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TOWARDS A RELIABLE ACCREDITING AGENCY

*Internal Quality Assurance
National Council for Technical Education (NACTE)*

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Introduction

The National Council for Technical Education (NACTE) is a statutory body established by the National Council for Technical Education Act, 1997 to oversee and coordinate the provision of technical education and training in Tanzania. Amongst the functions of NACTE, as stipulated in the establishing Act, are to assist technical institutions in the overall development of the quality of education they provide and to promote and maintain approved academic standards

While NACTE is charged with monitoring the quality of the Technical Institutions, it is important that NACTE itself take care of its own quality too. The Guidelines at hand support NACTE to assure the quality of its activities and by doing so to develop it self into a reliable and international recognized accreditation agency.

Chapter 1 discusses the criteria for a reliable accrediting agency as seen by INQAAHE, ENQA and ECA

Chapter 2 shows how NACTE will evaluate its quality monitoring activities and supporting activities

Chapter 3 shows how NACTE can check, if it fulfill the requirements for a reliable agency.

1 TOWARDS A RELIABLE ACCREDITING AGENCY

As long as accreditation is primarily a national activity, it is up to the country to decide if it trusts the accrediting body. With the growing importance of the international role of accreditation, the basic question becomes more and more whether the agency can be trusted. Is it indeed a reliable agency? That is the question that will be asked by the international community.

The International Network for Quality Assurance Agencies (INQAAHE) discussed the necessity to formulate criteria for good practice for a quality assurance agency since 1999. At the same time, the European Association for Quality Assurance (ENQA) discussed the criteria for a reliable agency and published the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* in 2005. A revised version is published in 2014. The European Consortium for Accreditation (ECA) also formulated *Principles of Good Practice*, covering the ideas of INQAAHE and ENQA. There are more organisations that have formulated or have encouraged the formulation of standards for a reliable agency, such as the Council for Higher Education Accreditation (CHEA) in the United States, the International Association of University Presidents (IAUP), and UNESCO (Global Forum on International Quality Assurance, Accreditation and the Recognition of Qualifications) ¹

1.1. The INQAAHE Guidelines of Good Practice²

The initial draft of the Principles of Good Practice for Quality Assurance Agencies was proposed to the INQAAHE General Assembly in 2003 by a working group of the board. The Dublin General Assembly decided to:

- Endorse the principles as a working document but agreed that at this stage it would be more appropriate to describe them as guidelines.
- Commend them to the members of the network and to urge them to consider and apply them with regard to their work.

The *Guidelines of Good Practice* was discussed again at the INQAAHE workshop in Oman. Based on the recommendations of the working group established in Dublin, it was decided to continue improving the wording of the guidelines with the aim of making them more operational and less open to interpretation.

The Guidelines of Good Practice of the INQAAHE mentions that the following should be taken into consideration:

- The guidelines are intended to promote good practice and assist an External Quality Assurance (EQA) Agency in improving its quality by building on existing experience.
- Each EQA Agency has evolved to serve a specific context that is influenced by its specific cultural and historical context.
- A diversity of approaches to and purposes for external quality evaluation exist (e.g. but not restricted to accreditation, assessment and audit) and that these approaches can be underpinned by some common, agreed principles. (The words 'evaluation' or 'EQA' will be used as generic terms to include all types of external quality checking.)
- The guidelines should not lead to the dominance of one specific view or approach, but promote good practices, while helping to eradicate bad quality.

According to the Guidelines of Good Practice, an EQA-Agency (EQAA) is advised to apply the following principles:

1. The Governance of the EQAA

The EQAA has a written mission statement or set of objectives that takes into account the cultural and historical context of the EQAA. The statement explicitly provides that external quality assurance is a major activity of the EQAA, and it requires a systematic approach to achieving the mission or objectives of the EQAA. There is evidence that the statement of objectives is implemented pursuant to a practical management plan that is linked to EQAA resources. The ownership and governance structure is appropriate for the objectives of the agency.

Where can I find evidence?

¹ For more information on CHEA <http://www.chea.org>; on the IAUP: <http://www.ia-up.org/>; on the UNESCO Global Forum: <http://portal.unesco.org/education/en/>

² INQAAHE (2005), *Guidelines of Good Practice*. The document can be downloaded from: www.inqaahe.org

- the ownership and governance structure
- Written mission statement and set of objectives
- Policy/strategy of the EQAA
- Management or long term strategic plan
- Vision statement
- Legislation

2. Resources

The EQAA has adequate and accessible human and financial resources to conduct external evaluation effectively and efficiently in accordance with its mission statement and its methodological approach. The EQAA's resources are also adequate for the appropriate development of the agency.

Where can I find evidence?

- Budget
- Financial statements
- Activities, tasks, workloads
- Fee structure
- Fees for external reviewers
- Average cost of external review
- Human resources profile (e.g. numbers and qualifications of decision-making body, external reviewers, and staff)

3. Quality Assurance of the EQAA

The EQAA has a system of continuous quality assurance of its own activities that emphasizes flexibility in response to the changing nature of higher education, the effectiveness of its operations, and its contribution towards the achievement of its objectives. The EQAA conducts internal self-review of its own activities, including consideration of its own effects and value. The review includes data and analysis. The EQAA is subject to external reviews at regular intervals. There is evidence that any required actions are implemented and disclosed.

Where can I find evidence?

- Quality assurance policy/system/activities/plan
- Internal feedback (e.g. by staff supervisors or decision-making body)
- Self reviews
- Examples of ongoing internal processes for continuous quality assurance
- External feedback from institutions or other stakeholders
- Reports from external reviews
- Use of feedback from reviews for improvement

4. Reporting Public Information

The EQAA informs and responds to the public in accordance with applicable legislation and the cultural context of the EQAA. This includes full and clear disclosures of its relevant documentation such as policies, procedures and criteria. The EQAA also demonstrates public accountability by reporting its decisions about higher education institutions and programs. The content and extent of reporting may vary with cultural context and applicable legal and other requirements. If the external evaluation leads to a decision about the higher education institution or program, the procedures applied and the criteria for decision-making are public, and the criteria for review are transparent, public, and ensure equality of treatment. The EQAA also discloses to the public the decisions about the EQAA resulting from any external review of its own performance.

