

# Quality management of programme reaccreditation at private higher education institutions in South Africa<sup>1</sup>

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## ABSTRACT

*Private higher education institutions (PHEIs) in South Africa must apply to the Higher Education Quality Committee, a standing committee of the Council on Higher Education (CHE), for the reaccreditation of existing accredited programmes. This article explores the internal quality management systems at PHEIs to manage the programme reaccreditation process. The conceptual framework for this study is the PHEI Open System Model which presumes the PHEI to be an open system. In an open system in this model, 'input' is filtered from the external to the internal environment and catalyses the conversion of resources ('throughput') into 'output', i.e., a reaccredited programme. The responses of a purposive sample of PHEIs were considered. This is a qualitative study whereby data was collected through semi-structured interviews which served to investigate how PHEIs manage the programme reaccreditation process and whether they present as open systems.*

**Keywords:** private higher education, quality assurance, quality management, accreditation, reaccreditation, open system

## INTRODUCTION

Internal quality assurance (IQA) is the responsibility of the higher education institution, whereas external quality assurance (EQA) is under the purview of the Council on Higher Education (CHE), an independent statutory body as declared by the Higher Education Act (Act 101 of 1997) that executes its mandate through its standing committee, the Higher Education Quality Committee (HEQC).

Private higher education institutions must be registered companies and abide by the regulations for registration of the Department of Higher Education and Training. They are subject to the requirements for *inter alia* programme accreditation, and the policy and criteria for registration of the qualification on the National Qualifications Framework (NQF) (SAQA, 2020; DHET, 2016; CHE, 2004, as amended; RSA, 1997).

The CHE must assure and ensure quality programmes in the system. According to the HEQC (CHE, 2021b, par.4),

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Accreditation is the recognition status given for a stipulated period of time by the HEQC to a programme after an evaluation indicates that it meets or exceeds a minimum threshold of educational quality.

'Reaccreditation' is the 'accreditation of an existing programme' and the 'criteria for the re-accreditation of existing programmes are identical to those for new programmes and comprise the same categories of programme input, process, output and impact, and review' (CHE, 2004, as amended).

This article focuses on the quality management of programme reaccreditation that is conducted for programmes offered by PHEIs. The main research question for the study is: How do PHEIs manage internal quality assurance to achieve programme reaccreditation? The study sought to determine the internal quality management systems in place at PHEIs.

## LITERATURE REVIEW

### **Private higher education**

Private higher education 'has become the most important aspect of global education' (Kajawo, 2020: 384; Barsoum, 2020) due to its growth and expansion (Kajawo, 2020; Levy, 2018; Shah et al., 2019). It plays a complementary role in the sector and adds a competitive element (Shah et al., 2019). With the expansion in the higher education sector, the private sector in most countries has been absorbing some of the demand. The number of PHEIs has increased over the past 50 years as the over-reliance on the public sector led to a greater need for a dual-sector system (Levy, 2018). Private higher education caters for those who prefer not to attend public institutions, or do not qualify for entry, and it meets the need for differentiated demand and is demand-driven (Altbach et al., 2009; Dittrich & Weck-Hannemann, 2010; Tamrat, 2017).

Even though considered to be the 'fastest-growing sector worldwide', it is characterised by 'very little strategic planning' (Altbach et al., 2009: 44-45). While public higher education institutions across the world were generally established under some form of government control, the private sector sprouted and mushroomed with increased measures having to be put in place by the government through regulatory frameworks to ensure legitimacy and quality (Kinser & Lane, 2017; CHE, February 2018).

Generally, PHEIs are tuition fee-dependent and operate in competitive markets (Buckner, 2017). PHEIs in South Africa are autonomous institutions that 'do not receive funding from the DHET, but for which the DHET has certain legislative functions' (DHET, 2021b: 20); and distinct in size, scope, academic offering, and duration of existence in the sector (CHE, February 2018). Some institutions are not-for-profit organisations whereas others are 'enterprise-driven' (CHE, February 2018).

