



Theme: A quality culture – embedding QA into the life of an institution
Title: Using the Self-Assessment Process to embed QA into the Life of an Institution
Author: Terry Miosi, Ph.D., UAE Qualification Framework Project Consultant (terrymiosi@sympatico.ca)

ABSTRACT

The practice among QA agencies, particularly those closely affiliated with or that are agencies of government, is to define a set of quantifiable key performance indicators which an HEI must meet in order to remain in “good standing” in terms of accreditation, access to capital grants, eligibility for government financial assistance for operational expenses, et cetera.

This presentation has two theses. (1) Such a practice of “quality control through third-party accountability” usually results in institutions becoming highly adroit in developing processes and undertaking practices that are aimed at producing the desired paper results with quality becoming of secondary importance. Examples will be given of some tactics that are used to achieve, or better to “fix”, the outcomes. (2) Quality is best advanced when it is embedded in an institution’s operational culture and is most frequently achieved by a continuous reflective process where all segments of the HEI are involved in setting its own standards of performance and the measures needed to determine whether those standards have been met. The enlightened QA agency is, therefore, one whose standards and benchmarks are designed to foster a culture of self-imposed quality within an institution. Examples will be given of some methods that have been used to achieve this outcome.

Using the Self-Assessment Process to embed QA into the Life of an Institution

This presentation is intended to address sub-theme three for the conference, “*A quality culture – embedding QA into the life of an institution*”. In this regard, it is interesting to note the fuller description that was provided by the program committee of the types of issues that are relevant to this topic.

Papers presented under this sub-theme should deal with issues such as the following:

- How can quality assurance agencies help higher education institutions to achieve the culture of evidence in which established processes within each institution yield measurable outcomes data that are tied to planned goals and that lead to improvement?
- How can QA agencies offer options/samples of possible institutional and student learning goals with appropriate measures and benchmark results for each type of measure?
- How can QA agencies help HEIs to involve faculty/staff members in strategic planning, assessment and improvement initiatives, especially in weaving learning goals and related assessment techniques into syllabi and student achievement measures?
- How can QA agencies help HEIs to integrate learning goals at the course, program and institutional level?
- How can students participate in the processes of forming long term institutional goals that meet students' personal goals?

It is important to note the very definite philosophy of quality that is evident in this list of questions. The focus is to be on how QA agencies can:

- help higher education institutions to achieve
- offer options/samples
- help HEIs to involve faculty/staff
- help HEIs to integrate learning goals
- help students to participate in the processes

The approach is based on the principle that the quality assurance agency is not responsible for the setting of outcomes, defining institutional and student learning goals, defining improvement initiatives, et cetera. Rather these are understood to be the specific responsibility of the higher educational institution. For those who are schooled in the intricacies of institutional quality and quality assessment, this philosophy would seem to be self-evident, but indeed this is not always the case.

QA researchers have isolated four main purposes of quality assurance: compliance, accountability, control, and improvement. Depending upon the motivation of the party

doing the assessment – internal (for example, administration, faculty, full institution) or external (for example, accrediting agencies, professional associations, government

Purposes of QA

- **Quality assurance is about making sure that the process is delivered as required.**
- **The four main purposes of quality assurance are:**
 - 1. compliance**
 - 2. accountability** (includes the provision of information and resource allocation)
 - 3. control** (includes public reassurance and international acceptability)
 - 4. improvement** (ranking)

funding/licensing agencies), each of these purposes can be handled in a very different manner. When the assessor is an external agency, it is quite frequently the case that the result is often the imposition of detailed performance accountability measurements and benchmarks that are developed based on the particular concerns of the assessing agency and not of the institution, its staff, and its students.

In a presentation entitled "Quality Assurance: worldwide developments and robust processes" made to the Council of Ontario Universities in 2008,¹ Lee Harvey presented a very detailed taxonomy of the various purposes, approaches, objects, focus and methods of quality assessment, which shows that extremely wide range quality assessment rationales.