Where can I find evidence?

- URL of EQAA website and short summary of the types of information provided here
- List of publications
- Press releases
- Other ways and means of informing the public, such as email or newsletter
- Public disclosure of external evaluations of the EQAA's performance

5. The Relationship Between the EQAA and Higher Education Institutions

The EQAA:

- recognizes that institutional and programmatic quality and quality assurance are primarily the

responsibility of the higher education institutions themselves;

- respects the academic autonomy, identity and integrity of the institutions or programs;
 - applies standards or criteria that have been subject to reasonable consultation with stakeholders;
- and
- aims to contribute to both quality improvement and accountability of the institution.

Where can I find evidence?

- Policies/manuals
- Feedback from institutions and other stakeholders
- Reports from external reviews of the EQAA
- EQAA internal reviews

6. The EQAA's Requirements for Institutional/Program Performance

The EQAA has documents that indicate clearly what the EQAA expects of the institution. Those expectations (which may for example be called standards or factors or precepts) are appropriate for the core activities of an institution of higher education or program. The standards should explicitly address all areas of institutional activity that fall within the EQAA's scope, such as teaching, learning, research, community work, etc. and necessary resources such as finances, staff/faculty, and learning resources. Standards may refer to specific areas, levels of achievement, relative benchmarking and types of measures, and may provide general guidelines. They may also include specific learning goals.

Where can I find evidence?

- Standards or factors considered by the EQAA
- Types and levels of institutional and programmatic goals, including learning, public service, research, etc.
- Examples of measures
- Results of programmatic or institutional reviews
- Types of required institutional and programmatic resources
- Institutional strategic plans

7. The EQAA's Requirements for Institutional Self-Evaluation and Reporting to the EQAA

The documentation concerning self-evaluation explains to the institutions of higher education the purposes, procedures, process and expectations in the self-evaluation process. The documents also include the standards used, the decision criteria, the reporting format, and other information needed by the higher education institution. Typically, an EQAA review process includes a self-evaluation through self-study by the institution or program, external peer review, and a follow-up procedure. As necessary and appropriate, the EQAA guides the institution or program in the application of the procedures of the quality assurance process, such as self-evaluation, external review, or solicitation of assessment/feedback from the public, students, and other constituents.

Where can I find evidence?

- Handbooks and other publications explaining processes and timelines for organizing the process, identifying issues, gathering evidence, analyzing performance, and reporting results
- List of training materials for institutions
- Past institutional or programmatic reports or self-studies
- Results of institutional or programmatic reviews
- Types of internal and external institutional assessment processes and results
- EQAA training or advisory materials for institutions and programs

8. The EQAA's Evaluation of the Institution and/or Program

The EQAA has clear documentation concerning the external evaluation that states the standards used, assessment methods and processes, decision criteria, and other information necessary for external review. The EQAA also has specifications on the characteristics, selection and training of reviewers. The EQAA's system must ensure that each institution or program will be evaluated in an equivalent way, even if the external panels, teams, or committees (together, the "external panels") are different. The system ensures that:

- The external reviewers meet the EQAA specifications, and the external reviewers are adequate to the tasks to be accomplished.
- External reviewers have no conflicts of interest.

- External reviewers receive necessary training
- External reviewers' reports are evidence-based and clear, with precisely stated conclusions.

When practicable, the EQAA should include at least one external reviewer from another country or jurisdiction in the external panel.

Where can I find evidence?

- Evaluation/assessment frameworks and criteria
- Proof of adherence to internationally accepted guidelines and conventions
- Legal frameworks, procedures, forms, or documents (e.g. codes of ethics used to avoid conflicts of interest)
- Criteria for the selection, appointment, and training of experts
- Procedures for nomination and appointment of experts
- Manuals or guidelines including instructions for experts and/or institutions
- Protocols
- Description of division of responsibility between the EQAA staff and the external panel

9. Decisions

The EQAA evaluations address both the higher education institution's own self-assessment and external reference points, such as judgments by knowledgeable peers or relevant legislation. An EQAA must be independent, i.e. it has autonomous responsibility for its operations, and third parties cannot influence its judgments. The EQAA's decisions must be impartial, rigorous, thorough, fair, and consistent, even if the judgments are made by different panels. Consistency in decision-making includes consistency and transparency in processes and actions for imposing recommendations for follow-up action. The EQAA's reported decisions are clear and precise.

When the EQAA advises the government or other public bodies, the decisions made by each agency should be made as independently as practicable.

Where can I find evidence?

- Representative samples of decisions for similar higher education institutions
- relevant portions of internal and external reviews of the EQAA
- Description of number and types of appeals filed
- Minutes from Council/Board/Committee meetings where the reports were discussed

10. Appeals

The EQAA has appropriate methods and policies for appeals. Appeals should be conducted by reviewers who were not responsible for the original decision and who have no conflict of interest, but appeals need not necessarily be conducted outside the EQAA.

Where can I find evidence?

- Policy and procedures of appeal
- Conflict of interest policy
- Statistics over a multi-year period, e.g. the number of appeals, number granted, number denied

11. Collaboration

The EQAA collaborates with other EQAAs, if possible, in areas such as exchange of good practices, capacity building, review of decisions, provision of transnational education, joint projects, and staff exchanges.

Where can I find evidence?

