

Quality Assurance and Public Accountability



By Dorte Kristoffersen,
Director, Dorte Kristoffersen Consulting

CHEA/CIQG
Publication Series

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CHEA International Quality Group **CIQG**

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ABOUT THE AUTHOR

Dorte Kristoffersen is Director of Dorte Kristoffersen Consulting. An experienced quality assurance professional with a strong international profile who has held senior executive positions in quality assurance bodies in Australia, Denmark, Hong Kong and the US, she was Executive Director of the Hong Kong Council for Accreditation of Academic and Vocational Qualifications (HKCAAVQ) until January 2018. Ms. Kristoffersen now resides in Melbourne, Australia and has since 2018 worked as an independent consultant in quality assurance and higher education. She is currently a member of the University Quality Assurance International Board (UQAIB) in Dubai and the Quality Evaluation Panel in Macao.

ABOUT CHEA

A national advocate and institutional voice for academic quality through accreditation, the Council for Higher Education Association (CHEA) is an association of degree-granting colleges and universities and recognizes institutional and programmatic accrediting organizations in the United States. The CHEA International Quality Group (CIQG) serves as a U.S.-based international forum for quality assurance and accreditation.

Quality Assurance and Public Accountability

PURPOSE

The purpose of this publication is to provide an overview of how quality assurance (QA) bodies are accountable to the public for how they accredit or quality assure* effective institutional performance in the form of outcomes for students, often referred to as student success or student outcomes. The project consists of two parts. Part I is a mapping of practices of QA bodies with respect to performance measures related to student outcomes. On the basis of the findings in Part I, Part II presents case studies of practices for public accountability used by selected QA bodies. The project publication concludes with some general remarks and ideas for future consideration.

The Council for Higher Education Accreditation International Quality Group (CHEA/CIQG) thanks the four QA bodies – the Accrediting Commission of Career Schools and Colleges (ACCSC), the Malaysia Qualifications Agency (MQA), the Tertiary Education Quality and Standards Agency (TEQSA) and the WASC Senior College and University Commission (WSCUC) – whose practices are included in the report – for their support and contributions to the author in preparing the case studies.

INTRODUCTION

The world of higher education has been changing rapidly over the last 30 years with the move to mass education due to the needs of the knowledge economy for an appropriately skilled labour force and driven by continuous advances in technology.

These changes have had an important impact on who is interested in higher education, how quality of higher education is defined and by whom. The changes are also putting pressure on higher education institutions and QA bodies to increase the transparency about how quality is assessed and what is required of higher education institutions or programs to be accredited so that useful information about educational quality can be provided to the major stakeholders such as governments, students, parents, and the public, including the media.

* The terms “accreditation/accredit” and “quality assurance” are used interchangeably in the report to refer to any quality assurance process, be it accreditation, review or audit

U.S. accreditors recognised by the U.S. Department of Education have, over the last 10 years, gradually been required to increase information in the public domain about accreditation actions taken. The *European Standards and Guidelines*, approved by the European education ministers and as revised in 2015, require the publication of full reports from QA agencies and all formal decisions taken on the basis of quality assurance reports, leading to both positive and negative outcomes.



This project defines public accountability as the responsibility of accreditation/QA bodies to provide reliable evidence of the effective performance of accredited or quality assured institutions and programs.

Regardless of the increased degree of transparency of the outcomes of quality assurance processes, there is regularly public debate in many countries about whether higher education institutions are preparing students adequately for employment and are reflecting society's expectations and needs. The emphasis on higher education being a public good has played an important role in repositioning higher education. This has been reflected in a demand for greater accountability for all public organisations, and there are specific issues for higher education regarding concerns

about higher education access/participation, costs/debt, graduate employability/unemployment, and social/economic impact. There is a growing desire to move beyond assessing quality to linking quality to relevance and resources. (Hazelkorn & Gibson, 2017¹, Eaton, 2017², Wilson, 2013³)

These discussions and pressures provide the context for this CHEA/CIQG project *Quality Assurance and Public Accountability*. This project defines public accountability as the responsibility of accreditation/QA bodies to provide reliable evidence of the effective performance of accredited or quality assured institutions and programs. The central feature of "performance" is what happens to students, i.e., completion, graduation, jobs and earning rates, and entry to graduate school or successful transfer. The information is to be available to all major stakeholders – students, institutions, programs, government, the public, and the media.

The definition of accountability that is used aligns with typical definitions of "accountability" that generally focus on the idea of giving account of one's actions to some other person or body⁴. Trow has identified five fundamental questions

with respect to accountability: who is to be held accountable, for what, to whom, through what means, and with what consequences⁵. These questions have guided the presentation of the case studies included in this publication.

It should be mentioned that there are other means through which QA bodies are held accountable to stakeholders or take initiatives that provide an insight into the way they operate and the decisions they take. These measures include, e.g., regular external reviews conducted by professional associations or governments, governmental audits, thematic reviews of the main outcomes of their quality assurance activities, and databases containing current and past quality assurance outcomes. These measures of accountability are not included in this study.