¹ http://ocgs.cou.on.ca/_bin/briefsReports.cfm. Slides reproduced with Dr. Harvey's permission.

Quality assurance (possibilities)

Purpose	accountability	control	compliance	improvement	
Approach	accreditation	audit	assessment	standards checking	
Object	provider/HEI	programme	learner	output	
Focus	governance & regulation	curriculum design	learning experience	medium of delivery	student support
	content of programmes	financial viability & processes	qualification	admin support	organisational processes
Methods	self-assessment	PIs	peer review	inspection	
	document analysis	stakeholder surveys	direct intervention	proxy delegate	

When the assessment is done by a government agency or by an agency that is nominally third-party but is tied closely to a government, the salient QA standards are almost invariably directly related to two very common public policy issues:

- human capital, primarily retention rates and job placement rates and secondarily transportability/credit transfer and occupational accreditation, and
- monetary, such as institutional solvency, budget allocation, fees, and default rates on student loans.

Quality assurance (accountability)

Purpose	accountability	control	compliance	improvement	
Approach	accreditation	audit	assessment	standards checking	
Object	provider/HEI	programme	learner	output	
Focus	governance & regulation	curriculum design	learning experience	medium of delivery	student support
	content of programmes	financial viability & processes	qualification	admin support	organisational processes
Methods	self-assessment	PIs	peer review	inspection	
	document analysis	stakeholder surveys	direct intervention	proxy delegate	

Other issues will be closely tied to particular concerns of the specific governments and national cultures. In the United States, for example, two key issues are the creation of the “informed consumer” and the provision of service to visible minorities. The consumer focus leads to institutions being accountable for their disclosure of, for example, the ISBN number of every required textbook and information on price, copyright dates, any substantial revisions between a new edition and prior iterations, whether the textbook is available in other formats and at what price, a fire safety report, or the institution’s policy on vaccinations. Visible minority and human rights concerns lead to the requirement to publish statistical information on transfer students, male and female students, in-state and out-of-state students, racial and ethnic groups, and disabled students.

Although this type of performance indicator is not common to the majority of jurisdictions at the current time, as the issue of public accountability becomes more prominent in a number of jurisdictions, some will undoubtedly move in this direction, and the QA agencies in these jurisdictions will need to resolve the matter of whether and how they will integrate these requirements into their activities and standards. In this regard, QA agencies might do well to take note of the fact that many of the higher education institutions are handling them as regulatory issues to be managed or manipulated rather than as quality performance criteria. Some examples of this can be described.

Retention rates: institutions are not counting students as being officially enrolled until 4-6 weeks after the commencement of the academic year. Since a substantial portion of students drop out in the initial year of a program, and a substantial portion of these drop out within the first couple of weeks of commencement, this policy substantially reduces the official attrition rates of a program. Some institutions that I have spoken to have indicated that, if a program has a 40% attrition rate if calculated based on the percentage of completions of students who started on day one, that rate will be reduced to 20% if the date on which a student becomes official is moved ahead a month.

Employment/placement rates: in many jurisdictions where this is an important quality issue – a key performance indicator, institutions have successfully argued that a graduate should be counted as a successful placement as long as that person is employed more than half time in any type of work: in other words, the employment does not need to be related to the discipline of study. The lobbying for this position comes, of course, primarily from public universities that have substantial humanities departments, where the likelihood that graduates with baccalaureate degrees in a modern or ancient language, history, philosophy, religious studies, psychology, anthropology, et cetera will find related work is quite small. This, of course, results in the situation where the placement rates of graduates is more relevant to the health of the overall job market than to the quality of a particular educational program.

