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„Identifying Barriers in Promoting the European Standards and Guidelines for Quality Assurance at Institutional Level“

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Project "Identifying barriers in promoting European Standards and Guidelines for Quality Assurance at institutional level" (IBAR)

IBAR WP8: The National study (Quality and Governance)
The Netherlands

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1. Introduction

The Standard 1.1, 1.2 of the ESG we see that the role of governance is put forward to enhance the quality assurance processes in the institution. Specifically, 1.1 standard relates to the role of governance structures in institutional quality assurance 1.2 deals with governance structures' interventions in the programme quality assurance.

In looking at the implementation of Standards 1.1 and 1.2, institutional policies and practices related to governance of internal quality processes have been analysed. The report's aim is to highlight on the one hand barriers and on the other hand examples of good practice observed in the implementation of these standards in the selected Dutch higher education institutions.

The higher education system in the Netherlands consists of two sectors, the university sector (WO) and the sector of higher professional education (HBO, in Dutch *hogescholen*). Both the universities and the *hogescholen* have their own focus on education, as defined in the Higher Education and Research Act (WHW) of 1993: "The universities prepare students for independent scientific work in an academic or professional setting; *hogescholen* offer theoretical instruction and aim to develop the skills required for application in a particular profession. Practical experience is an important part of the training.

The university sector comprises 13 universities. They prepare students for independent scientific work in an academic or professional setting. There are nine universities which offer programmes in a wide range of disciplines and subject areas, three provide mainly technical and engineering programmes and one is specialised in agriculture. In addition the Open University provides programmes both on university and HBO degree-level.

The HBO sector consists of 48 *hogescholen*, internationally termed *'Universities of Applied Sciences'*. They provide programmes in the following sectors: economics, health, social-agogic areas, agriculture, education, engineering and arts. These programmes normally have a standard length of four years and students receive after completion the Bachelor degree. Programmes can be on a full-time and part-time basis.

The HBO-sector is the largest sector with over 380,000 students enrolled either full-time or part-time (respectively 80% and 20% of enrolments) in 2010. The total enrolment in universities is about 220,000 students.

In the following we present the findings of the four case studies (two universities A and C, and two HBO institutions B and D) on student assessment policies and practices. We conclude by identifying the key barriers to ESG implementation and good practices as found in our case studies. The main characteristics of Dutch cases were presented in WP 5. Within the institutions we have studied different faculties/schools – we chose

faculties/schools focusing on ‘hard’ sciences, such as chemistry or life sciences and on the ‘soft’ sciences, such as business and management.

2. Policy context

During the past 20 years, the state steering of the sector has changed as a result of ambitions of strengthening the institutional autonomy and the internal governance and management structures of higher education institutions. With respect to the governance of the HE sector, 1985 was turning point. In that year the White Paper “Higher Education: Autonomy and Quality” (Dutch abbreviation: *HOAK*) was released. It proposed a new steering philosophy for the HE sector with the government keeping a distance from the institutions and taking the sector level as the point of application for steering, instead of the institutional level. The HOAK philosophy was codified in the *Higher Education and Research Act* (Dutch abbreviation *WHW*), put into effect in 1993 (De Boer and Huisman 1999).

The 1993 Act codified the enhanced institutional autonomy and introduced the principle of self-regulation for universities. Since then, the policy framework for the Dutch universities revolves mostly around funding and quality assurance. The HOAK paper introduced *quality assurance* as a policy instrument in the steering philosophy. In exchange for more autonomy, the universities were expected to play an active role in the establishment of a new quality assurance system for teaching and research (De Boer et al. 2006). In disciplines with an explicit vocational character the world of work was to be represented. Quality assurance was based on self-evaluation reports prepared by the institutions and site visits were carried out by experts (peers) for each disciplinary area in a six year cycle. By all accords, the system is believed to function well although the recent changes in the Law have modified the role of some bodies in the governance of higher education institutions (see WP 6 for the role of examination boards). The acceptance of the system is also due to the fact that government does not translate the outcomes of the quality assessments into its budget allocations. It was agreed that the intermediary bodies representing the institutions (the *VSNU* for the research universities) play the coordinating role with respect to quality assessment. In essence, the higher education institutions themselves and their professionals were playing the leading role in quality assurance.

One of the most profound effects of the shift in governance has been the increased importance of the central institutional management. This level in the higher education system was traditionally weak in the Netherlands. In the *HOAK* white paper and related documents, the minister was very clear that institutional management had to be strengthened if universities were to be successful in a competitive world. Moreover, the drawing up of institution-wide strategic plans was legitimating a more active role of the central management. There is a legal obligation to develop a strategic plan for the university at least once every six years (national Act on higher education and scientific

research 1993 – art 2.2). This plan specifies the university's strategic objectives. The national Act stipulates that the plan must address activities aimed to improve the teaching quality.

The current university governance structures originate from 1990s. In 1997, the Dutch parliament passed a bill that marked the end of an era of participatory modes of internal governance in research universities. According to the new Act, 'Modernising University's Governance Structures' (*MUB*), executive leadership was strengthened, powers became more concentrated, and representative bodies where academics, non-academics and students held seats became advisory instead of decision-making bodies (De Boer et al. 2007).

The Act promulgated a significant shift in internal authority distribution; new bodies were created (Supervisory Board) and some old ones were – formally – abolished (disciplinary teaching and research units – *vakgroepen*). The powers of the executives – rectors and deans – were increased. The Supervisory Board (*Raad van Toezicht*) is made up of highly respected persons from outside the university. It is meant as a buffer between the government and the executives of the university and to enhance the university's role as a 'societal entrepreneur' (or 'public entrepreneur'). The Supervisory Board of public universities is accountable to the minister of education.

Since 1997, most powers regarding academic and non-academic affairs in research universities have been attributed to the executive positions at central and faculty level. The new governing bodies comprise a system where executive and legislative powers are concentrated. All members of the crucial governing bodies —the Supervisory Board, the central Executive Board *('College van Bestuur')*, and the dean (*'decaan')*— are appointed by the body located one level higher.

Since 1993 the major governance changes (as reflected in the WHW) are among other things related to the introduction of the Bachelor Master structure (in 2002), quality assurance (the establishment of the National Accreditation Council, NVAO), and the decentralization of human resources policy and the transfer of the economic ownership of university buildings to the institutions themselves.

As noted in the first Dutch case study project report (WP5) accreditation has been introduced in the Netherlands in 2003, as a consequence of the Dutch policy to make higher education more compatible with the developments in the Bologna Process. In a change to the WHW in 2002, accreditation of the new types of study programmes was introduced at the same time as the bachelor-master degree structure .