OVERVIEW OF QUALITY ASSURANCE BODIES PRACTICES

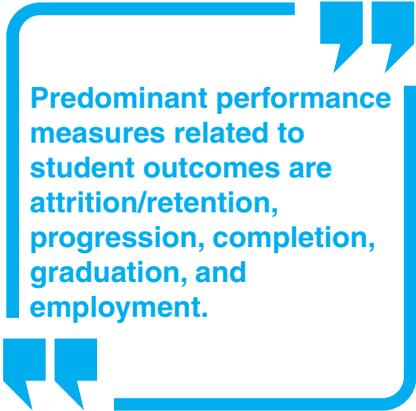
The study includes 28 QA bodies across Africa, Austral-Asia, Central and Latin America, Europe, the Middle East and North America (see Annex A). The QA bodies have been selected in order to gauge how they are accountable to the public regarding their assessment of effective institutional performance in the form of student outcomes. All the studied QA bodies have been in operation for a substantial period of time, i.e., they have performed at least one quality assurance cycle. The selection of the QA bodies has been informed by academic papers, QA body websites, and experts with knowledge of the particular QA bodies and their activities as they relate to public accountability. This approach does not mean that QA bodies not included in the study do or do not cover the performance measures included in the study in their accreditation/quality assurance work and have good practices for public accountability.



The project has primarily been conducted as desk-based research making use of the websites of the QA bodies involved and some clarification/follow-up directly with some QA bodies. The information that has been used to identify the accountability practices has been found in Standards & Criteria, Accreditation/Review/Audit Handbooks, Team/Reviewer Manuals, Guidelines for institutions, evidence/reporting templates, and Accreditation/Review reports/action letters available in the public domain.

Some of the studied QA bodies only quality assure either institutions or programs; some work at both program and institutional levels. There are some QA bodies that

only include performance measures in one of the applied approaches. The mapping exercise showed that most of the 28 QA bodies studied require information on performance that includes student outcomes at institutional and/or program level, depending on the type of quality assurance approach they apply. For accreditation at institutional level, the performance measures are either reported for the institution's programs or generically at institutional level.



Predominant performance measures related to student outcomes are attrition/retention, progression, completion, graduation, and employment.

The predominant performance measures related to student outcomes covered by the QA bodies are attrition/retention, progression, completion, graduation, and employment (see table 1). The QA bodies' approaches to considering these measures differ, however. Some QA bodies require institutions to report on specific measures, data, or indicators in a self-study, and they provide definitions of these measures for institutions to use. Other QA bodies require institutions to identify and define the performance data/information they consider to be relevant in their particular context and report on these in a self-study. It is a common feature among the majority of the QA bodies that they require institutions to analyse and monitor their program or institutional performance data and be able to explain how they take action informed by their analysis of the data.

Institutional performance is in most cases assessed in the accreditation or quality assurance process in the context of an institution's or program's mission and vision, i.e., a fitness-for-purpose approach. These assessments lead to a holistic consideration by reviewers and recommendations to the QA bodies as to whether the institutions or programs meet the QA body's standards, criteria, or requirements. There are very few examples where QA bodies have defined threshold or baseline performance outcomes for successful accreditation, and this information is available in the public domain. Only one QA body has been identified that currently publishes threshold/ benchmark statements about the expected institutional performance with respect to student outcomes. In the cases where QA bodies provide information about institutions' student outcomes to the public, it is provided in accreditation reports or action letters to institutions.

It is worth noting that the mapping also showed that half of the studied QA bodies assess information about institutional or programmatic finances, i.e., information about financial viability or sustainability. Although these measures do not reflect student achievement, the financial stability of an institution is an important indicator of the institution's ability to perform effectively and achieve its defined student outcomes.

Table 1: Performance Measures Covered by Studied QA Bodies

| Performance Measure | Total out of 28 |
|---------------------------|-----------------|
| Attrition/Retention | 14 |
| Progression | 14 |
| Completion | 17 |
| Graduation | 10 |
| Employment | 17 |
| Credit transfer | 7 |
| Continuation of studies | 0 |
| Debt | 0 |
| Loan default | 5 |
| Earning rates/information | 2 |

Note: If a QA body conducts more than one type of accreditation covering a performance measure, it is only counted once.

In summary, the mapping shows that data about student outcomes feature in both institutional and program quality assurance and that the most frequently collected data are used to assess if students complete their studies and to determine their employment situation after graduation. The responsibility for identifying student outcomes data varies and either rests with the QA body or is left to the institution itself. It is not common practice for QA bodies to define particular thresholds for acceptable performance. Nevertheless, there is a general expectation from QA bodies that institutions collect, analyse and act on student outcomes data to maintain and improve quality.

CASE STUDIES

Based on the mapping, four QA bodies have been identified to be used for case studies.

The following section presents four different approaches or tools used by QA bodies to determine an institution's or a program's performance, how the QA body's expectations of that performance is presented to stakeholders and what recommendations, if any, are made by the QA body for institutions to improve performance. The case studies are intended to provide examples/inspiration and/or be the starting point for considerations and discussions about ways in which transparency of public accountability of QA bodies' assessment of student outcomes can be developed or enhanced. The case studies are not intended to provide a full presentation of the chosen QA bodies' quality assurance activities. They focus on the approach to public accountability.

Each case study is divided into three sections:

1. Brief introduction of the QA body to provide the context of the presentation of the tool for assessment of performance
2. Presentation of the tool to assess performance
3. Presentation of how outcomes of the assessment of the performance are made transparent to stakeholders

Case study A: Accrediting Commission of Career Schools and Colleges

Introduction

The Accrediting Commission of Career Schools and Colleges (ACCSC) is recognised by the United States Department of Education (USDE) as the designated institutional accrediting body working with around 700 postsecondary, trade, and technical schools.

ACCSC's scope of (USDE) recognition covers the accreditation of both non-degree-granting and degree-granting institutions, including those granting associate, baccalaureate, and master's degrees. To be eligible for ACCSC accreditation, a school's educational objectives must be career-oriented and aimed at providing graduates with the necessary competencies, skills, and level of education for employment in their fields of study.