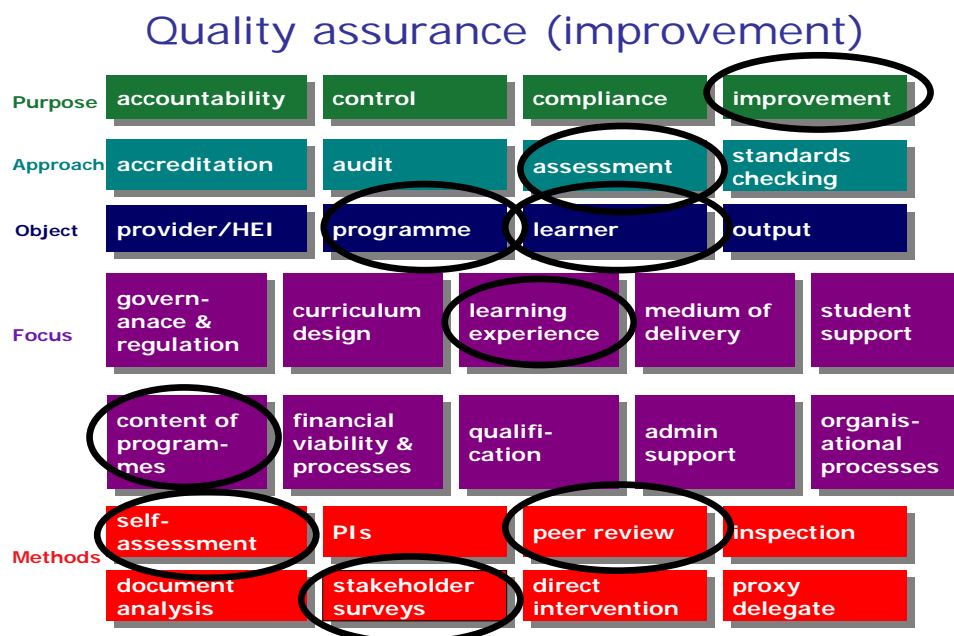
Student loan default rates are also becoming a very popular key performance indicator in many jurisdictions; the rationale being that institutions that have high retention rates, whose graduates are satisfied with the education that they received and who have high employment rates will have low default rates. There certainly is an element of truth in

this logic, but there is also another very critical statistical fact. Students from the lower socio-economic groups have substantially higher default rates than the norm, even if employed. The institutions, particularly the private ones, have noticed this, and many of them have responded by counselling potential students from this “high risk” group to apply to other institutions – in other words, to enrol as few of these students as possible. Another tactic has resulted in the creation of a new industry, at least in North America, consisting of advisory and consulting agencies that focus on the collection of student loans. Many of these businesses are contracted by HEI’s to develop loan repayment plans for students, to monitor how ex-students are complying with these plans, and to become collection agencies when students are in default. The result is that, while a government might consider high default rates to be a sign of poor quality, the higher education institutions regard this to be primarily a socio-economic issue compounded by poor collection processes by the banks and the government, and the steps that they take to improve their statistical performance have nothing to do with quality enhancement.

In recalling “A quality culture – embedding QA into the life of an institution” sub-theme for the conference, the performance standards and indicators just described are of a totally different sort and philosophy than that behind the various context questions that accompany this sub-theme, where we find the phrases:

- “institutional and student learning goals”;
- “weaving learning goals and related assessment techniques into syllabi and student achievement measures”;
- “to integrate learning goals at the course, program and institutional level”;
- “forming long term institutional goals that meet students' personal goals”.

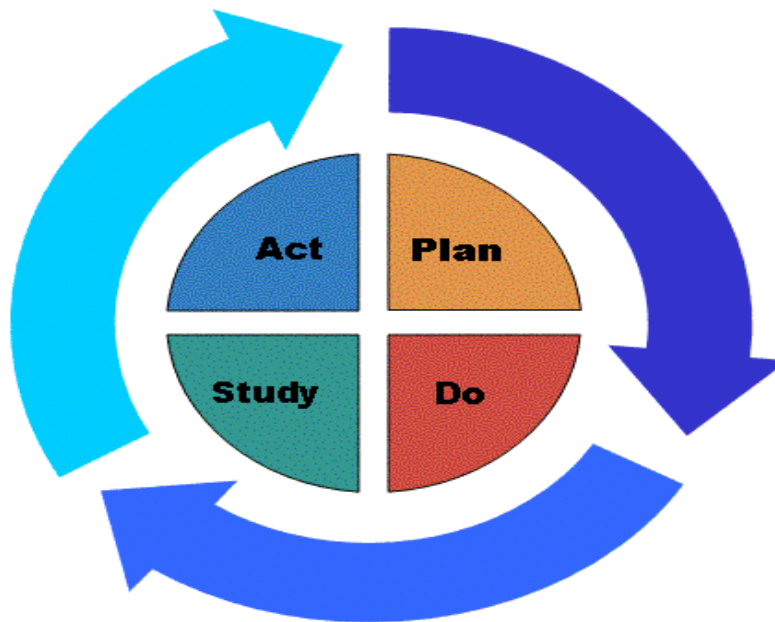
The quality frame of reference for these originates from a focus on a different set of factors on Lee Harvey’s chart.