After the first round of programme accreditation for all Bachelor's and Master's programmes in state-funded and other higher education institutions in 2003-2010, it was decided to make the next round (from 2011 onwards) more efficient and more focused on the content, level and process of education. Both aims, starting from the efficiency gain, should be reached by giving higher education institutions the option to take an institutional audit, in which all institution-wide quality assurance aspects could be evaluated once and for all, so that in the programme evaluations, more attention can be given to content, level and process of education, without the 'bureaucracy'. This means that the external quality assurance procedures in Dutch higher education currently encompass:

- Optional institutional audit
- External evaluation of all study programmes
    - in a full version or
    - in a 'restricted' version if the institution successfully has completed an institutional audit;
- all newly-developed study programmes must obtain a quality license ('test of new study programme, abbreviated in Dutch to TNO) before they may award Associate, Bachelor or Master degrees.

In terms of quality assurance, the governance structures have been recently addressed in the Law on Higher Education. Following the latest changes in the Law (WHW art. 5a.13b) for an institutional audit of quality assurance, the Dutch-Flemish Accreditation Organisation (NVAO) checks the following elements in relation to the quality of an institution's study programmes (see first Dutch case study report WP5):

- vision on quality of education
- design and effectiveness of internal quality assurance,
- policy regarding personnel and facilities
- facilities for handicapped students

If the institutional audit is passed successfully, the programme evaluations can drop the quality assurance requirement.

Through the other criteria that the NVAO must consider, the Law defines the minimum of areas that higher education institutions must consider in their internal quality assurance, because they need to inform the NVAO about the state of play in these areas (WHW art. 5a.8, sub 2, a-e):

- intended final level of the study programme, with a view to international expectations,

- organisation and content of the study programme,
- final level reached by students and rigidity/solidity of the assessment and examination of students,
- quality and quantity of personnel, HRM policy,
- facilities for study, including counselling and facilities for disabled students.

If one of the criteria is judged unsatisfactory by the external reviewers, compensation may be found in other criteria so that accreditation is not immediately in danger. However, this does not apply to assessment and examinations: this must be judged to be at least satisfactory.

The new provisions of the Law have set forth some changes in the governance of quality at universities. In the following we address the most important changes in the four studied higher education institutions.

3. Methodology

The Dutch four case studies were carried out in December 2011-March 2012 to answer the questions of the WP 8. We studied the national legal documents (WHW 2010), the NVAO documents regarding the new Accreditation Framework, as well as the Codes of Good Governance of HBO institutions and universities. Further, we studied a range of institutional documents and reports, including strategic plans, institutional policies for quality assurance, governance and management rules, institutional quality frameworks for Bachelor and Master studies, faculty and school regulations on quality assurance. Various additional documents were collected, such as guidelines for teachers about internal quality assurance, the organograms of the organizations, assessment reports of studied programmes, self-evaluation reports of some faculties/schools, study guides for students, quality manuals for quality officers. Finally, a range of semi-structured interviews were carried out ranging from 30 to 70 minutes. We interviewed 50 individuals at four institutions in December 2011-March 2012, including: 8 middle and top managers responsible for quality, 8 policy advisors responsible for quality assurance at the central and faculty/school levels, 1 teacher training officer, 1 policy advisor for education and student affairs, 4 human resources policy officers, 3 education directors, 13 teachers and 12 students.

The interviews were recorded, summarized and analyzed. Further, the document content analysis was carried out.

4. Findings: governance and quality

1. What is the institutional context of governance?

Institution A

Following the MUB (1997) Act, the governance structures of university A consist of the University Supervisory Board, and the Executive Board. As stated in the university strategic document, the governance of university follows the Code of Good Governance of Universities (2007).

The Supervisory Board is the university's statutory supervisory body. The Executive Board requires the approval of the Supervisory Board for the Strategic Plan, the Annual Report and the Annual Accounts. The Supervisory Board members are all 'lay members' (Law on Higher Education). The university A has four members in its Supervisory Board. The governance regulation of the university is built on transparency and good governance.

The Executive Board is university A is the highest governing and administrative body. It consists of three persons, including the Rector Magnificus, all appointed by the Supervisory Board. These members have a 4-year office term – the same as for other positions such as the supervisory board. For these positions re-appointments are possible. Since the university is small in size, the Rector serves as a dean.

The Executive Board is responsible for the development of the strategic plan. The chairs contribute to the establishment of this plan by providing the information, views and opinions deemed necessary. The university A develops the plan every four years which is substantiated by yearly planning and budgetary procedures. The strategic plan of the university 2011-2014 stresses that quality of research and staff are of paramount importance for the institution.

The University Council is an elected advisory body representing all staff and students of the university A. Staff refers to both academic and non-academic staff. The academic staff members are elected from those members who are in the departments (science groups). The University Council has mainly advisory powers, although there are some additional authorities: it has to give its consent to the university's strategic plan, the multi-year budget plan and the university ordinances on governance.

The organisational structure of the departments (science groups) differs. Each chair group is focused on a specific domain and is responsible for teaching and research in a particular domain and coordinates the study programmes.

An important body responsible for teaching quality in the university A is the Education Institute. Formally it is responsible for the internal quality assurance. Programme directors who discuss with the Director of Education Institute are accountable to university top management for the quality of their programmes. The chair has a say in the concrete implementation of new quality related procedures, as well as a say in the formal decision-making procedure via the study programme committee. Students also have a say in the decision making procedure via the Student Council (for the structure see the folder in print).

The internal quality assurance takes place via the Education Institute on the basis of course evaluations (electronically administered among students after each course) and in discussion with study coordinators. The feedback is given to the teachers, to the programme directors, chairs of the groups and the study committees. The core process of the renewing of programmes and improvement is the ‘education change cycle”. The internal quality assurance system is adapted based on the data collected on the course level, program level and institutional level.

Institution B

In the last five years, there were no major governance reforms for Universities of Applied Sciences (de Weert & Boezerooy (2007). Curriculum reform was a fundamental change for institution B a few years ago as it introduced a new concept of learning and required coherence of all courses.

The institution B reported that the national context is pressuring regarding the need for quality assurance in higher education and the Ministry of Education is implementing a new performance oriented system, holding universities more responsible. These external pressures are reflected within the institution, but not with regard to governance changes. Institution B aligns its institutional governance to the ‘code of governance’ issued in 2006 by the Dutch Association of Universities of Applied Sciences. Institution B is structured as follows: as it comprised the merger of different universities of applied sciences, a foundation is set up to incorporate the two former institutions. The foundation has two management bodies: the Executive Board consists of 3 members and is responsible for managing the foundation and the two former institutions. The Executive Board is assisted by the Supervisory Board, consisting of 3-5 members and overseeing the governance of the foundation. Both former institutions have the similar governing structure: a Directorate responsible for policy preparation and implementation and the coordination of the institutions’ day-to-day affairs. The Directorate consists of one director and one member. At the central level of the institution, Central Representative Council is the key advisor to the management or gives consent on vital issues to the institution. It is a body consisting of staff and students who are elected from the whole institution.