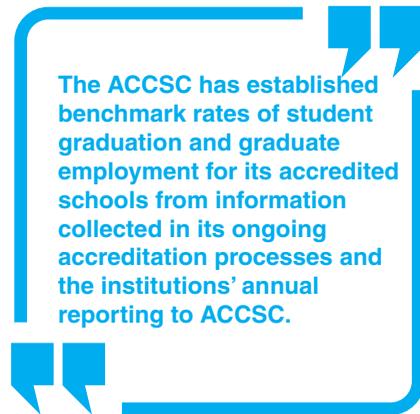
ACCSC’s accreditation processes focus on inputs, resources, and processes, i.e., how the school operates. All of these areas are evaluated within the context of the school’s stated mission and its demonstrated achievements. The accreditation processes also promote institutional self-evaluation and improvement and provide for public accountability within a peer-review framework.

ACCSC accreditation is based upon criteria established via ACCSC’s Standards of Accreditation. The standards emphasise educational quality by focusing on outcomes. The standards include a requirement for institutions to report student achievement outcome data such as retention, graduation, and employment data, as well as licensure/certification exam pass rates against established benchmarks.

Performance Assessment Tool: Benchmarks for Student Outcomes

The ACCSC has established benchmark rates of student graduation and graduate employment for its accredited schools from information collected in its ongoing accreditation processes and the institutions’ annual reporting to ACCSC. Until 2016, ACCSC recalculated student achievement benchmark rates every three years using a rolling average. In 2016, ACCSC conducted an 11-year longitudinal study of the graduation and

employment rates reported from 2005 to 2015 in the Annual Reports in order to discern the stability, predictability, and reliability of the rates used in establishing ACCSC’s benchmark rates. The longitudinal study applied the same formula to the 11-year data set as ACCSC had applied to the three-year data sets previously used. Overall, ACCSC found that the data collected and the resulting benchmarking established from that data were both stable and reliable, and there was little variation from ACCSC’s existing benchmarks compared to the results of the 11-year longitudinal study.



The ACCSC has established benchmark rates of student graduation and graduate employment for its accredited schools from information collected in its ongoing accreditation processes and the institutions’ annual reporting to ACCSC.

ACCSC provides graduation and employment charts for institutions to complete as part of the accreditation processes. The charts include the required information, as well as the data definitions. Schools are expected to set goals to exceed not only the benchmark rates but also the average rates of graduation and employment⁶.

Table 2: ACCSC Student Achievement Rates in Effect for all Graduation and Employment Charts That Use a Report Date of July 1, 2016 and Later

| Established Benchmark Graduation Rates | | | |
|---|------------------------------------|---------------------------|---|
| Program Length in Months | Average Rates of Graduation | Standard Deviation | Established Benchmark Graduation Rates |
| 1-3 | 92% | 8% | 84% |
| 4-6 | 84% | 11% | 73% |
| 7-9 | 72% | 12% | 60% |
| 10-12 | 69% | 14% | 55% |
| 13-15 | 64% | 14% | 50% |
| 16-18 | 62% | 15% | 47% |
| 19-23 | 61% | 18% | 43% |
| 24+ | 53% | 13% | 40% |

Sources: ACCSC Standards of Accreditation and Bylaws - 070117 final

ACCSC also requires a 70% licensure pass rate on certification exams when they are required for a training program by law or regulation for employment.⁷

ACCSC reviews student achievement for each program offered at an institution at least annually via the submission of an institutional Annual Report and considers not only the rates at which students graduate from a training program, attain employment in a training-related field, and pass licensure/certification exams required for employment, but also other factors that are reasonably related to student achievement as a measure of educational quality and institutional effectiveness.

For any program that has a graduation, employment, or licensure/certification exam pass rate that is lower than ACCSC’s established benchmark rates, a school is given an opportunity to demonstrate, with supporting documentation, the successful achievement of its students in that program by providing other reliable indicators of successful student learning and by showing that factors such as economic conditions, state and national trends, location, student population served, length of program, students who withdraw from training but still obtain employment, state

requirements, or other external or mitigating factors reasonably related to student achievement are adversely impacting the school's ability to meet the established benchmark rates.

The ACCSC Commission considers the student outcomes data as part of its holistic assessment of an institution. As part of its efforts to recognise high performing institutions, ACCSC offers an additional year of accreditation, i.e., a six-year reaccreditation period instead of a five-year reaccreditation period for those schools that successfully complete the accreditation process without any compliance, regulatory, or financial findings AND demonstrate that the majority (50% of more) of the programs offered at the school report a graduation and employment rate at AVERAGE or better (not benchmark).

Any program that has a graduation, employment, or licensure/certification pass rate that falls below the ACCSC's established benchmark rate will be subject to heightened monitoring or reporting of student achievement outcomes as directed by ACCSC or to other action as deemed appropriate.



Table 3: Examples of ACCSC Action

| Action | Requirements |
|-----------------------|--|
| Heightened monitoring | At a minimum, detailed annual review of a program’s graduation and/or employment rate(s). This may require the submission of additional student achievement outcomes information as appropriate (e.g., plans for improvement; an updated Graduation and Employment Chart; current program retention, graduation, employment and/or licensure/certification pass rate(s); supporting documentation; etc.). |
| Reporting | The submission of student achievement outcomes data (e.g., student program retention, graduation rates, and employment rates); pass rates on licensure/certification examinations and examinations required to be taken as a condition of employment (i.e., local, state, and federal); admissions criteria studies; institutional operations and improvement planning; or any other information that the Commission determines necessary to make a judgment regarding the successful achievement of students. |
| Programmatic action | Require an on-site evaluation; temporarily require a school to cease enrollment in a program; suspend or revoke program, degree-granting, or distance education approval. |
| Institutional action | Issue a Warning or Probation Order when the Commission has determined that the school has not demonstrated acceptable student achievement either through its student learning assessment efforts; graduation, employment attainment, and/or licensure/certification exam pass rate(s); or a combination thereof. |

Source: ACCSC Standards of Accreditation and Bylaws - 070117 final

Transparency of Assessment of Performance

The institution's student achievement data is provided in the institutional Self-Evaluation Report and summarised in the Team Summary Report (TSR) issued following an on-site visit to an institution.