QA scholars are convinced that these are the types of issues that need to be the focus in the development of quality institutions and programs. They are also almost unanimous in their conviction that the “self-assessment” process is the dominant methodology for achieving the desired quality improvement and maintenance.

The self-assessment process owes a great debt to the work of Donald Schön, first propounded in his seminal 1983 book, *The Reflective Practitioner*, and to his work with Chris Argyrus from Harvard University that focussed on how organizations develop, adapt, learn, and improve that resulted in their two collaborative works in the 1970s, *Theory in Practice* and *Organizational Learning* .

Basically “the reflective practitioner” refers to a self-regulated process for the development of professional excellence through a feedback loop of experience/implementation, reflection/assessment, generating options, selecting the options to be implemented, implementing, reflection, et cetera. This has been simplified as the Plan, Do, Study, Act cycle.



The model for individual practice gained considerable acceptance in the teaching profession and its principles naturally and quickly spilled over into teaching institutions, which developed their own internal self-assessment procedures as a method of quality control and enhancement. This internal process fairly quickly became a key element required of educational institutions by almost all QA agencies. No matter how its use has evolved, it is important to keep its original intent in mind: that it is in essence a self-regulated process for the development of professional excellence; and its foundational principle is that the setting of performance goals through a collective internal process is far superior to and more likely to be successful than the setting and imposition of

performance goals by ownership and management, or externally by the government or other regulatory or quasi-regulatory bodies.

As a brief overview, the self-assessment process used as a standard by QA agencies and as a quality process by higher education institutions can be described as a six step process:

Self-assessment Process

1. a rigorous self-study which can range from a narrow program focus through to a full institutional assessment
2. the production of a self-study report;
3. the examination of that report by an evaluation committee, the majority of the members of which are from outside of the institution;

Self-assessment Process

4. a report from the evaluation committee addressed to the institution's senior management which contains an assessment of the self-study, the committee's own findings on the institution, and a series of recommendations aimed at enhancing quality;
5. the response of institution to both the recommendations made in the self-study and in the evaluation committee report, which includes the institutions plan of action to implement (or, possibly, not to implement) these recommendations; and eventually,
6. an assessment of the level of success of the implementation plan.

The purpose and aim of self-assessment for the higher education institution is to understand, to evaluate, and to improve, and it should result in a continuous, institution-wide effort to improve all aspects of its operation by:

Purpose of Self-assessment

- analyzing the resources and effectiveness of the institution in fulfilling its mission;
- demonstrating that the knowledge and performance of students who complete programs are commensurate with the expectations of the degree(s) awarded;
- enhancing the working and learning environment of the faculty and staff of the institution;
- appraising the relationship of all the institution's activities to the achievement of these institutional and program expectations; and
- providing a sound basis for institutional planning relating to quality assurance and quality improvement.

Unfortunately, as a number of researchers have pointed out, very few, if any, direct studies relating to higher education institutions exist that demonstrate that this process actually bears results. Therefore, QA agencies and higher education institutions are urged to conduct periodic studies that will demonstrate whether or not there is significant value added to institutional quality by the self-assessment process.