The academies of institution B (equivalent of faculties at universities) are led by an Academy Directorate, formed from academy directors. The director is responsible for the education, organisation and quality care for the academy. Every academy, furthermore, has an Academy Representative Council consisting of 8-16 members, students and staff equally. The Council advises on proposals of the directorate in terms of policies, exam and course regulations, and budget.

Every academy is assisted by an Advisory Committee representing members from business and industry. This committee has an advisory role regarding developments in business and industry. It typically consists of 6-8 members. Another important body, especially after the Law on Higher Education revisions 2011 is an examination committee. Every academy has one as prescribed by Law (see WP 7).

The functioning of the institution is supplemented by central offices (i.e.: human resource office, ICT, Marketing & Communication, Educational affairs etc.) and facility offices. As a result of the mergers of the two institutions the internal structures responsibilities for decision-making are still adapted. In the future, it is anticipated to develop a way of guaranteeing the support of staff members and all involved stakeholders in major decisions.

Institution C

Following the MUB (1997) Act, the governance structures of University C consist of the University Supervisory Council, the Executive Board, and the faculty boards, which are strong managerial bodies at the university.

The Supervisory Board is the University's statutory supervisory body. The Executive Board requires the approval of the Supervisory Board for the Strategic Plan, the Annual Report and the Annual Accounts. The Executive Board informs the Supervisory Board of all major developments and events taking place at University C. The University C has 9 members in its Supervisory Board.

The Executive Board is University C is the highest governing and administrative body. It consists of three persons, including the Rector Magnificus, all appointed by the Supervisory Board after hearing the University Council. The Rector is appointed by the Supervisory Board, based on a nomination from the Executive Board. The University strategic plan is determined by the Executive Board. It needs consent of the University Council and needs to be approved by the Supervisory Board. The deans contribute to the establishment of this plan by providing the information, views and opinions deemed necessary. The University C develops the plan every six years which is substantiated by yearly planning and budgetary procedures.

The University Council is an elected advisory body representing all staff and students of University C. Staff refers to both academic and non-academic staff, which implies that academic staff does not have a majority in these representative body. The meeting

(minimum once per month) has mainly advisory powers, although there are some additional authorities: it has to give its consent to the university's strategic plan, the multi-year budget plan and the university ordinances on governance. In University C, the Joint Meeting takes places for certain strategic questions for the whole institution. This meeting is attended by two organization wide bodies: Central Student Council and Central Working Council (representing university academic and non-academic staff). The Joint meeting takes place on a monthly basis and discusses with the University Executive Board on certain topics which are important for students and staff. As it is with the function of University Councils, the Joint Meeting can give unsolicited advice.

The organisational structure of the faculties differs. Each faculty also consists of a number of departments and some of them have interdisciplinary research institutes. Each department coordinates the research and teaching programmes of a specific field of science. Academic staff are appointed at department level. Generally speaking the faculties are run by a dean. The deans are appointed by the university's Executive Board. The deans chair the faculty management team that is comprised of vice-deans, and a student member.

Among other things the dean is responsible for the management and organisation of teaching and research. S/he is obliged to cooperate in establishing the university's strategic plan and budget, for which s/he interacts on a regular base with the Executive Board. The dean is accountable to the Executive Board also in the matters of quality assurance.

Institution D

The Dutch Association of Universities of Applied Sciences issued in 2006 a code of governance. It intends to ensure good governance, and regulates and determines the involvement of stakeholders in education and research. Institution D aligns its institutional governance to this code.

Institution D has two management bodies: first, the Executive Board, which is responsible for policy preparation and implementation, as well as the coordination of the institutions' day-to-day affairs. It has a chairman who is officially appointed by Supervisory Board of institution D. The second management body is the Supervisory Board which oversees processes of policy formation of the Executive Board. The Executive Board has a chairman and 4 other members (from different public and private organisations). The two management bodies are supported by a Central Representative Council. It consists of 24 members, students and staff equally, and has an advisory function or needs to give consent.

The academies of institution D, are each led by a Management Team formed by the academy director and 1 or 2 managers, responsible for the education and organization. In addition, there is an Academy Representative Council, composed of equal number 6-10

members of students and staff. The Council is authorized to accept or reject proposed decisions from the management team with regard to policy documents, exam and course regulations, and budget.

Each academy has an Advisory Council which provides the management team with information about developments in business and industry. It has no prescribed composition or size and consists of business and industry representatives.

The Bachelor and Master quality framework states that every study programme has at least one advisory council (at academy level), one study programme committee, one Exam Committee and one Advisory Committee consisting of external stakeholders. This committee is consulted on a regular basis to obtain input from the professional field to develop the study programmes. In the study programme committee, students are represented by 50% and the other 50% include staff members and external professionals. For the role of the Exam Committee please read WP 7.

The functioning of the institution is supported by central administration (i.e.: quality office, international office, human resource office.) and facility offices. In addition, within every academy there is one responsible person for matters regarding quality. Institution D regularly publishes a strategic vision for a period of four years. This vision is produced in consultation with students, the private sector, the Supervisory Board and the Central Representative Council.

In the last five years, there were no major changes in governance structures of Universities of Applied Sciences (de Weert & Boezerooy (2007). Yet, external stakeholders stressed the need for quality in higher education and placed emphasis on assuring this. In the interviews the sharpened focus on the quality of assessments was mentioned and the changed role of the examination committee as a result of a case of fraud taking place earlier in the sector (see WP7).

2. **What are the main changes for institutional governance and quality in the national framework and how they affect the governance structures and processes within the institution**?

Institution A

The university A has long established structures and processes of internal quality assurance. As noted in previous work packages, they have Education Institute that takes care of the study change cycle. After the changes in the national legislation regarding higher education quality assurance and the National Accreditation Framework, some changes have been noted in the governance of quality within the institution. Most of interviewees noted that the importance of accreditation results has been more emphasized as the institution opted for the institutional audit option. Most of all, the role of the exam committees has been enhanced as most interviewees mentioned. Now their emphasis is not only on the exams across a whole programme, but also on the quality of the course examinations as observed by the quality officer. This implies that the assessment

procedures have to be more uniform through the whole institution as emphasized by one programme director.

Secondly, the role of internal quality assurance has been made more explicit. As noted by the interviewees, the education change cycle has been applied for many years and has institutionalized at the university. However, now it has become more visible and important. The idea is that on a yearly basis teachers, programme directors and chairs examine course evaluations, programme evaluations, external student satisfaction surveys and use them to inform the education change cycle. Study course coordinators have to be now explicit in the course guides about the learning objectives, the outline of the courses as well as the learning outcomes. This is evaluated as 'forcing staff to reflect on their education program and assessment' in a positive way.