If the reported graduation, licensure, or employment rate for any program is below benchmark, the TSR will include a "Finding" that the school must respond to. That response is provided to the ACCSC Commission for consideration. Typically, the school will submit a response describing its strategies and initiatives that have been implemented to help improve the reported rates of graduation and employment, as well as more recent Graduation and Employment Chart to show how the rates have trended since the visit.

The institutional response is also provided to the ACCSC Commission to inform its decision making. If the rates of graduation and employment continue to fall below benchmark, the Commission's action letter, i.e., the reporting of its decision to the institution, will include particular requirements for the school address. If the rates fall significantly below benchmark, or if the rates fall continuously below benchmark (reporting data to commission for an extended period of time), this could result in a programmatic action or institutional action.

The ACCSC Commission may order a school to submit a report on its compliance with accreditation requirements during the course of routine accreditation reviews or at any time the Commission believes that monitoring of compliance with an accreditation requirement is warranted.

In cases where the Commission has significant concerns regarding a school's compliance with one or more accrediting standards or other requirements or has determined that a school is out of compliance with one or more standards, the Commission may, at its discretion, place a school on Probation. As part of the Probation Order, the Commission may direct the school to show cause as to why the school's accreditation should not be withdrawn, and it will be required to demonstrate corrective action and compliance with accrediting standards.

ACCSC actions are summarised and available on the ACCSC website, while full Probation and Adverse Action letters, e.g., regarding denial or withdrawal of ac-

creditation, are published on the ACCSC website. Under ACCSC’s Rules, on a case-by-case basis, the Accrediting Commission may also elect to publish Warning letters on the website. ACCSC’s Standards of Accreditation also require a school subject to a Probation Order to inform current and prospective students that the school has been placed on Probation and that additional information regarding that action can be obtained from the Commission’s website. When student achievement results affect the Commission’s decision to place an institution on probation, a comprehensive analysis of the student achievement data is included in the action letter to the institution.

ACCSC offers a range of special workshops and webinars that focus on best practices of high-performing institutions and publishes a diverse array of materials designed to support institution not only to demonstrate compliance but also to support the schools’ ability to ensure students receive high-quality education. This information is published on the ACCSC website, where it is available not only to member institutions but to the public at large.



Case study B: Malaysian Qualifications Agency, Malaysia

Introduction

The Malaysian Qualifications Agency (MQA) is the national quality assurance agency. It was established in 2007 by the government under the Malaysian Qualifications Agency Act 2007. MQA is the guardian of the Malaysian Qualifications Framework (MQF) and is responsible for overseeing quality assurance practices and accreditation of national higher education at both institutional and program level. This role involves the development of institutional and program standards and criteria and provisional accreditation of new programs, followed by full accreditation of both public and private higher education providers⁸. All higher education institutions are subject to maintenance audits to determine the continuation of program accreditation status and to periodically review of the institution’s academic activities and performance. The audit is a tool for the Ministry of Higher Education to facilitate the monitoring of the quality of HEIs⁹. The MQA program standards include a requirement for institutions to provide information on student attrition, progression, completion, and credit transfer. The institutional standards include a requirement for information on attrition and transfer of credit.

Performance Assessment Tool: Discipline Ratings

In addition to its accreditation activities, MQA in 2009 and 2011 conducted a Discipline-Based Rating process (D-SETARA) that covered schools or faculties where particular disciplines were offered. The purpose of D-SETARA was to assess the quality of teaching and learning at level 6 (undergraduate) of the MQF in universities and university colleges. The intention behind the approach was to benchmark disciplines against a set of quality standards for the purpose of improving the institution and the discipline. The approach was not intended to lead to competition between institutions. The D-SETARA is complementary to I-SETARA, i.e., ratings at institutional level that have been carried out for public universities and university colleges from 2007** by the Ministry of Higher Education.

The D-SETARA instrument was developed by subcommittees established by MQA, and the methodology was based on the I-SETARA instruments, in order to ensure comparability with the institutional ratings. The D-SETARA evaluation of teaching and learning was divided into Input-Process-Output domains. Each domain consisted of a set of criteria that were divided into a number of indicators. Each domain had been allocated a weight which differed based on the type of discipline. For example, in 2011 the weight was 20:40:40 for the three domains for the Engineering and the Medicine, Dentistry and Pharmacy disciplines; 30:40:30 for Health Sciences, and 30:35:35 for Hospitality and Tourism. The varying weighting system of domains, criteria, and indicators was justified by differing discipline-specific needs.

Data for the indicators were collected from various sources, which included institutional data (through self-assessment supported by documentary evidence), employer surveys, tracer studies, and accreditation data. Various steps were taken to ensure data integrity from each of the sources. For the purpose of data collection, a template was prepared for the higher education institutions to use. The data submitted by the institutions were compiled and then verified by the subcommittees. Two verification meetings were conducted. The verification exercises covered the process of instrument development data collection, entry and analysis; missing data analysis and treatment; and the results. Subsequently, data analysis was undertaken which ultimately resulted in a tiering of the higher education institutions in each discipline.