It does indeed seem to be case for many that the value of the self-assessment process is taken to be an operational axiom whose truth is so evident at first sight that no reasoning or demonstration can make it plainer. This does not necessarily mean, however, that reliance on this methodology by QA agencies and higher educational institutions is totally unfounded.

Some have confidence in the process because they find it to be validated in practice:

- you assess and quantify your current performance on a certain issue;
- you determine that you want a higher level of performance and define what that is;
- you put measures in place that are aimed at reaching that performance goal;
- after a reasonable implementation period, you reassess your performance on that issue; and
- if there is a performance improvement, then the process is validated;
- with the collected lore being that, through the use of this method, performance improvement occurs at a level of frequency and to an extent that there can be no doubt that the significant investment in time and money is worthwhile.

Reference is also made to a number of what some take to be indirect validations of this method. Due to the highly competitive higher education environment that exists in the

United States, U.S. institutions have become leaders in developing tools that are designed to measure student satisfaction, the most prevalent of these being The National Survey of Student Engagement (NSSE) and The Beginning College Survey of Student Engagement (BCSSE). The results of these instruments have consistently shown (i) on an external comparative basis, that student/graduate satisfaction levels are highest for those institutions that employ the self-assessment method, and (ii) on an internal comparative basis, that there is a significant increase in student satisfaction levels with an institution after these methods have been implemented.

For example, a recent report from the Documenting Effective Educational Practices² project examined the practices and policies at 20 four-year U.S. institutions that had better-than-average graduation rates and student engagement rates as measured by the National Survey of Student Engagement. The sample represented a wide variety of baccalaureate-granting institutions, including public, private, residential, commuter, research and liberal arts institutions. The DEEP investigators identified six qualities that these institutions had in common:

- a “living” mission and a “lived” educational philosophy;
- an unshakable focus on student learning;
- an environment adapted to enhance student education;
- clearly marked paths to success;
- an improvement-oriented ethos;
- shared responsibility for educational quality and student success.

It is also frequently noted that this same process is at the core of a large number of quality management systems that are common in other service provider, research and manufacturing environments. The names of these are quite familiar: Total Quality Management, Quality Circles, Theory Z Management, the PDSA Cycle, Service Quality Management, et cetera, and there is significant literature that measures and demonstrates its effect on quality in other operational contexts. The logic is that, if this process has been proven to work there, then there is no need to prove that it works here.

There are two salient elements in what has been presented up to this point. QA agencies commonly hold the following convictions:

²George D. Kuh, Jillian Kinzie, John H. Schuh, Elizabeth J. Whitt, *Student Success in College: Assessing the Conditions for Educational Effectiveness* (January 19, 2006).
See <http://www.sc.edu/fye/resources/assessment/essays/Kuh-1.19.06.html>

QA Agency Givens

- the setting of performance goals through a collective internal process is far superior to and more likely to be successful than the setting and imposition of performance goals by ownership and management, or externally by the government or other regulatory or quasi-regulatory bodies; and
- the most effective methodology to accomplish this is the six step self-evaluation process.

If this indeed is the situation, then it becomes obvious that the only way for QA agencies to have integrity in practicing what they preach is to rely on the self-assessment process as the key method for “*embedding QA into the life of an institution*”.

This process provides members of the institution with the perfect situation and conditions to measure the performance of their institution against stated outcomes, to identify and recommend new ones and to redefine old ones. Sometimes these outcomes can only be defined indefinitely with terms such as “adequate” or “appropriate”, and the collective wisdom of those involved in the review process must be trusted to make the judgement of appropriateness. In other areas, these outcomes can be given quantitative or tightly-conditioned qualitative performance benchmarks.

In either case, the QA agency should define its self-assessment standard in such a manner that in implementing this process institutions are encouraged or required to set very specific performance benchmarks or indicators wherever possible and meaningful, in terms both of acceptable and of exceptional performance. For example, an institution could set an exceptional satisfaction rate on student/graduate satisfaction surveys as being 95%; while 85% is acceptable. The same performance benchmarking could apply to numerous other activities from the more common “key performance indicators” such as:

- retention rate from year one to year two and through subsequent years;
- graduation rate for a full cohort;
- average GPA for a cohort;
- percentage of graduates accepted into programs of further study by other institutions;
- graduate placement rate;

- facility, equipment renewal schedule;
- annual library growth rate whether on site or electronically.