After the improvements are suggested then it is up to the Educational Institute to determine if the changes are feasible given the financial resources available for a particular programme. As noted by one teacher: *Hobbyism 'how we do things' and 'we do things this way because we have done so in the past' is now being framed and structured. Insight is gained in what the learning objectives are and how these are achieved*. He evaluates this as a positive development as it stimulates discussions about the courses and makes the quality assurance more insightful.

In the view of one programme director, as a result of the national framework changes there will be more openness and awareness in formulation of learning outcomes and linking them to assessment through discussions with teachers.

But this does not have many implications for change of governance of the quality processes as emphasized by the interviewees. The design, rationale and the system of internal quality assurance and the budgeting process for the courses have not really changed. The study programme committees continue to be comprised of students and teachers.

Institution B

No major changes regarding governance structures took place. As a response to the new performance oriented system, the institution attempts to develop key performance indicators which are easier to quantify, like student's satisfaction and drop-out rates. In turn they shall be used for their own quality assurance system as well.

Institution C

The latest strategic plan for 2011-2015 shows that the university management takes serious note of the changes in the Law regarding the quality assurance as well as the new Accreditation framework. University C in 2010 created an Internal Quality Assurance working group to design an internal quality assurance system within the university. The system was tested in 2010-2011 based on the yearly quality improvement cycle based on the Plan Do Check Act (PDCA) list which is used to check the quality of education in all

faculties. On a yearly basis the faculties receive the evaluation based on the PDCA checklist and can benchmark their study quality. Student feedback forms the basis of the evaluation reports. In addition, faculties receive the National Student Survey (NSS) results so that they can point to the areas that ask for improvement. The PDCA list contains the quality goals to be reached by all faculties. It is meant to help faculties to provide the relevant information to feed into the PDCA cycle. In the faculties, the role of education and exam committees very important in ensuring the participation in this cyclical evaluation of study programme quality at the faculty level. The checklist becomes the basis for the study plan of each faculty

The new working group of Internal Quality Assurance continues its work in 2011/2012 since after the new national Accreditation Framework has been adopted the university C will undergo an institutional audit. Currently the 'trial' audit is taking place at the institution whereby the role of the new accreditation regime is already visible where the programme accreditation is linked with the institutional audit. The key points in the new accreditation brought to attention are the conditional accreditation and the increased attention and importance of the exam committees. These committees are supposed to be independent and have an important role to ensure the quality and policy of assessment.

The criteria developed by the NVAO are explicitly mentioned in the university C policy documents to enhance quality assurance. The working group on Internal Quality Assurance has produced an evaluation to what extent the current quality assurance processes and the quality of study programs meet these criteria. The implementation documentation is made available in the form of strategic plan and the internal documents. At the same time, there is not enough evidence for the transparency of the quality assurance cycle at the institutional level as yet as noted in the internal quality assurance policy document.

The new rules influence the internal quality assurance processes as noted by respondents in the faculties. The numbers of documents and paperwork have increased as noted by Directors of Studies. Monitoring has become a more centralized process. The management of the university expressed a view, however, of avoiding the bureaucracy of external governance and trying to identify the gaps for improvement of internal quality assurance processes.

As noted in the university documents, university C's yearly management meeting on quality in 2011 was as an signal for quality improvement. Since the improvements cannot be achieved quickly due to the yearly cycle of quality improvement, the focus has been on a number of agreed areas about study profiles of each faculty, the targets formulated by the faculties and the internal quality assurance system. The management meeting will also be the ground for setting the goals to be achieved for the quality improvement via the yearly quality assurance cycle and the six year cycle.

PDCA cycle, which was mentioned by quality officers in studied faculties, provides clear levels of accountability. The university management see PDCA as a tool for transparency in the system. The institution's top management noted that Faculty Joint Meetings and

the Central Joint Meeting should be in control of the quality assurance processes. In this context the formalization of procedures is important.

Although transparency is seen as a positive development in the faculties, there were concerns expressed in the faculties by the number of micro rules and control and management coming from the central level of the university which is not necessarily positive.

In this context a new Quality Handbook has been developed where the new internal quality procedures and the goals are described. The handbook also includes the guidelines for quality improvement of the programmes. The faculties have also their own quality guidelines for the study programmes.

The faculties have internal quality assurance officers who help with programme accreditation procedures as well as contribute with the data collection and monitoring for the respective deans. As one of the quality officers noted, the faculty administration has increased in numbers and the quality policy office has been strengthened.

Institution D

No major changes regarding governance structures took place. Still, pressures on assuring good quality of assessments are displayed within the institution. In addition, the Ministry of Educations intends to improve the quality of higher education staff and stresses the need for qualification of the teaching personal. Institution D intends to have its entire teaching staff equipped with a Master's degree by 2020 and sets a target for the percentage having a PhD title as well. These targets affect the recruitment strategies of institution D and the training of staff.

3. To what extent the decision-making culture in the institution is bottom-up or top-down?

Institution A

The decision-making culture based on the interview evidence and documentary analysis is top-down in the university A. The policy is 'centrally steered'. The guidelines produce by the Education Institute are implemented in the study programmes. Changes to study programmes are gradual and rare. As noted by the policy officer, teachers are not much consulted when something is changed in the quality procedures or policies: "*When something has changed, people are asked whether they are experiencing problems afterwards, and how it is affecting them. It's actually a searching and balancing act. People seem to be used to this method and show acceptance for it.*" So decision-making is taking place in the meetings between the education change cycle coordinator and the Education Institute to establish a particular procedure and general guidelines. When it comes to a new policy instigated change - it is also implemented top-down with the initiative coming from the university Executive Board.

At the same time, if a persistent problem needs to be solved at the course level, the responsibility for solving it lies within the study programme committee to solve it, which is an indication of a more bottom-up culture, since these committees are comprised of teachers as well as of students, thus their voice is heard. A programme director underscored that the role of the students is very important in these committees.

Institution B

The decision-making culture in the institution B with respect to quality assurance is considered to have elements of both top-down and bottom-up approaches. Student evaluations feeding into changes of the curriculum and modules, together with the HBO graduate monitor and staff monitor form the heart of input for bottom-up processes. Other areas require however top-down management, to assure that common standards and norms are reached. For instance the curriculum reform some years ago took largely a top down approach. Decisions regarding the finances and facilities are dealt with in a top-down manner. Still, directors have some autonomy when hiring new personnel.