- Descriptions of meetings and visits to and from other EQAAs
- Statistics on volume and frequency of contacts in either form
- Record of participation in regional networks
- Staff exchanges
- Written agreements between agencies resolving specific issues
- Participation in projects, conferences, and workshops
- Membership in networks/organisations

12. Transnational/Cross-Border Higher Education

The EQAA has policies relating to both imported and exported higher education. These policies may be the same as those for domestic providers and domestic provision. In formulating its policies and practices, the EQAA should consider relevant guidelines issued by international agencies and other associations. All EQAAs should consult with appropriate local agencies in the exporting or importing countries, although this might not be possible or appropriate in situations such as those involving distance learning or small enrollment.

Where can I find evidence?

- Statements of policies and procedures
- Documents relating to quality assurance review of exported and imported education
- Description of meetings and visits to and from other agencies
- Minutes of meetings of policy-making bodies reflecting consideration of relevant international guidelines.

1.2. ENQA: standards and guidelines for External Quality Assurance 3

While INQAAHE discussed the Code of Good Practice, the European Association for Quality Assurance in Higher Education (ENQA) discussed the development of standards and guidelines for External Quality Assurance in the European Higher Education Area. The European standards for external quality assurance agencies have been developed with the conscious ambition for the standards to be neither too detailed nor too prescriptive. They should not reduce the freedom of European quality assurance agencies to reflect within their organisations and processes the experiences and expectations of their nation or region. The standards should ensure that the professionalism, credibility and integrity of the agencies are visible and transparent to their stakeholders and must permit comparability to be observable between the agencies and give space to the necessary European dimension.

Several "guidelines" have been added to provide additional information on good practice and in some cases to explain in more detail the meaning and importance of the standards. Although the guidelines are not part of the standards themselves, the standards should be considered in conjunction with them. In the

1.2.1 Standards and guidelines External Quality Assurance

1. Consideration of internal quality assurance

External quality assurance should address the effectiveness of the internal quality assurance processes as described in part 1.

Quality assurance in higher education is based on the institutions' responsibility for the quality of their programmes and other provision; therefore it is important that external quality assurance recognises and supports institutional responsibility for quality assurance. To ensure the link between internal and external quality assurance, external quality assurance includes consideration of the standards for IQA. These may be addressed differently, depending on the type of external quality assurance

2. Designing methodologies fit for purpose

External quality assurance should be defined and designed specifically to ensure its fitness to achieve the aims and objectives set for it, while taking into account relevant regulations. Stakeholders should be involved in its design and continuous improvement.

In order to ensure effectiveness and objectivity it is vital for external quality assurance to have clear aims agreed by stakeholders. The aims, objectives and implementation of the processes will

- bear in mind the level of workload and cost that they will place on institutions;
- take into account the need to support institutions to improve quality;

³ *Standards and guidelines for quality assurance in the European Higher Education Area (DRAFT endorsed by the Bologna Follow-Up Group on 19 September 2014. Subject to approval by the Ministerial Conference in Yerevan, 14-15 May 2015), September 2014*

- allow institutions to demonstrate this improvement;
- result in clear information on the outcomes and the follow-up.

The system for external quality assurance might operate in a more flexible way if institutions are able to demonstrate the effectiveness of their own internal quality assurance.

3. Implementing processes

External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include:

- a self-assessment or equivalent;
- an external assessment normally including a site visit;
- a report resulting from the external assessment;
- a consistent follow-up.

External quality assurance carried out professionally, consistently and transparently ensures its acceptance and impact. Depending on the design of the external quality assurance system, the institution provides the basis for the external quality assurance through a self-assessment or by collecting other material including supporting evidence. The written documentation is normally complemented by interviews with stakeholders during a site visit. The findings of the assessment are summarised in a report (cf. Standard 2.5) written by a group of external experts (cf. Standard 2.4). External quality assurance does not end with the report by the experts. The report provides clear guidance for institutional action. Agencies have a consistent follow-up process for considering the action taken by the institution. The nature of the follow-up will depend on the design of the external quality assurance.

4. Peer-review experts

External quality assurance should be carried out by groups of external experts that include (a) student member(s).

At the core of external quality assurance is the wide range of expertise provided by peer experts, who contribute to the work of the agency through input from various perspectives, including those of institutions, academics, students and employers/professional practitioners. In order to ensure the value and consistency of the work of the experts, they

- are carefully selected;
- have appropriate skills and are competent to perform their task;
- are supported by appropriate training and/or briefing.

The agency ensures the independence of the experts by implementing a mechanism of no-conflict-of-interest.

The involvement of international experts in external quality assurance, for example as members of peer panels, is desirable as it adds a further dimension to the development and implementation of processes

5. Criteria for outcomes

Any outcomes or judgments made as the result of external quality assurance should be based on explicit and published criteria that are applied consistently, irrespective of whether the process leads to a formal decision.

External quality assurance and in particular its outcomes have a significant impact on institutions and programmes that are evaluated and judged. In the interests of equity and reliability, outcomes of external quality assurance are based on predefined and published criteria, which are interpreted consistently and are evidence-based. Depending on the external quality assurance system, outcomes may take different forms, for example, recommendations, judgments or formal decisions.

6. Reporting

Full reports by the experts should be published, clear and accessible to the academic community, external partners and other interested individuals. If the agency takes any formal decision based on the reports, the decision should be published together with the report.

The report by the experts is the basis for the institution's follow-up action of the external evaluation and it provides information to society regarding the activities of an institution. In order for the report to be used as the basis for action to be taken, it needs to be clear and concise in its structure and language and to cover

- context description (to help locate the higher education institution in its specific context);
- description of the individual procedure, including experts involved;
- evidence, analysis and findings;
- conclusions;
- features of good practice, demonstrated by the institution;
- recommendations for follow-up action.

The preparation of a summary report may be useful.