Indeed, for the purpose of quality control and enhancement, under the self-assessment theory the process of identifying and setting performance benchmarks wherever such are both possible and beneficial might well be as important as that of assessing whether and how an institution has met these self-defined goals.

Each institution is unique in terms of its people, programs and mission, and, therefore, each institution will need to determine which questions or sets of questions will be most informative and beneficial to its self-assessment process. Behind this flexibility, however, there are a couple of sets of fundamental questions that QA agencies could encourage institutions to ask of themselves during the self-assessment process and could ask directly of the institutions during the agency assessment process. For example:

Set 1: Process

- Have benchmarks been established in setting performance standards in this area? If so:
 - What are the benchmarks?
 - Why were these areas/items selected for benchmarking?
 - Who set the benchmarks?
 - What was the process (i.e., who was consulted)?
 - Is the benchmark still appropriate?

Set 2: Internal Performance

- What is the standard of performance in area X that we expect to be achieved?
- How do we know that the expected performance standard has been met?

Set 3: Comparative Performance

- How does our performance in this area compare to that of other institutions?
- Does that performance and does that comparison validate the statements that our institution makes with regard to the quality of the educational experience that it provides?




An actual example of this process should be of benefit. In 2006, John Lauwerys, Secretary & Registrar, University of Southampton, gave a presentation entitled *Case Study – the use of Board Level KPIs* at the Committee of University Chairmen and Leadership Foundation for HE Conference on Key Performance Indicators in Measuring Institutional Performance.³

I have reproduced three of his slides that show how Southampton sets and measures its internal performance benchmarks. The terminology is familiar: key performance indicators, critical success factors, strategic aims, objectives.

The first chart shows the strategic aim of being among the top 10 universities in the UK. To accomplish this, it set the objectives of being in the top 10 in total research income and for enterprise activities. It set its performance indicators, determined its status and monitored how the situation has changed.

³ Case Study – the use of Board Level KPIs, John Lauwerys, Secretary & Registrar, University of Southampton

Example of KPI based on Strategic Aims

Version 2 December 2005	 Green Amber Red	Objective met or likely to be met Likely that objective will not be met Highly likely that objective will not be met		1 2 3	Very good progress being made expected Good progress being made expected Little or no progress being made																									
Strategic Aim	Objective (Lead responsibility)	Performance Indicator	Status Change	Progress Change	Comments																									
1. Positioned amongst the top 10 universities in the UK	1.1 Top 10 position for total research income (external research grants & contracts and HEFCE funding). <i>(DVC Nelson)</i>	Maintain or improve position		2.2	8 th (Provisional) for total research income in 2004-05 <table border="1"> <thead> <tr> <th>Year</th> <th>External (£M)</th> <th>HEFCE (£M)</th> <th>Total (£M)</th> <th>Position</th> </tr> </thead> <tbody> <tr> <td>2001-02</td> <td>70</td> <td>25</td> <td>95</td> <td>10th</td> </tr> <tr> <td>2002-03</td> <td>71</td> <td>31</td> <td>102</td> <td>9th</td> </tr> <tr> <td>2003-04</td> <td>76</td> <td>35</td> <td>111</td> <td>8th</td> </tr> <tr> <td>2004-05</td> <td>77</td> <td>36</td> <td>113</td> <td>8th **</td> </tr> </tbody> </table> <p>** provisional Highest "£ per grant" (£640k) earner for EPSRC funding in UK.</p>	Year	External (£M)	HEFCE (£M)	Total (£M)	Position	2001-02	70	25	95	10 th	2002-03	71	31	102	9 th	2003-04	76	35	111	8 th	2004-05	77	36	113	8 th **
Year	External (£M)	HEFCE (£M)	Total (£M)	Position																										
2001-02	70	25	95	10 th																										
2002-03	71	31	102	9 th																										
2003-04	76	35	111	8 th																										
2004-05	77	36	113	8 th **																										
	1.2 Top 10 position for enterprise activities. <i>(DVC Nelson)</i>	Maintain or improve position		2.2	IP2IPO ranks Southampton 1st for enterprise among European universities (quality of companies, opportunities and the entrepreneurial culture created). 14 spin-outs since 2000 including two very successful flotations (OHM and Synairgen) on AIM in 2004; Southampton Photonics floated in October 2005.																									
	1.3 etc.																													