The institutional quality policy of institution B has a quality circle, prescribing moments during the course of one year, where the central directorate talks to the academy directorate and the academy directorate to the study programme directors. This procedure allows for feedback opportunities at the different levels and is thus a bottom-up process. The quality cycle presupposes that at each level there is a responsible person for outcomes of the improvement cycle. The interviews revealed some dissatisfaction with the decision-making culture, as it is sometimes not enough transparent: '*we hardly hear anything back from our feedback*'.

Institution C

The internal quality procedures are developed at the central university level by the working group on Internal quality assurance. The PDCA cyclical evaluation is centralizing the process of quality assurance, where information is sought from all levels to inform the top level management about the state of the art of the quality of study programs and profiles. At the same time, the PDCA cycle allows the faculties to develop their own plan of action how to improve and develop their own goals, although within the limits of the overall strategic education vision of the university.

Officially the faculty boards are responsible for the quality of education, while the University Executive Board has more a supervisory function. The policy documents show that the Executive Board is trying to find an optimal solution in the governance of quality assurance. It sees its policies as not prescriptive but rather facilitator which will inspire faculty management to improve the quality of education.

The teaching research nexus is strong in the vision of the university education according to the university top managers. The university has also developed the university teaching vision thermometer – which has become an integral part of the quality assurance system and has been used in the work of the Internal Quality Assurance working group.

The interviews have revealed diverse opinions in terms of the decision-making culture of the university C. Respondents from the faculties were of the opinion that it is a mixed approach with the intensified top-down management. The content related matters are seen to be left largely to the study programme directors and course managers. Education committees are seen as an important bottom-up informant and possible change agent by one Faculty manager. The students and teachers were more of the opinion that internal quality assurance involves more top-down procedures which are increasing and more centrally determined. They were not satisfied with the increasing number of procedures and the demands they put on their daily work: "*the number of forms to be filled has increased"*. One officer from soft sciences faculty was of the opinion that there is a serious shift in culture of monitoring among the teachers*: "earlier professionalization was geared towards improvement, now it is more fear. Academics don't like it since the prolongation of the contracts depends on performance in teaching"*.

One of study directors in the hard sciences noted that they have a traditional consensus building culture which takes a lot of time. The hard sciences faculty officer noted that they would like to see more bottom-up initiatives. In case there are problems, the programme committee talks to the study director. One of the issues here which do not support bottom-up approaches is that teachers do not want to criticize one another as they see "*their courses as their 'kingdoms' so the change from outside is not easy."* The student representative from the same faculty was of similar opinion indicated that it is difficult to make changes if needed even for the programme committee due to teachers not willing to criticize each other.

Institution D

The decision-making culture in the institution is considered to be top-down, especially regarding certain standards/norms and also quality assurance. Quality assurance is considered as a matter of importance for the whole institution, and consequently dealt with in a top-down way. *"If we have an excellent course and a poor course, this is not acceptable. We cannot afford having different qualities, because we are Institution D"*. The academies are free to decide how to implement it, and it is evident that quality itself is a bottom-up process, as it is what happens in the classroom a major determinant for how quality is perceived.

The quality policy of institution D prescribes clear moments in the year cycle where the Executive Board talks to the academy directors, and the academy directors to the study programme directors. This procedure allows for feedback opportunities at the different levels and it thus a bottom-up process. The different academies drew this picture and confirmed that next to certain top-down decisions (i.e. quality norms) they have autonomy regarding other aspects (i.e. how to evaluate the curriculum). The teaching staff referred to the flat hierarchy within the academies and that feedback and suggestions for improvement were appreciated. Next to certain standards they emphasised to "*have lots of freedom to fill in the blanks*".

There are fundamental changes in the decision-making culture in institution D, not fully implemented though: the organization is turned into a bottom-up service organization. Doing so has been recommended by the academy directors to the Executive Board, in order to have more influence on major issues and also quality related issues (i.e.: one academy stressed that dealing with the Bachelor/Master standards is challenging and they desire possibilities to influence them). Final decision-making powers shall, however, remain within the Executive Board. The institution D intends to fully implement these changes by the beginning of the new study year in autumn 2012.

4. How does the institutional governance relate to quality assurance (ESG standard 1.1)?

Institution A

There is direct link between institutional governance and quality assurance through the study programme committees. They are comprised both of teachers and students and their role is to advice the study director on the quality of the programmes. They periodically discuss course evaluation, what are positive and negative aspects of the courses. If needed they take the necessary action. Since the university is rather small is size, the decision-making lines are short.

Another important governing structure is the examination committee. After the recent changes in the national regulation, its role has been enhanced. It directly relates to internal quality assurance as it compares the chair groups how the assess the theses. The check for coherence in assessment to ensure the quality of the assessment as noted by one senior teacher.

Further, the university has a separate unit, the Education Institute. Its director is responsible for the institutional policy on education and the improvement of teaching. The study programme directors are part of the Institute and they direct the study programme committees. In the case of accreditation, the Institute is responsible for informing all the relevant parties about the processes and directing them.

Further, the role of the study program director is also important in improving quality. After students have filled in the electronic course evaluation standard forms they go the respective director. Then he/she organizes a course evaluation discussion with some students (two or three students per study year). After this, a plan is drawn if and what action is necessary (this may both be to improve things but also to compliment a teacher). A report is made, that is discussed in the study programme committee and afterwards is approved. This gives a green light for the study programme director to pay the teacher a visit.

As students notice, however, regrettably the response from student evaluations is often low although it is taken very seriously. They also noted that it is up to the willingness of the study programme director how the course evaluations are used and what suggestions

for actions appear in the report. If the director of study does not take action, the procedure is less effective.

The interviewed students do think this procedure of course evaluations is effective. They have a signalling function with regard to teaching and in particular with regard to underperformance and the opportunity is taken to act upon this by making improvements. One of the students noted that it also depends on how teachers perceive the evaluation results. In her view, taking the criticism seriously is important as otherwise nothing will change and the similar criticism may be expected the next year as well. Sometimes programme committees compare course evaluations from different years.

Institution B

The ESG standard 1.1 is manifested within the institution B's governance. The ESG claim that the 'strategy, policy and procedures should have a formal status and be publicly available'. Within institution B quality assurance is an essential and facilitating element for institutional governance. A quality policy was set up in 2005 and is currently under revision. The policy might be available through the Intranet but is not available via the public website. The new policy will not entail major changes and focusses on the quality cycle leading to continuous improvement of quality. The quality cycle thereby covers three levels within the institution: the directorate, the study/academy level and the programme level. The interviews revealed that the cycle at the programme and academy level is closed and leading to improvements. At the institutional level the cycle does not work optimal yet.

The quality policy specifies the involvement and tasks of the three levels. The interviews illustrated that for instance lecturers have to write improvement plans after each module (based on the student evaluations), which are to be discussed with the directorate and the academy committee. From the interviews and document data it is clear that the quality policy of institution B formally links to the ESG 1.1.