**In 2007 I-SETARA only included public universities.

The “Outcome” domain included two student performance measures, i.e., criterion 1: Graduate Marketability, which was divided into employment rate and average monthly start pay, and criterion 5: Student Performance, which covered the rate of students completing their studies within the stipulated time.

Table 4: Engineering Output Domain D-SETARA 2011

| OUTPUT: QUALITY OF GRADUATES AND GRADUATE SATISFACTION | | | | | | | 40.00 | Source of Data |
|--|----------------------------|---|--------|------------|-----------|-----------|------------|---|
| No. | Criteria | Indicators | Weight | Sub-Weight | Unit Data | Benchmark | Full Marks | |
| 1. | Graduate Marketability | Employment rate (six months after completion of studies or continuing studies) | 30.0 | 50.00 | % | 100 | 6.00 | Tracer Study Q40 and 54 |
| | | Average monthly starting pay of graduates who are employed. | | 50.00 | RM | Flexible | 6.00 | Tracer Study Q44 |
| 2. | Graduate Satisfaction | Average satisfaction with the Higher Education Provider (HEP) of the graduates. | 10.0 | 100.00 | Score | 5 | 4.00 | Tracer Study Q20, 21, 22, 23, 24, 25 and 26 (b) |
| 3. | Employers' Satisfaction | Average satisfaction with the graduates of the HEP | 30.0 | 50.00 | Score | 5 | 6.00 | Employer Satisfaction Survey |
| | | Intention to employ from the HEP | | 50.00 | Score | 5 | 6.00 | |
| 4. | Generic Student Attributes | They seven generic student attributes | 15.0 | 100.00 | Score | 5 | 6.00 | Employer Satisfaction Survey/Tracer Study Q27 |
| 5. | Student Performance | Percentage of students completing within the stipulated time | 5.0 | 100.00 | % | 100 | 2.00 | Institutional Data |
| 6. | Competitions and Awards | Number of participation by students in international or national engineering-oriented competition per program | 10.0 | 50.00 | Number | 1 | 2.00 | |
| | | Number of achievement by students in international or national engineering-oriented competition per program | | 50.00 | Number | 1 | 2.00 | |
| Total Marks for Quality of Graduates and Graduate Satisfaction | | | | | | | 40.00 | |

Source: MQA website

Transparency of Assessment of Performance

The D-SETARA exercise resulted in a six-level rating of the participating higher education institutions in each discipline. The six tiers were: Outstanding, Excellent, Very Good, Good, Satisfactory and Weak. The basis for the rating was the total scores and cut-off values determined for each of the tiers. Only the overall rating of an institution was published. The marks achieved for each indicator; the minimum, maximum and mean marks achieved for each criterion; and the overall marks of an institution were communicated to the respective institutions only. The overall rating, in terms of the institutional tier rating of the discipline, was announced in a press conference hosted by the Minister for Higher Education, and announcements were made in the major newspapers. The higher education institutions received their results by letter. There was no link between MQA's program accreditation processes and D-SETARA as the outcomes of the D-SETARA instrument were intended to be used by higher education institutions for improvement purposes.

Case study C: Tertiary Education Quality and Standards Agency, Australia

Introduction

The Tertiary Quality and Standards Agency (TEQSA) is Australia's national quality assurance and regulatory agency for higher education. TEQSA was established in 2011 by the Commonwealth government through an Act of Parliament – the TEQSA Act. All providers, universities and non-universities, that offer higher education qualifications in or from Australia must be registered by TEQSA and undergo re-registration at least every seven years. Higher education providers that do not have self-accrediting authority must also have their courses of study accredited and reaccredited by TEQSA at least every seven years. TEQSA regulates higher education through a National Standards Framework that is developed by an expert Standards Panel, a legislative body included in the TEQSA Act. The threshold standards require that institutions review and monitor student success and provide their analyses of student progression rates, attrition rates, completion times, and rates to TEQSA.

The TEQSA Act specifies that TEQSA's regulatory approach is to be underpinned by three regulatory principles: risk, necessity, and proportionality. TEQSA considers risk to primarily mean the risk of current or future provider non-compliance with the threshold standards and associated risks to quality, to students, and to the reputation of the Australian higher education sector. TEQSA applies a systematic, struc-

tured, and consistent approach to assessing compliance risk across all providers, using a standard set of risk indicators corresponding to primary areas of institutional practice and performance. The risk indicators are contained in a Risk Assessment Framework and are applied in annual institutional risk assessments¹⁰.

Performance Assessment Tool: Risk Assessment

TEQSA focuses on four main areas in its assessments of risk. They are:

1. Provider regulatory history and standing
2. Students (load, experience, and outcomes)
3. Academic staff profile
4. Financial viability and sustainability

The TEQSA Risk Framework includes 11 indicators, four of which are directly related to or cover aspects related to student outcomes.

Table 5: TEQSA Risk Indicators

| Risk Indicators | Student Outcome Measures |
|---|---|
| Student load | |
| Attrition rate | X includes transfer to other institutions |
| Progress rate | X |
| Completions | X |
| Graduate satisfaction | |
| Graduate destinations | X |
| Senior academic leaders | |
| Student-to-staff ratio | |
| Academic staff on casual work contracts | |
| Financial viability | |
| Financial sustainability | |

TEQSA can cover other identified risks, e.g., provider specific risks.