The DHET (2021a) indicates that there are 93 registered and 40 provisionally registered PHEIs in SA, bringing the total of operational institutions to 133 at the time of this study. Section 21 of the *Regulations for the Registration of Private Higher Education Institutions* (DHET, 2016:9) indicate *inter alia* that, to maintain registration, the institution must 'concerning all of its higher education programmes, comply with the requirements of the Higher Education Quality Committee (HEQC)'. PHEIs have to submit accredited programmes for evaluation during the reaccreditation process, which coincides with the DHET's registration cycle (DHET, 2016; Stander & Herman, 2017:220). The reaccreditation outcome is communicated to the DHET, and the Registrar for private higher education institutions considers this in the amendment of registration.

Dittrich and Weck-Hannemann (2010) indicate that PHEIs are part of 'quality assurance life' and 'are here to stay' and that there should be recognition of the weaknesses and strengths in the private higher education sector. In SA, PHEIs are included in the EQA activities of the CHE.

### **Quality assurance in private higher education**

Current developments in higher education (such as marketisation, globalisation, accountability demands, fraud and corruption, and dubious quality assurance practices) have served as an impetus for the establishment of national quality assurance bodies to regulate and promote quality (Garwe & Gwati, 2018). Stander and Herman (2017:220) posit that quality assurance (QA) of the private higher education sector is intended to safeguard the public against 'dubious or illegal HE operators'. Hoosen et al. (2017: 27) indicate that the increased number of PHEIs gave rise to concern about the 'declining quality of higher education', which precipitated the need for government regulation in the Southern African Development Community (SADC). Quality can no longer be assumed nor guaranteed (Kinser & Lane, 2017). By having a national set of QA guidelines and/or standards, stakeholders would be encouraged to have trust in the system, quality of the programmes, and degrees that are conferred (Hoosen et al., 2017).

Westerheijden, Stensaker and Rosa (2007) state that the main goals of QA should be accountability and quality enhancement. Accreditation in a quality assurance system is linked to accountability - internally within the institution and externally to the government or QA agency (Macheridis & Paulsson, 2021; Stensaker & Harvey, 2013). In SA, the Quality Council is responsible for ensuring the 'integrity and credibility of quality assurance' (RSA, 2009: 20) thus, for the CHE to perform its function as outlined in the HE Act (RSA, 1997), HEIs have to comply with the requirements of the HEQC.

The *Quality Assurance Framework for Higher Education Institutions in South Africa* (QAF) (CHE, 2021a: 32) stipulates that HEIs are responsible for IQA and should have 'well-established and fully functional' systems in place. HEIs are accountable inter alia for quality learning and teaching, the educational experience, graduate competence, quality and impact of research and innovation, community engagement, academic support, staff development and support services for the academic community (*ibid*).

According to Gilbert (2020: 48), accreditation is considered a 'coveted quality mark, which transcends national boundaries'. Reaccreditation can thus be considered a mark of continued compliance and sustained programme quality. QA (such as accreditation) affords legitimacy to a programme or institution which, in turn, signals recognition of its value or benefit to society (Kinser & Lane, 2017). The QAF (CHE, 2021a: 19-20) defines EQA as

the means by which an external quality agency ensures that institutions have Internal Quality Assurance (IQA) systems in place to manage the quality of their activities and educational provision. It also ensures that the qualifications and programmes that they offer have been peer-reviewed to ensure that the provisioning meets the quality standards and criteria of the Council on Higher Education (CHE).

'Quality' is defined as 'fitness of purpose' of the HEI, 'fitness for purpose' in relation to its 'specified vision, mission and strategic and academic planning in relation to diversity and differentiation in the South African HE sector, 'value for money' and 'transformation' (CHE, 2021a: 29-30).

Intrinsic in the notions of 'accountability' and 'improvement' is accepting responsibility for QA and taking ownership of processes. QA is contextual and requires the input of all role-players for a quality culture to exist (Cardoso, Rosa & Stensaker, 2016). This notion is reinforced by Bendermacher et al. (2017) who argue that, within a quality culture, there is collective responsibility and involvement at the managerial and grassroots level. However, Boateng (2014) is of the opinion that student participation in IQA processes is limited, an observation which is supported by Moyo and Boti (2020). The development of a quality culture for sustainable IQA is essential and is characterised by a balanced top-down and bottom-up approach (Bendermacher et al., 2017). Harvey and Green (1993; 9) define a quality culture as

a devolution of responsibility for quality [within an organisational] system of interrelated nodes (a single person or small team). Each node has inputs and outputs. These are the quality interfaces ...