The perception of the interviewees varied: some referred to quality assurance as an intrinsic part of governance. Others considered it as a burden, as lots of paper work is required in order to assure quality and improvement.

Institution C

The institutional governance directly relates to quality assurance as since 2010 the workgroup for Internal Quality Assurance has indicated. The interviews with the university management and quality officers revealed that institution C has taken quality assurance seriously since years although it has been more a decentralized process in a big institution. Moreover, they have had a university teaching centerr which is supporting the quality assurance procedures centrally. Since 2011 the institution C has introduced the yearly PDCA cycle for all quality related processes in the institution at all levels. Although it takes time to close the cycle in some of the faculties, overall, the governance

structures have been adapted in terms of making sure quality officers are appointed in the faculties and are facilitating the processes of quality improvement. Quality policy officers in different faculties report to the central level and various quality manuals are made available to students and staff. The check and act list has been used by the faculties, especially by the faculty management boards and the Directors of education, who are responsible for the programmes to inform the top management about the actual situation of study programme quality. The institution management subscribes to the six year quality cycle where at least two times per six years a thorough picture of the study quality is drawn at the institutional level. The key aim is to make sure that the accreditation panel would see the institution as accreditation worthy.

The processes are institutionalized to a different extent in different faculties, although the awareness of the processes is increasing as indicated by interviewed teachers. Overall, the number of actors are involved in assuring quality in the university C: staff representative board, study coordinators in the faculties, evaluation/study committees, heads of departments, teachers, students, alumni/employers and the university teaching center (which provides teacher training and processes student evaluations at the central level). Formally, the ESG 1.1 standard is met.

Institution D

The ESG standard 1.1, is well manifested within institution D's institutional governance. To illustrate, the data collection revealed a strong awareness of quality assurance and an incorporation of it, in all processes within the institution:

- *"the most important change is, that the quality system is part of our own strategy"*.
- *"Our quality framework is more intensive than the NVAO system […] we expect more from our Bachelor and Master courses, than the NVAO does"*.
- Even stronger, *"it serves as a basis and framework for all other processes"*.

A distinct PDCA cycle is introduced for all processes within the institution. It is meant to lead towards a continuous improvement. The different schools and offices visited for this case study, all referred to the incorporation of this cycle. Institution D intends to have a strategy which is client/service-oriented, as clients are decisive for quality. Thereby, the role of students and other stakeholders (alumni, working-field, staff) is valued and their perspective is obtained through different evaluation instruments.

A couple of drawbacks of the quality system were mentioned in the interviews. Challenges with the continuous improvement cycle were identified: *"the cycle does not allow to stand still, look back on how it is going – is it the right moment, what do the students say, what do they think – is there something that needs to be changed"*.

Another teacher mentioned that they have difficulties to close the quality circle: "*we do a lot of work in quality and evaluations, but to the teachers and the students it feels that it*

is not closed. We always try to do better, but the feeling of the students is that the circle is not closed".

This connects to another danger expressed several times: "*We have to be careful that our quality system is not too abstract, that you can describe a lot and make it sound nicer. A quality system must be very specific, where you can see how you perform"*. Consequently, care is needed that continuous improvement is reached, rather than window dressing: "*it might be that the procedures are alright, but in practice it is not"*. Although the ESG 1.1 are formally incorporated within institution D's governance of quality assurance and also the staff members indicate that quality assurance is becoming more a routine and intrinsic, the dangers expressed to the quality process should not be underestimated.

5. To what extent this relationship affects the quality culture of your institution?

Institution A

The connection between the governance structures, processes and quality contribute towards the quality culture of the institution A. It has been observed from the interviews that the quality improvement of the courses is taken seriously at different levels and that the institution has institutionalized these processes via the checks and balances in the system of internal quality assurance: the programme directors, the study programme committees, the Education Institute and the yearly course improvement procedure.

In the view of most interviewees quality assurance has developed into a tradition. Students evaluate their courses and their feedback is taken seriously and is institutionalized. The teaching staff appraisal takes teaching performance into account while evaluating teachers. Good performance in teaching is rewarded based on a bonus system.

Institution B

The data collection revealed that quality assurance is an essential and facilitating element in institution B's governance. The quality cycle places emphasis on the periodic reviews of modules, as specified in ESG 1.2 and 1.5. An internal and external auditing system checks on this as well.

Institution C

At the top management level the views were expressed that the culture of quality improvement is of outmost importance for the study programmes and for the whole institution. The introduction of the more thorough centrally managed PDCA cycle and development of a range of tools to facilitate the process by the working group for Internal Quality Assurance shows that quality is taken seriously by the university management.

Moreover, opting for the institutional audit during the next accreditation round points again to the direction of willingness to take stock of the quality of education and to deliver on the university's educational vision.

When looking at the concrete processes and indicators, it becomes clear that the quality of teaching is taken seriously. Starting teachers are required to undertake teacher training qualification. The university rules state that the courses cannot be evaluated lower than 3.5 on the 5 point scale. In case the teacher performance is lower, there are serious repercussions as noted both by managers as well as teachers themselves in different faculties. Those include not prolonging the employment contract for the temporary academic staff, or changing the subjects taught. At the same time, students from the hard sciences have noted that course evaluation results should be made more transparent to students with information on improvements made. They also noted that it is difficult to make changes if the teacher does not want to change the course in case the course evaluations persisted to be low. Here the programme committee cannot do more than discuss with the teacher in the view of interviewed student representative from that committee.

Institution D

Answered in No. 4.

6. **To what extent does institutional governance take into account quality assurance of study programmes in particular with respect to**:

a) Development and publication of learning outcomes (ESG standard 1.2)?

Institution A

The learning outcomes of the courses are published in the study guide and teachers are obliged to develop them. The study manual provides guidance how to develop learning outcomes. Currently when teachers are developing the exam questions they have to use the matrix where they have to check the questions against the learning outcomes. As noted by teachers this *new procedure takes additional work, but it also makes you conscious of the mismatches*. This is part of the new institutional assessment policy that the learning outcomes should not only be generally described but also specified by the level of knowledge attained.

Institution B

The educational concept of the institution B is based on competence-based learning and measures learning outcomes in form of competences. Within the course of their study students need to acquire certain core competences, developed in accordance to the labour market needs. The student interviewed stressed that the competences are always very clear and present in the 'daily study life'. The lecturers underlined that the core

competences pose the framework in which to operate. The interviews indicated that core competences are not changed frequently: *"maybe once in six years, if the labour market thinks it is really necessary"*.

