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Challenges and Lessons Learnt from an Intervention Designed to Activate and Strengthen Internal Quality Assurance Mechanisms of Higher Education Institutions

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Abstract

When the Council on Higher Education (CHE) started its operations in Lesotho in July 2011, there was no quality assurance infrastructure, with the 13 institutions practicing externalization and moderation of examinations as the main quality assurance activities. To prepare the institutions for external quality assurance activities such as programme accreditation, CHE provided technical support to the institutions by engaging a quality assurance consultant whose terms of reference included helping the institutions activate and strengthen their quality assurance mechanisms. This paper describes an intervention strategy that entailed helping institutions activate and strengthen their internal quality assurance mechanisms while nurturing the quality assurance culture in each context. Following the capacity-building workshop on quality assurance for representatives of higher education institutions, participants agreed to embark on a series of activities, including setting up quality assurance units and developing institutional quality assurance policies, systems and tools under the watchful eye of a consultant. This paper describes the challenges encountered, the progress made, and the lessons learnt from this intervention. More importantly, the paper discusses implications of the findings for the sustained effort towards continuing to build the quality assurance culture in a context where quality assurance was initially non-existent.

Introduction

Founded by an Act of parliament in 2004 as a semi-autonomous organization reporting directly to the Minister of Education and Training, CHE started its current office in January 2010. During these early days the office spent a lot of time developing operational documents and policies while recruiting key staff. Regulatory operations of the office including the development of systems, mechanisms and tools really commenced in July 2011 with the appointment of Director Quality Assurance and Standards and Director Policy, Strategy and Information. The CHE mandate includes the following external quality assurance activities: Programme accreditation for public and private institutions, registration of private institutions in collaboration with the Registrar in the Ministry of Education and Training and the auditing of public and private higher education institutions.

Since then CHE has developed Minimum Programme Accreditation Standards and Guidelines for registration of private higher education institutions, and is currently developing and facilitating legislation of regulations governing the implementation of these frameworks. Whereas the Higher Education Act, 2004 calls for registration of private institutions, it also stipulates that public institutions exist either in terms of the founding act or declaration by the Minister of Education and Training. Additionally, the Act states that all public institutions that existed prior to its coming into operation shall be regarded as legally constituted public institutions. Consequently there are 8 public institutions 5 of which are founded by an act of parliament and enjoy a reasonable degree of autonomy. In addition to providing further details on nature of higher education institutions in Lesotho, the next section will highlight the difficulty associated with implementing quality assurance in public institutions that remain sections of government ministries and the need for an alternative arrangement in which all public institutions attain full autonomy so that each is able to inculcate a quality culture.

Background Information

Populated by less than 2 million inhabitants, the Kingdom of Lesotho is South African's enclave located towards the Eastern Coast. There are 13 higher education institutions tacitly recognized by the Government of Lesotho (GOL) at least by either providing subvention to each of these institutions and/or scholarships for students enrolled in these institutions. Table 1 shows that of these 13 higher education institutions, there are 8 public institutions: One university, six colleges and one polytechnic. There are 5 private institutions: One cross-border provider and four nursing institutions (see Table 2). But the number of institutions is likely to go up considerably once the systems and mechanisms are ready for the processing the

registration of the many private providers who have expressed interest in setting up private higher education institutions in Lesotho.

Table 1: Autonomy, Ownership and Legal Status of Public Institutions in Lesotho

Public Institution	Student Intake	Autonomous	Parent Government Ministry	Founded by an Act of Parliament
National University of Lesotho	11425	Yes	Ministry of Education & Training	Yes
Lerotholi Polytechnic	2220	Yes	Ministry of Education & Training	Yes
Lesotho College of Education	4437	Yes	Ministry of Education & Training	Yes
National Health Training Centre	291	No	Ministry of Health	No
Lesotho Agricultural College	659	No	Ministry of Agriculture & Food Security	No
Center for Accounting Studies	1482	No	Ministry of Finance	No
Institute of Development Management	1200	No	Ministry of Education & Training	No
Lesotho Institute of Public Administration	300	No	Ministry of the Public Service	No

Although all institutions shown in Table 1 are legally constituted public higher education institutions in terms of the Higher Education Act, 2004 because they existed prior to its enactment, a more desirable scenario would be for all of them to be founded by an act of parliament that would grant each institution a reasonable degree of autonomy. This state of affairs would provide opportunities for the institutions to more readily look after own affairs and to activate and strengthen internal quality assurance mechanisms without having to go through the beurocratic hurdles resulting from their current status as departments of government ministries. Although the three autonomous public institutions enjoy a lot of space to determine their own destiny,

they remain unable to set competitive tuition fees that would enable them to generate sufficient funds to finance their services. The fee structure continues to be controlled by the government given that it is the main provider of loan bursaries.