For a quality culture to exist, quality assurance processes cannot function in silos. There would need to be purposeful, interrelated, interactive relationships (between people and processes) within an organisation or a system. Although intangible, a 'quality culture' can manifest in the form of a quality strategy and quality management system that identifies the 'quality work' (Elken & Stensaker, 2018) of individuals and teams, thus collective effort is needed to achieve a quality product.

Brookes and Becket (2007) posit that there is no universal consensus on how to best manage quality in higher education. This has led to the adoption of different quality management practices within countries and their higher education institutions (*ibid*). The CHE (2021a: 33) recognises the need for differentiation since HEIs in South Africa are at different levels of maturity in terms of their IQA management systems. The QAF (CHE, 2021a: 28-29) aims to entrench a QA system in the higher education sector that 'strengthens and enhances the quality of higher education provisioning' and intends to support HEIs in the establishment of 'robust quality cultures and appropriate structures'.

Krehbiel and Miller (2018: 3) postulate that a quality management system is a formalised system that 'documents the structure, responsibilities and procedures required for effective quality management'. Quality management is predicated on systems, structures, processes, and procedures being in place to 'check, control and assure quality' (Parsons, 2018). Stensaker (in Westerheijden et al., 2007: 99-118) points out that evaluation systems, management systems and information systems are combined in various ways in internal institutional arrangements. Quality management is therefore a 'nebulous concept' as it means different things to different people and thus differently or inconsistently applied (Barouch & Ponsignon, 2016: 945). This gives rise to the importance of standardised and sustainable QA frameworks to ensure comparability within systems.

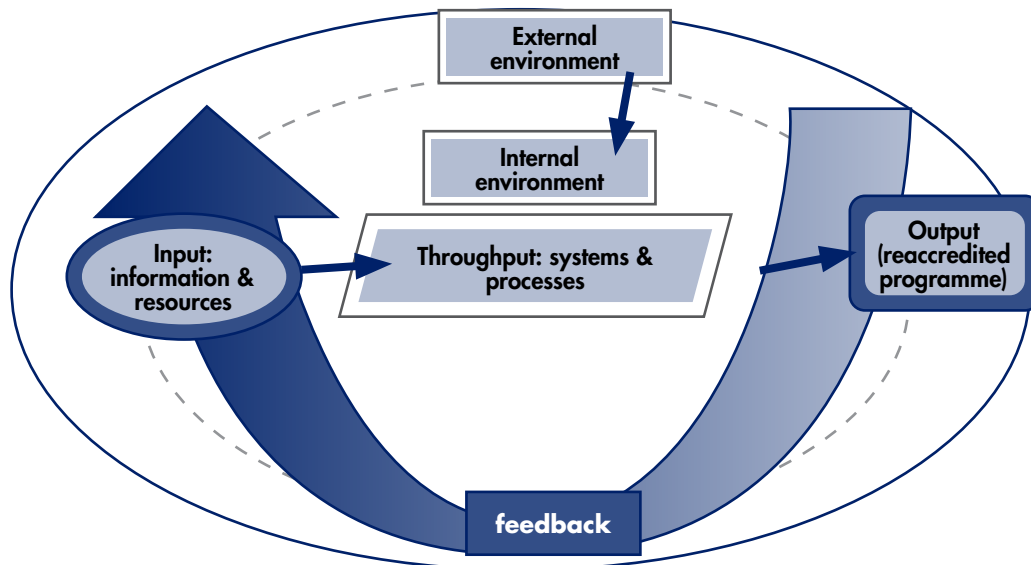
## CONCEPTUAL FRAMEWORK

The study adopted a conceptual framework, the PHEI Open System Model, which is based on a Systems Approach and partially derived from the Katz and Kahn Open System Model (Ramosaj & Berisha, 2014). The idea of an 'open system' is found in General System Theory – a worldview introduced by Ludwig von Bertalanffy (1968). General System Theory is based on the premise that there are systems everywhere, for instance in nature, science, business and organisations.

A system comprises interdependent parts that interact among themselves and with the environment (Von Bertalanffy, 1968). To gain a holistic picture of the system, it has to be viewed within the context of its internal and external milieu (Barouch & Ponsignon, 2016). It is assumed that within this system, there is an exchange of information, resources, matter, or energy, among others for it to be open, adaptive, flexible and responsive to the environment (Ramosaj & Berisha, 2014).