One of its critical success factors was to maintain its position as a premier research institution. Southampton assigns the lead responsibility and the assisting team responsible for this factor, it links it to its overall strategic aims, and it sets out the measures that will be used to determine whether this factor has been met.



CSF 3 - Maintain our premier position as a research intensive University 

Lead responsibility: DVC Nelson

Involves: Associate Deans Research, Heads of School, Research Support Office, Planning Office

Comments: Currently 8th in the UK in respect of total research income, the University needs to perform well in RAE 2008 to maintain its reputation and position itself for the changes that result from the move to a metrics based approach for funding. Whilst the University's share of QR income (based on RAE 2001) has increased year-on-year, our share of external research income has fallen from 3.5% to 3.3% representing a shortfall of about £5 million. Research income per academic is static at £55k. Preparations are well in hand for RAE2008 and the University plans to submit over 1000 academic staff.

Strategic Aims: 1,2,3,9

Measures: Research income; articles published in key journals; preparations for and performance in RAE 2008.

This next slide shows specifically how it has met the measures of articles published in journals and research income.

Example of metrics used in CSF

CSF3

Maintain our premier position as a research intensive University

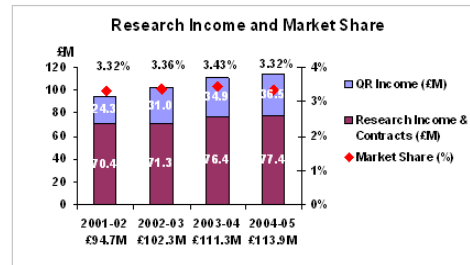
3.1 Publications in Key Journals

2002	2003	2004	2005	2006
18	22	21	21	13 (to July)

Source: University Library - number of articles published annually in *Nature*, *Science* and *Lancet*

3.2 Research Income

		2001-02	2002-03	2003-04	2004-05
Southampton	Research Councils & Contracts (£M)	70.4	71.3	76.4	77.4
	QR income (£M)	24.3	31.0	34.9	36.5
	Total Research Income (£M)	94.7	102.3	111.3	113.9
Sector	Research Councils & Contracts (£M)	1987	2110	2211	2347
	QR income (£M)	862	938	1038	1079
	Total Research Income (£M)	2849	3048	3249	3426
Market Share	Research Councils & Contracts	3.54%	3.38%	3.45%	3.30%
	QR income	2.81%	3.30%	3.36%	3.38%
	Total Research Income (%)	3.32%	3.35%	3.42%	3.32%



Source: HESA. Sector data are for England only due to different funding regimes in other parts of the UK. QR (Quality Related) research income is based on performance in RAE2001.

What is to be noted here is that these slides, which describe only one factor in Southampton's internal QA processes, address all three of the sets of generic questions that were described earlier. Southampton knew the standard of performance that it wanted and how it would measure its performance; it had a defined process for setting its benchmarks and determined whether these remained appropriate; and it defined its benchmarks in comparison to that of other institutions.

In summation, in addressing the "How can ...?" questions that accompany this sub-theme, the author's advice is that QA agencies follow the two principles that have come to dominate quality assessment theory and practice:

- the setting of performance goals through a collective internal process is far superior to and more likely to be successful than the setting and imposition of performance goals by ownership and management, or externally by the government or other regulatory or quasi-regulatory bodies; and
- the most effective methodology to accomplish this is the self-evaluation process.