A key aspect of TEQSA’s approach to assessing and arriving at a rating of an indicator is to consider a provider’s specific circumstances, which will supply the context for understanding any potential risks that the indicator is designed to capture. TEQSA also considers the calculated quantitative value of the indicator, based on its published technical definition, and with reference to ‘risk thresholds’. Risk thresholds provide guidance to TEQSA’s assessment of areas in which potential risks may be present. Considered together with the individual circumstances and context of the provider, TEQSA derives a risk rating (represented by traffic lights: green, yellow, and red). The assessment of individual indicators is then considered holistically to inform an overall risk evaluation of a provider.

The risk assessment is shared with each provider annually, except for newly registered providers that may have insufficient data to conduct a risk assessment. Providers are invited to respond to their risk assessment, which may lead to adjustments in the risk assessment.

If significant risks are identified, the provider is invited to discuss the risk assessment and provide any broader context and information on its strategies and any risk controls it has in place. The finalised risk assessment is used to inform the scope of scheduled assessment processes, e.g., renewal of registration application processes¹¹.

A final risk assessment will typically identify action in line with the following:

| | |
|-----------------------|---|
| <p>No action</p> | <p>If no significant risks are identified overall or risks are already known to TEQSA with a response already in place (such as additional reporting requirements), then TEQSA will not take any action in response to the risk assessment. The risk assessment will continue to be updated annually.</p> |
| <p>Recommendation</p> | <p>TEQSA may recommend that the provider closely monitor identified risks and/or put in place appropriate controls or improvement strategies. A recommendation arising from a risk assessment does not constitute a formal condition on registration.</p> |

| | |
|---|---|
| Request for information | TEQSA may identify risks that require further consideration by TEQSA. In such cases, TEQSA may seek additional information from the provider so that TEQSA may determine if further action is necessary. Requests for information may also be used to monitor identified risks between risk assessment cycles. |
| Regulatory action (e.g., compliance assessment or conditions) | If TEQSA identifies significant risks, it may determine that regulatory action is necessary outside a scheduled assessment process. This may include, for example, undertaking a compliance assessment to satisfy TEQSA that the provider continues to comply with the Threshold Standards or imposing formal conditions on registration. |
| To be considered in scheduled assessment process | If the provider has a scheduled assessment process (e.g., re-registration), TEQSA may indicate that risks identified in the risk assessment will be considered further during that process rather than identify additional action at that time. |

Source: TEQSA Risk Assessment Framework v2

In early 2018, TEQSA instituted a policy of meeting with all high-risk providers to discuss their performance. TEQSA has plans in the longer term to revise its Provider Engagement approach to include a visit to all providers on an annual basis.

Transparency of Assessment of Performance

The Risk Assessment Framework that includes the risk indicators is available to the public on the TEQSA website. The risk assessment of an individual provider is confidential between TEQSA and the provider. The risk thresholds are not published or shared with providers. The reason for the confidentiality of the risk thresholds are:

- A risk assessment does not, on its own, result in definitive conclusions in relation to compliance with the Threshold Standards.
- Ill-informed commentaries surrounding the risk thresholds could be very damaging to the reputational and commercial standing of providers and the sector.

-
- Qualitative information, including contextual and control information, is an important input to TEQSA’s rating of a risk indicator, which goes beyond quantitative risk thresholds.
 - There is a high risk of third parties misusing the risk thresholds in trying to replicate risk assessments, e.g., to rank providers.¹²

In registration and re-registration processes where TEQSA has identified potential risks of a provider not being in substantial compliance with the threshold standards, TEQSA’s decision will include conditions as to what action the provider needs to take to improve the areas of non-compliance. The decision also includes an explanation why the decision has been made, a decision that reflects the three regulatory principles risk, necessity, and proportionality. All conditions are publicly available on the National Register, which is a public database that TEQSA maintains on its website.

In October 2018, TEQSA published a report titled ‘Assessment Insights’, which analyses and presents the relationship between risk assessments and regulatory outcomes generically rather than on a provider basis.

Case study D: WASC Senior College and University Commission, California USA

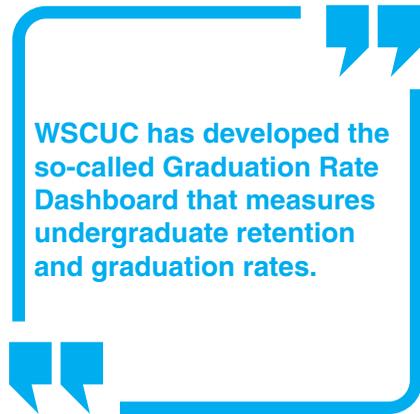
Introduction

The WASC Senior College and University Commission (WSCUC) is one of seven regional accrediting agencies in the United States. Regional accreditation serves to assure the educational community, parents, students, employers, policymakers, and the public that an accredited institution has met certain standards of quality and effectiveness. Regional accreditation is voluntary and non-governmental. The institutions accredited by the regional accreditors, including WSCUC, comprise the regional accreditors’ membership. Each regional accreditor has its own membership.

WSCUC serves a diverse group of public and private higher education institutions throughout California, Hawaii, and the Pacific, as well as a limited number of institutions outside the United States. The accreditation process is conducted based on standards agreed to by the WSCUC members, and its accreditation activities seek to ensure that the standards are met, as well as to encourage continuous institutional improvement.

Every accredited institution is subject to periodic review and to conditions, as determined by the Commission. A member institution has to file an Annual Report, provide information for a Mid-Cycle Review, and undergo a comprehensive accreditation review every six to ten years.