Zaki and Rashidi (2013) posit that HEIs need to adopt open systems thinking to enable them to cope with challenges and change. For example, the COVID-19 pandemic precipitated systems to be reviewed for adaptation to the 'new normal'.

Figure 1:  
PHEI Open System Model



In the PHEI Open System Model (Figure 1), 'input' is the absorption of information and resources from the environment. The external environment is the legislative and policy (regulatory), socio-economic, political, regional, national (and regional and/or international) context within which the PHEI operates. It could include inputs received from industry, market surveys, the professional context and professional bodies. The internal environment is the governance, management, operations, internal interactions, and dynamics within the organisation, and presumes the availability of resources and staff capacity. It is assumed that internal and external environments intersect. The 'throughput' is the conversion (systems, processes, and procedures) of resources and feedback to produce the 'output' (product), i.e. the reaccredited programme.

This article considers whether the participant institutions display as open systems when managing the programme reaccreditation process.

## RESEARCH METHODOLOGY

A qualitative approach was used. Data were collected at different institutions, involving participants in stratified levels of positions within the organisation, varying in race, gender, age, etc. Due to COVID-19 lockdown restrictions, interviews were conducted on a virtual platform, viz. Zoom.

A purposive sample of participants was done from PHEIs located in Gauteng; CHE, DHET and SAQA staff; and members of an association of private providers. There were 17 participants in total. This article focuses on the data collected from nine participants from seven PHEIs. Sampling was done using the DHET *Register of Private Higher Education Institutions* (5 October 2020). A formal invitation was extended to all participants via the appropriate channels. The research instrument was a set of interview questions. The individual semi-structured interview was recorded and transcribed, and member checking was done. Some documents were received for analysis which are confidential.

The Atlas.ti9 software was used for data organisation, coding and thematic grouping. Analysis was done according to the conceptual framework. The confirmability, dependability and reliability of the data were established through (i) reflexive practice; (ii) member checking; (iii) peer debriefing; and (iv) an audit trail. All data are stored securely.

The confidentiality and anonymity of participants are preserved. Data collection commenced once ethical clearance was received from the Ethics Committee of the University. Participants provided written consent and could exit at any point without reprisal. There was full disclosure on the scope and purpose of the research. The interview site and participant boundaries were respected (Creswell, 2014). There was adherence to guidelines for ethical research and protection of intellectual property (Singh & Stückelberger, 2017).

## FINDINGS

### **Internal quality management**

The study finds that there are different internal quality management systems in place across the institutions which confirms that quality management is a 'nebulous system' applied differently by each institution (Brookes & Becket, 2007; Barouch & Ponsignon, 2016). There are policies, structures, processes and procedures in place to 'check, control and assure quality' (Parsons, 2018). However, the institutions and their systems are continuously evolving, which is evidence of QA in itself (Brennan, 2018).

### **Evolving systems**

The institutional systems develop in response to internal and/or external circumstances affecting the internal environment. There is restructuring, which is (i) commensurate with organisational growth (e.g. PHE11, PHE15 and PHE17); (ii) in response to the requirements of the impending institutional audits by the CHE which are to be implemented from 2022 and will deliver an outcome on programme reaccreditation (e.g. PHE15); (iii) the need for a more streamlined approach, e.g. PHE13 (see discussion under 'Structures and roles') and PHE16 (see discussion under 'A proactive approach'); or (iv) in response to feedback received through EQA (e.g. PHE13 and PHE16).

The institutions are also preparing for implementation of the QAF (CHE, 2021a) whereby functional internal quality management systems are expected to be in place. For example, PHE11 indicates that it will be establishing a dedicated QA unit as a strategic move to get the institution ready for implementation of the QAF. PHE11 acknowledges the need for improvement before it can self-manage quality successfully and posits that a supportive, collaborative approach from the CHE would assist in achieving quality enhancement, not only compliance.

PHE13 strives to achieve quality enhancement of the programme. The curriculum design issues that were identified by the HEQC during the reaccreditation process prompted the appointment of a Dean to oversee programme design and align the qualifications with standard practice. The institution has 'invested heavily in senior academic management staff':

There have been four senior appointments above me and many below me, so the structure itself has matured and all of these things happened because of feedback that we got from the CHE.

The institution has thus reviewed its systems and structures to be compliant.