Institution C

The rules such as the exam regulations foresee that the programmes should have learning outcomes. This is also foreseen in the national regulation. However, the learning outcomes are seen more as an instrument for the management, or something that just needs to be there as required by the management. As one quality officer noted: *'we have them for decades. Learning outcomes are more for managers than for teachers'*. In his view, new teachers need to be informed about learning outcomes although it is *'knowledge that is important, not learning outcomes'*. At the same time, in the opinion of teacher trainer, the experienced teachers do improve the learning outcomes of their courses and think about the course design.

Institution D

The development and publication of learning outcomes are an integral part of every study programme (compare with WP7). The learning outcomes, manifested in core competences are not available for externals, but limited to students and staff members of institution D, according to the quality framework for Bachelor and Master courses. The framework assigns staff members, students, alumni and practitioners responsibility for the development, realization, evaluation and improvement of study programmes. Especially the graduation projects are inspected, to see whether the anticipated learning outcomes are reached. Alumni and graduating students are surveyed whether they possess the competences needed for the labour market. In addition, the practitioners are consulted whether the students indeed possess the right skills. Their role is also important in defining the final project topics, skills to be acquired, competences.

b) Curriculum and programme design content; modes of delivery and institutional profile (ESG standard 1.2)?

Institution A

It is the responsibility of the study programme how the curriculum is organised. The Education Institute is formally responsible for the study curriculum. The study programme committee makes a proposal for the changes in the curriculum and here the role of study programme director is important The professors have a say in the curriculum via the study programme committees.

In general, the curriculum is relatively fixed. There may be changes in who teaches the different courses, for example if there is a change in staff. If a curriculum has been decided upon, there is an obligation that these courses are being taught. There is not much freedom for teachers to start new courses and it takes long time to get a more permanent place in the programme curriculum.

Institution B

The curriculum and programme design and the modes of delivery are linked to the professional character of institution B. The programs mirror this professional character, in the form of trainings and work placements. Accommodating this professional character in the programme is considered an essential element of quality assurance. A couple of years ago, a curriculum reform took place, introducing a new concept of learning better matching the needs of the labour market and strengthening internationalisation. Designing the curriculum is in first instance the shared responsibility of the program director, the team leader, the major coordinator and the teachers. In addition, the working field commission is consulted.

Prior to the start of a course, the teachers meet and check the content in terms of consistency and adapt the course accordingly. Institution B has a clear set of rules and structures surrounding a program, as defined by the core competences tolerating some variation. The interviews revealed that for some teachers this framework is too limiting, not granting enough freedom to experiment whereas others claimed that it entails too much freedom for teachers to change it on their own. The different modes of delivery and supporting functions are already referred to in WP 6.

Institution C

The design of the programme content and modes of delivery is the matter of study directors in different faculties. The course content design is in the hands of course managers/coordinators in consultation with the study directors. The rules regarding modes of delivery and institutional profile are available in OER – the regulation of study programmes in each faculty which are updated on a yearly basis. An important role here is played by the programme committees which advice study director on the quality of the programmes. At the same time –rules slightly differ per different department. For example, in a soft sciences faculty, it is the programme committee and the examination committee that determines the content and discus the modes of delivery, thus the core curriculum is prescribed.

Institution D

The quality framework states that the professional character of institution D, should also be displayed in the competences to be acquired and in the construction of the study programmes. Thereby, internships and practical research can be mentioned.

c) *Availability of appropriate learning resources and student support (ESG standards 1.2 and 1.5)?*

Institution A

The availability and capacity of learning resources and student support is taken into account on a yearly basis as part of the education improvement cycle. The budgeting model checks how many changes need to be carried out in each programme and if this is affordable for the institution. The budgeting model forecasts the capacity of the study programmes to 'buy' particular changes in the courses. It is done through a simulation of the demand.

Institution B

Institution B has incorporated student support structures in its institutional governance as contributing to quality of studies. For this purpose the educational office, study and career counselling can be mentioned. In the form of a digital portfolio students can record the competences developed, and demonstrate this later on. Learning resources are made available in form of for instance the library. The availability of resources, services and the satisfaction of the students with them is now incorporated in the student evaluation, as indicated in the interviews.

Institution C

The students have indicated they appreciate the location of the university C and the fact that it is rather concentrated in one area. At the same time, space is an issue. The teacher trainer noted that shortage of rooms has been observed. The increased student numbers have strained some faculties. The university started to renovate and build new buildings. There is a wish to encourage students to work more at home, the student information portal is used to facilitate the spread of information among students. But at the same time – face-to-face interaction is still the dominant form of lecturing.

A range of services are available for students to enhance their study and practical training experiences. The student affairs office, the career counseling service and the international office should be mentioned in this respect. Student information is provided via the student portal, which had some problems at its recent launch. However, as witnessed by interviewed students, it is helpful and is functioning properly at the moment.

Institution D

The quality framework draws attention to the fact that study programmes should enable students to follow individual study routes and obtain the relevant core competences.

Students shall get supervision during their study period, and the study programmes have adopted measures for study supervision and study career counselling. Another distinct feature is, that every study programme offers at least 20 contact hours per week, within the first two years of study (for full time study – for other modes of delivery, the ratio is applied likewise). The quality framework states that each programme offered, possesses the necessary equipment for students to follow this course and assures that they are also accessible from learning places outside of the school.

During the interviews the students confirmed that they possess the appropriate resources to follow their programme in the best way possible. A remark was made to the decreasing supervision in latter part of the study: "*During the 3rd and 4th year there is not much supervision from Institution D. This could be improved, as it is sometimes difficult to see what to do next*".

A self-evaluation is conducted for every programme regarding the implementation of the Bachelor and Master statutes. This self-evaluation is sent to the NVAO.

d) Periodic reviews of programmes including feedback from employers and alumni (ESG standard 1.2)?

Institution A

The rules regarding the structure of the study programmes are outlined in the university A regulations. The improvement and changes in the courses within the programmes take place on a yearly basis through yearly improvement cycle. Here the evaluation results of the students and the change plans prepared by the study programme directors come into play. Students do not see the results of the evaluations except for those involved in the study programme committees. In addition, all first year BA programmes are evaluated as a whole as well as the whole BA and MA studies are evaluated by recent graduates.

The study programmes have also advisory committees consisting of employers and alumni. Their role is important as they give advice once per year on the improvement of the programme curriculum and tell the programme committees what they expect from the graduates of a particular study programme. The interviewed study programme director noted that the advice from these committees is taken seriously as in his view it is considered important that students leave the university with those qualities that connect to the labour market.

Still, they are in the advisory role and do not have an official say on changes to be made in the programme. Until recently, not all the programmes had these committees. Due to the new accreditation requirements their importance is more emphasized and the study programme directors are expected to have such committees although they are not obliged. Another possibility to receive feedback from employers are internships. As noted by the interviewed study programme director for some internships it is important to be able to send students who can live up to certain high expectations. In his view it is important to keep relations good with the companies / organisations that take students for an internship.