The WSCUC accreditation standards require that institutions provide disaggregated data on students' progress toward timely completion of their degrees and on retention and graduation rates for the programs delivered by the institution. WSCUC has developed the so-called Graduation Rate Dashboard (GRD) that measures undergraduate retention and graduation rates.¹³



Performance Assessment Tool: Graduation Rate Dashboard

The GRD is included as one element of a comprehensive analysis of student success conducted during the WSCUC institutional accreditation review process. The GRD was developed to serve as a more inclusive method to identify the enrolment, retention, and graduation patterns of all undergraduate students. The primary benefit of this methodology is that it accounts for all graduates regardless of how they matriculate (first-time or transfer, lower or upper division) or enrol (part-time, full-time, swirling), or what programs they pursue. Unique to the GRD is that it provides insight into the unit accumulation, redemption, and abandonment patterns of undergraduate students at the institutional level.

Each year, as part of an institution's annual reporting to WSCUC, all eligible, candidate, and accredited WSCUC institutions are required to provide six data points used in the GRD (see below). Other data elements, including graduation rate data, are collected from the National Center for Education Statistics (NCES). Student loan cohort default rates from the US Department of Education Federal Student Aid office are also included in the comparative tool.

The six GRD data points

| | |
|---|--|
| 1 | Unduplicated headcount of undergraduate degree-seeking students |
| 2 | Total number of successfully completed graduate units awarded by the institution |
| 3 | Undergraduate degree recipient headcount |
| 4 | Cumulative total of successfully completed undergraduate units awarded by the institution to graduating students |
| 5 | Non-continuing student headcount |
| 6 | Total institutional units of non-continuing students |

The six data points generate two completion measures, the Unit Redemption Rate (URR) and the Absolute Graduation Rate (AGR). The unit redemption rate (URR) is the proportion of units granted by an institution that are eventually “redeemed” for a degree from that institution. The absolute graduation rate (AGR) is the proportion of students entering an institution who graduate from that institution, regardless of how long it takes them. The unit redemption rate is an alternative way to measure completion, somewhat different from the standard graduation rate, as it counts units rather than students. The URR counts units that all students, full time and part time, first-time and transfer, take and redeem. Ideally, every unit granted by an institution ultimately results in a degree, but no institution actually achieves this ideal, given that students who drop out never “redeem” the units they take while enrolled. Conversely, some students may take more credits than are required for a degree. Nonetheless, the URR is typically below 100 percent.

By adding one additional data point (the average number of units taken by students who leave the institution), the URR is converted into a graduation measure, the absolute graduation rate, which estimates the proportion of students entering a college or university (whether first-time or transfer) who eventually graduate.

Both the unit redemption rate and the absolute graduation rate are influenced by significant or sustained enrolment fluctuations. Specifically, a decline in enrolment will increase the URR and the AGR, and an increase in enrolment causes a drop in

both measures. Due to such fluctuations, it is possible to have outcomes greater than 100%. For this reason, it is important to take enrolment patterns into consideration when using these measures. Both the URR and AGR measures are comparable across all institutions.

In summary the GRD:

- Builds on six data points
- Covers eight years of trends
- Results in two completion measures

Transparency of Assessment of Performance

GRD results are being considered as one measure of student success in WSCUC reviews. WSCUC accreditation includes a review of the Integrated Postsecondary Education Data System (IPEDS) cohort default rates, publicly posted information on student achievement, and any other measures provided by the institutions as part of accreditation, reaccreditation, and mid-cycle review. WSCUC does not intend that any accreditation decisions will be made based solely on any one measure, including the GRD measures. The Commission is committed to the use of multiple measures of retention and graduation to gauge institutional effectiveness and student success.¹⁴

There are no specific graduation rate thresholds that institutions are required to meet to have a successful (re)accreditation outcome. Rather, institutions are asked to “engage” with the GRD, determining whether it adds to their understanding of student success or introduces new questions or data queries that are of value. Peer evaluator team reports comment on retention and graduation rate data, on trends in these data, and on institutions’ approaches to monitoring and evaluating retention and graduation data. WSCUC has developed a comparability tool which is available on the WSCUC website as a resource for institutions and peer evaluators to better understand and improve graduation rates.

WSCUC provides instructions on its website on the use of the GRD in evaluator team training and regularly conducts workshops at relevant conferences. In addition, WSCUC is currently exploring the use of benchmarking tools that would allow for estimating predicted retention and graduation rates based on certain characteristics of an institution and its students using IPEDS and GRD data.

CONCLUDING REMARKS

As mentioned in the introduction, the level of transparency of accreditation outcomes, positive as well as negative outcomes, has gradually increased, and in many parts of the world, it has moved beyond reporting only the decision, i.e., whether accreditation or a QA process had been successful or not, to publication of, e.g., full reports, summary reports, or action letters. This development has been driven by an increasing demand from stakeholders for a higher degree of insight into institutional performance and how it affects student outcomes. The study suggests that the information listed below could be relevant for QA bodies to take into account when communicating with stakeholders to strengthen the communication about student outcomes.

1. Generic definition(s) of student outcomes
2. Performance measures used to assess student outcomes
3. Descriptions of data/data points/indicators used to assess student outcomes
4. Thresholds used, if any, to determine acceptable levels of student outcomes
5. Actions taken when student outcomes do not meet expectations
6. Trends in levels of student outcomes consolidated across institutions accredited
7. Link to publications of institutional student outcomes.

If a QA body were to provide information to stakeholders about student outcomes along the lines suggested above, it would have to consider how the information could best be provided in line with its communication strategy. The template for public reporting of student outcome measures below is included as an example only.