At PHE12, the Academic Director is a recently employed staff member who is solely responsible for liaison with the regulatory bodies and overseeing the accreditation and registration processes. The internal quality management systems are formalised systems with structures and embedded roles and responsibilities (Krehbiel & Miller, 2018).

### **Structures and roles**

Since 2019, PHE11 has established new faculties and employed a Dean for each and revised the existing leadership and management structures. The revised structure includes the Dean of Faculty and Head(s)

of Department, Subject Head and Faculty Board. The Academic Committee has been replaced by the Senate. The HOD is responsible for ensuring quality in the relevant department and the Programme Coordinator manages programme delivery and the quality assurance thereof. The Programme Coordinator and Subject Head roles are reviewed every three years to allow for revolving capacity building of staff. In the newly established Faculty, the HOD also fulfils the Programme Coordinator role until growth dictates new appointments.

The institution has a Centre for Teaching and Learning that supports the lecturers. QA through this unit ensures that assessment and student support are on par. Academic leadership in the programme is provided by the Programme Coordinator and Dean, at the outset, so that 'the quality mechanisms are developed into the programme'. The Registrar is responsible for IQA. The Registrar's responsibilities include quality assurance of policies, ensuring adherence to policy, and providing staff and student data relevant to the reaccreditation and registration processes. Responsibility and accountability are built into the value chain and quality is built into every step of the process. The process is seemingly more 'complex; with different layers, which is indicative of building a quality culture that filters through the institution and requires the input of all role-players (Cardoso, Rosa & Stensaker, 2016).

At PHEI2, the internal quality management structure is a 'short'/'narrow structure' because it is 'not a huge institution'. The General Manager on each site is responsible for staffing, operations, and client service. The Academic Manager per site is responsible for QA and manages all related matters. The operations team reports to the Academic Manager.

The Academic Director manages QA across the board. The Academic Committee forms part of the internal quality management structure, comprising the Academic Director and Academic Managers. The institution has a range of policies in place, including a 'policy on policies'. A programme is centrally managed from a base site and distributed nationally to all sites. The Subject Head provides academic leadership in the programme across sites of delivery. The internal quality management system shows stratification at the regional and national levels.

At PHEI3, the organisational leadership and management structure provides input to the quality management structure. The institution previously had several sub-committees. This led to duplication of work or function; therefore, the structure was streamlined into a Teaching and Learning Committee and Assessment Committee. These committees meet quarterly and report to the Senate, which is the decision-making body on all academic-related and academic QA matters.

The main governance structure at PHEI4 is the QA structure. To ensure quality, PHEI4 found that a purposeful and meaningful approach to the delivery of its programmes was needed – through a coherent and integrated organisational structure. The quality assurance structure is headed by the Council and Academic Board. The Academic Board is responsible for the overall academic function of the institution and manages, monitors, and controls all processes associated with good governance and the implementation of learning and teaching approaches. Several committees report to the Academic Board, including the Academic Quality Committee.

At PHEI5, the Executive Committee is the decision-making body. It comprises the heads of all the divisions, including the Head of Academics who is also the Head of Academic Quality Assurance. These are two demanding positions, to be separated upon recruiting a QA Manager (thus PHEI5 is evolving).

The institution will appoint programme managers to support the Deans. Currently, the Head of Academic Quality Assurance is responsible for programme accreditation and reaccreditation processes. There is a

comprehensive QA process concerning academic staff, which is based on gathering data from multiple sources to inform the curricula – ‘things like content and being up to date with what's happening in the real world’.

The senior leadership and management staff at PHE16 serve on the Executive Committee (EXCO), comprising the Chief Executive Officer, Registrar, Executive Dean, Director of Operations and Director of Quality Assurance. The CEO plays an active role in the QA structure. Each EXCO member is responsible for a specific department. There is one Faculty at present, with an Executive Dean as the leader. The Teaching and Learning Committee oversees the T&LC clusters. The institution has relevant policies and procedures to support operations and interdepartmental collaboration.

The QA unit is positioned above all the other units or functions:

Everything is basically convened by your quality structures that are in place. PHE16

The Head Lecturer and faculty are responsible for the module content, content delivery, students at risk, etc. The Faculty Board and Academic Board assess whether objectives are met, intervention is required or improvement needs to be made. This signifies reflexive practice.