Table 2 indicates that of the 5 private higher education institutions that are recognized and currently operating in Lesotho, none of them are registered, given that the Ministry of Education and Training and CHE are working on the legislation of guidelines for the registration of private higher education institutions. The number of students enrolled in each institution is very small. This results from a range of factors, including limited infrastructure and staff complement.

It is important to mention that a major challenge is that, in our context, legislation often takes a long time to go through. Additionally, the legislative framework (Act) does not seem to have catered for a transitional arrangement in which deserving institutions may be provisionally allowed to operate, following screening and programme review by CHE while legislation takes its course. Consequently, a large number of applicants have been made to wait for the legislation of higher education regulations. Most of these new institutions include those that would focus on (a) Information Technology, (c) Science (b) Management Sciences via conventional and distance modes of delivery. This state of affairs has an impact of stifling growth of the higher education sector, and it has an adverse effect on the economy in that it tends to postpone not investment and job-creation.

Table 2: Ownership and Registration Status of Private Higher Institutions in Lesotho

Private Institution	Student Intake	Ownership	Registered	Local/Cross Border
Limkokwing University of Creative Technology	3112	Individual	No	Cross Border
Maluti School of Nursing	120	Adventist Church Hospital	No	Local
Roma School of Nursing	90	Catholic Church Hospital	No	Local
Scott School of Nursing	87	Lesotho Evangelical Church Hospital	No	Local
Paray School of Nursing	84	Catholic Church Hospital	No	Local

All institutions listed in Table 2 will be registered once CHE and the Ministry of Education and Training are able to process applications, and as indicated, this sector is expected to grow considerably once this process of registration unfolds. To create an enabling environment, CHE must spell out and advocate for the modalities for a transitional arrangement that does not violate the Higher Education Act, 2004, while enabling legitimate growth in the higher education sector.

Purpose of Intervention

A major challenge facing CHE was that it was preparing to implement external quality assurance in a context where both the quality assurance culture and quality assurance infrastructure were virtually non-existent. Whereas 10 of the 13 higher education institutions that were identifiable at this time described quality assurance in terms of moderation and externalization of examinations, only 3 institutions reported some contact with external quality assurance bodies (CHE, 2011) and existence of some performance management system. Whereas one of the institutions was a cross-border provider, two operated as study sites, offering franchise programmes. Notably all the 13 institutions had no systems, processes and the infrastructure needed to provide high quality services as evidenced by the Survey conducted by CHE (CHE, 2012a). In fact, none of the 13 higher education institutions had either a written quality assurance policy or an administrative structure looking after quality assurance or quality assurance system and tools.

There was need therefore to think about an intervention designed to build a quality culture within the institutions so that external quality assurance activities such as programme accreditation and institutional audit would be more realistic, culminating in real changes within each higher education institution. Additionally, we were also influenced by the conviction that quality assurance is the responsibility of each higher education institution. In other words, the provision of quality higher education would depend upon the effectiveness of internal quality assurance mechanisms within each institution.

Methodology

Intervention

In order to introduce quality assurance in the higher education sub-sector in Lesotho, CHE designed and implemented an intervention strategy that entailed working with institutions to inculcate the quality assurance culture and to build the quality infrastructure by providing technical support to the institutions as they activated and strengthened their internal quality assurance structures, mechanisms and tools in preparation for implementation of external quality assurance activities. This

approach was premised on the assumption that building a national quality assurance culture is a very complex and multifaceted process whose success is contingent upon the progress made at the institutional level. Put another way, external quality assurance activities such as programme accreditation and institutional audits would yield significant improvements at the institutional level if higher education institutions enjoy robust internal quality assurance system, mechanisms and tools. Accordingly, CHE engaged a consultant to provide the much needed capacity-building in quality assurance and leadership to the institutions as they activated and strengthened their internal quality assurance mechanisms in preparation for the implementation of external quality assurance.

Capacity –Building Quality Assurance Workshop

The intervention commenced with a two-day capacity-building workshop led by a quality assurance consultant in February on 1st and 2nd February 2012. Attended by two representatives from each of the 13 institutions and other stakeholders, the workshop introduced participants to a number of basic quality assurance constructs, mechanisms and tools. More importantly, participants were challenged to identify the things that they do well and those that need improvement. Finally, participants agreed to embark on the following post-work activities that were to be implemented within each institution from February to September 2012:

1. Sensitization of institutional communities mandate of CHE as a regulatory body and on the need to institutionalize quality assurance;
2. Development of institutional quality assurance policy documents to guide quality assurance activities in the institutions;
3. Development of the institutional quality criteria and quality assessment tools;
4. Setting up of institutional quality structures;
5. Pilot self-evaluation exercise focused on one programme;
6. Development of Improvement Plans based on the self-evaluation exercise;
7. Quality Assurance Action Plan for the next 6 months following the end of the intervention in September 2012.