The factual accuracy of a report is improved if the institution is given the opportunity to point out errors of fact before the report is finalised

7. Complaints and appeals

Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.

In order to safeguard the rights of the institutions and ensure fair decision-making, external quality assurance is operated in an open and accountable way. Nevertheless, there may be misapprehensions or instances of dissatisfaction about the process or formal outcomes.

Institutions need to have access to processes that allow them to raise issues of concern with the agency; the agencies, need to handle such issues in a professional way by means of a clearly defined process that is consistently applied. A complaints procedure allows an institution to state its dissatisfaction about the conduct of the process or those carrying it out. In an appeals procedure, the institution questions the formal outcomes of the process, where it can demonstrate that the outcome is not based on sound evidence, that criteria have not been correctly applied or that the processes have not been consistently implemented

1.2.2 Standards and guidelines for quality assurance agencies

1. Activities, policy and processes for quality assurance

Agencies should undertake external quality assurance activities as defined in Part 2 of the ESG on a regular basis. They should have clear and explicit goals and objectives that are part of their publicly available mission statement. These should translate into the daily work of the agency. Agencies should ensure the involvement of stakeholders in their governance and work.

To ensure the meaningfulness of external quality assurance, it is important that institutions and the public trust agencies. Therefore, the goals and objectives of the quality assurance activities are described and published along with the nature of interaction between the agencies and relevant stakeholders in higher education, especially the higher education institutions, and the scope of the agencies' work. The expertise in the agency may be increased by including international members in agency committees.

A variety of external quality assurance activities are carried out by agencies to achieve different objectives. Among them are evaluation, review, audit, assessment, accreditation or other similar activities at programme or institutional level that may be carried out differently. When the agencies also carry out other activities, a clear distinction between external quality assurance and their other

fields of work is needed.

1. Official status

Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.

In particular when external quality assurance is carried out for regulatory purposes, institutions need to have the security that the outcomes of this process are accepted within their higher education system, by the state, the stakeholders and the public.

2. Independence

Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence.

Autonomous institutions need independent agencies as counterparts. In considering the independence of an agency the following are important:

- Organisational independence, demonstrated by official documentation (e.g. instruments of government, legislative acts or statutes of the organisation) that stipulates the independence of the agency's work from third parties, such as higher education institutions, governments and other stakeholder organisations;
- Operational independence: the definition and operation of the agency's procedures and methods as well as the nomination and appointment of external experts are undertaken independently from third parties such as higher education institutions, governments and other stakeholders;
- Independence of formal outcomes: while experts from relevant stakeholder backgrounds, particularly students, take part in quality assurance processes, the final outcomes of the quality assurance processes remain the responsibility of the agency.

Anyone contributing to external quality assurance activities of an agency (e.g. as expert) is informed that while they may be nominated by a third party, they are acting in a personal capacity and not representing their constituent organisations when working for the agency. Independence is important to ensure that any procedures and decisions are solely based on expertise.

3. Thematic analysis

Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.

In the course of their work, agencies gain information on programmes and institutions that can be useful beyond the scope of a single process, providing material for structured analyses across the higher education system. These findings can contribute to the reflection on and the improvement of quality assurance policies and processes in institutional, national and international contexts.

A thorough and careful analysis of this information will show developments, trends and areas of good practice or persistent difficulty.

4. Resources

Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.

It is in the public interest that agencies are adequately and appropriately funded, given higher

education's important impact on the development of societies and individuals. The resources of the agencies enable them to organise and run their external quality assurance activities in an effective and efficient manner. Furthermore, the resources enable the agencies to improve, to reflect on their practice and to inform the public about their activities.

5. Internal quality assurance and professional conduct

Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.

Agencies need to be accountable to their stakeholders. Therefore, high professional standards and integrity in the agency's work are indispensable. The review and improvement of their activities are on-going so as to ensure that their services to institutions and society are optimal.

Agencies apply an internal quality assurance policy which is available on its website. This policy

- ensures that all persons involved in its activities are competent and act professionally and ethically;
- includes internal and external feedback mechanisms that lead to a continuous improvement within the agency;
- guards against intolerance of any kind or discrimination;
- outlines the appropriate communication with the relevant authorities of those jurisdictions where they operate;
- ensures that any activities carried out and material produced by subcontractors are in line with the European Standards and Guidelines (ESG), if some or all of the elements in its quality assurance activities are subcontracted to other parties;
- allows the agency to establish the status and recognition of the institutions with which it conducts external quality assurance.

6. Cyclical external review of agencies

Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.

A periodic external review will help the agency to reflect on its policies and activities. It provides a means for assuring the agency and its stakeholders that it continues to adhere to the principles enshrined in the ESG.

1.3 The European Consortium for Accreditation (ECA)

1.3.1 Code of Good Practice

With the aim of reaching mutual recognition of each other's accreditation decisions, the European Consortium for Accreditation (ECA) also developed a Code of Good Practice ⁴as a basis for recognition. The Code of Good Practice guarantees the comparability of accreditation procedures throughout Europe. The 17 standards are binding for ECA members and should all be met. Specifically, the Code fulfils the following purposes:

- It provides transparency for politicians, the governments and other stakeholder groups in higher education.
- It guarantees reliability of the accreditation procedure for higher education institutions.
- It defines necessary requirements for accreditation organisations. All members of the ECA must fulfil these requirements and should review their procedures regularly against this code.
- It serves as a yardstick for external evaluations of all members of the consortium.
- It serves to support the internal quality assurance policies of an accreditation organisation and provides suggestions for the continuous improvement of its quality.

⁴ ECA, Code of good practice, Zürich 2004. Can be download from <http://ecahe.eu/home/about/eca-documents/main-documents-for-mutual-recognition/>

- It will not lead to a predominance of any single point of view, but should instead promote good practices and prevent bad quality.
- It should be updated when necessary to conform to the international state of the art of good practices.