PHE17's internal quality management structure includes three key positions: (i) the Head of Teaching and Learning who is the academic head per campus, responsible for the quality of learning and teaching on the site and accountable to; (ii) the Deputy Dean; and (iii) the Dean is responsible for IQA and managing EQA. Other key stakeholders per campus are Heads of Faculty, Academic Programme Developers, Programme Coordinators, Head of Work-Integrated Learning, and the Academic Manager.

The lecturers are involved in the quality management process. Three-monthly reports are prepared for the Academic Board, which reports to the Business Board. Improvement plans are drawn up if necessary. The institution participates in the relevant professional body's evaluation processes and incorporates the feedback into its review processes. Over the past year, the institution has established faculties per subject field which are managed by the Senate. With institutional growth, the structure became more complex, with accountability built in at each level.

PHE11-7 have systems in place with the Senate, Council, EXCO or a Board at the apex. There is thus a high level of accountability for IQA. Having structures, and reviewing structures, are attempts to achieve compliance and improve programme quality.

### **A proactive approach**

A few institutions have devised proactive processes that enable the efficient management of QA. At PHE11, programme reaccreditation process is not treated as a standalone process. It is integrated with the accreditation process for new programmes and overall self-evaluation conducted by the institution each year. The reaccreditation templates provided by the CHE become the self-evaluation templates for new programmes. At the end of each year, the faculty need to follow the same steps as for programme reaccreditation: (i) form programme groups ('nodes'; Harvey & Green, 1993); (ii) provide input on the templates; and (iii) ensure that the evidence is in place and recorded in terms of the accreditation criteria for ease of reference. When these programmes enter their first reaccreditation cycle, the evidence is already available. This means that the initiation of external programme reaccreditation coincides with the internal conclusion of the process. The institution recently entered its new programme reaccreditation cycle but has been preparing for it since the first review about six years ago. PHE11 strives to achieve compliance within the required timeframe and has processes in place to enable quality enhancement.



Similar to PHE11, PHE12 has introduced an efficient administrative system that links with the programme reaccreditation process. The evidence per criterion is compiled as ongoing practice. Preparation for the next reaccreditation cycle thus becomes routine. By the time the reaccreditation cycle is initiated, the portfolio of evidence is almost complete. It is not a mere tick-box exercise as the institution is 'constantly looking for improvement in our quality'. There are standard practices in place and attempts to achieve compliance and enhance programme quality.

Taking a proactive approach to administration is advantageous because it enables efficient management of the programme review process. PHE16 is mindful that it could fall into the trap of 'too much administration' which could be a burden to staff and add to overheads. It has consequently invested in Bizmind to achieve efficiency in the system:

It is a workflow process management system where you can create your own policies and your workflows and your processes that gives you the dashboards immediately and basically queries all the other systems that we have online immediately so that you really can see what is happening.

PHE16 seeks innovative methods to inform internal practice which is why it has joined the University Innovation Industry Network. As elaborated:

They query industry and university interaction and technology transfer. We embarked now on a pilot programme with them to basically create a framework to map your third mission engagement and communication, return of investment and so forth.

To further explore organisational efficiency and the value attached to the effort, the institution has started a research group around Decision Intelligence, which:

... is basically taking a look at management structures within an institution ... taking a look at how you measure your different engagement styles, how you measure your activities and return on investment of activities, towards research so that you get really a return on investment on what you are basically doing.

Institutions should seek innovative ways to improve efficiencies and prevent 'too much administration', particularly if IQA has to align with EQA that is viewed as 'complex' (Stander & Herman, 2017: 220).

### **Programme review**

Programme review is an integral part of the programme reaccreditation process (CHE, 2004, as amended). At PHE11, it includes inter alia looking at student performance, viability and currency of the programme, and marketability:

Every time when there is a new cohort of students, the programme needs to be evaluated... an internal review to make sure that we're still on track ...

Overall, there is a rigorous programme review process in place. The accreditation criteria are 'embedded' in all operations. Quality management is integrated from programme design to delivery and review and there are support systems in place. Evaluation panels, comprising external peers from public institutions and industry, are contracted to review programmes. The Faculty academic team coordinates these processes. Self-evaluation and site visits are done by relevant professional bodies for programmes that require their endorsement.

PHEI2 utilises the services of external peer reviewers from public institutions and the industry. Programmes undergo review at five-year intervals and policy regulated on the following basis:

We even have got a policy on which programme, in which sequence. Once the sequence is complete, it starts in a new sequence based on where the biggest need is.