Role of Consultant

The consultant provided support and guidance to those working in the institutions by providing: (a) sample institutional quality assurance policy, (b) Sample Institutional Quality Criteria, and (c) Guidelines for Self-Evaluation. Additionally, he read draft documents produced from and each institution and provided detailed feedback in each case. CHE provided a link between the institutions and the

consultant. It is important to note the consultant and CHE officials were very careful not to appear as if they were prescribing or dictating the approach that the institutions should take in pursuing post-workshop activities. The institutions were very clear that they were at liberty craft their own destiny in building their internal quality assurance infrastructure.

Mid-Term Review

The mid-term review workshop was held at end of May 2012. The purpose of the review was to enable the institutions to share experiences, make specific requests for professional support depending own context and to pose questions for which they could not get reasonable answers. During this workshop, the institutions made presentations on the progress they had made and posed a number of questions on how they could overcome the challenges they had met, and the consultant provided logistical support and guidance based on the reports from the institutions. It emerged during this workshop that the institutions had made varying degrees of progress in driving post-workshop activities. In particular, the nursing institution appeared to have embraced post-workshop activities to a greater extent compared to public institutions.

Institutional Visits

In August 2012, the consultant and a designated CHE official conducted visits to selected institutions and collected submissions from the institutions for correction and feedback. They also continued to provide logistical support and guidance to the institutions. Although the visits were mainly targeted at the institutions that appeared to have made least progress during the review meeting held in May 2012, an attempt was made to select a representative sample of public and private institutions. In addition, we also visited one institution that had made significant progress in order to learn more about the issues, factors and context that made progress possible. Altogether 4 public institutions and 3 private institutions were visited.

Final Review Workshop

The final reporting period for the project was held early October 2012. During this workshop each institution submitted three items: (a) detailed progress report describing the challenges and progress made towards pursuance of post-workshop activities listed above, (b) report of the self-evaluation exercise, (c) Improvement plan based on the self-evaluation exercise, and (d) Action Plan detailing quality assurance activities that each institution would do following the review workshop. This workshop provided another forum in which the institutions share experiences,

challenges and the strategies used to drive post-workshop activities.

Data Sources

With the support of the consultant, CHE documented this process while providing support to the institutions throughout the project period. Accordingly, the sources of data included field notes based on observations by the consultant and CHE officials, institutional reports, and report by the consultants (CHE 2012b).

Data Analysis

The data was analyzed using a qualitative method of data analysis. Essentially, we first coded the data on the bases of the initial themes drawn from the objectives of the intervention and our understanding of factors that might enable or constrain progress towards attainment of post-workshop milestones. Then each theme was accordingly revised as the rest of the data was analysed following hierarchical approach that entailed proceeding from specific observations to general observations (Creswell, 2009).

Findings and Conclusions

It was found that the institutions had made varying degrees of progress in implementing post-capacity building workshop activities. In assessing the impact of the intervention, we discuss the following themes: (a) awareness of need for quality assurance, (b) capacity to develop quality assurance systems and mechanisms, (c) buy-in by top management, (d) time constraints, (e) institutional differences, (f) institutional autonomy, (g) change management.

Awareness of Need for Quality Assurance

Sensitization workshops and meetings were held within each institution to describe the Mandate of CHE and the need to embark on institutional activities. On one occasion CHE officials were invited to lead a sessions in one of these workshops. It can be concluded that the institutions in Lesotho are now aware of the impending programme accreditation and the need to prepare for this by strengthening their internal quality assurance mechanisms. A key issue is whether the institutions now see building a quality assurance infrastructure as a CHE requirement (compliance culture) or as an institutional project for which everyone in the institution takes ownership (institutional quality culture). Our impression is that in the early going, some of those running the institutions emphasize compliance with CHE requirements. We hope that each institution will, at some stage of its development, be able to make a transition from a culture of compliance to a culture of institutional ownership of

internal quality assurance mechanisms.

Capacity to Develop Quality Assurance Systems and Mechanisms

Despite the support extended by CHE through the consultant, a key challenge that seemed to confront the institutions was lack of adequately qualified personnel to drive the process of building the quality assurance infrastructure within each institution. For example, the majority of the institutions needed to engage consultants in order to pursue technical tasks such as development of institutional quality assurance policies and quality assessment tools. Perhaps the two-pronged strategy is needed in which CHE continues to organize some capacity-building activities for personnel from the institutions while the institutions themselves take ownership of the responsibility to expose their key personnel to quality assurance capacity enhancement procedures.