The ECA has formulated the following standards

The accreditation organisation

1. Has an explicit mission statement.
2. Is recognised as a national accreditation body by the competent public authorities.
3. Must be sufficiently independent of government, higher education institutions or business, industry and professional associations.
4. Must be rigorous, fair and consistent in its decision-making.
5. Has adequate and credible resources, both human and financial.
6. Has its own internal quality assurance system that emphasises its quality improvement.
7. Has to be evaluated externally on a cyclical basis.
8. Can demonstrate public accountability, has public and officially available policies, procedures, guidelines and criteria.
9. Informs the public in an appropriate way about its accreditation decisions.
10. Has a method for appeal against its decisions.
11. Collaborates with other national, international and/or professional accreditation organisations.
12. Must define its accreditation procedures and methods itself.
13. Must undertake accreditation procedures and methods at institutional and/or programme level on a regular basis.
14. Must include self-documentation/-evaluation by the higher education institution and external review (as a rule on site) in its accreditation procedures and methods.
15. Must guarantee the independence and competence of the external panels or teams performing its accreditation procedures and methods.
16. Must have geared its accreditation procedures and methods to enhance quality.
17. Must make its accreditation standards public and be compatible with European practices taking into account the development of agreed sets of quality standards.

1.4 Similarities between guidelines of INQAAHE, ENQA and ECA

INQAAHE, ENQA and ECA have put a lot of effort in formulating standards for a trustworthy agency. These have already been discussed by many external quality assessment/accreditation agencies all over the world. An analysis of the three Codes of Good Practice shows that they have a lot in common. The topics discussed are more or less similar. At the moment, the standards are called Code of Good Practice or Guidelines. This means that the list of criteria can be used as a benchmark to determine how far an agency fits into international developments.

If NACTE strives for international recognition as an accrediting body that can be trusted, it is important to show that NACTE meets at least these minimum requirements. The table gives a summary of the requirements for a reliable agency, as formulated by INQAAHE, ENQA and ECA. Distinction is made between organisation aspects and process aspects.

Organisation	Process
1. The agency is recognised by the competent authorities.	1. The accreditation process is based on self-assessment and external review, unless circumstances require another approach.
2. The agency acts independently of government, higher education, business, industry, or professional associations. Third parties cannot influence verdicts or decisions.	2. The process and procedures of the accreditation are well known and made public.
3. The agency has a clear mission and clearly formulated objectives. The mission statement is translated into a clear policy and strategic plan, expressing that: <ul style="list-style-type: none"> • accreditation is its main activity 	3. The process respects the internal quality assurance activities of an HEI; the requirements for self-assessment are in line with it.

<ul style="list-style-type: none"> • quality improvement and accountability are also a goal • the agency takes into account the cultural and social context • it respects the autonomy, identity and integrity of the HEIs. 	
4. The agency has adequate human and financial resources, making it possible to run the activities. A staff development policy is in place.	4. External assessment is done by a group of experts. Such a committee: <ul style="list-style-type: none"> • is nominated according to clear rules • acts independently within the given accreditation framework • has no conflicts of interest • is well trained.
5. The agency has an internal quality assurance system and is externally evaluated on a cyclical basis.	6. The decision making process is rigorous, fair and consistent: <ul style="list-style-type: none"> • The rules leading to accreditation decisions are transparent • The rules guarantee equal treatment.
6. The agency is accountable to the public by means of: <ul style="list-style-type: none"> • public documents on its mission and strategy • accreditation processes and procedures • standards and criteria • evaluation outcomes. 	5. The accreditation standards and criteria are: <ul style="list-style-type: none"> • predefined by the agency after consultation of all stakeholders • are made public.
7. The agency cooperates as far as possible with other agencies in exchanging experience, examples of good practice, joint assessments, etc.	7. Appropriate methods for appeals against accreditation decisions exist

Table 1: Benchmark standards for a reliable accreditation agency

2 NACTE AND QUALITY ASSURANCE OF ITS ACTIVITIES

NACTE requires from the Technical Institutions to take quality assurance seriously and to show that it has a well functioning quality assurance system in place. It will be self-evidence that NACTE on its turn has to take its quality seriously and is expected to have a well functioning system for Quality Assurance in place. INQAAHE has formulated the need for quality assurance in the following way:

- *An agency has a system of continuous quality assurance of its own activities that emphasizes flexibility in response to the changing nature of higher education, the effectiveness of its operations, and its contribution towards the achievement of its objectives.*
- *The agency conducts internal self-review of its own activities, including consideration of its own effects and value. The review includes data and analysis.*
- *The Agency is subject to external reviews at regular intervals. There is evidence that any required actions are implemented and disclosed.*

Based on the requirements of INQAAHE, NACTE has developed a quality assurance policy. The quality assurance policy aims at:

- *Continuous evaluation of the external quality assurance activities (see section 2.1.- 2.4):*
 - Registration process
 - Quality audit
 - Institutional accreditation
 - Program accreditation

After finishing the external assessment process, NACTE will evaluate the process by sending a questionnaire to the TI involved and to the expert team.

- *Evaluation of the supporting activities (section 2.1)*

NACTE will evaluate every two years the supporting activities:

 - The database job profile
 - The staff development activities (including the supporting literature)
 - The support of the QA officers

- The support of the TI for self-assessment activities.
- *Evaluation of the advise functions (section 2.2)*
 - NACTE will evaluate every two years the advice functions:
 - Advice to the government
 - Advice to the institutions
 - Clearing house function
- *SWOT-analysis: NACTE as a reliable agency (chapter 4)*

Every 5 years (starting in 2016), NACTE will conduct a SWOT-analyze to see how far NACTE is meeting the requirements, set for a reliable agency. Based on the outcomes, NACTE will invite an external body (INQAAHE, ENQA) to assess NACTE.