In doing so, QA agencies are urged to define their self-assessment standard in a way that requires the institution to set and measure its own key performance indicators, and without being overly prescriptive, the QA agency can also strongly urge, or perhaps require, that a set of specific factors which it considers to be highly important, receive special attention in this process. Usually this standard will contain general statements that are set out as benchmarks and the institution is given wide latitude in implementing these:

Example of Generic Benchmarks often found in a “Self-Study” Standard

The applicant has a formal, institutionally approved policy and procedure for the periodic review of programs embodying the following characteristics:

- assessment of the continuing relevance of the program to the field of practice it serves, including evidence of revisions made to adapt to changes in the field of practice;
- assessment of the continuing appropriateness of the program’s structure, method of delivery, and curriculum for its educational goals and standards;
- indicators of faculty performance, including the quality of teaching and supervision and demonstrable currency in the field of specialization;
- etc.

The suggestion of this presentation is that the QA agency should consider adding to its general self-study or self-assessment standard specific statements that require an institution to set performance benchmarks **WITHOUT** defining what the minimal performance/outcome indicators are for the institution.

It is not the intention of this paper to itemize what these statements are or ought to be. This is the duty of each agency depending upon the cultural and political context in which it operates and of each institution depending upon its mission and what is deemed to be critical by its administrators, faculty and students. A couple of general suggestions are, however, might be helpful.

The QA agency could add a single generic benchmark to its self-assessment standard that might read something like the following:

Example of a Defined Performance Setting Benchmark

- assessment of the institution's performance against institutionally agreed upon outcomes at the outstanding, average and minimally acceptable levels in the following areas:
 - *student performance* (e.g., retention and graduation rates; number of (inter)national scholarships/awards; hours of community service; acceptance of graduates for further study; percentage of student doctoral theses that are published; percentage receiving institutional scholarships; etc.);
 - *faculty performance* (e.g., student satisfaction rates; hours of community service; hours of faculty professional/instructional development; publications; registered patents; number of (inter)national awards: research contracts; etc.);
 - *institutional performance* (e.g., total amount of scholarship money available to students; facility, equipment renewal schedule; the institution's Collegiate Learning Assessment score⁴; annual library growth rate; the speed and accuracy with which specific services are delivered to faculty and to students)

If the QA agency prefers to be less directive, then it might simply require the institution to ensure that its self-study includes a list of the five (or more) key benchmarks in these same three areas of student, faculty and institutional performance (or more); to give a rationale for why these were selected; to identify the performance outcome that the institution set for itself to achieve with regard to each as a marker of success; to list the results actually achieved; and to define the key benchmarks and outcomes for its next assessment cycle.

Example of an Open Performance Setting Benchmark

Require the institution to ensure that its self-study includes:

- a list of the five (or more) key benchmarks in these same three areas of student, faculty and institutional performance (or others);
- to give a rationale for why these were selected;
- to identify the performance outcome that the institution set for itself to achieve with regard to each as a marker of success;
- to list the results actually achieved; and
- to define the key benchmarks and outcomes for its next assessment cycle.

⁴ The CLA focuses on the value added of colleges and universities by comparing what students know on an intra- and inter-institutional basis when they start college with what they know when they finish in the skills of critical thinking, analytic reasoning, problem solving, and written communication. It is fast becoming a vital performance indicator for U.S. colleges and universities.

Either of these types of benchmarks could also be applied to a QA agencies initial work with an institution in that they can be phrased in a manner that requires an institution to identify the key areas and set the intended performance outcomes as a part of the application process. The institution's actual performance then becomes an issue for consideration by the institution and the QA agency in the next accreditation round.

By including performance setting benchmarks in an agency's standards and processes, the QA agency is able to avoid taking on a role in which it will invariably fail – the role of defining performance so thoroughly and rigorously that it essentially becomes the party responsible for running the higher educational institution, and it can concentrate on performing the function for which it is most appropriately qualified and positioned – the role of setting an enlightened framework of standards and benchmarks that will act as a guide to fostering quality performance in higher education institutions.