Institution B

The programmes at Institution B are regularly reviewed. Thereby the view of different stakeholders is taken into account.

First and foremost the student evaluations are used to review the content. Students provide evaluations four times a year (after every quarter). Based on the evaluations an improvement plan is written by the responsible module coordinator. The plan and the evaluations are discussed internally (with the programme committee; teachers; directorate) and then with the practitioners during the meetings (twice a year). Suggestions for improvement (i.e.: modification of the content) are sent to the examination committee for approval. The interviews and documents analysed mentioned that the input from the practitioners is essential:

> *"they are regarded as an extension of external governance […]. When introducing a new program the working field commission plays an important role when testing/validating the program and determining the direction of the programme. Thus, the working field commission provides an aspect of quality assurance in that regard".*

Suggestions for improvement can also come through the evaluations of external supervisors (those that guide students during the thesis placement).

Third, the feedback of graduate students is obtained by means of the HBO monitor. One academy stressed that they wish they had their own monitoring system, but contacting the Alumni is difficult. Institution B sees the value of Alumni surveys and intends to systematically perform them in the future.

Fourth, the teachers of institution B themselves can check to what extent changes need to be made regarding the curriculum.

Institution C

The programmes are regularly reviewed in the auspices of accreditation. Currently the institutional audit is being prepared, which entails wholesale application of the PDCA cycle. Some of programmes have obligatory advisory programme committees comprised from people external to university –local business and industry, former alumni. However, this is more of a formality rather than active input to improve the programmes, especially as noted in the soft sciences faculty. In the hard sciences, it was noted that despite the formal role of these committees, the teachers have extensive individual networks with industry and business and they are used for research and student traineeships. As teacher trainer has evaluated – it is a long way to go that periodic reviews of programmes would include feedback from employers and alumni.

Institution D

Institution D's standards for Bachelor and Master course underline the necessity for study programmes to have a system in place, able to deal with regular evaluations of students, staff, alumni and advisory committee representing business and industry (see report

WP9). Course modules are revised every year, whereby student evaluations and the national student survey in particular are used as the input for discussions.

Furthermore, the institutional strategy foresees that the regional, national and international contacts with the business world shall be strengthened. It also stipulate that every academy should consult with six essential players from the region about the programmes in 2012. The interviews revealed, that the periodical reviews are challenging because it proves difficult to access the business world as they have limited time (see report WP9). The academies tried several times to receive input from their alumni about reviewing a programme, yet the major obstacle was to reach them.

5. Conclusion: major findings and policy recommendations

There have been significant changes in the governance of universities/universities of applied sciences in the 1990s. Since then the new accreditation regime established in 2003 and then revised in 2011 has prompted more centralization of internal quality assurance processes. Traditionally, the faculties have been responsible for the study programmes, but now with the institutional audit, the central level of the university/university of applied sciences is gaining ground. The central administrative bodies, such as central quality assurance committees, groups, offices, or Education Institute as in the case of A have gained in importance in the past years. Although centralization is valued by the university managers, and it is accepted by the faculty managers and quality officers, it is not as a welcome development for academic staff. The top down processes are reported to increase the paper work and monitoring and standardization. Quite often the quality officers at the faculty/school level serve as ‘brokers’ between the academic staff and central quality monitoring unit. Thus we see that the four institutions have formal structures and procedures for internal quality assurance. However, not all of them are publicly available (e.g. case B). Thus ESG standard 1.1 is partially met. In regard to the ESG standards 1.2 and 1.5 we could see that the studied institutions have formal structures and processes in place to improve their education as the standards postulate.

The development and publication of learning outcomes are an integral part of every study programme in the four institutions. Again slight differences are noted as the extent to which learning outcomes are used for improving the assessment procedures. In terms of governance, the role of study programme committee is very important in this regards. Further, the university governance structures and processes provide learning resources to students and student support via various service departments or information systems. We can see that all institutions have periodic programme reviews institutionalized with the appropriate supporting structures and processes. It seems that the processes in institution A of programme review are mostly embedded in the system, it has become part of the institutional culture. The connection with employers seems to be more prominent in the HBO institutions, although the formal arrangements of their representation via programme advisory committees are similar. Overall, the governance of quality within

institutions seems to meet the standards 1.2 and 1.5. Lastly, we identified a number of barriers and good practices in the changes in governance of quality assurance.

a. Identification of barriers to governance changes to improve QA

- The standardized procedures of quality improvement cycle do not always leave room for bottom-up input and influence when it comes to defining what is on the PDCA list. The perceived top-down nature of the quality assurance system may be detrimental and foster window dressing rather than improvement. More ownership of the improvement process should be created at the faculty/academy levels and a healthy mix of top-down and bottom-up approaches should be fostered.
- The communication between the top and lower levels does not always work and the lower levels feel that they do not get feedback and the loop is not closing. Two institutions indicated this as a problem, especially at the shop floor level. The institutions thus should ensure that the PDCA cycle is a closed loop and that communication lines are open between all levels.
- Although transparency is seen as a positive development in the faculties, there were concerns expressed in the faculties about the increased number of micro rules and control and management coming from the central level of the university which is not necessarily positive.
- The teachers saw the link of the course evaluations and personnel policies as potentially dangerous to work morale, since then the internal quality assurance process is not for the sake of the course improvement, but for the prolongation of the contract or promotion. Thus fear and sense of 'punishment' come into the picture. This is not a welcome element in order to foster quality culture at the institution.
- The continuity of the improvement cycle was mentioned as a further drawback by the academic staff since then there is barely any time to stop and reflect on the past, and also to check for the right moments to make specific improvements. Temporality then comes into play.
- The transparency of evaluations and procedures still is a concern for managers and students despite the more formalized and standardized procedures.

d. Identification of examples of good practice

Examples of best practice at the national level

- The role of the Examination Board has been strengthened in higher education institutions by the Higher Education Act in September 2010, drawing attention to the validity, reliability, impartiality and comparability of student assessment procedures.
- The new Accreditation Framework has fostered institutional audits in the studied institutions.

Examples at the institutional level

- Overall, the policy of being conscious of measuring the intended learning outcomes and other program objectives in student assessment can be seen as good practice. This policy is enacted in different ways in the four institutions, but the common feature of centralized action linked to the accreditation and quality assurance procedures of the institutions seems to be a viable way to introduce this new policy if it is coupled with the bottom-up consultation processes.
- As part of the institutionalization of the internal quality assurance procedures, PDCA cycle provides clear lines of accountability and enhances transparency of programme development
- PDCA cycle enhances coherence and benchmarking of quality processes between different faculties. This is very useful especially in big institutions which traditionally have decentralized structures.

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