Template for Public Reporting of Student Outcome Measures

| Reporting | Possible content |
|--|--|
| Generic definition(s) of student success | Present to stakeholders how student success is defined in terms of outcomes in the accreditation/quality assurance processes. |
| Performance measures used to assess student outcomes | Present the specific measures, such as retention, attrition, graduation, used in the review process and how these measures are defined to guide institutions in their self- review or internal quality assurance processes and to guide teams in the external review process. |
| Data/data points/indicators used to assess the student outcomes | Provide examples of the data that institutions are expected to provide as evidence of their student outcomes and examples of how the data are monitored and acted upon by the institutions. |
| Thresholds used, if any, to determine acceptable levels of student success | Include information about the thresholds used by the QA body to determine if the outcomes are satisfactory from an accreditation/quality assurance perspective or whether action is required to improve performance or further explanations are required to understand the reasons for the outcomes. |
| Actions taken when student outcomes do not meet expectations | For institutions that do not meet thresholds, provide information on the actions the QA body requires them to take to improve performance. This could include information about how the performance was eventually improved. |

| | |
|--|---|
| Trends in levels of student outcomes consolidated across institutions accredited | Provide analysis of the how student outcomes have developed across all accredited or quality assured institutions over time and what trends have been identified to require particular attention for improvement or what areas have been recorded as particular strengths |
| Link to publications of institutional student outcomes | Provide a link on the QA body website that gives stakeholders access to the publications, such as action letters, accreditation reports, and decision documents, that include information about institutional student outcomes. |

The case studies present four very different tools used by QA bodies as means of public accountability. The mapping of the studied QA agencies shows that, in most cases, student outcomes related to completion of studies and employment are included in the quality assurance processes, but specific definitions of thresholds for acceptable or low performance were rarely provided to accredited institutions and/or to the public. Also, the study identified no commonalities in the way that the performance of student outcomes at accredited or quality assured institutions are presented to the public.

Nevertheless, the study shows what type of information is used by a large number of QA bodies to assess the student outcomes at institutional or program level, and it represents what might be useful for the stakeholders to access.

IDEAS FOR FUTURE CONSIDERATION

As the discussion about accountability and institutional performance is likely to continue, this study might provide inspiration for QA bodies in consultation with their main stakeholders to discuss:

1. pros and cons for a higher degree of transparency with respect to expected and/or acceptable levels of student outcomes
2. identification of relevant publicly accessible information about acceptable levels of student outcomes performance
3. effective approaches for making the information easily accessible to various



stakeholders in higher education, e.g., through the use of an information template

4. how QA bodies can encourage institutions to improve performance to generate strong student outcomes

These recommendations are made in the context that there is not one size that fits all for how to provide information about acceptable levels for student outcomes and how this information is provided to the public.

ANNEX A: List of Quality Assurance Bodies

| | Abbreviation | Quality Assurance Body | Country/Territory |
|--|---------------------|---|-----------------------------|
| | ABET | Accreditation Board for Engineering and Technology | USA |
| | ACBSP | Accreditation Council for Business Schools and Programs | USA |
| | ACCET | Accrediting Council for Continuing Education & Training | USA |
| | ACCJC | Accrediting Commission for Community and Junior Colleges | USA |
| | ACCSC | Accrediting Commission of Career Schools and Colleges | USA |
| | ACEN | Accreditation Commission for Education in Nursing | USA |
| | CAA | Commission for Academic Accreditation | United Arab Emirates |
| | CNA Chile | National Accreditation Commission | Chile |
| | CNA Colombia | National Council of Accreditation | Colombia |
| | DEAC | Distance Education Accrediting Commission | USA |
| | FINEEC | Finnish Education Evaluation Centre | Finland |
| | HEQC | Higher Education Quality Committee | South Africa |
| | HKCAAVQ | Hong Kong Council for Accreditation of Academic and Vocational Qualifications | Hong Kong |
| | HLC | Higher Learning Commission | USA |
| | KHDA | The Knowledge and Human Development Authority | Dubai, United Arab Emirates |

ANNEX A: List of Quality Assurance Bodies

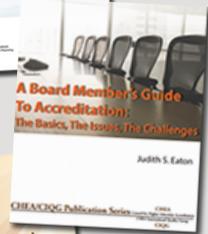
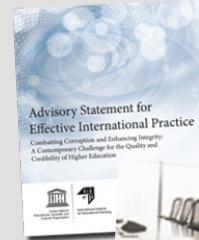
| | | | |
|--|---------|---|------------------------------|
| | NECHE | New England Commission on Higher Education | USA |
| | MQA | Malaysian Qualifications Agency | Malaysia |
| | MSCHE | Middle States Commission on Higher Education | USA |
| | NVAO | Accreditation Organisation of the Netherlands and Flanders | Flanders and the Netherlands |
| | NWCCU | The Northwest Commission on Colleges and Universities | USA |
| | QAA | QAA England and Northern Ireland | United Kingdom |
| | | QAA Scotland | |
| | QQI | Quality and Qualifications Ireland | Ireland |
| | SACSCOC | Southern Association of Colleges and Schools Commission on Colleges | USA |
| | SINEAS | National Accreditation Council | Costa Rica |
| | TEAC | Teacher Education Accreditation Council | USA |
| | TEQSA | Tertiary Education Quality and Standards Agency | Australia |
| | WSCUC | WASC Senior College and University Commission | USA |

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One Dupont Circle, NW, Suite 510
Washington, DC 20036-1135
tel: (202) 955-6126
fax: (202) 955-6129
e-mail: chea@chea.org
www.chea.org