Buy-in by Top Management

Contrary to expectations, a more serious challenge, however, entailed the apparent lack of buy-in from key personnel, especially those in the management of some of the institutions. We had expected management of all institutions to fully embrace the idea of building a quality culture within each institution by providing support to those participating in the CHE quality assurance activities. In some institutions, post-workshop activities were assigned to some officers with some distance from the Head of institution. Consequently, such committees made little progress towards helping build the QA culture. The only plausible explanation of this observation is that the management in these institutions are part of the institutional norms and values that have had little or no relationship with issues of quality over the years. Perhaps with hindsight, they too required sensitization and capacity-building on quality assurance issues. Given that quality assurance is an essential component of the service delivery in each institution, sensitization and capacity-building of top institutional management must be sustained if we are to succeed in institutionalising quality assurance in Lesotho.

Time Constraints

Both during the midterm and final review workshops, participants did indicate that the period from February to September 2012 was not enough to do technical tasks such as development of policy. Our own view was that the purpose of the intervention was to kick-start the process of building quality assurance mechanisms within institutions, and that the idea was build a foundation for the continuing development of these systems and mechanisms even if institutional acceptance and approval could

not be attained during the project period. Additionally, participants complained that those running the institutions did not allow enough time for quality assurance activities. We believe that a top institution management that has fully embraced quality assurance as the nerve centre of good service delivery should be able to provide both time and the resources needed to develop the institutional quality assurance infrastructure. This observation further high underscores the buy-in by top management would enable the space, support and time need to build the quality assurance infrastructure within higher education institutions in Lesotho.

Institutional Differences

Another factor that seemed to affect the progress made at the institutional level seemed to be related the nature of the institution. Indeed both the mid-term review and final review workshops indicated that the institutions had made varying degrees of progress towards attaining project milestones. Notably, smaller private institutions (nursing institutions) were found to have made greater progress compared to the larger public higher education institutions towards pursuing post-workshop activities. For example, two nursing institutions were the first to come up with draft institutional policy document. Public institutions were generally very slow in getting the process started. They cited a number of constraints, including lack of capacity and support from top management. Additionally, the three institutions that offered franchise programmes accredited by foreign accrediting bodies made little progress in pursuing post-workshop activities. We have had to work very hard to convince those running these institutions that even their franchise programmes must satisfy local accreditation requirements.

Institutional Autonomy

Other factors that seemed to constrain the strengthening of quality assurance processes within higher education institutions were more contextual and seemed to emerge from a very abnormal institutional governance set up in which a number of public institutions remain departments of government ministries, enjoying little or no institutional autonomy. Of the 8 public institutions that took part in the project, only 3 enjoy institutional autonomy (see Table 1). These are the only institutions that can, amongst other things, budget for quality assurance activities, including establishment of internal quality assurance structures. The rest of these institutions remain part of government ministries and were constrained by a number of bureaucratic hurdles in their attempt to pursue post-workshop activities. For example, the setting up of an internal quality assurance structure and its budgetary needs would have to go through a lengthy approval process at the government ministry It would seem that in order for

entrench a quality culture within institutions, there is need to effect adequate changes in the institutional governance structure. Notably, a more desirable set up would be for all institutions to be founded by an act of parliament that accords each institution fully autonomy so that they can take full control of their internal quality assurance activities.

Change Management

We expected that each institution would have to deal with resistance from the teaching staff and support staff who had worked for many years with little attention to issues of quality assurance. Indeed, some of the institutions reported that upon embarking on the pilot self-evaluation exercise, some members of staff felt the findings made them insecure. Thus in order to succeed in building the quality culture within each higher education institution in Lesotho, a change management strategy that has a strong component of capacity-building, continuing professional support and a communication strategy will be needed. The CHE must work in concert with higher education institutions to build capacity to manage change in the emotions, norms and values as quality assurance ideas, mechanisms, systems and tools are introduced in the institutions.

Conclusion

Despite the challenges described in this section, the intervention targeted at resuscitating and strengthening internal quality assurance within higher education institutions in Lesotho has indeed yielded some positive excitement and activity in the institutions. Working in collaboration with the institutions, CHE must develop a strategy for building on the momentum created by the intervention so that the institutionalization of quality assurance is attained. Such a strategy must be anchored on sustained capacity-building and advocacy for major structural changes to enable the building of internal quality assurance infrastructure in each higher education institution in Lesotho. As mentioned several times in this paper, attainment of full autonomy, with right to determine the level of tuition fees by public institution would create conditions necessary for building and sustaining a quality culture within institutions. More importantly, our approach at inculcating a quality culture in the higher education sub-sector has, at this initial stage, showed some bias towards the institutions even though some key stakeholders have participated in the development of quality assurance tools such as Minimum Programme Accreditation Standards. A concerted effort needs to be made towards engaging a wider spectrum of stakeholders, including students, employers and the community on quality awareness activities so that everyone knows what to expect or demand from the services provided by higher

education institutions. Our view is that quality culture within each higher education institution will ultimately be as strong as a quality culture that exists in the wider society.

References

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