The institution employs peer, student and client review. The feedback is incorporated in attempts to effect quality enhancement.

At PHEI3, the programme reaccreditation process starts with the Academic Management Team that consists of the Registrar, Programme Managers, Programme Coordinators, Executive Dean of Academics, Programme Design Dean, and Executive Dean of Growth and Sustainability. Tasks are allocated to specific individuals, e.g., the Programme Design Dean would oversee curriculum revision and the Registrar a workgroup on policy. The size of the team depends on the number of programmes under evaluation. If there is a query around programme design, 'we would gather those individuals around and they would form working groups'. These workgroups are indicative of 'a devolution of responsibility' whereby 'small teams' are the "quality interfaces" within the 'system of interrelated nodes', where each node has its 'inputs and outputs' (Harvey & Green, 1993: 16). The institution draws experts from industry 'when we test programme review processes or when we need their input in regard to curriculum design, etc.'

Once the reaccreditation cycle is concluded, the institution reviews the process and develops improvement plans, if required. The institution adopts a 'lessons learned' approach: Each query by the CHE is addressed throughout the entire institution to improve internal quality management and enhance programme quality.

The current quality management system at PHEI4 was established about four years ago. In terms of programme review, there is an established system whereby the academics teaching the programmes can give feedback.

Those minor reviews are taken in, and those are actually enacted every year, and then we'll go through a three years' big programme review update.

Any developments in the field are incorporated into the module content.

The institution has internal checks and balances in place. The role-players take QA seriously and the quality focus is embedded in every role.

We've taken on the notion of quality, and not just quality assurance, but quality enhancement: How can we make things even better? How can we add value? How can we improve what we do? I now have a team of colleagues who are just as passionate about reading the documents from the CHE.

The top-down and bottom-up approach (Bendermacher et al., 2017) to quality management is indicative of a quality culture. It is about 'reading the documents' with understanding and the intention to take constructive feedback on board for quality enhancement. The institution seeks to mirror the EQA process:

Whatever CHE does, we have our own internal, similar process.

The various quality committees convene to engage in the internal reaccreditation process. As at PHEI1, programme reaccreditation is an integrated process. The institution is refining some of its processes but the system is functional nonetheless. This is again indicative of an evolving system, as discussed above, where the pursuit is improvement of programme quality and improvement of process. This pursuit is also

exhibited by PHEI3 and PHEI6. The review process at PHEI6 is followed in all the areas of the organisation that support the programme.

At PHEI5, self-evaluation is done and there is reflexive practice with the intent to enhance quality. The Dean is responsible for quality assuring the programme design and review processes. However, the lack of a formal process for external peer academic and stakeholder review is regarded as a weakness in the internal quality management system. The national office monitors and provides feedback regularly. It is more of a top-down approach at present. It is anticipated that the new staff member to oversee QA will add value in this regard.

PHEI6 attempts to strengthen IQA and has established partnerships with international universities whereby a 'full audit' is done every five years by external peer reviewers for benchmarking with international accreditation standards. The audit is a week-long engagement with management, staff, students, and alumni.

They take a look at evidence, going from curriculum to delivery, to assessment, maintenance of records and so on.

PHEI6 does not view QA as merely 'ticking boxes'. The review process is described as 'intense', with every assessment cycle moderated and feedback analysed in an attempt to close 'loopholes'.

### **Feedback**

Student surveys on the course or lecturer are common. For example: at PHEI1, these are done at least twice a year. Students are advised of any improvements, thus closing the loop. Alumni are also surveyed. The institution tracks the employability of its graduates and canvases employer opinion on graduate adaptability and compatibility to the workplace. Peer reviews by academic and industry experts are ongoing throughout the year. Feedback is analysed and incorporated in improvement plans.

The condition for accreditation of a new programme is addressed across programmes and at institutional level:

... if you have issues with accreditation, the next evaluator might find the same. It's just easier that you address it and then it's clear.

Taking a systems approach thus mitigates risk to enable continued compliance.

Processes have been reviewed and procedures refined. For example, external moderation at PHEI1 used to be a 'tick-off', but new forms for reporting on assessment and moderation require qualitative responses to ensure that role-players engage. PHEI4's programme review process is also qualitative and requires input and feedback from various stakeholders, viz. employers, practitioners, professionals or professional body.