For an overview of the evaluation activities, see table 2

Activity	Evaluation
Registration	Every year
Quality audit	Every year
Institutional accreditation	Every year
Program accreditation	Every year
Database Job profile	Every 2 years, starting 2016
Staff development activities	Every 2 years, starting 2016
Support QA-officers	Every 2 years, starting 2016
Training TI for Self assessment	Every 2 years, starting 2016
Advice Government	Every 2 years, starting 2017
Advice Institutions	Every 2 years, starting 2017
Clearing house function	Every 2 years, starting 2017
Reliable agency self assessment	Every 5 years, starting 2016
External evaluation NACTE	Every 5 years, starting 2017

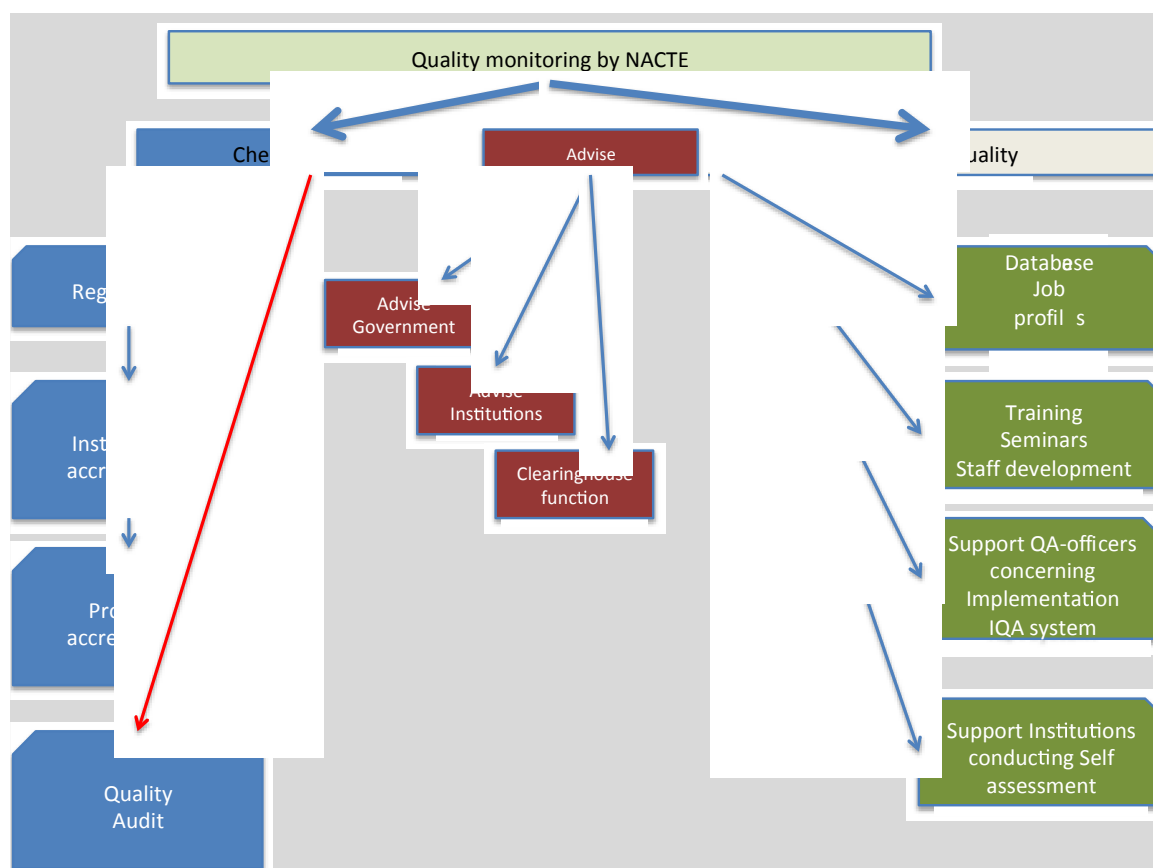
Table 2: evaluation of the activities of NACTE

2.1. Evaluation of the quality monitoring by NACTE

The tasks, given to NACTE can be clustered in the following clusters (see figure 1):

- Checking the quality by the instruments of registration, quality audit, institutional accreditation and program accreditation
- Supporting Higher Education Institutions by means of a) the database job profile, training seminars & staff development, supporting the QA-officers and the TI's in conducting self assessment
- Advise to the government and the institutions; clearinghouse function

Figure 1: Tasks of NACTE



Evaluation of the Registration process

The first step in the quality monitoring process of NACTE is Registration.

Registration has the following steps:

- application by the Technical institutions
- check of the documents by NACTE
- eventually a visit at the spot
- decision by NACTE.

Every year NACTE will check if the process of Registration is adequate and transparent. By means of a questionnaire, NACTE will ask the involved TI's their opinion:

- Were the documents NACTE asked for, adequate?
- Did NACTE use all the information it asked for?
- Was the decision for Registration/non-Registration transparent?

NACTE it self will conduct a self assessment and try to find answer to the following questions:

- Is the procedure for Recognition adequate?
- Is the information, provided by the TI's adequate? Did NACTE use all information?
- The experts for checking the application did a satisfactory job

Evaluation of the Quality Audit

Within 18 months after Registration, the TI must send a Self Assessment Report about the IQA-system to NACTE. NACTE will check the SAR (Quality Audit without site visit) . NACTE will evaluate the process.

Questionnaire to be completed by the institution:

- the protocol for the self evaluation (Handbook for the TI's) was clear for the institution?
- The requirements for the self-evaluation were in line with the qa-system of the institution?
- The institution has been trained adequately for the self-evaluation?

- The quality audit was adequate and satisfactory?
- The decision was correct
- The recommendations were clear?
- The overall conclusion was clear?

