph.D. awarded per academic staff

Research project per academic staff

Research projects sponsored by industry

Public sector research funding

Ratios of research expenditure and income
Research assistantships and fellowships
Staff supported by external research grants
Existing research equipment
Usefulness of research results for education
Social merits of research
Interdisciplinary research
Student involvement in faculty research
Research quality - Citation of publications, Impact factors, Patents and Licenses
Benefits of consultancy to industry and the public
Community-oriented activities

10. Quality assurance
Internal quality assurance
Institutional research on quality management
Coordination between the academic and administrative functions
Outcomes of external quality assessments
Academic ambience
Educational reforms