PHEI5 does a graduate survey and tracer studies are done:

We can track, for instance, this latest professional body review that we had for a Higher Certificate. From that Higher Certificate, over 60% of the students go on to further studies. It really means that Higher Certificate is serving its purpose extremely well, which is to give access to students into a very specialised field of study.

The institution has done a longer-term graduate study. There are multiple inputs from industry, students, and staff that provide insight into the programmes, specific subjects, and pass and throughput rates. Data

from the annual DHET report is also considered. There is 'a huge amount of data' which are 'possibly not analysed quickly enough'. The analysis and feedback processes are viewed as thorough and rigorous.

PHEI5 relies heavily on industry experts to teach on a part-time basis and, although involved in programme design and review, they might regard their role as not substantive or their input not considered. This is regarded as 'a bit of a quality assurance challenge in terms of closing the loop'.

At PHEI6, industry representatives provide feedback on the relevance and standard of a programme. The lecturers at PHEI7 provide feedback on the modules that they teach. Once per year, a climate survey gauges where support, input and development are required.

It is evident that feedback is obtained from a variety of stakeholders on an ongoing basis which is considered when attending to programme review. In terms of the PHEI Open System Model, feedback from the environment is channelled into an internal throughput process for programme review, development, and quality enhancement. However, there should be greater inclusion of the student in the QA process (cf. Boateng, 2014; Moyo & Boti, 2020). Besides student surveys, there is no actual quality role played by the student. Brookes and Becket (2007) posit there should be 'management for quality' instead of 'management of quality' whereby the 'quality of student learning is central to any quality management programme' (sic). If there is to be 'management for quality', students need to play an agentic role in the 'quality of student learning'.

### **An open system**

The institutions display as open systems. There are indications that they can achieve robust quality management systems that leverage capable leadership and management structures; careful planning; relevant and current policies and guidelines; reflexive practice; keeping abreast of developments in subject fields, industry and the sector at large; systematic implementation of the process; utilisation of available resources and incorporating feedback; staff agency; staff engagement; skills and knowledge; interdependencies; approvals processes including top level; and a network of academic and industry peers.

Although at different levels of functionality (CHE, 2021a), the internal quality management systems are functional. Structures and roles are being reviewed in response to developments in the external environment. Dedicated positions have been, or will be, established within the structures to convert the feedback from IQA and EQA processes for throughput of a quality 'product', i.e., a reaccredited programme.

Information is absorbed and processed through the relevant structures. The quality management of a programme means the conversion of resources within a system through interaction between the constituent parts of the system. There is the realisation that 'quality work' (Elken & Stensaker, 2018) cannot be done in silos and that interdependencies need to be leveraged to allow synergy in the QA process. The institutions take stock of their internal capacity and design a strategy to supplement, complement, or build capacity for greater efficiency and responsiveness. The integral role of staff in supporting the initiatives is recognised.

## **CONCLUSION**

As an open system, the institution absorbs input from the external environment (Ramosaj & Berisha, 2014) and processes this through its relevant structures. The quality management of a programme entails the conversion of human resources to: (i) critically engage and understand the accreditation criteria and how these can be interpreted for the institutional context to demonstrate adherence; (ii) evaluate the efficacy of the programme to determine how well it achieves its stated aims; and (iii) absorb the feedback from review processes for the maintenance, and enhancement, of programme quality.

There is evidence of strong leadership and management as the driving force behind the quality agenda, that 'embraces the systems thinking' (Krehbiel & Miller, 2018), which is to not only achieve 'compliance' quality, but substantive, actual quality that is visible in the programme(s). Programme reaccreditation is managed within an integrated, collaborative process which is resource-intensive and requires a strategy, systematic application, and focused throughput for the achievement of quality output.

The study is limited in scope and size and, therefore, the findings cannot be generalised. Quality management systems cannot summarily be transplanted onto other contexts.

## RECOMMENDATIONS

A Systems Approach – specifically an open system – should be adopted. Quality management systems need to be evaluated in terms of the size, infrastructure, and resources of the institution as these have 'an impact on institutions' ability or inability to keep up with the demands of both HE and QA legislative frameworks' (Stander & Herman, 2017). Further study on quality management systems at higher education institutions, and impact studies on EQA, should be conducted.

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