Evaluation of Institutional accreditation

A registered institution has to go for institutional accreditation within 3 years after the registration. The process of external quality assessment at institutional level is based on the commonly accepted format:

- self assessment by the institution
- audit by an expert team
- report with recommendations
- follow up

Each of the above mentioned elements will be evaluated, based on documents and feedback from the actors.

Questionnaire to be completed by the institution:

- the protocol for the self evaluation (Handbook for the TI's) was clear for the institution?
- The institution has been trained adequately for the self-evaluation?
- The external assessment by the experts was adequate and satisfactory?
- The final report was on time?
- The report was correct, adequate and useful for the institution?
- The institution could comment on the report?
- The recommendations were clear?
- The overall conclusion was clear?
- The accreditation decision was transparent?
- There was a possibility for appeal?

Questionnaire to be completed by the expert team:

- There was no conflict of interest in the team?
- The training of the experts was adequate?
- The assessment process was adequate and satisfactory?
- The accreditation decision was in line with the advise of the expert team
- The accreditation decision was transparent?

Evaluation program accreditation

The process of program accreditation is also based on

- self assessment
- audit by an expert team
- report with recommendations
- follow up

Also for quality assessment at program level, each of the above mentioned elements will be evaluated, based on documents and feedback from the actors.

Questionnaire to be completed by the institution:

- the protocol for the self evaluation (Handbook for the TI's) was clear for the institution?
- The faculty/department has been trained adequately for the self-evaluation?
- The external assessment by the experts was adequate and satisfactory?
- The final report was on time?
- The report was correct, adequate and useful for the institution?
- The institution could comment on the report?
- The recommendations were clear?
- The overall conclusion was clear?
- The accreditation decision was transparent?
- There was a possibility for appeal?

Questionnaire to be completed by the expert team

- The selection of the experts was adequate?
- There was no conflict of interest in the team?
- The training of the experts was adequate?
- The assessment process was adequate and satisfactory?
- The accreditation decision was in line with the advice of the expert team
- The accreditation decision was transparent?
- The recommendations were clear?
- The overall conclusion was clear?

2. Evaluation of the supporting and advice activities

Support activities

NACTE has as task to support the Technical institutions by:

- Keeping a database Job-profiles
- Offering training seminars and staff development activities
- Support QA-officers concerning implementation IQA-system
- Supporting institutions conducting self-assessment.

Every 2 years, NACTE will send questionnaire to the TI's with questions concerning the activities. Possible questions might be:

- Are you using the data base job profiles for curriculum design?
- Is the database Job profiles up-to-date?
- Are there Job profiles you are missing?
- Are the staff development activities, offered by NACTE, covering the needs of the staff?
- If not, what is missing?
- Is the supporting literature/publications offered by NACTE helpful and adequate?
- What do you like to be added?
- Is the support of NACTE for the implementation of IQA-system adequate?
- Is the support for training of the institution (faculty/department) adequate?

Advise and clearinghouse function

NACTE is expected to advise both the government and the Technical Institutions about the development of the Technical Educational system. Furthermore NACTE is expected to collect information and data of the TI's and to disseminate those data to the stakeholders. Also the function of clearinghouse has to be evaluated. Questions to be asked are:

- Advise to the government and the institutions haven been adequate and satisfactory?
- The collected data are relevant for the stakeholders?
- HEI's did use the collected data?
- Policy makers made use of the collected data?
- Students make use of the collected data to make the decision what and where to study.

3 SWOT-ANALYSIS: NACTE AS A RELIABLE AGENCY

According to the requirements of INQAAHE, NACTE should be subject to external reviews at regular intervals. There is evidence that any required actions are implemented and disclosed. After some years of functioning, NACTE may request INQAAHE or ENQA to carry out the external review. In both cases, NACTE has to prepare it self by a self-assessment/SWOT analysis. For the SWOT analysis, NACTE may use the checklist on the INQAAHE guidelines (see table 2). To find evidence that NACTE is meeting the requirements, use will be made of the information in section 1.1. At the end of the SWOT-analysis, NACTE will write a self-evaluation report, describing the requirements, as formulated by INQAAHE:

1. Governance of NACTE
2. Resources
3. Quality Assurance of NACTE
4. Reporting public information
5. The relationship between NACTE and the higher education institutions.
6. NACTE's requirements for institutional/program performance
7. NACTE's Requirements Institutional Self-Evaluation and Reporting to the institution
8. NACTE's Evaluation of the Institution and/or Program
9. Decision-making
10. Appeals system
11. Collaboration with other agencies
12. Transnational/Cross-Border Higher Education

For each topic, the following procedure will be followed:

- Describe the existing situation
- Provide evidence for meeting the requirements (see section 1.1 for the evidence, expected by INQAAHE)
- Analyze the situation (strengths/weakness)
- What has to be changed? How will you do it?
- Give the topic a mark 1-7.

The meaning of the marks is:

- 1 = nothing (no documents, no plans, no evidence) present
- 2 = this aspect is in the planning stage
- 3 = documents available, but no clear evidence that they are used
- 4 = documents available and evidence that they are used
- 5 = clear evidence on the efficiency of the aspect
- 6 = example of good practice
- 7 = excellent

In terms of quality and improvement activities, the 7-point scale can also be read as follows:

- 1 = absolutely inadequate; immediate improvements must be made
- 2 = inadequate, improvements necessary
- 3 = inadequate, but minor improvements will make it adequate
- 4 = adequate as expected
- 5 = better than adequate
- 6 = example of good practice
- 7 = excellent

NACTE will write a self –assessment report, covering all the aspects. If NACTE is satisfied with the outcome, it might invite INQAAHE or ENQA.

Table 2: Checklist on the INQA/AHE guidelines

		1	2	3	4	5	6	7	
1	1. Governance of NACTE								
	• NACTE has a written mission statement or set of objectives that takes into account the cultural and historical context of the agency.								
	• The statement clearly communicates that external quality assurance is a major activity of NACTE								
	• There is a systematic approach to achieving the mission or objectives								
	• There is evidence that the mission statement has been translated into a clear policy or management plan.								
	• There is an adequate Legislation								
	Overall								
	2	Resources							
		• NACTE has adequate and accessible resources, both human and financial, to be able to organise and run the process of external evaluation in an effective and efficient manner in accordance with the mission statement and the chosen methodological approach.							
		• NACTE's resources are also adequate for the appropriate development of the agency.							
Overall									
3. Quality Assurance of NACTE									
• NACTE has a system of continuous quality assurance of its own activities, emphasising flexibility (in response to the changing nature of higher education) and quality improvements									
• NACTE carries out self-reviews of its activities, e.g. based on data collected and analysis, including consideration of its own effects and value.									
• NACTE is subject to external reviews at regular intervals and there is evidence that the results are used.									
• There is a clear Quality assurance policy/system/activities/plan									
• There are examples of follow-up activities to support the continuous quality assurance process									
• Internal feedback (board or equivalent/external committee/staff									
• External feedback from institutions or other stakeholders									
Overall									
4. Reporting public information									
• NACTE informs and responds to the public in accordance with the legislation and cultural context of NACTE. This includes making public and explicit its documentation e.g. policies, procedures and criteria.									
• The agency also demonstrates public accountability by reporting openly on its decisions about higher Education institutions and programs and making the outcomes of the evaluation public in a way appropriate to the relevant country legislation and the type of review undertaken.									
• If the external evaluation leads to a decision about the he institution or program, the procedures applied and the criteria for decision-making are public and the criteria for review are transparent, public, and ensure equality of treatment.									
Overall									
5. The relationship between NACTE and the Technical Institutions.									
• NACTE recognises that quality and quality assurance are primarily the responsibility of each higher education institution.									
• NACTE respects the autonomy, identity and integrity of the institution.									
• NACTE applies standards that have been subject to reasonable consultation with stakeholders									
• NACTE aims to contribute to both quality improvement and accountability.									
Overall									
6. NACTE's requirements for institutional/program performance									
• NACTE has documents that indicate clearly what NACTE expects of the institution.									
• Those expectations (which may for example be called standards or factors or precepts) are appropriate for the core activities of an institution of higher education or program.									
• The standards should explicitly address all areas of institutional activity that fall within NACTE's scope, such as teaching, learning, research, community work, etc. and necessary resources such as finances, staff/faculty, and learning resources.									

•	• Standards may refer to specific areas, levels of achievement, relative benchmarking and types of measures, and may provide general guidelines. They may also include specific learning goals								
	Overall								
	7. NACTE's Requirements Institutional Self-Evaluation and Reporting to NACTE	1	2	3	4	5	6	7	
•	• The documentation concerning self-evaluation explains to the institutions of higher education the purposes, procedures, process and expectations in the self-evaluation process. The documents also include the standards used, the decision criteria, the reporting format, and other information needed by the higher education institution.								
•	• Typically, the NACTA review process includes a self-evaluation through self-study by the institution or program, external peer review, and a follow-up procedure.								
•	• As necessary and appropriate, NACTA guides the institution or program in the application of the procedures of the quality assurance process, such as self-evaluation, external review, or solicitation of assessment/feedback from the public, students, and other constituents								
	Overall								
	8. NACTE's Evaluation of the Institution and/or Program								
•	• NACTE has clear documentation concerning the external evaluation that state. The standards used, assessment methods and processes, decision criteria, and other information necessary for external review.								
•	• NACTE also has specifications on the selection and training of reviewers.								
•	• NACTE's system must ensure that each institution or program will be evaluated in an equivalent way, even if the external panels, teams, or committees (together, the "external panels") are different.								
•	• The external reviewers meet the NACTE specifications, and the external reviewers are adequate to the tasks to be accomplished.								
•	• External reviewers have no conflicts of interest								
•	• External reviewers receive necessary training								
•	• External reviewers' reports are evidence-based and clear, with precisely stated conclusions.								
•	• When practicable, NACTE should include at least one external reviewer from another country or jurisdiction in the external panel.								
	Overall								
	9. Decision-making								
•	• NACTE carries out its evaluations in relation both to the Technical institution's own self-assessment and to external reference points.								
•	• NACTE is independent to the extent that it has autonomous responsibility for its operations and that the judgements made in its reports cannot be influenced by third parties.								
•	• NACTE demonstrates independent, impartial, rigorous, thorough, fair and consistent decision-making.								
•	• NACTE makes consistent decisions, even if the judgements are formed by different groups, panels, teams or committees.								
	Overall								
	10. Appeals system								
•	• NACTE has appropriate methods and policies for appeals								
•	• Appeals should be conducted by reviewers who were not responsible for the original decision and who have no conflict of interest, but appeals need not necessarily be conducted outside NACTE								
	Overall								
	11. Collaboration with other agencies								
•	• As far as possible, NACTE will collaborate with other agencies, e.g. on the exchange of good practice, review decisions, providers of transnational education, joint projects, staff exchange.								
•	• Account of meetings and visits to and from other agencies								
•	• Staff exchange								
•	• Correspondence between agencies on the solution of specific issues								
•	• Participation in projects, conferences and workshops								
•	• Membership of networks/organisations.								
	Overall								
	12. Transnational/Cross-Border Higher Education								

•	• NACTE has policies relating to both imported and exported higher education. These policies may be the same as those for domestic providers and domestic provision.								
•	• In formulating its policies and practices, NACTE should consider relevant guidelines issued by international agencies and other associations.								
•	• NACTE should consult with appropriate local agencies in the exporting or importing countries, although this might not be possible or appropriate in situations such as those involving distance learning or small enrolment.								
Overall									